

Organisational Development

Metro North Hospital and Health Service (MNHHS) Orientation Handbook



Published by the State of Queensland (Metro North Hospital and Health Service), March 2016





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Welcome

Welcome to Metro North Hospital and Health Service (MNHHS).

To ensure your transition into the Metro North Hospital and Health Service as a new employee is as easy as possible, this Orientation handbook has been developed as a reference to assist you in your transition into the work environment.

This book is intended as a quick reference information guide only and will be adapted and changed as required. Please be aware that it is your responsibility to ensure you are aware of and comply with all relevant policies and procedures. Any statements or information including policies and procedures in this handbook are not binding and may be changed or reviewed at any time. This Orientation handbook is not intended to cover legislative policies and procedures as these may change from time to time. However, general information and online links on where to go for further information that may be related to policies and procedures in a section are provided in the handbook.

It is hoped that you enjoy being part of MNHHS team. If you have any questions or if you are unsure of anything please do not hesitate to ask your Line Manager/Supervisor or contact any of the experts in the relevant sections outlined in this handbook.

QHEPS - Queensland Health Electronic Publishing System

QHEPS stands for the "Queensland Health Electronic Publishing System". This is the name given to the Queensland Health Intranet Site. The Queensland Health Intranet is an internal Internet site.

Links in this document

There are QHEPS links in this document which will not work if you are not using a Queensland Health computer and do not have a Queensland Health login.

There are several Queensland Health applications that can be accessed outside Queensland Health through internet connections such as CKN, the Queensland Health Internet Site and the Evidence Based Online Learning Program.

There is a wide range of information that can be located on QHEPS and the Queensland Health Internet Site. Some of these sites are:

- Direct Access Internet Sites
- Clinicians Knowledge Network (CKN) including MIMS, Micromedex, Emedicine, Ovid Journals, Joanna Briggs Institute for evidenced based nursing
- Jobs
- Awards / Agreements and Industrial Relations Manual
- Queensland Health Policies

Resource Material

QHEPS is viewed from a PC via a Browser. The same type of program is used to view sites on the Internet. The corporate standard for Queensland Health is Mozilla Firefox and Microsoft Internet Explorer 10.

About Metro North Hospital and Health Service (MNHHS)

Metro North Hospital and Health Service (MNHHS) is an independent statutory body overseen by a Hospital and Health Board. It is the largest of 16 Hospital and Health Services in the Queensland Public Health system. It covers an area of 4157 square kilometres and serves a population approaching 900,000 people. MNHHS is unique in its composition in that two of its five hospitals are tertiary facilities that provide state-wide super specialty services such as Heart and Lung Transplantation, Burns, and Positron Emission Tomography (PET). Metro North HHS has a range of subacute, post-acute, community based health services to support patient discharge and hospital avoidance as well as a number of residential facilities, Oral Health Services and a fully integrated Mental Health Service including both community and hospital based care.

Our Vision

Changing the face of health care through compassion, commitment, innovation and connection.

Our Values

Respect High performance Teamwork

Compassion Integrity

Our values support those of the Queensland Public Service which underpin behaviours that will support and enable better ways of working and result in better patient outcomes and our community.



Customers first

- Know your customers
- Deliver what matters
- Make decisions with empathy



Ideas into action

- Challenge the norm and suggest solutions
- Encourage and embrace new ideas
- Work across boundaries



Unleash potential

- Expect greatnessLead and set
- clear expectations
- Seek, provide and act on feedback



Be courageous

- Own your actions, successes and mistakes
- Take calculated risks
- Act with transparency



Empower people

- Lead, empower and trust
- Play to everyone's strengths
- Develop yourself and those around you

Visit our website for additional information about MNHHS: http://www.health.qld.gov.au/metronorth/

Putting people first Strategy

Metro North Hospital and Health Service enables and supports people to lead and deliver excellent patientcentred care and high quality services.

The Putting People First Strategy reinforces our promise to put people first and guides genuine action to enable our staff, patients and partners.

With a strong focus on improving systems, better engaging our people, and enabling a positive culture, this Strategy supports us to:

- partner with our patients to provide high quality health care;
- enable, support and professionally develop our staff; and
- engage with our partners to improve the patient experience.

For further information go to http://qheps.health.qld.gov.au/metronorth/html/putting-people-first.htm

Metro North Directorates

Royal Brisbane and Women's

Hospital (RBWH)

The Prince Charles Hospital (TPCH)

Redcliffe Hospital

Caboolture-Kilcoy Hospitals,

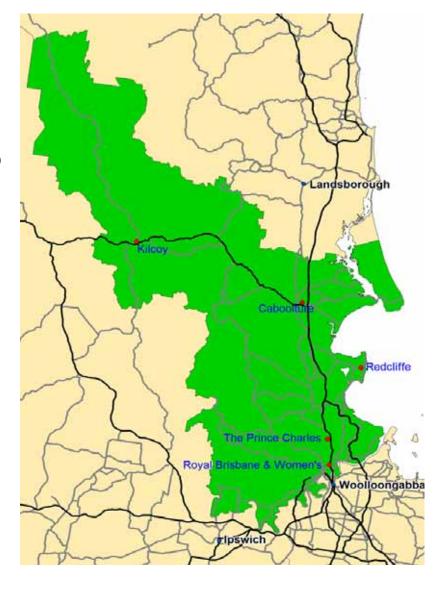
Woodford Correctional Services

Community, Indigenous & Subacute Services (CISS)

Mental Health Services

Oral Health Services

Medical Imaging Services



MNHHS Orientation Key Contacts for Staff

MNHHS Service	Caboolture / Kilcoy Hospital (CABH)	Redcliffe Hospital (REDH)	Royal Brisbane and Women's Hospital (RBWH)	Community, Indigenous & Subacute Services (CISS)	The Prince Charles Hospital (TPCH)
Orientation Facilitators	Coordinator Training and Education 5433 8282	Coordinat or Training and Education 3883 7627	Coordinator Training and Education 3646 7351	Education Officer 3049 1236	Senior Advisor Training and Education 0407 116 726 3139 5071
Email Address:	MNHHS-Bool				
QHEPS Intranet Fire Safety Coordinators (Protective Services) http://qheps.health.qld.gov.au/metronorth/fire-safety/	3883 7000 0432 792 449		3646 7950 0417 721 429	onboarding/orientatio 3646 3637 0413 485 646	3139 5228
Waste Management http://qheps.health.qld. gov.au/metronorth/red- cab- kilcoy/procedures/docs/ rckhs0441.pdf	3883 7184		3646 1424 0421 612 852	3883 7184	3139 5853
Infection Control Clinical Nurse Consultants http://qheps.health.qld.gov.au/tpch/infection/infection.htm	5433 8220 5433 8024	3883 7546	3646 1482	3631 7951	3139 5866 3139 4894
Safety Quality Unit (National Standards, Patient Safety) http://www.safetyandqu ality.gov.au	3883 7554		3646 8893	3631 7660	3139 5052
Cultural Capability Officers http://qheps.health.qld.gov.au/metronorth/indigenous_health/home.htm	3139 6621		3139 6621		3139 6621
Indigenous Liaison Officers	5433 8249	3049 6791	3647 9535 or 0408 472 385 After Hours 3649 4154 or 0408 472 385		3647 9537 3139 5165
Child Protection Liaison Officers http://qheps.health.qld.gov.au/metronorth/allied-health/child-protection/home.htm	5433 8204		3646 4279	3646 7937	

