Amarillo VA Healthcare System
6010 Amarillo Boulevard, West
Amarillo, TX 79106

Orientation For Non-Employees:

Clinical Trainees
Contract Employees
Work Studies

Please read through the information presented in this booklet.

Orientation must be completed **prior** to beginning your rotation/work at the VA

This represents the minimum information you need to work safely and provide good customer service.

You are responsible for knowing the information in this booklet.

Submit the signature page and certificates of training to Education Service (00ED)

Questions? Call Education at 806-354-7864 or 806-355-9703 x 7343

On his second inaugural address, **Abraham Lincoln** identified a new mission for the government:

"To care for him

who shall have borne the battle

and for his widow and his orphan."

Following this call, and through the years, Congress has passed a number of laws that benefits and other services are provided to veterans, their dependents and beneficiaries. To ensure this mission is accomplished and administered properly, the US government created the **Veterans Administration (VA)** as an independent federal agency on July 21, 1930.

This arm of the Executive Branch of government became the **Department of Veterans Affairs (VA)** on March 15, 1989, and has grown into the second largest of the 15 Cabinet Departments. To best implement its mission, DVA is organized into three major components:

- **The Veterans Health Administration (VHA),** which operates a nationwide program of health care and prevention
- **The Veterans Benefits Administration (VBA),** which operates a nationwide program of financial assistance
- **The National Cemetery Administration (NCA),** that operates a number of cemeteries reserved to honor the lives of individuals who served with honor in the military.

An **Under Secretary of VA** manages each one of these branches. Over 220,000 employees assist veterans in various roles throughout the organization. And despite many evolutionary changes, it is still the words of Abraham Lincoln that guide all activities carried out by these offices.

It is estimated that the veteran population includes **25.3 million individuals,** with more than three of every four veterans serving during a war or an official period of hostility. About a quarter of the nation's population (approximately **70 million people**) are potentially eligible for VA benefits and services because they are veterans, family members or survivors of veterans.

The total budget of VA during fiscal year 2003 was estimated at $ 57.5 billion. Fifty-three percent of the budget is dedicated to direct payments to veterans in the form of compensation, pension, and education benefits, while nearly $24 Billion have been allocated to their medical care.

Further information can be found on **Department of Veterans Affairs** website.

Additional Information about the Veterans Health Administration (VHA)

The idea of providing health care to soldiers dates back to colonial America. In 1776 the Continental Congress encouraged enlistment by providing pensions to those who became disabled.

During the Civil War, President Lincoln called upon congress and the American people **"to care for him who shall have borne the battle, and for his widow and orphan".** This has become the motto of the VA.

During WWII, congress established new veterans benefits including disability compensation, insurance, a family allotment program and vocational rehabilitation. The Veterans Administration was established in 1930 when congress authorized the President to consolidate and coordinate government activities affecting war veterans. Initially this served over 4.7 million veterans.

During WWII it became necessary to expand the VA facilities to accommodate the vast increase in veteran population. The Korean and Vietnam era service added more veterans. By 1982, the veteran population was estimated at 28.5 million. The VA currently operates hospital, clinics and nursing homes. In addition, the VA supports an outstanding medical research program that has made significant improvements in health care treatments.

The VHA is divided into geographic areas called Veterans Integrated Service Networks (VISN). The Amarillo VA Healthcare System is part of VISN 18 (Southwest Network) and covers west Texas, New Mexico, and Arizona. VISN 18 provides a continuum of high quality care services to all eligible veterans. VISN 18 is built on a foundation of primary care and is accountable for community health, joint-venture initiatives with Department of Defense (DOD), major research initiatives and education affiliations.

The VHA Today

The VHA operates the largest healthcare deliver system in the United States. It employs over 244,032 people.

Historically the VA population has primarily been male. As a group, the VHA treats patients that are older, sicker, poorer and more likely to have social problems and mental illness. The VA is striving to improve services to women veterans. During 1996, nearly 180,000 women sought outpatient care and 16,000 sought inpatient care at VA facilities.

Currently the VA operates 155 hospitals, 872 ambulatory care facilities, 135 nursing homes, 45 residential rehabilitation treatment programs, 108 comprehensive home-care programs, and 209 readjustment counseling "Vet" centers.

VA offers a wide variety of medical care to eligible veterans, including hospital and nursing home care, outpatient medical treatment, pharmacy services, and dental treatment. Eligibility and availability of services varies by facility.

In addition to providing medical care, the VA is the nation's largest trainer of healthcare professionals and has affiliations with medical schools, academic hospitals, and research institutions. VHA contributes significantly to education and training in more than 40 different associated health professions.

The VA is a major national research asset conducting basic, clinical, epidemiological and behavioral studies across the entire spectrum of scientific disciplines.

The Amarillo VA Health Care System

The Amarillo VA was started in 1939 on 360 acres of county property. The original hospital was licensed for 143 beds. The first patient was an Army nurse admitted in May 1940.

Currently the Amarillo VA Healthcare System provides services for veterans in the Texas panhandle, eastern New Mexico, western Oklahoma and portions of southern Kansas and Colorado. The healthcare system provides acute medical and surgical care, extended care, ambulatory care and substance abuse treatment. The average age of the veteran population is 60.

Since 1985, the Amarillo VA has added outpatient clinics in Clovis and Clayton, New Mexico, Liberal, Kansas as well as Memphis, and Lubbock, Texas. In 1997, the Telephone Triage program was established and the Women's Center opened to provide comprehensive care and consultation to women veterans.

Additionally, the Amarillo VA Healthcare System operates a 120-bed Geriatrics and Extended Care facility.

VA's Culture of Customer Service
Core Values

The culture of customer service is founded on these VHA core values:

Trust
Trust means having a high degree of confidence in the honesty, integrity, reliability and sincere good intent of those with whom we work, the services that we provide, and the system that we are part of. Trust is the basis for the caregiver-patient relationship and is fundamental to all that we do in healthcare.

Respect
Respect means honoring and holding in high regard the dignity and worth of our patients and their families, our co-workers, and the system we are part of. It means relating to each other and providing services in a manner that demonstrates an understanding of and a sensitivity and concern for each person's individuality and importance.

Commitment
Commitment means dedication and a promise to work hard to do all that we can to provide service to our co-workers and our patients that is in accordance with the highest principles and ethics governing the conduct of the healthcare professions and public service. It is a pledge to assume personal responsibility for our individual and collective actions.

Compassion
Compassion means demonstrating empathy and caring in all that we say and do. It means sharing in the emotions and feelings of our co-workers, our patients and their families, and all others with whom we are involved.

Excellence
Excellence means being exceptionally good and of the highest quality. It means being the most competent and the finest in everything we do. It also means continually improving what we do.

