2023 Experience Guide

**East Jefferson
General Hospital**
LCMC Health

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Welcome

Congratulations! You are about to join a team of nearly 3,000 professionals whose mission is to deliver the highest levels of care to the community we serve, every day. Within this manual, and throughout orientation, we will be touching on the behaviors that make East Jefferson General Hospital unique. Ours is truly a "culture" where you can live your extraordinary.

Our patients have an expectation that we give a little extra to the care delivered elsewhere. No matter what your role, **every** team member impacts the care we deliver.

Familiarize yourself with the policies and procedures of our hospital that appear in this guide. These are the commitments by which you will be measured. Remember, even when you are not at work, you are representing yourself, your department, and our hospital. If you should ever have questions about our policies or our expectations, reference our Inside EJ intranet site, reach out to your leader, or our Human Resources Department. Welcome to East Jefferson General Hospital, where we provide a culture that brings our values to life.

LCMC Health culture

Our people drive the extraordinary experience we provide. Our culture is rooted in the our values. They're the standard to which we hold our selves accountable.

Mission
Health, care, and education beyond extraordinary.

Vision
Creating a culture of wellness.

Values
We bring heart and soul. We're in it together. We give a little extra.

Our commitment to you as an employer
These are both current and aspirational, it is our goal to provide a culture where all these promises are true for you.

Your community

We help you belong
We bake equity and inclusion into all our processes, and we offer structured opportunities for you to deepen and diversify your connections to our community.

We hear your voice
We promote safe, equal, and transparent relationships, and we actively incorporate your perspectives, so your voice can shape our community.

We amplify your impact
We incorporate community impact in all our programming, and we give you concrete ways to invest in the people and places that matter to you.

Your self

We support your wellbeing
We design policies with an eye toward caring for caregivers, and we give you a variety of resources for investing in your own wellbeing.

We reward your work
We go beyond offering ordinary benefits, and we invite you to personalize your package so it works for you.

We celebrate your contributions
We build moments to recognize both your efforts, and you as a person, into everything we do, and we reward your contributions in a way that's meaningful to you.

Your future

We set clear expectations
We design systems for frequent and transparent two-way communication, and we provide information and opportunities for you to action concrete feedback.

We progress your career
We paint a clear picture of your future here at LCMC Health, and we help you take steps to further your career goals.

We champion your growth
We create an environment where learning is easy and incentivized, and we invest in your long-term personal development as a leader and a human being.

Our Commitments are nine promises we make to all LCMC Health team members —tangible actions that turn LCMC Health's mission, vision, and values into a lived experience. Our Commitments ensure we provide you with a total work experience (an "everyday") that makes it easy for you to live your extraordinary. You'll learn more about Our Commitments through your new hire online orientation.

Your commitments as part of the LCMC Health Team

They summarize how we should act every day.

We bring heart and soul	**I include everyone** I use inclusive language for people of all genders, abilities, and health literacy levels are used as well as active listening cues to ensure others feel seen and heard.	**I embrace empathy** I try to see every situation through the other person's eyes and take cues about how people want to be treated, adjusting my behavior accordingly.	**I champion others** I look for formal and informal ways to celebrate my team members' behavior, contributions, and unique strengths.
We're in it together	**I speak positively** I deliberately introduce and speak positively about my team members to others. When appropriate, I praise publicly and correct privately.	**I solve problems** I champion an environment that welcomes questions and the opportunity to express concerns. When appropriate, I problem solve directly before going to leadership.	**I prioritize progress** I ask for feedback, thank people for it, and determine definitive actions. When giving feedback, I talk about concrete actions, not attributes.
We give a little extra	**I convey warmth** I take the time to greet everyone I encounter and strive to foster a community environment.	**I take responsibility** I ask for help quickly and offer help proactively. My work is "good enough" only if it is also "a little extra".	**I welcome growth** I proactively share ideas about how we can think differently and look for ways to improve our processes.

Your Commitments put our spirit of "little extras" into words—nine standards that define the LCMC Health way of carrying oneself and treating others." Your Commitments will ensure LCMC Health is the best place to work, with a staff of the best people to work with. You'll learn more about Your Commitments through your new hire online orientation.

Our hospital and culture

East Jefferson General Hospital opened on February 14, 1971, with 250 beds and 250 physicians. Today, we have 420 beds, over 650 physicians, nearly 3,000 team members, and over 150 volunteers.

We've grown with the East Bank community, offering the clinical expertise and healthcare with heart that our community expects and deserves. East Jefferson General Hospital is accredited by the Joint Commission on Accreditation of Healthcare Organizations and has received five consecutive Nurse Magnet designations.

Today, with the addition of Tulane Health System, we are proud to be partnered with the LCMC Health system. Together, we are making every day extraordinary. From the big celebrations to the little touches, we're on a mission to bring a little more magic to healthcare each day – and with the highest quality, safest policies, and best bedside manner out there, there's plenty to go around.

www.ejgh.org

Our EJGH values:

- Teamwork
- Transparency
- Accountability
- Physician involvement
- Community
- Questioning and curiosity
- Continuous improvement
- Open to change
- Having fun!

Patient experience standards

We are committed to:

- Making everyone feel welcome
- Treating everyone with courtesy, respect, and dignity
- Fostering a safe and secure environment
- Providing quality service and competent care
- Providing privacy and confidentiality
- Creating an environment where communication and participation is encouraged and valued

Behavioral expectations (refer to HR Policy no. 402):

LCMC Health is committed to supporting a culture that values behaviors consistent with respect, compassion, teamwork, and integrity and to promoting a positive and safe environment for the hospital community that is reflective of the highest quality of care and professional conduct. Patients, employees, management, professional staff, volunteers, students, contract workers, and visitors all comprise the "hospital community." As a part of the hospital community, these individuals are expected to uphold LCMC Health's mission, vision, guiding principles, values, and service behaviors.

LCMC Health's mission of providing quality patient care can best be accomplished within a culture of trust, mutual respect, teamwork, integrity, compassion, and appropriate empowerment of patients, physicians, and employees.

