Welcome to Our Riverside HealthCare Team

Riverside HealthCare
General Orientation Packet
“Creating Experiences”

Revised: 7/2015—Education Dept.
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Welcome to Our Riverside Family!

The Journey of Riverside: Past Present Next...

How Our Story Began...

Riverside Hospital - 1964

What would you focus on to make Riverside successful?

- Quality/Patient Safety
- Service
- Staff
- Growth
- Financial Strength

Our Mission Today

Life is a remarkable journey.

Health impacts every step - how we connect with others, how we express our potential, how we pursue our dreams.

At Riverside our mission is to provide healthcare experiences that are just as remarkable.

We do this for each and every person, regardless of their personal or economic circumstances.

We offer our highest thinking, our kindest touch, and our strongest commitment to excellence.
Our Values Guide Us

- Integrity
- Partnership
- Stewardship
- Excellence

Our Remarkable Journey: Growth

Member of Rush System for Health

- Fourth Outline Level
- Sixth Outline Level

Market Overview: Regional Provider

- Primary Service Area:
  - Kankakee County
- Secondary Service Area
  - Will County, Iroquois County, Grundy County
  - 55 mile radius

We ARE the Local Market Leader!

Riverside Today...

Riverside HealthCare Submarkets & Sites of Service Map

Key

Hospital

Acute Care

Recovery and Rehab Care
Riverside Today- Our Corporate Structure

Kankakee Campus

Riverside Medical Center

- Licensed 331 beds
  - Level II Trauma Center
  - Regional Ambulance Network
  - Regional Rehabilitation Center
  - Rush-Riverside Heart Center
  - Rush-Riverside Cancer Center
  - Regional Neurosurgery
  - Regional Mental Health Center
  - Regional Girls/Boys Specialty
  - Regional Chemical Dependency Center

Riverside Pavilion

Main Entrance

Services Available Right Here

Neurosciences makes mini-miracles happen!
**Robotic Assisted Surgery**

**Riverside Today...**

**Wound Center is HERE:** Hyperbaric Oxygen Therapy (HBOT)

**Bourbonnais Campus: Medical Plaza**

Betty Burch Bridgewater Center

(Accelerator is HERE)
The Patient Experience

Riverside Medical Center Specialty Services in Watseka

- CT
- MRI
- Mammography
- Bone Density
- Ultrasound
- Lab
- Physicians
  - Internal Medicine
  - Pediatrics
  - Specialty Coverage

- Chemotherapy
- Lab - Third Outline Level
- Primary Care - Fourth Outline Level
- Physician - Fifth Outline Level
  - Seventh Outline Level

First Outline Level
Second Outline Level
Third Outline Level
Fourth Outline Level
Fifth Outline Level
Sixth Outline Level
Seventh Outline Level

CT
MRI
Mammography
Bone Density
Ultrasound
Lab
Physicians
Internal Medicine
Pediatrics
Specialty Coverage

Second Outline Level
Third Outline Level
Fourth Outline Level
Fifth Outline Level
Sixth Outline Level
Seventh Outline Level

Coal City – Riverside West Campus

The Patient Experience

Riverside Medical Group: Putting Well within Reach

Primary Care

- Family Medicine
- Pediatrics
- Internal Medicine

Specialists

- Endocrinology
- Diabetology
- Podiatry
- Oncology
- Pediatric Cardiology
- Pulmonology

- ENT
- OB/Gyne
- Mid Levels

Senior Living = Sojourn

- INDEPENDENT LIVING (Westwood Oaks) – 90 units
- ASSISTED LIVING (Butterfield Court) – 96 units
- One or Two Bedroom Apartments
- One or Two Bedroom Apartments with 24 hour assistance
- Unique Alzheimer’s “Bridges” Unit
- MILLER REHAB@Sojourn – 60+ bed nursing home
  - Intermediate, Skilled Bed (including some Medicare-certified beds)
Our Financial Strength Supports Quality and helps us connect to our community’s needs!
Giving Back to Our Community

Healthcare Benefits
Extended to the Community
Charity Care
Language Assisted Services
Government Sponsored Indigent Health Care
Donations
Volunteer Services
Education
Subsidized Health Services
Uncompensated Care
Other

$41+ million

We are a social safety net!

Our Highest Thinking:
Patient Safety & Quality

LEAN and Kaizen Boards

National Quality Recognition

You deserve nothing but excellence!

2014 HealthGrades Awards

Magnet Recognition®

- Commission on Magnet of the American Nurses Credentialing Center (ANCC)
- Highest honor for Nursing Excellence
- Re-designation 2015
And Still More Honors!

- Primary Stroke Center Certification, only nationally recognized stroke program in area.
- Accredited Heart Failure
- Accredited Sleep Lab including Pediatric studies
- Accredited Chest Pain Center with PCI – only one in area

Great Care Across Our Continuum

- CMS 5 Star Rating – Miller Rehabilitation

Our Strongest Commitment to Excellence begins with...

Best People: A Great Place to Work

Medical Staff Organization

Our Hospitalist Group

Dr. Mohammed Shaikh
Chief Hospitalist
Medich Director
(815) 279-9350
Residency Program

People: Most Valuable Asset!
- Low Turnover
- Cyber Café in RMC Cafeteria (Code is 1234)
- Development Opportunities
- Continuity of Caring – America’s 2nd HeartMath Hospital
- Employee Satisfaction
  - Top 100 Great Places to Work Survey

Magic Theater is OPEN for...
- Employees (Free Matinee every month)

Our Kindest Touch

We Measure it!
- Press-Ganey, HHCAHPS, HCAHPS, CG-CAHPS
  - 10% to 99%
    - Inpatient, ED, RMG, OP Surgery/Procedural areas & Home Care

Best Customer Service

“Life is a remarkable journey”
RiverNet

- Access to Email and Riverside CARE (online paystubs)
- Houses all 5000+ policies
- Announcements
- MSDS
- Charting
- Patient Education
- Newsletters
- Census Updates
- Quality Data
- Cafeteria Menu
- Online Libraries (Nursing Reference Center, UpToDate, Dynamed and MORE)
- Online Training OLIE including free continuing education from AHIMA to CNE to Rad CE!
- 100% of employees have access!

Staying Informed:

To stay informed about RHC after orientation, please:
- Attend dept. meetings/ read minutes
- Ask your supervisor questions
- Rivernet
- Read WEEKLY employee newsletter - The Riverside Connection
- Attend State of Riverside townhall meetings
- Our Website and Be a Fan on Facebook

Where is Riverside going Next?

- Provider and Employer of choice in the far south suburban Chicago market
- ST People + Highest Quality + ST Service +
  = Growth
  Financial Strength

Our Mission

Life is a remarkable journey.

Health impacts every step - how we connect with others, how we express our potential, how we pursue our dreams.

At Riverside our mission is to provide healthcare experiences that are just as remarkable.

We do this for each and every person, regardless of their personal or economic circumstances.

We offer our highest thinking, our kindest touch, and our strongest commitment to excellence.

Life is a remarkable journey –
Thanks for all you do to live our mission

That when our journey is over
and we have connected it all,
we have discovered how to celebrate it.
PATIENT CARE OVERVIEW

Cardiac Cath Lab
Servicing both inpatients and outpatients, the cardiac catheterization lab provides diagnostic, interventional and therapeutic care and procedures for those patients with coronary artery disease, peripheral vascular disease, pacemaker therapy, electrophysiology studies/ablations, invasive evaluation of CHF and/or any other cardiovascular related diagnosis.

Emergency Department
Recently expanded Level II trauma center with 29 beds, and recognized as an Emergency Department Approved for Pediatrics (EDAP), the Emergency Department realized an annual patient volume of 39,644 in 2008. Scheduling in the ED is flexible with a variety of shifts designed to provide staffing that covers peak volumes in the department.

Perioperative Services
The Operating Room, Out-patient Surgery and Recovery Room, Endoscopy Procedures Lab and Sterile Processing units serve the surgical needs of both the inpatient and outpatient population. Ten operating rooms and one cystoscopy room allows access to specialized equipment for General, Orthopedic, OB-GYN, ENT, Dental Ophthalmology, Endoscopy, Urology, Plastic/Reconstruction, Neurosurgery, Laser and Open Heart procedures. With one of the few daVinci surgical robots in the state, technologically advanced equipment affords patients some of the highest quality surgical care in the region. The units are staffed Monday through Friday from 6:30 a.m. to 10:30 p.m. and are covered by call crews during unscheduled hours, weekends and holidays.

The following inpatient units utilize 12-hour shifts from 5:00 am to 5:30 pm, 5:00 pm to 5:30 am and weekend options when available:

2 ICU (Medical-Surgical-Trauma-Neuro)
Care of critically ill patients and a designated stroke unit. Trauma, neurosurgery, post-surgical recovery, management of medical and respiratory emergencies and renal failure. 12 bed capacity with staffing ratios averaging 1:2 depending on acuity.

2 Med/Surg
Pre and post op care of major and minor surgical patients including, but not limited to general surgery, abdominal, urological, pulmonary, ear, nose, throat, bariatric, mastectomies, and amputations. Care is also provided for general medical and oncology patients. The unit also serves as a step-down unit for 2ICU, and is the designated hospice/palliative care and inpatient hospice unit. The unit has a 40-bed capacity with an average daily census of 25 patients with staffing ratios averaging 1:5 depending on acuity. The clinical team includes a nurse manager, team leader, clinical nurse specialist, registered nurses, LPN’s, certified nursing assistants and a unit secretary

3 Ortho/Neuro
Pre- and post-op care of all types of orthopedic and neuro surgical patients, including total hip and knee replacements, orthopedic and neuro fractures and traumas. Care is also provided to general medical, medical detoxification, and neurological patients with neck and back problems, epilepsy, and cerebral vascular accidents and is a designated stroke unit. The unit has a 38-bed capacity with an average daily census of 19 patients. Staffing ratios average 1:5 depending on acuity. The clinical team includes a nurse manager, team leader, registered nurses, certified nursing assistants, unit secretary and therapy staff.
PATIENT CARE OVERVIEW

3 Telemetry/Intervention Unit
This 12-bed unit cares for patients who have undergone cardiac diagnostics, interventions, cardiac device implants as well as some surgical and telemetry patients and is a designated stroke unit. In this exciting environment, staff enjoys flexible staffing in part or full-time positions, with 6 or 12-hour shifts and weekend options when available.

4 Medical/Pediatrics
Care is provided for children ranging in age from infants through age 18 and adult medical patients of all ages. This unit has a 37-bed capacity with an average daily census of 20. Staffing is based on patient census and level of care of 1:5 based on acuity. The clinical team includes a team leader, nurse manager, registered nurses, certified nursing assistants and a unit secretary.

5 Telemetry
Care for cardiac telemetry patients including chest pain, arrhythmias, CHF, and post cardiovascular surgery. 32-bed capacity with staffing ratios average 1:4 on days, 1:4-5 on nights. The clinical team includes a nurse manager, team leader, registered nurses, certified nursing assistants and a unit secretary.

5 ICU (Coronary Care)
Care of critically ill cardiac patients with conditions including unstable angina, acute myocardial infarction, CHF, cardiovascular surgery, peripheral vascular disease and cardiovascular intervention. 15 bed capacity with staffing ratios averaging 1:1 or 1:2 depending on acuity.

Rehabilitation Unit
This 19-bed, acute comprehensive rehabilitation unit cares for all types of patients lacking in some type of function needing two or more types of therapy – one being physical. Typical patients include CVA, joint replacements, head injuries, fractures, CHF, COPD and neurological disorders. The clinical team includes a nurse manager, registered nurses, certified nursing assistants and a unit secretary.

Rehabilitation Services
This department provides Physical Therapy, Occupational Therapy and Speech Therapy to both inpatients and outpatients, as well as the inpatient Rehabilitation Unit and Miller Rehabilitation at Sojourn. It includes a wide array of specialty programs in the outpatient setting and treats almost all therapy diagnoses and disorders. Outpatient locations include the Medical Center, Riverside Atrium, Riverside Health Fitness Center and Riverside Medical Centers of Manteno and Wilmington.

Women's Services: OB/GYN, Labor & Delivery, Nursery
Working collaboratively through excellent physician/nurse relationships, Riverside provides a full continuum of women’s care in The Family Birth Suites. In this newly renovated 25-bed unit, OB and GYN patients enjoy mostly private rooms. The Labor & Delivery unit consists of 5 LDR's and 3 out-patient rooms with state-of-the-art equipment, facilitating approximately 1200 deliveries per year. Our all-new Wellborn Nursery has a capacity of 15 bassinets with an additional 3-bed Special Care Nursery.

Other Specialty Areas:

Ambulatory Infusion Center
This department, the first of its kind in the community, provides infusion and injection treatments for a variety of diseases with highly trained nurses.

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PATIENT CARE OVERVIEW

Cancer Treatment Center
This department provides outpatient cancer patients with specialized care including blood transfusions, chemotherapy, blood draws, immunotherapy and targeted therapy.

Cardiac/Neurodiagnostic/Cardiopulmonary Rehabilitation
Cardiac/Neurodiagnostics services both inpatients and outpatients, newborns through adults. The staff works closely with the Neurologists and Cardiologists to perform various procedures including Stress Testing, Echos, TEEs, TCD, EMGs and EEGs, just to name a few. The Cardiopulmonary Rehab department also services both inpatients and outpatients, working closely with the Cardiologists and Pulmonologists to find an individualized treatment plan for the education and exercise of the phase I, II, III and IV patients on their journey to recovery.

Community Health Centers
Our network of community health centers provides primary and specialty physician access as well as diagnostic and laboratory services to residents in Kankakee, Will, and Grundy counties. Specialties include Cardiology, Neurology, ENT, Oncology, and Podiatry.

Home Health
Home Health provides comprehensive in-home services to patients of all ages. Our Medicare certified agency provides skilled intermittent nursing and therapy services to patients in a 3 county area, offering specialties in wound care, cardiac care and rehabilitation. The Ambulatory Infusion Center is also an integral part of this department.

Mental Health Unit, Chrysalis and Bolder Programs
Through a partnership between Indian Oaks Academy and Riverside Medical Center, the Mental Health Unit also now provides a continuum of care and an ability to treat severe emotionally and behaviorally disordered adolescent males and females. Our Chrysalis Program is an 8-bed unit that treat girls between the ages of 12 and 17 who struggle with severe psychologicaal, emotional and behavioral problems. Our Bolder Program is also an 8-bed unit, which is designed to treat boys exclusively between the ages of 12 and 17 who are also considered severe.

Mental Health Unit, Day Treatment Program
The Mental Health Unit (MHU) provides psychiatric crisis intervention and short-term hospitalization for children through geriatrics in specialized treatment programs. The 12-bed Adolescent Program utilized a level system to assist patients to regain control, learn positive coping skills, and participate in discharge planning in preparation for returning to the community. The 20-bed Adult Team focuses on helping adult participants, using the Recovery Model of Mental Illness to establish a foundation for ongoing life affirming coping skills. The Day Treatment Program is an outpatient program that exists to help our youngest patients, ages 5 to 12, deal with longer term behavioral problems. RNs on the MHU work 8 hour shifts (7-3, 3-11, 11-7) and 12 hour shifts (7 am -7 pm). The multidisciplinary team model is used to deliver care on the MHU, with an RN as team leader.

Miller Rehabilitation at Sojourn
This five-star rated state-of-the-art Medicare-certified facility combines the high tech equipment and structures of modern nursing care blended with the warmth and comfort familiar to home. Nursing units include sub-acute, skilled and intermediate care. Our unique holistic and restorative approach to recovery, including the specialties of physical, rehabilitative, speech, occupational and respiratory therapy has proven very successful. In fact, 90% of our patients return home to a more improved quality of life. Shifts are flexible to include 8 and 12-hour shifts.
RIVERSIDE HEALTH FITNESS CENTER

- Located in Bourbonnais (Close to Riverside Medical Plaza)
- Square Feet: 70,000
- Advanced Cardiovascular and Training Equipment
- Indoor Track
- Fitness and Aerobics Classes
- Swimming and Therapeutic Exercise Pools

- Climbing Wall
- Physical and Cardiac Therapy Specialists
- Registered Nutritionists
- Personal Trainers
- Fitness Consultations
- Massage Therapy
- Spacious Locker Facilities with Steam, Sauna and Whirlpool
- Child Care
- Individual and Family Memberships
- Special Events for Members

RIVERSIDE Medical Center

(815) 933-1671
350 North Wall Street | Kankakee, Illinois 60901
Visit us online at www.RiversideMC.net
Comprehensive Healthcare Throughout Our Communities
All Board-Certified or Board-Eligible Physicians

**Bourbonnais**
338 Larry Power Road, Bourbonnais
(815) 935-2991
- Pediatrics
- Podiatry

**Cardiac Specialists**
500 N. Wall Street, Suite 100 Kankakee
(815) 933-2556
- Interventional Cardiology
- Pediatric Cardiology

**Cardiothoracic and Vascular Surgical Specialists**
500 N. Wall Street, Suite 100, Kankakee
(815) 933-4400
- Occupational Medicine

**Corporate Health Services**
400 S. Kennedy Drive, Bradley
(815) 935-7532
- Occupational Medicine

**ENT/Hearing and Balance Center**
300 Riverside Drive, Suite 2100, Bourbonnais
(815) 932-2541

**Kankakee East Court**
1701 E. Court Street, Kankakee
(815) 935-9394
- Internal Medicine

**Manteno**
395 N. Locust Street, Manteno
(815) 468-6870
- Family Medicine
- Physical Therapy

**Meadowview Primary Care Associates**
70 Meadowview Plaza, Suite 300, Kankakee
(815) 935-1100
- Family Medicine
- Internal Medicine

**Momence**
3761 N. Route 1-17, Momence
(815) 472-3923
- Family Medicine

**Neurology Specialists**
500 N. Wall Street, Suite 300 Kankakee
(815) 935-0750
- Neurology
- Rheumatology

**Neurosurgery Consultants**
400 N. Wall Street, Suite 402 Kankakee
(815) 932-7200

**New Life Center**
1701 E. Court Street, Kankakee
(815) 935-5433
- Internal Medicine

**Pembroke**
3400 S. Main Street, Hopkins Park
(815) 944-5545
- Internal Medicine
- Pediatrics

**Peotone**
611 Division Street, Peotone
(708) 258-9058
- Cardiology
- Pediatrics
- Internal Medicine
- Podiatry

**Physical Medicine & Rehabilitation**
400 N. Wall Street, Suite 405 Kankakee
(815) 932-6632
- Interventional Physiatry
- Physiatry

**Psychiatric Associates**
500 N. Wall Street, Suite 200, Kankakee
(815) 937-1237

**Rheumatology Associates**
500 N. Wall Street, Suite 300, Kankakee
(815) 935-0750

**Riverside Endocrinology**
100 Fitness Drive, Bourbonnais
(815) 936-8909

**Riverside Primary Care Associates**
375 N. Wall Street, Suite 610, Kankakee
(815) 939-9394
- Family Medicine
- Internal Medicine

**Riverside Pulmonary and Sleep**
**Medicine Specialists**
500 N. Wall Street, Suite 100, Kankakee
(815) 933-2557

**West Campus in Coal City**
5775 E. Highway 113, Coal City
(815) 634-0100
- Internal Medicine
- Pediatrics

**Steven Williams, MD**
300 Riverside Drive, Suite 2500, Bourbonnais
(815) 939-7141
- Plastic Surgery

**Specialty Services in Watseka**
1490 E. Walnut St., Suite A, Watseka
(815) 432-0250 | (855) 432-0250
- Oncology
- Pediatric Cardiology
- Neurosciences
- Audiology

**Wilmington**
105 S. First Street, Wilmington
(815) 476-5210
- Family Medicine
- Physical Therapy
- Internal Medicine
- Cardiology
- Pediatrics
- Podiatry

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Independent Living Choices

Westwood Estates
- Private Garden Homes with Garages
- Two- and Three-Bedroom Styles
- 18 (of 30) Homes Completed and Occupied
- Walk-out Patios

Westwood Oaks
- Private One- and Two-Bedroom Apartments
- Full Kitchen, Washer/Dryer, Balcony or Patio
- Nested Among Landscaped Gardens and Walking Trails
- Exercise Room, Heated Pool, Scheduled Transportation, Social Activitiestext
RIVERSIDE SENIOR LIVING

For Senior Adults in Need of Assistance with the Activities of Daily Living

Assisted Living

Butterfield Court

- Private One- and Two-Bedroom Apartments with Full Baths and Kitchenettes
- 24-hour Assistance, Housekeeping, Three Meals per Day Served in a Beautiful Dining Room
- Many Social and Recreational Activities

Skilled Care

Miller Center and Miller Rehabilitation at Sojourn

- Long-term Intermediate, Skilled Acute, and Sub-acute Nursing Care
- Intensive Rehabilitation Program
- Memory Support Services
- Sensitive, Stimulating, and Safe Environment

(815) 933-1671
350 North Wall Street | Kankakee, Illinois 60901
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Focus on Survey Readiness & Quality

Mary Schore, R.N., M.S.N.
Director of Quality Improvement

What is Quality?

