Welcome to

Mercy Medical Center!

This booklet was designed to provide you with some basic information about certain policies and procedures at Mercy Medical Center – Des Moines. You will receive additional information during your departmental orientation and through a LEARN module you will complete online within your first 90 days of employment.

Please take time to read and review the information provided here, and feel free to speak with your supervisor and/or mentor if you have any questions or need additional assistance.
Celebrating Our Values: Partners in Ministry

MISSION AND VISION

The Mission of Mercy Medical Center – Des Moines as a member of Catholic Health Initiatives, is to nurture the healing ministry of the Church, supported by education and research. Fidelity to the Gospel urges us to emphasize human dignity and social justice as we create healthier communities.

Mercy’s Vision is to provide a remarkable Mercy Experience to every person we are privileged to serve.

VALUES

Reverence: Profound spirit of awe and respect for all creation, shaping relationships to self, to one another and to God, and acknowledging that we hold in trust all that has been given to us.

Integrity: Moral wholeness, uprightness, honesty, sincerity as basis of trustworthiness.

Compassion: Feeling with others, being one with others in their sorrows and joy, rooted in the sense of solidarity as members of the human community.

Excellence: Outstanding achievement, merit, virtue, continually surpassing standards to achieve and maintain quality.
Patient Rights and Responsibilities

Please refer to the Patient Handbook for additional information.

Patients have both rights and responsibilities when it comes to their health and the health care services they receive. By including these lists of right and responsibilities in this patient handbook, we hope to assure you that Mercy is fair and responsive to patients’ needs; provides patients with credible and effective mechanisms to address their concerns; and encourages patients to take an active role in safeguarding their health.

PATIENT RIGHTS

As a patient at Mercy, or as the parent or legal guardian of a minor patient at Mercy, you have the following rights:

Respect and Nondiscrimination – You have the right to considerate, respectful and nondiscriminatory care from your physicians, nurses, health care professionals and other hospital employees. Mercy prohibits discrimination based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation and gender identity or expression. You have the right to:

- Receive care in a safe setting.
- Be treated kindly and respectfully by all hospital personnel.
- Exercise cultural and spiritual beliefs that do not interfere with the well-being of others or the planned course of your medical therapy.
- Be free from all forms of abuse, neglect, harassment, retaliation, humiliation, financial or other exploitation.
- Be free from restraint or seclusion of any form that is not medically necessary or that is used as a means of coercion, discipline, convenience or retaliation by staff.

Information Disclosure – You have the right to receive accurate and easily understood information about your health, treatment plan, health care team and facilities. If you speak a language other than English, have a physical/mental disability or simply do not understand something, assistance will be provided so you can make informed decisions about your care. You have the right to:

- Be informed of your rights before patient care is furnished or discontinued, whenever possible.
- Receive information about your rights as a Medicare beneficiary upon admission.
- Be informed of the hospital rules and regulations applicable to your conduct as a patient.
- Expect that a family member or representative and physician will be notified promptly upon your admission to the hospital.
- Receive visitors whom you choose, including, but not limited to, your spouse or domestic partner, another family member or a friend. You have the right to withdraw or deny consent at any time for any visitor.
- Identify a person who may be present for emotional support during your stay, unless that individual’s presence interferes with others’ rights or safety or is not in your best interest medically, therapeutically or legally. Your support person can make visitation decisions in the event you are unable to do so. (This support person may or may not be your surrogate decision maker or legally authorized representative. See page 28 of the Patient Handbook for more information on surrogate decision makers). Unless you indicate
otherwise, the person you identified for “Emergency Notification” during admission will be your designated support person.