Daymall Camirasa	Daymall, Daylaliffa	Daymall DDW/LL		Devisell TDCI1@		
Payroll Services	Payroll_Redcliffe-	Payroll.RBWH		Payroll.TPCH@		
http://qheps.health.qld.	Caboolture@health.qld.g	@health.qld.go		health.qld.gov.a		
gov.au/payroll-	<u>ov.au</u>	<u>v.au</u>		<u>u</u>		
assistance/						
Streamline (Online	State-wide Hotline: 1800 2	39 074 8am-6pm	M-F			
Payslips)	Website: www.streamline.l	nealth.gld.gov.au				
HR Business Partners	3646 6180					
	Email: Metro North HR Se	rvices@health.gld	.dov.au			
Employee Assistance	Provider: Optum (Counsel			onse Services)		
Program (EAP)	1800 604 640 Website: w			01100 001 11000)		
1 Togram (EAL)	http://gheps.health.gld.gov	-	I.COIII QIILI O.			
Domontino Cuencete d			untion (DID Coondin	-t-"\ 0047.0000		
Reporting Suspected	MNHHS Principal Advisor – Crime and Corruption (PID Coordinator) 3647 9686					
Crime or Corruption	Email: MetroNorthMiscone		<u>ov.au</u>			
Public Interest	3360 6060 Email: <u>mailbox</u>	@ccc.qld.gov.au				
Disclosures						
CCC's Complaints						
Services						
MNHHS Health and	3646 0738 (General Enqui	ries) Email: mnhl	ns-health-and-			
Safety	safety@health.qld.gov.au					
	QHEPS: http://gheps.healt	h.qld.gov.au/metr	onorth/hr/health-sa	fety/health-and-		
	safety-home.htm					
Occupational Violence	3646 5168 (General Enqu	iries) Email: OVP	-MNHHS@health.g	ld.gov.au		
Prevention OVP	QHEPS: http://qheps.healt					
	prevention/home.htm					
QSuper / QInvest	1300 630 750 (Website: w	ww.asuper.ald.ao	v.au)			
<u> </u>	` _					
RemServ	1300 736 662 (Website: w	ww.remserv.com.	<u>au</u>)			

Payroll Information

Where do I get my Payroll number?

Once you have completed and returned all of your documents, your Line Manager/Supervisor will receive an email with your payroll number details. http://qheps.health.qld.gov.au/payroll-assistance/

What do I do if I change my name, address or telephone number?

It is the employee's responsibility to notify payroll services of any change of details. Please remember that should you cease employment, group certificates will be issued at the end of financial year and will be forwarded to the last known address. Notification forms are available on the PARIS site, available through QHEPS. http://gheps.health.gld.gov.au/paris/forms/home.htm

How do I register to receive my payslip electronically?

After you receive your first payslip you then need to register on the Streamline website: https://streamline.health.qld.gov.au/Account/Logon anywhere (at home or at work) and enter your Person ID (payroll Number and set up a password). For any assistance, contact the State-wide Hotline on 1800 239 074.

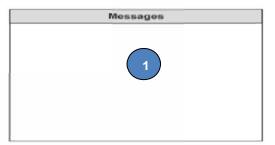
Streamline Online Services - Payroll Self Service

Streamline provides Queensland Health staff with online access to payslips, payment summaries and pay enquiries. You can access Streamline at work or anywhere you have internet access. You only need to register once and you can do it on a work computer or anywhere you have internet access. To access Streamline go to: https://streamline.health.gld.gov.au/Account/Logon

Payslips explained

Frequently asked questions	Fre	quently used abbreviations
I am confused about the different terms and codes on	Abs	Absence
my payslip. What do they mean?	Adj	Adjustment
A glossary of terms is available to help understand the terms	Allw	Allowance
used in your payslip. The glossary provides clear	AVAC	Attendance variation and allowance
descriptions of entitlements, allowances and deductions.	Db	claim form Debit
	EMF	Employee movement form
All of my allowances aren't showing on my payslip. Does	ETP	Eligible termination payment
this mean I'm not receiving them?	FBT	Fringe benefits tax
No. A number of allowances paid on penalties, such as	Н	Half rate
overtime, are not shown as separate line items in the earnings table of payslips.	HP	Half pay
earnings table of payshps.	HHS	Hospital and Health Service
If you are entitled to receive these allowances, they will be	LL	Leave loading
incorporated in your hourly rate and displayed as part of the	LSL	Long service leave
rate column for that line item in the earnings table.	Lve	Leave
As a result, you will notice that these hours have a higher	MVA	Motor vehicle allowance
rate displayed because the allowance has been combined	NP	No pay
with the normal hourly rate.	NS	No superannuation
	OCA	On call allowance
I submitted an AVAC but this has not appeared on my	OTE	Ordinary time earnings
payslip as an adjustment. Why?	ОТ	Overtime
Adjustments that appear on your payslip only reflect AVACs	PDE	Professional development entitlement
that have been processed.	PDL	Professional development leave
	PH	Public holiday
If you have submitted an AVAC to your line manager and it	PIA	Pay in advance
has not appeared on your payslip as an adjustment, check	RDO	Rostered day off
with your line manager to ensure the AVAC has been both approved and submitted to Payroll Services.	RL	Recreational leave
If the AVAC has been submitted to Payroll Services, please	RMO	Resident medical officer
wait for the form to be processed.	SalSac	Salary sacrifice
	T&R	T& Travel and relieving
	TRF	Transfer expenses
	WA	Work around





Distribution Point: Electronic Only John Citizen 1 Health Drive BRISBANE QLD 4000

Pay Advice

Private and Confidential

Pay Date Employer ABN **Employer Name** Assignment No(s)

13.08.2014 66329169412 QUEENSLAND HEALTH PAN 00123456

Employee Name Person ID Sub Position

John Citizen 00123456 Nurse-RN NRG6(04)

Type			- 1	Neek	1						Neek	2			Hrs /	Rate	Amount
6	Mon	Tue	Wed	Thu:	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Eri	Sat	Sun	Units		
	21/07	22/07	23/07	24/07	25/07	26/07	27/07	28/07	29/07	30/07	31/07	01/08	02/08	03/08			
Fortnightly Salary								7.6		7.6	7.6	7.6	7.6		38.00	31.2039	1185.7
Nurse - Laundry Allowance																	4.00
Shift-AftrnoonPnalt y12.5%								8		8		8			24.00	3.9005	93.63
Shift - Sat Loading - 50%													8		8.00	15.602	124.8
RDO - Accrual								0.4		0.4	0.4	0.4	0.4		2.00		
RDO - Accrual on Rec Lve															2.00		
Rec Leave	7.6	7.0	7.6	7.0	7.0	3									38.00	31.2039	1185.75
Lve Loading 14%	0	0	0	0	0					1	7				40.00	4.3085	174.70

Current Fortnight Gross Pay Total Adjustments From Previous Pay Periods (Gross) - (See Over) 2768.75

Total Gross

417.77-2350.98

9 Visit the payslip glossary of terms for explanations of your wage types at http://www.health.gld.gov.a v/pages/payslip_glossary.asp

Bank Disb	ursements	
Payment Banked Pay Date	1 BSB 804-050	1750.68

Income Tax-T/Scale- TaxFree Threshold	+348.00
RemServ Pre Tax	+411.49
AccumPlan Employee Cont	+118.58

Total Deductions 878.07 New Overpayment Identified This Pay Period (See Over) - To Be Recovered (Net) 277.77 Net Income 1750.68

Employer Super Contributions		Leave Balan (Hrs)	Year to D	
QSAC Employer Cont.		PDL - Nursing Banked RDO 14% Leave Loading Recreation Leave (5wk accrual) Sick Leave LSL Balance	31.80 158.59	Total Earnings Taxable Earnings Income Tax PDE Accrual LTD Balance	11455.72 9809.76 2088.00 565.97

Adjustments From Previous 4 Pay Per	iods - Description	Date	Units	Rate	Amount
Shift - Sat Loading - 50%		12.07.2014	8.00-	15.602	124.81-
Hours Top-Up		13.07.2014	7.60	31.2039	237.15
Meal Allowance-4 (Nurse)		19.07.2014	1.00-	12.10	12.11-
Overtime - 1.5		19.07.2014	6.00-	46.8059	280.84-
Overtime - 2.0		19.07.2014	2.00-	62.4078	124.82-
Shift - Sat Loading - 50%		19.07.2014	8.00	15.602	124.81
Hours Reduction	72.73.54.264.35	20.07.2014	7.60-	31.2039	237.15-
	Sub total:			17/2009 20	417.77-
	Total Adjustmen	nts From Previo	us Pay Period	s (Gross Overpayme	ent) 417.77•
Deduction	ons (Including Tax	and Superannu	ation) Adjuste	d Due To Overpaym	ent +140.00
	New Overpayme	nt Identified Thi	s Pay Period -	To Be Recovered (N	Net) 277.77-

