



Vendor policy and procedure handbook

Welcome to our family

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Introduction

To our vendor partners,



Welcome to ECU Health. We are pleased you chose to join our family of 14,000+ individuals who are working in ECU Health facilities across eastern North Carolina. Today, ECU Health is a regional health system that proudly serves 1.4 million individuals in 29 eastern North Carolina counties. ECU Health consists of nine hospitals, more than 110+ physician practices, home health and hospice, wellness centers and other health care services.

Over these next few days, you will spend a lot of time adjusting to the day-to-day realities of any new job: finding units, offices and conference rooms, meeting new people, settling into your workspace. As you get acclimated to your daily routine, we want you to remember that your position with ECU Health is not just any new job.

ECU Health is well-positioned for continued success as we care for our family members, friends and neighbors who proudly call this part of the state home. To do this, we must act as one system with one goal. And that goal is Excellence:

- Excellence in the experiences we create
- Excellence in the quality of care we provide
- Excellence in the financial decisions we make

To succeed, we must deliver excellence in all that we do – every day. This isn't a simple task. It requires great effort and dedication, but our culture has always included hard work. We updated our mission and vision to more effectively reflect who we are and why we exist.

Our mission builds on our decades of commitment to the region. We will strive ***To improve the health and well-being of eastern North Carolina.*** In order to fulfill that mission, we must be innovative in our approach to pursuing excellence in health care. ECU Health has integrated primary care with ambulatory services, expanded health initiatives to include health coaches, telehealth and faith-based programs to help people live longer, healthier lives.

Our vision leaves no doubt about our future. We will work ***to become the national model for rural health and wellness by creating a premier, trusted health care delivery and education system.*** This means providing access to quality care, close to home. ECU Health has invested millions of dollars in medical equipment, improved information technology and infrastructure to provide better access to services for the patients we proudly serve.

This is not a journey we are taking by ourselves. It is going to take The Brody School of Medicine, private practice physicians, community partners and our most valuable asset – you. Consider this orientation session your first step on a meaningful journey. Welcome aboard!

With warmest regards,

Mike Waldrum, MD, MSc, MBA

Chief Executive Officer, ECU Health

Executive Dean, Brody School of Medicine at East Carolina University

Mission

To improve the health and well-being of eastern North Carolina

Vision

To become the national model for rural health and wellness by creating a premier, trusted health care delivery and education system

Living Our Values Every Day

IC-EAST Values



INTEGRITY

Always honest, sincere and ethical.



COMPASSION

Always caring, relational and respectful.



EDUCATION

Always curious, growing and innovative.



ACCOUNTABILITY

Always responsible, dependable and proud.



SAFETY

Always intentional, thoughtful and focused.



TEAMWORK

Always collaborative, supportive and inclusive

Imperatives

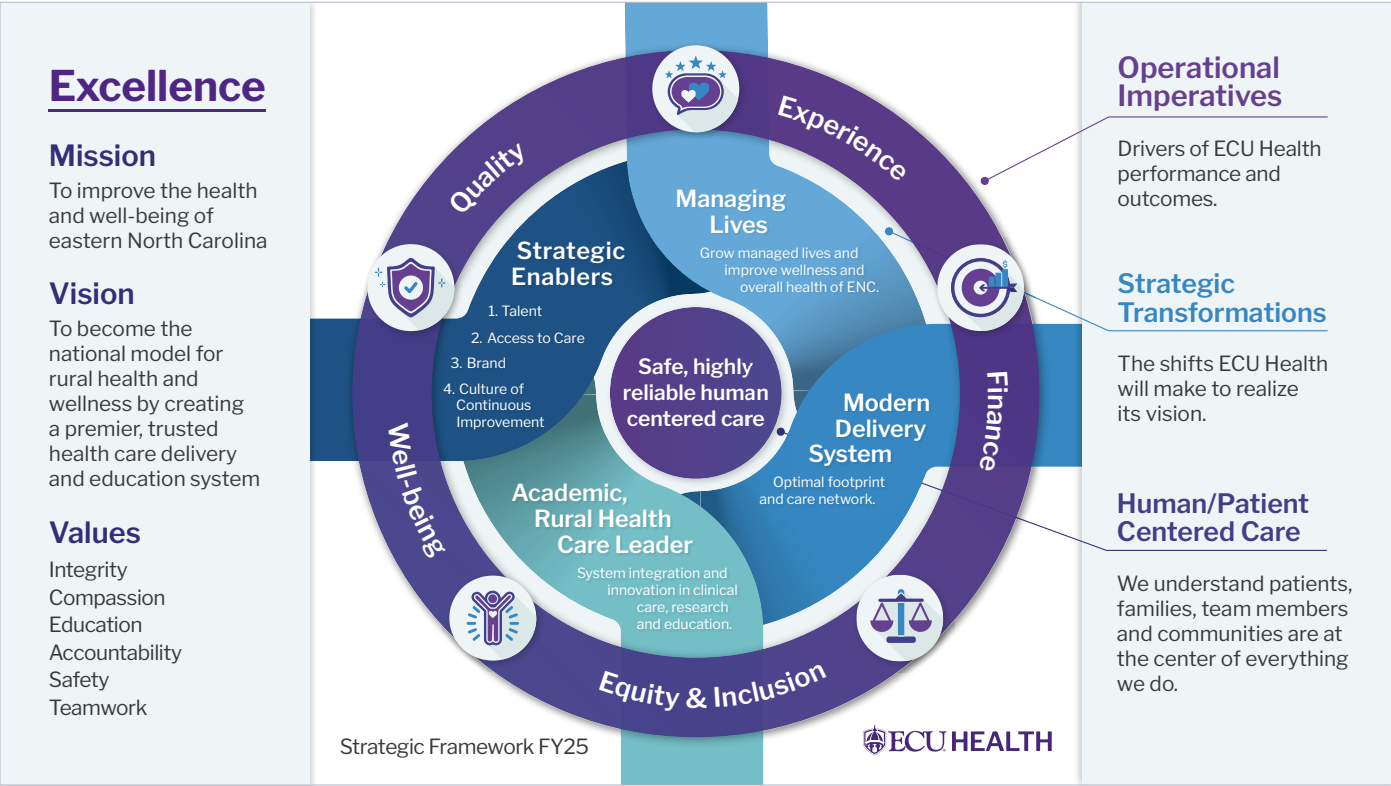
To fulfill our Mission, Vision, and Values, we are focused on three imperatives that serve as the foundation for how we frame our priorities, implement initiatives and measure progress.

These three operational imperatives are **Quality**, **Experience** and **Finance**. Excellence is built upon these foundational imperatives, working in tandem. We work as a team, while always remembering our mission is the foundation of what we do.