- Quality is a degree of excellence
- Part of Riverside’s Mission
- Quality is a degree of conformance to a standard
- Det Norske Veritas (DNV)
  - http://www.dnvaccreditation.com
- Centers for Medicare and Medicaid Services (CMS)
- Illinois Department of Public Health (IDPH)
  - http://www.idph.state.il.us
- Departmental standards

Purpose of Quality Improvement

- Purpose of quality improvement is to ensure the delivery of **quality** (safe) patient care
- We want to do the right thing, at the right time, for the right patient, every time!

QI at Riverside is Collaborative

- Starts with leadership
- Involves every employee
- Team approach, when necessary
- Interdisciplinary approach

PDCA MODEL

**PLAN** for changes to bring improvement

**P** Plan

**D** Do

**A** Act

**C** Check

CHECK to see if changes work

**P** Plan

**D** Do

**A** Act

**C** Check

PDCA MODEL

**DO or implement changes**

**CHECK to see if changes work**

Problem is identified by anyone in organization

If issue cannot be resolved without team development

Team Charter Developed (Team must be approved by QIC, OPS Council or VP)

If Team Charter Presented to Quality Improvement Committee (QIC)

QIC Prioritizes Charter

QIC Approves Team

Yes No

Team Begins Work Following Reassessment

PDCA Quality Cycle

Problem/Issue

**PLAN for changes to bring improvement**

**DO or implement changes**

**CHECK to see if changes work**
Problem/Issue Identified by Anyone in Organization

If issue cannot be resolved without team development

Team Charter Developed (Team may be approved by QIC, OPS Council or VP)

If Team Charter Presented to Quality Improvement Committee (QIC)

QIC Prioritizes Charter

QIC Approves Team

Yes

Team Begins Work Following PDCA Quality Cycle

Team Assigns Responsibilities and Target Dates

Team Reports Progress to Director of Quality Improvement

Director of Quality Improvement or Team Representative Reports Progress To QIC

QIC Develops Quarterly Report To Leadership (review with staff), Medical Staff and Board of Directors

QIC Annually Assesses Their Effectiveness

No

Reassess if There Was a Problem/Issue

Reprioritize at Later Date
What do we monitor:

- Core Measures
- Pay for Performance/Recovery Audit Contractors (RACS)
- National Database for Nursing Quality Indicators (NDNQI)
- Never Events
- Other Quality Projects
- Departmental Dashboards

Reporting

- Organizational QI report
  - Quarterly report
  - From staff to leaders to physicians to Board of Directors
  - Red, yellow, green light format
  - Take a look at the report via the Quality Pillar on Rivernet!

Your Responsibilities as a Staff Member for QI

- Know what processes and outcomes your department is monitoring
- Stay current with the literature
  - Professional journals
  - Magazines, newspapers, nightly news
- Get involved in a quality project or team in your department

Det Norske Veritas (DNV)

Grants accreditation to facilities who demonstrate compliance with the NIAHO standards and provides ‘deemed status’ for Medicare (CMS)

Survey Process

- Survey over 1 to 5 days
- Many surveyors
  - Administrator
  - Physician
  - Nurse
  - Ambulatory
  - Behavioral Health specialist
  - Home Health Care
  - Laboratory
  - Engineer

What do Surveyors look for?

- The patient's experience....
  - Compliance to policy & procedure
  - Competency (Licensure, CE, Orientation, education)
  - Credentialing
  - Equipment (Preventive maintenance/inspection)
  - Environment of Care (Safety Hazards)
  - Staff interviews/behaviors
  - Medical Record Documentation (60-65% of score)
Current Accreditations

- We are currently **Accredited** by IDPH and CMS AND:
  - DNV for RMC and Riverside Medical Group
  - ACHC for Home Health, Health Equipment and Home Infusion

Your Responsibilities for Survey Preparation

- Know the standards that pertain to your department
- Meet the standards for your department or overall organization
- Keep your competencies current
- If a surveyor asks you a question, answer to the best of your ability
- If you don’t know the answer, tell them “I would ask my Supervisor” OR “I would look up the policy and procedure”

Error Prevention & Follow-Up

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<th>Root Cause Analysis</th>
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<td>Reactive: “How” or “Why” approach</td>
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<td>Preventive Approach:</td>
<td>Analysis and re-design after an adverse or sentinel event</td>
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Sentinel Event

- Event happening to a patient resulting in the patient’s death or permanent disability OR one of the following:
  - Suicide of any patient receiving care, treatment or services in a staff around-the-clock setting or within 72 hours of discharge (e.g. hospital, residential treatment center, crisis stabilization center)
  - Unanticipated death of a full-term infant
  - Abduction of any patient (including an infant) receiving care, treatment or services
  - Rape of a patient
  - Hemolytic transfusion reaction involving administration of blood or blood products having major blood group incompatibilities
  - Surgical and nonsurgical invasive procedure on the wrong patient, wrong site or wrong procedure
  - Unintended retention of a foreign object in a patient after surgery or other procedure
  - Severe neonatal hyperbilirubinemia (>30 mg/dl)
  - Prolonged fluoroscopy with cumulative dose >1500 rads to a single field
  - Any delivery of radiotherapy to the wrong body region or >25% above the planned radiotherapy dose

- **What do you do?**
  - Notify your Supervisor who notifies the Patient Safety Director or the Director of QI

- **What is the follow-up?**
  - A team is developed to complete a root cause analysis (RCA) to determine how we can prevent this from happening again

Sentinel Event Alerts

- A newsletter that alerts hospitals of catastrophic adverse events that have occurred in healthcare organizations nationwide.
  - Listed on Rivernet
  - 65% of Sentinel Events are due to communication breakdown

Questions? Call Mary Schore at ext.4652

Thank You!
Sentinel Events

Policy:

Potential sentinel events will be evaluated by an interdisciplinary group, under the administration of the Quality Improvement and Patient Safety Committee, to determine the cause of the event and to implement action to prevent its recurrence.

A sentinel event is an event that results in a patient's unanticipated death or major permanent loss of function or the event is one of the following (even if the outcome was not death or major permanent loss of function):

1. Suicide of any patient receiving care, treatment and services in a staffed around-the-clock care setting or within 72 hours of discharge from a 24-hour setting
2. Unanticipated death of a full-term infant
3. Discharge of an infant to the wrong family
4. Rape, assault (leading to death or permanent loss of function), or homicide of any patient receiving care, treatment or services
5. Rape, assault (leading to death or permanent loss of function), or homicide of any staff member, licensed independent practitioner, visitor, or vendor while on Riverside premises
6. Hemolytic transfusion reaction involving administration of blood or blood products having major blood group incompatibilities (ABO, Rh, Other blood groups)
7. Invasive procedure, including surgery, on the wrong patient, wrong site, or wrong procedure
8. Abduction of any patient receiving care, treatment of services
9. Unintended retention of a foreign object in a patient after surgery or other invasive procedure
10. Severe neonatal hyperbilirubinemia (bilirubin >30 milligrams/deciliter)
11. Prolonged fluroscopy with cumulative dose >1500 rads to a single field or any delivery of radiotherapy to the wrong body region or >25% above the planned radiotherapy dose

* "Major permanent loss of function" means sensory, motor, physiologic, or intellectual impairment not present on admission requiring continued treatment or life-style change. When "major permanent loss of function" cannot be immediately determined, applicability of the policy is not established until either the patient is discharged with continued major loss of function, or two weeks have elapsed with persistent major loss of function, whichever occurs first.
** Sexual abuse/assault (including rape) is defined as unconsented sexual contact involving a patient and another patient, staff member, or other perpetrator while being treated or on the premises of the hospital including oral, vaginal or anal penetration or fondling of the patient's sex organ(s) by another individual's hand, sex organ, or object. One or more of the following must be present to determine reviewability: any staff-witnessed sexual contact as described above; sufficient clinical evidence obtained by the hospital to support allegations of unconsented sexual contact; admission by the perpetrator that sexual contact, as described above, occurred on the premises.

*** All events of invasive procedure, including surgery on the wrong patient, wrong site or wrong procedure are reviewable, regardless of the magnitude of the procedure or the outcome.

**Procedure:**

1. The immediate staff response to a sentinel event should be caring for the affected individual. Additionally, staff should contain the risk from occurring to other patients and preserve any factual information or equipment for analysis. Information and equipment need to be held for review by the Director of Quality Improvement, Director of Risk Services or House Supervisor.

2. When an event is defined as above, the staff member will notify their Supervisor or Department Director. Either the Supervisor or the Department Director will notify the Director of Quality Improvement or Director of Risk Services. The quality process will begin upon notification of the Director of Risk Services or the Director of Quality Improvement.

3. The Director of Quality Improvement and/or the Director of Risk Services, the Chief Nursing Officer, and/or Chief Medical Officer will determine if the event will be reported to DNV.

4. A Quality Improvement team will be assigned to conduct a root cause analysis (RCA). A root cause analysis is a process for identifying the basic or causal factors that underlie variation in performance and focuses primarily on systems and processes, not on individual performance. The analysis progresses from special cause in clinical processes to common cause in organizational processes. It includes consideration of any relevant literature. A root cause analysis must be acceptable, thorough and credible. In order to be acceptable,
   - the RCA focuses on systems and processes, not individual performance;
   - progresses from special causes in clinical processes to common causes in organizational processes;
   - repeatedly digs deeper by asking "Why?" then when answered, "Why?" again, and so on;
   - identifies changes that could be made in systems and processes (either through redesign or development of new systems and processes) that would reduce the risk of events occurring in the future.

In order to be thorough, the RCA must include:
   - a determination of the human and other factors most directly associated with the sentinel event and the processes and systems related to the occurrence;
   - an analysis of the underlying systems and processes through a series of "Why?" questions to determine where redesign might reduce risk;
   - an inquiry into areas appropriate to the specific type of event;
   - an identification of risk points and their potential contributions to this type of event;
a determination of potential improvement in processes and systems that would tend to decrease the likelihood of such events in the future, or a determination, after analysis, that no such improvement opportunities exist.

In order to be credible, the RCA:

- includes participation by leadership and individuals most closely involved in the processes and systems under review;
- is internally consistent (not contradict itself or leave obvious questions unanswered),
- provides an explanation for all findings of "not applicable" or "no problem"
- and includes consideration of relevant literature.

The Quality Improvement team will conduct a root cause analysis, under the administration of the Quality Improvement and Patient Safety Committee, with the assistance of the Director of Quality Improvement and/or Director of Risk Services and will include administration, physicians and those staff members most directly involved in the event.

The root cause analysis and action plan will be completed within 45 calendar days of the sentinel event or of becoming aware of the sentinel event.

An action plan will be established to identify changes that can be implemented to reduce risk or formulates a rationale for not undertaking such changes. The action plan identifies, in situations where improvement actions are planned, who is responsible for implementation, when the action will be implemented (including any pilot testing) and how the effectiveness of the actions will be evaluated.

The root cause analysis and action plan are not to include the name(s) of caregivers and patients involved in the sentinel event.

All information during the root cause analysis process and action plans will be considered as confidential and protected by the Illinois Medical Studies Act.

Progress toward target dates will be assessed periodically.

Progress on action and findings will be reported to senior administration and the Quality Improvement and Patient Safety Committee.

Any employee involved in a Sentinel Event can self-refer or be referred to the Employee Assistance Program if needed for additional support.

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Chain of Command for Patient Care

Policy:

While the nurse is not responsible for making medical decisions and judgments, there may be situations within the nurse's knowledge base and experience level, where he/she believes the clinical situation may pose a significant threat to the patient's health or life, and the physician has not responded to the nurse's request for assistance. In such situations, the nurse initiates the chain of command. Nurses who initiate the chain of command as outlined in this policy will not be subject to disciplinary actions for doing so. An employee has the right to report to the regulatory agencies or accrediting bodies if they have any concerns about the safety or quality of care provided by the hospital and no disciplinary action will be taken with the employee because the employee reports the concern to regulatory agencies or accrediting bodies.

Procedure:

1. The RN will communicate her/his concerns to the patient's physician. If the concerns are not satisfactorily addressed, then

2. The RN will contact the Team Leader, Unit Manager, Unit Director or House Supervisor and communicate the concerns.

3. The Team Leader, Unit Manager, Unit Director or House Supervisor will contact the patient's physician and review the concerns and attempt to resolve the treatment concerns. If the concerns are not satisfactorily addressed, then

4. The Team Leader, Unit Manager, Unit Director or House Supervisor will contact the Vice President of Patient Care or Administrator on call.

5. The Vice President of Patient Care or Administrator on call will contact the patient's physician and attempt to resolve the concerns. If the concerns are not satisfactorily addressed, then

6. The Vice President of Patient Care or Administrator on call will contact the Chair of the Medical Department of the patient's physician and attempt to resolve the concerns

7. The RN initiating the chain of command or the Team Leader, Unit Manager, Unit Director or House Supervisor will complete an Unusual Occurrence report regarding the incident.
Examples of Situations in which the Chain of Command should be initiated. These are examples only and not an all inclusive list:

1. Progressive deterioration of patient's clinical condition and the nurse believes that the patient requires medical assistance that cannot be provided by the nurse.

2. The nurse believes the physician is acting outside of the scope of his/her privileges.

3. When physician orders instruct the nurse to perform something outside the nurse's scope, and the issues cannot be resolved between them.

4. When the nurse's assessment of the patient varies significantly from the physician's assessment and the nurse believes the discrepancy places the patient at serious risk of harm.

5. Impairment of a practitioner is suspected.

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<td>11/2014</td>
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<td>Dave Duda: Administration</td>
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Disclosure of Unanticipated Patient Outcomes

Policy:

Patients and when appropriate, family members, are to be informed in a timely manner about the outcomes of care, including unanticipated outcomes. If the patient does not have the capacity to understand the information, the patient's representative will be informed. The disclosure of unanticipated outcomes is to be conducted cooperatively by the physician and appropriate hospital representative.

Procedure:

1. Definitions:
   - **Unanticipated outcome**: a result that differs significantly from the anticipated result(s) of a treatment or procedure, such as the following:
     1. Surgery performed on the wrong body part
     2. Surgery performed on the wrong patient
     3. Wrong surgical procedure performed on the patient
     4. Unintended retention of a foreign object in a patient after surgery or other procedure
     5. Intraoperative or immediately postoperative death in a ASA Class I patient
   - **Disclosure**: telling patients important information regarding their medical condition which might affect their care.

2. Responsibilities:
   - It is the responsibility of the physician or his designee to clearly explain the outcome of any treatments or procedures to the patient, whenever the outcomes differ from the anticipated result(s).
   - The VP of Patient Care and or VP of Medical Affairs, in conjunction with the physician, has the option of designating someone to discuss the outcome with the patient if the physician has not discussed the unanticipated outcome within a reasonable period of time.
   - If indicated an Unusual Occurrence Report should be completed by the physician or staff. If the unanticipated outcome meets the criteria for a Sentinel Event, immediately notify the Director of Patient Safety or Director of Quality Management (please see the Sentinel Event and Unusual Occurrence Policies).

3. Guidelines:
Disclosure of the unanticipated outcome should take place as soon as is practical after the unanticipated outcome has occurred or been identified.

Discussion with the patient should occur when the patient is stable and/or able to comprehend the information. Discussion with the patient's representative may occur prior to the patient's condition being stable, depending on the situation.

Further information should be communicated following a careful evaluation and review of the facts pursuant to processes established by the Quality Improvement and Risk Management Plans.

When an unanticipated outcome occurs or is identified, the practitioner responsible for that patient (including weekend or vacation coverage) is expected to explain the event.

Consideration should be given to involving appropriate hospital resources such as the Director of Patient Safety.

The physician or his/her designee and appropriate hospital representative shall meet with the patient as promptly as other duties permit and as appropriate given the patient's clinical condition.

The nature, severity, and cause (if known) of the unanticipated outcome should be presented in a straightforward and non-judgmental fashion. (The assumption is that most patients want to know what has happened. Patients have the right to decline disclosure. If in doubt, ask. Such waivers of information should be recorded in the patient's chart.)

Disclosure is an ongoing process. Do not feel compelled to answer all questions at the first meeting with the patient. Disclose only what is known at the time of the discussion. Avoid speculation.

Avoid attributing blame to specific individuals, but accept responsibility for actions and outcomes.

An apology or an expression of sorrow is often appropriate and not necessarily an admission of guilt. Doing so at an early stage in the disclosure process can help prevent bad feelings and unnecessary legal or professional complaints.

Where the unanticipated outcome is particularly serious a family-team meeting should be held. The physician or designee should document the discussion in the medical record. Appropriate hospital representatives (e.g., the VP of MA, Director of Patient Safety, the Patient Liaison and the Patient Care Manager) may be involved in such meetings.

If the unanticipated outcome requires further medical attention, disclose what this is and seek appropriate prompt help from others as appropriate. Describe what can be done, if anything, to correct the consequences of the unanticipated outcome that has occurred. Offer a second opinion, the involvement of outside assistance, or the transfer of care to another practitioner.