Updated: July 23, 2007

VHA Core Values

The five core values of VHA are reflected in the way all employees and trainees work together as an interdisciplinary team to recognize and care for each patient. These values translate into actions through standards all employees and trainees are expected to uphold:

VHA employees and trainees respect and support patient rights as outlined in the Customer Service Standards.

VA treatment team members are expected to act as first line patient advocates assuring that these rights are provided for each patient and that problems or complaints are addressed.

- We will treat you with courtesy and dignity. You can expect to be treated as the 1st class citizen that you are.
- We will provide you with timely access to health care. We post local timeliness standards, keep track of how well they have been met and make continuous improvements to meet your needs.
- One health care team will be in charge of your care. You can expect to know whom to contact when you need help or have a problem.
- We will involve you in decisions about your care. Your preferences will be met whenever possible and medically appropriate. We will listen to your concerns and discuss them with you.
- We will strive to meet your physical comfort needs. This includes managing your pain, maintaining your privacy and helping you with eating and bathing when you are hospitalized. We will also ensure proper facilities for veterans with special needs.
- We will provide support to meet your emotional needs. We will encourage you to share any anxieties and fears you may have about your condition or treatment. We will be sensitive to your feelings and help you to deal with your health care experience.

We will take responsibility for coordination of your care. Many patients need to see more than one health care professional. We will work together and with you to develop a clear plan of care. If you need a specialist, one will be provided.

- We will strive to provide information and education about your health care and answer your questions in a way that you understand.
- We will provide opportunities to involve your family in your care if you wish for them to be involved.
- We will provide smooth transition between your inpatient and outpatient care. You can expect to understand what medicines you are to take, what danger signals to watch for, and what activity level you can have after discharge. You can expect to know whom to contact if you need help or advice right away, and when your follow-up appointment is scheduled.

Updated: July 23, 2007

About Our Patients

Nationwide, the number of patients cared for by the VHA has increased from 2.9 million in 1995 to 5.5 million in 2006. Forty-five percent of the patients are over 65 years of age, 78 percent have an income of $25,000 or less, and 31 percent do not have any health insurance.

All our patients have had military experience and may have been exposed to unique health risks that have affected their health status. Knowing the patient's military service history helps establish rapport and a working partnership with the patient. It also helps trainees better understand their health needs.

Updated: July 23, 2007

Patient Education

Patient education is an important component of customer service and patient care. Information provided to patients needs to be clear and understandable to the patient. Patients may need to be asked to repeat back to you in his/her own words the information just provided, to verify that the patient perceived your message correctly.

Patients also have access to a wealth of health information via the Internet. Health care providers may also use these sites to obtain patient education material suitable for patients:

http://www.consumer.gov/health.htm

http://medlineplus.gov

http://www.health-evet.va.gov/healthinfo/HealthGateBeWell.asp

Other available products include: Krames on Demand and Healthwise.

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Unique Health Risks

As is true with all patients, the clinical interview must be geared to the special needs of the patient. Individuals who have served in the **military may have been exposed to unique risks** that do not affect the general population. They may also have survived some **unique experiences** that must be investigated to fully understand the patient's condition. Trainees need to explore these areas of concern.

The following questions may help trainees focus on these special topics:

- Tell me about your military experience.
- What did you do?
- When and where did you serve?
- Did you see combat, enemy fire, or casualties?
- Were you wounded or hospitalized?
- How did your military experience affect you?
- Where you a prisoner of war?
- Did you participate in any experimental projects?
- Do you have a service-connected condition?

Issues of Special Concern in Veterans Health

As the military history is obtained, it is also important to recall that military personnel are vulnerable to conditions that are not common to the general population. Trainees need to recall these diagnoses and situations:

- Hepatitis C Virus
- Pain as the Fifth Vital Sign
- Homelessness
- Sexual Harassment and Trauma
- PTSD (Post Traumatic Stress Disorder
- WWII: Infectious diseases, wounds, exposure to nuclear wastes
- Korea: Cold injury
- Cold War: Nuclear testing
- Vietnam: Exposure to Agent Orange, infectious diseases
- Gulf War: Exposure to smoke, chemical or biological agents
- Traumatic Brain Injury ** (Operation Iraqi Freedom-OIF vets)

For more information on the above topics, visit the **VA Trainee Pocket Card** website or the Veterans Health Initiative website.

Updated: July 23, 2007

Discrimination

VA does not tolerate discrimination against an employee on the basis of race, age, sex, national origin, color, physical or mental handicap, sexual orientation. In addition, VHA has created **Special Emphasis** programs to support employees in identified minorities, including: Women, Asian/Pacific Islanders, Hispanic, Native American, Persons with Disabilities and Blacks.

Each facility has an **Office of Equal Employment Opportunity,** with an identified officer who assists employees who believe they suffer from discrimination, or reprisal for having participated in protected EEO activity. EEO staff will confidentially discuss concerns and explore possible avenues for resolution, through traditional and alternative dispute resolution techniques.

These guidelines protect employees and trainees, as well as the people trainees and employees come in contact with. Trainees are encouraged to identify situations of possible discriminatory action. The name and phone number of the local EEO Officer is Veronica Kahn at extension 7488.

Updated: July 23, 2007

Sexual Harassment

Sexual Harassment is a form of discrimination. VA does not tolerate sexual harassment in the workplace. Engaging in this misconduct may result in termination of training at any VA site.

Unwanted, unwelcome, or unsolicited sexual conduct imposed on a person who regards it as offensive or undesirable, defines sexual harassment. When the person receiving these advances communicates that the conduct is unwelcome, the action becomes illegal.

Sexual harassment includes **repeated and deliberate** unwanted sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature when such conduct has the purpose or effect of unreasonable interference with an individual's work performance or creating an intimidating, hostile, or offensive working environment. **Sexual jokes** and remarks with **sexual innuendo** can also be a form of sexual harassment and are not acceptable in a professional work environment. The key word in defining sexual harassment is unwelcome.

Sexual harassment may occur in the interaction with a patient. If a trainee initiates this action, it is considered **patient abuse** and subject to discipline and **immediate termination** of training at the VA site.

Emphasis is usually made on trainees not subjecting others to sexual harassment. However, it is also very important to note that this situation is reciprocal. Trainees are **protected** from sexual harassment from employees and from patients.

Trainees who believe that comments, gestures, or actions of a VA employee, patient or training supervisor constitute sexual harassment should **communicate** to that person that such behavior is unwelcome. Any trainee who believes he or she has been sexually harassed or who witnesses this type of behavior has a responsibility to report it immediately to a supervisor. The supervisor is responsible to initiate an immediate investigation to determine the validity of the complaint and bring it to the **EEO Officer**.

