



## HIPAA COMPLIANCE, WORK PLACE SAFETY, AND UNIVERSAL PRECAUTIONS

Wherever you work, whatever you do, you are responsible for your own actions. No matter how temporary the assignment, we count on you to conduct yourself professionally with your safety and the safety of others in mind.

These guidelines have been established to acquaint you with the OfficeWorks, Inc. guidelines in the following categories:

- OfficeWorks Commitment to HIPAA Compliance
- Employee Guide to HIPAA Compliance
- General Safety
- Standard/Universal Precautions and Prevention
- Needle Stick Prevention
- Ergonomics

If you have any questions regarding this guide, consult with your Talent or the Human Resources Department. Once you have finished reviewing all of the guidelines of this document, sign the acknowledgment below as certification of your intent to comply with these guidelines.



## ACKNOWLEDGMENT

The information and instructions contained in this document are general guidelines for HIPAA, safety, infection control, and injury and illness prevention. These guidelines are not all-inclusive. Defer to your Employee Handbook, Talent Worker New Hire Packet, and the company website for further details of your responsibilities for safety and precautions.

By signing below, you acknowledge that you have read, understand, and agree to abide by the OfficeWorks Workplace Safety & Universal Precautions Overview Guidelines.

Employee Name  
(print): \_\_\_\_\_

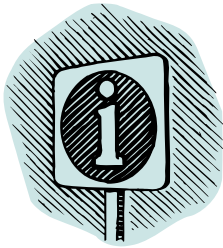
Employee Signature: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

## EMPLOYEE GUIDE TO HIPAA COMPLIANCE

### What is HIPAA?

The Health Insurance Portability and Protection Act (HIPAA) passed in 1996 with the purpose of improving the efficiency in healthcare delivery and ensuring the privacy of healthcare information. Its focus is on;



1. The standardization of electronic patient health, administrative and financial data.
2. The establishment of unique health identifiers for individuals, employers, health plans and health care providers.
3. The establishment of security standards protecting the confidentiality and integrity of "individually identifiable health information," past, present or future.

Virtually all healthcare organizations must abide by HIPAA, including all healthcare providers, health plans, public health authorities, healthcare clearinghouses, and self-insured employers – as well as life insurers, information systems vendors, various service organizations, and universities.

### Complying with HIPAA at the Worksite

Know what is considered Personal Health Information (PHI); Personal Health Information is individually identifiable information that relates to a patient's past, present, or future health, treatment, or payment for healthcare services.

Once personal identifiers have been removed from a data set, the information is not individually identifiable and can be disclosed without consent or authorization of the individual.

following are some examples of permissible situations that allow the disclosure of PHI. The list is not all inclusive of every possible use;

- **For Health Care Payment Purposes**- PHI may be used to administer and process payment of benefits under the patient's insurance coverage, determine eligibility for coverage, claims or billing information, conduct utilization reviews, or to another entity or healthcare provider for its payment purposes.
- **For Health Care Operations Purposes**- PHI may be used and disclosed for underwriting and rating of a plan, audits of patient claims, quality care reviews, fraud investigations, performance measurements, care coordination, and quality assurance investigations.
- **For Treatment Purposes**- PHI may be used and disclosed to providers in order to assist in patient treatment.
- **To Comply with local, State, and Federal entities, such as;** Court or administrative order, subpoena, or discovery request. Also, law enforcement officials for limited law enforcement purposes; Public health authorities for public health purposes; Your personal representatives appointed by the patient.

## EMPLOYEE GUIDE TO HIPAA COMPLIANCE

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### Recommendations to help protect PHI



- If you see a medical record in public view where patients or others can see it, cover the file, turn it over, or find another way to protect it.
- When you talk about patients, try to prevent others from overhearing the conversation. Whenever possible, hold conversations about patients in private areas.
- Do not discuss patients while you are in elevators or other public areas.
- When medical records are not in use, store them in offices, shelves, or filing cabinets.