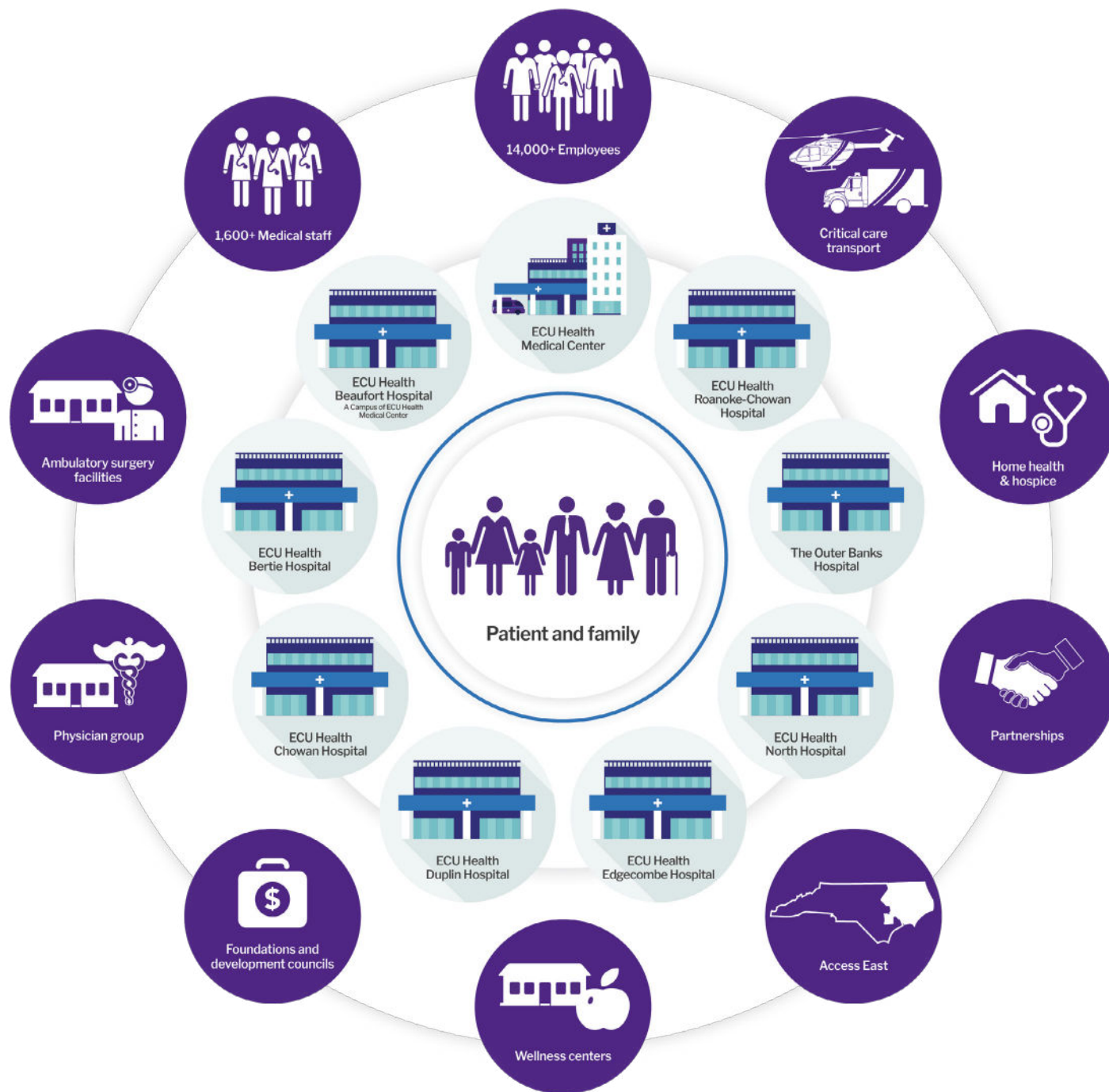
Excellence happens by creating positive experiences, providing high-quality care and achieving financial objectives.

By being open and working together to implement best practices, we will meet our goals, fulfill our Mission and achieve Excellence.