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Patient Rights

1. Patients will be treated with dignity as an individual, with compassion and respect, with reasonable protection from harm and with appropriate privacy. Care should include consideration of the psychosocial, spiritual, and cultural variables that influence the perceptions of illness.

2. Every Patient will receive to the extent that they are eligible, prompt and appropriate treatment for physical or emotional disorders or disabilities in the least restrictive environment necessary for that treatment free from unnecessary of excessive medication.

3. No patient will be denied his/her legal rights while hospitalized (except where state law provides otherwise).

4. Every patient will be afforded the opportunity to communicate freely and privately with persons outside the facility and to have or refuse visitors.

5. Patients have the right to receive unopened mail.

6. Patients will be afforded the opportunity to write letters.

7. Patients have the right to wear their own clothes and keep personal possessions, to spend their own money.

8. Patients have the right to social interaction, regular exercise and the opportunity for religious worship.

9. **Patient's medical records, and all other information about him/her, will be kept confidential.**

Reference:
Medical Center Memorandum (MCM) 135-02
PATIENT/RESIDENTS RIGHTS, RESPONSIBILITY AND COMPLAINT POLICY

VA Hospital Phone Numbers

VA Police	**66**
Main number	355-9703
Nursing Supervisor	Call the main number and have the Supervisor paged.
Education Service	extension 7864
Employee Health	extension 7168
Human Resources	extension 7328
EEO Officer	extension 7488
Nursing Service	extension 7862

Patient Care Areas:

3 North	extension 7185
3 South	extension 7132
ICU	extension 7141
Emergency	extension 7621
Outpatient Clinic	extension 7279
Operating Room	extension 7202
Nursing Home Unit A	extension 7700
Nursing Home Unit B	extension 7753

The Mission

The Mission of the Veterans Health Administration and the **Amarillo** VA Medical Center is to improve the health of the served population by providing

- Primary, Specialty, and Extended Care; and
- Related Social Support Services

Through an integrated health-care delivery system.

The Vision

The vision of the Amarillo VA Medical Center is to become:

- The recognized leader of health care in our community/region
- The provider of choice
- The employer of choice

PHILOSOPHY

We, the staff of the Amarillo VA medical Center believe:

Every patient we treat is equally deserving of the very best health care we can provide and every employee and volunteer plays an integral role in the delivery of this health care.

Organizational profile

The Amarillo VA Health Care System (AVAHCS) offers general medical and surgical inpatient care, day surgery, extended nursing home care, primary and specialty care, mental health services and substance abuse treatment to a population of 75,000 veterans in Texas, New Mexico, Oklahoma, Colorado and Kansas (Fig P1). The organization has transitioned from a stand-alone hospital and satellite outpatient clinic to a multi-facility health care system through the placement of community based outpatient clinics in medically underserved areas.

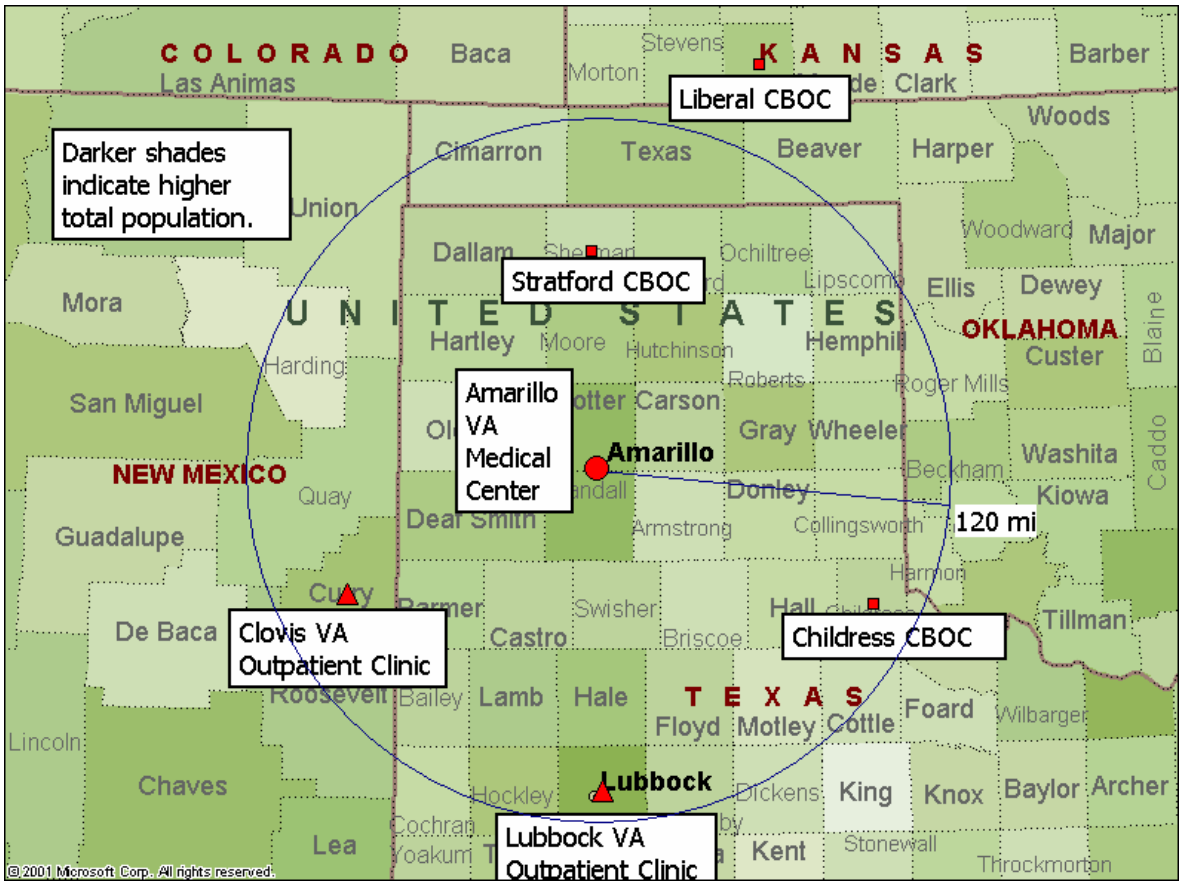
The AVAHCS is part of the Department of Veterans Affairs and primarily focuses on the health care needs of veterans who live in and around the Texas and Oklahoma Panhandle. Amarillo, the center of the service area, is a small city of approximately 184,941 with a technological and agricultural economic base. The surrounding rural area served by the CBOCs also has an economy based on agriculture and has many areas that have been designated as medically underserved.

