Welcome to UC Irvine Health

This packet contains important information to enable you to have a positive clinical experience. Please take the time to review the contents of this packet and use this information as a reference. Once you have reviewed the information, you may direct any questions to Susan Greco, (contact information below).

Department of Nursing Quality, Research & Education

<table>
<thead>
<tr>
<th>Director</th>
<th>Clinical Nurse Specialists</th>
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<tbody>
<tr>
<td>Donna Grochow</td>
<td>Khaled Al Eid – Med/Surg</td>
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<td>Maurice Espinoza – Critical Care</td>
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<tr>
<td>Manager</td>
<td>Robin Koeppel – NICU</td>
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<tr>
<td>Charlene Miranda-Wood</td>
<td>Lisa Moores – Neuro</td>
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<thead>
<tr>
<th>Clinical Nurse Educators</th>
<th>Administrative Assistants</th>
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<tr>
<td>Erin Avalos – Med/Surg</td>
<td>Susan Greco</td>
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<td>Johanah Carrera – Perinatal</td>
<td>Massiel Luizaga-Seeger</td>
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<td>Sherry Carter – Med/Surg/Peds</td>
<td>Neidy Brito</td>
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<td>Kelly Greear – Emergency Dept</td>
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<td>Michelle Grywalski – Critical Care</td>
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<td>Jennifer Hoff – Med/Surg</td>
<td>Administrative Assistant Analyst</td>
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<td>Nicole Jasso – NICU</td>
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<tr>
<td>Susan Magorno – Med/Surg</td>
<td>Susan Greco</td>
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<tr>
<td>Nikki Martin – Ambulatory</td>
<td>Massiel Luizaga-Seeger</td>
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<td>Cheryl Simkins – Critical Care</td>
<td>Neidy Brito</td>
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<table>
<thead>
<tr>
<th>Contact</th>
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<tbody>
<tr>
<td>Susan Greco</td>
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<tr>
<td>101 The City Drive</td>
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<tr>
<td>Bldg 22A, Room 3104J</td>
</tr>
<tr>
<td>Orange, CA 92868</td>
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<tr>
<td>(714) 456-5975 Office</td>
</tr>
<tr>
<td><a href="mailto:sgreco@uci.edu">sgreco@uci.edu</a></td>
</tr>
</tbody>
</table>
Hospital Access Badges

Preceptee badge distribution occurs on the agreed upon date between Susan Greco and the preceptee. The badges must be worn at all times when on hospital grounds. **Badges must be returned to Susan Greco in Bldg 22A Rm 3104J, not the Security Department by the end of the preceptorship.** Students are responsible for ensuring proper return of their badges. **If your badge is not returned one week after the preceptorship end date your school/instructor and the Dean of Nursing will be contacted.**

**Student badge:** Access to hospital, staff elevators, unit doors, and staff lounges.

*If your badges do not allow access to the above areas, please contact Susan Greco.*

**If a badge is lost, please contact Susan Greco immediately. There will be a $50 fee for any lost or misplaced ID badges.**

Parking at UC Irvine Health

The Parking Office (Building 51) is open Monday thru Friday, from 7:15 a.m. to 4 p.m. The telephone number is 714-456-5636. For after-hours leave a message, or for immediate assistance, please call UC Irvine Campus Dispatch at 714-456-5493. There are a few parking spaces just outside the parking office marked reserved for your convenience. Stop in and purchase passes prior to parking at the Christ Cathedral. **Do not park in a numbered space.**

For more information, please contact:
Nelly Cruz, Parking Manager
ncruz@uci.edu

**Which parking pass do I purchase?**
Purchase your passes before parking in The Christ Cathedral lot.

Purchase MB-General Staff, Students permit
- Cost: $4/Daily
- Valid Monday thru Friday at The Christ Cathedral parking lots 3 and 4 on the corner of Lewis and Chapman Avenue. Please refer to The Christ Cathedral map for lots (highlighted in yellow) where you may park. (see last page)
- **You will need to purchase the passes prior to parking at The Christ Cathedral.**
- **Weekend and night shift parking only:** Please park in the visitor’s parking structure on Dawn Way. You will still need to purchase parking passes to park in the structure as well.