You have a new overpayment

- This pay period, it was identified it have previously been overpaid. This may have been because adjustments were made to your shifts, allowances or penalties for a previous pay period.
- The new overpayment amount is shown on the right hand side of this payslip (under the Deductions box) as 'New Overpayment Identified This Pay Period (See Over) To Be Recovered (Net)'.
- Automated repayments will commence in two pay periods (28 days from this pay date). The repayment amount will be up to 15% of your gross base salary at the time the repayments commence.
- If you are already repaying an overpayment, you may be contacted to discuss your repayment arrangement.

www.health.qld.gov.au/qhpp/html/overpayment.asp Statewide Hotline 1800 239 074 (8am - 6pm, Monday to Friday)

- **1 Messages** box shows any relevant payslip messages for the pay period.
- **2 Employer name**, even for those in a prescribed employer HHS, will continue to show Queensland Health due to it being the paying entity for tax purposes.
- **3** A personal assignment number (PAN) is allocated for each role you have with Queensland Health. If you have more than one role with different conditions, such as different leave entitlements, you will be allocated a different PAN for each role and receive a separate payslip for each role per fortnight.
- **4 Person ID** is your unique employee identification number. You only have one ID number even if you have more than one role.
- **5 Sub Position** is your substantive or permanent position. **HD Position** will appear as well if you performing a higher duties role.
- 6 The earnings table provides a breakdown of hours worked and applicable allowances for the current pay period. The hours worked and allowances are sourced from advice received from your line manager from your roster or submitted forms (such as an AVAC form). The earnings table will reflect this advice and be processed in the current pay period. Please note, some allowances paid on penalties, such as overtime, are not shown on a separate line. If you are entitled to receive these allowances they will be incorporated into your hourly rate and displayed in the rate column.
- **7 Current Fortnight Gross Pay** is the amount you have earned for work performed in the current pay period before tax or any other adjustment/deduction is taken into account.
- **8 Total Adjustments From Previous Pay Periods (Gross)** is the total value of adjusted payments. Refer to the adjustment section (page two of the payslip) for a detailed breakdown of these payments.
- **9** The **Total Gross** amount includes the current fortnight gross plus the total adjustments from previous pay periods (gross).
- 10 The Bank Disbursements box shows the net amount (after tax and all deductions) that was deposited into your nominated bank account and will appear as Payment Banked Pay Date.

If you have requested that your pay is split and paid into different bank accounts, each account will be displayed as a separate line item. Ad hoc payments appear as **Previous Ad Hoc Payment** as a separate line item —this confirms the ad hoc payment was deposited into that bank account during the pay period. The payment(s) which make up the ad hoc will be displayed in the adjustments section (page two of the payslip).

- 11 The **Deductions** box includes any deductions taken from your pay such as income tax, voluntary tax, and repayment of overpayments, memberships and salary sacrifice amounts. HECS/HELP deductions are included in the full income tax figure.

 12 The **Total Deductions** amount is the total of all deductions for the current pay period.
- 13 The **Net Income** amount is the **Total Gross** amount minus the Total Deductions amount, plus the **New Overpayment Identified This Pay Period** (See Over) **To Be Recovered (Net)**.
- **14** The **Leave Balances** (Hrs) box includes your eligible accumulated leave types, including recreational leave, sick leave and long service leave.
- **15** The **Year To Date** box includes your total earnings, full taxable earnings and tax paid from 1 July each year, and your accrued Professional Development Entitlement (PDE) balance.
- **16 Adjustments From Previous 4 Pay Periods – Description** itemises details of pay adjustments modified this period relating to dates less than or equal to four previous pay periods.
- Adjustments From > 4 Previous Pay Periods itemises any adjustments from a pay period greater than the four previous pay periods.
- 17 If you have a positive gross adjustment then Total Adjustments From Previous Pay Periods (Gross) will display. If you have a negative gross adjustment Total Adjustments From Previous Pay Periods (Gross Overpayment) will display. 18 Deductions (Including Tax and
- Superannuation) Adjusted Due to Overpayment will display when the total adjustment has a negative value. Deductions associated with an overpayment are refunded to the employee in the pay period the overpayment is identified in.
- 19 The New Overpayment Identified This Pay Period (See Over) To Be Recovered (Net) amount is the Total Adjustments From Previous Pay Periods (Gross Overpayment) amount plus the Deductions (Including Tax and Superannuation) Adjusted Due to Overpayment amount. This value is also displayed on page one as a positive amount.
- 20 A generic statement informing you that you have a new overpayment with helpful information about the automated recovery of overpayments and contact details.

Identification Badge

How do I get my Identification (ID) badge?

All staff are issued with, and required to wear identification badges which includes proximity access for staff only. These badges are to be worn during working hours. Badges remain the property of the service and should be returned on resignation.

One of the conditions of employment is that all staff must wear, in a prominent position, an authorised Identification Badge. Embellishments of any nature are not to be placed upon the badge in such a manner that obstructs the clear view of the original photograph and full name.

The ID badge cannot be generated without your payroll number and proof of identification and the completion of an ID Application Form/ Proximity Card Application Form which is signed by your Line Manager/Supervisor to approve access areas. ID badge photos are produced at each facility.

- Redcliffe Hospital: Day of Orientation 0730 0750 in the Education Centre or Corporate Services Administration (Ground Floor Building 18) Monday - Friday 0800 - 1000 and 1300 - 1430 excluding Public Holidays
- Caboolture-Kilcoy Hospital: Day of Orientation 0730 0750 in the Education and Skills Centre or Engineering Department on Wednesdays from 1330 - 1430 excluding Public Holidays
- TPCH Education and Skills Centre: Monday Friday 0930 1100 and 1330 1500 excluding Public Holidays
- RBWH: Operational and Support Services Directorate Monday Friday 0800 1500 via appointment contact 3646 5611.
- CISS: (You also need an aged care clearance letter), Operational Support Services Office Brighton and swipe cards issued, opening hours are: Monday 0900 – 1030; Tuesday and Thursday 1400 – 1530; Wednesday 0900 – 1030
 - Alternatively for staff based at other CISS facilities a photo (head shot in jpeg format) can be emailed to mnhhs-ciss access@health.qld.gov.au along with your ID application form. ID badges will then be sent to your Centre via the courier service.

What do I do if I lose my ID Badge?

Immediately you find you may have lost your ID Badge, advise your line manager and contact the relevant department so it can be cancelled to prevent unauthorised use. Cards will be reissued after 48hours of being reported missing.

- Redcliffe Hospital: Corporate Services on 3883 7591 during office hours or Security on 3883 7010, 24 hours 7 days per week.
- Caboolture-Kilcoy Hospital: Engineering on 5433 8617 during office hours or Security on 5433 8478 or 5433 8479, 24 hours 7 days per week.
- TPCH: Education Centre on 3139 5295 or 3139 5296 during office hours or Security on 3139 5908, 24 hours 7 days per week.
- RBWH: Operational and Support Services Directorate on 3646 7947 during office hours or the Central Monitoring Room 3646 5188, 24 hours 7 days per week.
- CISS: Operational Support Services 3631 7440 or email <u>CISS_Access@health.gld.gov.au</u>

What do I do if my card does not work?

Check the expiry date and have another card re-issued. Alternatively please contact Education Staff or the department that issued your card.

Procedure for Staff Requiring Additional Access

Line Managers will approve and make application to the relevant department for additional access.

Security Matters

It is vitally important that you do not pass the proximity card that you have been issued to any other staff member. Proximity cards must be returned to the facility you are employed at upon termination of service.

Afternoon / Night Shift Parking

RBWH: After Hours parking is available on the Herston Complex between the hours of 1830 and 0730 the following day. If you are detained in your work area and are not able to remove your vehicle by 0730, contact the Central Monitoring room on 3646 5188 and advise the operator. This action will ensure an Offence Notice is not issued. You must ensure that you park in the marked parking bay.