ECU Health strategic framework



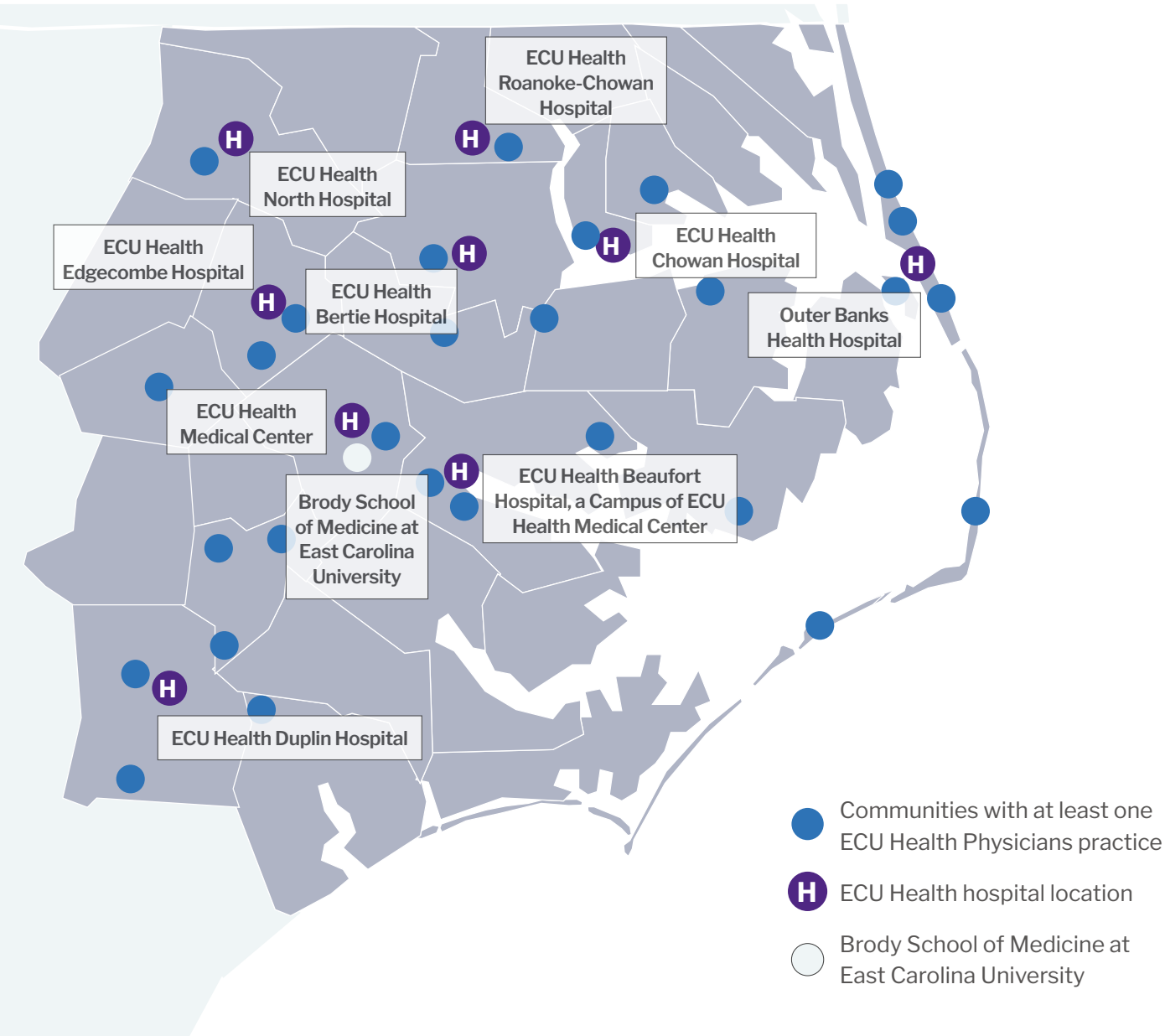
Our system of care today



- 14,000+ team members
- 9 hospitals
- 110+ physician practices
- Outpatient, home health and hospice
- Air and ground critical care transport

- Serving 1.4 million people in 29 counties
- 1/3 of North Carolina
- 1.6 billion in net patient revenue annually
- Integrating with Brody School of Medicine at ECU

Our service area



Service area overview

- Population growth projected at approximately 1 percent per year overall with coastal areas showing double digit population growth over the next five years
- Disease incidence greater than state and national averages and death rates higher than most of North Carolina
- Demand growth in revenue-strong service lines such as cardiovascular disease and surgery
- Expanding retirement and tourism industry
- A few large employers and numerous military establishments
- Growing competition

A system of care at work for you

Hospitals



ECU Health Beaufort Hospital,
a Campus of ECU Health Medical Center
Washington | 252-975-4100



ECU Health Bertie Hospital
Windsor | 252-794-6600



ECU Health Chowan Hospital
Edenton | 252-482-8451



ECU Health Edgecombe Hospital
Tarboro | 252-641-7700



ECU Health Medical Center
Greenville | 252-847-4451



ECU Health Duplin Hospital
Kenansville | 910-296-0941



ECU Health North Hospital
Roanoke Rapids



Outer Banks Health Hospital
Nags Head | 877-876-4321



ECU Health Roanoke-Chowan Hospital
Ahoskie | 252-209-3000



East Carolina Endoscopy Center
Greenville | 252-847-4778



ECU Health Endoscopy Center
Tarboro | 252-563-1036



ECU Health Home Health & Hospice



ECU Health SurgiCenter
Greenville | 252-847-7700



ECU Health Oncology - Kinston
Kinston | 252-559-2201

Code of conduct

Code of conduct

A system of vendor empowerment and accountability

Corporate Compliance hotline 1-888-777-2617

Vendors of ECU Health organizations are expected to abide by a high standard of ethical behavior at all times and must obey the laws and rules that apply.

Health care vendor

A health care vendor is any individual or entity that is paid by a health care organization for goods, capital equipment or services. This includes suppliers, manufacturers, consultants and contractors.

Statement of purpose

This page explains the code of conduct for vendors of ECU Health. It also applies to delivery drivers and personnel directly or indirectly associated with vendors who deliver on behalf of vendors. The code is a guide to help all vendors make sure they conduct official business in a manner that is both lawful and ethical.

Vendors must be sure to understand and follow this code. While it will not cover all situations, it does set standards for some issues.

Vendors who are unsure what rules apply to them should call the ECU Health Corporate Compliance Office at 252-847-0125.

Vendors must also be careful to understand and obey applicable laws including antitrust laws. These are outlined in the vendor relations/COI policy available in PolicyStat on the ECU Health intranet page or by reaching out to a member of the Supply Chain team. Current name of the policy is Conflicts of Interest, ECUH – AC 15. Vendors should be particularly careful not to inadvertently do anything that amounts to fixing prices, limiting competition or dividing up customers or markets.

Vendors should also be careful not to engage in any of the following illegal activities:

Kickbacks - Vendors may not ask for, give, or receive any kind of direct or indirect payment or reward for Medicare or Medicaid referrals.

False claims - Vendors may not make false or misleading claims for services given or received or about people who gave or received services.

Mail and wire fraud - Vendors must not send false claims or statements through the U.S. Postal Service or electronically.

Report any transaction or conduct that may be a violation of federal, state, or local law.

This can be done by: Notifying your immediate supervisor; or contacting the Corporate Compliance Office by telephone, mail or e-mail; or by making a toll-free, anonymous call to compliance hotline at 1-888-777-2617.

Report anything you see or hear that may be a violation of rules or policies dealing with the following:

- Financial records
- Living wills
- Patient care
- Patient privacy
- Personnel issues such as equal employment, sexual harassment, personal conduct
- Personal conduct
- The Fair Labor Standards Act
- Time and attendance

Government laws and regulations

In 1996, Congress passed a law that gave the Department of Justice more authority to track down and punish people who engage in health care fraud and abuse. It also makes persons who violate these laws subject to both criminal and civil penalties. Violation of the Federal anti-kickback statute constitutes a felony punishable by a maximum fine of \$100,000, imprisonment up to 10 years, or both. Conviction also will lead to mandatory exclusion from Federal health care programs, including Medicare and Medicaid. Liability under the Federal anti-kickback statute is determined separately for each party involved. Vendors making false or misleading claims face similar fines and penalties as well as exclusion from federal health care programs.

HIPAA regulations

Congress passed the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 (HIPAA), which provided, among other things, privacy and security standards protecting the confidentiality and integrity of “individually identifiable health information.” HIPAA calls for severe civil and criminal penalties for noncompliance. On the criminal side of things, an individual that causes a breach knowingly or with reasonable cause is subject to up to one year of incarceration – and the penalties accelerate from there.

On the civil side, the penalties for noncompliance are based on the level of knowledge, increasing in severity based on the nature and extent of the violation and the nature and extent of the harm resulting from the violation. There is great incentive to correct violations as soon as feasible, and at least within thirty (30) days.

Vendors are required to comply with ECU Health’s Privacy Policy and procedure expectations.