A copy of this policy will be made available to patients, patient family members and payers upon request.

See "Billing of Preventable Adverse Events (a.k.a. Never Events) for Billing Procedures.

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Important Concepts to Know:

1. Minimum Information Necessary

2. NPP (Notification of Privacy Practices)

3. Riverside’s HIPAA Privacy Officer (who to contact for questions re: HIPAA/Privacy) – Karen Block, Director of Medical Records

4. Ways to maintain electronic security

5. Remember that your eyes, ears, and mouth are all possible sources of confidentiality breaches....Watch what you say, who can hear, and who can see to avoid breaches!

Protect Patient Privacy:
HIPAA Do’s and Don’ts

**DO**

✔ Ask yourself, "Do I need to know this to do my job?" before looking at patient health information.

✔ Close patient’s room doors when caring for them or discussing their health.

✔ Close curtains and speak softly when caring for patients or discussing their health when a roommate is present.

✔ Follow our procedures for disposing of patient information in our secure shredding bins.

✔ Please tell your supervisor if you see patient information in an open trash container.

✔ Turn computer screens so passersby can’t see information.

✔ Log off computers when you’re done—do NOT share passwords.

✔ If you see someone else breaking the rules—never ignore it! Approach them and remind them of the rules. Let your supervisor know. You can report any privacy OR compliance concerns 24 hours a day, 7 days a week to our Riverside IntegrityLine at 1-800-290-1946. This number may also be used by our patients/visitors to report any privacy concerns.

Protect Patient Privacy:
HIPAA Do’s and Don’ts

**DON’T**

✗ Do NOT talk about our patients in public spaces, such as elevators or cafeteria lines.

✗ Do NOT choose computer passwords that can be easily guessed (such as your last name or your child’s name).

✗ Do NOT share your password with anyone or post your password anywhere.

✗ Do NOT let faxes or printed e-mails with patient information lie around—file them in the medical record or dispose of them before anyone else can see them.

✗ Do NOT walk away from an open medical record to care for another patient.

✗ Do NOT keep white boards or other materials that connect patients’ names with their conditions out in the open where passersby can see them.

✗ Do NOT leave phone messages about a patient’s health with anyone but the person you are trying to reach and do NOT leave messages containing patient information on answering machines.

✗ Do NOT ignore other employees who violate privacy rules...report it! Together, we can comply with the law and continue to provide the quality care and privacy our patients expect!
Introduction: What is Compliance?

Compliance can be thought of as “meeting or cooperating with official requirements,” such as complying with Riverside policies and procedures. Our policies and procedures are based upon federal and state laws, and regulatory agency standards (like the Joint Commission and the Illinois Dept. of Public Health, OSHA, C.A.R.F., etc.). Compliance is expected from our patients/residents, visitors, and vendors. Compliance is required from our physicians and staff.

How Does Compliance Affect Me?

We are all expected to perform our jobs honestly—with Integrity. We act ethically and legally with each person we come in contact with: patients, families, visitors, physicians, volunteers and other employees. This is our promise to serve that we've made to our patients and to our communities—and it’s required under federal and state laws. Remember: our community reputation rests upon each of us—both as a healthcare team and as individuals!

Why this Focus on Compliance?

Our federal government has made healthcare compliance for preventing healthcare fraud and abuse in billing a high priority—second only to illegal drugs. Why? Just one example is that the federal government estimates that $7.5 billion in the United States has been lost to claims for medically unnecessary services and items. Taxpayers have heard of these mistakes and don’t want to pay for such mistakes anymore. In fact, the government is penalizing individuals and organizations for not complying with these compliance laws through: hefty fines, loss of Medicare/Medicaid reimbursements, and even jail time.

In the remaining sections of this flyer, you’ll be introduced to these key tips: preventing healthcare fraud and abuse; record keeping; communication; and what to do if you have questions or concerns about compliance.

Compliance: Preventing HealthCare Fraud and Abuse

Healthcare fraud and abuse takes many different forms. For example, filing false claims, intentionally or carelessly using incorrect billing codes, providing unnecessary services, or paying for patient referrals could be considered fraudulent or abusive. This is NOT just a billing issue—but impacts all staff who assist in providing and documenting patient care. Employees must avoid activities like those mentioned above. Be sure that all services received are properly documented/charted and that billings and coding are accurate. During the next year, all of us will receive training on this important topic. Many of you in those areas heavily impacted by these laws will be receiving additional training. For some of you, this training is already underway!

........Read the back side of this sheet for some more tips on this key issue.
More Compliance Tips to Remember: Walking the Integrity Line!

Record Keeping

A healthcare system like ours has many kinds of records. Because it’s impossible to list all the different rules, you should learn those rules that apply to the documents you work with. Remember:

- We do not falsify facts or make false records
- We give records only to people who have a legal “need to know”
- We keep records for as long as the law requires—and dispose of them in accordance with policies
- We preserve patient confidentiality

Open and Honest Communication Helps Us Walk That Integrity Line!

You need to support other employees and be honest in your work with them. We try to create a workplace where employees feel free to discuss concerns about any issue. We deal honestly and fairly with patients, community members, vendors, competitors, payers, and outside contractors.

Where can I go if I have Questions/Concerns about Compliance?

You must comply with laws and rules affecting your job, not just the ones mentioned here. When in doubt, ask your Supervisor/Department Head, Administrative Representative, or Riverside HealthCare’s Chief Compliance Officer, Patt Vilt.

If any federal or state law enforcement official requests information from you, please have them contact our Chief Compliance Officer. If these officials are on Riverside grounds requesting information, please contact your Supervisor and the Chief Compliance Officer immediately.

If you know of conduct that may possibly be illegal or unethical, you should report it to your supervisor or the Chief Compliance Officer, or call the Riverside HealthCare ComplianceLine, a free 24 hour-a-day anonymous phone line. Because a separate company runs this phone line, you don’t have to give your name and no one will record your voice.

To call Riverside HealthCare’s ComplianceLine, dial toll-free, 1-800-290-1946

Just One More Thought....

As Riverside HealthCare employees, we are all expected to obey the law, to carry out our duties in an ethical and honest manner, and to follow established policies and procedures. We are also expected to report any known or perceived violations or any employee misconduct. These are NOT new expectations. Violations are serious matters. Corrective action as outlined in human resources policies, as well as possible legal actions, can result. Remember: Walking the Integrity Line Begins with YOU!

Riverside HealthCare’s ComplianceLine: 1-800-290-1946!
Employee Conduct and Work Rules

Policy:

To ensure orderly operations and provide the best possible work environment, Riverside HealthCare expects employees to follow rules of conduct that will protect the interests and safety of all employees and the organization.

Procedure:

It is not possible to list all the forms of behavior that are considered unacceptable in the workplace. The following are examples of infractions of rules of conduct that may result in disciplinary action, up to and including termination of employment:

- Theft or inappropriate removal or possession of property
- Abuse or ill treatment of a patient, visitor or fellow employee
- Disregard for quality services and customer service
- Sleeping on duty
- Falsification of any Riverside HealthCare records (including timekeeping records)
- Working under the influence of alcohol or illegal drugs
- Possession, distribution, sale, transfer, or use of alcohol or illegal drugs in the workplace, while on duty, or while operating employer-owned vehicles or equipment
- Fighting or threatening violence in the workplace
- Boisterous or disruptive activity in the workplace (including the use of profanity)
- Neglect of duty or failure to perform duties or use of poor judgement in the course of duty
- Negligence or improper conduct leading to damage of employer-owned or customer-owned property
- Performing work tasks that are outside of the professional scope of practice or licensure
- Insubordination, non-compliance with requests from management, or other disrespectful conduct
- Violation of safety or health rules
- Failure to report an injury on duty
- Smoking on Riverside HealthCare property or within sight of RHC property
- Sexual or other unlawful or unwelcome harassment
- Possession of dangerous or unauthorized materials, such as dangerous knives, explosives or firearms, in the workplace (see Weapons policy)
- Absence without proper notification, excessive absenteeism/tardiness or consecutive absences from work without notice
- Unauthorized absence from work station during the workday
• Walking off the job without appropriate coverage or authorization from a supervisor
• Unauthorized use of computers, telephones, mail system, or other employer-owned equipment
• Unauthorized use of personal digital devices and cameras (including use of cell phones and texting) while working
• Unauthorized disclosure or use of confidential patient information in violation of HIPAA or HITECH regulations
• Unauthorized disclosure of confidential business information
• Conviction of a crime while employed at Riverside HealthCare, or violating the law during the course of duty
• Violation of personnel policies
• Unsatisfactory performance or conduct
• Misrepresentation in obtaining employment, employee benefits or privileges
• Misuse of employee benefits or privileges

Employees are reminded that employment with Riverside HealthCare is at the mutual consent of Riverside HealthCare and the employee, and either party may terminate that relationship at any time, with or without cause, and with or without advance notice.

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Riverside HealthCare Code of Behavior

Policy:

This Code of Behavior has been developed to provide every person who works for, or provides services to, Riverside HealthCare, including medical staff members, administrators, employees, students, and volunteers, with professional standards of behavior. We will have 'zero tolerance' for abusive and insubordinate behavior in the workplace. As an organization, we are committed to the best professional service and patient safety and satisfaction possible. We recognize that employee safety and satisfaction equals patient safety and satisfaction and high quality care. We agree to practice this code of behavior.

Procedure:

Our Mission and Values Guide and Encourage Us To:

- Treat others with professionalism, courtesy and respect. We recognize that we each have areas of expertise.
- Show consideration. We will be sensitive to others’ inconvenience and consider another’s priorities in addition to our own when making last minute requests.
- Demonstrate tolerance. We recognize that conflicts may exist among co-workers, and professional courtesy is expected. We understand our priority is to tend to the needs of the patient and provide for patient safety.
- Provide support for co-workers. We will offer help when possible and cooperate in the workplace.
- Maintain reliability - to co-workers, patients and the Riverside Healthcare organization.
- Welcome new co-workers. We will be supportive by offering help and setting an example of cooperation in the workplace, and serve as mentor or coach for others when needed.
- Maintain honesty in interactions with others.
- Respecting the privacy of customers.
- Maintain accountability. We will take full ownership of our actions and will avoid assigning blame or making excuses, either verbally or in the medical record.

For Riverside employees, all other policies apply with regard to behavioral expectations and guidelines.

Examples of abusive and insubordinate behavior Include:

- Retaliation against those who raise concerns.
- Threatening verbal comments.
• Hanging up abruptly in a phone conversation that may impact patient safety.
• Using ridicule or other verbal comments (including the use of profanity) to abuse, insult or humiliate others.
• This list is to be used as examples and is not an exhaustive list. The goal of this policy is to promote the positive behaviors as described in the "Our Mission and Values Guide Us" section of this policy.

The following referenced Policies and Medical Staff Bylaws provide guidance for addressing reported breaches of the Code of Behavior Policy

• Anti-harassment and Sexual Harassment Policy # HC-HR942-01-0151 for definition of "Zero tolerance."
• Employee Conduct and Work Rules Policy # RHC-HR942-01-0129
• Investigation of Reported Breaches of the Riverside Code of Behavior Policy # RHC-HR942-01-0165
• Professional Standards of Behavior Policy # RHC-HR942-01-0154.
• Medical Staff Bylaws - 10.2 Complaints And Incident/Occurrence Reports

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<td>Pamela Hull: Administrative Assistant</td>
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<td>Phil Kambic: CEO</td>
<td>06/2014</td>
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Professional Standards of Behavior

Policy:

Riverside HealthCare is an organization committed to professional standards of behavior. Employees are expected to reflect positive behavior in all contacts with our customers. Customers include physicians, students, volunteers, patients or their families. Employees also understand a customer is anyone on the receiving end of their work. They are also expected to comply with our standards by supporting the Riverside HealthCare mission and values and building a positive image of Riverside HealthCare in the communities we serve.

Following "I RESPECT" is key to success at Riverside HealthCare. Our commitment is to our professional standards of "I RESPECT," to Respond Promptly, Exceed Expectations, Service Excellence, Professionalism, Empathy, Confidentiality, and Teamwork.

Procedure:

All employee’s appearance, attitude, and behavior in which jobs are performed are of utmost importance. Employees are expected to adhere to and practice the standards of professional behavior outlined below and in accordance with department specific policy.

SERVICE EXCELLENCE PERFORMANCE STANDARDS

"I" - I AM RIVERSIDE HEALTHCARE. As such I recognize as long as I am on Riverside property, my words and actions represent what it's like to be cared for at Riverside. Thus, this policy covers my words and actions as a member of the Riverside team when exiting and entering the building, including in parking garages or parking lots of Riverside.

I will use discretion in engaging in personal calls and texting, restricting personal texting or calls to non-work (offstage) areas when I am on non-working time, such as breaks. I will not have personal cell phones on my person in onstage areas while I am working.

Riverside supervisory staff may have cell phones in work areas as they have been assigned and are expected to receive work-related pages and work emails as part of their job role. They are not to focus on cell phones in the presence of customers (e.g. patients/visitors, etc.).

"R"- RESPOND PROMPTLY to opportunities which meet the needs for our patients, families, medical staff, our community and one another whether in person, by phone, fax, or e-mail. Riverside HealthCare recognizes that our customer’s time is very valuable to them.
• I will place customer needs first.
• I will respond to customer requests promptly.
• I will satisfy customer needs and wants.
• I will be responsive and attentive.
• CALL LIGHTS: I will exceed my customer’s needs by anticipating, identifying, and responding to such needs prior to a patient's need to activate their call light. I will answer call lights in a caring, courteous and enthusiastic manner. Employees are expected to work together to answer all call lights on a unit or in a department and to respond to patients’ needs.
• When entering a patients’ room/treatment areas, I will perform hourly rounding appropriate to my role to address the 3P's (Pain, Position, Potty).
• I will ask the patient if he/she is experiencing any pain and complete and document a pain assessment (as appropriate to role).
• I will ask the patient if he/she would like to use the bathroom and assist them for their safety.
• I will complete an environmental inspection which assures the patient can reach the call light, trash, TV remote and ask if the patient needs anything else to be more comfortable.
• I will then sign my name on the rounding log for the time/hour I complete this rounding. I will also remind the patient someone will return in one hour on day shifts and within two hours to check on them for PM shifts.
• Before exiting the room I will state, “Is there anything else I can do for you?” I will then let them know someone will be in to check on him/her in one hour and to press the call light if something is needed before then.
• I will inform patients and families when delays occur and let them know the expected timeframe.
• I will update family members in waiting rooms periodically and let them know how to get more information as needed to decrease their anxiety.

“E” - EXCEED EXPECTATIONS - I will exceed the expectations of my customers and maintain a friendly, courteous, and respectful attitude when interacting with them.

• I will anticipate my customer’s needs before they ask.
• I will always display a willingness to help.
• I will determine my customer’s most important need and try to meet it as I understand if we do not involve the patient in meeting his/her most important care or information need, we will not meet or exceed their expectations.
• Staff working in patient care areas will begin their shift by asking the patient: “what is the most important need or information I can provide for you during my shift today?” and will write that need on the white board. As part of shift change, team members will update the whiteboard to reflect the patient’s priority work to meet that need along with his/her name and how to reach them for information at any time.

“S” - SERVICE EXCELLENCE - I will constantly strive to provide the highest quality service in everything I do. I will accept nothing less than the best.

• I will seek to serve by guiding, aiding and directing my customers.

Helpful behaviors for providing directions include, but not are not limited to:

○ Actively seeking out customers needing assistance and asking them, “May I help you find something?”
○ Personally escorting those needing help to their destination. Do not point the direction, conclude by asking the key question: “Is there anything more I can do for you?”
○ Always displaying a willingness to help.
○ Going out of my way providing the extra touch.
Communicating information in a logical manner.
Displaying patience in dealing with customers.
Expressing concern anytime a customer is not satisfied regardless of fault.
Asking for assistance if trying to locate an area by calling the area on the phone to verify the location to save steps for the customer.
Anticipating the customer’s needs by offering specific services before they ask (i.e. wheelchair).
Recognizing tension and concern in the customer’s demeanor. Initiating Service Recovery when appropriate.

- I will actively listen when customers ask for directions.
- I will escort them to their destination.
- I will be courteous, friendly and helpful when responding to their needs.
- I will exceed my customer’s expectations with my personalized attention.
- I will listen to the needs and suggestions of my customers and respond.
- I will respect differences and encourage my customers to take an active role in their course of treatment.
- I will continually strive to improve quality of care by letting patients/families know our goal is to provide very good care and that if we are not doing that to please let us know so way can make it right.
- At discharge/end of a visit, I will let patients know they may be receiving a survey in the mail and that on the survey, they are to rate us a 1 - 5 with 5 meaning very good. If they can't rate us very good, they are to let us know before they leave so we can correct it to the best of our ability.
- If a patient expresses disappointment with me or another area, I will see that complaint as a gift and own making it right.
- My first response will be to apologize by saying: I'm sorry to hear that.
- How can I make that better for you?
- Thank you for letting me know.
- If I am unable to resolve the issue, I will ask the patient for permission to use his/her phone and contact my leader and the Patient Liaison in front of the patient. This way, the patient knows I have acted promptly on his/her concern.
- I will seek to serve all my customers in my tasks, communication and behaviors.

**“P” - PROFESSIONALISM** – I will remember: “FIRST IMPRESSIONS ARE LASTING IMPRESSIONS”.

- I will maintain professionalism at all times. I will wear my photo ID badge at all times, having it visible to my customer’s eye. I will comply with personal appearance standards as outlined in Riverside Policies, global and departmental.
- I will pick up and discard trash that I discover in hallways and will pick up after myself at work. I realize patients/families perceive lack of cleanliness as meaning lack of quality care or greater risk of infection. Cleanliness of all areas is every employees' responsibility to help us look our best to patients/families.

**Helpful behaviors of positive first impression phone etiquette include:**

- Knowing that the telephone system is a priority and a necessary step in handling every call with success and making a positive “First Impression”.
- Putting a smile on my face & using my most pleasant voice to reflect my positive personality.
- Never eating or drinking while talking on the phone.
- I will not have food or uncovered drinks in nurses’ stations.
- Avoiding side conversations while on the telephone. My caller deserves my full attention.
- If I need to place a caller on hold to answer another line, or address another issue, I will ASK permission and wait for an answer from my caller.
- If I have several callers on hold, I will remember the priority of each call. If necessary, I will make a note of who is on each line.
• Before I transfer a call, I will ask permission from the caller to do so. I will make sure the call goes to the intended party and explain to them I am transferring a call. I will provide an extension or phone number in case the call is lost. I will ask the caller if voice mail is acceptable before transferring the call to it.
• If I receive an angry caller, I will remain calm, acknowledge the caller and impress upon the caller that I care. The most important thing that I can do is listen & empathize with their emotion. It is my responsibility to handle the caller to help him/her feel heard until I can find the appropriate person to take the call. I will use Service Recovery skills and the Service Recovery Tool Kit if needed.
• I will be responsible and accountable for my behaviors and actions.
• I will maintain a professional appearance in grooming, in clothing, and in accessories at all times and follow the personal appearance policy and individual department requirements for uniforms and additional dress code rules.
• I will remember the “I” in “I RESPECT”...“I am Riverside HealthCare”, and that my attire is a reflection of this.