A Parking Permit Application Form – After Hours / Night Shifts must be completed and forwarded to Operational & Support Services Directorate for the following areas:

Lanoma Terrace Carpark

Lanoma Terrace Carpark is located on the corner of Bowen Bridge Road and O'Connell Terrace.
 Parking is available Monday to Friday between the hours of 1830hrs and 0730hrs the following day and weekends and public holidays between the hours of 1130hrs and 0730hrs the following day.

Area 26, Behind Ronald McDonald House

 Area 26 is behind Ronald McDonald House. Parking times are Monday to Friday between the hours of 1130hrs and 0900hrs the following day with 24 hour parking being available weekends and Public holidays.

71 Butterfield Street (Old Ira Berk)

 Available from 1130hrs to 0900hrs the following morning Monday to Friday and 24-access on weekends and Public Holidays.

Redcliffe Hospital: A parking permit application form for the restricted swipe card access car parks for After Hours / Night Shift employees must be completed and forwarded to the Facility Director for approval who will forward this to Corporate Service Administration for processing.

TPCH: After-hours parking is allowed on site; however vehicles must be parked within a marked parking bay and must not be parked in:

- Ambulance bays
- Bays set aside for the use by emergency and/or police vehicles only
- Tow-away areas
- Emergency Department short-term Drop-off / Pick-up locations
- Contractor parking bays
- Other areas as specified by displayed signage
- Bays set aside for use by vehicles displaying a Queensland Transport approved Disabled

Parking permit or approved Temporary Parking Permit provided by the Education and Skills Centre. Vehicles must not park or stand on any roadway that has been marked with a solid yellow line that indicates a no standing zone and subsequently a tow away area.

Daytime Parking

RBWH

Various car parking stations are available at the Herston complex. Facilities exist for payroll deduction for the car parking stations. Information on these facilities may be obtained from the management of the car parking stations.

Three parking stations and several other parking facilities available:

- Metro Car Parking Station, 20 Butterfield Street
- Metro Car Parking Station, Bramston Terrace
- Cornerstone Parking Station, 325 Herston Road
- Herston Complex parking after hours
- RNA Showgrounds, O'Connell Terrace Bowen Hills. Open 0500- 1600
- Royal International Convention Centre, 600 Gregory Terrace, Bowen Hills. Open 0600 1800

Redcliffe, Caboolture-Kilcoy Hospitals and CISS

Car parking is available to all staff within the hospital grounds free of charge at Redcliffe, Caboolture-Kilcoy Hospitals and CISS. On street parking is also available. Caboolture Hospital has two staff swipe card access car parks available for all staff at Caboolture Hospital.

TPCH

Car parking is available to all staff within the hospital grounds free of charge. Paid parking is available in the multi-story car park at the front of the hospital, and the car park behind the Breeze Café. On Street Parking is also available but local council restrictions may apply.

METRO Parking Management Limited (METRO) manages the multistorey and an open-air parking area designated as Palliative Care Car Parking Area. All parking in Metro controlled facilities is regulated by Metro Parking Management Limited under their guidelines and policies. Staff members are not permitted to park in the METRO operated Car Park adjacent to the Palliative Care / Extended Care Units between the hours of 0500 to 2000.

All vehicles operated and parked on TPCH complex by all TPCH employees are to be registered with Protective Services TPCH. Permits are provided by Protective Services following registration. Registration is via completion of a Parking Registration form. Registration forms may be obtained from:

• Protective Services, or • TPCH Intranet site (Link: The Prince Charles Hospital: Corporate Services - Fire, Protection and Security Services.)

There is no limit to the number of vehicles that may be registered by an individual. Parking permits identify the registered vehicle and approved car parking area/s. Permits must be placed on the interior of the vehicle windscreen or quarter window ensuring that it is visible from the exterior of the vehicle. Failure to do so may render the permit void. Permits for use to identify motorcycles must be positioned in a predominate location on the vehicle.

Short Term Patient Drop-off / Pick-up bays are provided to allow the drop-off or pick-up of persons to the Emergency Department or Transit Lounge. Unless being used for the express purpose as identified, TPCH employee vehicles are not to be parked in these areas.

Performance and Development Planning (PDP)

The purpose of the Performance Development Plan (PDP) process is intended to assist managers in facilitating productive discussions with employees about performance and behaviour expectations and development to support improved capability and career progression. To access PDP go to http://gheps.health.gld.gov.au/metronorth/hr/performance-dev-plan.htm

Nursing and Midwifery

Performance development and planning and performance improvement information for nursing and midwifery can be found on QHEPS: Metro North Nursing and Midwifery Services http://qheps.health.qld.gov.au/metronorth/nursing-midwifery/professional-standards.htm#pdp

Your line manager will instigate the Performance Development Plan (PDP) process.

Employee Assistance Program (EAP)

Queensland Health's Employee Assistance Program provides professional short term counselling for up to six sessions per calendar year for employees and their immediate family. To help you to decide what support services are most appropriate for you please view the 'locate your service page' on the website.

This confidential service can be accessed through self-referral to OPTUM, the external EAP service provider. Services are available 24 hours a day, seven days a week, and 365 days a year, at no cost to you. Counselling services are available face to face or by telephone.

You can contact support on 1800 604 640 (24/7) or visit the Website: http://gheps.health.gld.gov.au/eap/

Herston Map



Dr. James Mayne Building (East Block)	Ned Hanlon Buildii	ng (Central Block)	Joyce Tweddell Building (West Block)
Lower Ground Floor Records and Correspondence Legal Services Patient/staff Liaison Ground Floor Emergency Transit Lounge Department of Emergency Medicine Department of Emergency Medical Imaging Acute Mental Health Assessment Unit Psychiatric Emergency Centre Ambulance Entry Florist Wards GA, GB Level1 Specialist Outpatients Services Pre Admission Clinic Minor Procedures Private Practice Specialist Suite Dermatology Endocrinology Podiatry Level 2 Occupational Therapy Orthotics/ Prosthetics Speech Pathology Social Work Nutrition/ Dietetics Information Division (Client Services) Psychology Level 3 Coronary Care Unit 3A Cardiac Catheter Suite Cardiology Ward 3B Cardiology Outpatients Cardiac Investigation Unit Thoracic Medicine Sleep Laboratory Bronchoscopy Suite ECG Internal Medicine Dept. Level 4 Intensive Care Unit 4A Professor Stuart Pegg Burns Centre (Ward 4C) Burns /Pain Offices Multidisciplinary Pain Centre	Ground Floor Main Entrance Gynaecology/ Maternity Outpatients Centre for Breast Health Admissions and Enquiries Prayer Room Chaplains Office Patient Flow Unit Travel Office Volunteer Services Gift Shop Bookings (Women's & Newborn Services) Community Midwifery Services (CMS) Accounts Trust Office RBWH Foundation Walkway to car park (Butterfield St) Level 1 Patient Support Services Hospital Pharmacy Food Court Retail Services Bank of Qld Australia Post QLD Drug Information Centre Walkway to car park (Butterfield St) Level 2 Physiotherapy Hydrotherapy Pool Consultation Liaison Psychiatry Internal Medicine Day Treatment Unit (IMDTU) Level 3 Critical Care & Clinical Support Services Medical Imaging Nuclear Medicine Queensland PET Services AV Telemed Level 4 Blood Bank Operating Suite and Post Anaesthetic Care Unit Surgical Day Care Unit Anaesthesia & Perioperative Medicine Bookings (Inpatients) Level 5 Women's & Newborn Assessment Unit Neonatal Intensive Care Unit/ Admin Women's & Newborn Operating Theatre Suite	Level 5 continued Indigenous Liaison Services Women's & Newborn Services - Grantley Stable Neonatal Unit (GSNU) - Birthing Centre and Suites - Gynaecology & Maternity Services - Women's and Newborn Operating Theatre Suite Indigenous Liaison Services Level 6 Staff and Patient Education Women's & Newborn Services Social Work Sexual Assault Service Walkway to RCH, Mental Health, Block 6, 7, 8 & 9. Courtyard Wards: 6AS, 6AN Gynaecology, 6BS, 6BN: Maternity Services Gynaecology Oncology Betty Byrne Henderson Research Centre Maternal Fetal Medicine, Centre for Advanced Prenatal Care (MFM CAPC) Perinatal Research Centre Level 7 Orthopaedics Rheumatology Clinical Immunology & Allergy Neuroscience: Neurology/ Neurosurgery Vascular Wards: 7AS, 7AN, 7BS, 7BN Level 8 Plastic Surgery Ear, Nose and Throat Audiology Ophthalmology Urology Maxillo - Facial Interviewing Officer Palliative Care Clinical Services Surgical & Perioperative Services Wards: 8AS, 8AN, 8BS, 8BN Level 9 Internal Medicine Services Department Gastroenterology and Outpatients Wards: 9AS, 9AN, 9BS, 9BN Renal and Dialysis Hepatology CNC	Level 3 Radiation Oncology Treatment Level 4 Entrance - West Block Admissions and Enquires Cancer Care Services Medical Records Cancer Care Services Ambulatory Services -Outpatients -Day Therapy Unit Satellite Pharmacy Level 5 Ward 5C Bone Marrow Transplant Unit (BMT) Haematology and Medical Unit Cancer Care Services Administration BMT Laboratory Level 6 Infectious Diseases Unit Infectious Diseases Ward - Wattle brae Infectious Diseases Ward - Wattle brae Infectious Diseases Administration Walkway to RCH, Mental Health, Blocks 6, 7, 8 & 9. Block 8 Level 5 Extended Care Unit Level 8 Clinical Photography - Herston Multimedia Unit