**How do I get from The Christ Cathedral to the Medical Center?**
Shuttle service is available to bring you back and forth from The Christ Cathedral to the Medical Center from 5:00 am to 8:30 pm., Monday thru Friday.
Professional Standards of Conduct  *(GA Policy: Professional Standards of Conduct)*

- Personal disclosures, other than friendly conversation by staff are indicated only when pertinent to the patient’s health and wellbeing
- Staff will refrain from acting possessive about select patients or giving special non-clinical attention to any patient or family member that is not given to all
- Staff will always treat patients, patient’s families, and co-workers with respect including respect for their privacy
- It is expected that discussing non-work related personal information with coworkers will be done in private
- Plans to recognize patients or family members for birthdays, holidays, or other celebrations, while well intentioned, can create a variety of problems. All such activities will be organized through a pre-designated person such as the Director of Nursing, Child Life, or clinical social worker
- “Special needs” situations involving a patient should be referred to the manager of the department or clinical social worker
- Staff will not transport, socialize, or fraternize with patients when on or off duty unless there is a pre-existing personal relationship
- Staff will not assume direct care for family members, significant others or friends unless approved by their supervisor
- Staff shall refrain from disclosing identifying information about themselves to patients.
- Staff who are off-duty are strongly encouraged to avoid calling or coming to work to check on patients or other work responsibilities unless the situation is exceptional
- When staff experience difficult life stressors, staff will rigorously guard the privacy of the coworker

Dress Code

- Promotes employee and patient safety
- Portrays a professional image of care providers to patients, visitors, and colleagues
- Tattoos must be covered to the fullest extent possible at all times
- May wear a solid color t-shirt or turtleneck top that matches the uniform or a white T-shirt under uniform top
- Jewelry (including pierced jewelry) is not to interfere with duties or pose a hazard. It is to be understated, small and kept to a minimum
- Multiple earrings (more than two per ear) are not allowed. Direct patient care providers should avoid dangling earrings as a potential safety hazard
- Body piercing jewelry (including tongue studs, nose rings, eyebrow rings, etc.) may not be worn in any visible pierced body part except ears. A visible body part is defined as any area not covered by normal clothing

Cell Phone Use

- Should be primarily for work-related activities
- Must be in silent or vibration mode at all times
- Limit personal use to break and lunch periods in non-patient care areas whenever possible
- No cell phone photography of patients is allowed
Health Insurance Portability and Accountability Act (HIPAA)

- Do not take any portion or copies of the patient chart out of the medical center for any reason. No paperwork with patient identifying information leaves the hospital.
- There is a legal and ethical responsibility to protect the privacy of the patients, employees, physicians and visitors. The indiscriminate or unauthorized review, use, or disclosure of medical, personal, or business information regarding any patient, employee or visitor is prohibited.
- The expectation to protect health information applies to everybody that has access to the healthcare environment, whether an employee, physician, volunteer, student, intern or contractor. Your signature on the Confidentiality Agreement establishes your commitment and obligation to the protection of information.

Social Media

- No protected Health Information, or information that could be used to identify a patient or combined with other publicly available information to be used to identify the patient, should ever be posted to an internet site, or discussed in a social networking site.

Public Relations Performance Standards

Service Excellence Standards are represented by the acronym UCICARE:

- **Understanding:** Understanding the wants and needs of the patients we service is essential to providing excellent care.
- **Communication:** The four E’s of communication (Engage, Empathize, Educate, Enlist) helps us gain understanding by listening attentively to both verbal and non-verbal messages.
- **Involvement:** Involving others increases their understanding and allows them to make informed decisions and appropriate choices.
- **Commitment:** Commitment to our organization and our work is essential to creating a successful and healing atmosphere.
- **Action:** The actions we take demonstrate our competence, professionalism, and attitude.
- **Respect:** Respect will be demonstrated for all individuals, regardless of culture, class, or beliefs.
- **Environment:** Maintaining a safe and clean environment demonstrates our pride and makes a powerful impression on our patients, their families, and our staff.