Product / Service	How Provided
Health care	• 69 authorized medical/ surgical beds including a 14-bed ICU • Full-service primary and specialty outpatient clinic in Amarillo • Community Based Outpatient Clinics in Lubbock, TX, Clovis, NM, Liberal, Ks, Childress, TX, Stratford, TX • 120-bed Nursing Home Care Unit • Primary and Specialty care including mental health an substance abuse • Life Support Room (Amarillo only)

Currently, there are 783 full time equivalent staff employed at the AVAHCS and organized within the Functional Group structure. The provision of health care, education and emergency preparedness requires a high level of education among staff. In the Amarillo area 21% of the population has college degree compared to 49% of Amarillo VA workforce. Levels of education are depicted in Fig P4. Jobs vary widely from non-technical support positions such as housekeepers and food service workers, to highly specialized clinical providers (Fig P5).

Data as of:	BSA (2000)	NWTH (2000)	AVAHCS (2002)
Beds	416	309	69 (120 NHCU)
Clinic visits	63,201	245,000	200,000
Employees	2591	1700	783
Admissions		14,000	3000
Current or pending changes	New health card to offer savings, new CT capabilities	Heart cath lab construction	Newly constructed clinic in Lubbock, opening of GEM clinic, changes in eligibility laws, advent of group scheduling, Mental Health telemedicine

AVAHCS treats 28,000 unique patients annually, with 3000 inpatient episodes and 200,000 outpatient visits (FY02).



Amarillo Statistics and Demographics

Patient Demographics

86 % = Male
14% = Female

Ages of veteran population:

30% - 65-74 years old
19% - 75-84 years old
18% - 45-54 years old
17% - 55-64 years old
8% - 35-44 years old

Clinical Services

Primary Care Clinics
Emergency Department
Surgical Service
Medical Service
Nursing Service
Pharmacy
Prosthetics
Dental
Radiology
Laboratory and Pathology
Nutrition and Food Service
Mental Health Service

Specialty Clinics

Cardiology
Dermatology
Optometry
Audiology
Nephrology
Pre-operative
Neurology
Urology

The Medical Library

The Amarillo VA Healthcare System Medical Library is located on the second floor in room 2111. Operating hours are Monday-Friday from 7:30AM-4:00PM. The phone extension is 7877.

Available Services:

- MEDLINE searches
- Internet access
- Journals and reference materials

Students have access to the library materials during normal operating hours. However, students may not remove or check out library materials.

The Library has a large selection of professional journals for various healthcare specialties. Please check with the Library for specific titles.

Parking and Traffic Violations/Incidents

Parking directly in front of the hospital is reserved for patients. Parking lots are routinely patrolled by the hospital Police. Student parking is permitted in the large SW lost (off Amarillo Boulevard).

Any legal action related to traffic accidents, theft of government property, weapons violations, etc., may be referred to the Federal Court system.

Cell Phones

Cellular phone frequencies can interfere with life support equipment such as cardiac monitors, telemetry units, ventilators and computerized equipment. Please follow the instructions on signs posted in restricted areas.

Weapons

Weapons are prohibited within Federal facilities. Violators will be prosecuted.

Smoking

The Amarillo VA Healthcare System is a smoke free facility. Smoking is permitted only in designated areas.

Sexual harassment/ discrimination

The VA has a ZERO tolerance for sexual harassment or discrimination. Complaints are handled through Human Resources, EEO Managers, or the Office of Resolution Management.

Patient Confidentiality

All patient information is considered confidential. This includes the electronic (computer) patient record. Breach of patient confidentiality is not tolerated and will result in disciplinary action. **Anyone** with access to patient information must complete the VHA Privacy Training.

Computer Security

Access to the hospital computer system is restricted to authorized users. Unauthorized use of a computer will be reported to the Information Security Officer (ISO). **Anyone** granted computer access must complete the VA Computer Security Training.

Restraints

The Amarillo VA Healthcare System makes every effort to be restraint free. Use of restraints/restraining devices in the hospital and/or nursing home is closely monitored and reported through the Performance Improvement process. We do not have seclusion rooms and do not use leather restraints.

Hazardous Materials

Healthcare facilities use a number of chemical products, including cleaners, solvents, reagents, caustic acids and flammable products. Large chemical spills may require the services of the city HAZ-MAT team. If you observe leaks or any unsafe practices or activity, please notify Engineering/Safely at extension 7424/7422 immediately.

Customer Service

Good customer service

- Address the person by his/her name
- Follow through on what you promised to do
- Introduce yourself
- Never say, “That’s not my job”.
- Practice good telephone etiquette; try to answer by the 3rd ring
- Keep patients informed of their care
- Ask patients for ways we can improve care/services

VA Standards of Customer Service

- We will treat you with courtesy and dignity
- We will provide you with timely access to health care
- One health care team will be in charge of your care
- We will involve you in decisions about your care
- We will strive to meet your physical comfort needs
- We will take responsibility for coordination of your care.
- We will strive to provide information and education about your health care in a way you can understand.
- We will provide opportunities to involve your family if that is your choice
- We will provide smooth transition between your inpatient and outpatient care.

Staff Responsibilities

- Treat each patient with respect and compassion
- Treat staff and students with respect and courtesy
- Provide appropriate privacy
- Assure reasonable protection from harm

Emergency Procedures & Numbers

Code Blue
A code Blue is called in the event of a medical emergency such as cardiac or respiratory arrest. If you are in a clinical area code blue buttons are located in patient rooms

Outside the clinical area:
Dial **65** to alert the operator to announce a code blue.

Remember to include your location. Repeat the message at least twice!!

Code Red
A code Red is called in the event of a fire drill or actual fire.
Know what RACE means:

R = Rescue anyone in danger
A = Alarm. Pull the fire alarm and call the operator.
C = Contain. Close room doors.
E = Extinguish or Evacuate. Extinguish the fire if possible. Prepare to evacuate.

Code Orange
A code orange may be called to activate the crisis intervention team. The team is available to handle disruptive or assualtive situations.
Dial 65. Announce your location. Repeat twice.

Code Green
A code green is called when assistance is needed to handle a disruptive or assaultive situation that **involves a weapon**. **Dial 65**. Announce your location. Repeat twice.

Code Yellow
A code Yellow is announced in the event of a De-Contamination incident.

Code Black
A code black will be announced overhead in the event of a radiation emergency. The Amarillo VA is the designated receiving hospital for radiation casualties. Code Black team members have a star on their badge.

Code Gray
The computer system is DOWN !!! An announcement will be made throughout the hospital to alert staff about computer outages.