“E” - EMPATHY - I will put myself in my customer’s shoes, and ask, “How would I expect to be cared for?”
• I will display caring, compassionate, and concerned behavior during every customer encounter.
• I will remember that my customer has physical, emotional and spiritual needs.
• I will maintain a calm, soothing, and sincere tone during every conversation with my customers.
• I will be sensitive to my customers needs and desires and to those of their loved ones.
• I will utilize the wisdom and talents of pastoral services to acknowledge my customer’s spiritual needs.

“C” - CONFIDENTIALITY - I will ensure my customer’s right to privacy and modesty. When I am entrusted with my customer’s affairs, I will treat the information with confidentiality and respect.
• I will not discuss my customer’s affairs in public areas (i.e. elevators, hallways, cafeteria, reception areas, smoking areas).
• I will interview my customers in private. Close the door if able, close curtains when indicated, or keep a distance between customers when interacting with them.
• I will communicate with my customers in a private manner.
• I will always knock before entering a customer’s room.
• I will never speak a customer’s name over the pager system.
• I will be cautious not to leave any information on a computer screen unattended.
• I will remember that privacy and confidentiality extend beyond the wall of Riverside facilities.
• I will remember to always ask myself, “Do I need to know the customer’s personal health information to do my job?” If I don’t, I should not be seeking the information.
• When drawing curtains, I will not assume they know I do that for their privacy. Instead, I will say as I draw the curtain, "let me draw the curtain for your privacy."

“T” - TEAMWORK - I am part of the TEAM at RIVERSIDE. I will reflect a spirit of joy and positive behaviors in all of my daily words and deeds. Together Everyone Achieves More...my customers deserve the best and together with my team
• I will strive to serve my customers and my team members.
• I will respect my customers and my team members.
• I will pick up after myself and help keep our work area clean.
• If I have a concern about a team member or another department, ideally, I will share that concern in a profession manner. If I am unable to resolve the issue, I will then notify my supervisor or a member of the Riverside management team to assist in resolving the matter.
• I will trust my customers and my team members.
I will promote positive communication through being aware of the verbal and non-verbal, and body language messages I may be sending to my customers and team members.

I will recognize positive achievements in my customers and my team members including other shifts/departments.

I will seek ways to partner and appreciate other departments and shift to promote positive handoff communication.

I will be an active listener with my customers and team members.

I will use courteous behavior, saying “Please” & “Thank-You” to my customers and team members.

I will assist each customer and team member to be successful.

I will manage up other departments and team members and decrease patients’ anxiety by speaking positively about the other person/department when handing off the patient to the department/next shift and letting them know they are in very good hands.

I WILL PRACTICE “SMILE” and AIDET WITH EVERY CUSTOMER I MEET whether in the hallway, a patient's room/treatment area, waiting room, or on the phone:

- S – SMILE at all times to all customers I meet.
- M – Make eye contact with all customers I meet.
- I – Introduce myself & greet all patients/customers I meet.
- L – let my customers know what I’m doing and answer all questions or find someone who can.
- E – end every encounter with, “I have the time, is there anything you need?”

IN COMMUNICATION INTERACTIONS, I WILL SEEK TO INCLUDE AIDET WITH EVERY PATIENT - EVERY TIME. AIDET stand for:

- A - Acknowledge the patient by smiling and making eye contact.
- I - Introduce yourself by stating your name, your title, and to decrease anxiety, how many patients you have treated or how many years of experience or special training you have.
- Duration - Let the patient/family know how long something will take (tell them a little longer than it will take).
- E - Explain, step by step, what you are there to do BEFORE you do it to get permission first. Respond to the patients’/families’ questions.
- T - Thank the patient for the opportunity to care for them. Ask if there is anything else you can do for them.

Riverside HealthCare has a zero-tolerance for behavior violations. Reported incidents of violations of behavioral policies and Code of Conduct policies will be investigated promptly and appropriate action taken.

Edit History*:

Jean Koehler edited this document on 04/01/2013
Cheryl L Hartman edited this document on 05/21/2012
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Becky Hinrichs edited this document on 08/14/2000
Becky Hinrichs edited this document on 05/10/2000

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Corporate Compliance & HIPAA: Living our Values and Mission

The Corporate Compliance Program is our “self-monitoring” program, to assure compliance with all federal, state and local laws applicable to healthcare.

Corporate Compliance

Corporate Compliance Program (continued)

- Every employee has an obligation to report any suspected illegal or improper conduct.

- One option for reporting any Compliance questions or concerns is through the Compliance Line at 1-800-290-1946

Code of Conduct

All employees must abide by the Code of Conduct and all elements of the Compliance Program:

- On RiverNet
- Policy & Procedure database

Corporate Compliance

Code of Conduct (continued)

- Every employee has an obligation to report any suspected illegal or improper conduct.

- One option for reporting any Compliance questions or concerns is through the Compliance Line at 1-800-290-1946

Corporate Compliance Program

Chief Compliance Officer – Patt Vilt
Chief Privacy Officer - Karen Block
Chief Security Officer - Erik Devine

Compliance Line (IntegrityLine):

- No Retaliation
- Confidential and Anonymous

Confidentiality

All patients are entitled to confidentiality but additional confidentiality is provided for psychiatric illness, alcohol abuse, substance abuse, HIV (AIDS)

A breach of confidentiality could be defined as:

- Releasing medical information
- Accessing medical information on a patient you are not caring for
- Sharing information with someone who does not need to know
Protected Health Information

IIDE (Individually Identifiable Data Elements)

Examples:
- Name
- Address
- Relatives
- Employers
- Birth Date
- Telephone
- Fax Number
- Social Security
- License Number
- Health Plan Number
- Medical Record Number
- Finger/Voice Prints
- Internet Address
- Email Address
- Vehicle Serial Number

…do I need to know this to do my job???

This is called the “Minimum Necessary”

Information Security: NT Password is our first defense

- **No Change:**
  - Passwords = 8 characters
  - Expiration Date - 90 days

- **Change:**
  - Complexity (Az1 required)
  - Cannot reuse past 12 passwords
  - Locked out at 5 attempts

If you See Something… Say Something!

Patient Rights & Responsibilities

When a customer has a negative experience, they share that experience with up to 28 others.

When a customer has a positive experience, they share that experience with 1 to 3 other people.
Patient Rights must be honored!

Patient Liaison (Continued)
- You ARE a patient advocate! SEE IT – HEAR IT – OWN IT!

- ACT for Service Recovery
  - Apologize
  - Check for how to make it better
  - Thank them for letting us know!

- Refer them to the appropriate Manager and/or Patient Liaison

Pastoral Care Services
Reverend Marsha Collins - Director, Pastoral Care
Offered to all patients, families and staff.
- Non-denominational spiritual support and counseling
- Bereavement support
- Communion
- On-call clergy available for pastoral care
- All Faiths Chapel
  - 3PM Services every Sunday
- Quarterly Memorial Services
- CPE (Clinical Pastoral Education) Provider

Referrals for Spiritual Care Services
- Pre-operative patients and family members
- Patients who have religious/spiritual requests
- Patients, families and/or staff experiencing emotional/spiritual distress

Spiritual Care is available to all patients, family members, staff or volunteers

Chaplain MUST be called when...
- Patient Death
- TRAUMA ALERT
- Code 33 – Respiratory/Cardiac Arrest

Contact the Chaplain by dialing O for the Operator and asking to have the Chaplain paged
Patient Rights and Responsibilities

Patient’s Rights

The patient or patient’s representative (as allowed under state and federal law) has the following rights:

1. To be given access to treatments and facilities regardless of race, religion, color, language, sex, sexual orientation, ethnic origin or ancestry, age, marital status, veteran status, ability to understand, physical or mental handicap/disability, or any other classification protected by any applicable law. If Riverside cannot provide the care needed, staff will inform you of your needs and the alternatives to care.

2. To accommodate any special needs or disabilities including provision of interpretive assistance or assistive devices.

3. To be respected as an individual deserving competent, private and compassionate care.

4. To know the names of you physicians and your healthcare team members.

5. To receive pastoral care and/or spiritual guidance.

6. To receive care and treatment consistent with sound nursing and medical practices in a safe setting free of abuse, neglect or harassment of any kind.

7. To access protective and advocacy services.

8. To be free from seclusion and restraints of any form that is not medically necessary.

9. To be informed of his/her health status, condition and proposed treatment, to be involved in care planning and treatment, and to make informed decisions regarding his/her care.

10. To be informed about the outcomes of care, treatment and services including unanticipated outcomes.

11. To participate in the development and implementation of his/her plan of care.

12. To privacy (visual and auditory), and that consultations involving your care will be discreet.

13. To respect for your spiritual, cultural, psychosocial needs, beliefs and values.

14. To an environment that preserves dignity and a positive self-image.

15. To obtain information regarding the relationship of Riverside, your physician and other organizations as it relates to your care.

16. To collaborate with your healthcare staff to make informed decisions.

17. To refuse to talk to or see anyone not officially connected with Riverside or your physician’s office.

18. To a reasonable response to your request for services.

19. To formulate Advance Directives and to appoint a surrogate to make healthcare decisions on your behalf.

20. To review clinical criteria used in utilization activities in the event you are notified that your stay is non-certified.

21. To pain management.

22. To require or refuse treatment to the extent permitted by law. The patient does not have the right to services deemed medically unnecessary or inappropriate.

23. To request a consultation or second opinion from another physician as well as to change physicians, hospitals or outpatient centers.

24. To have a family member or representative and the patient’s physician notified of admission.
25. To participate in research studies after receiving an explanation of the nature and possible consequences of the research before it is conducted and after giving informed consent.

26. To consent to, or refuse to consent to, being filmed or recorded without such a decision affecting the healthcare received.

27. To request and participate in an ethics consultation.

28. To know the approximate cost of hospital or outpatient services or whether a service is covered by Medicare or other insurer, before admission or treatment, and to examine and receive a reasonable explanation of the patient’s bill for services rendered by his/her physician or healthcare provider, including the itemized charges for specific services rendered.

29. To have their end-of-life wishes honored by their caregivers, including the right to withhold resuscitative services or withdraw life-sustaining services.

30. To have their organ donation wishes honored by their caregivers.

31. To personal privacy and to the confidentiality of his/her medical records and information (to the extent provided by law)

32. To inspect, copy and to request amendments to the patient’s medical information and to have access to his/her medical record in the presence of a physician while hospitalized. After discharge, the patient may request a copy of his/her medical record.

33. To request restrictions or limitations on the medical information that RMC discloses about the patient.

34. To receive confidential communication (i.e. that RMC only contact the patient in a certain manner or at a certain location) from RMC.

35. To an accounting of disclosures required by the Health Insurance Portability and Accountability Act’s Privacy Rule.

36. To receive a copy of RMC’s Notice of Privacy Practices upon the patient’s first visit to RMC.

37. To know the identity and the role of the individuals involved in your care. Because this is a teaching hospital, there are many members of the health care team participating in your care and treatment. You may request that an individual not be assigned to your care and may expect that this request will be honored whenever this is possible without jeopardizing access to medical or psychiatric attention.

38. To receive visitors of your choice and to withdraw or deny visitation consent at any time.

**Patient’s or Family Member’s Responsibilities**

The patient or the patient’s representative has the following responsibilities:

1. To provide an accurate and complete information about your health to the best of your knowledge.

2. To provide the information necessary for insurance processing and to provide timely payment for services provided.

3. To ask questions if information is not fully understood.

4. To follow the treatment plan and inform your physician or healthcare staff member of any changes in your condition.

5. To let us know if you do not understand the treatment plan or decisions about your care.
Matters of Conscience/Staff Rights

Policy:

Riverside will consider a request by an employee not to participate in an aspect of patient care when such a request is based on personal or cultural values and/or religious beliefs; however, in no event will a patient's care be negatively affected as a result of requests of this nature.

Procedure:

It is recognized that there are treatment and procedures generally accepted as good medical practice and/or provided for by law with which some individuals may have objections of conscience due to cultural values, sense of ethics, or religious beliefs.

The responsibility for decisions as to the treatment and procedures to be carried out and/or not carried out with respect to any patient rests with the physician in charge and with Riverside HealthCare. In no instance will the mission of the organization be compromised. Treatment and care will be provided to all persons in need without regard to disability, race, creed, color, gender, national origin, lifestyle, legal status, or ability to pay.

An employee having objections of conscience to a physician’s lawful order may not amend or delay those orders. An employee may express his/her objections to their supervisor and ask not to be assigned that kind of duty. The aspects of patient care or treatment that an employee may elect not to participate in include but may not be limited to the following:

- Sterilization procedures
- Withholding or withdrawing of life-sustaining treatment, including nutrition and hydration
- Following a physician’s order of plan of care when the employee believes that the best interests of the patient are at risk

An employee must notify his/her supervisor in writing of the decision not to participate in the care or treatment of a patient. The supervisor will try to make other arrangements to carry out the assignment. If the supervisor cannot make other arrangements to carry out the assignment, the employee is required to carry out the assignment. Failure to do so will result in possible discharge and legal action.

When an employee has exercised his/her rights under this policy, the care or treatment of the patient shall not be compromised. The objections of conscience on the part of an employee are to be treated with respect. Accommodations will be made if reasonable. Some situations may be referred to the Ethics Committee for comment and review. The employee may be asked to appear before the Ethics Committee to review the request.
An employee may not refuse to participate in the care or treatment of a patient based solely on the patient's diagnosis (e.g. HIV/AIDS or other sexually transmitted diseases, tuberculosis, or other contagious diseases) or behavior. Such a refusal is deemed to be insubordination and the employee will be subject to disciplinary action up to and including termination.

**Edit History***:

Cheryl L Hartman edited this document on 01/21/2008

*This list references the last person to edit the document prior to submission for each time this document has been submitted. Only the past ten submission edits are shown.

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Suspected Abuse/Neglect

Policy:


It is the policy of Riverside Health System to act as a facilitator, coordinator, interpreter of procedures to involved family members/significant others, any appropriate agency, and health care provider in the case of suspected abuse/neglect, assault or domestic violence. While endeavoring to protect these individuals, we shall also be available to counsel with the family/significant others in an attempt to interpret reporting of suspected abuse/neglect, assault or domestic violence, and follow up by any appropriate agency as a way of helping the family/significant others to a healthier relationship. Report all confirmed or suspected cases of child or elder abuse within 24 hours of suspicion or observation of abusive activities.

Procedure:

1. Possible victims of abuse are identified using objective criteria. The criteria focus on observable evidence and not on allegation alone. See appendix A for a list of criteria for suspected physical abuse (child, adult, elderly), sexual abuse, rape/sexual molestation, domestic abuse, child and elder abuse/ neglect.

2. Any healthcare provider who suspects abuse or neglect, domestic violence, and/or sexual assault of a Riverside Health System client shall conduct an assessment. The assessment will be conducted and documented as to specific details relating to the individuals condition as it may constitute abuse/neglect, domestic violence or sexual assault.

3. Contact Social Services for any suspected abuse/ neglect. After regular working hours, the on-call social worker may be notified to assist.

4. Requests to review and/or obtain copies of the medical record should be directed to the Medical Records department or designated personnel at off-site locations. Record review and/or copy release for the purpose of investigation of suspected child abuse/neglect should be documented and filed with the medical record. All other record review and/or copy release requires valid written authorization from the patient or his legal guardian or valid subpoena duces tecum. All persons requesting to review a medical record must produce proof of association with the investigating agency.

5. Refer to appropriate appendix as indicated below:
   a. Appendix A: Objective Criteria used to identify possible abuse/neglect
   b. Appendix B: Child Abuse/ Neglect
   c. Appendix C: Elder Abuse/ Neglect
d. Appendix D: Domestic Abuse/ Physical Assault

e. Appendix E: Sexual Abuse (rape and other sexual molestation)

Edit History*:

Julie M Kohl edited this document on 11/30/2012
Brenda S Brower edited this document on 02/01/2002

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Margaret Ondrey: Patient Treatment Navigator 10/2014
APPENDIX A

OBJECTIVE SUSPECTED ABUSE CRITERIA

Physical Abuse/Assault Criteria for children, adults, elderly

Injuries
Unexplained, recurrent, and/or incompatible with history
Not cared for properly
Under breasts or other areas normally covered by clothing
Pain on touching.
Cuts, lacerations, puncture wounds.
  Multiple
  Neglected
  Bite marks
  scalp bald spots
Bruises, welts, discolorations:
Bruises in different stages of resolution
Bilaterally on upper arms
Clustered on trunk, but may be evident over any area of body
Outlining shape of object used (ex. belt buckle)
Circumferential on extremity
Around neck
Fractures
  Multiple fractures
  Various stages of healing
  Long bone fractures or skull, nose, facial bones
  Evidence of unset bones
Dehydration and/or malnourishment without related cause; loss of weight
Pallor
Sunken eyes, cheeks
Soiled clothing or bed
Burns:
Cigarettes marks (especially on soles, palms, back, buttocks)
  Scalded areas from emersion in hot liquid (hands, feet, buttocks, genitalia)
  Shape of source of burn: iron, heater, curling iron
  Friction burns (possibly from ropes- on arms, legs, neck, torso)
  Chemical burns
Black eyes
Frequent use of the Emergency Department, hospital, Health Care System

Physical Criteria for identifying possible victims of neglect

Child Neglect
  Evidence of poor hygiene
  No immunizations appropriate for age
  Prescribed medications not given
  Exposure to unsafe environment
  Poor adult supervision
  Abandoned
  Abdominal distention
  Inappropriate clothing for weather
  Severe diaper Rash
  Irritable
  Consistent hunger
Failure to Thrive
Malnutrition

Adult/ Elder Neglect
Evidence of inadequate care
Evidence of inadequate or inappropriate administration of
Medications
Lack of necessities (heat, food, water)
Unsafe conditions
Poor hygiene

Rape or Other Sexual Molestation Criteria

Child
Difficultly in walking or sitting
Torn, stained, or bloody underclothes
Pain or itching in genital area
Bruises or bleeding in external genitalia, vaginal, anal area
Venereal Disease symptoms
Pain on urination

Adult
Bruising, lacerations, abrasions to mouth, anus, abdomen, vaginal area, external genitalia
Crying
Withdrawn
Hysterical
Mistrust of men

Domestic Abuse Criteria

Multiple injuries at a number of sites.
Multiple injuries in various stages of healing.
Neck injury from strangulation attempts, fractures to upper extremities from efforts to defend one’s self.
Evasive, anxious or passive
Hesitant to provide information regarding how the injury occurred.
Extent or type of injury is inconsistent with the explanation the person provides.
Injuries during pregnancy.
Repeated use of Emergency Department Services
Psychosomatic or emotional complaints.

BEHAVIORAL INDICATORS

These behaviors in themselves, of course do not indicate abuse or neglect. However they may be clues to worker to ask more questions and look beyond the obvious.