Stay informed

Call the Corporate Compliance Office with questions about policy, ethics or rules that apply to the following areas:

- Accounting and record keeping
- Antitrust matters
- Billing competition
- Conflict of interest
- Customer and supplier relations
- Discrimination and sexual harassment
- Health and environmental issues
- Patient care
- Patient privacy
- Referrals
- Safety

What happens if you break the rules

Vendors who break our rules or a state or federal law or who fail to follow policy are subject to dismissal from ECU Health facilities and/or prosecution.

Conflicts of interest/ vendor relations

Conflicts of interest

Statement of purpose

This page outlines ECU Health's Policy and Procedure with respect to conflicts of interest by agents, employees, officers, and vendors of ECU Health, to assure that a conflict of interest or the perception of such conflict is avoided in order to maintain the integrity of this institution, to assure that vendors are treated in a fair and equitable manner while limiting vendor access to patient/client care areas and to assure that the academic research and patient/client care activities of the Hospital are not interrupted as a result of vendors visiting the institutions.

For the purpose of this policy, the term agent(s) includes but is not limited to physicians who are acting on behalf of the organization for the purpose of purchasing equipment or supplies.

Policy

Conflict of interest exists when an officer, agent or an employee is in a position to influence any Hospital business transaction, research activity or other decisions in ways that could lead to any manner of personal gain or profit either directly or indirectly for the officer, agent or employee, or for his or her close family members, other than salary from the Hospital, or when the officer, agent or employee divides his/ her loyalties or actions between the Hospital's interests and those of a third party.

All officers, agents and employees of ECU Health who control and manage the affairs of ECU Health, including all individuals working with the Supply Chain Department, must adhere to a strict standard of loyalty and good faith in performing their duties to the health system. All such officers, agents and employees are expected to avoid all situations that present or may present an actual or potential conflict between the officer's agent and employee's personal interests and the best interest of the health system. All officers, agents and employees in the exercise of their administrative authority and in the fulfillment of their duties to the organization are prohibited from acting under any undue influence by individuals who have an actual or potential conflict of interest with the organization. Officers, agents and employees who enter into undisclosed conflicts of interest may be denied opportunities for advancement, dismissed from employment, or disciplined in some other manner, as well as subject to personal liability or criminal prosecution.

The Medicare Anti-Kickback Statute (sometimes called the Fraud and Abuse Statute) permits the imposition of

criminal penalties on anyone who knowingly and willfully pays, solicits, or receives "remuneration" (which includes anything of value), directly indirectly, overtly or covertly, to induce or in return for the referral or arranging for the furnishing of any item or service for which payment may be made by Medicare or a State Health care program. The Statute also covers remuneration paid in return for purchasing, leasing, ordering, arranging for such items or services or recommending any of the foregoing. A violation of the Statute is punishable by a \$100,000 fine or imprisonment for up to 10 years, or both. Violation of the Statute is also grounds for an exclusion of a minimum of five (5) years from participation in the Medicare/Medicaid programs.

While not exhaustive, conflicts of interest include the following:

- Financial interests in, investments in, or indebtedness to actual or potential competitors or third parties who do or seek to do business with the organization, including without limitation contractors, vendors or suppliers.
- Acceptance of commissions, payments, certain gifts or favors from actual or potential competitors or third parties who seek to do business with the organization, including without limitation contractors, vendors, or suppliers.
- Unauthorized disclosure of proprietary or confidential information.
- Use of the organization's facilities, property or proprietary/ confidential information for private gain.

Procedure

1. All officers, agents and employees of the organization (herein collectively referred to as "Individuals" who control and manage the affairs of the organization, including all Individuals working within the Supply Chain Department shall comply with ECUH-ACC15 – Conflict of Interest Policy.
2. Whenever a conflict of interest exists or may appear to arise and is not immediately eliminated, a full disclosure in writing of all relevant facts and circumstances must be made to the Vice President with responsibility over the Individual's department with a copy to the Individual's immediate supervisor. Each such disclosure shall be reviewed to determine whether or not a conflict exists and the necessary corrective action, if any. Decisions as to corrective action shall consider the nature of the conflict, its origin, and the importance or scope of the transactions involved.

Vendor relations

1. All vendor representatives must register in ECU Health's vendor credentialing system. Information regarding where and how to register in this system will be provided to them separately from this handbook. It is the responsibility of the vendor representative to request this information and register. Vendor representatives must satisfy all requirements to register, including agreeing to abide by all policies regarding confidentiality and providing proof of immunization. Vendor representatives must present an immunization record for influenza on a yearly basis to Supply Chain Management.
2. Vendor representatives visiting the organization must check in at their designated stations. Representatives must sign in upon arrival, and sign out at their departure.
3. Representatives approved through ECU Health's vendor credentialing system will each receive a badge upon successful check-in at the sites they are visiting. Details of the approved visit will appear on the badge. Representatives must visibly wear these badges at ALL times while present on ECU Health property. Vendor representatives who are not approved through ECU Health's vendor credentialing system **MUST NOT** go to any department without satisfying all credentialing requirements.
4. If an appointment is scheduled in advance of the visit, the vendor representative or other individuals employed by the organization will follow the same procedure as stated above.
5. The hours of visitation to a facility vary by facility. Please consult with the department you are planning to visit to ensure vendors are allowed and for specific hours of operation.
6. Pharmaceutical representatives/vendors will adhere to the Policy and Procedures established by Pharmacy Services as well as the Conflicts of Interest/Vendor Relations Policy. **AT NO TIME SHALL THEY LEAVE DRUG SAMPLES ANYWHERE WITHIN THE HOSPITAL. Drug and laboratory samples in any ECU Health Affiliated Medical Office practices must be handled according to the policy for those facilities.**
7. No materials (to include equipment) shall leave the organization for return, credit or repair without proper written authorization from Supply Chain. All equipment, supplies, rentals, loaners, and items for product evaluation will be delivered to Supply Chain. No samples will be distributed to the departments except for samples approved by Department Managers with notification to Supply Chain.
8. A vendor may develop additional products ("New Products") that are not listed or included as part of an Executed Agreement. The Parties acknowledge and agree that a Supplier may communicate New Products (and corresponding pricing) to Designated Personnel only. Designated Personnel shall be defined as Supply Chain Management Value Analysis Manager, Supply Chain Management Director, Contracts or Supply Chain Management Administrator. No New Products are to be discussed with medical staff until such time as a Supplier has submitted any New Product for Value Analysis, and said product(s) has been approved for use by Designated Personnel.
9. Vendors cannot present new products or expansion of existing product lines without approval of the appropriate Value Analysis Committee.
10. Purchase orders are required for all purchases. After an order has been issued, all acknowledgments, correspondences, invoices, packing slips, and shipping documents must bear the assigned purchase order number.
11. Service personnel should report any work performed on equipment to the Biomedical Department, Clinical Engineering or Plant Operations. This may include equipment that is serviced under service agreements. If a Supplier has any questions or is unclear, they should check with the CE or Biomedical Department.
12. Parking is available only in the area designated for Vendor parking by each organization. Vendors are not permitted to park in any area which is designed for patient/clients or visitor parking.
13. Vendor Parking Permits – Vendors delivering goods or providing services on campus shall utilize the main loading dock for ECU Health Medical Center. All other vendors may receive a Vendor Parking Permit and are required to park in the A-1 Lot unless otherwise directed by Guest Parking Services.
14. Vendors also must register their vehicle with ECU Health – obtaining a hangtag at a minimum. Consequences for non-compliance can include being ticketed and even booted for non-payment.
15. Vendors can obtain further information by going to the ECU Health Medical Center Parking Office at 1705 O'Hagan Place.
16. Dress Code - Vendors shall abide by the same dress code policy applicable to ECU Health staff, Dress Code ECUH – HR84. Vendor representatives can obtain a copy from their Supply Chain contacts.
17. It is the department manager's responsibility to ensure the vendor representative has complied with this policy and they have completed the proper visitation tag for their area. If the vendor representative is not in compliance, they should be advised to report to the Director of Strategic Sourcing or Director of Value Analysis.