CODE RED	**Fire Alarm**
CODE BLUE	**Medical Emergency**
CODE YELLOW	**DE-CON INCIDENT**
CODE ORANGE	**Crisis**
CODE GREEN	**Crisis With Weapon**
CODE GRAY	**Computer Outage**
CODE BLACK	**E.R.T.F. Activation (Pantex)**

Remember, the Hospital Emergency Number is: **65**

In the event of a disaster, threat, or suspicious telephone call, or other emergency, dial "0" for the operator and state the exact situation. The operator will notify the appropriate personnel.

Infection Control

Preventing the spread of illness

- Use standard (universal) precautions – treat all body substances as if they were infected.
- Intact skin is the first line of defense against infections
  - Inspect hands for cuts or open areas
  - Cover open areas
- Handwashing is the most effective way to stop the spread of infections
  - Use soap, running water, friction and wash for at least 10-15 seconds.
  - Wash hands
    - Before and after contact with contaminated equipment
    - After contact with contaminated objects
    - After using the bathroom.
- Use personal protection equipment
  - Gloves
  - Masks, face shields, goggles
  - Gowns
- Dispose of needles in puncture resistant (sharps) containers
- Report any needlesticks to your supervisor
- If you handle specimens, treat them as if they were infectious.
- Clean up any body/blood spills promptly. If you are unfamiliar with the procedure, ask nursing or housekeeping for assistance.
- Dispose of any soiled linens properly
- Do NOT enter isolation rooms unless properly trained
- Bloodborne diseases (spread by contact with infected blood)
  - Hepatitis – transmitted through contact with infected blood. Some varieties of hepatitis can live for up to 7 days outside the body.
  - HIV – transmitted through direct contact with infected blood or other infected body fluids.
- Airborne diseases
  - Tuberculosis – spread by inhaling TB infected airborne droplets.
  - The AVAHCS uses the 3 M N-95 particulate respirator masks as the primary PPE in Respiratory Isolation rooms. The masks come in regular and small sizes and are available on the nursing units.

Resident Rights in Long Term Care

The nursing home has specific resident rights.

The Nursing Home Reform Amendments require that nursing facilities “promote and protect the rights of each resident”.

Resident Rights

- The right to self-determination
- Personal and privacy rights
- Rights regarding abuse and restraints
- Rights to information
- Rights to visits
- Transfer and discharge rights
- Protection of personal funds
- Protection against Medicaid discrimination
-

A full explanation of each of these rights is posted on each nursing home unit. If you are assigned to work in the nursing home, you are responsible for becoming familiar with each of these rights.

MAIL SAFETY

If you receive a suspicious letter or package:

- Handle with care; don't shake or bump
- Isolate and look for indicators
    - No return address – restrictive markings
    - Lopsided or uneven
    - Misspelled words
    - Excessive Postage
    - Possibly mailed from a foreign country
    - Strange odor, oily stains, discoloration, crystallization on wrapper
- Don't open, smell, or taste
- Treat it as suspect; **Call 66**

Patient Safety Goals

National Patient Safety Goals

1. Goal: Improve the accuracy of patient identification.

AVAHCS uses the patient's name and social security number for any procedure, treatment, medication administration or other aspect of care. This includes administering medications or blood products; taking blood samples and other specimens for clinical testing, or providing any other treatments or procedures. Prior to the start of any invasive procedure, conduct a final verification process to confirm the correct patient, procedure, site, and availability of appropriate documents. This verification process uses active—not passive—communication techniques.

2. Goal: Improve the effectiveness of communication among caregivers.

For verbal or telephone orders or for telephonic reporting of critical test results, verify the complete order or test result by having the person receiving the order or test result write down and **read-back** the complete order or test result.

AVAHCS has identified a list of abbreviations **NOT** to be used. They are:
U (for unit)
IU (for international unit)
Q.D. or Q.O.D. (once daily & every other day)
Trailing Zero (X.0) or Lack of leading zero (.Xmg)
MS, MSO4, MgSO4
ug (for microgram), mistaken for mg (milligrams) resulting in one thousand-fold dosing Overdose. Write "mcg"
Per Os (for by mouth) Can be mistaken for left eye. Use PO.
A.S., A.D., A.U (Latin abbreviation for left, right, or both ears) are mistaken for O.S., O.D., O.U. "left ear", "right ear", "both ears".

Measure, assess and, if appropriate, take action to improve the timeliness of reporting, and the timeliness of receipt by the responsible licensed caregiver, of critical test results and values.
All values defined as critical by the laboratory are reported directly to a responsible licensed caregiver within time frames established by the laboratory, in cooperation with nursing and medical staff. When the patient's responsible licensed caregiver is not available within the time frames, there is a mechanism to report the critical information to an alternative response caregiver.

3. Goal: Improve the safety of using medications.

Concentrated electrolytes, including, but not limited to, potassium chloride, potassium phosphate, sodium chloride >0.9% have been removed from patient care units. AVAHCS does not provide any concentrated electrolytes as ward stock or in the PYXIS. AVAHCS has replaced as many drug concentrations as possible with premixed IVs.

AVAHCS has a list of look-alike/sound-alike drugs used in the organization. Measures that have been taken to reduce medication errors with these drugs include:

- warnings on the unit dose packets,
- warnings that appear when removing these drugs from the PYXIS,
- awareness posters, and
- warning labels placed on these bottles in the Pharmacy stock.

4. Goal: Eliminate wrong-site, wrong-patient, wrong-procedure surgery.

AVAHCS has a preoperative verification process that includes a time- out in surgery prior to the procedure. The process includes marking of the surgical site by the surgeon or designee with input from the patient.

5. Goal: Improve the safety of using infusion pumps.
AVAHCS no longer has free-flow infusion pumps.

6. Goal: Improve the effectiveness of clinical alarm systems.
Weekly Environment of Care rounds are done throughout the organization. These include testing of alarm systems and observing responses to the alarms.

7. Goal: Reduce the risk of health care-associated infections.
AVAHCS promotes frequent hand washing, use of alcohol gel and short finger nails.

8. Goal: Accurately and completely reconcile medications across the continuum of care.
The computerized patient records (CPRS) program contains software that organizes patient information about herbal, over-the-counter medications as well as other prescriptions the patient may be taking. The provider must ask the patient for this information.

9. Goal: Reduce the risk of patient harm resulting from falls.
Patients / residents are assessed for fall risk when they are admitted and immediately after a fall. In addition NHCU residents are assessed weekly with a monthly summary.

10. Goal: Reduce the risk of influenza and pneumococcal disease in institutionalized older adults.
Immunizations are offered to long term care residents annually. Outpatients are screened annually and offered vaccination.

11. Goal: Reduce the risk of surgical fires.
Surgical staff have received training. A department policy is in place covering procedures to reduce the chances of fire in the operating room.