Service recovery standards

Resolution of customer complaints utilizes the acronym LAST:

- **Listen:** Actively listen to the customer’s complaints and concerns to identify their needs.
- **Apologize:** An apology does not mean an admission of guilt. It is an expression that you are personally sorry that your customer is unhappy with their service.
- **Solve:** Solving means to take action at the point of service. Enlist help from others in the organization.
- **Thank:** Thank the customer for taking the time to tell you about their experience and giving you the opportunity to make a change.
Standard Precautions
Standard precautions apply to all patients, regardless of suspected or confirmed infection status, in any setting in which healthcare is delivered. Assume every person is potentially infected.

Sequence for donning Personal Protective Equipment (PPE)
- Gown – Fully cover torso from neck to knees, arms to end of wrist, and wrap around the back. Fasten in back of neck and waist
- Mask or respirator – Secure ties or elastic bands at middle of head and neck. Fit flexible band to nosebridge. Fit snug to face and below chin. Fit-check respirator
- Goggles or face shield – Place over face and eyes and adjust to fit
- Gloves – Extend to cover wrist to isolation gown

Sequence for removing PPE
- Gloves – Outside of gloves is contaminated! Grasp outside of glove with opposite gloved hand. Peel off. Hold removed glove in gloved hand. Slide fingers of ungloved hand under remaining glove of wrist. Peel glove off over the first glove. Discard gloves in waste container
- Goggles or face shield – Outside of goggles or face shield is contaminated! To remove, handle by head band or ear pieces. Place in designated receptacle for reprocessing or in waste container
- Gown – Gown front and sleeves are contaminated! Unfasten ties. Pull away from neck and shoulders, touching inside of gown only. Turn gown inside out. Fold or roll into a bundle and discard
- Mask or respirator – Front of mask/respirator is contaminated! Grasp bottom, then top ties or elastics and remove. Discard in waste container

Hand Hygiene
Use soap and water – scrub at least 15 seconds
- When hands are visibly dirty or contaminated with proteinaceous material or are visibly soiled with blood or other body fluids
- Before eating
- After using a restroom
- After care of a patient on “Spore Precautions” or after contact with the patient’s environment in the “Spore Precautions” room

Use alcohol-based hand rub – rub hands, covering all surfaces, until hands are dry
- Before having direct contact with patients
- Before donning PPE
- Before inserting indwelling urinary catheters, peripheral vascular catheters or other invasive devices
- After contact with a patient’s intact skin (when taking vitals, lifting patient, etc.)

No artificial fingernails. Fingernails are not to exceed ¼ inch beyond fingertips
Medication Safe Practice

Safe injection practices include:

- Do not administer medications from a syringe to multiple patients, even if the needle or cannula on the syringe is changed
- Use fluid infusion and administration sets for one patient only and dispose appropriately after use. Consider a syringe or needle/cannula contaminated once it has been used to enter or connect to a patient’s intravenous infusion bag or administration set
- Use single dose vials for parenteral medications whenever possible. Do not administer medications from single-dose vials or ampules to multiple patients or combine leftover contents for later use
- Do not use bags or bottles of intravenous solution as a common source of supply for multiple patients

Medication Highlights

- Students are required to have either their instructor or the healthcare provider they are working with, in attendance at the bedside when they are administering medications (no exceptions)
- Read the label three times prior to administration
  - Before removing from the storage area
  - Before preparing medication
  - Before returning to storage area
- Two licensed staff independently conducts double-check for narcotic and sedative continuous IV drips, PCA, insulin, therapeutic IV heparin, and chemotherapy
- Observe the patient taking the medication
- Medications that come in single dose containers that are removed from the Pyxis and not administered to the patient should be returned to the Return Bin at the Med Station. Select “Print Slip”, wrap the slip around the return item and drop in the Return Bin
- Scrub diaphragms of locks and injection ports with 70% isopropyl alcohol prior to injection for the count of 10 with the patient

Falls

Patients who are at high risk for falling may be identified by any of the following:

- Yellow armband
- Colored footwear – red
**Hand-off Communication**
Hand-offs will be conducted in a consistent manner using a standardized hand-off form or guideline. IPASS will be used.