Business courtesies/ relationship with vendors

Business courtesies/relationship with vendors

It is the organization's objective to avoid even the perception of a conflict of interest or other impropriety in order to maintain the integrity of this institution. However, it is understood that there are times when it may be good business practice to offer or accept "business courtesies." The following "business courtesies" are allowable so long as they; maintain, enhance, promote or improve the health and welfare of the organization's patients; are conducted honestly, open and fairly; do not compromise or carry a reasonable risk to compromise patient confidentiality and hospital security; and do not violate the organization's Compliance Program or Code of Conduct:

Sponsorships

• Social gatherings:

Vendors are **prohibited** from sponsoring departmental social gatherings such as holiday parties or departmental dinners at any ECU Health facility or any external location to include a health system employee's residence.

Continuing education

- It is acceptable for vendors to sponsor Continuing Education or other seminars at ECU Health or one of its subsidiaries, as long as **no solicitation occurs, no sales are pending**, and the seminar relates to a subject matter which is a primary benefit to our health system.
- Vendors are **prohibited** from providing continuing education or seminars to ECU Health staff **outside** of a ECU Health facility **without the approval** of the Facility Compliance Officer and the President of the specific ECU Health facility having authority over the staff.
- For continuing education or seminars provided within a ECU Health facility, the vendor **may provide** attendees a meal of nominal value (not to exceed \$25.00 per person). The subject matter must be a primary benefit to the health system. **Managers must complete and maintain educational sign-in sheets** for all educational sessions provided by a vendor in which a meal or anything of value is provided. In addition, vendors must comply with the Sunshine Act, as applicable.

Gifts

- Vendors are **prohibited** from providing gifts, meals, and entertainment of greater than a nominal value to any ECU Health employee. Gifts of nominal value (less than \$25.00) may be **accepted** and **given**, as long as they are reasonable, in good judgment and are intended to establish or strengthen a business relationship. Gifts should be shared within the department. Gifts of nominal value are limited to \$100.00 a year per **individual** aggregate from all vendors. Excessive (over \$25.00) gifts, meals, and entertainment of greater than nominal value may not be accepted **by individuals**. **Excessive gifts, meals, and entertainment of nominal value (over \$25.00) may be accepted by the ECU Health Foundation.**
- Individuals may, **with** Corporate Compliance and the President or CEO approval, provide gifts, entertainment and meals of greater than nominal value to customers, current and prospective business partners and other persons when such activities have a legitimate business purpose and are reasonable and consistent with applicable laws.
- Individuals who provide services on their own time and expense may, with Corporate Compliance and the President or CEO approval, accept reasonable compensation and reimbursement for travel, lodging, and services. These must be genuine services, such as consulting, speaking, and focus groups, and not token arrangements. If providing services on hospital time, the individuals must return any remuneration or reimbursement to the hospital. The individuals **may not** promote vendor services or products and **may not** accept remuneration or reimbursement of expenses if they were chosen because of their affiliation with the hospital when the payment has the appearance or potential to directly or indirectly influence the individual's decision about products or services.

Vendor representative debarment

Vendor representatives who violate the above policy are subject to **debarment from all ECU Health facilities** and the vendor will be contacted in order to request a replacement representative.

Questions about whether or not business courtesies are allowable should be directed to Corporate Compliance for a determination.

Vendor health screens

Vendor health screens

Statement of purpose

To protect patients, staff, and sales representatives or other vendors from the transmission of communicable disease in patient care areas with the organization, including but not limited to, Operating Room, Family Birthing Center, Procedural Labs, Neonatal Intensive Care Unit and Oncology Units.

Policy

Sales representatives or vendors who have contact with patients in any care area must comply with the organization's Occupational Health policies prior to entering these areas.

Please also refer to "Conflicts of Interest/Vendor Relations" policy for further details regarding vendor relations requirements.

Procedure

Before entering any patient care area, sales representatives or vendors must be free of any communicable diseases or infections, have had no recent exposures to a communicable disease, have no open or draining wounds and must be credentialed in vendor credentialing system of the following:

1. PPD skin test or QFG blood test to screen for tuberculosis
2. One adult dose of TDAP vaccination = Tetanus, Diphtheria, Pertussis
3. Immunity to these viral infections: measles, mumps, rubella and varicella (chicken pox) or vaccination records.
4. Annual Influenza vaccination
5. Hepatitis B vaccination is not required but highly recommended

Documentation Required

1. **Tuberculosis Screening**
2 step TB Skin test or QFG Blood Test:
 - a. First test must be placed within 12 months of start date and second test must be placed within 90 days.
 - b. If positive, must show proof of positive history, Chest X-Ray and annual TB signs and symptoms questionnaire.
2. **TDAP vaccination:** must have documentation of one dose. If a penetrating contaminated injury occurs, a Td booster dose will be required if the last TDAP vaccination was given more than 5 years prior to such injury.

3. Measles:

- a. Two doses of vaccine after 1st birthday, or
- b. Positive measles antibody titer.

4. Mumps:

- a. Two doses of vaccine after 1st birthday, or
- b. Positive mumps antibody titer.

5. Rubella:

- a. One dose of vaccine after 1st birthday, or
- b. Positive Rubella antibody titer.

