# CAROLINAS COLLEGE OF HEALTH SCIENCES POLICY AND PROCEDURE

Section V - Safety

SUBJECT: OCCUPATIONAL INJURY OR ILLNESS, RISK AND LIABILITY, AND INCIDENT REPORTS

**REVIEWER(S):** Safety Committee Chair

Dean of Student Services and Enrollment Management

#### **Related Policies to Consider:**

College Records - Privacy, Retention, and Storage (Sec. II)

#### I. POLICY

The College will ensure prompt and accurate reporting for all safety-related events or occurrences not consistent with the routine operation of the college.

#### II. PROCEDURE

A. Reports of Occupational Injury or Illness (ROII)

Students will be provided access to first aid and emergency care for illnesses or injuries occurring while performing clinical duties. The severity of the illness or injury will determine how and where treatment occurs. This policy applies to all CCHS employees injured on the job and all students injured during assigned clinical hours.

- The person who discovers the occurrence will notify the person in charge at that location as soon as possible and complete a Report of Occupational Injury or Illness (available on Synapse for employees and on Moodle for students with instructions for completion). The person in charge shall verify the completeness of the report and ensure that it is promptly forwarded.
- The report form shall be faxed immediately to 704-444-3231 (Worker's Compensation department). It is the responsibility of this office to assure that the documentation is adequate and to initiate immediate follow-up actions as required.
- The report form should also be faxed to Employee Health (704.355.2152). For blood borne pathogen exposure, call Employee Health (704.355.2106) to verify follow-up instructions.
- After faxing, the report form will be given to the CCHS department manager in-charge of the employee or student.
- A copy of the report form will be forwarded to the chair of the CCHS safety committee to be logged
  into the Safety Related Incident Log located in the safety committee folder on the CCHS data drive.
  The chair will notify the president of all ROIIs.
- Reports of Occupational Injury or Illness shall not be made a part of any employee's personnel file.
   Knowledgeable failure to report an injury may be grounds for dismissal from employment, or other disciplinary or administrative action.

# B. Incident Reports

This policy applies to events involving missing, lost, damaged, or stolen property and falls or accidents involving visitors.

- The person who discovers the incident will notify the person in charge at that location as soon as possible.
- The person in charge will notify security, notify the college president, and complete an incident report (available on Synapse).
- Incident reports are forwarded to risk management upon completion.

#### C. Risk

1. A student injured in the course of a clinical portion of their curriculum (as defined in the course syllabus) is covered by CHS' Worker's Compensation. Filing the ROII initiates this process but may be verified with a phone conversation with CHS' Worker's Compensation Department.

- 2. Invasive procedures should be included in a program curriculum only after didactic instruction has been provided and knowledge of concepts verified. When possible, simulation, virtual reality, or augmented reality should be used prior to practicing an invasive procedure on a person.
- 3. Students who are injured when performing an invasive procedure or having a procedure performed on them within the context of a didactic or lab class (as opposed to "clinical") are not covered by the College for medical insurance purposes. That is, they are not covered by Carolinas HealthCare System's worker's compensation program for injuries incurred. For this reason, a signed release should be requested before participating in this type of practice to ensure participants understand that the College is not responsible for injuries incurred. The Consent to Participate in Invasive Procedures form is attached. This form should be maintained with course records for one year after the student's last date of attendance. The student's standard medical coverage would apply in all cases not covered by worker's compensation. That is, if a student or staff member were injured during the practice of an approved invasive procedure, such as a finger stick or drawing blood by a student, any medical bill would be handled by their personal medical coverage, just as any other injury received would be (i.e., falling in one's front lawn). If a student is not insured, or insured only under a catastrophic policy, there would be no benefit related to a claim. The college makes a student insurance policy available for purchase.

#### D. Liability

- All students and others volunteering to participate in invasive procedures such as venipuncture, capillary procedures, or intradermal injections will complete the Consent to Participate in Invasive Procedures form.
- 2. Students are covered by CHS' liability insurance for anything related to their program if it is an assigned part of the program and if the standard precautions (i.e., faculty supervision) are followed. This protects them in the event of a lawsuit from a fellow student or anyone else whom they may inadvertently injure.
- 3. In the unlikely event that a claim was made that the college had not taken reasonable precautions or had continued to do something known to be unsafe, a suit for compensatory damages could be filed.