Safety and Quality / Patient Safety

Australian Charter of Healthcare Rights

Everyone who is seeking or receiving care in the Australian Health system has certain rights regarding the nature of that care. These are described in the Australian Charter of Healthcare Rights which was developed after national consultation by the Australian Commission on Safety and Quality in Health Care. In July 2008, Australian Health Ministers endorsed the charter for use across the country.

For more information on the Australian Charter of Healthcare Rights and how you can contribute to achieving healthcare rights visit: http://www.safetyandquality.gov.au

National Safety and Quality Health Service Standards

The National Safety and Quality Health Service Standards provide a nationally consistent statement of the level of care consumers should be able to expect from health services. They address areas where: the impact is on a large number of patients there is a known gap between current situation and best practice outcomes improvement strategies exist that are evidence based and achievable.

The National Safety and Quality Health Service (NSQHS) Standards are to protect the public from harm and to improve the quality of health service provision.

For more detailed information on individual standards go to:

http://hi.bns.health.qld.gov.au/executive/national-standards.htm

ACHS EQuIP National Standards

ACHS EQuIP National provides a further five Standards that focus on the performance of non-clinical systems as a part of comprehensive organisation-wide assessment.

For further information go to: http://hi.bns.health.qld.gov.au/executive/national-standards.htm

Clinical Governance - Patient Safety and Service Improvement

Metro North has established an integrated system of governance to actively manage patient safety and quality risks and take action to continuously improve to maximise patient safety and quality of care. Formal systems and processes have been designed to enable staff to effectively fulfill the responsibilities and accountabilities of their roles.

For further information go to: http://qheps.health.qld.gov.au/psu/safetyandquality/default.htm



Professional and Positive Workplace Culture

Code of Conduct for Queensland Public Service

The Queensland Health Code of Conduct describes the standards of behaviour and conduct expected of all employees within Queensland Health so that — working together — we can build a positive workplace culture and one that embodies the highest ethical standards. It encompasses Queensland Health's values of caring for people, leadership, respect and integrity. These values should form the basis of the way we behave and conduct ourselves while at work. As Queensland Health employees we occupy positions of trust and as such, have a commitment and obligation to the public, however we also have the right to be treated with respect and to work in an environment that is free from bullying, harassment and discrimination.

Further information on the Code of Conduct and other reference material are available at http://www.psc.qld.gov.au/includes/assets/qps-code-conduct.pdf or by contacting the HR Business Partners, Phone: (07) 3646 6180 Metro North HR Services@health.gld.gov.au

National Code of Conduct for Health Care Workers (Qld)

The National Code of Conduct for Health Care Workers (Queensland) applies to health care workers delivering a health service in Queensland from 1 October 2015. The Queensland Code sets minimum standards of conduct for healthcare workers. It applies to the provision of health services by health care workers who are:

- not required to be registered under the Health Practitioner Regulation National Law (including deregistered health practitioners);
- Registered health practitioners under the Health Practitioner Regulation National Law and who provide health services that are unrelated to their registration.

For further information contact Clinician Workforce Policy, Workforce Strategy Branch, Strategy Policy and Planning Division Phone: (07) 3234 0338 Email: national_workforce@health.qld.gov.au or visit the webpage https://www.health.qld.gov.au/system-governance/policies-standards/national-code-of-conduct/default.asp

Confidentiality, Privacy and Right to Information

Everyone who accesses public sector health services has a right to expect that information held about them will remain private. If the trust of members of the community in the confidentiality of records held by these services is eroded, they will be unlikely to participate openly and willingly in their health care. If they are not open and honest with the various health professionals who care for them this may adversely affect the ability of these professionals to correctly diagnose and care for the individuals themselves. This will negatively impact on the continued integrity of the health system. Personal information is information or an opinion (including information or an opinion forming part of a database), whether true or not, and whether recorded in a material form or not, about a person whose identity is apparent or whose identity can be easily worked out from the information or opinion. Sensitive information includes a person's personal information. Sensitive information also includes personal information that is health information about a person. Health information is both personal information and sensitive information about a person.

For further information contact the Privacy and Right to Information Unit on 3646 6180, email RTI-Privacy@health.qld.gov.au/governance/privacy-rti/home.htm

Ethics – Ethical Decision Making

As Queensland Government employees and representatives we are required to make ethical decisions, be accountable for our actions and demonstrate integrity. Ethics are accepted principles, rules or beliefs that guide how you behave in different situations.

- Ethics What is the right thing to do?
- Integrity Adherence to moral and ethical principles
- Accountability The state of being accountable, liable or answerable.

For further information contact (07) 3646 6180 or go to http://qheps.health.qld.gov.au/hr/html/ethics-conduct.htm

Workplace Harassment

Queensland Health is committed to providing a safe, secure and supportive workplace. Every employee has the right to work in an environment free from any form of workplace harassment—appropriate workplace behaviour is the responsibility of every employee. Behaviour which would constitute harassment in the workplace is unacceptable and will not be tolerated in any form, under any circumstances, by any employee within Queensland Health.

Workplace harassment is repeated and unreasonable behaviour directed towards a worker or group of workers that:

- Creates a risk to health and safety
- is unwelcome and unsolicited
- Would victimise, humiliate, intimidate or threaten most people if it happened to them.

Further information on the Complaint, Grievance and Dispute Resolution Process is available via the QHEPS intranet at http://qheps.health.qld.gov.au/metronorth/docs/workplace-relations/mnhsd-complaints.pdf or by contacting your Workplace Relations Officer on (07) 3631 7417.

Gifts and Benefits

The Financial Management Practice Manual (FMPM) circular 8/2010 outlines the ethical considerations and procedures involved in giving and receiving gifts and benefits. Also, the Public Service Commission (PSC) Directive 22/09 and Guideline provide guidance on giving, receiving and reporting gifts and benefits. Any offer of cash, or any items which are readily converted into cash, must be refused in all circumstances. Accepting money in any form will breach a number of public service policies and legislative requirements and may be seen as an attempt at bribery. Any gifts of cultural or historical significance must be reported, regardless of their value. Any gift or benefit that has a retail value \$150 or greater must be recorded in a gifts and benefits register. If multiple gifts and/or benefits are from the same donor or from donors in a similar relationship with the public service employee in any financial year and the cumulative retail value is \$150 or greater, then each gift and benefit must be reported.