6. Varicella (Chicken Pox):

Any or all situations may apply:

- a. Written documentation of diagnosis by health care provider.
- b. Two doses of Varicella or Zoster vaccine, or
- c. Positive titer.

Non-immune vendors will NOT be permitted in high-risk areas: unless it is documented that they have received two doses of Varicella Vaccine (Varivax), given 4 to 8 weeks apart.

7. Hepatitis B:

Must be offered to those that have reasonably anticipated exposures to blood or other potentially infectious material in the scope of their work.

- a. Positive Titer may be substituted in lieu of vaccines.
- b. Vaccine Declination if offered and not received.

8. Pertussis (Td/Tdap):

- a. One dose required and should replace one Td booster.
- b. If Td is recently given, ok to defer for 45 days.

9. Influenza:

Annual Flu Vaccine or approved exemption is required. ECU Health does not allow for declinations. Companies may manage their own process for religious and medical exemptions.

10. Respiratory fit testing may be required in some areas. For example, N95 fit testing. OSHA requires fit testing specific to ECU Health. There could be variation between different health care systems and being fit tested at one facility may not suffice for ECU Health.

Additional Important Information and Instructions

1. All vendor representatives who visit ECU Health facilities must attest that they are symptom-free when they report to our facilities. Symptoms consistent with respiratory illness may include: chills, cough, fatigue, headache, sore throat, congestion, runny nose, nausea, vomiting, diarrhea, shortness of breath or difficulty breathing, muscle or body aches for unknown reasons, loss of taste or smell, and fever at or greater than 100 degrees Fahrenheit.
2. Vendor representatives may NOT enter an ECU Health Facility unless they have been tested for COVID-19 and Influenza and the results of their tests are negative. Note that this applies ONLY during peak flu season, which is defined as November 1st through March 30th. Vendor representatives who have a negative test result and are still experiencing symptoms MUST wear a mask at all times while on site.
3. Vendor representatives who have potentially been exposed to either Influenza, RSV, or COVID-19 MUST get tested and have a negative test result for the suspected illness in order to enter an ECU Health facility. If the test is negative, the vendor representative MUST wear a mask while onsite at any ECU Health facility for at least 5 days after exposure.
4. Vendor representatives who were recently ill MUST be symptom-free for at least 24 hours before coming onsite at an ECU Health facility.
5. Vendor representatives who have been on a cruise ship, or travelled either domestically or internationally to or from a location with a widespread community outbreak of any type of illness (including Ebola, Lassa Fever, Marburg, MERS, SARS, COVID-19, Smallpox, and Tuberculosis) may NOT enter an ECU Health facility until after they discuss their recent travel with ECU Occupational Health. Please call 252-847-7609 to set up an appointment with ECU Occupational Health. Once Occupational Health has approved a vendor representative to enter our facilities, they may proceed to the check-in station at the facility they need to access.

Resources

ECU Health Occupational Health, located at 651 Service Drive; Greenville, NC 27834, can offer the required services for a fee. For more information, please call 252-847-7609. Appointments are recommended but we will accommodate walk-ins as staffing allows.

Key safety information

Emergency and ECU Health Police telephone numbers

Entity	Emergency Number
Off-campus sites	911
The Outer Banks Health Hospital	252-449-5911 (Operator) 252-449-5800 (ECU Health Police)
ECU Health Beaufort Hospital	“0” (Operator) 252-558-8364 (ECU Health Police)
ECU Health Bertie Hospital	“0” (Operator) 252-794-6687 (ECU Health Police)
ECU Health Chowan Hospital	“0” (Operator) 252-482-6971 (ECU Health Police)
ECU Health Duplin Hospital	5555 (Operator) 910-372-3872 (ECU Health Police)
ECU Health Edgecombe Hospital	252-641-8555 (Operator) 252-641-7700 (ECU Health Police)
ECU Health Medical Center	252-847-4333 (Operator) 252-847-9111 (ECU Health Police emergency) 252-847-8568 (ECU Health Police non-emergency)
ECU Health Medical Group	911
ECU Health Belhaven Multispecialty Clinic	911
ECU Health North Hospital	252-535-8011 (Operator) 252-535-8499 (ECU Health Police)
ECU Health Roanoke-Chowan Hospital	252-209-3000 (Operator or ED after hours) 252-642-5262 (ECU Health Police)
ECU Health SurgiCenter	252-847-9111 (ECU Health Police emergency) 252-847-8568 (ECU Health Police non-emergency)

Environment of care

Fire safety

Fire is any situation where flame, visible smoke, or a strong smell of smoke is observed. Every ECU Health facility has a fire plan to assure orderly and safe responses to fires that may occur.

You need to know:

- The location of fire pulls, extinguishers, and medical gas shut-off valves that are closest to you
- How to use a fire extinguisher
- Your evacuation route and proper evacuation techniques (always use stairs instead of elevators)
- Know how to use the equipment in your facility
- Your facility and departmental fire and evacuation plans

In the event of a fire or when the sprinkler or smoke detector is activated, the location of the fire will be announced overhead as Facility Alert + Fire Alarm Activation + Location and will be repeated three times.

Some clinics and off-site buildings evacuate, but hospitals try to protect in place. Large ECU Health buildings are designed to compartmentalize when alarms activate. With doors closed, buildings become a series of self-contained compartments.

RACE and PASS

In the event of a fire, follow the RACE procedure.

- R** Remove all persons in danger
- A** Activate the alarm and dial 7-4333 (the emergency operator number)
- C** Contain the fire
- E** Extinguish if possible

General purpose (dry chemical) extinguishers are placed in most locations since they are useful for treatment of all fires.

To use a fire extinguisher, follow the PASS procedure.

- P** Pull pin
- A** Aim extinguisher at base of the fire
- S** Squeeze trigger
- S** Sweep hose side-to-side

Hazardous material

The Right To Know law was passed to make sure that people who work with hazardous materials have information about that material available to them.

Review Safety Data Sheets (SDSs) on MSDS Online

Know physical and health hazards of chemicals in your work area

Know how to protect yourself from these hazards

Follow the four-step RAFT procedure for a hazardous materials spill:

- R** Remove all people in danger
- A** Avoid contact with the spill
- F** Find the MSDS
- T** Telephone the switchboard at ext. 7-4333 (the emergency operator number)

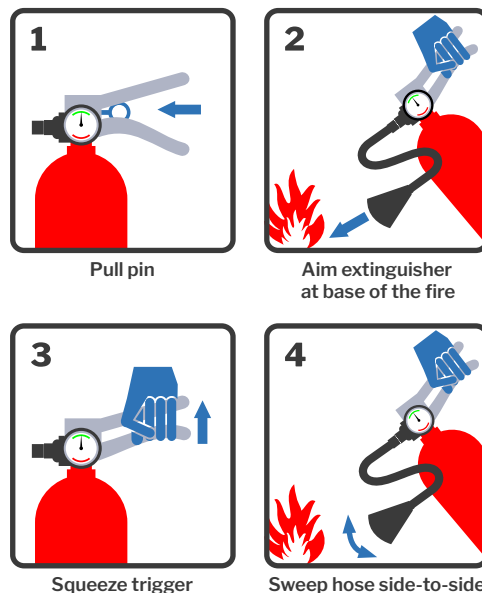
Radiation and MRI safety

Posters, signs, and labels let you know if a source of radiation is nearby.

