

# HAYSMED

## ORIENTATION MANUAL

Online Program Designed for:

- Physician Locum Tenens
- Students/Observations
- Volunteers/Volunteens
- Contract Services
- Non-Employee



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[www.haysmed.com](http://www.haysmed.com)

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## WELCOME

We hope you have a wonderful experience throughout your placement with our facility.

HaysMed is a private, not-for-profit, 207-bed hospital in Hays, Kansas. We operate and partner with Pawnee Valley Community Hospital in Larned, Kansas. HaysMed acts as the supporting hospital for 24-Critical Access Hospitals in the Northwest Kansas Health Alliance, collaborating on outreach services in more than 30 locations. HaysMed has more than 1,400 associates and 100 physicians. It is home to the DeBakey Heart Institute, Dreiling/Schmidt Cancer Institute, Hays Orthopedic Institute and Center for Health Improvement. HaysMed is NIAHO accredited by DNV Healthcare and ISO Certified, Level 3 Trauma Center, an accredited Chest Pain Center with PCI and Primary Stroke Center. The hospital also features state-of-the-art robotic surgery, dedicated breast care and wound-care management centers. HaysMed is rated A2 Stable by Moody's Investors Service, a bond credit rating business that analyzes financial performances of businesses.

## ROLES & RESPONSIBILITIES

### **HaysMed Responsibility**

It is our responsibility to provide an orientation process defining expectations and policies that are centered around positive patient outcomes from patient safety, quality care and top notch customer service to all.

*These individuals are not employed by HaysMed and are not eligible for workers' compensation or benefits otherwise available to Associates (employees) of HaysMed.*

### **HaysMed will:**

- Accept qualified individuals without discrimination of race, sex, creed, national origin or religion.
- Ensure the individual receives proper educational training to meet the objectives as outlined in the contractual agreement.
- Orient individual to mission, philosophy and general physical structure.
- Inform individual of facility protocols, policies and regulations in which they are expected to uphold and comply.
- Orient individual to patient rights, privacy and protected health information.
- Ensure individual receives proper education/training on environmental safety, infection prevention & control, ergonomics and corporate compliance program.

### **Individual will:**

- Adhere to general rules, policies and regulations of HaysMed.
- Work in collaboration with assigned department/area.
- Act professionally and refrain from making inappropriate comments or gestures toward employees, patients and family members.
- Abide by the corporate compliance and infection prevention/control policies.
- Respect patient's right to privacy and maintain confidentiality at all times.
- Report any suspicious circumstances or patient/quality concerns.
- Wear proper identification badge.
- Adhere to dress code and cell phone policies.

## **STANDARDS OF EXCELLENCE**

The purpose of the Standards of Excellence is to ensure that service excellence and high customer satisfaction is being promoted and implemented by all whom come into our facility and would have an impact to our patients and

customers. Our standards exemplify how we live our vision, mission and values at HaysMed.



***Our Vision: To be the best Tertiary Care Center in Rural America***

***Our Mission: To Help People Be Healthy***

***Our Values: Respect, Compassion, Spirituality, Professionalism, Excellence and Trustworthiness***

The standards of excellence include:

- 1) **Communication:** Practice active listening skills, be respectful of others and communicate professionally to those you come into contact with during your placement of our facility.
- 2) **Sense of Ownership:** Promote and participate in the vision, mission and values of HaysMed.
- 3) **Customer Service:** Provide prompt, courteous and personalized service.
- 4) **Commitment to culture:** Treat others with courtesy, respect and promote teamwork in a positive manner.
- 5) **Quality Improvement:** Participate in improvement projects and offer solutions to improve the patient experience.
- 6) **Compliance:** Promote safety for themselves, patients and other customers. Respect confidentiality and privacy for all.
- 7) **Accountability:** Engaged in work, meetings, learning process and tasks during placement at facility. Punctual in attendance and completes task on time.

## **PROFESSIONAL PRACTICE MODEL**

“Professional Practice Model” broadly defines the way health services are delivered. It outlines best practice care and services for a person or population group. This model supports our belief in the importance of superior patient care based on partnerships between nursing and other clinicians, patients, families and the community. By utilization of our Professional Practice Model we move toward our vision of “Being the Best Tertiary Care Center in Rural America.”

An interdisciplinary team is a group of healthcare professionals from every discipline that works together to help patients with physical, psychological, social, spiritual and financial support.



We strive to work together as a team to create an exceptional experience to positively impact our community. Our mission is to “Help People Be Healthy”. We strive to make a difference by supporting direct care initiatives and outcomes for clarity, good communication, care and dignity through our practices.

Our philosophy is to treat others with the same dignity and respect as you would like to be treated. We embrace our six values of respect, compassion, spirituality, professionalism, excellence and

trustworthiness these represent the blades of the windmill.

The pillars of operational excellence include:

- **Stewardship:** the efficiency and productivity of resources as stewards of service, operations and finance.
- **Teamwork:** Cohesiveness among co-workers that facilitates decision making and care coordination.
- **Quality:** Evidence based care, promoting staff development and improving processes through quality improvement projects.
- **Satisfaction:** We meet the needs and exceed the expectations of patients, families and colleagues to the best of our ability with compassion, respect and integrity.

## PATIENT RIGHTS & RESPONSIBILITIES

HaysMed outlines the rights afforded to each person who is a patient in our facilities. This *Patient Rights and Responsibilities document* discloses our commitment to an environment of trust – an environment where patients can feel comfortable and confident with the care they receive. You have the responsibility to help HaysMed carry out this commitment.

The *Patient's Rights Policy* has been adopted to promote quality care with satisfaction for the patient, the family, the physician, and the staff, regardless of race, color, religion, sex, age, national origin, physical or mental disability, veteran status and/or the ability to pay. Patient Rights and Responsibilities are available in English and in Spanish and part of our Admission process.

It is the individual's responsibility to locate the Patient Rights and Responsibilities and become familiar with them.

## CULTURAL DIVERSITY



Culture is the values, beliefs and practices shared by a group of people. We have an obligation to be respectful and sensitive to another's belief system (co-workers, patients, families). It is important to be culturally competent and comfortable with those we serve by examining our own personal biases and cultural values and understanding how they may inhibit effective communication.

**How to be culturally competent?** Ask yourself these questions:

- Who are my customers?
- How can I learn about them?
- What are my beliefs about this group?

**Acquire basic knowledge of the cultural values, beliefs and practices**

- Ask questions.
- Listen.
- Account for language issues.
- Be aware of communication styles.

- Be sensitive to personal health beliefs and practices.

## PROFESSIONAL IMAGE



Create and present a professional image that helps our patients, members and customers feel safe, confident and comfortable.

### **Personal Identification**

An identification badge must be worn in a visible location at all times while at the facility. Badges are to be free of pins, stickers or other material that may interfere with the visibility of the identification of the person wearing the badge.

### **Personal Appearance**

- Individual should adhere to HaysMed dress code policy and department specific requirements. Be sure to address dress code with assigned department.
- Individual is expected to practice personal hygiene such as being neatly groomed and free of body odor or strong perfume/ cologne as it may interfere with direct patient care.
- Hairstyles are to be conservative, clean and neat. Shoulder length or longer hair must be pulled back in patient care areas. Beards and mustaches are to be neatly trimmed.
- Fingernails are to be conservative, clean and safe. Individuals in patient care areas cannot wear artificial nails and wraps.
- No visible tattoos.
- Jewelry should be conservative and not create a safety hazard or interfere with one's work. No more than two earrings in each ear. No other visible body piercings are permitted.
- Clothing should be clean, neatly pressed and in good repair without holes, rips or tears. Unacceptable clothing includes: jeans, mini-skirts, baseball hats, spaghetti straps/backless outfits, t-shirts, sweat/yoga pants, clothing with advertising on them or tight/revealing clothing.

- Clean, supportive walking shoes. Only closed toe shoes are permitted in patient areas. Flip flops or anything similar between the toes is not permitted.

### **Electronic Devices**

- An individual's position may require that he/she carry a pager or cellular phone on duty, at home or both. In these cases, the individual is responsible for the safekeeping of the pager and cellular phone and if necessary, may be charged for its replacement or repair. In all cases, cell phone use will be restricted to HaysMed business only while on duty.
- Personal use of electronic devices and personal cell phone use is prohibited.
- Posting on social media sites while on duty is prohibited.
- Respect the ownership of proprietary software. Do not make unauthorized copies.
- You shall not download or store protected health information on the hard drive of any computer.
- You shall not transmit protected health information in electronic form (*e.g.*, via e-mail) unless such information has been properly encrypted.

Except as necessary to perform your specific job duties, you shall not discuss or disclose protected health information to any person or engage in conversations (in person, by telephone or electronically) concerning the fact that a person is or has been a patient of HaysMed or concerning any information relating to such patient (*e.g.*, symptoms, behavior, diagnosis, procedures or outcome) even if you do not identify such person by name or otherwise. Nor shall you post any such information on the internet (*e.g.*, discussion boards, Instagram, Snapchat, Facebook, Twitter and LinkedIn).



Treating individuals with mutual respect is one of our core values. A key component of this value is ensuring employees and non-employed staff are

treated in a manner in which each individual's unique talents and perspective are valued; and providing a work environment in which they feel safe.

### **What is Harassment?**

Harassment is unwelcome conduct that creates an intimidating, hostile or offensive work environment that unreasonably interferes with an individual's work performance or negatively affects tangible job benefits and is directed at an individual because of his/her age, disability, national origin, race, color, religion, gender, sexual orientation or veteran status.

### **What is Sexual Harassment?**

Sexual harassment is unwelcome conduct of a sexual nature when submission to or rejection of this conduct explicitly or implicitly affects an individual's employment, unreasonably interferes with an individual's work performance or creates an intimidating, hostile or offensive work environment.