For further information go to http://qheps.health.qld.gov.au/finance/policy/gifts-benefits.htm contact 3199 3816 or email financial_policy_team@health.qld.gov.au

Social Media

Metro North HHS use social media to communicate and engage with the public and our stakeholders about our Hospitals and Health Services. Communication and Engagement Staff are responsible for moderating all official Metro North HHS social media channels. The procedure which governs the official use of social media can be found on the Metro North policies and procedures site at

http://qheps.health.qld.gov.au/metronorth/docs/policies/mnhhs-sm- mod-procedure.pdf We provide you with many ways to connect with us. We have the following accounts that you can follow and share: Facebook, Twitter, YouTube and Linkedin.

We also have a social media guideline for staff to guide and support you in your use of social media, both at work and outside of work http://qheps.health.qld.gov MNHHS Communications and Engagement manages social media for the organisation. Please contact socialmedia_mnhhs@health.qld.gov.au

Aboriginal and Torres Strait Islander Health Unit

Improving Aboriginal and Torres Strait Islander Communication with our Consumers Queensland Health is the main provider of health services in Queensland and often the sole provider in rural and remote areas therefore has a very clear responsibilities in terms of Aboriginal and Torres Strait Islander Health and Improving Aboriginal and Torres Strait Islander health and closing the life expectancy gap between Aboriginal and Torres Strait Islander and other Queenslanders, which are two of Queensland Health's highest priorities.

Closing the Gap is a commitment by the Council of Australian Governments (COAG) to improve the lives of Aboriginal and Torres Strait Islander Australians. The Council of Australian Government (COAG) has agreed to six ambitious Closing the Gap targets, including:

- To close the gap in Indigenous life expectancy within a generation (by 2033)
- To halve the gap in mortality rates for Indigenous children under five within a decade (2018).

For further information contact the Aboriginal and Torres Strait Islander Health Unit http://qheps.health.qld.gov.au/metronorth/indigenous_health/home.htm
Metro North Cultural Capability Officers Gene Blow 0438 367 583 / Henry Nona 3647 953 / Elwyn Henaway 0447 112 038

Infection Management and Prevention Service

Infection Control

The primary aim of the Infection Management Service is to achieve the following through Clinical Governance:

- The delivery of contemporary infection control practices to minimise the risk of healthcare associated infections
- To promote staff health though the provision of a staff vaccination program
- The Infection Management Service supports research activities in Infection Control. Surveillance for infection activity including surgical sites, multiple resistant organisms and health care related blood stream infections. Benchmarking is conducted on a local and national level

Standard Precautions

Standard precautions reduce the incidence of cross infection and transmission of pathogens. This is achieved by minimizing the risk of contact with blood and body fluids. Standard precautions make the assumption that all blood and body fluids are potentially infectious (with the exception of sweat).

Hand Hygiene

Adherence to hand hygiene is required by all Queensland Health employees, volunteers, contractors and students engaged in contact with the patients or the patients surroundings in QH facilities. The major route of transmission of micro-organisms, including multi-resistant organisms (MRO) such as Methlicyllin Resistant Staphylococcus Aureus (MRSA), in healthcare facilities has been determined as the unwashed hands of healthcare workers (HCWs). On average, healthcare associated infections affect 7% to 10% of hospital admissions.

Additional Precautions

Additional precautions are used for patients who are known or suspected of being colonized/infected with an epidemiologically significant organism, or highly transmissible pathogens. Additional precautions are used in conjunction with standard precautions.

Additional precautions include:

• Contact Precautions

Contact precautions are implemented for patients known or suspected to be infected or colonised with organisms that can be transmitted by direct contact (hand or skin to skin) or indirect contact (inanimate objects or surfaces).

Droplet Precautions

Droplet precautions are applied to patients with suspected or documented infections with organisms transmitted by droplets (respiratory particles >5nm in size). This type of organism does not remain suspended in the air but may be projected up to one metre from the patient. Notify Infection Control if droplet precautions are instigated.

Airborne Precautions

Airborne precautions are applied to patients with suspected or documented infections due to organisms which are transmitted by droplet nuclei (respiratory particles <5 nm in size). These nuclei containing organisms may remain suspended in the air for hours and can be widely dispersed by air currents. Patients who require airborne precautions require isolation in a negative pressure room. Notify infection control if airborne precautions are instigated.

Vaccinations

All employees are required to comply with the Queensland Health Standard Immunisation of Healthcare Workers. New staff are provided with a pre-employment vaccination screening form to determine current immunity status against vaccine preventable diseases e.g. measles, mumps, rubella and varicella (chicken pox). If you are uncertain about your immunity or have any concerns relating to infectious diseases contact the Infection Control Practitioner at your facility.

Occupational Exposure Injury

Occupational exposure injuries are injuries where a staff member is exposed to blood or body fluids either through contaminated sharps penetrating the skin or a splash to the eyes, mouth or non-intact skin. Any staff member who sustains an occupational exposure must immediately initiate first aid and then report to the Emergency Department at the closest hospital as soon as possible. Notify your Nurse Unit Manager or Workforce Manager out of hours. In the emergency department you will be given 'The Kit'. 'The Kit' is a package that includes all the forms to report the occupational exposure and instructions about the follow up required, you will also need to see a Medical Officer and have blood taken. After completing the reporting process in the Emergency Department, all further questions and test results will be coordinated by the infection control staff and therefore enquiries should be directed to them.

Sharps Safety Program

Occupational exposures to blood borne pathogens from needle stick and other sharps (percutaneous) injuries as well as blood and body fluid (non-percutaneous) exposures, are a significant but preventable problem. Injuries from needles and other sharp devices carry the greatest risk of transmission of a blood borne virus – hepatitis B virus, hepatitis C virus and human immunodeficiency virus (HIV).

For further information on the Infection Management Service contact:

REDH 3883 7546 or http://qheps.health.qld.gov.au/redcliffe/infection/infectionmanage.htm RBWH 3646 1482 http://hi.bns.health.qld.gov.au/rbh/policies/infection_control.htm TPCH 3139 5866/31396 4894 http://qheps.health.qld.gov.au/rbh/policies/infection/infection.htm CABH/KILCOY http://qheps.health.qld.gov.au/cabkilcoy/infectioncontrol.htm CISS http://qheps.health.qld.gov.au/metronorth/subacute/infection-control.htm

Five Moments for Hand Hygiene

Improving Hand Hygiene among healthcare workers is currently the single most effective intervention to reduce the risk of hospital-acquired infections in Australian hospitals.

Five Moments for Hand Hygiene have been identified as the critical times when Hand Hygiene should be performed.

- Before Touching a Patient
- Before a Procedure
- After a Procedure or Bodily Fluid Exposure Risk
- After Touching a Patient
- After Touching a Patients Surroundings

Refer to https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/diseases-infection/infection-prevention/standard-precautions/hand-hygeine/about/default.asp for further information on Hand Hygiene.

Fire Safety and Advisory Unit

Emergency Response

What do I do in case of an Emergency?

- Stay calm, raise the alarm
- Always follow the demands of an aggressor nothing more nothing less
- Staff, patients and visitors must follow directions
- Staff may be required to assist in evacuation or be a sentry
- All building occupants must follow the instructions of the Wardens during an emergency
- Remember R.A.C.E (Remove, Alert, Contain, Evacuate)
- Remember P.A.S.S (Pull the pin, Aim at the base of the fire, Squeeze the handles together, Sweep the base of the fire)

Compliance in fire and evacuation training is crucial for the safety of all staff, patients and visitors. Education of all staff in the correct responses to an emergency situation is a vital component of preparedness.

CODE BROWN	EXTERNAL EMERGENCY			
CODE YELLOW	INTERNAL EMERGENCY			
CODE BLUE	MEDICAL EMERGENCY (MET)			
CODE RED	FIRE/SMOKE EMERGENCY			
CODE PURPLE	BOMB/ARSON THREAT			
CODE BLACK	PERSONAL THREAT			
CODE ORANGE	EVACUATION			

MNHHS Emergency Response Phone Numbers:

RED-CAB	All codes	666	
TPCH	Code Blue	333 All other codes	666
RBWH	Code Blue	333 All other codes	55
CISS	All codes	0-000	
Kilcov	All codes	0-000	

For Portable Fire Equipment Training or any other enquiries please contact the <u>Fire Safety team</u> <u>firesafetyadvisoryunit@health.qld.gov.au</u> or the Fire Safety Coordinators: RBWH: 3646 7950 TPCH: 3139 5228 Redcliffe/Caboolture/Kilcoy: 3883 7000 CISS: 0437 549 877

Tips on how to keep you and our patients safe in the workplace

Metro North Health and Safety

MNHHS ensures a safe work and public environment through the Health and Safety Management System (HSMS), which is a suite of policies, procedures, programs and fact sheets that promote awareness of everyone's roles and responsibilities towards Workplace Health and Safety (WHS). As a new staff member to MNHHS, you play an important role in the continual success of the HSMS and WHS.