Fear
Withdrawal
Helplessness
Resignation
Hesitation to talk openly
Implausible stories
Confusion or disorientation
Ambivalence/contradictory statements no due to mental dysfunction
Anger
Denial
Nonresponsiveness
Agitation, anxiety

INDICATORS FROM THE FAMILY/CAREGIVER

The older client may not be given the opportunity to speak for him or herself, or to see others without the presence of the caregiver (suspected abuser)
Obvious absence of assistance, attitudes of indifference, or anger toward the dependent person.
Over concerned or under concerned about injury
Family member or caregiver "blames" the client (eg accusation that incontinence is deliberate act).
Aggressive behavior (threats, insults, harassment)
Previous history of abuse to others
Problems with alcohol or drugs.
Flirtations, coyness, etc., as indicators of possible inappropriate sexual relationship.
Social isolation of family, or isolation or restriction of activity of the older adult within the family unit.
Conflicting accounts of incidents by the family, supporters, victim.
Unwillingness or reluctance to comply with service providers in planning for care and implementation.
(ex. refuses patient to be admitted)
APPENDIX B

CHILD ABUSE/NEGLECT

PROCEDURE:

1. All suspected child abuse and neglect cases must be reported to the Department of Children and Family Services (DCFS) upon completion of assessment and/or physical examination. RHS healthcare personnel are mandated by law (P.A. 1077) to report such cases and are protected from legal repercussions of such reports.

2. The Child Abuse Hotline must be called at the time of the initial report and a verbal report given to the DCFS agent.
   a. The hotline number is 1-800-252-2873
   b. The local office number is 939-8140

3. Social Services are to be notified of the suspected child abuse and/or neglect.

4. In any case of suspected child abuse or neglect, the Illinois "Written Confirmation of Suspected Child Abuse/Neglect Report" (CANTS 4) shall be filled out by the reporter.
   a. The original is mailed to the nearest county office of Illinois Department of Children & Family Services:

   For Kankakee County
   Kankakee District Office of DCFS
   Attn: Child Protective Services
   301 N Schuyler Ave.
   Kankakee, Illinois 60901

   b. A copy is to be mailed to:
      Department of Children and Family Services
      State Central Register
      1 North Old State Capital Plaza
      Springfield, Illinois 62706

   c. A copy of the report is affixed to the patient's chart.

5. Upon notification, DCFS may request that staff also notify local law enforcement agencies for further investigation. All agencies notified must be documented on the patient's record and on the "Written Confirmation of Suspected Abuse/Neglect Report".

6. If the child is deemed to be in danger, the physician can place the child in protective custody.
   a. Protective custody must be noted on the medical record, along with the date and time of assuming protective custody.
   b. The Hotline must also be notified of protective custody.
   c. Only a physician, employee of DCFS or the RHS administrator can take protective Custody.
   d. Temporary protective custody shall mean custody within a hospital or other medical facility.

7. If DCFS takes custody, Social Services must be notified.
   a. DCFS is required to have court hearing within 72 working hours of the assumption of protective custody.
b. While under protective custody, the child may be hospitalized for his/her safety, or DCFS may make a foster home placement.

c. DCFS will specify amount of family visitation allowed, and Social Services will document this.

d. Photographs and x-rays of the child showing specific evidence of abuse or neglect, any be taken at the request of DCFS or the physician. No consent by the parent or guardian is required to take such photographs; however, an effort should be made to notify the parents or guardian that such photographs are going to be taken. The photographs will become part of the medical record.

8. Social Services will work with staff to communicate with parents and family of the child if available to explain the filing of the report and to facilitate their understanding of the ensuing procedure i.e. DCFS Investigation, court hearing.

9. Social Services will coordinate communication with DCFS for those children who are hospitalized.
   a. The chart will contain documentation of DCFS authorization for discharge.
   b. No child hospitalized for suspected abuse/neglect shall be discharged without this documented approval by DCFS.

**Community Agencies- Child Abuse/ neglect**

- Adult Survivors of Sexual Abuse 815-932-5814
- Child Abuse Hotline 800-252-2873
- Childhood Trauma Treatment Program 708-739-0491
- Children's Advocacy Center of Kankakee County 815-936-7372
- Harbor House (crisis line) 815-932-5800
- 815-932-5824
- Helen Wheeler Center for Community Mental Health 815-939-3543
- Kankakee County DCFS 815-939-8140
- Indian Oaks Academy 815-468-2300
- I-Search 217-782-6053
- Kankakee Area Youth for Christ 815-935-2020
- Kankakee County Crime Stoppers 815-932-7463
- Kankakee School District 111 815-933-0779
- KC-CASA (Kankakee County Center Against Sexual Assault) 815-932-3322
- Dr. King Education Center, Parenting Projects 815-932-5426
- National Runaway Switchboard 800-621-4000
- Onarga Academy 815-268-4001
- YWCA 815-933-4516
APPENDIX C
SUSPECTED ELDER ABUSE/NEGLIGENCE

PROCEDURE:

1. Any RHS healthcare provider who suspects abuse or neglect of an elderly client (clients over the age of 60) should notify Social Services.

2. Professionals are mandated to report suspected Elder abuse/ neglect or financial exploitation.
   a. With residents of nursing homes, reporting is mandated by "The Abused and Neglected Long-Term Facility Residents Reporting Act." This provides judicial immunity for those persons filing such a report. Report suspected elder abuse/neglect/ financial exploitation of long term care residents to the Illinois Department of Aging at 1-800-252-8966 (8:30A-5P Monday-Friday). After hours, on weekends and holidays contact 1-800-279-0400.) Illinois Department of Public Health, 1-800-252-4343.
   b. The Elder Abuse and Neglect Act-Public Act 90-628, requires reporting by professionals of older persons who are suspected of being abused, neglected or financially exploited but who are unable, due to dysfunction, to report for themselves.

     For Kankakee County residents contact:
     Catholic Charities 1-815-932-1921

3. All cases should be documented as to specific details of the individual's condition as it may constitute abuse/neglect. This may be done on the emergency department report, nursing assessment, and/or progress notes.

4. Social Services may work collaboratively to assure safety of the client. Social services will assist with documentation which may include completion of "Written Confirmation of Suspected Elder Abuse/Neglect Report".

5. Social Services will assist with notification of the appropriate agencies regarding these reports.

6. Social Service or nursing staff shall provide the elderly client with information regarding community resources available.

   Alzheimer's Association 815-936-0464
   Alzheimer's Support Group 815-935-3276
   Catholic Charities 815-933-7791
   Illinois Department of Aging 217-785-3356
   Illinois Department on Aging, 800-252-8966
   Long term Care Ombudsman Program
   Kankakee County Crime Stoppers 815-932-7463
   S.O.A. R.- Senior Outreach and Referral 815-932-1921
   Will County Senior Services 815-740-4225
APPENDIX D
DOMESTIC VIOLENCE/ PHYSICAL ASSAULT

PROCEDURE:

1. See Appendix A for Domestic Abuse/ Physical Assault criteria.

2. Once a person is identified as a victim of Domestic Violence or physical assault, a referral to Social Services may be completed to provide crisis intervention services, information and referral. Ask the patient if they would like to meet with a social worker. After regular working hours the on-call Social Worker may be notified to assist.

3. All persons with injuries indicative of domestic violence/ physical assault are to be examined in a manner which will protect their privacy. They should also be assessed for suicidal ideation, sexual abuse, risk of homicide and substance abuse as indicated.

4. Photographs of the injuries may be taken after obtaining the appropriate consent. Such photographs will be contained in the medical record.

5. The persons’ statement as to the cause of the injuries will be documented in the medical record.

6. The appropriate police department will be notified when person presents for medical treatment with injuries incurred as a victim of a crime. A domestic violence victim can make a police report if they desire.

7. All battered women with children shall be assessed for possible abuse of their children. If abuse/neglect of children in the home is suspected, the Illinois Department of Children and Family Services will be notified.

8. Appropriate referrals to shelters, counseling and other services will be provided to the person.

Adult Survivors of Sexual Abuse 815-932-5814
Harbor House 815-932-5800
Kankakee County Crime Stoppers 815-932-7463
KC-CASA (Kankakee County Center Against Sexual Assault) 815-932-3322
Dr. King Education Center, Parenting Projects 815-937-9199
APPENDIX E

SEXUAL ASSAULT

Survivors of sexual assault will be treated in a caring, protective manner. The Emergency Department has established specific procedures for managing survivors of sexual assault which are outlined in the "Sexual Assault-Treatment of Survivor" policy. If, at any time, a Riverside Health System client is identified as being a victim of suspected sexual assault the following steps should be taken:

1. Notify the attending physician or patient’s private physician.

2. Contact the Social Services department for assistance.

3. Contact the Emergency Department Charge Nurse for assistance in providing treatment protocols that must be carried out.

4. The proper law enforcement agency MUST be notified of the sexual assault, regardless of the consent of the survivor.

5. If the victim is under 18 years of age, the Department of Children and Family Services MUST also be notified with the appropriate forms completed. This documentation needs to be included on the ED chart.

6. Further guidelines/procedures are more clearly documented in the ED policy; "Sexual Assault - Treatment of Survivor" in order to ensure that compliance is maintained with the Illinois Administrative Code.
IS AN ORGANIZATION COMMITTED TO PROFESSIONAL STANDARDS OF BEHAVIOR

A set of performance standards has been developed by the employees of Riverside HealthCare to establish priority behaviors that we are expected to practice daily while serving our customers.

RIVERSIDE HEALTHCARE

Riverside’s Foundation For Service Excellence Starts With You...

“I RESPECT”

I am Riverside Healthcare

- “R” – Respond Promptly
- “E” – Exceed Expectations
- “S” – Service Excellence
- “P” – Professionalism
- “E” – Empathy
- “C” – Confidentiality,
- “T” – Teamwork

Riverside Celebrations: It’s all about YOU!

Submit Nominations to Education Dept.

- Rivernet
- Connection Card Nomination (on paper)
Leaders can award Connection Cards

Connection Card
Thank you for being valuable!

To: 
From: 
In honor of: 

Signature of Leader Awarding Connection Card

Leader’s Related Name

Connection card cannot be reused or transferred to another person.

Riverside Health Equipment
Riverside Health and Fitness Center
Riverside Marketplace (Wishing Well Gift Shop and Riverside Family Pharmacy)
Riverside Coffee Shops
Riverside Cafeteria

Or, paid forward to a Riverside-sponsored charity your choice

What are Connection Cards?

• Worth $5.00 and expire 12/31 each year
• Non-transferrable/Non-refundable/no change given
• May be redeemed at:
  – Riverside Health Equipment
  – Riverside Health and Fitness Center
  – Riverside Marketplace (Wishing Well Gift Shop and Riverside Family Pharmacy)
  – Riverside Coffee Shops
  – Riverside Cafeteria
• Or, paid forward to a Riverside-sponsored charity your choice

Security

Hospital Security Officers are uniformed

Please review the Security Guidelines for staying safe in your packet appropriate to your work location.

RMC Employee Parking

Employee parking is in the following areas:

- RMC West Parking Lot – Row C and back
- Pavilion Parking Garage – Park in spaces NOT designated for patient/visitor/physicians.
- See Parking Policy in packet

“Code Red” Fire Safety Plan

- R escue: remove people in danger
- A larm: activate nearest alarm
  AND dial 55
- C ontain: close doors and windows
- E xtinguish: use appropriate fire extinguisher
Medical Gas

Medical Gas Emergency Shut - Off Valves:
- Know where they are located
- Know how to use them
- Know who should use them (anyone who is trained!)

“Code Red”
Fire Safety Plan
- To use a fire extinguisher....
  - Pull locking pin
  - Aim at base of flame
  - Squeeze trigger
  - Sweep at the base of the flames

Rules of Thumb!
- Make sure the “RACE” is underway
- Life safety comes FIRST!
- Keep an EXIT path to your back
- Only fight a fire smaller than you
- Start 8-10 feet away from the fire, then slowly move closer as needed

MSDS Sheets
Material Safety Data Sheets
- Manufacturer’s sheets with information about chemicals about the composition, safety risks, transfer precautions & first aid treatments
- Every chemical must have an MSDS sheet – Access Dolphin MSDS database via Rivernet (under Applications)
- MSDS sheets are kept in a yellow binder or in RIVERNET – YOU must know where to locate & how to read

Let’s Watch a Video on Work Place Safety

Emergency Codes
“Code 00”
Phone System Failure

- Dialing 55 for Emergency codes during a phone system failure WILL NOT WORK

Computer System Codes:
- Code Network – all networked computer applications and phone are down (see dept.)
- Code Outlook/Exchange – email
- Code McKesson/Horizon: Charting system down in some areas
- Code Affinity:
  - Use downtime forms/procedures

Your department may have other computer codes for programs used in your area!

“Code RRT”
Rapid Response Team

- Change in Vital Signs
- Respiratory changes
- Decreased urine output
- Bleeding
- Change in mental status
- No Improvement with treatment
- Seizure activity
- Uncontrolled pain

JUST BECAUSE SOMETHING IS NOT RIGHT

“Code 33”
Activation of Cardiopulmonary Resuscitation Team

- Person in cardiac distress or respiratory failure

“Code 66”
Evacuation Plan

- Horizontal Evacuation
- Vertical Evacuation

- Evacuate persons closest to the immediate danger in this order:
  - Ambulatory Pts
  - Wheelchair Pts
  - Non-ambulatory Pts

- Once you have evacuated a room place a pillow in the hallway at the base of the CLOSED door
“Code 99”
Security Assistance

“Code 100”
Bomb, Suspicious Object Threat

If you receive a threat,
- Use Riverside phone book!
- Keep caller on the line as long as possible
- Ask caller to repeat message
- Record accurately every word spoken
- Signal co-worker to notify switchboard and Security

“Code 100”
Bomb, Suspicious Object Threat

“Code 200”
Heating, Ventilation, Air Conditioning

“Code Yellow”
Crisis Intervention
- Large influx of visitors or media is anticipated due to a crisis
- Security initiates visitor pass/sign-in log
- ALL arriving visitors are escorted to rooms A, B, and C with the exception of immediate family.

Code Lockdown
- Entrances and exits controlled and maintained with checkpoints.
**Code Silver**

**RUN – HIDE - FIGHT**

---

**Code Hazmat**

- Internal chemical spill

---

**Code D - Disaster**

- Phase I: Implement Disaster Plan with existing staff
- Phase II: Activate call trees
- Phase III: Disaster expected to be greater than 4 hrs and/or number of victims is greater than number of available beds
  - **Code D – Chemical**: Patients with chemical exposure
  - **Code D – Radiation**: Patients with radiation exposure

---

**“Code Orange” Biological Exposure Plan**

---

**Tornado Warning**

- Staff need to move patients, visitors and themselves to the nearest safe location per their building plan as outlined in hospital policy.
  - Close windows, drapes and shades
  - Close hallway doors (not patient rooms)
  - Clear corridors of clutter
  - Move PI Beds to lowest position (if unable to move, cover with blankets and more headboard to face window)

---

**“Code SSS” Severe Winter Weather Transportation**

- **ALL** departments contact Patient Care Services and report available beds/staff as well as staffing shortages.
- **ALL** departments check with acting supervisor/Patient Care Services before releasing employees from shift.
**“Code GREEN”**
Missing Adult Patient

- When it becomes reasonably certain a patient is missing without authorization or abducted:
  - Call Switchboard
  - Give Description
    - Age
    - Gender
    - Clothing

**“Code Stork”**
or Amber Alert
Abduction of Infant/Child

**“Trauma Alert”**

**Code PH (Perinatal Hemorrhage)**

**Condition H**

**Code CVA / Code Stemi**

- Code CVA – Stroke Team Responds
- Code STEMI – Heart Attack Patient
Be sure to review your Department’s Safety Plan!!

Thank You for staying safe and helping keep a secure work and care environment!!!
Security Guidelines for Riverside Medical Center

In order to provide maximum security for your department, patients, and visitors, we ask your cooperation in conducting the following:

Dial "55" and report a Code Silver if a person is brandishing a weapon, involved in an act of violence, or hostage situation.

NOTIFY SECURITY

• Suspicious persons.
• Unlawful acts.
• Arguments or altercations.
• Receive a threat.
• Damage to property or vandalism.
• Suspicious packages.
• Observe any unsafe acts or conditions.
• Distribution of sales information without authorization.
• Unauthorized visitors.
• Theft

SAFETY

• Utilize the security department for safety escorts.
• Avoid approaching or visiting with suspicious persons.
• If approached by a suspicious person immediately seek safety and notify security and or the police.
• Safeguard all personal property by locking it up.
• Lock all desks, cabinets, and doors at the end of the day.
• Designate a person in the department to make a final check each night.
• Report lost keys and I.D. Badges to your director or manager.
• Do not allow anyone else to use your I.D. badge, access codes, and or issued Riverside keys.
DEPARTMENT SECURITY MANAGEMENT

Lock and unlock department doors as necessary to provide appropriate access. Lock or limit access as needed to provide security for personnel and property during nights, weekends, low traffic periods, and when the area is closed.

Be aware of patients, visitors, contractors, others, and the reason for their presence. Advise all persons of hospital rules and visitor guidelines, which may apply to them or their activities.

EMERGENCY CALL STATIONS

These stations are located in the North Parking Structure, Pavilion Parking Structure, and West Parking lot (rows D and E). When activated the Emergency Call Stations enunciate directly to the Riverside Switchboard who will dispatch Security and or the City Police.

NOTIFICATION

Emergency Dial "55"

Security (815) 933-1671

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<tr>
<td>Approver</td>
<td>Date</td>
</tr>
<tr>
<td>Richard Maryonovich: Director of Plant Operations</td>
<td>02/2014</td>
</tr>
<tr>
<td>Dave Duda: Administration</td>
<td>02/2014</td>
</tr>
<tr>
<td>Jonathan Overacker: Maintenance Manager</td>
<td>12/2014</td>
</tr>
<tr>
<td>Gregory Stading</td>
<td>12/2014</td>
</tr>
</tbody>
</table>
Security Guidelines for Riverside Remote Buildings

In order to provide maximum security for your department, patients, and visitors, we ask your cooperation in conducting the following:

**NOTIFY POLICE**

- If a person is brandishing a weapon, involved in an act of violence, or hostage situation.
- Suspicious persons.
- Unlawful acts.
- Arguments or altercations.
- Receive a threat.
- Damage to property or vandalism.
- Suspicious packages.
- Trespassers/Unauthorized Visitors
- Theft

**SAFETY**

- Notify the local police for safety escorts.
- Avoid approaching or visiting with suspicious persons.
- If approached by a suspicious person immediately seek safety and notify the police.
- Safeguard all personal property by locking it up.
- Lock all desks, cabinets, and doors at the end of the day.
- Designate a person in the department to make a final check each night.
- Report lost keys and I.D. Badges to your director or manager.
- Do not allow anyone else to use your I.D. badge, access codes, and or issued Riverside keys.

**DEPARTMENT SECURITY MANAGEMENT**

Lock and unlock department doors as necessary to provide appropriate access. Lock or limit access as needed to provide security for personnel and property during nights, weekends, low traffic periods, and when the area is closed.
Be aware of patients, visitors, contractors, others, and the reason for their presence. Advise all persons of rules and visitor guidelines which may apply to them or their activities.