This includes:

- Sexual advances.
- Requests for sexual favors.
- Other verbal or physical conduct of a sexual nature.

### **How to Report Harassment**

Contact the Human Resources Department. The Human Resources Department is responsible for conducting a prompt, thorough and confidential investigation. All investigations surrounding incidents of harassment will be conducted confidentially to the extent reasonably possible.

## **WORKPLACE VIOLENCE**

HaysMed has a number of measures in place to help keep employees, students and patients safe from workplace violence (e.g. emergency phones, reinforce visitation policy, etc.).

### **Everyone can assist by learning:**

- To recognize the warning signs.

- How to respond appropriately.
- What to do to prevent workplace violence.

### **Recognizing the Warning Signs**

Workplace violence and its warning signs can take many forms.

- **Emotional:** Paranoia, manic behavior, disorientation, excitability.
- **Physical:** Frequent change of posture, pacing, easily startled, clenching fist, aggressive behavior.
- **Verbal:** Claims of past violent acts, loud forceful speech, arguing, making unwanted sexual comments, swearing, threatening to hurt others, refusing to cooperate or obey policies.

### **Responding to Situations that could become Violent**

- Don't reject all demands outright.
- Don't make false statements of promise.
- Don't bargain, threaten, dare or criticize.
- Don't make threatening movements.
- Don't act impatient.
- Do ask security to stand-by.
- Do respect personal space.
- Do keep a relaxed but attentive posture.
- Do manage wait times.
- Do listen with care and concern.
- Do offer choices to provide a sense of control.
- Do avoid being alone.

### **Preventing Workplace Violence**

By simply avoiding situations that are potentially unsafe, you can decrease the occurrences.

#### **ALWAYS:**

- Walk to cars in groups or call security for an escort.
- Have car keys ready before leaving the building.
- Check around, under and inside the car.

- Secure belongings.

### **NEVER:**

- Go in deserted departments or dark hallways.
- Share personal information with strangers.

### **When prevention does not work, remember these important points**

- Remain calm.
- Secure personal safety.
- Call security and/or immediate supervisor so they can follow up.
- Cooperate fully with security and law enforcement.
- Inform security and law enforcement of restraining orders.

### **For Patient Care Areas**

- Set limits and boundaries.
- Limit the number of visitors and define visiting hours.
- Define staff space versus visitor space.
- Contact security if someone is becoming worrisome.
- When confrontation is necessary, kindly ask the offending person to “please come talk with me out here”—then step out of the room to a more public place.

### **Reporting Workplace Violence**

Report all workplace violence incidents no matter how insignificant they may seem. Contact department supervisor, risk manager, cooperate compliance officer, security or human resource department.

## **ENVIRONMENTAL SAFETY**



**Safety is everyone’s concern.** Call Security when you:

- See any criminal activity.
- See any suspicious circumstances.
- Need to access or turn in lost and found items.
- Need to report visitor accidents or needs.

- Need an escort or vehicle assistance.

## **Emergency Code Response**

It is your responsibility in an emergency situation to recognize the emergency and respond appropriately. Know the specific phone numbers/overhead page codes and be respectful to the responding team and assist as needed.

*The incident command center is located in the security office and could be relocated based on the particular situation.*

### **The emergency codes are as follows:**

#### **“Code 66”**

- Response plan for combative or physically threatening situation (without weapon) when it is evident that personal harm or damage to property may result.
- Dial 725# and announce Code 66.
- Remember to remain calm, try to talk to individual and move slowly toward an exit.

#### **“Code Silver”**

- Response plan for combative or threatening situation with a weapon.
- A weapon can be defined as any object that may be used to cause physical harm in a combative situation (i.e. firearm, knife, club, hot cup of coffee, chair, etc.)
- Dial 725# and announce Code Silver.
- **Remember that you either “evacuate” or “secure in place”.**
- **Please Remember Immediate Area of Danger.**
  - Do not attempt to disarm the suspect.
  - Whenever possible, remove patients from the area of danger.
  - Be constantly aware of the suspect's actions and location.
  - Update Communications Center & Security as needed.

#### **“Active Shooter” (Run Hide Fight)**

- An active shooter can occur anytime.

- **Remember to RUN, HIDE and if necessary, FIGHT.**
- **Please Remember Immediate Area of Danger.**
  - Do not attempt to disarm the suspect.
  - Whenever possible, remove patients from the area of danger.
  - Keep yourself safe.
  - Your job is to keep everyone away from the area.
  - Be constantly aware of the suspect's actions and location.
  - Update Communications Center & Security as needed.

### **“Code Red”**

Alarms, strobe lights and the overhead paging system are used to alert staff of a fire. The location of the fire will be announced using the overhead paging system. Follow the department fire response plan.

Remember four important steps (RACE) if you discover a fire.

- R- Rescue
- A- Alarm
- C- Contain
- E- Extinguish



When using a fire extinguisher remember the PASS acronym.

- P- Pull the pin
- A- Aim the nozzle
- S- Squeeze the handle
- S- Sweep at the base of the fire

### **Fire Prevention and Response**

Promoting fire safety and correcting fire hazards is everyone’s responsibility. Simple safety measures can help prevent fires.

- Properly store and dispose combustible materials.
- Comply with electrical equipment policy.
- Learn your department evacuation plan.
- Report any defective wiring.

- Maintain clear and unobstructed hallways, doorways and aisles.

### **“Intranet Alert”**

**Purpose:** To provide a quick and efficient method to communicate security or safety concerns to hospital associates not already addressed by an existing emergency code. The public address system is used to notify Associates that safety/security information has been posted on the hospital Intranet for their knowledge of the situation.

### **Examples where an Intranet Alert may be appropriate to use are:**

- A suspicious individual in the hospital.
- A bomb threat.
- Preparations for a partial or full evacuation or internal relocation.
- Situations where an essential utility is or may be interrupted.
- Security situations that may require building to be secured/ access restricted.
- Situations that the hospital does not want guests to hear overhead.
- Associates will find nearest computer and check posted message.

### **Additional Emergency Codes:**

**CODE GREEN:** Mass Casualty Incident

**CODE ADAM:** Wandering or Missing Person (Adult or Child)

**CODE ORANGE:** Hazardous Materials

**CODE PINK:** Abduction

**CODE BLUE:** Cardiac Emergency

**CODE BLACK:** Bomb Threat

**CODE WHITE:** Winter Storm

Weather conditions are monitored daily.

- **Tornado Watch:** means that the conditions are right for a tornado in our area.
- **Tornado Warning:** means that a tornado has been sighted in our area.
- **Tornado Warning Hays Area:** RADAR Shows Hays in Specific Path.

- **Tornado Emergency:** Tornado imminently approaching Hays with catastrophic damage.

Our facility is designed to contain a fire behind closed doors for a period of time to allow firefighting efforts to occur. Closed fire doors allow areas to remain functional. It is important not to block doors or prop doors open.

## TOBACCO-FREE

The use of tobacco products is not allowed. HaysMed is a smoke free campus.

## PARKING

Every individual must follow facility specific parking guidelines. These guidelines are in place to ensure enough parking is available for our patients and customers seeking services in our facility. Individuals that do not comply with the parking guidelines are subject to fines.

1. Parking permits and maps are available in the security office.
2. We ask individuals not to park in guest parking. These areas are reserved for our patients and visitors coming into our facility. Please park in Associate Parking as identified in Lot G, Lot H and Lot I.

### **Vehicle Unlocks and Assists**

Security will assist in unlocking your vehicle. You will be required to sign a Liability Release Form that releases any responsibilities of damage that may occur from the officer trying to unlock or jumpstart your vehicle.

## LOST & FOUND

All items that are found are turned into the security department and are logged. Call the security office for all lost and found inquiries.

## OCCUPATIONAL SAFETY



### **Hazardous Materials**

Know the materials within your work area that are considered to be hazardous. This information is located within the Safety Data Sheets (SDS). It is a document that lists every chemical used in the hospital and serves as a reference point to all chemicals that would be found in the facility. Instructions are stated below:

- Located on Hays Med Intranet site.
- Click on site and search for product. SDS will provide what the chemical is, location, supplier, dangers and safety precautions.
- If you are not provided intranet access during your stay, you may ask the department supervisor or staff member to look up the item for you and the information is available in print format.

### **“Sharps” protective devices**

Use protective devices at all times to prevent needle sticks.

### **“Sharps” disposal containers**

Immediately dispose of all sharp objects in the “sharps” disposal containers.

### **Personal Protective Equipment**

Wear personal protective equipment when there is potential for handling or coming in contact with bodily secretions or fluids. PPE should be located in areas where such exposures are likely to occur.

## INFECTION PREVENTION & CONTROL



The purpose of an infection prevention and control program is to prevent the transmission of infections within a health care facility. You can protect yourself and the patients by adhering to basic infection prevention and control principles. Standard precautions should be used routinely when caring for patients, regardless of their diagnosis.

## Standard Precautions

 Standard Precautions means the set of infection control practices used to prevent transmission of disease. It is used for every patient, regardless of diagnosis. The goal is to minimize the risk of exposure of blood or body fluids. To accomplish this, personal protective equipment (i.e. gloves, gowns, masks, and goggles) must be worn any time there is potential to come in contact with blood and/or body fluids.

### Infection Control Measures Include:

- **Hand Hygiene:** Wash your hands with soap and water or sanitize your hands with an alcohol-based hand rub before and after entering a patient room, donning and doffing gloves and before patient contact.
- **Gloves:** Wear gloves when it is reasonably anticipated that contact may occur with blood/body fluids, mucous membranes, non-intact skin, or potentially contaminated skin.
- **Gowns:** Wear a gown to protect skin and prevent soiling of clothing when in contact with blood, body fluids, secretions or excretions is anticipated.
- **Masks and goggles:** Use personal protective equipment to protect the eyes, nose and mouth during procedures that have potential to generate splashes or sprays of blood, body fluids, secretions and excretions.
- **Needles:** Activate safety devices after use and then discard in rigid sharps containers.
- **Patient Specimens:** Consider all specimens, including blood, as bio-hazardous.
- **Blood Spills:** Clean up with disposable materials (i.e., paper towels or spill kit), then clean and disinfect the area. Notify Housekeeping for thorough cleaning.