LCMC Health strives to maintain a workplace that is free from discrimination, harassment, and other inappropriate behavior. Such behavior will be investigated and reviewed in accordance with institutional policies and procedures.

Appropriate behavior – behaviors, actions, and communication (both spoken and unspoken) displayed in interaction with others (patient, patient families, fellow employees, medical staff, and visitors) that are in alignment with LCMC Health's established values and service behaviors.

Disruptive and inappropriate behavior - any behavior that causes unrest and/or disorder or that interrupts and/or impedes patient care progress and safe operations in the work place. Such behavior may include:

- Insubordinate conduct between a staff member and supervisor, peers, staff-patient, or staff-family interactions
- Disruptive and intimidating behavior, including verbal outbursts and/or physical threats
- Passive/aggressive activities such as refusing to perform assigned tasks or quietly exhibiting uncooperative attitudes during routine activities
- Reluctance or refusal to answer questions or undermining leadership
- Reluctance or refusal to return phone calls or pages
- Condescending language or voice intonation
- Impatience with questions
- Harassment or bullying

East Jefferson General Hospital – team member standards

Treat everyone (team members, physicians, patients, and guests) with courtesy and respect, both onstage and offstage

Be respectful of everyone's privacy

- Knock on doors and pause, waiting for a response, before entering
- Utilize privacy curtains
- Ask permission prior to performing patient care tasks
- Do not gossip or discuss patients or sensitive information in public areas - remember that walls and elevators are not soundproof
- Be mindful of onstage and offstage conversations

Onstage is any open or public area where conversations may be overheard or where you can be seen by patients and guests. These areas may include the cafeteria, elevators, hallways, nursing stations, patient rooms, or conference rooms where patients or guests are present.

Offstage is any private area where conversations are not overheard. These areas may include private breakrooms or offices with doors closed.

Appropriate behavior is expected

- Be aware of the onstage and offstage behavior demonstrated by myself and others
- Assist anyone who needs help finding his or her way – if you cannot assist, connect them with someone who can
- Use a lower tone of voice for all onstage communications
- Only turn lights on in a patient's room as necessary and with permission
- Do not use an electronic device in an unauthorized manner. This includes not using personal electronic devices onstage or using your work device inappropriately
- Frontline team members should step out of a room to answer a call about another patient
- Do not visit unauthorized Internet sites
- Always keep my personal electronic device on vibrate (non-audible alert) while on duty, and leave your device in a secure offstage area when possible (i.e., locked desk, locker, etc.)
- Take pride in East Jefferson General Hospital by promptly cleaning litter, debris, and spills when you see them
- Strive to maintain a safe environment for our patients, their families, and other team members
- Ensure your appearance is neat, clean, and tidy (LCMC Health HR policy no. 406).
- Wear your hospital badge above the waist and keep visible at all times

Communication

Utilize the **AIDET** principle

AIDET® is a standardized approach to use with patients. We've translated that 5-part tool into a 3-part version to ensure excellent communication. Every patient interaction has a beginning (relationship), a middle (task), and an end (relationship) – RTR. **People don't care how much you know until they know how much you care.**

Relationship	**A**cknowledge
	Introduce
Task	**D**o these things (duration)
	Explanation
Relationship	**T**hank you

Relationship

Acknowledge the patient and family.

Introduce self and other team members and roles.
• Inspire confidence and build trust
• Manage up the team
• Make a non-medical connection

Task

Do these things.
• Sit down
• Active listening (eye contact and acknowledgment)
• Paraphrase
• Use key empathy phrases
• Articulate your physical findings

Explain your diagnostic impression in a way that is understandable to the patient/family. Define expected duration of work-up/illness/healing.

Relationship

Complete the encounter and ensure understanding. Ask
• "What questions do you have for me?"
• "Is there anything else I can do for you?"

Thank the patient/family for the privilege of caring for them.

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Communication expectations

• Use a professional and pleasant tone of voice. Speak clearly, slowly, and not use slang.

• Keep interactions positive and avoid engaging in gossip or non-verbal insinuations that may demean others or diminish the value of another person or department. Listen intently to those speaking to you, and never speak negatively in front of patients or guests.

• Be aware of your body language and non-verbal cues during face-to-face interactions. Make eye contact and avoid negative cues such as: frequently looking at watch, pointing fingers, rolling eyes, crossing arms, or turning away from speaker.

• Answer your work emails in a timely manner. I will "manage-up" by highlighting others credentials, positive attributes, and years of experience.

Examples of "managing up":

• "Hello, Mrs. Smith. I'm leaving for the day. Ken is going to be taking my place. I actually just shared with Ken all of your important information. Ken is a registered nurse who I've worked with for over five years. I hear nice compliments about him from his patients."

• "Hello, Mrs. Smith. I see this afternoon you are going down to the radiology department. Radiology has state-of-the-art technology and an excellent staff. They're aware you are coming down and are well prepared for you."

• "Mrs. Smith, I see Dr. Hernandez is your physician. He's an excellent doctor. He's very good at listening and answering patient questions. You're fortunate to have him as your physician."

Telephone etiquette:

• Answer all phone calls by the 3rd to 5th ring
• Answer all outside phone calls in the following manner:

    o "East Jefferson General Hospital"

    o "Department name"

    o "This is (my name)"

    o "May I help you?"

• Before placing anyone on hold, ask permission and wait for a response
• Use the caller's name when possible or use ma'am or sir
• Listen and ask questions to clarify information
• Thank the caller for calling, holding, or for criticism
• When transferring callers inform the receiving department of the transfer and the reason for the call before hanging up

Service recovery

When you're in a situation where you need to apologize, reassure, or recover the level of service, it is important to remember the five Rs of an apology.

These are based on the book, *Healing Words: The Power of Apology in Medicine, Second Edition* by Michael S. Woods, MD

- **Recognition:** Know when an apology is in order
- **Regret:** Respond empathetically
- **Responsibility:** Own up to what's happened
- **Remedy:** Make it right
- **Remain engaged:** Be there for your patient

Teamwork – the key to our success

Work with a spirit of cooperation and collaboration.