#### E. Community Health Screenings

- Nursing and allied health students, after receiving the appropriate training, may represent the College at community health screenings. Such screenings should not extend beyond the scope of the student's abilities (i.e., blood pressure, temperature, etc.). In addition, basic first aide may be delivered during these community health screenings.
- 2. In all cases, a participant disclaimer form will be completed and provided to the participants. This form is attached.
- F. The Occupational Injury or Illness, Risk and Liability, and Incident Reports policy will be reviewed and/or updated bi-annually.

III. APPROVAL:				
Name:	Title: President	Date: _	12/22/11	

# **Carolinas College of Health Sciences**

# CONSENT TO PARTICIPATE IN INVASIVE PROCEDURES

As a participant in clinical program activities, I understand that invasive procedures are an integral part of programs of study. I also understand that the collection of blood through venipuncture and capillary procedures, the intradermal injection of serums, and other minimally invasive procedures are necessary skills for students to master.

In order to provide the greatest opportunity for students to obtain mastery of these techniques I **volunteer** to participate in the invasive procedure. In the collection of blood, only small volumes (not to exceed 15 ml), under controlled, and supervised circumstances in the student laboratory will be collected. I understand that this is strictly **voluntary and I will not be coerced or forced to be a donor for these procedures.** 

I understand that **some risk is involved** in that the venipuncture, capillary puncture, and intradermal injection procedures are invasive in nature. Potential risks include **infection**, **soreness**, **bruising and bleeding**.

I acknowledge that I am **not currently taking any medications or have any known conditions that may leave me immunocompromised or prone to excessive bleeding** causing excessive risks to myself as a result of volunteering to have a venipuncture, capillary puncture, or intradermal injection.

I agree to follow all policies associated with the procedures, including applying pressure and keeping the site bandaged for a minimum of two hours following the puncture.

I release Carolinas College of Health Sciences from any liability that might arise from my choice to allow students to practice performing venipuncture, capillary puncture, or intradermal injection techniques on my arms, hands, and/or fingers respectively.

Date	
	Date

Adapted and used with permission from River Valley Community College, Claremont, New Hampshire.



# **Carolinas College of Health Sciences**

Name:	Date:
Thank you for participating in this physician about today's results.	screening today. Please inform your
Blood pressure reading:	

# **Blood Pressure Screening Guidelines:**

Systolic		Diastolic	Your group	What to do
(top number)		(bottom number)		
Below 120	and	Below 80	Normal blood pressure	Maintain a healthy lifestyle
120-139	or	80-90	Prehypertension	Adopt a healthy lifestyle
140-159	or	90-99	Stage 1 hypertension	Adopt a healthy lifestyle;
				take medication
160 or more	or	100 or more	Stage 2 hypertension	Adopt a healthy lifestyle;
				take more than one
				medication

Numbers are in mm Hg.

Those with heart disease, diabetes, or chronic kidney disease need to manage their blood pressure more aggressively. These guidelines are for those with high blood pressure as a single condition.

Source: <u>Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment</u> of High Blood Pressure, 2003, JAMA, 289:19, via www.mayoclinic.com.

# At Carolinas College of Health Sciences, we want you to understand...

We care about your health. The information provided to you through this screening process should not be utilized as a substitute for proper physician evaluation. Normal and appropriate values can and do vary from patient to patient and can be affected by medications and medical conditions and other factors. Without a proper baseline, making medical assumptions based solely upon screening values is not advisable. If you have any questions or concerns about your health or the results of this screening, consult with your physician.

If you need assistance with locating a physician to help you with your health concerns, you may **call the Carolinas Medical Center Provider Referral Line at 704-355-7500 or 1-800-821-1535**. The Provider Referral Line is a free information and referral service of **Carolinas Medical Center**.