## **Droplet**

Droplet Precautions are used when a patient is known or suspected to be infected with a disease that is transmitted by respiratory droplets generated when a patient is coughing, sneezing or talking. Respiratory infections include influenza, RSV and meningitis.

### **Droplet Precautions include:**

- **Private Room:** Private room or rooms with a patient who has a similar diagnosis. Patient is confined to the room until directed by Infection Prevention and Control.
- **Mask:** Worn by all hospital personnel upon entering the room.
- **Hand Hygiene:** Wash or sanitize your hands upon entering patient room and when leaving the patient room.

## **Contact**

Contact isolation is used for patients with known or suspected infections or diseases that are at an increased risk of contact transmission. These include Clostridium difficile (**C-diff**), Methicillin-resistant Staphylococcus Aureus (**MRSA**) and Hepatitis A.

### **Contact Precautions include:**

- **Private room:** Private room or rooms with a patient who has a similar diagnosis. Patients who are incontinent of stool should be confined to the room.
- **Gloves:** All hospital personnel wear gloves when entering the room.
- **Gown:** To be worn if anticipating that clothing will have direct contact with the patient or potentially contaminated environmental surfaces or equipment in close proximity to the patient.
- **Hand Hygiene:** Wash or sanitize your hands upon entering patient room, and when leaving the patient room.

**NOTE:** When caring for a patient with C-diff, wash with soap and water.

**Airborne:**

Airborne precautions are used when the infection is spread through the air. Examples of diseases requiring airborne precautions are:

- TB (tuberculosis)
- Measles
- Chickenpox

**Airborne Precautions include:**

- Place patient in a private, negative pressure room. Keep door closed except to enter / exit.
- Wear an N-95 respirator mask, which requires an annual fit test, or a Powered Air Purifying Respirator (PAPR) when entering the room. Students will not be assigned these patients due to OSHA's medical evaluation and fit testing requirements for the use of respirators.
- Use proper hand hygiene. Wash or sanitize your hands upon entering patient room, removing gloves and when leaving the patient room.

**Other Infection Prevention and Control Concerns include:****Artificial Nail Policy**

For infection control purposes, employees in patient care areas, who handle food, medications, or laboratory specimens cannot wear artificial nails and/or nail wraps. These care providers should wear short, clean, natural nails (no more than a ¼ inch past the finger tip). Other healthcare workers are expected to keep their fingernails conservative and must be short to moderate length. Nails must be safe and clean for interacting with others.

**Sharp Containers**

All sharps should be placed in a designated sharps container after use. These containers are provided throughout the units. Containers should be changed when full (pay attention to the "fill line" on container).

**Waste**

Red bags are used for bio-hazardous waste and must be used if blood or other body fluids can be squeezed or crushed out of the container.

Yellow bags are used for hazardous drugs. Drugs are classified as hazardous if studies in animals or humans indicate that exposures to them have a potential for causing cancer, developmental or reproductive toxicity, cause harm to organs. Employees and students who have not been trained and authorized should not handle hazardous drugs or anything containing a hazardous drug due to the potential for surface contamination. If you see any hazardous drug waste (yellow bag) in an unsecured area, notify your supervisor and facility chemical safety officer immediately.

### **Linen**

All soiled linen is considered contaminated and should NOT be carried so that it touches the body or clothing of the person transporting it. Wet linen must be wrapped with dry linen or placed in a plastic bag before putting into linen bag to prevent seep-through. HaysMed linen bags are leak proof, no special handling of wet linens is necessary when using the appropriate linen bags.



Exposures are immediately reported to department supervisor and an **Exposure Report** is filled out through the Verge Incident Reporting system.

## RECOMMENDED VACCINES

Healthcare workers (HCWs) are at risk for exposure to serious, and sometimes deadly, diseases. If you work directly with patients or handle material that could spread infection, you should get appropriate vaccines to reduce the chance that you will get or spread vaccine-preventable diseases. Protect yourself, your patients and your family members; make sure you are up-to-date with recommended vaccines. HaysMed will ask for updated records during your placement within our facility.

We follow the Center for Disease Control and Prevention guidelines for recommended vaccines for healthcare workers.

# ERGONOMICS



Ergonomics focuses on creating a work environment in which a worker should not experience physical problems from that work. Examples of work design that may lead to physical stress include:

- Poor work-station layout.
- Improper work methods, such as poor posture.

Improper work design can cause repetitive force or movement of the body without an adequate rest period for tissues to recover. Over time, this may lead to damage of tendons, bones, nerves or muscles; typically in the hands, elbows, shoulders, neck and back. An example would be tendonitis progressing to carpal tunnel syndrome. Certain workers are more at risk for developing problems than others.

## **Examples include those who:**

- Perform repetitive tasks for a long period of time.
- Use forceful hand motion.
- Must stay in a fixed position for extended periods.
- Work in awkward positions.
- Use excessive bending or twisting motions of the wrist.
- Have continuous contact with the edge of a work surface.
- Experience temperature extremes.
- Use inappropriate hand tools.
- Have improper sitting position.

Symptoms that may appear include pain, swelling, numbness, tingling, restricted range of motion or weakness in the affected body part with varying degrees of severity. A work analysis should be performed to correct problems that may be causing or aggravating the condition.

## **Back Safety**

Your back is an original and the only one you get! It holds you up all day long and assists you with everyday activities like lifting, bending, reaching and standing.

Even the simplest activity, if done incorrectly, can strain your back and cause permanent injury. Every year many health care workers suffer back injuries. Some of these injuries lead to permanent loss of work. You can prevent injuries by following these simple safety guidelines.

### **Lifting/Reaching for Objects, Standing, Sitting**

- Keep your feet apart, with one foot next to the object being lifted and one foot slightly behind. This gives greater stability and upward thrust.
- Let your legs do the work, not your back! Keep your back straight and bend your knees, keeping your knees in line with your feet to get close to the object you are lifting.
- Use your entire hand when lifting. Your fingers alone have very little strength. Wrap your fingers around the object with firm pressure from your palm on the object.
- Bring the load in close to your body with your arms and elbows tucked close to your sides.
- Position your body so that your weight is distributed inside your feet. This gives you better lifting strength and better balance. Lift by using the strength of your legs and not your back.
- Never twist your body from side to side when lifting or transferring. This is a major cause of back injuries.
- Move your feet if you must change direction.
- Don't lift or carry objects above shoulder level.
- Do not bend your back when reaching. Decrease the distance between you and the object you are reaching for as much as possible. If you cannot keep your back straight, you are reaching too far. Reach with your arms and legs, not your back. If you cannot comfortably reach something, then use a ladder or stool.
- Standing properly is important for your back. Stand straight with your knees slightly bent, hips slightly flexed, your pelvis tilted forward. If you are standing for long periods, you can ease some of the back strain by putting one foot on a low stool or box.

- Sit straight in a chair that supports your lower back. Keep both feet on the floor and, if possible, keep your knees slightly below your hips. Avoid slouching in chairs as slouching increases back strain. Try to situate your workstation so that you are looking straight ahead with no twisting in your back.

## **Moving Patients**

HaysMed follows a minimal lift policy. The facility has invested in a safe patient handling system to ensure that all patient transfer/lifting is done safely and appropriately to protect Associates and patients from injury. Associates are required to use the safe patient handling devices as assessed for each patient during every transfer/lift to eliminate manual lifting as much as possible. Associates are to be 100% compliant with this policy. Associates are trained on the use of each safe patient handling device during orientation, annually, and as needed. Transfer Mobility Coaches are also utilized in multiple areas of the facility to promote utilization of appropriate transfer/lift techniques.

LOOK HERE

## **CORPORATE COMPLIANCE PROGRAM**

### **Joannah Applequist**

In-House Council & Corporate Compliance Officer

- Compliance Hotline (785) 623-6311
- Compliance Voice Mail (785) 623-6310
- Compliance Department Email:  
compliance@haysmed.com
- US Mail: P.O. Box 8100, Hays, KS 67601



The HaysMed Corporate Ethics and Compliance Program is comprised of policies, procedures and processes that put into practice the Board of Directors' commitment to conduct all operations in a manner consistent with all applicable legal requirements and the highest ethical standards. As part of this Program, the Board of Directors has adopted this Code of Conduct to provide standards by which Associates shall conduct themselves to protect and promote organization-

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wide integrity and enhance HaysMed's ability to achieve its mission. Every Associate is required to adhere to this Code of Conduct as a condition of his or her continued relationship with HaysMed (employment or otherwise). Various departments within HaysMed, including Administration and the Compliance Department, have developed policies and procedures implementing the principles and standards contained in this Code of Conduct and Associates are expected to be knowledgeable of and comply with those policies and procedures. To the extent that any policy or procedure is inconsistent with the principles and standards contained herein, that policy or procedure is superseded by this Code of Conduct. Those Associates who also are members of HaysMed's Medical Staff are obligated to adhere to the Medical Staff Bylaws and related policies and procedures, which have been reviewed and approved by the members of the Medical Staff and the Board of Directors. To the extent any provision of this Code of Conduct is inconsistent with the Medical Staff Bylaws and/or related policies and procedures; such provision is superseded by the relevant provisions of the Medical Staff Bylaws and/or related policies and procedures. The activities of the HaysMed, and of each Associate with regard to the HaysMed's affairs, are conducted in a complex world of laws and regulations. It is the responsibility of each Associate to ensure that his/her behavior complies with all applicable laws, regulations, this Code of Conduct and related policies and procedures. If an individual encounters a situation that is not clearly defined in this Code of Conduct, that individual should review the particular circumstances with his/her supervisor, the Compliance Officer or an appropriate member of HaysMed's management team. All Associates should review this Code of Conduct from time to time to make sure that these policies and procedures guide their actions on behalf of HaysMed. Nothing in this Code of Conduct is intended to nor shall be construed as providing any additional employment or contract rights to any Associate or other person.