Always welcome new team members to the hospital. Be a team player and avoid comments like "that's not my job" or "we're short staffed," so as to avoid fostering negativity or placing a burden on others. Instead, strive to be positive and inspiring.

As a member of East Jefferson's Team, be accountable for your actions.

- Complete all mandatory requirements and appropriate credentials/licensure on time such as, CPR, annual mandatory training, and TB testing
- Be a good steward of your time, arriving for your shift on time and being productive while on duty
- Be a good steward of hospital resources, avoiding waste
- Adhere to processes that lead to responsible utilization of our resources
- Use the oldest supplies first, paying attention to expiration dates
- Always be aware of supply inventory, avoiding overstock situations

As a member of the East Jefferson Team, stay updated on current events and changes within the organization.

I can do this by visiting The Heart Beat, reviewing departmental and hospital communication boards, keeping up with email communication, and attending departmental meetings. I will not hesitate to discuss any concerns with my supervisory team. It is my responsibility to stay updated on unit changes and to participate in discussions during unit meetings and/or work groups. I will be flexible and supportive of change.

Benefits to working as a team

When people work together, they are much more likely to generate ideas for improvements and solutions to problems than one person working alone. People working together are also more likely to be more effective in implementing ideas and solutions.

When you work alone

• Have an idea that would improve your job but had no idea what to do?

• Noticed a problem but had no idea how to solve it?

• Needed help, but felt like there was no one there to give it to you?

When working as a team

• Shared responsibility for making decisions

• Increased accomplishment of goals

• Positive impact on quality and service

• Greater impact on management's decision-making

• Increased happiness, productivity, pride, self-esteem, and confidence

A single voice

A team must develop a single voice to have any influence. Team members must learn how to encourage, support, and learn from each other.

Stages of team development

Successful teams take time to develop, and each team is going to develop differently. Challenges are going to arise during the development process and teams move back and forth between the stages. Familiarity with these stages will help everyone move toward becoming a smooth-running and effective team.

Stages

• Getting started

• Going in circles

• Getting on course

• Full speed ahead

Success factors for a team

Purpose: Team members need to know what they're supposed to do. Purpose gives the team direction, identity, and focus.

Process: A team needs to have a process for identifying problems, coming up with solutions, and reaching agreement. If a team has a process, they can meet goals, make decisions, and set ground rules.

Communication: Team members must do more than just talk. They must share ideas and feelings in a sensitive and respectful way.

Involvement: Everyone should have some level of involvement and input. This will ensure the team will benefit from the unique talents and skills of each team member.

Commitment: Hopefully, every team member is willing to give 100%. Commitment builds belief in the team and helps to create a sense of ownership in its goals.

Trust: Team members must trust each other. Each team member must know that they can rely on each other and that promises will be kept.

Synergism

The magic of synergism – the whole being greater than the sum of the individual parts – is seen in most great teams. We have a great team here at East Jefferson General Hospital – people and departments working together in a spirit of cooperation and harmony. There are many ways to contribute your energy and talent as a team member here at EJGH beyond your daily job duties. Some examples include Epic teams, Culture Leaders, department specific work teams, shared governance committee work, etc.

Resources

Inside East Jefferson

LCMC Health's SharePoint **Inside East Jefferson**/**Inside EJ** is the system's intranet site where you will find all necessary information regarding EJGH and LCMC Health. Here you will find policies, procedures, benefits information, ReadySet, shortcuts to ADP and Workday, Learning Management, special events, fun facts, and more!

The Heart Beat

The Heart Beat gives you quick and easy access to news, information, resources, and people you need at LCMC Health. It offers you a collection of employee-focused, social-media-like channels that cover a range of topics. From what's happening globally at LCMC Health to what's happening locally at your hospital or facility, The Heart Beat keeps you informed. Download the Firstup mobile app by texting LCMC to 45411. Or scan the QR code. You'll login with your LCMC Health email and system password. The company code is LCMC.

People Service Center

The People Service Center (PSC) is the central place for LCMC Health employees, leaders, and physicians to reach out to for their Human Resources questions including Workday self-services activities. If your request requires assistance from another team, the PSC will direct you to the appropriate department.

When is the PSC available?
• Monday–Friday (8 am–5 pm)

Three ways to reach the PSC
• Call **504.702.5525**
• Email **PSC@LCMChealth.org**
• **Create a case in Workday** by going to menu > help > create a case OR type "create case" in the Workday search box.

Cultural sensitivity

Cultural competence
We are committed to treating everyone from other cultures with the utmost respect and courtesy. Check with your supervisor to find out where the Cultural Reference Manual is located on Inside EJ.

Transcultural communication
Communicating effectively with patients and families of other cultures may involve the utilization of interpreters. *Refer to Administrative Policy and Procedure PS-1, Cultural Competence.*

Guidelines for using interpreters
Interpreters are provided at no cost to the patient. Interpreter phones are available. An outside interpreter must be offered to the patient/family and the patient/family must refuse this service before a family member is used to interpret. The refusal must be documented. Minors are never to be used to interpret.

To obtain an interpreter, contact the Administrative Representative, PBX, or the Guest Services Department.

Policies

Human Resources
It is your responsibility to become familiar with East Jefferson General Hospital's policies and procedures and to always abide by its policies and procedures while at work. The EJ Experience orientation guide is a general overview of key policies to help you get a jump start on your onboarding. It is your responsibility to review and familiarize yourself with all LCMC Health and EJGH policies and procedures. You can find our detailed policies by clicking on the Policies & Procedures link on Inside EJ.

Attendance – HR Policy no. 301
Appearance and Dress – HR Policy no. 406
Staff Rights – HR Policy no. 418
Harassment Free Workplace – HR Policy no. 410
Employee Assistance – HR Policy no. 102
Substance Abuse and Drug testing – HR Policy no. 419
Code of Conduct – HR Policy no. 404

Compliance

Your voice is valued! We encourage you to feel empowered to bring any concerns forward that you may encounter during this transition, including:

• **HIPAA concerns:** Protecting patient privacy is paramount
• **Suspected fraud and abuse:** Maintaining financial integrity is a collective responsibility
• **EMTALA issues:** Ensuring accessible and quality emergency care is vital
• **Ethical concerns:** Upholding our ethical standards
• **Suspected wrongdoing:** We all play a role in maintaining a safe and respectful environment

You have several mechanisms available to you to report a concern and can do so anonymously if you desire. EJGH takes these reports seriously and will initiate a full and complete investigation as well as implement necessary corrective actions on any findings.