Support services include:

- Consultative advice to line managers and Health and Safety (H&S) Committees on meeting their obligations under the Work Health & Safety Act & Regulation
- Assistance and advice on the implementation of the Metro North Workplace Return to Work and Rehabilitation Program
- Recording all workplace incidents and provide statistical H&S and injury costs data reports
- Monitoring all compliance audits and checklists across the Health Service.

Risk Management

Risk management is the systemic approach to dealing with workplace hazards, (such as electricity, slippery surfaces, patient or patient handling). It involves identifying and analysing hazards, assessing the risks associated with those hazards and then identifying control measures to eliminate or reduce the risks.

Health and safety risk management is required:

To eliminate risks to health and safety, so far as is reasonably practicable, and If it is not reasonably practicable to eliminate risks to health and safety, then minimise those risks so far as is reasonably practicable.

Workplace Rehabilitation

MNHHS is committed to the wellbeing of all employees through the provision of effective workplace rehabilitation for work related injury/illness. Non-work related injury/illness will be supported were practicable. Participation in the workplace rehabilitation process is voluntary for workers who have sustained a non-work related injury/illness.

HSMS policies, procedures, programs and fact sheets are subject to change. The most current versions may be accessed from the Health and Safety Website: http://qheps.health.qld.gov.au/metronorth/hr/health-safety-home.htm

For further information Health and Safety Units are located across the Health Service, contact:

TPCH, Redcliffe, Caboolture/Kilcoy, CISS: (07) 3139 4540 RBWH: (07) 3646 0738

Email: MNHHShealthandsafety@health.qld.gov.au

Website: http://gheps.health.gld.gov.au/metronorth/hr/health-safety/health-and-safety-home.htm

Ergonomics and Manual Handling

Healthcare ergonomics (HCE) is more than just back care education and ergonomic office furniture. The healthcare environment presents some unique ergonomic issues and risks and has been widely reported as one of the most prevalent industries for work related Musculoskeletal Disorders (MSD). Musculoskeletal Disorders (MSD) are injuries of the soft tissues (muscles, joints, tendons, ligaments, cartilage) and nervous

system. The most common examples include repetitive strain injuries such as tendonitis and carpal tunnel syndrome, and back injuries involving muscles, ligaments, and/or spinal discs.

Manual Handling

Manual Handling refers to any activity which requires a person to use force to lift, lower, push, pull, carry or otherwise move, hold or restrain any object, person or animal. Manual handling referred in this fact sheet excludes patient handling and work station issues. These issues are addressed in other guidelines.

Managers and Supervisors must direct employees towards safe manual handling responsibilities by ensuring employees:

- · help to identify and suggest measures to control hazards,
- report manual handling task hazards as soon as practical,
- participate in consultation process during manual handling risk assessments,
- attend training and information sessions as directed by the supervisor, and
- use equipment provided to assist with manual handling tasks.

For further information contact 3139 4540 (Northside) or 3646 0738 (RBWH) or go to http://qheps.health.qld.gov.au/safety/ergo/home.htm or email MNHHShealthandsafety@health.qld.gov.au

Waste Management

It is every person's responsibility to ensure that all types of waste are disposed of in the appropriate manner.

This is in accordance with:

- The Workplace Health and Safety Act (2011)
- http://www.legislation.qld.gov.au/LEGISLTN/CURRENT/W/WorkHSA11.pdf
- The Environmental Protection (Waste Management) Regulation and Policy(2000)
- Waste Reduction and Recycling Regulation 2011

Different Forms of Waste

Collection containers for different wastes are colour coded with particular symbols.



Waste Management coordinators can provide assistance to staff on waste management issues such as:

- Transferral of waste from one area to another
- Culling of large quantities of paper items such as journals and files
- Advice on recycling activities within the District
- Auditing of waste segregation and compliance

For further information contact the Environment and Waste Coordinator:

- REDH, CABH/Kilcoy 3883 7184 or 0419 291 297, CISS 3139 5853
- TPCH 3139 5853 or http://qheps.health.qld.gov.au/tpch/waste/waste_home.htm
- RBWH 3646 1424 or 0421 612 852 http://hi.bns.health.gld.gov.au/corporate services/safety.htm

Occupational Violence Prevention (OVP)

MNHHS provide systematic risk management strategies aimed at improving staff and patient safety by early identification, prevention, protection from and post incident management of occupational violence incidents. Occupational violence and aggressive behaviour is defined by Queensland Government as any incident when individuals are abused, threatened or assaulted in circumstances arising out of, or in the course of their employment. Incidents include verbal, physical or psychological abuse, threats or other intimidating behaviours, intentional physical attacks, aggravated assault, sexual harassment and sexual assault. It is essential that you report the incident so OVP Services can review and better understand any danger staff face. Occupational Violence Prevention Services aim to review incidents as soon as practicable in the work areas. If workers have been exposed to occupational violence or near misses from patients or visitors, the departments can contact OVP Services for follow up to prevent a reoccurrence or similar incident taking place.

Working in Isolation

Working alone is working anywhere a person is unable to get immediate assistance from colleagues or other people. In some cases other people may be close by, or the employee could be in remote location. Exposure to violence and poor access to emergency assistance are two main hazards of working alone. For further information go to http://qheps.health.qld.gov.au/metronorth/violence-prevention/docs/fs-isolation.pdf

Personal Safety

For further information on Personal Safety at work, on the street, while driving, if followed while driving go to http://qheps.health.qld.gov.au/metronorth/violence-prevention/docs/fs-personal-safety.pdf

Home Visits and Personal Safety

Workers who provide care and services to people within their homes, hostels or in the community may be exposed to many risks. These risks will be dependent upon existing controls, patient factors and environmental factors. For further information go to http://qheps.health.qld.gov.au/metronorth/violence-prevention/docs/fs-visit-community.pdf

Elder Abuse

Abuse is a deliberate act of ill treatment that can cause harm or injury to a person or to a child's safety, their wellbeing, dignity and development. Residential Aged Care has very specific requirements in relation to reporting Physical, and Sexual assault. The timeframe requires strict accountability for all staff as it must be reported to the Department of Health and Ageing and the Qld Police within 24 hours of the allegation being made by the Aged Care Facility. (The Aged Care Act.1997 amended in 2007).

The definition in Queensland for elder abuse is "any act occurring within a relationship where there is an implication of trust, which results in harm to an older person. Abuse can include physical, sexual, financial, psychological, social and/or neglect" (ANPEA, 1999).

Community and Consumer Engagement

Our Hospital and Health Service is committed to meaningful and diverse consumer and community engagement and is focussed on making a positive difference to the delivery of patient-centred care.

- 1. Enable opportunities for consumers and community to influence HHS service planning and design and keep the public informed about key HHS issues and decisions.
- 2. Enable local level engagement by implementing an engagement plan for each hospital and service that is aligned to their operational and business plans.
- 3. Foster inclusion of Aboriginal and Torres Strait Islander peoples, culturally and linguistically diverse communities, and people with disabilities or low literacy.
- 4. Improve safety and quality within the HHS through consumer engagement.
- 5. Implement consistent organisation-wide systems and processes to support meaningful and diverse consumer and community engagement.
- 6. Continuously improve our consumer and community engagement activities through monitoring, review and evaluation.
- 7. Develop complementary consumer and community engagement strategies with Metro North Brisbane Medicare Local and exchange data gathered about community and consumer needs and concerns.