Note: 1 "Associate" includes HaysMed directors, officers, employees, volunteers, students, trainees, independent contractors and others who perform work for HaysMed regardless of the location at which they work, whether or not they are compensated for such services.



## Compliance Responsibilities

Every Associate shall take an active role in preventing, detecting, and correcting any conduct or activity that potentially violates applicable laws and regulations, ethical standards or internal policies and procedures.

### **Learn**

First, every Associate shall participate fully in all educational programs concerning compliance-related issues. This includes active attendance at in-service and departmental meetings at which such issues are addressed; as well as thoughtful review of written materials made available to Associates.

### **Ask**

Second, an Associate who has a question concerning a compliance-related issue shall seek assistance from an appropriate member of HaysMed's management team. An Associate should pursue such inquiry until he or she receives an adequate response. An Associate who is asked a compliance-related question shall make sure the person posing the question receives an adequate response.

### **Report**

Third, an Associate who suspects inappropriate conduct shall report such activities to an appropriate member of HaysMed's management team. An Associate should make such report even if his or her supervisor has directed otherwise. An Associate to whom such a report is made shall be responsible for directing the matter to the appropriate person for investigation and resolution.

### **Cooperate**

Fourth, every Associate shall cooperate fully with any internal or external investigation concerning alleged non-compliance. An Associate shall actively participate in identifying, implementing and refining appropriate remedial measures to correct non-compliance and proactive strategies to prevent or detect any future non-compliance.

An Associate shall be evaluated for compliance with these obligations. Failure to perform these job responsibilities shall be a basis for discipline up to and including termination.

HaysMed shall not tolerate any form of retaliation against an Associate who, in good faith, raises questions concerning legal or ethical duties and/or reports any suspected incident of non-compliance, either internally or to any government entity. All such information reported by an Associate internally shall be kept confidential to the extent confidentiality is possible throughout any resulting investigation.

An Associate wishing to report anonymously to any of the listed telephone numbers must dial a “9” to access an outside line (if calling from any HaysMed-owned facility), then dial the number indicated above.

Any reports sent to the internet e-mail address will show the address of the transmitting computer. An Associate should not report a known or suspected violation by internet e-mail if complete anonymity is desired. HaysMed shall make reasonable efforts to protect the anonymity of the person making such a report.

## Principle 1- Patient Care and Treatment

HaysMed is committed to providing the highest quality patient care and protecting patient safety. Associates shall treat patients in a manner that preserves their dignity, autonomy, self-esteem, civil rights and involvement in their own care.

### **Standard 1.1 Quality of Care and Patient Safety**

HaysMed’s mission is to provide the best in compassionate care. A commitment to quality of care and patient safety is an obligation shared by all Associates. HaysMed shall strive for compliance with various standards relating to quality of care and patient safety; including the Medicare Conditions of Participation, the standards and surveys of DNV Healthcare, Inc., the consensus measures of the National Quality Forum, the Agency for Healthcare Research and Quality indicators and the initiatives of the Institute for Healthcare Improvement.

## **Standard 1.2 Medical Decision Making**

HaysMed shall use standard clinical criteria to determine whether to treat an individual with specific interventions. Clinical decisions, including tests, treatments and other interventions, shall be based on identified patient needs; and shall not, in any way, be based on the manner in which HaysMed compensates or shares financial risk with its leaders, managers, clinical staff or licensed practitioners. The medical necessity of all treatments and procedures recommended by Associates will be adequately documented in the patient record.

## **Standard 1.3 Patient Rights**

Upon admission, all HaysMed patients shall receive a copy of HaysMed's Statement of Patient Rights and Responsibilities. Associates shall respect patient rights in the performance of their job duties. Patients have the right to make informed decisions regarding their medical care and the right to refuse or accept treatment.

HaysMed shall provide care and treatment to patients without regard to the race, color, national origin, age (unless age is a factor necessary to normal operations or the achievement of any statutory objective), or disability of such person or any other classification prohibited by law. Associates shall respect each patient's cultural heritage and needs. HaysMed shall make available appropriate resources for its patients with limited English proficiency

Patients and their representatives shall be accorded appropriate confidentiality, privacy, security and protective services; opportunity for resolution of complaints, pastoral counseling and visitation rights. HaysMed shall maintain appropriate processes for prompt resolution of patient grievances.

No Associate shall solicit or encourage monetary tips, personal gratuities, or gifts from patients or their family members and are prohibited from accepting monetary tips or gratuities. An Associate may accept a personal gift of nominal value (less than \$25), but should share such gift with co-workers to the fullest extent possible. HaysMed expects its Associates to exercise good judgment and

discretion in accepting gifts. If a patient wishes to present a monetary gift, he/she should be referred to the Compliance Officer or the HaysMed Foundation.

#### **Standard 1.4 Patient Financial Assistance**

HaysMed shall maintain a written patient financial assistance policy which includes eligibility criteria, the basis for calculating amounts charged to patients and the method for applying for financial assistance. HaysMed shall employ measures to widely publicize the policy within its service area. HaysMed shall not engage in extraordinary collection actions against an individual until it has determined whether such individual is eligible under its financial assistance policy.

## **Principle 2- Compliance with Health Care Laws**

HaysMed shall conduct its operations in compliance with state and federal laws and regulations specific to health care providers. HaysMed shall cooperate with any government inquiry concerning its compliance with such rules.

The health care industry is one of the most highly regulated segments of the U.S. economy. While an Associate is not expected to have expert knowledge of all legal and regulatory requirements that may apply to their work, each Associate shall be sensitive to relevant legal issues. An Associate who is uncertain about how legal requirements apply in a particular situation shall seek guidance from an appropriate member of management.

The following standards summarize some of the important legal requirements applicable to health care providers and the impact of those requirements on HaysMed's operations. An Associate shall comply with all laws and regulations in the performance of his/her job duties, regardless of whether they are specifically addressed here.

#### **Standard 2.1- Submission of Claims to Federally Funded Health Care Programs**

There are multiple federal and state laws controlling how providers submit claims to government payors and are reimbursed for services provided to beneficiaries of government health care programs (e.g., Medicare, Medicaid, TriCare). It is

important that HaysMed and its Associates comply with these requirements. If they do not, then HaysMed may not receive reimbursement for services rendered to patients; or, if it receives reimbursement, it may be asked to repay the reimbursement with additional penalties assessed for not following the applicable requirements.

The federal False Claims Act ("FCA") prohibits the submission of false, fraudulent, or misleading claims for payment to any government entity including, but not limited to, the following: (1) claims for services not rendered; (2) claims which characterize the service differently than the service actually rendered; (3) claims for services that were not medically necessary; (4) claims for which there is inadequate documentation in the medical record; and (5) claims which do not otherwise comply with applicable program or contractual requirements.

A provider also violates the FCA if it submits a claim that the provider knows (or should know) is false to obtain payment from a federally funded health care program. Finally, a provider that does not refund any payment received to which the provider is not entitled within sixty days of discovering such overpayment also violates the FCA.

There are stiff penalties assessed against providers for violating these federal and state laws. The provider has to repay the overpayment and may be liable for (1) three times the amount of the claim or overpayment, and (2) a penalty of \$5,500 to \$11,000 per claim.

Under the FCA, a private party may bring an action on behalf of the United States. These individuals, known as "qui tam relators," may receive between 15 and 30 percent of the proceeds from an FCA action or settlement.

The FCA provides protection to qui tam relators who are discharged, demoted, suspended, threatened, harassed or in any other manner discriminated against in the terms and conditions of their employment as a result of their furtherance of an action under the FCA. Remedies include reinstatement with comparable seniority as the qui tam relator would have had but for the discrimination, two times the amount of any back pay, interest on any back pay and compensation for

any special damages sustained as a result of the discrimination; including litigation costs and reasonable attorneys' fees.

A similar federal law is the Program Fraud Civil Remedies Act of 1986 (the "PFCRA"). It provides administrative remedies for knowingly submitting false claims and statements. A violation of the PFCRA results in a maximum civil penalty of \$5,000 per claim plus an assessment of up to twice the amount of each false or fraudulent claim.

The Kansas False Claims Act authorizes the Kansas Attorney General to initiate civil prosecutions against anyone who submits a false claim or false record for payment to the State of Kansas, including the Medicaid program. A provider can also be subject to liability under the Kansas False Claims Act and the Kansas Medicaid Fraud Control Act for the submission of false, fraudulent or misleading claims.

Under the Kansas FCA, violators are liable for three times the amount of damages in addition to civil penalties of up to \$11,000 per violation. The statute also provides protections for whistleblowers, although it does not contain a mechanism for a whistleblower to receive a share of any recovery or settlement.

Violation of the Kansas Medicaid Fraud Control Act makes it unlawful for a person to submit false and fraudulent claims to the Kansas Medicaid program. Violation of this statute is a criminal offense punishable by substantial fines and imprisonment, and violators may be liable for payment of full restitution to the State plus interest and all reasonable expenses. An Associate involved in the delivery of patient care shall be responsible for producing and maintaining complete and accurate documentation in the appropriate medical record and submitting complete and accurate charges for all medical goods and services provided to patients.

An Associate involved in coding and billing will be trained, qualified and knowledgeable in coding and billing functions and will submit claims in compliance with all applicable requirements. Associates performing coding and billing functions will remain aware of areas of risk.