National Patient Safety Goals

Improve pt identification with 2 pt identifiers:
- Name and SSN

Improve communication between caregivers:
- Write down & read back verbal orders
- Don't use unapproved abbreviations
- Timely reporting of critical tests/values

Improve safety of meds:
- "Look alike/ sound-alike" names have warning tag
- No concentrated electrolytes on unit

Eliminate wrong-site, wrong pt, wrong procedures:
- "Time-Out"
- Marking surgical site by surgeon

Don't use free-flow infusion pumps
- We don't have any!

Improve clinical alarm systems
- Weekly tests and education on setting alarms

Reduce infection
- Frequent hand-washing,
- Alcohol foam or gel

Manage all medications (herbal, OTC, Rx)
- BCMA checks for drug interactions
- OTC meds are listed under "meds tab"

Reduce patient falls:
- New Fall Prevention Program with name tags
- Signs over bed and Kardex
- Fall risk badge on patient

Reduce flu and pneumonia:
- Immunizations offered to pts and staff

Reduce Surgical fires:
- OR staff training, policies

For more information go to Amarillo VA Home Page and click on "Patient Safety Library" or go to:
http://10.95.20.13/TIPS/TIPSarchive.html
http://www.jcaho.org/accredited+organizations/patient+safety/

For Questions or Comments

Contact

Amarillo VA Health Care System

Education Services

806-355-9703

Extension 7864 or 7343

Prior to beginning

Clinical Trainees, Students, Instructors, and WOCs are required to review and complete all items on the checklist located on ***page 35***.

Contractors are required to review and complete all items on the checklist located on ***page 36***.

Work Studies *are required to review and complete all items on the checklist located on* **page 37**.

Without Compensation (WOC) Check List

The items on the checklist below must be completed and submitted to the **Student Coordinator**, **Education Service** at least **one week prior** to the anticipated start date. Incomplete forms will be returned to the student or clinical instructor and may result in loss of a clinical rotation. **WOC appointees will not be permitted to begin a rotation/appointment until all appropriate paperwork below has been received and approved.**

WOC appointments will not exceed a period of one year. When a license is needed, appointments will not exceed the expiration date of license, but may be extended upon verification of licensure renewal if it is within the one year appointment.

QUESTIONS?

Contact the Student Coordinator at (806) 355-9703, extension 7355

Check List

1. ☐ Acknowledgment of Training pg. 38
2. ☐ Instructions for Completing Without Compensation Form pgs. 39, 40
3. ☐ Without Compensation Form pg. 41
4. ☐ Trainee Registration Information Form pg. 42
5. ☐ Required VA Training pg. 43
6. ☐ Statement of Commitment and Understanding for VA Trainees pg. 44
7. ☐ Fingerprint, Photo I.D., and Vehicle Information Sheet pg. 45
8. ☐ Screening Checklist pg. 46

Complete the following only if instructed to:

☐ Contact Credentialing & Privileging at 806-355-9703 extension 7008.

☐ Non-Citizen VISA Verification Form pg. 47

All WOC appointees will be required to comply with all rules and regulations required of regularly appointed employees, including employee orientation, observance of Code of Conduct and ethics regulations, mandatory training (i.e., Universal Precautions, Fire & Safety, etc.) to meet JCAHO standards and all other applicable requirements.

Termination/Expiration of Appointment

If your appointment is not to be extended, you are to return all government issued items on the last day of your appointment **(ex. VA I.D., uniforms, keys, etc.) If government issued items are not returned a bill of collection will be issued.**

Contractor Check List

The items on the checklist below must be completed and submitted to the **Contract Specialist prior** to the anticipated start date. Incomplete forms will be returned to the contractor and may result in a delayed start date. **Contractors will not begin work until all appropriate paperwork below has been received and approved.**

QUESTIONS?

Contact your Contract Officer Technical Representative

Check List

1. ☐ Acknowledgment of Training pg. 38
2. ☐ Fingerprint, Photo I.D., and Vehicle Information Sheet pg. 45
3. ☐ Screening Checklist pg. 46

Complete the following only if instructed to:

☐ Contact Credentialing & Privileging at 806-355-9703 extension 7008.

☐ Required VA Training pg. 43

☐ Statement of Commitment and Understanding for VA Trainees pg. 44

All Contractors will be required to comply with all rules and regulations required of regularly appointed employees, including employee orientation, observance of Code of Conduct and ethics regulations, mandatory training (i.e., Universal Precautions, Fire & Safety, etc.) to meet JCAHO standards and all other applicable requirements.

Termination/Expiration of Contract

You are to return all government issued items on the last day of your contract **(ex. VA I.D., uniforms, keys, etc.) If government issued items are not returned a bill of collection will be issued.**

Work Study Check List

The items on the checklist below must be completed and submitted to your **Supervisor prior** to the anticipated start date. Incomplete forms will be returned to the work study and may result in a delayed start date. **Work Studies will not begin work until all appropriate paperwork below has been received and approved.**

QUESTIONS?

Contact the Work Study Coordinator Amarillo (806) 355-9703, extension 7330; Lubbock (806) 472-3400, extension 3410

Check List

1. ☐ Acknowledgment of Training pg. 38
2. ☐ Required VA Training pg. 43
3. ☐ Statement of Commitment and Understanding for VA Trainees pg. 44
4. ☐ Fingerprint, Photo I.D., and Vehicle Information Sheet pg. 45

All work studies will be required to comply with all rules and regulations required of regularly appointed employees, including employee orientation, observance of Code of Conduct and ethics regulations, mandatory training (i.e., Universal Precautions, Fire & Safety, etc.) to meet JCAHO standards and all other applicable requirements.

Termination/Expiration of Work Study Contract

You are to return all government issued items to your **supervisor** on the last day of your work study contract or termination date which ever comes first **(ex. VA I.D., uniforms, keys, etc.) If government issued items are not returned a bill of collection will be issued.**

ACKNOWLEDGEMENT OF TRAINING

I have read and understand the training handbook, Orientation for Affiliated Clinical Students, Contractors, and Work Studies**.**

Name (print) : _____

Program: _____

School: _____

Name of Clinical Instructor/VA Preceptor:_____

_____ _____

Signature of individual completing training Date

Please sign and return this form to the Chief, Education Service (00ED). This record may be included in your personnel/training file.

Instructions for Completing the Without Compensation (WOC) form

Please fill in all areas highlighted in yellow.

Clinical students

Incomplete forms will be returned to the student or clinical instructor and may result in loss of a clinical rotation.