- Not be required to prove the relationship between yourself and a visitor, nor to have visitors prove their relationship to you, unless you are unable to communicate your wishes and a disagreement occurs between two or more people over whether a particular individual should be allowed to visit.
- Know the name, identity and professional status of any person providing health care services to you, and to know who is primarily responsible for your care.
- Receive complete and current information concerning your diagnosis in terms you can understand (as a patient, when it is not medically advisable for you to receive such information, it will be given to an appropriate person on your behalf).
- Receive an explanation of any proposed procedure or treatment, including a description of the nature and purpose of the procedure, known risks or serious side effects and treatment alternatives.
- Have access or referral to legal entities for appropriate representation, self-help and advocacy support services.
- Know if your care involves any experimental methods of treatment and have the right to consent or refuse.
- Be informed about the type of pain to anticipate and pain relief measures.
- Be informed by your practitioners of any health-related concerns or instructions for you to follow upon discharge from the hospital.
- Examine your bill and receive an explanation of the charges regardless of the source of payment for your care.
- Choose to be placed on a No Calls/No Visitors status. See Corporate Policy 2.37 Patient Rights.

**Participation in Treatment Decisions** – You have the right to know all of your treatment options and to participate in decisions about your care. Your spouse, partner, parents, agent or other individuals you have designated may represent you if you cannot make your own decisions. You have the right to:

- Participate in developing and implementing your plan of care.
- Make informed decisions about your care.
- Access information regarding your condition unless medically contradicted.
- Consult a specialist at your request and expense.
- Accept medical care or refuse treatment to the extent permitted by law, and to be informed of the medical consequences of such refusal.
- Have advance directives, such as a Living Will or a Durable Power of Attorney for Health care, and have a health care team that complies with these directives (see section on “Advance Directives” for additional information).

**Access to Emergency Services** – You have the right to receive screening and stabilizing emergency services whenever and wherever needed if you have severe pain, symptoms or an injury that convinces you your health is in serious jeopardy. You have the right to:

- Receive evaluation service and/or referral as indicated by the urgency of your situation.
- Be given complete information regarding any decision to transfer you to another facility, if such a transfer is medically permissible, and understand the need for and alternatives to a transfer (the facility to which you will be transferred must first accept the transfer).
Pain Management Services – You have the right to pain prevention, relief and management services. You have the right to:

- Discuss pain relief options with your physician and nurses and work with your health care team to develop a pain management plan.
- Discuss any worries you have about taking pain medications with your physician and nurses.
- Report pain at any time and have your pain assessed by health care professionals who believe you and respond quickly with pain management.
- Notify your physician or nurses if your pain is not relieved and request to have your pain relief medication monitored and adjusted, if needed.

Confidentiality and Disclosure of Health Information – You have the right to talk in confidence with health care providers and to have your health information protected. You have the right to review and copy your own medical record and request us to amend your record if it is not accurate, relevant or complete. You have the right to:

- Have personal privacy concerning your own medical care program. Any discussion about your care, consultation among health care professionals about your condition, examination and treatment are confidential and should be conducted discreetly. Persons not directly involved in your care must have your permission to be present.
- Expect that all communications and clinical records pertaining to your care will be treated confidentially.
- Access information contained in your medical records within a reasonable time frame.
- Be informed at the time of admission of your right to decline being listed in the Patient Information registry.

Complaints and Appeals – You have the right to a fair, fast and objective review of any complaint you have against Mercy or your physician, nurse or other health care professional. This includes complaints about patient care and safety, waiting times, operating hours, the conduct of Mercy personnel and the adequacy of health care facilities. You have the right to:

- Use Mercy’s complaint process to submit a written complaint/grievance to 1111 6th Ave., Des Moines, IA 50314, or a verbal complaint/grievance to the Patient Representative, available by calling (515) 643-2861, or to your health care practitioners. If necessary, your complaint/grievance will be forwarded to the Patient Grievance Committee for review. You will receive a written or oral response from Mercy regarding your grievance within 7 – 10 days.
- If you feel your concerns about patient care and/or safety at Mercy have not been sufficiently addressed, you may contact The Joint Commission at 1-800-994-6610 or complaint@jointcommission.org.
- Refer quality of care concerns, premature discharge grievances or beneficiary complaints to KEPRO, which is the external peer review organization for hospitals in Iowa. You may send your concern in writing to KEPRO, 5201 West Kennedy Blvd., Suite 900, Tampa, FL 33609, or call 1-800-383-2856.
- Register complaints with the Health Facilities Division of the Iowa Department of Inspections and Appeals. You may submit your complaint in writing to the Iowa Department of Inspections and Appeals, Health Facilities Division/Complaint Unit, Lucas State Office Building, 321 E. 12th Street, Des Moines, IA 50319-0083. You may also fax your complaint to (515) 281-7106 or call 1-877-686-0027.
- Contact The Joint Commission’s Office of Quality Monitoring to report any concerns or register complaints about Mercy by calling 1-800-994-6610 or e-mailing complaint@jointcommission.org.
PATIENT RESPONSIBILITIES