An Associate who has any reason to believe HaysMed has submitted improper claims to or received payments to which it is not entitled from any federally funded health care program shall report such information to the Compliance Officer immediately. HaysMed shall promptly and thoroughly investigate such matter and determine what amount, if any, must be refunded. All refunds shall be made in a timely manner, but in no event more than sixty (60) days following identification of the overpayment. Additionally, HaysMed shall take appropriate action to prevent any improper claims or payments in the future.

### **Standard 2.2- Tax-Exempt Status**

As a non-profit entity, HaysMed has a legal and ethical obligation to engage in activities to further its charitable purpose and ensure that its resources are used to further the public good rather than the private or personal interests of any individual. HaysMed shall not be involved in political campaigns nor engage in substantial lobbying activities. HaysMed shall not enter into any compensation arrangements in excess of fair market value, shall accurately report payments to appropriate taxing authorities and file all tax and information returns according to applicable laws and regulations.

HaysMed shall conduct a community health needs assessment on a regular basis and adopt an implementation strategy to meet identified needs; publicize its financial assistance policy; limit charges for patients who qualify for financial assistance to those amounts generally charged to those with insurance; and make a reasonable effort to determine if patients are eligible for financial assistance.

HaysMed shall track and accurately report its activities which provide community benefit including, but not limited to, charity care, community health improvement services, community benefit operations, health professionals education and research.

### **Standard 2.3- Anti-Kickback Statute**

The federal Anti-Kickback Statute prohibits offering or making any payment in exchange for the referral of Medicare and Medicaid business. Courts have broadly construed this law to include virtually anything of value given to an individual or

entity if one purpose of the remuneration is to influence the recipient's reason or judgment relating to referrals.

HaysMed does not provide remuneration (in the form of cash payment, discount, gift, contribution, or otherwise) in exchange for referrals or as an inducement for referrals. HaysMed accepts patient referrals and admissions based solely on the patient's clinical needs and HaysMed's ability to render necessary services. HaysMed does not pay or offer to pay any health care provider for referral of patients.

HaysMed does not accept payments for referrals that it makes. No Associate shall solicit or receive anything of value, directly or indirectly, in exchange for the referral of a patient. Similarly, when making patient referrals to another health care provider, HaysMed shall not take into account the volume or value of referrals that the provider has made (or may make) to HaysMed.

Any transaction involving another health care provider, whether formal or informal, shall be scrutinized for compliance with the Anti-Kickback Statute. All such transactions shall be based on fair market value for the goods or services provided. For example, rentals of space and equipment must be at fair market value without regard to the volume or value of referrals that may be received by HaysMed. An Associate who has any question or concern about the propriety of HaysMed's relationship with a physician, another hospital or any other health care provider shall contact the Compliance Officer immediately.

#### **Standard 2.4- The Stark Law**

The federal Stark Law (named after the sponsor of the legislation) prohibits a physician from making referrals for hospital inpatient and outpatient services if the physician has any financial relationship with that hospital entity, unless that financial relationship meets certain limited exceptions. For example, a hospital is permitted to offer certain limited business courtesies to medical staff members. HaysMed shall comply with the Stark Law in all of its financial arrangements with physicians. Any financial arrangement between HaysMed and a referring physician shall be reviewed and approved in advance by the Compliance Officer and shall be monitored to ensure ongoing compliance with the Stark Law.

### **Standard 2.5- Patient Inducements**

Federal law also prohibits HaysMed from offering or transferring anything of value to any person eligible for federally funded health care benefits if HaysMed knows or should know such inducement would cause the eligible person to choose to receive federally reimbursable items or services from HaysMed except as specifically permitted by law.

In light of this prohibition, no Associate acting on behalf of HaysMed shall give anything of value to any patient or prospective patient unless such gift has been reviewed and approved in writing by the Compliance Officer or his/her designee.

HaysMed shall not provide transportation, gifts, and services or waive deductibles, co-payments or otherwise provide financial benefits to patients in return for business. HaysMed shall not permit professional discounts, and courtesy discounts are permitted only in limited circumstances. Under certain circumstances, HaysMed may provide appropriate financial accommodations to patients (e.g., permitting monthly payments over time) based solely on the financial needs of the patient or offer prompt-pay discounts. All patient account balances shall be resolved using HaysMed documented collection policies and procedures.

### **Standard 2.6- HIPAA Privacy and Security Rules and Kansas Health Information Technology Act (K.S.A. 65-6821, *et seq.*)**

HaysMed shall devote necessary resources to ensure compliance with the federal regulations and state law concerning the security and privacy of protected health information. An Associate shall actively participate in appropriate training to enable the Associate to perform his/her job duties in compliance with these legal requirements. HaysMed will strive to utilize electronic health information in a secure and reliable manner.

An Associate who becomes aware of any unauthorized use or disclosure of protected health information shall report the matter to the Privacy Officer immediately. Any Associate who becomes aware of any information security incident shall report the matter to the Information Security Officer immediately.

### **Standard 2.7- Licensing Requirements**

HaysMed shall remain in compliance with all state and federal licensing requirements for health care facilities, including, but not limited to, the applicable Medicare Conditions of Participation. An Associate who is licensed by a state agency (e.g., registered nurse, physical therapist) shall be personally responsible for maintaining such licensure.

### **Standard 2.8- EMTALA**

HaysMed shall comply with the requirements of the Emergency Medical Treatment and Labor Act (“EMTALA”) in providing medical screening examinations and care for emergency medical conditions, regardless of an individual’s ability to pay.

When a person presents at a dedicated emergency department for a non-scheduled visit and requests medical examination and/or treatment, HaysMed shall provide such person with an appropriate medical screening examination to determine whether the person has an emergency medical condition, regardless of the person’s ability to pay.

If a patient is diagnosed as having an emergency medical condition, HaysMed shall provide medical treatment within its capabilities to stabilize the medical condition. If HaysMed does not have the capabilities to stabilize the patient, it shall make an appropriate transfer to a facility having such capabilities. HaysMed shall not discharge an unstable patient with an emergency medical condition unless such person refuses medical examination and/or treatment.

HaysMed shall not refuse to accept an appropriate transfer of an individual with an emergency medical condition who requires specialized capabilities or facilities if HaysMed has the capacity to treat the individual.

### **Standard 2.9 Controlled Substances**

Some Associates have access to prescription drugs, controlled substances and other medical supplies. Per HaysMed policy, access to controlled substances is limited to Associates who are properly licensed and who have express authority to handle them. The use of these items is governed by government regulations

and must be administered pursuant to physician order. It is extremely important that these items be handled properly by authorized individuals to minimize risk to patients and HaysMed. Associates should carefully follow the recordkeeping and documentation procedures established by their departments and the pharmacy. If an Associate suspects the diversion of drugs from HaysMed by another Associate or any other person, the Associate shall report the matter immediately to the Risk Manager.

### **Standard 2.10- Safe Medical Devices Act**

HaysMed is committed to participation in this governmental program to prevent patient injury from medical devices by reporting appropriate events to the device manufacturer and/or the Food and Drug Administration. Any event in which a patient is injured by a device should be reported to HaysMed's Risk Manager, and such reports shall be handled pursuant to established policies and procedures.

### **2.11- Mandatory Reporting Obligations**

Numerous federal and state laws and regulations require HaysMed and/or Associates to disclose certain information to specified government officials. For example, health care providers must report suspected incidents of child abuse to the Kansas Department of Children and Families. An Associate with a legal obligation to report certain information to a government agency shall follow HaysMed's policy to report in a timely and complete manner.

### **Standard 2.12- Government Inquiries and Investigations**

Health care providers often are the subjects of government investigations targeting alleged billing improprieties or violations of the aforementioned laws. The mere fact a government agent makes inquiries concerning HaysMed's practices does not mean HaysMed has engaged in any wrongdoing. No communication, whether oral or written, submitted to a government entity should ever occur that would mislead the government entity or its agent, either directly or indirectly. An Associate shall be familiar with and comply with HaysMed's policy and procedure concerning the proper handling of government inquiries and investigations.

### **Standard 2.13- Accreditation**

In addition to federal and state laws, HaysMed is committed to compliance with accreditation standards adopted by DNV Healthcare, Inc. An Associate shall deal with all accrediting bodies in a direct, open and honest manner. No action should ever be taken in relationships with accrediting bodies that would mislead the accreditor or its survey teams, either directly or indirectly.

## **Principle 3- Compliance with Other Laws**

HaysMed shall conduct its operations in compliance with state and federal laws and regulations applicable to businesses and employers.

In addition to those laws and regulations applicable to health care providers, HaysMed also shall comply with those legal requirements applicable to most businesses and employers. The following standards summarize some, but not all, of those legal requirements and the impact of those requirements on HaysMed's operations. An Associate shall comply with all laws and regulations in the performance of their job duties, regardless of whether they are specifically addressed here.

### **Standard 3.1- Health and Safety**

An Associate shall be familiar with all applicable health and safety laws and regulations and shall act in compliance with the letter and spirit of those requirements at all times. An Associate shall immediately advise his or her supervisor of any serious workplace injury or any situation presenting a danger of injury so timely corrective action may be taken to resolve the issue.

### **Standard 3.2- Environmental Compliance**

HaysMed shall operate its facilities with the necessary permits, approvals and controls. An Associate shall adhere to all requirements for the proper handling of hazardous materials and immediately alert supervisors to any situation regarding the discharge of a hazardous substance, improper disposal of hazardous and medical waste or any other situation which may be potentially damaging to the environment. An Associate shall strive to utilize resources appropriately and efficiently and to recycle where possible and otherwise dispose of all waste in

accordance with applicable laws and regulations.