The Compliance Hotline web address is LCMC.ethicspoint.com, the phone number is **1.855.926.6759,** or you can email our department directly at **Compliance@LCMChealth.org** and we can be reached at **504.896.3030**.

The Federal False Claims Act

The Federal False Claims Act is a federal statute that covers fraud involving any federally funded contract or program, including Medicare and Medicaid. The federal government views fraud and false claims. Submitting a false claim include fines, possible criminal charges, imprisonment, and exclusion from participating in Medicare/Medicaid programs.

Abuse is practices of providers, other healthcare service employees/contract workers, and suppliers which are inconsistent with accepted sound practices.

Fraud is when anyone knowingly and willfully deceives the Medicare/Medicaid or other federally funded program. Some examples where fraud occurs include when a healthcare provider or other healthcare service employee/contract worker knowingly:

• Bills for services not performed or supplies not used
• Overbills or double bills for services/supplies
• Bills for services/supplies that are not medically necessary
• Falsifies records or inaccurately documents tests or procedures
• Fails to report overpayments or credit balances

Under the False Claims Act, the government does not only consider whether the person intended to submit a false claim, it also considers whether the person should have known a claim was false.

Your role in compliance:

• Adhere to all rules, regulations, compliance policies, and the EJGH Code of Conduct
• Conduct all affairs with highest ethical standards
• Report any suspected violations to the Compliance Hotline

EJGH Code of conduct

Quality of care
We are committed to providing high quality of care to patients and to deliver services and duties in a responsible, reliable, appropriate, and cost-effective manner.

Privacy, security, and confidentiality of information
We maintain the privacy and confidentiality of information entrusted to us in accordance with legal and ethical standard.

Compliance with laws and regulations
We shall operate our healthcare enterprises in accordance with all applicable laws and regulations and in a manner which is sensitive to the needs and justifiable expectations of the various publics we serve, including patients, physicians, and other healthcare professionals, fellow team members, contractors, suppliers, lenders, and governmental entities.

Safeguarding the property and interests
We are committed to protecting East Jefferson General Hospital's assets, and those assets of others entrusted to us, including physical property and proprietary information, against loss, theft, and misuse.

Maintaining a safe healthcare environment
We shall use our resources wisely and with accountability to East Jefferson General Hospital, fellow team members, patients, customers, vendors, and our community. This includes operating our business activities in an environment wherein the health, safety, privacy, and comfort of patients and team members is a major priority.

Proper consideration of Human Resources
We shall treat all people with respect, dignity, and courtesy. East Jefferson General Hospital seeks to create a stimulating, productive, and safe environment in which fairness, equal opportunity, and professional development flourish for the benefit of all.

Billing and coding
We are committed to honesty, accuracy, and integrity in all of our billing, coding, and documentation activities. Team members have a duty to report any actual or perceived false, fraudulent, inaccurate, or fictitious claims or documentation to management, Human Resources, Compliance Officer, or the Hotline.

HIPAA

HIPAA is an acronym for the Health Insurance Portability & Accountability Act of 1996, which is a federal law affecting all health care systems in our country. HIPAA security regulations became effective April 2005.

Other aspects of HIPAA include privacy, transaction code sets, NPI (National Provider Identifiers), and security.

HIPAA security details

General
• Access only the data that is required to perform your job
• Know your department's Emergency Plan to continue critical business processes during and immediately after a crisis as applicable to you
• Inside EJ > Policies & Procedures > Environment of Care > Emergency Management Department policies > Computer Failure procedures section
• Ensure vendors wear EJGH issued vendor ID badges
• Report HIPAA security incidents, violations, and risks (HIPAA is everyone's responsibility), including HIPAA violations by vendors or business associates
• Inside EJ > Computer Security or Help Desk for computer intrusion/virus concerns
• Complete all training provided by Compliance

Passwords
• Create good, secure passwords (upper/lowercase alpha, numeric, special characters/symbols, minimum of 6 characters)
• Safeguard passwords that access a system or transmit/receive ePHI
• Commit passwords to memory
• Avoid writing passwords down
• Do no share your password with anyone (even if asked by Information Technology)
• Change passwords when prompted (for example, every 90 days), or if your password is compromised

Saving, transmitting, and downloading information
• Avoid saving ePHI data on your PC or other devices (C: drive - hard drives) or to removable/portable media (e.g. memory sticks, CDs, zip drives)
• INCLUDES: EJGH, vendor, and your personal PC or devices
• EXCEPTION: Physicians may store their patient's data
• Save to your department's networked share drive
• Do not send emails with ePHI information to anyone outside the organization
• Do not transmit ePHI data unless it has been encrypted and password protected
• Avoid downloading unauthorized software or any screen savers (as they could have viruses that infect systems)
• Recognize phishing emails and do not open associated attachments – report to phish@lcmchealth.org
• Malicious software is often brought into an organization through email attachments and programs that are downloaded from the internet

Disposal, retention, and termination
Personal PCs and devices that have ever accessed the EJGH network:
• Prior to disposing, permanently remove (sanitize) ePHI or business confidential information from the PC or device
• Retain HIPAA related information for 6 years

Upon termination
• Return all electronic media and EJGH property upon termination
• Do not retain, give away, or remove any ePHI or business confidential information

HIPAA Privacy Rule
The HIPAA Privacy Rule was created to protect the privacy of healthcare patients.

The HIPAA Privacy Rule protects the privacy of patients by:
• Limiting how personal health information can be used
• Requiring security of health records in paper, electronic, or other form
• Letting patients know what their rights are

The HIPAA Privacy Rule allows patients to:
• See and get copies of their health records (with some exceptions)
• Ask for corrections to their health records – for example, if they spot errors. Find out and limit how their personal health information may be used
• Ask for and receive information about how their personal health information has been used in the past (with some exceptions)
• Complain if they believe their HIPAA privacy rights have been violated

Team member responsibilities for protected health information (PHI)

Use and disclose PHI only to perform your job. Protect the PHI in whatever form it exists (verbal, paper, electronic).