- Please include the dates you will be at the Amarillo VA
- Your status: RN Student Nurse, LVN Student, Med tech student, Nurse Practitioner Student, etc.
- You will need to know which Service (Department) you are assigned to:

Acute Care Nursing – Chief, Nursing Service
Ambulatory Care – Chief, Ambulatory Care
Nursing Home – Chief, Geriatrics and Extended Care (GEC)
Medical Records – Chief, Health Administration Service (HAS)
Dental Clinic – Chief, Dental Service
Mental Health/Psychiatry – Chief, Mental Health

If you are unsure which Service Chief you will be assigned to, please contact Education Service at 7864/ 7434 or your VA preceptor

EXAMPLE

DEPARTMENT OF VETERANS AFFAIRS
Amarillo VA Health Care System
6010 Amarillo Blvd., West
Amarillo, TX 79106

Name: Jane Doe

☐ Male ☑ Female

Local Address: 1234 Ivy Lane

Race/Nationality (optional) _____

Amarillo, TX 7910

College/University: Anywhere University

Phone: (806) 555-5549

Degree Plan: BSN

SSN: 123-45-6789

Date of Birth: June 14, 1970

Dear Student

Welcome to the Department of Veterans Affairs. You will be assigned to our facility as a **Student Nurse** from October 10, 2005 to December 13, 2005 under authority of 38 U.S.C., 7405 (a)(1) during your period of affiliation with our facility, you are authorized to perform services as directed by the **Chief, Nurse**

In accepting this assignment you will receive no monetary compensation and you will not be entitled to those benefits normally given to regularly paid employees of the Department of Veterans Health Services and Research Administrations, such as leave, retirement, etc. You will, however, be eligible to receive benefits indicated below. Cash cannot be paid in lieu of any of these benefits.

☐ Quarters ☐ Subsistence ☐ Uniforms ☐ Laundering of Uniforms

If you agree to these conditions, pleas sign the statement below and return the letter in the enclosed postage-free envelope. This agreement may be terminated at any time by either party by written notice of such intent.

Please indicate your veteran status by **circling** the appropriate number below.

Sincerely yours,

Ken Creamer
HR Officer

- - - -

DEPARTMENT OF VETERANS AFFAIRS
Amarillo VA Health Care System
6010 Amarillo Blvd., West
Amarillo, TX 79106

Name: _____ ☐ Male ☐ Female

Local Address: _____ Race/Nationality (optional) _____

_____ College/University: _____

Phone: _____ Degree Plan: _____

SSN:_____ Date of Birth: _____

Dear Student

Welcome to the Department of Veterans Affairs. You will be assigned to our facility as a _____from _____ to _____ under authority of 38 U.S.C., 7405 (a)(1) during your period of affiliation with our facility, you are authorized to perform services as directed by the _____

In accepting this assignment you will receive no monetary compensation and you will not be entitled to those benefits normally given to regularly paid employees of the Department of Veterans Health Services and Research Administrations, such as leave, retirement, etc. You will, however, be eligible to receive benefits indicated below. Cash cannot be paid in lieu of any of these benefits.

☐ Quarters ☐ Subsistence ☐ Uniforms ☐ Laundering of Uniforms

If you agree to these conditions, pleas sign the statement below and return the letter in the enclosed postage-free envelope. This agreement may be terminated at any time by either party by written notice of such intent.

Please indicate your veteran status by **circling** the appropriate number below.

Sincerely,

Ken Creamer
HR Officer

- - - -

Department of Veterans Affairs	TRAINEE REGISTRATION INFORMATION

Response is mandatory. This information will be kept confidential. It will be used for reporting purposes, conducting surveys, and improving the quality of VHA's clinical training programs. This information will be entered in the "New Person" file in Veterans Health Information Systems and Technology Architecture (VistA). This form may also be printed from the OAA website: http://vaww.va.gov/oaa/policies.asp

Disclosure of your Social Security Number (SSN) is mandatory to identify individuals with identical names. Failure to provide this information may delay or make impossible the proper application of Civil Service rules and regulations and VA personnel policies and thus may prevent you from obtaining clinical training at VA. Solicitation of the SSN is authorized under the provisions of Executive Order 9397, dated November 22, 1943. The information gathered through the use of this number will be used as necessary for statistical studies and personnel administration in accordance with established regulations and published notices of systems of record.

First Name	**MI**	**Last Name**	
Social Security Number		**Primary Email Address**	
Permanent Street Address 1			
Permanent Street Address 2			
City		**State**	**Zip**
VA Training Facility Thomas E. Creek Medical Center ☐ Lubbock OPC ☐		**Start Date of VA Training**	

Current Degree Level: ***(mark only one)***

- ○ **Certificate/Diploma**
- ○ **Associate**
- ○ **Baccalaureate**
- ○ **Master's**
- ○ **Post-master's fellowship**
- ○ **Doctoral**
- ○ Postdoctoral (other than residents)
- ○ **Residency/Fellowship**

Program of Study: ***(mark only one)***
(Discipline that best describes the current program of study)

- ○ **Audiology**
- ○ **Chaplaincy**
- ○ **Dentistry**
- ○ **Dietetics**
- ○ **Health Information**
- ○ **Health Services Research & Development**
- ○ **Imaging (Radiologic/Ultrasound Tech, etc.)**
- ○ **Laboratory**
- ○ **Medical Student**
- ○ **Medical Resident/Fellow**
- ○ **Medical Post-residency Physician in a VA Special Fellowship (Ambulatory Care, National Quality Scholars, Women's Health, etc.)**
- ○ **Medical/Surgical Support (Respiratory Tech, Biomedical Tech, etc.)**
- ○ **Nurse Anesthetist**
- ○ **Nursing**
- ○ **Optometry**
- ○ **Other**
- ○ **Pharmacy**
- ○ **Physician Assistant**
- ○ **Podiatry**
- ○ **Psychology**
- ○ **Rehabilitation (OT, PT, KT, etc.)**
- ○ **Social Work**
- ○ **Speech–Language Pathology**

What is the LAST MONTH and YEAR that you anticipate being in a training program at this VA facility? **Enter mm/yyyy** _____

VA FORM 10-0410
MAY 2003

Name of School: _____ Degree Program: _____

Name of Instructor or VA Sponsor/Preceptor: _____

Required VHA Training

Web-based VA Training Sites

- VHA Privacy Policy training is required of ***ALL*** students and contract workers.

- VA Cyber (Computer) Security training is required of ***ALL*** students and anyone that will be given computer access.

Both courses may be accessed via the Internet at:
www.vcampus.com/valo

Print out a certificate of completion for **each** course and submit to Education Service. You will **NOT** be permitted to start until all training is completed.

If you have problems/questions concerning these sites, contact Education Service at 806-354-7864

Statement of Commitment and Understanding for VA Trainees

As a trainee in the Department of Veterans Affairs (VA), I am committed to safeguarding the personal information that veterans and their families have entrusted to the Department. I am also committed to safeguarding the personal information which other VA trainees and VA employees have provided.