### **Standard 3.3- Discrimination and Inappropriate Conduct in the Workplace**

HaysMed believes that the fair and equitable treatment of patients, Associates, and other persons is critical to fulfilling its vision and goals. It is the policy of HaysMed to recruit, hire, train, promote, assign, transfer, lay off, recall and terminate Associates based on their own ability, achievement, experience, and conduct without regard to race, color, religion, gender, sexual orientation, national origin, age, disability, genetic information or any other classification prohibited by law.

HaysMed shall not tolerate any form of harassment or discrimination on the basis of race, color, religion, gender, sexual orientation, national origin, age, disability, genetic information or any other classification prohibited by law. An Associate shall not engage in inappropriate conduct or disruptive conduct in the workplace. An Associate shall report any harassment, discrimination, inappropriate conduct or disruptive conduct in the workplace of which they are aware pursuant to the reporting methods outlined above. Allegations of harassment, discrimination, inappropriate conduct or disruptive conduct shall be investigated promptly pursuant to applicable policies and procedures.

### **Standard 3.4- Weapons, Illegal Drugs, and Alcohol**

No Associate shall bring any weapon of any kind into the workplace. HaysMed prohibits the use, sale, dispensing or possession of illegal drugs by its Associates, whether on or off the premises of HaysMed. Illegal drugs include prescription drugs used in a manner inconsistent with package directions. No Associate shall report to work under the influence of illegal drugs or alcohol, nor shall any Associate report to work with an impairment resulting from the use of over-the-counter or prescription medications. An Associate may be asked to submit to a drug or alcohol test at any time deemed appropriate by HaysMed and permitted by law.

### **Standard 3.5- Antitrust**

Federal and state antitrust laws are designed to create a level playing field in the marketplace and to promote fair competition. Discussions with competitors

concerning HaysMed's business can violate these laws. Prohibited subjects of conversation include any aspect of pricing, terms of supplier relationships, HaysMed's services in the market, key costs such as labor costs and marketing plans. No Associate shall discuss with any competitor market allocation or refusals to deal with certain suppliers.

In general, an Associate shall avoid discussing sensitive topics with competitors or suppliers, unless proceeding with the advice of the Compliance Officer. An Associate shall not provide any information in response to oral or written inquiries concerning antitrust matters without first consulting the Compliance Officer.

### **Standard 3.6- Copyright**

Copyrighted materials such as books, magazines, computer software and recordings are protected by federal law. Unauthorized copying may constitute copyright violation. Copying is allowed for educational and research purposes.

An Associate who desires to reproduce copyrighted material should receive permission from his/her supervisor prior to doing so. Use of any computer software without an appropriate license is strictly prohibited.

### **Standard 3.7- Record Retention and Litigation Hold Directives**

HaysMed is required by law to maintain certain types of medical and business records, usually for a specified period of time. Failure to retain such documents for such minimum periods could subject HaysMed to penalties and fines, cause the loss of rights, obstruct justice, place HaysMed in contempt of court or put HaysMed at a serious disadvantage in litigation. HaysMed has established controls to assure retention for required periods and timely destruction of records. Associates shall comply with the records retention and destruction schedule for the area in which they work.

When litigation is threatened or filed against HaysMed or any of its Associates, the law imposes a duty upon HaysMed to preserve all documents and records that pertain to the issues. As soon as HaysMed is made aware of pending or threatened litigation, a litigation hold directive will be issued. Such directive

overrides any records retention schedule that may have otherwise called for the transfer, disposal or destruction of the relevant documents. No Associate who has been made aware of a litigation hold directive may alter or delete an electronic record (including e-mail messages) that falls within the scope of that hold. Violation of such directive may subject an Associate to disciplinary action, up to and including dismissal, as well as personal liability for civil and/or criminal sanctions by the courts or law enforcement agencies.

### **Standard 3.8- Identity Theft**

As a creditor, HaysMed has access to consumers' confidential financial information. The misuse or diversion of this information can cause devastating financial loss for such individual and expose HaysMed to significant liability. HaysMed shall develop and implement appropriate procedures to detect, prevent and mitigate identity theft. Violation of such procedures may subject an Associate to disciplinary action, up to and including dismissal.

## **Principle 4- Confidentiality**

An Associate shall execute and abide by the HaysMed Confidentiality Agreement. A copy of the Confidentiality Agreement is incorporated herein by reference and available upon request.

## **Principle 5- Business Ethics**

In furtherance of HaysMed's commitment to the highest standards of business ethics and integrity, an Associate shall accurately and honestly represent HaysMed and shall not engage in any activity or scheme intended to defraud anyone of money, property or honest services.

### **Standard 5.1- Honest Communication**

HaysMed requires candor and honesty from Associates in the performance of their responsibilities. No Associate shall make false or misleading statements to any person or entity, including other Associates, concerning any aspect of HaysMed's operations.

### **Standard 5.2- Business Transactions**

Business transactions with vendors, contractors and other third parties shall be transacted free from offers or solicitation of gifts and favors or other improper inducements in exchange for influence or assistance in a transaction or even the appearance of any such impropriety. An Associate shall be familiar with and comply with HaysMed's policy and procedure concerning interactions with vendor representatives, incorporated herein by reference and available upon request.

### **Standard 5.3- Advertising and Marketing**

HaysMed shall market and advertise its services fairly, honestly and in a nondeceptive manner, stressing their value and merits. An Associate shall not use tactics that misrepresent HaysMed or that unfairly undermine the products and services of a competitor. This includes the use of disparaging comments or innuendoes.

### **Standard 5.4- Patient Billings**

The importance of submitting proper claims to federally funded health care programs is addressed in Standard 2.1. The same standards of conduct apply with respect to claims for services provided to persons with private insurance and self-pay patients.

Services shall be billed using billing codes that accurately describe the services that were provided and will be based upon appropriate documentation. HaysMed shall strive to comply with all contractual requirements for all payers. HaysMed shall provide complete and accurate responses to all reasonable inquiries concerning patient bills. HaysMed shall utilize established policies and procedures to resolve any dispute concerning such bills.

HaysMed shall cooperate fully with any duly authorized third-party audit of patient accounts. HaysMed shall respond promptly to any reasonable request for information from any such auditor in compliance with established policies and procedures.

HaysMed will strive to submit accurate claims and information. All documentation, including medical records, will be organized in a legible form so

that they can be audited and reviewed. Associates will determine the applicable ICD-10 code (or successor version) to support a procedure or service. HaysMed will provide each patient with the appropriate level of treatment regardless of the payment source or level of reimbursement HaysMed receives.

#### **Standard 5.5- Conflict Resolution**

Conflicts among Associates regarding job responsibilities, accountabilities, policies, practices and procedures that are not managed effectively by the organization have the potential to threaten health care safety and quality. An Associate shall promptly address and resolve internal conflicts which undermine a productive workplace using established procedures and mechanisms.

#### **Standard 5.7- Social Media**

An Associate is personally and legally responsible for the content of information they post on social networking sites. Even when using privacy protection settings, an Associate should treat all postings as potentially public information.

An Associate shall adhere to all provisions of the Confidentiality Agreement when posting on any social networking site. An Associate shall not post to any social networking site during work hours, unless an Associate's job description requires such posts to be made as part of maintaining a HaysMed sponsored social networking page.

No Associate shall make any reference to or post any information relating to a HaysMed patient, even if the patient is not identified by name or otherwise. An Associate may post information regarding a family member or friend only if the Associate's knowledge of such person's condition is based solely on personal experience and not the Associate's employment or affiliation with HaysMed.

An Associate shall not blog or post comments, messages or other content anonymously when commenting on HaysMed. When blogging or posting comments, messages or other content regarding HaysMed, an Associate shall affirmatively state that his/her views are not those of HaysMed.

#### **Standard 5.8- Legal Representation**

As appropriate, HaysMed shall retain and rely upon the advice of qualified legal

counsel with regard to specific legal matters. An Associate from whom information is requested by an attorney representing HaysMed shall provide complete and accurate responses to each such request. An Associate shall maintain the confidentiality of any and all communications with legal counsel to preserve evidentiary privileges.

### **Standard 5.9 Fundraising**

In furtherance of its charitable purposes, HaysMed conducts fundraising activities through the HaysMed Foundation. HaysMed complies with Kansas registration, recordkeeping, and reporting requirements with respect to its fundraising activities. HaysMed requires that all solicitations of charitable contributions for HaysMed or its affiliates be accomplished under the supervision of the Board of Directors. No Associate may utilize HaysMed's name for any fundraising purposes unless approved in advance by the Board of Directors.

## **Principle 6- Protection of Assets**

An Associate shall strive to preserve and protect the HaysMed's assets by making prudent and effective use of HaysMed's resources and properly and accurately reporting its financial condition.

### **Standard 6.1- Accuracy of Records**

An Associate is responsible for the integrity and accuracy of HaysMed's documents and records (including paper documents such as letters and memos, computer-based information such as e-mail or computer files on disk or tape, the electronic health record (EHR) and any other medium that contains information about HaysMed or its activities), not only to comply with regulatory and legal requirements but also to ensure that records are available to defend business practices and actions. No Associate shall alter, falsify or purposefully omit information on any record or document. Corrections to any record or document shall be made pursuant to established policies and procedures.

### **Standard 6.2- Contracts**

An Associate shall comply with the requirements of HaysMed's policy on the review, preparation and administration of contracts. No Associate shall purport to enter into a contract on behalf of HaysMed with any person or entity or modify an existing contract unless the Associate has been specifically authorized to do so.

### **Standard 6.3- Internal Controls and Financial Reporting**

HaysMed shall maintain a system of internal controls to provide reasonable assurances that all transactions are executed in accordance with management's authorization and are recorded in a proper manner so as to maintain accountability of the organization's assets. Associates shall comply with these controls. All financial information shall reflect actual transactions and conform to generally accepted accounting principles. No undisclosed or unrecorded funds or assets shall be established. Any Associate who has concerns regarding compliance with internal controls or the accuracy of HaysMed's financial reports shall report such concerns to the Compliance Officer.