- Remove patient documents from faxes and copiers as soon as you can.
- When you are authorized to throw away documents containing PHI, follow the facility procedures for disposal of documents with PHI.
- Never remove the patient's official medical record from the worksite.
- Avoid removing any version of PHI from the worksite.
- Report any inappropriate use or disclosure of the Protected Health Information to your manager.
- Before discussing a patient's condition, treatment or other PHI with his or her family member, it must be determined if the patient would object to such a disclosure.

## EMPLOYEE GUIDE TO HIPAA COMPLIANCE

### Understanding Patient Rights

*Patients have the right to...*

- *Request alternative communications.* Under the Privacy Rule, patients can ask to be contacted in a certain way. For example, a patient may ask a nurse if she/he can leave a message on the patient's home voicemail instead of contacting the patient at work. If a patient's request is reasonable, as is the previous example, the health care provider or facility must follow it.
- *The right to look at (and obtain copies of) records.* Patients can ask to read their medical and billing records, and have copies made.
- *The right to ask for changes to medical and billing records.* Each facility must review and consider all requests for changes to medical and billing records.
- *The right to request restrictions on how PHI is used and disclosed.* Patients can ask health care providers and facilities to limit the ways they make use of and disclose the patient's PHI for treatment, payment, and health care operations. Providers and facilities are not required to agree to such requests.
- *Each health care facility that provides direct patient care must give every patient/client a copy of their Notice of Privacy Practices.* The notice describes their privacy practices and the Privacy Rule. The facility must make reasonable efforts to have each patient sign a form acknowledging he or she received the notice.
- *Personal Representatives-* Patients who are incapable or not legally capable of exercising their rights under HIPAA may have personal representatives designated to make healthcare decisions for them. Examples of personal representatives are a family member, friend, or legal or court-appointed representative.



Where the authority to act for an individual is limited or specific to particular health care decisions, the personal representative is treated as the individual only with respect to PHI that is relevant to those decisions – e.g., a decision to discontinue life-support.

- The patient's spouse does not automatically have the right to inspect PHI.
- Patients are not permitted to access psychotherapy notes about private counseling sessions.
- Patients are not permitted to review information compiled for litigation purposes.



## OFFICEWORKS, INC. COMMITMENT TO HIPAA COMPLIANCE

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The HIPAA Privacy Rule is designed to safeguard protected health information (PHI). The Rule is a set of national standards that mandates medical practices that conduct electronic transactions to protect individuals' medical records and their personal health information. Implementing the HIPAA privacy requirements sets boundaries on the use and disclosure of health records, imparts individuals more control over their health information, holds health care providers and their business associates accountable for establishing appropriate safeguards to protect the confidentiality of health information, imposes violators on civil and criminal penalties if they violate patients' privacy rights, and takes into account public responsibility to disclose some forms of data to protect public health. The rule requires:

- Medical practices to provide a Notice of Privacy Practices that describes patients' privacy rights and how their personal health information may be used or disclosed (Notice of Privacy Practices).
- Clear and enforceable policies and procedures that address how the medical practice will comply with the Privacy Rule.
- Designation of a privacy official who will be chiefly responsible for developing and implementing the policies and procedures with respect to the privacy compliance (Job Description).
- Adoption of a formal business associate contract that assures a medical practice and its business partners that are hold liable for protecting the privacy of personal health information (Business Associate Contract).
- Development of administrative procedures, physical safeguards, and technical safeguards to assure the security of personal health information stored and transmitted by the medical practice, which is interrelated to the Security Rule.
- Implementation of an encryption system that de-identifies individually identifiable health information.
- Establishment of minimum necessary information exchange system providing the least amount of information and removal of individually identifiable information.
- Form a HIPAA steering committee that oversees its compliance program, and designate a privacy official who is trained to educate the workforce on organizational expectations and policies and procedures. He/she is authorized to empower the workforce to recognize and resolve privacy-related issues and foster a confidentiality culture, and who is to ensure meeting the privacy requirements.
- Enlist data warehouses.
- Elaborate a formal process to control access to network servers or computer systems.
- Develop and revise policies and procedures for information access control.
- Establish procedures for removal of individually identifiable information.
- Set up policies and procedures for patient to review, amend, or correct medical information.
- Elaborate procedures for amendments and correction of medical records in terms of handling requests.
- Allow for inspection and replication of patients' medical records.
- Document procedures to account for handling of requests for patient information.
- Enable audits on computer systems/networks and use of medical records.