NOTIFICATION

Fire . Police . Ambulance

Dial 911

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As a commitment to our customers, Riverside Healthcare employees will follow the parking guidelines outlined in the Riverside Parking Policy. Below is a brief parking policy summary:

Lot designations:
1. North Garage:
   - Patients & Visitors
   - Physicians
   - Physician Office Managers (Lower Level Only)
2. South Lot
   - Physician Parking
   - ED Patient Parking
   - Senior Advantage
3. Pavilion Garage
   - Patients & Visitors
   - Physician
   - Employee
4. Pavilion Lot
   - Patient & Visitors (Rows A & B)
   - Employee (Rows C and back)

Please Note:
- Employees may only park in the Pavilion Garage and Pavilion Lot spaces that are NOT designated for Patient/Visitors or Physicians.
- Violators will be given up to 2 warning citations
- The 3rd citation will result in vehicle immobilization (the boot)
- A $50 donation to the Christmas Basket Fund will be required for boot removal
## OVERHEAD CODE LISTING

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<th>Description</th>
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<tr>
<td>CODE AFFINITY</td>
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<td>CODE CHEMICAL</td>
<td>ARRIVAL OF PATIENTS WITH CHEMICAL EXPOSURE</td>
</tr>
<tr>
<td>CODE CVA</td>
<td>POSSIBLE STROKE VICTIM IN EITHER ER OR PATIENT AREA</td>
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<tr>
<td>CODE D - PHASE 1</td>
<td>DISASTER - UTILIZE STAFF ALREADY AT HOSPITAL</td>
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<td>CODE D - PHASE 2</td>
<td>DISASTER - ALL DEPARTMENTS ACTIVATE PHONE TREES</td>
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<td>CODE GREEN</td>
<td>MISSING OR ABDUCTED PATIENT AGED 18 YEARS OR OLDER</td>
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<td>CODE HAZMAT</td>
<td>INTERNAL CHEMICAL SPILL</td>
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<td>CODE LOCK-DOWN</td>
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<td>PATIENT WITH PERINATAL HEMORRHAGE</td>
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<td>CODE RADIATION</td>
<td>ARRIVAL OF PATIENTS WITH RADIOACTIVE CONTAMINATION</td>
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<td>CODE RED</td>
<td>FIRE, SMOKE, OR ODOR OF SOMETHING BURNING</td>
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<tr>
<td>CODE RRT</td>
<td>PATIENT WHOSE CLINICAL CONDITION SIGNIFICANTLY DETERIORATES</td>
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<td>CODE SILVER</td>
<td>SITUATION IN WHICH A PERSON IS BRANDISHING A WEAPON, INVOLVED IN ACT OF VIOLENCE, OR HOSTAGE SITUATION</td>
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<tr>
<td>CODE SSS</td>
<td>SEVERE WEATHER WITH BLIZZARD CONDITIONS</td>
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<tr>
<td>CODE STEMI</td>
<td>PATIENT WITH POSSIBLE HEART ATTACK</td>
</tr>
<tr>
<td>CODE STORK/ AMBER ALERT</td>
<td>INFANT OR CHILD REPORTED MISSING</td>
</tr>
<tr>
<td>CODE TORNADO WARNING</td>
<td>WEATHER CONDITIONS ARE FAVORABLE FOR FORMATION OF TORNADOES. PLEASE FOLLOW ANNOUNCED OVERHEAD INSTRUCTIONS.</td>
</tr>
<tr>
<td>TRAUMA ALERT</td>
<td>ARRIVAL OF TRAUMA PATIENT TO THE TRAUMA CENTER</td>
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<tr>
<td>CODE YELLOW</td>
<td>LARGE INFLUX OF VISITORS OR MEDIA TO THE HOSPITAL</td>
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<tr>
<td>CODE 00</td>
<td>TELEPHONE SYSTEM FAILURE</td>
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<td>CODE 33</td>
<td>PERSON IN CARDIAC ARREST OR DISTRESS</td>
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<tr>
<td>CODE 66</td>
<td>EVACUATION OF A DESIGNATED AREA OR ENTIRE FACILITY</td>
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<tr>
<td>CODE 99</td>
<td>NEED ASSISTANCE WITH AN UNMANAGEABLE PERSON</td>
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<td>CODE 100</td>
<td>BOMB THREAT / SUSPICIOUS OBJECT</td>
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<td>CODE 200</td>
<td>POTENTIAL FOR EXPOSURE TO FIRE, EXPLOSION, OR HAZARDOUS CHEMICALS - QUALITY OF EXTERNAL AIR MAY BE DANGEROUS</td>
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**Condition H**

Patients may dial 0 for the operator, so they may indicate they or their family is NOT being kept informed about their care. Physicians, Nurses, Case Management would respond.
Riverside Community Credit Union: Who We Are and Who Is Eligible to Join

• A Full-Service Financial Provider
• For Everyone Who Lives/Works Within 30 Miles of Kankakee
• $25 Savings Account
• Once a Member, Always a Member.

Our Convenient Locations

• Main Office: 185 N. Fraser Avenue, Kankakee
• Branch Office: 368 Larry Power Road, Bourbonnais
• Open Monday — Saturday

For the security of our Members and staff, the inner doors at both locations are locked. Each member has received an access card.

Our Services Include:

• Savings
• Checking
• Direct Deposit
• Payroll Deduction
• Electronic Bill Pay

Loan/Financing Services

• Home Mortgages
• Home Equity Loans
• New/Used Vehicle Loans
• Consumer and Education Loans
• Payday Alternative Loans

Additional Member Services:

• Visa Credit Cards
• ATM Cards
• Debit Cards
• Home Banking
• IRAs
• Certificates of Deposit
• e-Statements
• Mobile Banking
No-Surcharge ATMs:
- For RCCU Credit Union Members Only!
  • 185 N. Fraser Avenue, Kankakee
  • 368 Larry Power Road, Bourbonnais
  • Riverside Medical Center/Lobby

More Member Services!
- Visa Gift Cards
- Courtesy Pay
- Visa Travel Cards
- Money Orders
- Christmas Clubs
- Credit Disability Insurance
- AAA Chicago Motor Club Membership, Insurance, and Travel
- AFLAC

Riverside Community Credit Union
FOR YOU AND YOUR FAMILY
www.riversidecu.com
rccu@ameritech.net
What is our mission?

It is our mission to reduce the risk of injuries and exposures for all of our customers. Our customers are you, Riverside HealthCare Employees, and the community we serve together. We want to be your partner in protecting you from injury and exposure as well as protecting inpatients, outpatients, volunteers, and visitors.

- Lower Level (next door to the Education Department)
  - Our direct phone number is 935-7067 or Ext. 5011

Employee Health Minimal Lift Program

- Available Equipment
- Mandatory Usage
- Annual Competencies
- Master Trainers in Each Dept.
- Contact Lynn Christian (6078) with equipment questions/needs

Employee Health Ergonomics

- Safe, Comfortable Work Space
- Ergonomic Checklist Available
- Rivernet – People Pillar – Employee Health – Ergonomics
- Contact Deborah Denham (x4028) if you have workspace questions

Employee Health Nurse

Our Employee Health Nurse & Employee Health Specialist:
- tracks your vaccinations
- helps you through the process if you have had a blood or body fluid exposure
- runs the influenza vaccination program
- monitors for employee exposures to contagious diseases in coordination with the patient Infection Preventionist
Worker’s Compensation

WHAT If You Are Injured Completing Work-Related Duties?

- Contact your Supervisor, Manager, or Nursing Supervisor.
- If you need immediate medical attention you will be directed to the ED.
- Non-Immediate Medical Attention – You can call Corporate Health (935-7532) to make an appointment to be seen by the Corporate Health Physician.

Post-Accident Drug Screen

- If you are injured on the job whether you seek medical treatment or not, you need to complete a post-accident drug screen per policy.
- Your Manager or the Nursing Supervisor will help with the process.
- This will be done in the ED if you are here or you may be asked to go to Corporate Health depending on your work location.
- This must be done on the shift of the injury, or disciplinary action will take place.

Worker’s Compensation

- Document the accident in Verge System. This needs to be done by the end of the shift you are injured, regardless of whether you had treatment for the injury.
- If you are unable to fill out the report, your manager will do it.
- Contact Kristin Speckman (x4985) with work restrictions/questions/etc.
- We do have a light duty program, we want you to be here if you can be!

VERGE

Electronic Incident Reporting

Why Should I use Verge?

- These reports represent opportunities for improvement in the safety of the Riverside HealthCare System.
- The reports are requested directly from the Quality Improvement Committee and are protected to an extent by the Medical Studies Act.

When should you utilize Verge?

- Fall or patient discovered on floor
- Burns, lacerations, contusions
- Injury from equipment, hospital furnishings
- Injuries during transfers
- Loss or damages to personal belongings
- Hospital acquired pressure ulcers
- Patient/family complaints
- Disagreements or standard of behavior violations
- Employee Injuries or accidents

When should you utilize Verge?

- Refusals of care or treatment, AMA discharge
- Any injuries caused by patients to themselves or others
- Unplanned return to surgery
- Sudden, unanticipated or unexplained death
- Post-op complications
- Repeat ED visit for the same or related problems within 48 hours
- Judgment or procedural lapses
- Medication errors
- Good catches/ Near misses

- If in doubt…report it!
Physicians may fill out Incident/ Unusual Occurrence reports online or they may call the Behavior Reporting Hotline at 
- Ext. 5000 (outside the hospital 815-935-7061)
- This is a verbal reporting system much like dictation and the reports come to Risk Services.

Report all events to a manager or supervisor as soon as possible.
- Do not make copies of incident reports.
- Do not make references to making an incident report or unusual occurrence report in the medical record
- Do not share with family that an incident report was made

Go to RiverNet (Riverside's Intranet Access Icon).
1. Find the Verge Logo and click on the link.
2. A page with a series of icons will appear - much like a smart phone - click the icon that is most applicable to what you’re reporting.
3. You can log in anonymously, but we ask that you free text your name in the form so it is more feasible to follow up on the event.
4. Simply click on Enter as Anonymous User.
5. Enter all information available. We encourage you include all detail and information as it aids in our investigation.
6. "Mandatory fields BLUE.
7. Always click Save!
Legality in a Nutshell:
- IPT Interviews
- Attorney Interviews
- Depositions
- Subpoenas
- Summons

Relax!
As You Advocate for Riverside,
Riverside is On Your Side!

Illinois Provider Trust
24-Hour Nurse Insurance Coverage

Should you have any questions or concerns, do not hesitate to contact the Risk Management & Employee Health Department!

Most importantly,
Welcome To Riverside!!
THANK YOU FOR YOUR TIME!
Vision Statement

To create a culture that places the health of its employees among the highest priorities

REACH
Riverside Employees Actively Choosing Health

REACH is a comprehensive program offered to all Riverside employees. This unique and special benefit provides person to person coaching and mentoring, usually over the course of several months, to improve and/or make progress in your lifestyle habits.

REACH Champions

REACH Programs

Components of the REACH Program

1) Screenings:
Get your free employee wellness lab screening, your free employee flu shot and (if applicable) complete your free yearly mammogram.

2) Set Goals:
Your Wellness Coach will assist you in identifying objectives and work with you to build a personalized health plan in the upcoming year. Please be aware that to be eligible for REACH benefits in 2014, improvement in your wellness screenings from 2013 and active participation in wellness activities will be expected as part of the criteria to receive your REACH benefits.

3) Primary Care Physician Visit:
Visit your Primary Care Physician for your annual Wellness Visit. If you are enrolled in Riverside's group insurance plan your wellness visit will be 100% covered.

4) Reap the Benefits:
If you are enrolled in Riverside’s group medical insurance, you can earn a $20 premium discount each pay period. If you are not enrolled in our group medical plan, you still have the benefit of free screening and wellness coaching as well as all of the fun and exciting wellness programs that will be available to all employees.
What if I am benefit eligible, but Opt Out of medical insurance?

- **Full Time Employees**: Participate in the REACH wellness program to receive your full $45 opt-out credit. If you do not participate, you will receive a partial opt-out credit of $25.

- **Part Time Employees**: Participate in the REACH wellness program to receive your full $20 opt-out credit. If you choose not to participate you will not receive the opt out credit.

  You must also still provide proof of insurance each year to receive the Opt Out Credit.

What do I have to do to get the insurance premium discounts?

- **Lab Screening**: Fasting is required for this screening blood draw, nothing by mouth for 8 - 12 hours prior to your appointment. There are 5 locations that can complete the screening for you at an appointment if needed. Complete during your month of hire.
  
  Pavilion Outpatient Center
  
  Bourbonnais Medical Plaza
  
  Corporate Health Services
  
  Coal City Diagnostic Center
  
  Riverside Wilmington

  Please remember that as a walk-in, you may have to wait depending on the facility’s patient volume.

- **Wellness Coach Appointment** – Call 815-929-1200 and press 2 to schedule. Complete during your month of hire.

- **Flu Shot**: Employee Flu Shot (or a doctors note if you have a medical reason to not get the flu shot)

- **Mammography (only for women 40 years and over)**: Schedule by calling the Outpatient Scheduling Department at 815-935-7530

- **Physician Wellness Visit of your choice**

  How Do I Get My Lab Screening Results?

- Screenings are ordered by Riverside’s Corporate Health Physician, Dr. Kalra. Results are screened by Riverside Employee Health Nurse.

- Highly abnormal results will be sent to your home.

- Copies of results can be obtained from the Wellness Coaches at the time of your visit.

- Call 815-929-1200 ext. 351 to request a copy sent to your home.

- Results will be place in Riverside Physician Portal for your physician to locate.

Where Can I Get More Information

Charitable Giving

Through Riverside

Charitable Giving at Riverside

As an employee, you will be given the opportunity to give back through Riverside

- Why? We are a citizen, a neighbor—a HealthCare system that belongs to the community
- How? Through a variety of causes and through support of Riverside’s mission.

A Variety of Causes

- Community Sponsorships: Benefiting local causes and those complementary to Riverside’s mission
- United Way: Benefiting 24 local members agencies, carefully stewarded by a local governing Board (Last year-- $68,000)
- Employee Efforts: Partners in Caring, Relay for Life, Santa’s Sleigh, jeans days & various others

Support of Riverside’s Mission

- Through the Riverside HealthCare Foundation
- Our goal is to offer the employees and community a way to be generous by connecting resources to needs in healthcare

Foundation Giving Examples

- Smart Pumps
- East Tower and Physical Therapy at Sojourn
- Clinical Pastoral Education
- Nursing Excellence through Education
  - ($1.3 million to date for scholarships and certifications)

Annual Samaritan Giving

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*Qualifies for 2 to the Annual Dinner
^Qualifies for 2 to the President’s Circle Dinner
INFECTION PREVENTION AND CONTROL

Martha Bouk, RN, BSN, CIC
Infection Preventionist

WELCOME TO RIVERSIDE!!

Infection Prevention and Control

- Martha Bouk, Infection Preventionist - ext. 4016, pager 9#516
- Dr. Quraishi, PhD, FSHEA, Hospital Epidemiologist
- Jacky Karlovsky, Infection Control Surveillance Tech
- Mary Schore, Director Quality - ext. 4652, pager 9#973
- B. Zakhireh, MD, Chairman Infection Control Committee

It is our mission to reduce the risk of injuries, infections and exposures for all our customers. Our customers are you, Riverside HealthCare Employees, physicians and the community we serve together. We want to be your partner in protecting you from injury and exposure as well as protecting in-patients, out-patients, volunteers, and visitors.

Infection Prevention and Control

What is Infection Prevention?
The goal of Infection Prevention is to reduce the risk of acquiring and transmitting infections. Infection Prevention is vital to you and your patient’s health.
The danger of infection is always present. Hand hygiene is the most effective way to prevent cross-transmission of infections.

Infection Prevention and Control

Bloodborne Pathogens
- Infection and disease-causing microorganisms carried by the blood
- HIV, Hepatitis B & Hepatitis C
- OSHA Standard
- How are they spread
- How to prevent transmission
- Blood and Body Fluids (BBF)
- Anyone reasonably anticipating exposure to BBF are covered by OSHA regulations.
- Exposure Control Plan

Infection Prevention and Control

Immunizations
- Hepatitis B – If eligible
- MMR – One time if titers not adequate
- Tdap – One time in place of tetanus (Td)
- Influenza - Annual
  - Declination – Sign waiver form
  - Could be required to wear mask during flu season
- TB Skin Test – Upon hire and post exposure
- TB N95 Fit Testing or PAPR training - Annual
Infection Prevention and Control

- **Safety Devices**
  - Regulated by OSHA
  - Mandatory
  - All sharps MUST be blunted before disposal
  - One-handed technique
  - Sign up for classes in Oste

- **Potentially Infectious Waste Disposal**
  - Red bag waste
  - Blood soaked bandages
  - Culture dishes and swabs
  - Discarded surgical gloves or instruments
  - Discarded lancets or sharp devices
  - Regular waste
  - Paper or routine garbage items
  - Medical waste in households

- **Personal Protective Equipment**
  - Examples of PPE in patient care areas...
    - Gloves
    - Gown
    - Mask
    - Eye protection
    - CPR device
  - When you need to wear PPE...
    - For contact with blood, body fluids, broken skin and mucous membranes
  - PPE - located as near as possible to patient care areas

- **STANDARD PRECAUTIONS**
  - Gloves for patient contact
  - Respiratory Etiquette
  - Safe Injection Practices
  - EVERY PATIENT...EVERY TIME

- **ISOLATION PRECAUTIONS**
  - Airborne Precautions
  - Contact Precautions
    - Contact Mask
    - Contact C
  - Droplet Precautions
    - Enhanced Droplet
  - Educate patients
  - Keep supplies at door
  - Single patient-use items
  - No PPE worn outside of patient room
  - Assist patient with hand hygiene

- **Patient Equipment Cleaning**
  - Thermometers, Glucometers
  - Pulse Oximeters
  - Stethoscopes, BP cuffs
  - Med scanners and SHIPs in rooms
  - Clean between patients
  - Germicidal/Bleach Wipes provided

- **Disinfection and Sterilization**
Infection Prevention and Control

- Perform patient procedures or tasks
  - Progression from clean tasks to dirty
  - Hand hygiene between tasks
  - Change gloves perform hand hygiene between patient wounds

Infection Prevention and Control

- Empiric Precautions
  - Appropriate Isolation for Unexplained/Undiagnosed:
    - Rashes
    - Diarrhea
    - Respiratory symptoms
    - Draining wounds
    - Meningitis

Infection Prevention and Control

- Hand Hygiene
  - Soap and water
  - Alcohol products (foam)
  - Fingernail guidelines for direct care providers
    - No artificial nails
    - No shellac polishes
    - Nails <¼ inch long

“Hand washing is the single most important means of preventing the spread of infection”
-- US Centers for Disease Control

Infection Prevention and Control

- IL Law - Monitor and Enforce Hand Hygiene
- Follow either CDC or WHO guidelines
- ‘Partners In Your Care’ HH campaign
  - Monitor hand hygiene product usage on units
    - Environmental Services staff save empty product containers in Dirty Utility Room
    - Empty containers counted and reported weekly

Infection Prevention and Control

- Mandatory Hospital Report Card Act
  - Monthly reporting in National Healthcare Safety Network (NHSN)
    - ICU CLABSI
    - ICU CAUTI
    - Rehab CAUTI (start Oct. 2012)
    - Specific surgical site infection types
    - MRSA blood isolates
    - All C. difficile isolates

- Hand Hygiene
  TRUE or FALSE
  - There is no need to clean your hands upon arrival to or before leaving the hospital
  - You should sanitize your hands between care activities for the same patient or between patients.
  - You should clean your hands before eating, drinking, applying makeup, or handling contact lenses.
  - If your hands are visibly soiled, it is OK to use alcohol hand foam.
  - Hand hygiene should be done before and after glove use and/or invasive procedures.
  - I should never discuss hand hygiene compliance with a doctor.
### Hand Hygiene
It is appropriate to sanitize your hands after contact with:

- wounds
- secretions
- mucus membranes
- non-intact skin
- blood & other body fluids
- All of the above

If your patient has C-Diff, you should use the following method to sanitize your hands:

- Wash with soap and water
- Use alcohol hand hygiene products

---

**Is Everyone’s Job!**

You are now all Infection Prevention Liaisons!
Standard Precautions

Policy:
Standard Precautions are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection in hospitals.