As a patient at Mercy, or as the parent or legal guardian of a minor patient at Mercy, it is your responsibility to:

- Provide accurate and complete information about present complaints, past illnesses, hospitalizations, medication and other matters relating to your health – including advance directives – and report whether or not you clearly comprehend a contemplated course of action and its anticipated effects.
- Follow the treatment plan recommended by the practitioner primarily responsible for your care. This may include following the instructions of nurses and other health care professionals as they implement your practitioner’s orders and enforce the applicable hospital rules and regulations.
- Accept the medical consequences if you refuse treatment or if you do not follow your practitioner’s instructions. In the unlikely event you choose to leave the hospital against medical/physician advice, please inform your nurse, who will provide you with a release to sign.
- Follow hospital rules and regulations regarding patient care and conduct.
- Be considerate of the rights of other patients and staff, and assist in the control of noise and the number of visitors in your room.
- Photos, videos and audiotapes of staff are not permitted without consent.
- Assure that the financial obligations of your care are fulfilled as promptly as possible.

QUESTIONS/CONCERNS

If you have questions or concerns about your care, please speak to your nurse, the unit charge nurse or the unit nursing director. If you feel the need to discuss your concern further, you may contact Mercy’s Patient Representative at (515) 643-2861.

To access or release information in your medical record, please call Medical Records at (515) 247-4171 (for hospital records) or contact your specific clinic for medical information kept there.
Safety Management

BASIC SAFETY CONCEPTS/ISSUES:

The safety of patients, staff and visitors is extremely important to Mercy. Please become familiar with these basic safety concepts/issues and contact Mercy’s Safety Officer at (515) 247-3087 if you have any questions or concerns.

**Locked/Tagged-Out Equipment** – Employees should never attempt to use equipment that has been locked/tagged out. If the equipment is needed, please call the contact person listed on the tag or call the Maintenance Department (515) 643-2781 for assistance. DO NOT USE THIS EQUIPMENT.

**Safety Data Sheets (SDS)– Hazard Communication** – As a Mercy employee, you have the right to know and understand the identities and hazards of any chemicals you come in contact with at work. Each department/area maintains a hazardous material inventory list and ensures the appropriate SDS is available for each chemical listed. The SDS provides comprehensive information about a substance or mixture for use in the workplace. Information provided in the SDS include: identification; hazard identification; information of ingredients; first aid and fire fighting measures; handling and storage; exposure control (personal protection); physical and chemical properties; stability and reactivity; toxicological information; disposal; transportation; regulatory and other pertinent information. Mercy maintains the SDS on a web based program through a link on the Mercy Net. It is important to know how to access the SDS in your department/area.

**Hazardous Material and Waste Management** – In order to maintain a safe environment for patients, staff and visitors, all aspects regarding the delivery, handling, storage and disposal of hazardous material must be considered carefully. If a hazardous material spill occurs, contact Mercy’s Security Department at (515) 247-3111. Be prepared to give the location and type of chemical spilled.

**Fire Safety** – In case of fire, remember the RACE acronym:

- Race
- Announce/Alarm
- Contain
- Evacuate/Extinguish

When using a fire extinguisher, remember the PASS acronym:

- Pull the pin
- Aim at the base of the fire
- Squeeze the handle
- Sweep back and forth

**Overhead Paging Alerts**

Mercy Medical Center utilizes plain language messaging when the overhead paging system is activated. The overhead pages are categorized into 4 alert areas;

1. Facility Alerts
2. Weather Alerts
3. Security Alerts
4. Medical Alerts

The overhead message shall provide staff, patients and visitors with the type of event, the location and the action required.