## OFFICEWORKS, INC. COMMITMENT TO HIPAA COMPLIANCE

The development and implementation of a HIPAA privacy compliance plan for small and med-size practices do not have to be an overwhelming proposition if the practices begin early with energy and systematic thinking. The following is a list of Dos and Don'ts to pursue when implementing your compliance program:

| Do  | Don't  |
|---|--|
| <ul style="list-style-type: none"> <li>▪ Restrict access to protected health information apt to certain job function</li> <li>▪ Remind all personnel constantly on the common violations to HIPAA privacy rule</li> <li>▪ Customize training or education session to different areas of work in the medical practice in terms of understanding the impacts</li> <li>▪ Document as appropriate</li> <li>▪ Develop a program to train all new members of the workforce</li> <li>▪ Inventory all contractors or vendors is in order to determine business associates</li> <li>▪ Set business associate agreements as a priority because it is time-consuming</li> <li>▪ Evaluate and redesign contract management process to ensure compliance with privacy rule requirements</li> <li>▪ Consider using contract management software or a tracking tool</li> <li>▪ Get legal clearance for letters and amendments</li> </ul> | <ul style="list-style-type: none"> <li>▪ Presume that contractors have conducted privacy training with employees working in your organization</li> <li>▪ Rely on verbal policies and procedures</li> <li>▪ Use off-the-shelf privacy training programs without testing them</li> <li>▪ Forget to retrain and document when there is a change in policies and procedures</li> <li>▪ Ignore failure to comply with privacy policies</li> <li>▪ Enter into a business associate agreement with every contractor or vendor</li> <li>▪ Forget to get buy-in from executives</li> <li>▪ Enter into a business associate until you have considered appropriate modifications to the contract process</li> <li>▪ Skip education of leaders, contract managers and business associates</li> <li>▪ Rely on verbal agreements</li> <li>▪ Forget to ensure that you can terminate a business associate agreement for non-compliance</li> </ul> |



## GENERAL SAFETY & HEALTH GUIDELINES

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OfficeWorks, Inc. has established the following safety rules, to be followed by all employees. Violation of any of the following rules may result in disciplinary action, up to an including termination of employment. This is only a partial list of safety rules.



### **ACCIDENTS AND INCIDENTS**

All accidents and/or incidents must be reported to your supervisor immediately.

### **HOUSEKEEPING**

Maintain good housekeeping at all times, keeping equipment, tools, materials and work areas clean and orderly.

### **CLOTHING**

Wear appropriate clothing and shoes. Eliminate loose fitting or dangling garments, loose neckties or any article which has loose ends when working with or near machinery. Never wear jewelry when working with or near machinery.

### **HORSEPLAY**

Horseplay is prohibited. Each year, many people are seriously injured, simply because someone wanted to laugh.

### **WALK, NEVER RUN**

Within the plant or premises. Wet floors or fields are slippery; watch your steps.

### **LIFTING AND CARRYING OBJECTS**

Learn to lift the right way, if you think you need help, ask for it.

### **SAFETY SIGNS**

Have been posted throughout, to remind you of safe practices. Observe and obey these instructions, they offer excellent advice.

### **EVACUATION**

Familiarize yourself with the emergency procedures and supplies at your new placement locations, and know the evacuation routes

### **FIRE AND EMERGENCY PROCEDURES**

In case of fire or explosion, KNOW WHAT TO DO. Know what action to take. Know where to go.



## GENERAL SAFETY & HEALTH GUIDELINES

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### **PERSONAL PROTECTIVE EQUIPMENT**

Wear personal protective equipment when required - goggles, face shields, respirators, are supplied by the company on certain jobs.