Procedure:

A. Standard Precautions apply to:

1. Blood
2. All body fluids, secretions, and excretions except sweat, regardless of whether or not they contain visible blood
3. Non-intact skin
4. Mucous membranes

B. Handwashing

1. Wash hands after touching blood, body fluids, secretions, excretions, and contaminated items, whether or not gloves are worn.
2. Wash hands immediately after gloves are removed, between patient contacts, and when otherwise indicated to avoid transfer of microorganisms to other patients or environments.
3. Also wash hands between tasks and procedures on the same patient to prevent cross-contamination of different body sites.
4. Use an antimicrobial agent for specific circumstances as defined by the infection control policy *Guidelines for Handwashing/Disinfection*.

C. Gloves

1. Wear gloves (clean, nonsterile gloves are adequate) when touching blood, body fluids, secretions, excretions, and contaminated items.
2. Put on clean gloves just before touching mucous membranes and non-intact skin.
3. Change gloves between tasks and procedures on the same patient after contact with material that may contain a high concentration of microorganisms.
4. Remove gloves promptly after use, before touching non-contaminated items and environmental surfaces, and before going to another patient, and wash hands immediately to avoid transfer of microorganisms to other patients or environments.

D. Mask, Eye Protection, Face Shield
Wear a mask and eye protection or a face shield to protect mucous membranes of the eyes, nose, and mouth during procedures and patient-care activities that are likely to generate splashes or sprays of blood, body fluids, secretions, and excretions.

E. Gown
1. Wear a fluid barrier gown to protect skin and to prevent soiling of clothing during procedures and patient-care activities that are likely to generate splashes or sprays of blood, body fluids, secretions, or excretions.
2. Select a gown that is appropriate for the activity and amount of fluid likely to be encountered.
3. Remove a soiled gown as promptly as possible, and wash hands to avoid transfer of microorganisms to other patients or environments.

F. Patient-Care Equipment
1. Handle used patient-care equipment soiled with blood, body fluids, secretions, and excretions in a manner that prevent skin and mucous membrane exposures, contamination of clothing, and transfer of microorganisms to other patients and environments.
2. Ensure that reusable equipment is not used for the care of another patient until it has been cleaned and reprocessed appropriately.
3. Ensure that single-use items are discarded properly.

G. Linen
Handle, transport, and process used linen soiled with blood, body fluids, secretions, and excretions in a manner that prevents skin and mucous membrane exposures and contamination of clothing, and that avoids transfer of microorganisms to other patients and environments.

H. Prevention of Accidental Needlestick/Sharps Injuries
1. Use approved needle safety devices and needle-less access devices.
2. Take care to prevent injuries when using needles, scalpels, and other sharp instruments or devices; when handling sharp instruments after procedures; when cleaning used instruments after procedures; and when disposing of used needles.
3. Never recap used needles, or otherwise manipulate them using both hands, or use any other technique that involves directing the point of a needle toward any part of the body; rather, use either a one-handed "scoop" technique or a mechanical device designed for holding the needle sheath.
4. Do not remove used needles from disposable syringes by hand, and do not bend, break, or otherwise manipulate used needles by hand.
5. Place used disposable syringes and needles, scalpel blades, and other sharp items in appropriate puncture-resistant containers, which are located as close as practical to the area in which the items were used, and place reusable syringes and needles in a puncture-resistant container for transport to the reprocessing area.
6. All used needles are to be rendered blunted at time of disposal. This may be accomplished by either activating the built-in safety device when available or using a "Point Locke" blunting device when a built-in safety device is not available.

7. Use mouthpieces, resuscitation bags, or other ventilation devices as an alternative to mouth-to-mouth resuscitation methods in areas where the need for resuscitation is predictable.

I. Patient Placement
   1. Place a patient who contaminates the environment or who does not (or cannot be expected to) assist in maintaining appropriate hygiene or environmental control in a private room.
   2. If a private room is not available, consult with infection control professionals regarding patient placement or other alternatives.

TABLE 1

SYNOPSIS OF TYPES OF PRECAUTIONS AND PATIENTS REQUIRING THE PRECAUTIONS*

Standard Precautions
Use Standard Precautions for the care of all patients

* See Isolation Guidelines for Specific Infections for a complete listing of infections requiring precautions, including appropriate footnotes.

Edit History*:

Mary A Schore edited this document on 03/11/2011
Phillip R Crouch edited this document on 04/03/2003
Jessica Parker edited this document on 04/02/2003
Jessica Parker edited this document on 03/27/2003

* This list references the last person to edit the document prior to submission for each time this document has been submitted. Only the past ten submission edits are shown.

LOTUS REFERENCE NUMBER:

RHC-ECP941-01-0051-V02

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<td>03/2015</td>
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<td>Mary Schore: Director of Quality Assurance</td>
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Patients and Visitors –

Patient rooms should be accessed using the A Elevators.

Patient rooms prefixed with E: Access these rooms by taking the A Elevator to the 3rd floor. Follow signs to ICU or Ortho/Neuro.

Patient rooms prefixed with A: Access these rooms by taking the A Elevator to the appropriate floor and follow signs.

Updated March 2012
2015 Paydays
- June 26
- July 10
- July 24
- August 7
- August 21
- September 4
- September 18
- October 2
- October 16
- October 30
- November 13
- November 27
- December 11
- December 24

2016 Paydays
- January 8
- January 22
- February 5
- February 19
- March 4
- March 18
- April 1
- April 15
- April 29
- May 13
- May 27
- June 10
- June 24
## Pay Codes

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Accessing your Online Pay Stub

At Work...
1. Log on to the computer using your network login and password
2. Open RiverNet and click on CARE on the left

At Home...
1. Log on to your home computer
2. Go to the Riverside website at www.riversidemc.net and click on “EMPLOYEES” then on “CARE”

3. LAWSON is the program you will use to access your pay stub. Only “Internet Explorer” will work to access LAWSON. No other browsers (e.g. Safari) are supported. This also means that cell phones and tablets won’t be able to access the system.
   Remember to allow pop-up blockers.
3. Enter your User Name (firstname-lastname) and Password using the same name and password as your Riverside network log on.
4. A Lawson Portal Message may pop up twice. Click OK. Please note: this will only happen on the first log on and whenever we make changes to the system.
5. In the left navigation pane, click PAY on the left of the screen to make this screen appear.
10. You can click on any of the options below and then choose a date:
   • Pay Checks: view current and past paychecks (new check post on paydays)
     – Click PRINTABLE PAY STUB to print a stub to whatever printer the computer normally prints to. IMPORTANT: Never print paycheck information to a printer left unattended.
   • Pay Rate History: view your hourly pay rate increases through the years
   • Year to Date: lets you view year to day pay, taxes, pre-tax and after-tax deductions.
   • Earned Time: lets you view your earned time balance and if you click on the balance on the right you can see your earned time accrual and use history as far back as 2008. Earned time is updated on a per pay period basis.
   • Payment Modeling: lets you play to view the impact of changing withholdings, exemptions or deductions on your net pay. Please note: you are not changing exemptions/deductions/withholding in the software under Payment Modeling. You are simply seeing an example of the potential impact those changes will make to your paycheck.
   • PLEASE REVIEW FOR IMPORTANT MESSAGES: to view notices from Riverside. This replaces paper “Paycheck Stuffers”. Please open these messages to be sure you don’t miss any important information.

IMPORTANT REMINDER: To maintain security, NEVER X out. Click on LOG OUT in the upper right hand corner, then exit.

Riverside Network Password Guidelines for Security

Do not use personal information. Never use personal information as a part of your password. It is very easy for someone to guess things like your last name, pet's name, child's birth date and other similar details.

Do not use real words. There are tools available to help attackers guess your password.

Mix different character types. Use some uppercase letters along with lowercase letters, numbers and even special characters such as ‘&’ or ‘%’. In fact, your Riverside password MUST be at least 8 characters—a capital letter, a small letter, a number! Reminder: you are required to change your password every 60 days from an onsite Riverside computer. Your online pay stub password will ALWAYS match your Riverside network password! And, you won’t be able to change your password from home. For Security, you can ONLY do that from a Riverside computer.

Use a pass phrase. Think up a sentence or a line from a song or poem that you like and create a password using the first letter from each word. For example “Riverside_Is_Awesome” could be “R!vers1de_i$_@w3$0me”.
Do NOT use password examples in this flyer.

… and remember, NEVER share your password with anyone! Not even the IS Department will ask for it!!

It’s important to check your pay stub every pay period to assure your hours, deductions, earned time, etc. are all correct. Online pay stubs make it easy!
It is very important that you continue to keep your information up to date, not only for communication purposes (for example mailing benefit confirmations and W2 forms), but also for disaster preparedness, so that Riverside can contact you easily in the case of an emergency. So please remember... if you have a change, to update this information promptly. You will be able to change your home address by selecting the Life Events tab then clicking on “Move”. Please note that you will not be able to enter a future date for a move. Please use the date that you are entering the change as the “Effective Date”.

Tax Withholding
You can make changes to your exemptions on the Federal W-4 Form or your Illinois State Taxes by selecting the Pay tab and then clicking on “Tax Withholding”. You may want to go to “Payment Modeling” (see pg 2) first to see what the implications of your changes might be to your check before making the actual changes.

Direct Deposit
You will be able to make changes to your direct deposit accounts by selecting the Pay tab and then clicking on “Direct Deposit”. You can add and delete accounts, however, you must keep at least one account as a default for the net of your pay.

IMPORTANT: To add a new account, please be sure to have your bank routing number so that you are sure to select the correct bank (for example, there are 10 different PNC banks to choose from). If your bank routing number is not already in the searchable selection of banks, you will need to contact the Payroll Department to have your bank added to our system.

Each time you process a change, you will get an automatic email confirmation sent to both your work and personal email addresses by the end of the day.
On-Line Policy & Procedure Access at Riverside:

From any computer, you may access online, up-to-date policies and procedures for the entire healthcare system on Rivernet. When on Rivernet click on Policies & Procedures and you will be directed to the website. This website is available to from home also. You can find it at: https://riversidehealthcare.policystat.com/

The HR policies (in addition to all policies) can be found in Rivernet. The HR policies that will be referenced as part of orientation include:

- Emergency Donation of Earned Time
- Employee Conduct and Work Rules
- Disciplinary Guidelines
- Anti-harassment and Sexual Harassment
- Timekeeping
- Personal Appearance
- Attendance and Punctuality
- Solicitation
- Rest and Meal Periods
- Employee Assistance Program (EAP)
- Smoke Free Campus
- Introductory Period
- Involuntary Time Off (IVO)
- Earned Time (ET)
- Holidays
The Employee Assistance Program

For Those Problems You Can’t Solve Alone

All of us experience personal problems at some time during our lives. We solve most of them ourselves. However, some problems that are more serious require outside help to deal with them successfully.

In fact, it is estimated that one out of ten employees in any work force suffers from serious behavioral/medical problems, such as alcoholism, drug dependency, health problems, emotional disturbances, or marital conflict.

Without professional intervention, such problems invariably result in serious deterioration of health, family life, and work performance. That is why Riverside has established the Employee Assistance Program (EAP).

The EAP is a free, voluntary, strictly confidential referral service available to all employees and their families. If you or a member of your family has a problem that requires skilled, professional help, we encourage you to use this service.

How the EAP Works

You can request assistance for a personal problem at any time. If you or a member of your family needs help, you can schedule a free appointment with the EAP coordinator by calling Oakside Clinic in Kankakee at (815) 933-2240. Please identify yourself as a Riverside HealthCare employee. A clinic staff member will assist you in making arrangements.

You may call the clinic at any time. If the office is not open, the operator will let you know when you can reach the clinic staff. If you need emergency assistance, tell the operator, and he or she will have a professional contact you.

As your personal contact, the EAP coordinator serves as a link between you and the professional resources in the community. The coordinator maintains a file for community agencies and professionals who are skilled at diagnosing and treating personal problems, so you can be referred to the resource most appropriate for your needs. If you need additional guidance, the EAP coordinator will continue to assist you as needed.

The Cost

Services offered by the EAP coordinator include up to three visits free of charge annually. If you should choose to seek professional assistance from a community resource, you will be responsible for any costs not covered by your medical insurance plan.

Confidentiality

A key element of the EAP service is confidentiality—to protect you and to encourage your participation. Your discussion with the EAP coordinator and the assistance you receive will be held in strictest confidence.

You will not have to share any information with your supervisor or anyone else at work. NO INFORMATION WILL BE SHARED WITHOUT YOUR WRITTEN CONSENT. Your job and promotional opportunities will not be placed in jeopardy because of your participation in the program.

Mandatory Referral

Riverside reserves the right to require employees to attend an EAP session if work attendance, behavior, or performance is substandard. Please review the Riverside Human Resources Policies and Procedures handbook.

Riverside HealthCare Employee Assistance Program

To schedule a free appointment with the EAP coordinator, call Oakside Clinic, 201 N. Wall Street, Kankakee, IL at (815) 933-2240. Please identify yourself as a Riverside HealthCare employee. We will be glad to help you.

Oakside Clinic
Riverside Behavioral Services
201 N. Wall Street, Kankakee
(815) 933-2240

RIVERSIDE Medical Center
Visit us online at www.RiversideMC.net
RHC Key Personnel Policies

Human Resources

Employment Categories

• Regular Full Time (.9 – 1.0 FTE)
• Regular Part Time (.5 – .89 FTE)
• Part Time (.2 – .49 FTE)
• Registry (.001 FTE)
• Temporary Relief (.001 FTE)

Introductory Period

90 days

– Upon Hire
– Upon a Change of Status to a new position (excludes FTE change in same role & same department)

Work Schedules

• Vary and are subject to change

Due to the nature of our work as patient/resident caregivers, 24-7-365, we may be asked to work shifts other than that for which we were hired.

Holidays

• New Year’s Day
• Memorial Day
• July 4th
• Labor Day
• Thanksgiving
• Christmas Day

Hourly employees who work on a holiday receive holiday pay which is the equivalent of time and one-half, regardless of FTE. Exempt employees must use earned time to get paid for a non-worked holiday. If earned time is not yet accrued, the holiday will be paid and deducted from the balance when available.

Employee Identification

• All employees are required to wear name tags while working in a visible location above the waist.

Employee ID’s also serve several other functions:

– Timekeeping (discussed in a later slide)
– Access to secure entrances for specific employees/positions
– Payroll deductions for Riverside purchases (e.g., cafeteria, coffee shops, gift shop, pharmacy)
– Debit capability for coffee shop and cafeteria
**Attendance and Punctuality**

An occurrence of attendance is an unscheduled absence that has not been approved in advance.
- Excessive absenteeism is defined in the policy.
- Attendance during orientation is critical.

Employees are expected to be clocked in and at their workstation ready to begin work promptly at their scheduled shift starting time. (Rounding rules for payroll purposes do not excuse a late clock-in.)

**Time Keeping**

- The Kronos Time and Attendance system is used to accurately pay employees.
- Employees are to use the department’s assigned clock unless reporting for a mandatory Education class.
- Examples of functionality at the timeclock may include:
  - Directing hours to orientation or floating to another department
  - Meal deductions
  - Review of past punches

HOURLY / NON-EXEMPT employees must be paid for ALL hours worked. SALARIED / EXEMPT employees must swipe once each day as directed by their supervisor.

**Rest and Meal Periods**

Hourly Non-Exempt employees who work 8 to 12 hour shifts are typically allowed two 15-minute PAID rest periods.

Hourly Non-Exempt employees who work 6 hours or more hours are given one 30-minute UNPAID meal break that must be taken away from the worksite.

Rest and Meal Periods may be assigned by the supervisor.

Employees who leave the campus must clock out. If clocking out for a rest period, it is no longer a paid break.

**Involuntary Time Off (IVO)**

- Policy outlines how staffing levels change based on work volume.
- Choices when assigned IVO may include using Earned Time as a means of getting paid, or choosing to taking the time as IVO-Unpaid.

(IVO-Unpaid must be designated and entered into the KRONOS time and attendance system. Hours recorded as IVO-Unpaid will count toward the accrual of certain benefits.)

**Payday / Direct Deposit / Paperless Paychecks**

- Paydays are bi-weekly, every other Friday.
- Pay periods and pay dates can be found in your orientation packet.
- In consideration of our environment, Riverside is paperless for employee pay stubs.
  - As an organization, this helps us be more efficient by decreasing hours spent printing and distributing paper checks and paycheck stuffers. Most importantly, this will make it convenient for Riverside employees to easily access pay information using the Internet anywhere.
  - Instructions for accessing your online pay stub can be found in your General Orientation Packet.
- Direct Deposit – If you haven’t already, be sure to fill out a Direct Deposit form and turn it in today.
  - If you do not set up a direct deposit account by Wednesday of this week, you will be paid via a payroll debit card assigned to you by Riverside.

**Performance Appraisals**

- Done annually on all employees.
  - Common review dates:
    - Most Employees – On or about July 1st
    - Specific Management roles – January 1st
- Pay increase is determined by your overall rating on your appraisal.
  (The job description and performance appraisal are combined into one document.)
Disciplinary Guidelines

- Verbal warning
- Written warning
- Suspension
- Termination

Employee Conduct and Work Rules

- Policy that gives examples of the reasons an employee may be terminated immediately without prior warning

Solicitation

Employee Benefits

- Must be a .5 FTE to be eligible for most benefits (30 days to enroll with a Change of Status)
- Information about benefits and enrollment to follow this presentation

Earned Time

Earned Time is available for 0.5 FTEs and greater

**Earned Time - Accrual Rates**

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<tr>
<th>Years of Service</th>
<th>Hourly Employees</th>
<th>Exempt Employees</th>
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<tr>
<td>0-5</td>
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<td>6-9</td>
<td>.0904</td>
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<td>10-15</td>
<td>.1038</td>
<td>.1231</td>
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<td>16 and Over</td>
<td>.1077</td>
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Earned Time FAQ's

• Earned Time begins accruing immediately, but is not available to use until after 90 days.
• Earned Time may be “carried over” to a maximum accrual of one and one-half the employee's annual accrual.
• Earned Time may be donated to another employee in an emergent situation.
• Earned Time may not be cashed out unless requested for an extreme and documented hardship (see policy guidelines).