**Medical Equipment/Utility Malfunctions** – If medical equipment malfunctions or problems arise with utilities, contact the FAST Team at (515) 643-2781 immediately and report the issue to your manager/supervisor. Medical Equipment “do not use” tags are available from Clinical Engineering and should be placed on the equipment when a malfunction is noticed. Do not assume someone else has already reported the situation. Remember that all medical gas cylinders are to be secured in appropriate holders at all times.
Security, Public Safety and Risk Management

SECURITY:

Mercy is committed to providing a safe and secure healing environment for all patients, employees and visitors. Mercy’s Public Safety Department is responsible for the overall security of Mercy Medical Center and the subsequent prevention of crime and other potential harm to patients, visitors, employees, physicians and property. However, since cooperation from staff is essential to helping Public Safety do its job well, safety and security is everyone’s responsibility. If you become aware of an unsafe condition or notice something suspicious, please contact Public Safety at (515) 247-3111. If you suspect that one of your co-workers is under the influence of drugs or alcohol, please notify your manager/supervisor immediately.

PUBLIC SAFETY

Mercy’s Public Safety Department is located on Level A of the West Tower on Central Campus (across from McDonald’s). Public Safety officers patrol Central Campus and Mercy West Lakes 24 hours a day; monitor employee arrivals, departures, and parking; and provide internal and external surveillance of Mercy properties. Public Safety also supplies parking decals or tags to employees, issues employee identification badges and provides 24-hour escort service to employees’ vehicles; shuttle service to off-site parking lots; and vehicle assistance (tire assistance, jump starts, contacting locksmiths, etc.) For any of these services, please call (515) 247-3111 or stop by the Public Safety Department during normal business hours.

After-hours employee access – Access to the hospital by employees after 9 p.m. is available at the Emergency Department Entrance (be prepared to show identification) or may be obtained by using your employee identification badge at the Physician’s Entrance on A-Level: the West Entrance (on A-Level and the Skywalk Level): the loading dock area past the East Tower Conference Center, and the North Ramp on A-Level.

After-hours visitor access – Visitors to the hospital after 9 p.m. should receive a Visitor Control Pass from the unit they are visiting. These passes are color-coded for the day of the visit.

RISK MANAGEMENT

Mercy’s Risk Management Department is responsible for insurance coverage, equipment concerns, visitor concerns, patient incidents, legal questions and sentinel event reporting. The Risk Management staff depends on Mercy employees to identify risks, communicate problems and consider ways to improve the safety of patients, visitors, and employees. To contact the Risk Management Department, call (515) 247-3296.
Employee Health & Wellness Services

Employee Health and Wellness Services (EHWS) is located on Level A of the West Building. In addition to providing physical assessments and TB tests, EHWS can assist employees with health reviews, worker’s compensation issues, fitness for duty, return to work processes, and any accommodation request according to the ADA regulations. EHWS may also assist, in conjunction with HR Business Partners, with questions regarding short and long-term disability, Family Medical Leave Act (FMLA) issues and other leaves of absence. EHWS also provides seasonal flu shots, immunizations, ergonomic reviews of work areas and patient lifting assistance. Contact EHWS by calling (515) 247-3097.

TB EXPOSURES

Employees who think they may have been exposed to a person with active TB should contact EHWS immediately to be tested. EHWS will contact Infection Prevention Services to conduct an investigation if it was an occupational exposure and will then notify all employees who were potentially exposed so they may be tested. EHWS will also provide all the follow-up testing.

BLOOD-BORNE PATHOGEN EXPOSURES

Employees who are exposed to blood or body fluids at work should immediately report the incident to their manager/supervisor and contact EHWS. The employee will need to complete an online Incident Report and receive further direction. If the incident occurs after-hours and EHWS is closed, the House Supervisor should be notified by calling (515) 490-5903. DO NOT REPORT TO THE EMERGENCY DEPARTMENT UNLESS IT IS MEDICALLY NECESSARY.
**Infection Control**

Mercy’s Infection Prevention Department is responsible for promoting patient and employee safety by reducing the risk of acquiring and transmitting infections. To contact the Infection Prevention Department, call (515) 247-4457, (515) 643-8692, (515) 643-8687 or (515) 247-3609.