### **SEEK ADVICE**

Do not hesitate to consult your supervisor when in need of safe working instructions.

### **MEDICAL AID**

Report all injuries immediately, no matter how slight.

### **DRUGS OR ALCOHOLIC BEVERAGES**

Drinking and drugs are strictly prohibited on the job or on the premises, or before work.

### **DEFECTIVE EQUIPMENT**

Report any unsafe or broken tool or equipment to your supervisor immediately; and do not use it until it is repaired.

### **PERSONAL GROOMING**

Hair that hangs below the top of the shoulders must be tied back, covered or put up when working around machinery.

### **SMOKING**

No smoking is allowed during work hours inside buildings.



### **REPORT INCIDENTS**

Know whom to call in an emergency and where numbers are posted



## GENERAL SAFETY & HEALTH GUIDELINES

The Occupational Safety & Health Administration implemented standard precautions and infection control policies to help prevent injury and illness attributed to blood-borne pathogens and infectious/hazardous materials. Follow the suggestions detailed below consistently to help insure against injury/illness.

### ACCIDENT PREVENTION

- Recognize hazardous/unsafe conditions
- Remove the problem if you are capable and qualified and report the problem
- Report the problem
- Be aware and report cords & wiring that may present a tripping or electrical hazard
- Avoid excessive extreme heat and cold exposure
- Store and retrieve overhead items properly

### HAZARDOUS MATERIALS

- Identify the biological and non-biological hazards in your job
- Know how to protect yourself
- Read the labels carefully
- Ask for help/explanation, if needed
- Ensure all specimens are securely closed prior to transport
- Take your time and pay attention to your actions

### CREATE BARRIERS

- Wear gloves, masks, protective eyewear, when appropriate
- Wear gloves any time there is a possibility of contact with bodily fluids or contaminants
- Do not use oil-based lotions/creams, as they damage the effectiveness of gloves

### WASH YOUR HANDS

- Before and after any patient contact
- Before and after using the restroom
- Following glove removal
- After touching excretions and secretions
- After using sharps/invasive devices
- After handling/transporting specimens

### PRACTICE ASEPTIC TECHNIQUES

- Wash your hands
- Only use sterile materials
- Identify the 'sterile field'
- Monitor and maintain the 'sterile field'
- Dispense items in a manner that preserves the sterility of items and integrity of the sterile field



## STANDARD/UNIVERSAL PRECAUTIONS

As explained in DOL Regulation 29 CFR 19.10, Standard/Universal Precautions is defined an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other blood borne pathogens.

Standard Precautions emphasize the major features of Universal (blood and body fluid) Precautions (designed to reduce the risk of transmission of blood borne pathogens) and Body Substance Isolation (designed to reduce the risk of transmission of pathogens from moist body substances). This means treating all blood and body fluids as potentially infectious. 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; and, (4) mucous membranes. Normally your skin acts as a protective barrier to keep viruses out, but even tiny breaks or cracks in the skin from common conditions like dermatitis, acne, chapping, or broken cuticles can become doorways for Human Immunodeficiency Virus (HIV) or Hepatitis B Virus (HBV) to enter your body.

Each Talent Worker is responsible to follow exposure follow-up recommendations. Your Talent Manager will periodically visit your worksite to ensure that there are no safety concerns. Be alert to your surroundings and contact your Talent Manager with any concerns.

|  |   |   |
|--|---|---|
| <b>SOURCES</b><br>Blood<br>Wound Drainage<br>Tissue<br>Other Body Fluids<br>Contaminated Materials |  | <b>POSSIBLE ENTRY SITES</b><br>Eyes<br>Nose<br>Mouth<br>Non-intact skin |
|--|---|---|

### PERSONAL PROTECTIVE EQUIPMENT

Protective equipment needs to be worn to prevent exposure to infection or hazards while working in a healthcare facility or while performing delivery of care to patients. Precautions are listed as: (1) Contact precautions; (2) Airborne precautions; (3) Droplet precautions; and (4) Standard Precautions. Precautions include wearing a mask (face shield), eye protection, gloves, gown, and placing patients in isolation when appropriate. Hand washing remains the primary method of reducing the spread of infection.

