

Orientation Guide for Shadowing Speech-Language Pathology

Welcome to CHI St. Joseph Health

We are excited you want to come observe healthcare at CHI St. Joseph Health. You will be observing in an organization that has established an outstanding reputation for excellence in patient care and customer service. It is our hope that your experience will be rewarding and enjoyable.

You are responsible for reading, understanding and completing the steps in this guide. If you have any questions, please feel free to contact Volunteer Services at volunteer@st-joseph.org or 979.776.2917.

SLP Shadowing Process

This process is designed specifically to facilitate SLP students in shadowing speech therapists at our CHI St. Joseph Health Rehabilitation Center. All policies and procedures provided in this guide must be followed in order to remain in our program.

Here are the steps:

1. Complete an online application by clicking on this link:
<https://www.volgistics.com/ex/portal.dll/ap?ap=1943365455>
2. Read this guide and complete the forms on the last two pages of this guide.
3. TB Testing – due to state and federal requirements, you will need to provide a copy of a negative TB test within the last 6 months. TB tests may be obtained through Brazos County Health Department; your own physician or TAMU students may also go through Beutel Health Services. If you test positive to TB, you may provide a copy of a chest x-ray report or a note from your physician stating you are free from TB. Photo copies are acceptable.
4. Influenza – if you are shadowing between October 1 and March 31 you are required to provide proof of a current Influenza vaccination. Photo copies are acceptable.
5. After you have completed your online application, completed the forms in this packet, and have a copy of a TB test and influenza (if required), then you need proceed to the information desk. This desk is located at our Regional Hospital (not at the Rehabilitation Center). This is located at 2801 Franciscan Drive, Bryan. The information desk is on the first floor, main lobby, nearest the circle drive entrance. Rosa Faz heads this area. She works M, W, Th 8 am – 4:30 pm and T, F 10 am – 6:30 pm. She can be contact by phone at 979.776.2479.
6. When you turn in your requirements you will be issued a temporary badge by the information desk. A staff member will activate your file and you will have access to sign up for open shifts to shadow a speech therapist. Open shifts are only available on Wednesdays of each week from 8 am – 12 pm or 1-3 pm. In order to allow all individuals an opportunity to shadow, please limit sign-up to once per month. See instructions below on accessing our scheduling system.
7. All shadowing will take place at CHI St. Joseph Health Rehabilitation Center at 1600 Joseph Drive, Bryan. Enter the building at the circle drive way, walk through the lobby to the elevators, and proceed to the 2nd floor. Turn left out of the elevator and the Speech Therapy office is the second office on your right (sign outside the door).
 - a. Department Leader:
Emily D. Jarvis, MA, CCC/SLP
MANAGER-THERAPY SVCS
Speech Therapy

When you arrive to the therapy area on the 2nd floor, let a staff member know you are there to shadow a speech therapist. Please DO NOT contact speech therapy prior to shadowing. They are aware that individuals that have properly completed the shadow process will be signing up for openings. If you have questions, please direct those to Volunteer Services at volunteer@st-joseph.org or Rosa Faz at the Information Desk rfaz@st-joseph.org or 979.776.2479.

To sign up for open shadowing opportunities, please follow these instructions. One person can sign up per shift and you are limited to one shift per month; however, if you check the system on a Monday and see that a Wednesday shift is open, you may sign up. We want to allow as many students as possible to shadow.

1. Go to www.st-joseph.org/volunteerservices
2. Scroll to the bottom and click on Log in to the St. Joseph Volunteer Information Center
3. **OR --** click on this link: <https://www.volgistics.com/ex/portal.dll/?from=6055>
4. Login name is your email address you provided on your application
5. Password is what you set up when you applied. If you forgot your password, click on Forget your password? To have one emailed to you.
6. Once you have logged in, click on the My Schedule Tab.
7. There will be a calendar displayed with a Help Wanted tag under the days when volunteers are needed. Click on the help wanted tag to see the time open. Select Schedule me to sign up, and confirm. Assignment information will be displayed.
8. Select Continue to sign up for additional times. You may sign up for up to 2 months in advance.

To remove yourself from a scheduled shift:

1. Go to My Schedule
2. Scheduled shifts will be displayed. Click on the shift, and then select Remove me.
3. Select Calendar view to return to the schedule calendar or select Exit to log out.

Shadowing Policies & Procedures

HOSPITAL STANDARDS

In accepting the opportunity and privilege to observe, you become subject to CHI ST. JOSEPH HEALTH Standards.