### **Standard 6.4- Business Expenses**

If an Associate is authorized to incur business expenses on behalf of HaysMed, such Associate is responsible for the accurate and timely reporting of such expenses. All expenditures shall be in accordance with applicable policies. Prior to engaging in any activity on company time which may result in remuneration to the Associate or the use of HaysMed's equipment, supplies, materials or services for personal or non-work related purposes, an Associate shall obtain specific approval from an appropriate member of management.

### **Standard 6.6- Intellectual Property Rights and Obligations**

Any work of authorship or invention created by an Associate during the scope of his or her employment or affiliation with HaysMed shall be considered the property of HaysMed, including any patent, trademark, copyright, trade secret or other intellectual property right in such work of authorship or invention. An Associate shall assist HaysMed in obtaining and enforcing intellectual property rights in their works of authorship and inventions, while associated with HaysMed and thereafter.

## **Standard 6.7- Use of Computers, Communication Systems, and Related Equipment**

HaysMed has implemented and maintains a number of safeguards to protect the confidentiality, integrity and availability of information created, maintained or received in electronic form. An Associate shall be aware of and adhere to such safeguards in performing their job duties. An Associate shall report any suspected breach of such security measures.

E-mail and voice-mail messages reflect the image of HaysMed. An Associate should compose and deliver such messages in a professional manner that is similar to messages sent on HaysMed letterhead. An Associate should keep in mind that electronic files and even voice mail may be subject to discovery and may subsequently be used in litigation or investigations involving HaysMed or an Associate.

All computers, communications systems and related equipment (including, but not limited to, computer files and drives, electronic mail, intranet service, internet access and voice mail) are the property of HaysMed and are to be primarily used for business purposes. Highly limited reasonable personal use of computers, communications systems, and related equipment is permitted; however, an Associate should assume that such communications are not private.

HaysMed reserves the right to periodically access, monitor, print, copy and disclose the contents of computer files and drives and e-mail and voice mail messages. Such action taken may only be done with the prior approval of the Compliance Officer.

An Associate shall not use HaysMed computers, communication systems or related equipment to send or receive any message or download or retrieve any materials (video or audio) that could be considered inappropriate or illegal under state or federal law. HaysMed computers, communication systems or related equipment shall not be used to store, transmit, or receive messages or materials (video or audio) having language or images that may reasonably be considered offensive, harassing, demeaning or disruptive to any Associate. Such prohibited conduct includes, but is not limited to, sexually explicit or derogatory comments

or images, gender-specific comments, racial epithets and slurs, or any comments, jokes or images that would offend someone or create a hostile work environment based on his/her race, color, sex, religion, national origin, age or disability.

It is further prohibited to send or receive messages or materials on HaysMed computers, communication systems or related equipment in a way which includes the use of profane or offensive language or, in the judgment of management, is determined to be profane, demeaning, insulting, disruptive, threatening, intimidating, violent, defamatory, harassing, embarrassing, insubordinate or otherwise inappropriate or unprofessional. Finally, an Associate shall not use HaysMed computers and communication systems or related equipment to conduct a job search or open misaddressed mail.

Associates who abuse HaysMed's computers, communications systems, or related equipment or use them excessively for non-business purposes may lose these privileges and may be subject to disciplinary action up to and including termination.

#### **Standard 6.8- Political Activity**

No Associate shall use corporate resources, including e-mail and internet access, for personally engaging in political activity. While an Associate may participate in the political process on his or her own time and at his or her own expense, an Associate shall not give the impression he or she is speaking on behalf of or representing HaysMed in these activities.

## **Principle 7- Conflicts of Interest**

An Associate owes a duty of undivided and unqualified loyalty to HaysMed. An Associate shall not use his or her position to profit personally or to assist others in profiting in any way at the expense of the organization.

HaysMed recognizes that there is a potential for conflicts of interest. In conducting its business activities, Associates owe a duty of undivided and unqualified loyalty to HaysMed. A conflict of interest may occur if an Associate's outside activities, personal financial interests or other personal interests influence

or appear to influence his/her ability to make objective decisions in performing his/her job responsibilities. A conflict of interest may also exist if the demands of any outside activity hinder or distract an Associate from the performance of his/her job responsibilities. Associates shall not use their positions to profit personally or to assist others in profiting in any manner at the expense of the organization. An Associate is obligated to ensure he/she remains free of any such conflict of interest.

### **Standard 7.1- Disclosure Statement**

Members of the Board of Directors, the Chief Executive Officer and other Associates holding senior management positions shall complete a conflict of interest disclosure statement. Any Associate having a direct or indirect ownership interest in companies doing business with HaysMed or its affiliates must complete a conflict of interest disclosure statement identifying the nature of their business interest.

### **Standard 7.2- Outside Financial Interests**

While not all-inclusive, the following are examples of the types of activities by an Associate or members of an Associate's household, which might cause conflicts of interest. Associates, therefore, shall not engage in these and similar activities.

1. Ownership in or employment by any outside concern that either provides services or supplies equipment to HaysMed, or with which HaysMed competes, or to which HaysMed provides products or services. This does not apply to stock or other investments held in a publicly held corporation, provided the value of the stock or other investments does not exceed 5 percent of the corporation's stock. HaysMed may, following a review of the relevant facts, permit ownership interests which exceed this amount if management concludes such ownership interests will not adversely impact HaysMed's business interest or the judgment of the covered person.
2. Involvement on behalf of HaysMed in any transaction in which an Associate or his/her household member has a substantial personal interest.
3. Disclosure or use of confidential, special or inside information of or about HaysMed, particularly for personal profit or advantage of an Associate or

his/her household member.

4. Competition with HaysMed, directly or indirectly, in the purchase, sale, or ownership of property or business investment opportunities.
5. Conduct of any business not on behalf of HaysMed with any vendor, supplier, contractor or agency or any of their officers or workforce members.
6. Serving as a director, officer, or trustee of any organization who is in direct competition with HaysMed or its affiliates. Directors, officers, and other Associates must obtain approval from the Chief Executive Officer prior to serving as a director, officer or trustee of an organization who is in direct competition with HaysMed or its affiliates.

### **Standard 7.3- Service of Competitors/Vendors**

No Associate, nor his/her household members, shall perform work, consult with or render services for any competitor of HaysMed or for any organization with which HaysMed does business or which seeks to do business with HaysMed outside of the normal course of his/her employment or affiliation with HaysMed without the approval of the Associate's supervisor. Nor shall any such Associate be a director, officer or consultant of such an organization, nor permit his/her name to be used in any fashion that would tend to indicate a business connection with such organization. Associates are prohibited from discussing the business affairs of HaysMed during their secondary employment. At no time shall an Associate have secondary employment which interferes in his/her satisfactory performance at HaysMed.

### **Standard 7.4- Former Personnel of Fiscal Intermediary/Medicare Administrative Contractor**

In order for HaysMed to comply with requirements of the Medicare program, every Associate must notify Human Resources or the Compliance Officer if he/she was at any time during the year preceding his/her employment with HaysMed employed by a Medicare intermediary or contractor in a managerial, accounting, auditing or similar capacity.

## HIPAA PRIVACY & SECURITY OF HEALTH INFORMATION

Certain laws and regulations require that practitioners and health plans maintain the privacy of health information. In August of 1996, Congress passed the privacy legislation we now call HIPAA. It stands for the Health Insurance Portability and Accountability Act of 1996. A large part of it deals with employees qualifying for health insurance when they change jobs – that is the portability aspect of HIPAA. However, there is much more to HIPAA. Title II of HIPAA is known as Administrative Simplification. Administrative simplification establishes requirements for the following: transactions and code sets, identifiers, security, privacy, timeframes and penalties.

In general, privacy is about who has the right to access personally identifiable health information. The rule covers all individually identifiable health information in the hands of practitioners, providers, health plans and healthcare clearing houses.

### **HIPAA impacts everyone in the following ways:**

- Patient records may not be photo copied or printed from a computer terminal for personal use (i.e. writing care plans or other papers).
- Individuals must not release any patient information independently.
- Any request for patient information should be directed to your assigned staff member.
- Violations of HIPAA may result in termination of the experience.

### **Identifiable Information**

 The following is considered identifiable information, **Protected Health Information** (PHI) by HIPAA and must not be accessed or shared for any purpose other than patient care.

- Names.
- All geographic subdivisions smaller than a State, including street address, city, county, precinct and zip code.

- All elements of dates (except year) for dates directly related to an individual, including birth date, admission date, discharge date and date of death.
- Telephone numbers.
- Fax numbers.
- Electronic mail addresses.
- Social Security numbers.
- Medical record numbers; Health Plans; Beneficiary Number.
- Account Numbers.
- Certificate/License Numbers.
- Vehicle identifiers and serial numbers, including license plate numbers.
- Device identifiers and serial numbers.
- Web Universal Resource Locators (URLs).
- Internet Protocol (IP) address numbers.
- Biometric identifiers, including finger and voice prints.
- Full face photographic images and any comparable images.
- Any other unique identifying number, characteristic, or code, except an identification number to which the key is kept secure. Data that is fully de-identified no longer requires HIPAA protections or tracking of disclosures. However, de-identified patient information is still confidential and may not be disclosed without HaysMed's permission.

### **Other Protected Information**

While this section primarily addresses the requirements of the HIPAA Privacy Rule, additional protections and requirements may apply to certain types of sensitive information, such as substance abuse records, genetic test results, Social Security numbers and credit card numbers.

### **Additional steps to protect a patient's privacy**

- Close room doors when discussing treatments and administering procedures.
- Close curtains and speak softly in semi-private rooms when discussing treatment and performing procedure.