Routine and terminal cleaning of equipment that comes in contact with patients should be cleaned following policies and procedures at the agency in which the healthcare worker is working. The intended type of reprocessing equipment is determined by the article, its intended use, the manufacturer's recommendations, policy and any applicable guidelines and regulations.

## STANDARD/UNIVERSAL PRECAUTIONS

### CLEANING UP

Contaminated disposable (single use) patient-care equipment is handled and transported in a manner that reduces the risk of transmission. Environmental protection rules and regulations need to be followed for bagging and disposing of medical waste.

Handling, storage, treatment, and disposal of all regulated waste shall be in accordance with Health and Safety Codes for the state and county in which the client company is located.

Any spilled body fluids or blood must be cleaned up following standard precautions, and use of protective equipment is required to prevent exposure. Cleaning up any spill requires that the area be disinfected using an acceptable solution for decontamination.

### SHARPS & NEEDLE-LESS SYSTEMS



Sharps are to be handled with precaution. They are not to be recapped and are to be disposed of in proper rigid, puncture resistant, and leak proof containers. Prohibited practices include, but are not limited to, the following:

- a) Reusing disposable sharps
- b) Shearing or breaking of contaminated needles and other contaminated sharps
- c) Opening, emptying, or cleaning sharps manually or in any other manner that would expose employees to the risk of sharps injury
- d) Any other improper handling of sharps/needle-less systems

It is now required that if both a needle-less and sharps device are available the needle-less systems must be used. The new regulation contains a new definition of sharps in general and requires that non-needle sharps be used that incorporate engineered sharps injury protection. Sharps logs are to be maintained on all needle sticks for five (5) years from the date of the stick. Training records are to be maintained for three (3) years post training.

### YOUR PERSONAL CHECKLIST

- Personal Health- If you have an infection or feel ill, stay home.
- Keep health tests and immunizations up to date, as required for your job.
- Maintain good health. A strong body resists infection. Get enough rest, exercise, and maintain a healthy diet.

## STANDARD/UNIVERSAL PRECAUTIONS

### Transmittable Diseases: Basic Information

**BLOODBORNE VIRUS EXPOSURE**- Universal Precautions- ALL blood exposures are considered potentially infectious, including undiagnosed exposures

#### HEPATITIS A & E



The viruses are excreted or shed in feces. Direct contact with an infected person's feces or indirect fecal contamination of food, water supply, raw shellfish, hands, and utensils may result in sufficient amounts of the virus entering the mouth to cause infections. Other transmission can occur due to intra-family or institutional transmission.

#### HEPATITIS B



Formerly called serum hepatitis, it is the most common form of hepatitis with 30 million carriers in the world and an estimated 1.2 million carriers in the United States. Exposure is due to intra-family or institutional transmission, anal or oral sex, or intravenous drug use. Currently, a vaccination is required for infants and all seventh-grade students. If individuals are offered the vaccination upon employment and decline, they need to sign a Declination Statement.

#### HEPATITIS C



Formerly called non-A or non-B, more than 3.9 million Americans are carriers of the virus. Once exposed symptoms may not occur for up to 10 years. Exposure is directly one person to another via blood or contaminated needles, as from intravenous drug use, transfusion and hemodialysis. Exposure can occur due to unclean instruments used in tattoos, podiatry or nail care. Still under investigation is contamination from oral, household, and intra-family transmission.

#### HUMAN IMMUNODEFICIENCY VIRUS



Exposure: HIV is primarily transmitted through sexual contact but may also be transmitted through contact with blood and certain body fluids. Sooner or later most people infected with HIV will get AIDS. They become unable to fight infections and other diseases.