If you have any concerns or questions, you may contact your Radiation Safety resources. Know who the Radiation Safety Officer is at your facility.

Magnetic resonance imaging (MRI) utilizes a powerful magnetic field to produce diagnostic images.

The magnet is ALWAYS ON! It can pull items from your hands or out of your pockets. Injuries and fatalities have occurred – be mindful.



Emergency operations

Each entity has an Emergency Operations Plan to handle any situation that overtaxes or disrupts the entity's ability to provide patient care and a safe environment for patients, staff, and visitors.

Please consult your entity's Emergency Operations or Emergency Management plan for detailed instructions for how you should respond during the following types of events:

- Mass Casualty
- Medical Decontamination
- Surge Capacity
- Utility/Technology Interruption
- Weather

Some entities may announce individual alerts for each type of emergency event. Some may announce Facility Alert + Emergency Operations Plan Activation + Descriptor (may have levels) instead.

Electrical power failure

In the event of a utility interruption, emergency power systems in hospitals will automatically restore electrical power to all essential electrical circuits within approximately 10 seconds.

Ensure only priority patient care equipment is plugged to red outlets.



White Outlets = normal power

Red Outlets = emergency power for essential devices only



Security alerts

ECU Health entities have policies and procedures for handling security alerts.

Police policies provide detailed instructions for how to respond during the following events:

Missing Person/Abduction

The plain language emergency alert is Security Alert + Missing Person + Descriptor + Location.

For example: "Security Alert + Missing Person + 2-year-old male with blonde hair wearing blue pajamas + Labor and Delivery".

Armed Intruder/Shooter/Hostage Situation/Threat of Violence

The plain language emergency alert is Security Alert + Active Threat + Descriptor + Location.

For example: "Security Alert + Active Threat + Shooter - white male wearing jeans and a white shirt + Hospital Lobby."

Bomb Threat

The plain language emergency alert is Security Alert + Suspicious Package + Descriptor + Location (if known).

Medical alerts and the ERT

The emergency response team (ERT) provides immediate assistance to an individual in distress.

Refer to Entity Emergency Telephone Numbers list.

Code Blue

A Code Blue Medical Alert provides rapid assistance for medical emergencies and incidents including cardiac arrest and respiratory arrest.

Refer to Entity Emergency Telephone Numbers list.

Infection control

Everyone at ECU Health has a role in eliminating the spread of communicable diseases, drug resistant organisms, and preventing hospital-acquired infections.

Hand hygiene is the #1 way to prevent the spread of infections and it is everyone's responsibility.



Always use facility-approved lotions in clinical areas. Never top-off any lotion or soap container.

If you are feeling ill, STAY HOME for the sake of patients and team members. It seems like we should try to get out of bed and be a team- player...

BUT remember your greatest contribution that day will be the spread of your germs, not your dedication. During "flu season" many respiratory viruses are circulating in the community. Cough etiquette (coughing in your elbow or arm, or using tissues) helps prevent the spread of these viruses.

Fingernails

Long fingernails or fingernails with enhancements have been associated with outbreaks of health care associated infections (HAI). Health care team members in the following categories may have increased risk of transmitting health care associated infections related to fingernail length, maintenance, integrity, and use of artificial enhancements:

- All staff who have direct patient contact or contact with the patient environment; this includes all staff who enter the patient room for any reason
- All direct patient caregivers, to include Licensed Independent Practitioners (LIP), volunteers, students, and contract workers
- All surgical personnel
- All staff involved in cleaning, disinfection, and sterilization processes
- All staff involved in food preparation and delivery
- All staff who prepare products or medications for patients
- Keep nails clean and short (less than ¼ inch long). Short is also defined as holding the hand palm up at eye level and not being able to see the nail extend beyond the fingertip.
- Nail polish or products of any kind must be maintained with no chips, cracks or gaps between cuticle and polish or products. These products must not extend the length of the natural nail. Nail attachments or extensions are prohibited.



Appropriate Personal Protective Equipment (PPE) must be used when handling patients.

Cleansing, disinfection, and bloodborne pathogens

Remove soil and debris to keep surfaces and equipment clean. Then disinfect to kill the germs that cause infections. Disinfectants must stay wet for the period of time defined on the label in order to kill germs. Know how long the disinfectant you are using must stay wet and re-apply as necessary.

Inspect all supplies, equipment, and devices for signs of wear, tear, breakage, contamination, or moisture that can affect their integrity and safety. If it does not look right, investigate further.

Most fluids found in the body are a possible risk for exposure to pathogens such as human immunodeficiency virus (HIV) or hepatitis.

Exposure happens when:

Blood or body fluid comes into contact with broken skin or mucous membranes.

A contaminated sharp object penetrates the skin.

The Bloodborne Pathogen Exposure Control Plan defines job categories that are considered at-risk for exposure.

Standard precautions

Take standard precautions to protect yourself with all patients. When exposure to blood and body fluid is possible, use a fluid resistant gown (blue and white), mask, eye protection, gloves, and perform hand hygiene.

To protect your mucous membranes, do not eat, drink, apply cosmetics, lip balm, or handle contact lenses in areas where patient care is provided, or patient care items are located.

Did you know that not all waste with blood and body fluid goes in the red trash? Place disposable medical waste in the red trash when blood or body fluid drips from the item when it is squeezed or is caked on the item when it is dry. Do not throw linens in the red trash, even if contaminated.

Place all used linen in designated linen hampers with plastic bags.

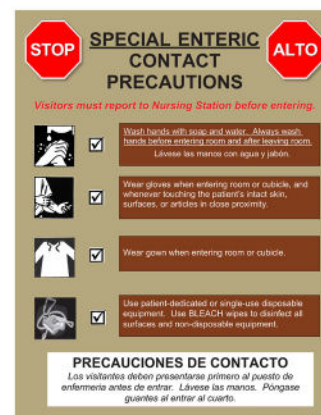
If you are exposed to blood or a body fluid, wash the affected area and notify your immediate supervisor.

Follow-up with Occupational Health as soon as possible.