PHI can be found:
• On patient's chart
• In conversations by caregivers
• On arm bands
• On prescription bottles and pharmaceutical labels
• On lab phlebotomy sheets
• On computer screens
• On billing statements
• In mailings to patients, faxes, or printed emails
• On x-rays

Methods to protect PHI:
• Lock cabinets or rooms that contain PHI
• Cover/close chart binders
• Turn printed information face down
• Properly dispose of materials containing PHI (i.e., Paper documents should be recycled or shredded. Plastic or non-recyclable materials and zip cards should be destroyed by shredding, breaking, cutting, tearing)
• Place/store equipment containing PHI in a secure location (COWs in the department corrals, fax machines in nursing station)
• Do not leave unsecured PHI unattended
• Don't discuss patients or their care in public locations such as elevators, cafeterias, etc.

PHI may be used or disclosed:
• For treatment purposes
• For the purpose of obtaining payment for treatment
• To perform healthcare operational tasks (quality assessment, competency determination, fraud and compliance programs, management activities)
• When you have the authorization of the patient or the patient's personal representative
• When permitted or required by law (subpoenas, mandatory reporting, health oversight, organ donation, some law enforcement actions, public health activities, disaster relief efforts, government actions for national security, etc.)
• Any other uses or disclosures that do not fall into the above categories are violations of the HIPAA Privacy Rules

Some do's and don'ts for HIPAA privacy
Do:
• Speak quietly when likely to be overheard by someone not involved in the care of the patient
• Avoid using patient names in public areas
• Share health information needed to treat the patient

Don't:
• Share PHI with people who don't have a need to know
• Share PHI that you are not authorized to disclose
• Let privacy issues keep you from treating the patient properly

Who can you contact for questions regarding HIPAA privacy?
• Your supervisor/director
• Administrative/House representatives
• LCMC Health's compliance officer

You may also review the hospital's HIPAA administrative policies for answers to many of your HIPAA privacy questions.

Our East Jefferson way

Hospital Ethics Committee
The Hospital Ethics Committee (HEC) is an administrative committee which provides information, guidelines, and advice to medical staff, hospital personnel, patients, and patients' representatives relative to the area of ethics. More details are available on Inside EJ.

Solicitation and fundraising
Solicitation by any individual for funds, memberships or causes and the distribution of non-work-related literature is prohibited in all patient care and work areas of the hospital. Team members may not sell items of any kind to coworkers while at work or distribute any written material not directly related to the delivery and administration of healthcare. Hospital fundraising activities are exceptions to this policy.

If you observe solicitation or distribution of unauthorized literature, you should immediately report it to your supervisor.

Gifts and tips
Occasionally, a patient or guest may offer you a gift or tip to thank you for the excellent care you have provided. Give your thanks for the thoughtfulness but explain that it is against hospital policy to accept the gift or tip, and that providing the best care possible is part of your work as an EJGH team member.

You may also refer the patient or guest to the Foundation if he/she would like to donate to the hospital. The Foundation can be reached at **504.780.5800** for any additional information regarding donations to the organization.

Employment of relatives

The hospital welcomes employment applications from your family members and friends. They will receive the same courtesy and consideration as all other applicants who apply to work with us. Employment of relatives in the same department or division, however, is discouraged. Team members may not work under the supervision of a relative. If you have questions or concerns regarding this policy, please speak to your supervisor.

Conflict of interest

Team members should not engage in any activities, transactions, or business relationships that are incompatible with the impartial, objective, and effective performance of their assigned duties. Team members are encouraged to disclose any other employment or interests that might conflict with their jobs at East Jefferson General Hospital.

Unions

EJGH strongly believes in the ability of the hospital and its team members to work together to reach our common goals without the barriers created by a union or other outside third party. At EJGH, our number one priority is consistently providing the highest quality patient care.

NRC Health

Our hospital uses NRC Health as the survey tool to chart our patient satisfaction scores. It surveys a sample size of our patients and record how they score us in the areas of care, communications, and overall hospital experience. These scores are used to quantify the quality of care we provide. More importantly, these scores directly impact the rate of pay we receive for our services. Hospitals with higher satisfaction scores get paid more for a procedure.

Community outreach

In 1971, we opened our doors as a community hospital. Since then, community outreach has been a cornerstone of our culture. We provide screenings, seminars, and classes on a variety of topics. Through our Community Partner program, area businesses provide discounts to EJGH team members. We also sponsor several events throughout the community. We take great pride in our role as a positive corporate citizen.

Volunteerism

Our hospital has a staff of nearly 150 volunteers who play a vital role in our excellence. Each summer, our Junior Volunteer program allows 14–18-year-olds from throughout the region to fulfill their community commitments while gaining valuable exposure to the workplace. We have EJGH-approved volunteer opportunities on Inside EJ that give our team members opportunities throughout the year to support our community in a variety of ways.

Patient-centered care

Throughout the years, we have enjoyed a reputation as a hospital that delivers excellent care in a very personalized way. We believe in the philosophy that the patient comes first and is always the primary focus of our policies and procedures. Our patient-centered care initiative is one way to ensure that we are always thinking about making the patient experience as engaging, painless, positive, and pleasant as possible.

Parking

The Esplanade Parking Garage is the primary parking location for team member parking. Refer to the parking policy for more specific details pertaining to evening/night/weekend shifts parking and other parking exceptions or accommodations. All vehicles must display a parking decal issued by EJGH's Public Safety Department. Parking in patient, visitor, or restricted areas may result in fines and disciplinary action.

Smoking

East Jefferson General Hospital is a non-smoking and tobacco-free organization as a commitment to the health and safety of our patients, visitors, and staff. The use of any tobacco and/or smoking substance, including electronic cigarettes, is prohibited on all Hospital Properties (inclusive of grounds, parking garages, and surface lots) on and off campus and adjacent properties. Additional details can be found in Administrative Policy ADMIN 15.