#### TUBERCULOSIS



Exposure occurs from individuals infected with *Mycobacterium tuberculosis*. It is an airborne, droplet nuclei transmission. Symptoms: May feel weak/sick, fever, experience night sweats, weight loss – cough (blood possible), chest pain

Talent Workers working with patients with known TB need to utilize personal respiratory protection, which is a high efficiency particulate air filtered (HEPA) mask that is fit based on OSHA standards. Patients with an active disease being cared for in a hospital need to be maintained in a single room with proper negative pressure ventilation and with the door closed. All healthcare workers should be screened for TB using a tuberculin skin test (PPD). A chest x-ray is recommended with positive symptoms of weight loss, coughing, fever, and night sweats.

# Prevent Needlestick Injuries



Plan out safe handling and disposal before beginning any procedure using needles.

## Focus

**27% of all puncture wounds occur during the disposal process.**

You may be done working with the patient, but the danger of a needlestick is not over until the instrument is safely stored away.

## Awareness

**31% of accidents happen during lab work, clean-up, routine IV access, and collisions with co-workers.**

Know your surroundings; who and what is around you, where tools, supplies, and equipment are located.

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## Procedure

**26% of sticks occur when manipulating the needle in the patient.**

Be prepared for the patient's reaction. Use the proper patient and instrument handling techniques *every single time.*

## Consistency

**Consistently practice safety 100% of the time.**

OfficeWorks, Inc. cares about your safety and health. Use your training to prevent injury and illness. Ask about the availability of safer instruments.

OfficeWorks, Inc. cares about your safety.

[www.owrx.com](http://www.owrx.com)

Contact your Talent Manager if you have questions, concerns, or would like information about safety or training.

# Practical Ergonomics

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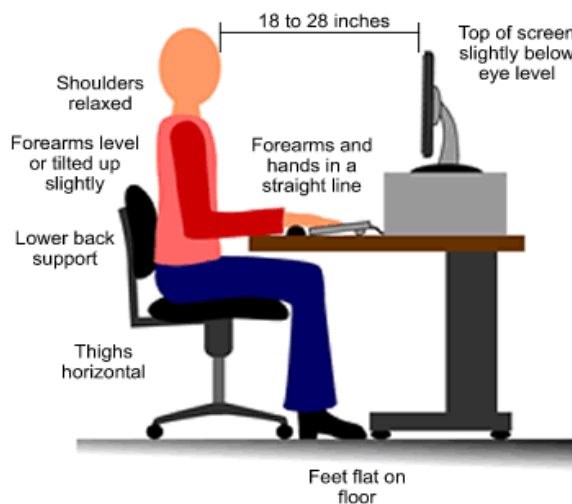
Your computer workstation can potentially be a dangerous place to work if you do not take care to practice safe working techniques. Follow the suggestions below to insure against injury and strain.

## WORKING POSTURE

- **Head and neck are upright and in-line with the torso, facing forward (not bent down/back/twisted).**
- Trunk is perpendicular to floor (may lean back into backrest but not forward).
- **Upper arms and elbows are close to the body (not extended outward).**
- Thighs have sufficient clearance space between the top of the thighs and the computer table/keyboard platform (thighs are not trapped).
- **Wrists and hands do not rest on sharp or hard edges.**

## EQUIPMENT POSITIONING

- **Top of the screen is at or below eye level so you can read it without bending your head or neck down/back.**
- Monitor position is directly in front of you so you don't have to twist your head or neck.
- **Glare is not reflected on your screen, causing you to sit awkwardly.**
- Telephone can be used with your head upright (not bent) and your shoulders relaxed (not elevated) if you do computer tasks at the same time.



## KEYBOARD SET UP

- **Keyboard/input device platform(s) is stable and large enough to hold a keyboard and an input device.**
- Input device (mouse or trackball) is located right next to your keyboard so it can be operated without reaching.
- **Input device is easy to activate and the shape/size fits your hand (not too big/small).**
- Again, wrists/hands do not rest on sharp/hard edges.

## SEATING

- **Seat width and depth accommodate the specific user (seat pan not too big/small).**
- Seat front does not press against the back of your knees and lower legs (seat pan not too long).
- **Seat has cushioning and is rounded with a "waterfall" front (no sharp edge).**
- Armrests support both forearms while you perform computer tasks and do not interfere with movement.