- Avoid discussions about patients in public areas such as cafeteria lines, waiting rooms, and elevators.
- Safeguard medical records by not leaving the record unattended in an area where the public can view or access the record.
- If you have logged into a computer system to view an electronic medical record, make sure to log off once you are finished.
- Do not share HaysMed computer systems access code or password with anyone. Take precautions to prevent others from learning your password.
- Before discarding any patient-identifiable information, make sure it is properly shredded or locked in a secure bin to be destroyed later. Do not leave information intact in a trashcan.
- Do not use cell phones or other electronic devices to take or send photographic images and audio/video recordings of patients and/or medical information.
- Do not publish medical information, photo images, or audio/video recordings on networking web sites or blogs, such as *Instagram*, *Snapchat*, *Twitter* or *Facebook*. This includes de-identified and “virtually” identifiable information.
- Employees may convey medical information in a secured email if relevant to one’s job and patient treatment.

HaysMed conducts regular schedule audit trails each time you access a medical record including status boards at the facility. You could be criminally liable for HIPAA violations so it is important that any use or disclosure be limited to the minimum amount of information necessary to accomplish the specific purpose of the use.

If you access or discuss any patient’s PHI without a legitimate, job-related reason for doing so, you will be disciplined, including possible termination.

- Regardless of location (at work, at home, in a social setting).
- Includes friends and family members.

## **Patient Directory**

Certain patient information may be included in a facility patient directory. Each patient or personal representative should be asked, upon admission, if they wish to be listed in the patient directory and their preference noted in the admitting system.

**The following protected health information (PHI) may be included in the directory:**

- Patient's name.
- Patient's location.
- Patient's general condition (usually a one word description, such as: undetermined, good, fair, serious, critical or treated and released).
- Patient's religious affiliation (optional).

Not all patients are listed in the facility directory. Circumstances include: patient choice, sensitive admission or treatment is subject to privacy laws and regulations. These admissions are noted as "No Information" (NI) status. NI status means the patient has decided he/she does not want HaysMed to provide PHI, or any information related to admission, to all callers and guests (including family, friends, media, neighbors, etc.). When a patient is unable to express a preference (unconscious, medicated, etc.), the patient is given an interim status of "Did Not Provide" (DNP).

HaysMed may assist family or friends to locate a DNP patient, but should be careful not to disclose to the media or other callers that the patient is present in the facility. The patient or personal representative should determine a preference as soon as it is feasible.

## **Accounting for Disclosures**

Privacy regulations grant the patient the right to receive a summary of certain disclosures. HaysMed must account for releases of information outside of its operating units, specifically releases made for reasons other than treatment, payment, healthcare operations or without the patient's written authorization. Healthcare operations are business activities undertaken by HaysMed, such as

quality improvement studies, peer review, credentialing, medical reviews and fraud and abuse investigations. For more information about the disclosures, which must be documented, see the “Protected Health Information Disclosure Policy.” Any request for patient information should be directed to your assigned employee staff member.

### **Verification of Identity**

When information is requested about a patient, regardless of who is requesting the information (i.e. law enforcement, “parent”, physician’s office), please direct the request to your assigned employee staff member who will verify identity of the requestor. You must not release any patient information independently.

### **Notice of Privacy Practices**

The Privacy Rule gives patients the right to be informed of the privacy practices of HaysMed, as well as to be informed of their privacy rights with respect to their personal health information. The Notice of Privacy Practices is generally distributed to patients on the first day that the patient receives treatment. HaysMed is required to attempt to obtain written acknowledgment that we offered the patient a copy of the Notice.

### **Privacy & Patient Care**

Treatment of patients should be essentially unobstructed by the Privacy Rule. For some purposes (such as providing treatment, obtaining payment, and health care operations), the Privacy Rule permits HaysMed to use and disclose health information without the patient’s permission with only a few restrictions.

HaysMed may disclose, without the patient’s permission, information necessary for the treatment or payment activities of another health care physician or provider if both entities have a relationship with the patient.

### **Examples of permitted uses and disclosures include:**

- When sending a specimen to a lab for testing, the physician’s office may send the laboratory the patient’s health plan information so that the laboratory may be reimbursed by the patient’s health plan for services rendered.

- A physician's office may send health information to another physician's office for the treatment of a patient. As long as both have a relationship with the patient, physicians and other providers may share health information as needed for treatment purposes.
- A physician's office may send health information to a pharmacy so that pharmacy may fill a prescription for a patient. The physician's office may also send the patient's health plan information so that the pharmacy may be reimbursed for filling the prescription.
- A health plan may share certain member information with another health plan to coordinate benefits.
- A health plan may collect data directly from paneled physicians' medical charts for purposes such as completing performance measures or other Quality Improvement studies.
- A hospital's Quality Management department may abstract data from charts at the facility to conduct a study designed to improve patient care.

### **Information Privacy and Security Incidents**

If you become aware of a situation where patient health information has been shared with the wrong person, or the privacy and/or security of patient health information has been compromised in any way and regardless of whether it was intentional or accidental, immediately report the situation to your assigned staff member or the Privacy Officer.

### **Everyday Safeguards that assist in privacy and security incidents:**

- Lock down your computer before leaving it.
  - Alt + Q
  - Ctrl + Alt + Delete
- Do not get caught in a phishing attack.
- Beware of social engineering.
- Do not plug an unknown USB into your computer.



The rules concerning use and disclosure of protected health information can be confusing. If you have questions concerning these rules, contact the Privacy Officer.



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**QUALITY IMPROVEMENT**



HaysMed is committed to providing quality care. We strive to meet customer needs through using a continuous quality improvement (CQI) approach. The CQI model used is Plan, Do, Study and Act. (PDSA)

**The model is used to answer the question:**

What changes can we make that will result in an improvement?

**Plan**

The planning part requires that we:

- Define Quality. We define quality as meeting or exceeding the customer’s expectations 100% of the time. Quality is delighting the customer.
- Develop and share goals.
- Develop department and individual improvement goals.
- Identify processes related to the goals that can be improved and lead to better quality care.
- Identify our customers.

**Do**

Do is the action part of the process; collecting and analyzing data or meeting with involved parties.

## **Study**

Study means to analyze data for process improvement. Some focus areas of improvement are:

- Clinical Outcomes
- Cost
- Access to Care
- Satisfaction
- Community Service
- Regular Satisfaction Surveys
- Monitoring & correcting quality control issues such as:
  1. Response to fire drills.
  2. Storing things safely.
  3. Using equipment safely.
  4. Refrigerator temperatures.
  5. Crash cart checks.
  6. Protecting medication.

## **Act**

HaysMed believes that teamwork is the best way to improve processes. A team consists of a small number of people with complimentary skills who are committed to a common purpose. Each team member holds him/herself accountable for the team's success. Teams test new ideas and continue to improve quality.

In a CQI culture, 80-90% of an employee's time is spent in day-to-day tasks. The remaining 10-20% of the employee's time should be spent improving quality of work.

This may involve the following:

- Being on or participating on an improvement team.
- Collecting measurement data.
- Doing quality control monitoring.
- Identifying job improvements.
- Identifying customers' expectations.

- Learning about quality improvement.

Poor quality costs the organization money. However, each person can make a difference. EVERYONE is responsible to look for ways to improve daily work processes, customer satisfaction and quality outcomes.

## RISK MANAGEMENT



The Risk Management program is designed as an integrated and coordinated program for controlling losses related to professional liability, employee injury, property damage and general liability. It is EVERYONE'S responsibility to cooperate with the Risk Management Department. It is the policy of HaysMed to reduce, modify, eliminate and control conditions and practices that may cause harm to individuals or result in loss to individuals or the organization.

### **Occurrence/ Incident/ Event Reporting:**

All healthcare providers staffing the facility directly or indirectly involved in the delivery of healthcare services have the duty to observe established rules, regulations, policies and procedures; to practice and promote safe work procedures, and to report all unsafe conditions and all accidents, near misses occurrences, injuries, unusual &/or sentinel events or reportable incidents to the Medical Director, the President/CEO or the Risk/Accreditation Manager. This should be done through the Verge Incident Reporting system.

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Follow-up and investigation are conducted as needed with appropriate resolution and feedback.

The Risk Manager serves as a resource to staff on issues related to professional liability and other risks.

- Notifies carriers of actual or potential claims.
- Coordinates claims investigations with defense counsel.
- Coordinates the organization's response to discovery requests and interrogatories.

- Assists attorneys in the preparation of employees to be deposed and attends depositions and trials.

### **Insurance:**

The Risk Manager coordinates the facility's insurance for professional liability, general liability and property coverage. Note that non-employed personnel are not covered by the facility's insurance.

## DOCUMENT MANAGEMENT

HaysMed utilizes a policy management system to store, manage and track policies, work instructions and other documents in an online format for all Associates, Students and Volunteers to access.

Functionality includes:

- Allowing users to search the database for documents by their title, keyword or phrase used.
- Managing the review and approval process of each document, including the tracking of all changes made.
- Storing previous versions and archived documents.
- Assigning readers and monitoring access to documents.

All policies and work instructions are reviewed at least every 3 years by department management and HaysMed Administration. This process is facilitated by the Document Control Coordinator.

Associates, Students, and/or Volunteers may be required to read a policy or work instruction. In the event that you are assigned a document to read, you will receive further instructions on how to access the software system.

HaysMed utilizes a form management software system to maintain document control. The Forms Committee is responsible for reviewing and approving all forms used at HaysMed. The Committee is chaired by the Health Information Management Director and includes representatives from Nursing, Corporate Compliance, Information Systems, Pharmacy and Physician Practice

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Administration. All new and revised form requests are submitted through the Document Control Coordinator.

The Forms Committee reviews requests to determine if they meet the following criteria:

- All signature lines contain a date and time field.
- The form contains only approved abbreviations as defined by HaysMed policy.
- Core measures are met, as applicable.
- All orders are complete and those containing medications are approved by a pharmacist.
- Each form contains a unique form number, revision dates and page numbers for multi-page forms.