Environment of care

Scope
East Jefferson General Hospital's Safety Management Plan applies to the hospital building and any offsite areas. The scope includes, but is not limited to, the following safety-related items: activities, policies and procedures, monitoring and evaluating activities, education, and performance improvement.

Safety incident or concern
A safety incident or concern can include but is not limited to a guest/visitor fall, a guest/visitor injury, water on the floor, or an elevator malfunction. Report any safety incident or concern to the Public Safety Department at 504.503.4059. For hospital emergencies dial ext. 4111.

Team member safety
Team members have the right to work in a safe and secure environment. EJGH is committed to providing this environment through our security, infection prevention practices, and the team member Health Department.

Infection prevention practices
The Infection Control Practices manual is available on Inside EJ. If you have any questions, contact the Infection Prevention Department at 504.503.4228.

Universal/ Standard Precautions (Policy IC-2): shall be used by team members when rendering care to all patients and performing tasks with potential for exposure to blood/body fluids.

Handwashing
Handwashing is the single most important thing you can do to prevent the transmission of organisms that cause infections.

Hands should always be washed before and after contact with each patient using liquid soap and lathering hands for at least 15 seconds before rinsing. Antibiotic hand cleaners, which are applied like lotion, can be very effective when sinks are not readily accessible for handwashing.

Red bag practices
All items saturated with blood or body fluids should be disposed of in a red bag. Gauze that is not saturated, IV fluid bags, gloves, and Band-Aids with a spot of blood may be disposed of in the regular garbage.

Exposure to blood/body fluids by needle stick or splash
Contact your supervisor immediately, who will coordinate treatment with Team Member Health and the Emergency Dept. If prophylactic medication is needed, it must be started **within two hours** of exposure. **Do not wait!**

Team member injury
If you are injured on the job, report to your supervisor immediately. In case of an emergency, go directly to the Emergency Department.

All injuries will be reported in **BSafe**, the Hospital's Incident Reporting System. Care and treatment will be coordinated with LCMC Health's Leave Management Team and Team Member Health.

Security management plan

Scope
The Security Management Plan provides security services for team members and guests, including offsite locations. It provides for a secure environment designed to reduce the risk of injuries and loss of property for guests, physicians, and team members.

Identification process
• An identification process for patients, visitors, and team members is provided to ensure safety of all patients, guests, and team members
• Team members are required to wear the approved name badges at all times
• Contractors are required to use the appropriate color-coded identification that is issued by the Construction Services Department
• All other vendors/salespersons are required to have identification issued by the Materials Management Department
• Physicians must have name on lab coat or name badge
• A plastic wristband identifies patients; wrist and ankle bands identify newborns
• All other persons who do not have a hospital-authorized identification badge are considered visitors
• All others attempting to access restricted areas or view patient charts should be stopped and questioned

Controlled access
Sensitive areas: Specific areas in the hospital are designated as sensitive and have restricted access. Team members are granted access to these areas based on their department and job duties. Access to a sensitive area is determined and granted by the Public Safety Department ID Office.

Hospital access: The Public Safety Department patrols the areas of the campus 24 hours a day. Every night at 9 pm, a number of entrance doors into the hospital are locked, and access into the facility is reduced to a small number of entrances. You can exit through these doors, but you cannot use them to reenter. Beginning in 2024, after 9 pm, the Canal Garage Ground Link entrance that connects the Esplanade Garage and Canal Garages to the hospital on the east side will require employee badge access, the Hudson Garage second floor Domino Pavilion entrance will remain open 24 hours

a day, and the Emergency Department Hudson Street entrance on the first floor will remain open 24 hours a day. All doors locked at night will be unlocked at 5 am the next morning.

Workplace violence
EJGH supports a proactive warning system to improve patient, visitor, and team member safety during and after a threat of violence. Any team member hearing a direct or implied threat shall report this to his/her supervisor, who will promptly report the threat to the Public Safety Department if on campus or call 911 for off- campus sites. If there is imminent danger to life, the call can be made directly to Public Safety (4059) if on campus or call 911 for off- campus sites; then the team member should notify his or her supervisor. Follow-up will be made by the workplace violence support team.

BSafe
BSafe is LCMC Health's incident reporting system, designed to improve the health and safety of our team members and patients. As our system continues its journey toward becoming a high-reliability organization, we must work together to enhance our culture of safety and report all safety events.

BSafe serves as the incident reporting platform for all LCMC Health facilities. BSafe allows for integration with Epic and feedback on reported incidents. All team members have access to the BSafe system via the hospital intranet and desktop icon. The following are examples of safety events that should be reported in BSafe:
• Any event or situation that could have resulted in an accident, injury, or illness, but did not, either by change or through timely intervention
• Unexpected serious occurrences that involved death, physical injury (no matter how minor), or psychological injury of a patient or team member.
• Team member injury
• Complaint or grievance
• Delays in care
• Patient elopement
• Disruptive behavior from a patient, visitor, team member, or physician
• Infection control concerns

Hazardous materials and waste

The Hazardous Materials and Waste Management Plan addresses control of hazardous materials and waste. It provides for a physical environment that is safe for the handling, use, and storage of hazardous materials and waste. The plan defines processes for managing all materials and waste that require special handling to address identified occupational and environmental hazards.

Safety Data Sheets (SDS)

The SDS manual can be found on **Inside EJ** You can refer to this manual for material safety data sheets for each hazardous material used by your department. These sheets are provided because of the Right to Know Act. All team members have the right to know what hazardous materials they are exposed to in the workplace. Each sheet indicates what to do in case of spill and/or exposure. Questions or concerns regarding Material Safety Data Sheets can be directed to the Facilities Management or Materials Management Teams.

Emergency preparedness

It is important that you learn your specific role in each emergency. Speak to your supervisor about your role/duties in the case of an emergency.