1. **Respect:** Maintain a professional attitude toward hospital personnel. NEVER discuss personal problems or ask medical advice from the staff. Respect the patient's feelings and privacy.
2. **Dependability:** Please be on time on the days you are scheduled. Notify the supervisor in the area you are observing if you are going to be absent as far in advance as possible. **Do not come in if you are ill.**
3. **Attitude:** You represent the hospital. Be dignified, pleasant, professional and cheerful.
4. **Discretion:** Everything that you see, read, and hear in the hospital is confidential. Never discuss patients or their illnesses with other volunteers, visitors or employees. Careless dissemination of patient information is cause for immediate dismissal.
5. **Responsibility:** **This is observation only. You are not to provide any type of patient care.**

Mission, Vision & Values

MISSION

The **mission** of Catholic Health Initiatives is to nurture the healing ministry of the Church, supported by education and research. Fidelity to the Gospel urges us to emphasize human dignity and social justice as we create healthier communities.

VISION

Our **vision** is to live up to our name as one CHI:

Catholic Living our mission and core values

Health: Improving the health of the people and communities we serve

Initiatives: Pioneering models and systems of care to enhance care delivery

VALUES

Reverence. Profound respect and awe for all of creation, the foundation that shapes spirituality, our relationships with others and our journey to God.

Integrity. Moral wholeness, soundness, fidelity, trust, truthfulness in all we do.

Compassion. Solidarity with one another, capacity to enter into one another's joy and sorrow.

Excellence. Preeminent performance, becoming the benchmark, putting forth our personal and professional best.

Confidential Information

We have a sacred trust and moral and legal obligation to our patients to maintain their confidentiality and respect their privacy. Every patient at CHI St. Joseph Health Regional Hospital has the right to confidentiality. But at the same time, every person must use his or her best judgment. If you are aware of a patient issue that requires immediate help, please inform your assigned contact person.

No one is permitted to remove or make copies of any CHI St. Joseph Health Regional Hospital records, reports, or documents.

Release of confidential information to unauthorized persons can result in dismissal from our shadow program, and could involve you in legal proceedings.

Defining Confidential Information:

Confidential information could be a medical record, a diagnosis, or a comment about a disease or treatment that a patient is receiving, or any other personal information about patients, hospital staff, or visitors. It is the prerogative of the patient or individual to give out information about their own illness, treatment, or personal affairs, etc., not ours.

Dress Code

When you are at CHI St. Joseph Health, like employees, represent the organization to patients, guests, other employees, and the public. A professional appearance conveys a feeling of confidence and respect to patients and other guests. You are expected to use good judgment in regard to their personal appearance. Cleanliness and good hygiene are expected of all staff. Clothing and/or accessories that are extreme in style or may be distracting to others are not appropriate for the workplace.

General Guidelines for all Volunteers/Staff:

Tattoos:

CHI St. Joseph Health strongly discourages visible tattoos. Visible tattoos with profanity, nudity or gang-related symbols are not permitted and must always be covered by clothing, approved gloves, natural-appearing makeup, or bandages.

Body piercing:

Jewelry may not be worn in any visible body piercing with the exception of up to two earrings worn in the ear lobe. Covering visible body piercing with bandages or any other means is not permitted.

Logos:

Logos that advertise any product, service or company other than CHI St. Joseph Health Regional Hospital are not permitted.

Nails: Must be kept clean and of reasonable length based upon nature of the job. Artificial nails are prohibited for infection control reasons in all patient care areas.

Jewelry and Accessories:

Jewelry and accessories should be worn in moderation, should not distract from a professional image, and should be in keeping with departmental safety standards. Hats are not acceptable in the workplace, except as required by weather, uniform, or safety requirements. Accessories that are related to religious or cultural reference may be given appropriate consideration based upon the nature of the job.

Safety and Regulatory Standards:

Clothing, jewelry and accessories must not pose a safety or infection control hazard. All OSHA and other regulatory standards regarding safety and infection control must be followed.