**HAND HYGIENE**

Many studies have shown the bacteria that cause hospital-acquired infections are most frequently spread from one patient to another on the hands of health care workers. Therefore, the Centers for Disease Control and Prevention (CDC) and other health care organizations believe that handwashing is one of the most important measures you can take to limit the spread of bacteria and decrease your risk of acquiring or transmitting infection. Always wash your hands:

- If they are visibly dirty or soiled with blood or other body fluids*
- Before eating and after using the restroom*
- Before and after having direct contact with a patient**
- Between multiple procedures on the same patient**
- After gloved-hand contact with blood, body fluids, secrections, excretions, mucous membranes, non-intact skin and equipment or articles contaminated by any of these or which are in the immediate vicinity of the patient**
- After removing gloves and other personal protective equipment**
- After blowing your nose or coughing/sneezing into your hands**

  *Soap-and-water technique preferred.
  **Either soap-and-water or alcohol-based hand sanitizer technique may be used.

**SOAP-AND-WATER TECHNIQUE**

Turn water on and adjust to a comfortable temperature. Wet hands and dispense liquid soap onto the palm of one hand. Rub hands together vigorously for 15-30 seconds, paying careful attention to the backs of your hands, your wrists, between your fingers, your nail beds and under your nails. Rinse hands with fingers pointing down. Leave water running while drying hands with a paper towel, then use the paper towel to turn off the faucet (if paper towel is saturated, use a dry towel to turn off the faucet).

**ALCOHOL-BASED HAND SANITIZER TECHNIQUE**

Apply a quarter-sized amount of hand sanitizer to the palm of one hand. Rub hands together – covering all surfaces of hands and fingers with sanitizer and paying careful attention to the backs of your hands, your wrists, between your fingers, your nail beds and under your nails – until hands are completely dry.
STANDARD PRECAUTIONS

Standard Precautions are based on the principle that all blood, body fluids, secretions, excretions except sweat, non-intact skin and mucous membranes may contain transmittable infectious agents. Standard Precautions include a group of infection prevention practices that apply to all patients, regardless of suspected or confirmed infection status, in any setting in which health care is delivered. In addition to hand hygiene, Standard Precautions include the use of personal protective equipment as needed and following certain procedures to prevent the transmission of infection.

PERSONAL PROTECTIVE EQUIPMENT – Personal protective equipment (PPE) should be used to protect yourself during the direct and indirect care of patients. In a health care setting, PPE includes gloves; masks, goggles and face shields; and gowns. After use, contaminated PPE should be removed and appropriately disposed of as soon as possible. Hands should be decontaminated after removing gloves or other PPE using the soap-and-water or alcohol-based hand sanitizer technique.

- Gloves are worn to prevent contamination when a caregiver comes into contact with blood, body fluids, secretions, excretions, mucous membranes, non-intact skin and contaminated items. Gloves are also worn to reduce the likelihood that organisms present on a caregiver’s hands will be transmitted to patients during patient care procedures. WEARING GLOVES DOES NOT REPLACE THE NEED FOR GOOD HAND HYGIENE.

- Masks, goggles or face shields are worn to protect the caregiver’s mucous membranes (eyes, nose and mouth) when contact with blood and body fluids is likely and to prevent the spread of microorganisms through droplets from coughing, sneezing and talking. Masks are to be used only once before being discarded, and should never be lowered around the neck and reused.

- Gowns are worn to protect the caregiver’s skin from blood or body fluid contact and to prevent the soiling of clothing during patient care procedures that may involve contact with blood or body fluids.

TRANSMISSION-BASED PRECAUTIONS

Transmission-based precautions are designed to supplement Standard Precautions in patients documented or suspected to be infected or colonized with highly transmittable or epidemiologically important pathogens. The three types of transmission-based precautions are airborne precautions, droplet precautions and contact transmission precautions.