Emergency codes
• **Code Blue** – respiratory / cardiac arrest
• **Code Red** – fire / smoke
• **Code Yellow** – mass casualty / patient surge
• **Code Grey** – severe weather
• **Code White** – violence / security issue
• **Code Pink** – infant / child abduction
• **Code Orange** – hazardous material incident
• **Code Black** – bomb threat
• **Active Shooter** – shooter on premise (Run, Hide, Fight)
• **Dr. Flight** – patient elopement (including rehab and PEC/CEC patients)
• **Announcements** – plain language (boil water advisory, internal flood, telecommunication outage)

Code Red: fire action plan

Code Red is the term used to describe and report any fire or smoke emergency. Activate fire alarm when you SEE fire or smoke. The alarms are located near the exits. Be sure to locate all the fire alarm pulls in your designated area(s).

East Jefferson General Hospital's Fire Plan is designed to reduce the possibility of injury, loss of life and property by fire. All departments are affected by the Hospital Fire Plan policy.

RACE is the method used to respond to a Code Red Emergency
R – Rescue – everyone from the area where fire or smoke is present
A – Alarm – by pulling the nearest pull station and calling 4111
C – Close – All doors and windows
E – Extinguish small fires if safe to do so or evacuate the area

Fire extinguishers
Fire extinguishers are located throughout the building. East Jefferson General Hospital uses multi-purpose fire extinguishers when responding to a fire. A multi-purpose fire extinguisher can extinguish all fire types: class A (wood & paper products), class B (combustible liquids), and class C (electrical). Instructions for use are located on each fire extinguisher.

PASS is how you use a fire extinguisher
P – Pull the pin
A – Aim the hose
S – Squeeze the handle
S – point and Sweep from side to side

Code Grey: severe weather emergency
The hospital shall respond appropriately during severe weather in order to maintain hospital services and provide emergency treatment during conditions that impose loss of outside supportive resources or utilities. Speak to your supervisor about your role and duties.

Code Grey response level guide

LCMC Health

Level	Event type	Expect	Actions
I Short notice events	**Heavy rain / thunderstorm Severe thunderstorm Risk 1 – 3**	1. Potential street flooding 2. Normal route may be impacted 3. Potential car damage if street floods 4. Patients may self cancel appt/test 5. Staff on site may not be relieved at shift change	1. Don't drive through flooded streets 2. Take alternate route to work 3. Move car if street flooding possible 4. Wear rain boots, umbrella, rain coat 5. Communicate concerns with supervisor
	Severe thunderstorm Risk 4 – 5	In addition to above: 1. Potential for flash flooding 2. High winds	In addition to above: 1. Monitor weather and take appropriate safety actions
	Tornado	1. Short notice/no notice 2. Temporary shelter in place	1. Shelter in place inside building 2. Move away from windows if in direct path 3. Consider delay travel or use alternate route
II Limited notice events	**Ice storm**	1. Possible road, overpass, or bridge traffic impacted 2. Patients may self cancel appt/test 3. Non-critical services may delay start or cancel services 4. Short term voluntary sheltering may be offered for staff scheduled to work 5. No plan for lockdown	1. Take alternate route to work to avoid closed or impacted roads 2. Talk to your supervisor regarding any travel issues and if you need short term voluntary sheltering (See your hospital's *Emergency Operations Plan - Sheltering Plan*)
	Tropical storm Tropical depression	1. Rain and wind event 2. No mandatory evacuation 3. No plan for lockdown - may be evaluated based on path, speed, and potential impact 4. Employee short term voluntary sheltering may be offered for staff scheduled to work 5. No hospital decompression	1. Take alternate route to work 2. Talk to your supervisor regarding any travel issues and if you are scheduled to work and need short term voluntary sheltering (See your hospital's *Emergency Operations Plan - Sheltering Plan*)
III Notice events	**Hurricane Category 1-2**	1. Potential direct impact to city 2. Voluntary evacuations outside the levee protection system 3. Possible state emergency declaration 4. Decision for lock down will be made based on path, forward speed, and potential impact.	In addition to Level II event actions: 1. Update information in Emergency Communication System 2. Staff prepare home, family, and pets 3. If no lockdown, evaluate if short term voluntary hospital sheltering is needed
	Hurricane Category 3-5	1. Direct impact to city 2. Mandatory evacuations 3. State/federal emergency declaration 4. Hospital decompression 5. Lock down typically 12 hours before landfall 6. Activation of *Disaster Severe Weather Response Staffing Policy*	1. Update information in Emergency Communication System 2. Essential Team A staff prepare home, family, and pets

For more details, review our Severe Weather Plan

Code Pink: newborn safety/abduction

The hospital shall ensure that the identification and safety of newborns and pediatric patients is addressed, and that all hospital team members and outside law enforcement agencies are notified of an abduction appropriately and in a timely manner. All departments, team members, and medical staff are affected by this policy.

The hospital has identified the "No Baby Zone" as all areas of the hospital, except specific areas on the 4th floor. Persons accompanying an infant with an armband who is not in a bassinet in the "No Baby Zone" should be stopped, questioned, and ID checked. The adult and infant should have matching armbands. The hospital maintains and monitors an Infant Security System on the 4th floor of the hospital. Access into and out of this floor is restricted and monitored 24 hours a day. Any triggers of the Infant Security System will immediately set off a hospital-wide alarm. When the alarm is activated, there is an overhead announcement, "Hospital Alert – Code Pink." When a Code Pink is called, all team members should report to the nearest public hallway/corridor or exit and remain in place until the code is cleared.

Active Shooter

In the event of an active shooter, Run, Hide, Fight is best practice and is used across all LCMC Health facilities. Safe rooms are identified with a small orange sticker at the top of the door frame. You will also receive department-specific active shooter training annually.

Patient safety

EJGH Safety First Program - patient safety tools

Designed to educate team members on their role in preventing patient harm.