To ensure that I understand my obligations and responsibilities in handling the personal information of veterans and their families, I have completed both the annual General Privacy Awareness Training (or VHA Privacy Training, as applicable) and the annual VA Cyber Security Training. I know that I should contact the local VA Privacy Officer, Freedom of Information Act Officer, Information Security Officer, or Regional or General Counsel representative when I am unsure whether or how I may gather or create, maintain, use, disclose or dispose of information about veterans and their families, other VA trainees and VA employees. Should I encounter any difficulty in identifying or reaching these individuals, I understand that I should contact my service chief, or failing that, the Chief of Staff, to seek guidance.

I further understand that if I fail to comply with applicable confidentiality and security statutes, regulations and policies, I will be removed from VA assignment. I may also be subject to civil and criminal penalties including fines and imprisonment.

I certify that I have completed the training outlined above and am committed to safeguarding personal information about veterans and their families, other VA trainees and VA employees.

_____	_____
Print or Type Trainee Name	Trainee Signature
_____	_____
Training Program/Level	Date

FINGERPRINT, PHOTO ID, AND VEHICLE INFORMATION SHEET

Rev August 2006

(In lieu of VA FORM 10-6196)

This information is mandatory and will be kept confidential. It will be used for reporting and fingerprinting purposes. Failure to provide this information will prevent you from obtaining clinical training and or appointment at this VA Health Care System. Solicitation of this information is authorized under the provisions of Executive Order 10450.

PLEASE CHECK ONE BOX

☐ Employee ☐ Resident ☐ Contractor ☐ Work Study ☐ Student ☐ Volunteer ☐ WOC ☐ Other

Last Name			**First Name**	**Middle Name**			
NAME TO BE DISPLAYED ON ID CARD			**Social Security Number**	**Date of Birth**	**Sex**	**Race**	**Height** Feet____ Inches_____
Weight	**Hair Color**	**Eye Color**	**Place of Birth** (City & State/include Country if not within the United States)				
Date Fingerprinted			**Position** (If applicable)		**Work Phone**		
Home Address			**City**		**State**	**Zip**	

---- CONTRACTORS ---- Must include Complete Vehicle Description

COMPANY NAME: _____ JOB TITLE _____

DRIVER LICENSE STATE: _____ NUMBER: _____

FOR OFFICE USE ONLY

ASSIGNED SHIFT: _____ *LOT EE* _____ *LOT H* _____ *GATE CARD #* _____

VEH. #1: Lic. & State _____ *VA DECAL#* _____ *DECAL COLOR* _____

Make _____ **Model** _____ **Color** _____ **Year** _____

VEH. #2: Lic. & State _____ *VA DECAL #* _____ *DECAL COLOR* _____

Make _____ **Model** _____ **Color** _____ **Year** _____

SCREENING CHECKLIST

Checklist to be used for all Appointees (Title 5 / Title 38 / Hybrid / Fee Basis / WOCs / Residents / Contractors / Students / Volunteers)
All entries on the checklist must be completed, signed and dated. Retain on the left side of OPF or applicable file

Complete Highlighted Sections Only

Name:		SSN *(last 4 only)*:	
Position:		Service:	
EOD:		Facility:	AMARILLO VA HCS
Type of Appointment:			

PART A

	REQUIRED DOCUMENTATION	Initial/Date Completed		N/A		REQUIRED DOCUMENTATION	Initial/Date Completed		N/A
1.	Federal Application Form or Resume				12.	Educational Degree Sighted			
2.	Circle One: SF-52 / WOC Letter / RCVL / TQCVL / Volunteer Application Form 10-7055				13.	Education Verified			
3.	Declaration For Federal Employment OF-306 – Suitability Issues Cleared				14.	Position Risk and Sensitivity Level Designation VAF-2280			
4.	NPDB (National Practitioner Data Bank) – *Contact HRM Officer if any discrepancy*				15.	Questionnaire for Non-Sensitive Positions SF-85 or Questionnaire for Public Trust Positions SF-85P Completed: Circle one			
5.	HIPDB (Health Integrity & Protection Data Bank) – *Contact HRM Officer if any discrepancy*				16.	Fingerprints Electronic SF-87 Submitted			
6.	LEIE (List of Excluded Individuals/Entities) – *Contact HRM Officer if any discrepancy*				17.	SAC (Special Agreement Check) Results Received			
7.	Valid License/Registration/Certification (Sighted) & VA Form 5-4682-2 Completed				18.	SAC Results Adjudicated			
8.	Employment Eligibility Verification Form I-9				19.	NACI MBI BI Submitted: Circle one			
9.	Non-citizen: Proof of Employment Authorization				20.	NACI MBI BI Received: Circle one			
10.	Selective Service Registration Verified				21.	NACI MBI BI Adjudicated			
11.	VETPRO Cleared								

NON-CITIZEN/NATURALIZED CITIZENSHIP VERIFICTION
Memorandum for the Record
EVIDENCE PRESENTED FOR NON-CITIZENS

PRINT OR TYPE
NAME:_____

ALIEN/VISA NUMBER:_____

VISA TYPE:_____

COUNTRY OF ORIGIN:_____

ISSUE DATE:_____ EXPIRATION DATE:_____

DATE OF BIRTH:_____ SEX: ☐ Female ☐ Male

ENTERED THE USA: Place:_____
Date:_____

EVIDENCE PRESENTED FOR NATURALIZED CITIZENSHIP

PRINT OR TYPE
NAME:_____

PLACE NATURALIZED:_____
DATE:_____

SEX: ☐ Female ☐ Male

****
THE PERSON TO WHOM THE EVIDENCE WAS PRESENTED MUST COMPLETE THE FOLLOWING.

The above was verified on _____(date).

By:_____(name & title)

Learners' Perception Survey

This questionnaire should be completed by anyone who had clinical training at a VA medical center.

The survey contains questions which ask you to rate various aspects of your VA clinical training experience. Information from the survey will provide feedback for identifying areas of excellence as well as areas needing improvement.

This is a confidential survey.

You will be asked to complete the survey following your final day at the VA.

Thank you for participating in this survey.

Reviewed/updated:
March 2002
October 2002
November 2003
January 2004
May 2004 (VHA Learners Perception Survey info added)
June 2004 (VHA orientation info added)
October 2005 (signature page edited)
January 2005
May 2005
October 2005
November 2005 (Clinical Trainees Registration Form)
December 2005 (Fingerprint Form added)
August 2006 Web links updated
August 28, 2006. *Statement of Commitment for Trainees* added.
Updated January 24, 2007
Rev (2/2/07) Fingerprint Form
July 2007