For further information and resources go to http://qheps.health.qld.gov.au/metronorth/comm-engagement/home.htm

General abbreviations

ACAT	Aged Care Assessment Team	CTU	Computer Training Unit (RBWH)
ACHS	Australian Council on Healthcare Standards	CW	Contact Warning – HBCIS Condition
ADM	Admissions	DC	Discharge
ADMIS	Admission	DC FAC	Discharge Facilitator
AFTE	Affordable Full Time Equivalent	DEM	Department Of Emergency Medicine
AMB	Ambulance	DERM	Dermatology
ANAES	Anaesthetics	DIAL	Dialysis
AO	Administration Officer	DIET	Dietician
APPT	Appointment	DFU	Discharge Facilitation Unit
APS	Acute Pain Service	DJMB	Dr James Mayne Building (East Block) - RBWH
BB	Bulk Billed	DOB	Date of Birth
BC	Birth Centre (RBWH)	DOA	Dead on Arrival
BMT	Bone Marrow Transplant	DON	Director of Nursing
BS	Birth Suite	DNR	Did not respond
CARD	Cardiology	DRG	Diagnostic Related Groups
CARPS	Computerised Assisted Radio Personnel SYSTEMS	DTU	Day Therapy Unit
CARS	Community Assessment and Referral Service	EB	East Block (Dr James Mayne Building) - RBWH
CAT	Categorisations for outpatients	ECG	Electrocardiogram
Cat 1	Urgent	ECU	Extended Care Unit
Cat 2	Semi urgent	EDS	Enterprise Discharge Summary
Cat 3	Non urgent	EE	Standard 8 hour shift
CATH	Catheter	EN	Enrolled Nurse
CC & CSS	Critical Care & Clinical Support	ENDO	Endocrine / Endocrinology

	Services		
CCS	Cancer Care Services	ENT	Ear, Nose & Throat
CCU	Coronary Care Unit	EQuIP	Evaluation and Quality Improvement Program (National Standards)
CIMHA	Consumer Integrated Mental Health Application	FBU	Flex Bed Unit
CIU	Cardiac Investigation Unit	FIM	Functional Independence Measures
CIS	Community Interface Services	FTA	Failed to attend
COAG	Coagulation	GA	Emergency Short Stay Ward
COAG	Council of Australian Governments	GB	Psychiatric Emergency
COB	Close of Business	GARU	Geriatric and Rehabilitation Unit
Code Brown	External emergency	HAEM	Haematology
Code Yellow	Internal emergency	HBACS	Hospital Based Acute Care Services
Code Red	Fire emergency	HBCIS	Hospital Based Corporate Information System
Code Purple	Bomb/ Arson emergency	HDU	Haemodialysis Unit
Code Black	Personal threat emergency	HIS	Health Information Services
Code Blue	Medical emergency	HITH	Hospital in the home
Code Orange	Emergency evacuation	HR	Human Resources
CON	Main contact person	ICMMS	Information Computerised Maintenance Management System
COND	Condition	IBD	Inflammatory Bowel Disease
CONSULT	Consultant (Specialist)	ICN	Intensive Care Nursery
COW	Computer on Wheels	ICU	Intensive Care Unit
CRC	Colorectal Clinic	ID	Infectious Diseases
CSOS	Centralised Specialist Outpatient Services	ID	Identification Badge
ieMR	integrated electronic Medical Record	PFU	Patient Flow Unit
IMDTU	Internal Medicine Day Therapy Unit	PACU	Post Anaesthetic Care Unit
INFD	Infectious Diseases Day	PARIS	Payroll and Rostering Information System
Info Service	Information Service Centre (Help Desk)	PHARM	Pharmacy / Pharmacist
Internet	External websites	PHYSIO	Physiotherapy
Intranet	Internal websites	PLAS	Plastics
IMS	Internal Medicine Services	PICC	Peripheral Inserted Central Catheter
ISC	Information Service Centre	PPSC	Private Practice Specialist Centre
ISIS	Interpreter Services Information Systems	PRE AC	Pre Admission Clinic
IV	Intravenous	PRF	Patient Registration Form
JTB	Joyce Tweddell Building (West Block) - RBWH	PRIV	Private
LIVR	Liver	Proxy card	Proximately card
MAPU	Medical Assessment Planning Unit	PSO	Patient Support Officer
MAXF	Maxillo Facial	Pt	Patient
	i e e e e e e e e e e e e e e e e e e e		•

MAS	Manager Administrative Service	PTSS	Patient Travel Subsidy Scheme
MED / MD	Medical	Proxy card	Proximately card
MERT	Medical Emergency Response Team	PSO	Patient Support Officer
MET	Medical Emergency Team	QHEPS	Queensland Health Electronic Publishing System
MH	Mental Health	QHERS	Queensland Health Electronic Reporting System
MONC	Medical Oncology	R	Private Patient on HBCIS
MN	Metro North	RAD	Radiation
MNHHS	Metro North Hospital and Health Service	RADONC	Radiation oncology
MET	Medical Emergency Team	RBWH	Royal Brisbane and Women's Hospital
MRD	Medical Record Department	RD	Referring Doctor
MRN	Medical Record Number	RAD	Radiation
NEAT	National Emergency Access Target	REF	Referral
NEST	National Elective Surgery Target	Reg	Registrar (Doctor training to be a Specialist)
NEURO	Neurology	RENL	Renal
NHB	Ned Hanlon Building (Central/Main Block) - RBWH	Res	Resident
NOK	Next of Kin	RESP	Respiratory
NROS	Neurosurgical	RFDS	Royal Flying Doctor Service
NUM	Nurse Unit Manager	RHEUM	Rheumatology
ONC	Oncology	RN	Registered Nurse
NHB	Ned Hanlon Building (Central/Main Block) - RBWH	RONC	Radiation Oncology
NOK	Next of Kin	SAT	Satisfactory
NROS	Neurosurgical	SCN	Special Care Nursery
00	Operational Officer	SDCU	Surgical Day Care Unit
OOF	Order of Filing	SMO	Senior Medical Officer
ORTHO	Orthopaedics	SOC WK	Social Work / Social Worker
OT	Occupational Therapist	SOPD	Specialist Outpatient Department
OT	Operating Theatre	SOS	Specialist Outpatient Services RBWH
PAD / PDP	Performance Appraisal & Development Performance Development & Planning	SP	Speech Therapy / Speech Pathologist
POLO	Patient Options Liaison Officers	SSICU	Short Stay Intensive Care Unit
PUB	Public Patient	STAB	Stable
Р	Public Patient on HBCIS	STRK	Stroke
PACU	Post Anaesthetic Care Unit	SUR/SURG	Surgery
PARIS	Payroll and Rostering Information System	T'FER	Transfer
THOR	Thoracic		
TL	Transit Lounge	**Administration abbreviations**	
URN	Unit record number	AO	Administration Officer
LIDOL	Urology	ESO	Executive Support Officer
UROL	Olology		= x = 0 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1
US	Ultrasound	SAO	Senior Administration Officer
US	Ultrasound		

WB	West Block (Joyce Tweddell Building) RBWH	**Nursii	ng abbreviations**
WC	Wheel Chair	AIN	Assistant in Nursing
WOU	Weight of Activity Unit	CN	Clinical Nurse
1/12	One month	CNC	Clinical Nurse Consultant
1/52	One week	EN	Enrolled Nurse
1/7	One day	EEN	Endorsed Enrolled Nurse
24/12	Two years	NP	Nurse Practitioner
1/12	One month	NUM	Nurse Unit Manager
		RN	Registered Nurse
		RM	Registered Midwife
	or abbreviations**		Health abbreviations**
CONS	Consultant	AH	Allied Health
INT	Intern	AHA	Allied Health Assistant
JD	Junior Doctor	OT	Occupational Therapist
JHO	Junior House Officer	Physio	Physiotherapist
PHO	Principal House Officer	SP	Speech Pathologist
PROF	Professor	SW	Social Worker
REG	Registrar		
RES	Resident		
SHO	Senior House Officer		
SMO	Senior Medical Officer		
SNR REG	Senior Registrar		
VMO	Visiting Medical Officer		