S – Support the team
A – Always speak up for safety
F – Focus on the task
E – Effective communication every time
T – Take your time
Y – You are the solution

The 12 Error Prevention Tools:

S – Support the team:
    Peer checking
    Debriefing

A – Always speak up for safety:
    Use ARCC
        Ask questions
        Request a change
        Voice a concern
        Use the chain of command

F – Focus on the task:
    STAR – stop, think, act, review
    No distraction zones

E – Effective communication every time:
    Read and repeat
    Alpha numeric language
    Clarifying questions
    Effective handoffs
    SBAR – situation, background, assessment, and recommendation

T – Take your time:
    Validate and verify

Y – You are the solution:
    Learn and use your safety tools

The Joint Commission (TJC) National Patient Safety Goals

Focus of The Joint Commission (TJC) National Patient Safety Goals (NPSG): Improve patient safety and reduce risks to patients. The safety of the patient involves all team members and physicians both directly and indirectly related to caring for them.

Hospital National Patient Safety Goals
This is simplified for the public. The exact language of the goals can be found at jointcommission.org

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

Improve Staff Communication
NPSG.02.03.01 – Get important test results to the right staff person on time.

Use Medicines Safely
NPSG.03.04.01 – Before a procedure, label medicines that are not labeled. For example, medicines in syringes, cups, and basins. Do this in the area where medicines are supplies are set up.
NPSG.03.05.01 – Take extra care with patients who take medicine to thin their blood.
NPSG.03.06.01 – Record and pass along correct information about a patient's medicines. Find out what medicines the patient is taking. Compare those medicines to new medicines given to the patient. Give the patient written information about the medicines they need to take. Tell the patient it is important to bring their up-to-date list of medicines every time they visit the doctor.

Use Alarms Safely
NPSG.06.01.01 – Make improvements to ensure that alarms on medical equipment are heard and responded to on time.

Prevent Infection
NPSG07.01.01 – Use the hand cleaning guidelines from the Centers for Disease Control and Prevention or the World Health Organization. Set goals for improving hand cleaning. Use the goals to improve hand cleaning.

Identify Patient Safety Risks
NPSG.15.01.01 – Reduce the risk for suicide.

Prevent Mistakes in Surgery
UP.01.01.01 – Make sure that the correct surgery is done on the correct patient and at the correct place on the patient's body.
UP.01.02.01 – Mark the correct place on the patient's body where the surgery is to be done.
UP.01.03.01 – Pause before the surgery to make sure that a mistake is not being made.

Performance improvement

EJGH is committed to continuous process improvement. PDCA (Plan-Do-Check-Act) is EJGH's performance improvement model. Everyone has a role in performance improvement. The PDCA cycle is a four-step model for carrying out change. One of the basic principles of quality is continual improvement. This means that quality is a never-ending project. Just as a circle has no end, the PDCA cycle should be repeated again and again for continuous improvement.

Plan

Act

Do

Continuous improvement

Check
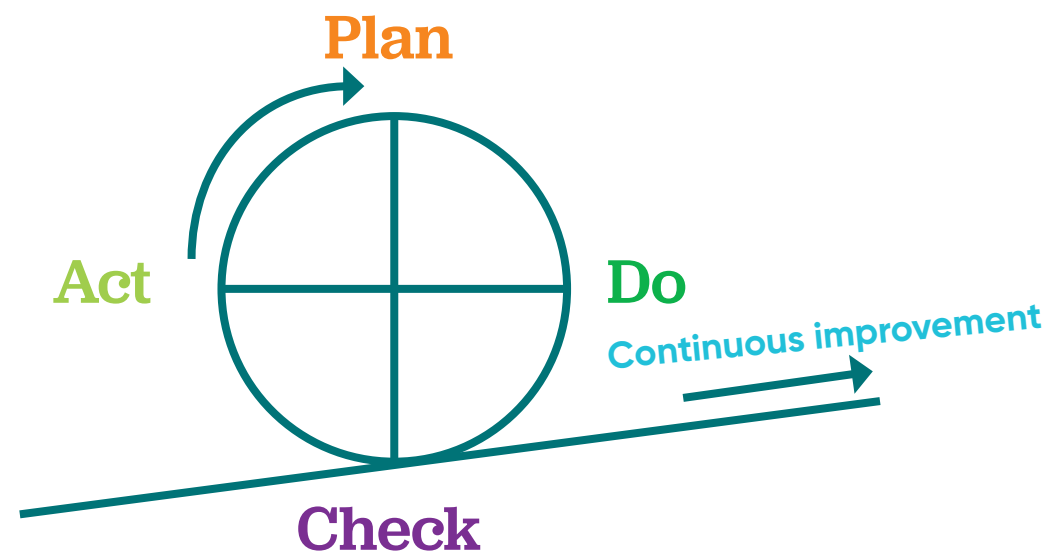
When to use PDCA
- As a model for continuous improvement
- When starting a new improvement project
- When developing a new or improved process, product, or service
- When implementing any change

Procedure for implementing PDCA
Plan: Decide what you want to improve and how you plan to improve it
Do: Try out/test your plan
Check: Make sure your plan worked by verifying that the goals set are achieved
Act: Depending on the results that occurred in the previous step:
    Change the plan and try again if not successful
    Spread the plan if successful

Begin PDCA again with the next improvement. The results of these projects are escalated through Quality Council. In some departments everyone is involved; in others there is a department committee. When you have an idea for a process improvement, ask your supervisor.

LEAN
LEAN is a process through which we are always examining and re-examining how we do things. If you see that something could be done more efficiently, we encourage you to bring it to a supervisor's attention.

East Jefferson General Hospital
Frequently called numbers

Main number	504.454.4000

Emergency numbers

Stat	4111
Fire	4111
Disaster hotline	504.503.6400
Adverse drug event hotline	4012
Ambulance dispatcher	4444
UNITY voice mail	504.503.6118
Billing inquiries	504.503.6225
Credit union	504.736.6144
Emergency department	4377
Environmental services	4318
HealthFinder	504.503.5000
Info systems help desk	4847
Laboratory	5662
Maintenance	4236
OBV patient rooms	504.503.57 + last two digits of room #
Patient room	504.503.4 + room #
Human Resources	5940
Pharmacy	4864
Radiology	4314
Safety/security	4059
Team member health	504.503.4280
Telephone repair	4847

For out of area calls or cell phones, dial 504 area code first.

Welcome to our team

Healthcare with heart

East Jefferson
General Hospital
LCMC Health