Employee Assistance Program (EAP)

• Provides free short term counseling for Riverside Health Care employees and their immediate family members.
• Confidential.

Our Commitment to Healthy Communities & Employees – We’re Smoke Free!!

Many people are not aware of how smoking impacts health care and recovery.

NOTE: There is NO smoking on any of our property or within SIGHT of our property at any time.

Human Resources Department

• Call us if you have any questions!!

Welcome to the Riverside Team!
Riverside Healthcare Employee Benefits

**Choices and Advantages for Riverside Healthcare Employees**

- The Benefit Booklet and this presentation are available for you...
  - on the benefit enrollment website
  - on RiverNet
  - on OLIE
  - or in the Human Resources department

**Eligibility**

- All employees that are a 0.5 FTE or greater are eligible to participate
- Employees that are a 0.90 FTE or greater receive:
  - A greater contribution by Riverside for Health and Dental coverage
  - The ability to enroll in life insurance, dependent life, and long term disability insurance

**Coverage Effective Dates**

- Health, dental, and vision benefits begin on the first pay period following date of hire
- 30 days to enroll, but enroll as soon as possible so that deductions begin on time
- May make benefit changes once a year at Open Enrollment or for Qualifying Events
  - Change of status (from FT to PT or PT to FT)
  - Family status change (spouse loses benefits, marriage/divorce, birth, dependent gets benefits elsewhere, etc.)
- Long term disability, short term disability, and life insurance begin six months after the hire date

**Benefits Levels**

- Benefit Level - Definition of benefit levels based on people who are covered will be defined as:
  - Employee
  - Employee plus Spouse
  - Employee plus Child/Children
  - Family
- This definition applies to health insurance, dental insurance, and vision insurance

**Spousal Surcharge**

- Employees who choose to cover their spouse in Riverside’s group medical plan and whose spouse is eligible for medical coverage with their employer will pay a $60 surcharge per pay period, in addition to the health insurance premium.
- The Spousal Surcharge will be waived if:
  - Your spouse is unemployed, self-employed, or retired
  - Your spouse is covered by Medicare
  - Your spouse is also employed by Riverside Medical Center
Dependent Eligibility Verification (DEV)

- All employees' covering dependents on their medical, dental, or vision plan are required to provide confirmation that their dependents are eligible.
- This process requires that employees submit proof of eligible status via mail or fax.
  - e.g. birth certificate, marriage certificate, prior year's tax return, divorce decree, spouses employer's eligibility statement, etc.

Health Insurance

- Administered by Humana
  - Riverside Gold PPO Plan
  - Riverside Silver PPO Plan
  - Riverside Silver HDHP (HSA eligible) Plan
  - Riverside Bronze HDHP (HSA eligible) Plan
    - The Bronze plan is the default plan for employees who choose not to participate in the REACH Employee Wellness Program.

Affordable Care Act

- Riverside has confirmed that all plan designs comply with required benefits according to the Affordable Care Act as well as ensuring that our plans meet the affordability standard.
- The Affordable Care Act requires everyone to have minimal essential health insurance coverage. Financial penalties will be assessed by the government if coverage is not purchased.
- The Marketplace has been available since 2014. Because Riverside's plan meets the affordability standard, employees will not be eligible for subsidies were they to go to the marketplace to purchase coverage.
- Medicaid Eligibility – [www.abe.illinois.gov](http://www.abe.illinois.gov) Illinois has expanded Medicaid eligibility and depending on the household size and income, employees could be eligible for medicaid coverage thru the State of Illinois.

MyHumana

- Register at Humana.com to find your personalized health and benefits information.
  - Check claims – check if a claim has been paid along with your estimated cost.
  - Coverage details – review deductibles and coverage levels.
  - Health and Condition Centers access health information specific to your conditions and life stage.
  - Manage access – give other adults on your policy permission to access your health information (HIPAA reminder: parents cannot access claims information for an adult child – nor when calling patient accounts).
- HumanaHealth – Nurses and clinicians are available to discuss Health living, pregnancy, hospital care, chronic conditions, etc.
- Humana First - Dial 1-800-622-9529, choose “Nurse Advice”, and select “Health Planning and support”

100% Coverage for Well-Care Services

- All Well-Care Services will be covered at 100% at the home hospital (tier 1) and Humana (tier 2) levels.
- Well-Care Services include immunizations, routine physical exams, routine labs, mammograms, etc... anything your doctor orders that is preventative or wellness related.
  - Keep in mind that once a well-care service becomes a diagnostic code, the coverage level changes to the Diagnostic Test level, which is subject to deductible and covered at 90% at the home hospital level or 70% at the PPO level.
Gold PPO Plan
- $1500 deductible if you go to Riverside or RUSH
- Three tiers of coverage for hospital services
  - Riverside/RUSH - 90% coverage after $1500 deductible
  - Other Humana PPO hospitals - 70% coverage after a $1500 deductible
  - Out of Network - 50% coverage with a $1500 deductible
- $200 Emergency Room Co-Pay
- Maximum out of pocket expense per person per plan year
- $250 if stay at Riverside/RUSH and use Riverside In-Network Physicians
- $525 if go to another Humana PPO facility or use other PPO doctors
- Additional per admission deductibles if go out of network

Silver PPO Plan
- $3000 deductible if you go to Riverside or RUSH
- Three tiers of coverage for hospital services
  - Riverside/RUSH - 90% coverage after $3000 deductible
  - Other Blue Cross PPO hospitals - 70% coverage after a $3000 deductible
  - Out of Network - 50% coverage after a $3000 deductible
- $200 Emergency Room Co-Pay
- Maximum out of pocket expense per person per plan year
- $4000 if stay at Riverside/RUSH and use Riverside In-Network Physicians
- $6750 if go to another BC PPO facility or use other PPO doctors
- $9250 if go out of network
- Additional per admission deductibles if go out of network

PPO Prescription Coverage
- $10 co-pay for generics
- $40 co-pay for formulary brand names
- $60 co-pay for brand names and injectibles
- $100 co-pay for Specialty Medications
- Use Riverside Family Pharmacy and get three months supply of maintenance drugs (excluding specialty drugs)
  - TWO co-payments in the Gold Plan
  - ONE co-payment in the Silver Plan
- Detailed information about prescription drug coverage is available at www.benefitstalk.com/Riverside.
- You can confirm coverage of any prescriptions drugs you currently fill to see if there are indicators in the formulary that may affect limits, prior authorization, or step therapy.

HDHP Silver HSA Qualified Plan
- For services other than preventive care, you are providing first dollar coverage until your deductible is met. There are no co-pays in a HDHP.
- Deductible $2600 at Riverside (tier 1) and Humana (tier 2); $5000 out of network (tier 3).
- Co-Insurance 90% at Riverside, 70% at Humana, 40% out of network.
- Max out-of-pocket (up to two per family) $3500 at Riverside, $6000 at Humana, and $12000 out of network.
- Once you meet the out of pocket maximum, services will be covered in full (for covered benefit) up to the allowable amount.
- Preventive services are covered in full at the first two tiers.
- Generic preventative drugs are not subject to deductible at tier 1 when filled at Riverside Family Pharmacy.

HDHP Bronze HSA Qualified Plan
- This is the default plan for those who choose to not participate in the REACH Employee Wellness Program.
- For services other than preventive care, you are responsible for paying out-of-pocket until your deductible is met. No co-pays for office or ER visits and prescriptions.
- Deductible $4000 at Riverside and Humana; $6000 out of network.
- Co-Insurance 80% at Riverside, 60% at Humana, 40% out of network.
- Out-of-pocket annual limit (up to two per family) $5000 at Riverside, $6350 at Humana, and $12000 out of network.
- Once you meet the out of pocket max, services will be covered in full (for any covered benefit) up to the allowable amount.
- Preventive services are covered in full at the first two tiers.

Choices Available
- In order to be eligible to choose from any insurance plan Riverside offers during Open Benefit Enrollment, employees must have complete the following REACH employee wellness requirements:
  - On-line Health Assessment
  - Screening Lab Work
  - Physician Wellness Visit
- Those who did not complete these criteria will only be eligible for the HDHP Bronze Plan.
HDHP Rx Coverage

- **Silver HDHP**
  - Generic Preventative – 100% Not Subject to Deductible
  - Generic Drug – 100%, after Deductible
  - Formulary – 80%, after Deductible
  - Non-Formulary - 80%, after Deductible
  - Specialty - 80%, after Deductible
  - Then covered at 100% after meet max out of pocket

- **Bronze HDHP**
  - Generic Drug – 100%, after Deductible
  - Formulary – 80%, after Deductible
  - Non-Formulary - 80%, after Deductible
  - Specialty - 80%, after Deductible
  - Then covered at 100% after meet max out of pocket

HSA -- Health Savings Account

- You must be in a HDHP to contribute to a HSA
- You can contribute in a lump-sum or in any amount and frequency that you wish. You can elect a certain amount for payroll deduction per pay period during your online benefit enrollment.
- There is a limit to how much you can contribute to your HSA each year. The maximum is $3,350 for single coverage and $6,650 for family. Over age 55 are eligible for additional $1000 catch-up contributions.
- There will be instructions for setting up your HSA thru PNC Bank. A Direct Deposit from your paycheck will go into your HSA account.
- Pay qualified medical expenses with your PNC Health Savings Account Visa® debit card, by transfer of money from your PNC HSA to a personal bank account, reimbursement via check request or by HSA check
- If you are enrolled in HDHP HSA account AND want to contribute to a Flexible Spending Account (FSA), you will only be able to enroll in a Limited FSA that allow eligible expenses only for dental and vision care.

Riverside In-Network Physicians

- For a better level of coverage, employees should choose physicians on the Riverside In-Network Physician List.
  - PPO Plans:
    - $20 co-pay per office visit
    - $40 co-pay for specialists
    - 90% coverage (after deductible) for inpatient visits at Riverside
    - 70% Humana provider after deductible
    - 50% out of network after deductible
  - HDHP: Must meet deductible first then co-insurance starts
- An updated list is available...
  - online at [www.benefitslink.com/riverside](http://www.benefitslink.com/riverside)
  - on RiverNet (in the Benefit Folder under Human Resources)
  - or from Human Resources
- The list of physicians is subject to change from time to time, depending on the hospital affiliations of the physician, relocation and other criteria.

FastCare

- Riverside's FastCare clinic offers convenient health care for minor conditions and non-emergency illnesses... quality care provided by a nurse practitioner. For Details, go to [www.riversidemc.net/fastcare](http://www.riversidemc.net/fastcare)
  - Minimal waiting periods—walk-ins only—no appointments necessary
  - Open 364 days a year, with day and evening hours
  - Patients must be 18 months or older.
  - Located inside the Bourbonnais Walmart - (815) 936-6012
- If you are enrolled in one of the PPO Plans, you will only pay a $10 Co-Pay
- If you are enrolled in a HDHP, you will pay the entire cost of all visits until you have met your deductible, then the visit is covered in full. (Currently $59 per visit.)

Authorizations

- Prescription Drug Programs:
  - Generic Drug Utilization
  - Step Therapy Program
  - Prior Authorization
- Pre-authorization for hospital admissions is required.
  - The penalty for not obtaining pre-auth is $300
  - Humana works with your physician to coordinate services and to determine if a second opinion is required.
  - $300 penalty if a second surgical opinion is not received.
  - Emergency admission must be reported within 48 hours

Tobacco Surcharge

- The purpose of the Tobacco Surcharge Program is to provide additional motivation to encourage healthy lifestyles in our workplace environment. In addition to promoting healthy lifestyles, the surcharge will help cover additional health plan expenses generated by smoking and other tobacco related health problems.
- The surcharge applies only to employees and their dependents enrolled in health insurance.
- $15 per pay period for each covered family member who uses or has used tobacco products within the past six months.
Quit Smoking Help

- Riverside would like to help make it easier for you to quit by reimbursing you and your dependents the cost of the following smoking cessation programs
  - Freedom From Smoking: Cost $30.00 (refunded to you upon completion) - American Lung Association program - 8 week series of weekly sessions at Riverside Medical Center.
  - Reimburse up to $100 for out-of-pocket expenses for quit smoking aids, such as medications, gum, patches, etc. Bring your receipts to Employee Health for reimbursement.

REACH Employee Wellness Credit

For more information go to http://www.riversidemc.net/reach

- Benefit eligible employees can earn an additional $20 per pay period by completing the following:
  1) On-line Health Assessment
  2) Screening Lab Work
  3) Physician Wellness Visit
  4) Coaching (if required)

- Spouses who are enrolled in Riverside’s health plan are eligible to take advantage of the REACH Wellness Program.
- Selected employees will be offered participation in our Population Health Management program. Those who choose to participate can earn additional REACH wellness dollars.

Blue Care Dental PPO

- PLAN A
  - $50 deductible applies to basic and major services
  - 100% coverage of preventative care of usual and customary charges
  - Covers 50% of orthodontic care up to $1500
  - $1500 annual benefit maximum

- PLAN B
  - $50 deductible applies to basic and major services
  - 100% coverage of preventative care of usual and customary charges
  - no coverage of orthodontic care
  - $1000 annual benefit maximum

Vision Insurance

- Offered by VSP
- Must go to an in-network provider to have optimum coverage
- $20 copayment for exams and lenses/glasses
- Covers an eye exam once every 12 months
- Covers new lenses once every 12 months
- Covers new frames once every 24 months
- Can get contacts in lieu of glasses

FSA -- Flexible Spending Accounts

- FSA’s are a way to save money by paying for certain health and dependent expenses with before tax dollars.
- You may deposit a minimum of $130 per year ($5 ppp)
- You may deposit a max of
  - Health FSA - $2500 per year ($96.15 ppp)
  - Dependent FSA - $5000 per year ($192.30 ppp)
- "Use-It-or-Lose-It" Rule: Plan carefully to maximize the tax benefit
- Our plan year is from January 1 through Dec 31
- We offer a grace period through March 15 of the next year to incur claims
- If you are in an HSA, you will be eligible for a “Limited FSA” only

FSA

- Health FSA
  - Deductibles and copayments from your medical and dental plan
  - Medical, dental and vision care not covered by your insurance plans
  - Hearing care expenses
  - Certain over-the-counter products
  - A complete list is available on-line under the “MyFSA” tab.

- Dependent Care FSA
  - Eligible expenses include care in your home or someone else’s home or dependent day care centers
  - Eligible dependents include
    - Dependent children who are 12 or younger
    - Physically or mentally handicapped children of any age
    - A spouse, parent, or other relative who is incapable of caring for him or herself.
FSA

- Administered by WestLake Financial Group
- Debit Cards available for all participants
- Use at eligible FSA locations wherever MasterCard® and Visa® are accepted
- Physician and dental offices, vision providers, pharmacies, dependent care providers.
- Manual claims processed within 48 hours and checks mailed daily
- On-line access to balances and recent transactions
- Automatic Processing of FSA medical claim.
- WestLake will automatically process the balance from your FSA account for any FSA eligible amount (charges that went to your deductible, co-pay or coinsurance).
- You may elect to turn off the automated processing if you prefer to do manual claims.

Basic Life Insurance

- Riverside provides basic life insurance benefits for full time employees (.9+)
- 1 ½ times your base annual earnings
- May increase your level of coverage:
  - 2 ½ times your base annual earnings
  - 3 ½ times your base annual earnings
- Costs vary based on your age and income

Dependent Life Insurance

- Riverside provides Basic Dependent Life Insurance benefits:
  - Covers spouse and children at $2000
  - Covers infants at $1000
  - Can elect additional coverage for spouse and children for a total benefit of $5000 or $10000 (Cannot purchase additional coverage for infants)

Short Term Disability

- Provided for employees who are a 0.5 FTE or greater
- Begins after an employee is off work for 80 hours due to a medical condition
- Continues until the employee can return to work or for six months
- Pays 66 2/3% of your salary
- To qualify, an employee must begin the FMLA process with Human Resources

Long Term Disability

- Riverside provides full time employees a core benefit of 50% of your salary
- Coverage begins after being unable to work for six months
- Buy up option:
  - Hourly employee can purchase an additional 10% of coverage (total benefit = 60%)
  - Salaried employees can purchase an additional 16 2/3% of coverage (total benefit = 66 2/3%)

Enrollment Process

- Log on to the BenefitsTalk™ website at www.benefitstalk.com/riverside
- WestLake Financial Group is our administrator for this online process.
- Review online plan information and enroll in your benefits.
- Benefit Call Center representatives are available toll free at (866) 932-6851
  - 7AM-6PM Monday through Friday
Retirement Savings Plan

- Set aside money on a pre-tax basis to save for retirement
  - Great West Retirement Services (www.GWRS.com or call 800-701-8255; Jennifer Frahm, Great West Rep–312-758-3611)
  - Riverside Matching Contribution
  - Automatic Enrollment will begin after a 90-day waiting period
  - Great West will send a letter to your home with a PIN number
    - Change your deferral amount
    - Decline enrollment
    - Manage your investments

Voluntary Benefits

- Twice a year in January and July
  - Universal Life Ins (with long term care rider)
  - Term Life Insurance
  - Cancer / Critical Illness Insurance
  - Accident Insurance
  - Enroll at any time
  - Pre-paid legal services
  - Bright Start College Savings Plan
  - Met Life Home and Auto Insurance

Riverside Health Fitness Center

- Riverside offers employees monthly membership at half price.
- Riverside will pay 50% of monthly membership for the first family member (i.e. spouse or dependent)
  - This also applies if the second family member is enrolling in the Fitness Island Membership program
- Enrollment fees are also reduced to $50 for employee and $75 for family member.
  - Enrollment fee will be waived for employees who enroll within the first 30 days of employment.
- To receive discounts, employees must pay through payroll deduction, commit to a one year membership, and be a 0.5 FTE or greater

Riverside Assistance Benefits

- Employee Assistance Program (EAP)
- Tuition Reimbursement
- Home Ownership Assistance
- Ease in Purchasing

Ease in Purchasing

- Employees .5 FTE or greater may make purchases by swiping one’s name badge in the gift shop, cafeteria, and coffee shops
- These charges are then automatically deducted from the employee’s next pay check.
- Employees may also use payroll deduction to pay for purchases at the Riverside Family Pharmacy and Health Equipment store.
- Payroll deductions may also be set up thru Riverside Patient Financial Services to pay for Riverside medical bills.

Questions?

- Christi Landeck, Benefits Specialist, Human Resources
- Benefit Call Center 866-932-6851