AIRBORNE TRANSMISSION PRECAUTIONS – Airborne precautions are used (in addition to Standard Precautions) for patients with infections that are transmitted by small droplet particles, or nuclei. Such droplets are generated when talking, coughing or sneezing and during procedures involving the respiratory tract such as suction, intubation or bronchoscopy. They can be widely dispersed by air currents and have the ability to remain suspended in the air for long periods of time. Infections spread by the airborne route are relatively uncommon in hospitals, but include tuberculosis, chickenpox, measles and Aspergillus infections.

The following precautions should be taken:

- Place patient in a private Airborne Infection Isolation Room with negative airflow. If none are available, contact the Infection Prevention department.
- Keep the patient room door closed except to enter and exit.
- Visually check the negative airflow before admission and daily by using the pressure gauge and other indicators as instructed by the unit director.
• Staff and visitors should use the NIOSH-approved respirator (PAPR) when entering the room. (Persons who have had chickenpox or measles do not need to wear respiratory protection when visiting or caring for patients with those illnesses, but those who are susceptible, such as pregnant women, should not enter the room.)
• Educate visitors about good hand hygiene and the use of personal protective equipment.
• Limit patient transport to essential purposes only, and minimize the risk of infection to others while transporting the patient by placing a mask on the patient. (Health care workers do not need to wear masks during transport.)
• Notify the receiving department that the patient is in isolation and the type of precautions needed.

For additional information on airborne transmission precautions and preventing the transmission of tuberculosis, see Mercy’s Tuberculosis Plan.

DROPLET TRANSMISSION PRECAUTIONS

Droplet precautions are used (in addition to Standard Precautions) for patients with infections that are transmitted by large droplet particles. Transmission from large droplets requires close contact between the infected source and the recipient as these droplets do not remain suspended in the air for long and travel only short distances. Infections transmitted by large droplets include meningococcal meningitis, influenza, mumps, rubella, diphtheria, pneumonic plague and infections caused by multi drug-resistant Staphylococcus pneumoniae. The following precautions should be taken:

• Place patient in a private room. If none are available, contact the Infection Control Department
• Staff and visitors should wear standard surgical masks when entering the room.
• Educate visitors about good hand hygiene and the use of personal protective equipment.
• Limit supplies taken into the patient room, and clean all reusable items before removing them from the room.
• Limit patient transport to essential purposes only, and minimize the risk of infection to others while transporting the patient by placing a mask on the patient.
• Notify the receiving department that the patient is in isolation and the type of precautions needed.
• After returning the patient to his/her room, clean and disinfect the wheelchair or cart and any other items that may have been in contact with the patient.
• Remove PPE before exiting the isolation room and wash hands after removing PPE and after exiting the patient room.
• Change all rags, mop buckets and mop water after cleaning the room.

CONTACT PRECAUTIONS

Contact precautions are used (in addition to Standard Precautions) for patients known or suspected to be infected or colonized with microorganisms transmitted by direct or indirect contact. Examples of infectious diseases requiring contact precautions are gastrointestinal infections (including diarrhea of unknown origin), wound and skin infections and colonization with multi drug-resistant bacteria, such as MRSA. The following precautions should be taken:

• Place Patient in a private room. If none are available, contact the Infection Prevention Department.
- Staff should wear gloves upon entering the room and should wear an isolation gown if he/she will have contact with the patient, environmental surfaces or other items in the patient room.
- Change gloves after contact with any infective material.
- Educate visitors about good hand hygiene and the use of personal protective equipment.
- Limit supplies taken into the patient room, and clean all reusable items before removing them from the room (Sani-Cloth HB may be used to clean hard, non-porous surfaces and alcohol swabs may be used to clean stethoscopes).
- Limit patient transport to essential purposes only, and minimize the risk of infection to others while transporting the patient by placing a clean sheet over the patient. Health care workers should put on clean gloves and wear a clean gown during transport.
- Never place the patient chart on the patient during transport.
- Notify the receiving department that the patient is in isolation and the type of precautions needed.
- After returning the patient to his/her room, clean and disinfect the wheelchair or cart and any other items that may have been in contact with the patient.
- Remove PPE before exiting the isolation room and wash hands after removing PPE and after exiting the patient room.
- Change all rags, mop buckets and mop water after cleaning the room.

Please contact your supervisor if you have any questions or need additional assistance with any of the topics discussed in this booklet.