Communicable diseases

Keep patients, families, visitors, and yourself safe! Early detection of active communicable diseases is critical to stopping transmission.

Implement the following isolation precautions according to symptoms:



Special considerations are required for Airborne Infection Isolation.

Additional information

Cultural competence

Culture is a fundamental part of our lives. It is a total way of living that includes values, beliefs, standards, customs, language, thinking patterns, behavioral norms, and communication styles. Culture is influenced by family, the media, schools, religious institutions, history, experiences, and other factors.

Cultural competence in health care describes the ability to provide quality care to patients and others with diverse values, beliefs, and behaviors. In essence, tailoring health care delivery to meet patients' social, cultural and linguistic needs.

In a culturally competent environment, patients and families are better able to communicate their unique health care needs. This enhances the effectiveness of the health care experience.

Cultural insensitivity usually isn't intentional. It is often caused by not understanding another person's frame of reference. Sometimes, insensitivity is a result of fear or denying differences by viewing everyone as the same. At other times, insensitivity may be due to time pressures to complete tasks and move on.



Harassment, discrimination and workplace bullying

Harassment is unwelcome behavior that is both subjectively offensive (the victim is offended) and objectively offensive (a reasonable person would also be offended) and directed at a legally protected characteristic.

Harassing behaviors can take many forms:

- Unwelcome, offensive comments about appearance, dress, or speech
- Unreasonable distribution of workload, schedules, and personnel actions
- Other physical or verbal abuse directed at a protected characteristic

Victims of harassment don't necessarily have different legally protected characteristics than the harasser. A good starting point for relevant information is the Workplace Harassment and Discrimination policy, ECUH-HR31.

While certain types of harassing behaviors violate ECU Health policy and may subject the harasser to corrective action up to and including separation from employment, they may not necessarily count as illegal harassment.

Harassment is illegal when it is so severe and pervasive (widespread) that it becomes a condition of employment.

Discrimination

Discrimination is similar to harassment, but it is different. **Harassment** is related to individual behaviors and conduct. **Discrimination** is related to employment actions and the provision of equal employment opportunity such as:

- Employment opportunities
- Benefits or privileges
- Work conditions
- Evaluation standards

Discrimination of this kind is prohibited by a variety of federal, state and local laws, including Title VII of the Civil Rights Act of 1964, the Age Discrimination Act of 1967, the Americans with Disabilities Act of 1990, and the Genetic Information Nondiscrimination Act of 2008.

Workplace bullying

Workplace bullying is repeated inappropriate behavior conducted against others in the course of employment and is prohibited under ECU Health's anti-harassment policies.

Verbal bullying - Slandering, ridiculing or maligning a person or his or her family; persistent name calling that is hurtful, insulting or humiliating; using a person as the butt of jokes; abusive and offensive remarks.

Physical bullying - Pushing, shoving, kicking, poking, tripping, assault or threat of physical assault, damage to a person's work area or property.

Gesture bullying - Nonverbal threatening gestures; glances that can convey threatening messages.

Exclusion - Socially or physically excluding or disregarding a person in work-related activities.

Workplace bullying is unacceptable and prohibited under **ECU Health's Anti – Harassment policies.**

Cybersecurity vendor risk assessment

In a perfect world, all vendor partnerships would automatically be safe and easy to navigate.

Even the most diligent and conscientious vendors introduce some elements of risk into an organization. In some cases, the risk uncovered may be minor enough not to warrant any action. On the other hand, significant risk may prevent a vendor partnership from moving forward due to the likelihood or impact of the risk occurring.

Key Objectives of Our Vendor Risk Assessment:

1. Identify Risks
We assess the potential risks associated with the vendor's products, services, or access to sensitive information. This includes evaluating any cybersecurity vulnerabilities, data privacy concerns, or operational risks.
2. Evaluate Compliance
Vendors must comply with all relevant laws, regulations, and industry standards, such as HIPPA and cybersecurity frameworks (e.g., NIST, CIS Controls).
3. Assess Cybersecurity Practices
We review the vendor's cybersecurity practices, including their ability to detect, respond to, and mitigate cyber threats. This includes evaluating their data encryption methods, vulnerability management, incident response capabilities, and access controls.
4. Ongoing Monitoring
Risk assessment is not a one-time event. We conduct periodic reviews of our vendors' performance, compliance, and security posture throughout the duration of our relationship.
5. Transparency and Accountability
Vendors are required to provide accurate and timely information about their security practices and to cooperate with our assessment process. This includes completing questionnaires, providing necessary documentation, and undergoing audits as required.

Vendor Responsibilities:

- Complete Risk Assessment Questionnaires: Vendors are expected to submit detailed responses to our risk assessment questionnaires, covering topics such as data security, regulatory compliance, and operational policies.
- Provide Security Documentation: Vendors may be required to share security certifications, audit reports, and other relevant documentation that demonstrates adherence to best practices.

- Mitigate Identified Risks: If any risks are identified during the assessment process, vendors must work with us to mitigate those risks promptly.
- Ongoing Compliance: Vendors must maintain ongoing compliance with our security and regulatory standards throughout the partnership.

By adhering to our Vendor Risk Assessment process, vendors can contribute to maintaining the security and integrity of our operations, as well as ensure that both parties meet shared security and compliance goals.

Please inquire from your ECU Health Business point of contact if you need to go through a vendor assessment.

Insurance

Vendors are expected to maintain appropriate levels of insurance, including but not limited to Workers' Compensation and D&O.

Reporting complaints

Per the policy - "Any event involving workplace aggression, regardless of the urgency or nature of the matter, shall be reported by using the **Reporting Workplace Aggression Tool** located on the ECU Health intranet on the Resources tab or by calling the TELL US NOW line at **252-847-8355**."

Report harassment, discrimination, and bullying behavior to supervisors, managers, administrators, Human Resources, the Office of Audit and Compliance, or the Office of General Counsel.

ECU Health takes all allegations seriously and requires investigation of each report. All reports and investigations are handled as confidentially as possible. Investigations will be conducted by Human Resources, the Office of General Counsel, or the Office of Audit and Compliance.

Reporting harassment, discrimination, and workplace bullying or participating in an investigation is a legally protected activity.

Team members who engage in substantiated acts of harassment, discrimination, or workplace bullying, and individuals found to have knowingly made false accusations of such behaviors, will be subject to corrective action up to and including separation from employment, in accordance with ECU Health's progressive Corrective Action procedure and the Collaborative Culture of Safety, as outlined in the **Performance and Behavioral Based Expectations policy**.



2100 Stantonsburg Road | PO Box 6028
Greenville, NC 27835-6028
252-847-4100 | ECUHealth.com