Acceptable:

Dresses (women)
Slacks, Khaki's
Crop Pants mid-calf length or longer (women)
Polo shirts
Sweaters
Closed toe shoes
Skirts touching top of knee (women)
Jackets
Dressy denim skirts, dresses or jackets
Blouses (women)
Button-down shirts
Sleeveless tops under a jacket, sweater

Unacceptable:

Very short dresses or skirts (women)
Sleeveless shirts
Pants or tops that reveal midriff or backside
Gym wear
Jeans
See-through clothing revealing undergarments
T-shirts (with logos)
Low-cut revealing tops
Flip flops
Shorts of any kind
Pool/beach attire
Ripped clothing

In clinical (patient care) areas – additional guidelines:

- Wear closed toe, rubber soled shoes with socks or hose.
- Fragrances should not be worn
- No artificial nails

If your assigned department feels your attire is out of policy, you will be asked to leave until you are properly attired. These regulations are in place to insure your safety along with those of the patients.

Identification Badge

For customer service and security reasons, you are expected to wear their CHI St. Joseph Health identification badge while shadowing. The badge must be worn above the waist on the chest area. Temporary badges are provided by the Information Desk for your use during observation. ID badges are the property of CHI ST. JOSEPH HEALTH REGIONAL HOSPITAL and should be returned to the Information desk at the conclusion of your shadow opportunity.

Smoking

CHI St. Joseph Health Regional Hospital is a **No Smoking Campus**. Smoking is prohibited inside or anywhere outside of all facilities.

Infection Control

Everyone is responsible for controlling the spread of infection by practicing good personal hygiene and following infection control procedures. The single most important measure is frequent hand washing. Proper hand washing techniques include the following:

- Use running water, wet hands, and wrists well.
- Apply soap to palms.
- Lather well, and then spread lather to backs of hands and wrists.
- Scrub hands and wrists well by vigorously rubbing hands together to create friction, which loosens microorganisms. Pay careful attention to fingernails, knuckles, and between fingers. Scrub for 15 seconds.
- Rinse hands and wrists with running water.
- Dry completely with disposable towels.
- Turn off faucet using disposable towel, unless there is a knee or foot control.
- DO NOT touch the sides of the sink. If sink is touched, wash hands again.

Transmission of Infections

The three ways infections are spread are;

- a.) Airborne
- b.) Contact
- c.) Droplet

Exposure Control Plan.

The exposure control plan or ECP is implemented to meet the letter and intent of OSHA and the Blood borne Pathogens Standard. The purpose is to reduce occupational exposure to blood and other potentially infectious material thus reducing exposure to life threatening pathogens such as Hepatitis B, Hepatitis C, Syphilis and HIV. The objectives are;

- a.) Provide information regarding procedures and regulations
- b.) Protection from health hazards
- c.) Provide treatment and counseling
- d.) Provide guidance to management regarding training and documentation

Reminder Signs:

The “STOP” sign alert cards are placed on the doors to the rooms of patient’s with contact, droplet, or airborne diseases. The signs are written in English and Spanish and have the “Stop Symbol” on the cards. In addition to the stop sign, the transmission based precaution signs must be placed on the patient’s door. No signs will be placed on the door indicating blood borne pathogen infection. The stop signs may also be used for patients who are immunocompromised and visitor limitation is desirable. Observers may enter rooms that prescribe precautions like wearing gloves or surgical gowns, but you should always check with the nurse first if you see a sign on the door. Ultimately, it is your choice about entering a room with precautions posted.

Patient Bill of Rights

Patients have the following rights:

- To receive medical treatment within the hospital’s scope of service, without regard for race, creed, sex, age, national origin, or economic status;
- To care that is considerate and respectful of their personal values and beliefs;
- To be informed about and participate in decisions regarding their care;
- To participate in ethical questions about care, such as resolving conflicts, withholding resuscitation, withdrawing life-sustaining treatment, and use of experimental treatment;
- To refuse treatment within legal limits and to be informed of possible medical consequences;
- To security, personal privacy, and confidentiality of information;
- To spiritual care in recognition of the whole person;
- To designate a decision maker in the event that they are incapable of understanding a proposed treatment or are unable to communicate care requests;
- To access protective services; and
- To education and communication regarding these rights from the time of admission through discharge.

Safety

The safety of our patients is our top priority. You should be familiar with the safety codes for the following emergency situations. Code cards with detailed instructions are available at all nurses’ stations.