<table>
<thead>
<tr>
<th>I</th>
<th>Illness Severity</th>
<th>• “Stable”, “watcher”, “unstable”</th>
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<tbody>
<tr>
<td>P</td>
<td>Patient Summary</td>
<td>• Summary statement</td>
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<td></td>
<td></td>
<td>• Event leading up to admission</td>
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<td></td>
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<td>• Hospital course</td>
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<td>• Ongoing assessment</td>
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<tr>
<td></td>
<td></td>
<td>• Plan</td>
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<td>A</td>
<td>Action List</td>
<td>• To do list</td>
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<tr>
<td></td>
<td></td>
<td>• Time line and ownership</td>
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<tr>
<td>S</td>
<td>Situation Awareness and Contingency Planning</td>
<td>• Know what is going on</td>
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<tr>
<td></td>
<td></td>
<td>• Plan for what might happen</td>
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<tr>
<td>S</td>
<td>Synthesis by Receiver</td>
<td>• Receiver summarizes what was heard</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Asks Questions</td>
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<tr>
<td></td>
<td></td>
<td>• Restates key action/to do items</td>
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**Patients on legal holds (e.g. 5150, 5250, etc)**
- Must have a sitter who is a UC employee. Nursing students cannot act as sitters
- Must be observed by staff member at all times, even when in bathroom
- Cannot leave the room unless going to an ordered test or procedure
- Staff must accompany patient to test/procedure
- Do not bring anything (supplies, equipment, etc.) into the patient room unless instructed and observed by the bedside nurse
- Do not give anything (medications, blankets, utensils, cups, food, etc.) to the patient unless instructed and observed by the bedside nurse
- Notify bedside nurse of any visitors requesting to enter patient’s room

**Protecting yourself from dangerous patients or visitors**
- Familiarize yourself with all of the unit exits
- Ask your nurse where the unit Code Grey (combative person) buttons are located and discuss the units’ Code Grey procedures
- Do not attempt to engage or deescalate any aggressive or hostile individuals
- Remove yourself from the situation and notify staff immediately
Codes and Paging

Dial extension **456-6123** and report Code (state the color) and its location (Building, Unit, and Bed Number)

<table>
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<tr>
<th>CODE POLICIES</th>
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<tbody>
<tr>
<td>Code Blue/White</td>
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<td>Code Gray/Silver</td>
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<tr>
<td>Code Orange</td>
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<tr>
<td>Code Pink/Purple</td>
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<tr>
<td>Code Red</td>
</tr>
<tr>
<td>Code Triage</td>
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<td>Code Yellow</td>
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Paging system: dial 9-506-pager number
Call Back: extension you are calling from, then # key

Fire Safety
Code Red is the code for fire. If you hear the operator page Code Red or you see a fire, immediately notify your nurse and take the following steps.

**R.A.C. E**
- **Rescue** – Remove all persons from danger
- **Alarm** – Pull the nearest fire alarm box. Call 456-6123 and tell the operator the exact location of the fire
- **Confine** – Confine the fire by closing all doors and openings
- **Extinguish/Evacuate** – Extinguish the fire if it is small and you have been trained to use a fire extinguisher. Evacuate when necessary or when ordered to do so

**P.A.S.S - Fire Extinguisher Use**
When using a fire extinguisher
- **Pull the pin**
- **Aim the nozzle**
- **Squeeze the nozzle**
- **Sweep back and forth at the base of the fire**