Code Color	Code Call	Code Definition
Blue	Code Blue (location)	Cardiac Arrest
Green	Code Green (location)	Rapid Response Team – patient in distress
Red	Code Red (location)	Fire

Brown	Code Brown	Bomb Threat
Gray	Code Gray	Severe Weather Alert
Black	Code Black	Tornado Warning
Orange	Code Orange – internal level 1 Code Orange – internal level 2 Code Orange – internal level 3 Code Orange – external	Disaster
Yellow	Code Yellow – ID Code Yellow – evacuation (location)	Pandemic Response Evacuation
Pink	Code Pink	Infant Abduction
Purple	Code Purple (location)	Diversion – hospital full incoming patients may be diverted to other hospitals
Burgundy	Code Burgundy (location)	Physical Disturbance – Security alert -No firearm involved
Silver	Code Silver	Physical Disturbance – Firearm involved

Observers are expected to be familiar with the codes and practices. You will be notified if you have a specific role during a code situation. Otherwise, work with your assigned department to assist in emergency situations.

Code Blue - Cardiac Arrest or Medical Emergency (location)

“Code Blue” is paged over the loudspeaker to indicate cardiac arrest or any medical emergency. After “Code Blue” is called, the hospital location immediately follows. Persons assigned on the Cardiac Resuscitation Team respond to the area immediately. Any doctor in the hospital at the time of the Code is requested to go to the area. A crash cart is to be used anytime a CPR team is called to a patient’s bedside. Security will be available to control traffic. Anyone who is not on the CPR team will be asked to leave the immediate area.

If you observe a patient in cardiac arrest, or other medical crisis, you should dial ext. 2555 at the main campus, 7555 at the Rehab campus, and the operator at other hospital facilities and report the event.

Code Blue- Pedi - Pediatric Cardiac Arrest (location)

This is called for cardiac Arrest or any medical emergency involving a pediatric patient.

Code Green - Rapid Response Team (location)

This code was created when patients seems to be having some type of trouble. They are not in cardiac arrest or having stroke symptoms but staff feels that something is not quite right with the patient. A code green is called along with the location and this specialized team rush to the patient for assessment.

Code Red - Fire Safety- (location)

All hospital personnel are encouraged to read the fire disaster plan posted on their unit and learn the locations of the fire alarms, extinguishers, evacuation routes and exits closest to their workstation. The lives of patients and co-workers may depend upon rapid, calm, and correct action.

In the event of a fire, hospital staff members are to use the RACE formula:

Rescue Rescue the patient or people

Alarm	Activate the alarm (call ext. 2555 at main campus or 7555 at Rehab or use pull-down in the hallways)
Confine	Confine the fire; close doors, windows
Extinguish	Use a fire extinguisher by pulling the pin, aiming the nozzle at the base of the fire, squeeze the handle and sweep from side to side or evacuate horizontally, then vertically (PASS). Know the location of fire extinguishers in your area.

Report fires by calling the following numbers: main hospital campus 2555, Rehab hospital 7555, and all other facilities 911, or pull the alarm in the hall, if the automatic alarm was not set off. "Code Red" will be paged over the hospital intercom system along with the location. When the fire has been extinguished, the message "Code Red all clear" will be paged over the intercom system.

To operate fire extinguishers use the **PASS** acronym.

Pull
Aim
Squeeze
Sweep

It is the responsibility of the volunteer to learn the location of fire extinguishers and pull alarms in each area they volunteer for. Please familiarize yourself with your volunteer area.

Code Brown - Bomb Threat

Code Brown is paged overhead in the event of a bomb threat. If evacuation is initiated, refer to hospital policy (E-06) in the red Safety Manual available at the nurse's station or in the department.

Code Gray –Severe Weather Alert –

In the event of severe weather, personnel will help move patients away from windows and stay with them as necessary. Staff not involved with patient transport will be asked to convene in the cafeteria or central corridors away from windows.

Code Black – Tornado Warning

In the event of severe weather, personnel will help move patients away from windows and stay with them as necessary. Staff not involved with patient transport will be asked to convene in the cafeteria or central corridors away from windows.

Code Orange - Internal and External Disasters –

Internal Level 1, 2, or 3 or Code Orange External

All Volunteers are required to familiarize themselves with the hospital's internal and external disaster plans. Volunteers are requested to be available in the event of an external disaster. Copies of these plans are available at the nurse's station or in the department. In the event of a disaster code, Code Orange will be announced on the loudspeaker.

Volunteers who are part of the disaster plan are aware of their jobs. **For all other volunteers, if a disaster were to occur while you are on duty, continue to fulfill your volunteer role until requested to report to the Personnel Pool by hospital staff or DVS.**

Code Yellow – Pandemic Evacuation Response

In the event catastrophic event, Code Yellow would be called along with the location that the hospital would evacuate to.

Code Pink - Infant Abduction –

All infants have a tag placed on them that will alert the nurse's station should the child be taken on an elevator or near a stairwell. Volunteers should assist by covering all elevators, doorways and stairwells.

Code Purple – Diversion

When the emergency room or hospital become over full, it may be necessary for a diversion code to be called. This alerts EMS and other hospitals that patients will be diverted to other facilities.

Code Burgundy – Physical Disturbance – No firearm involved

Security, plant operations staff and all available staff in the area respond to the location for assistance.

Code Silver – Physical Disturbance – Firearm involved

Shelter behind locked/barricaded doors or clear the area.

Universal Precautions

Universal Precautions focuses on isolation of body substances through the use of appropriate barriers such as gloves, masks, gowns, etc. Body substances include blood, feces, urine, wound drainage, oral secretions, vomit, etc. What types of body substances can the volunteer expect to come in contact with? Possibly all of these at one time or another.

The following information comes from the hospital's Safety Manual. Each unit has a copy of the entire manual if you would like to look through it. Most of the information covered in the Universal Precautions section pertains to individuals that work directly with substances, and not to those that have limited exposure to patients. However, you should still be aware of hospital policy how to recognize potential exposures and the proper way to protect yourself.

Boxes of gloves are available throughout each unit – please familiarize yourself with the locations. If someone vomits and you replace the emesis basin, use gloves. Do not pick up a used Band-Aid unless you have gloves on.

Volunteers are to use gloves when handling dirty linen, when doing vitals on patients with open wounds, or anytime you touch a patient if you feel more comfortable. Remember that wearing gloves still requires you to wash your hands before and after wearing gloves.

Other protective barriers like gowns, masks and face shields may be required as directed by staff or contact precautions for patients. Get to know the area you serve to determine location of protective barriers for use during your volunteer time.



SLP Shadowing Agreement
Form Must Be Fully Completed

Date: _____

First Name: _____ Last Name: _____

Please initial by each statement that you that you have read and understand the policies/procedures contained in our Orientation Guide:

_____ I completed my online application through the link provided in this guide.

_____ Dress Code/Identification Badge

_____ Infection Control and Universal Precautions

_____ Safety Codes

_____ Fire Codes and response (RACE and PASS)

_____ Confidentiality

_____ I understand that this is observation only, NO hands on patient care is permitted.

_____ I understand that I must be accompanied at all times by my assigned staff member.

_____ I have provided proof of current (within one year) Tuberculosis testing.

_____ If shadowing between October and March, I have provided proof of a current Influenza Vaccination (proof dated on or after Aug/Sept). If no proof available, I will wear a surgical mask while shadowing in patient care areas.

OBSERVER AGREEMENT ON CONFIDENTIALITY

I, as an observer at CHI St. Joseph Health, understand the concept of confidentiality. I agree to refrain from repeating to **any source any and all** hospital information that I am exposed to. I realize that this is privileged information and is not to be shared with anyone other than on a "**need to know**" basis within the hospital.

Signature of Observer

Date

SECURITY STATEMENT

I _____ understand the significance of maintaining a safe and secure environment at CHI St. Joseph Health. I understand the temporary badge that I am issued is not to be shared or used by any other person. I understand that while shadowing at CHI St. Joseph Health I will wear my temporary badge and have picture identification (Ex. School ID or driver's license) available on my person. At the end of my shadowing opportunity, I will return my temporary badge to CHI St. Joseph Health Regional Hospital.

Signature of Observer

Date

OBSERVER WAIVER FOR INJURIES OR DAMAGES

The undersigned (_____) in consideration of being permitted

Print your name

to observe at CHI St. Joseph Health does hereby release and forever discharge the CHI St. Joseph Health and any and all employees thereof from all liability which I, or my executors, administrators, or assigns, may, or can have by reason of my contracting any communicable disease or diseases as a result of such observation activities, and/or personal injuries or property loss incurred during such activities.

Signature of Observer

Date

Upon completion of requirements, please drop off paperwork to the information desk located in the main lobby at 2801 Franciscan Drive (CHI St. Joseph Health Regional Hospital). Refer to SLP Shadowing Process for complete details.

If you have questions, please contact Rosa Faz at 979.776.2479 or rfaz@st-joseph.org or information desk staff at 979.776.2479 or Volunteer Services at volunteer@st0-joseph.org or 979.776.2917.