

OREGON STATE HOSPITAL

PORTLAND – SALEM

POLICIES AND PROCEDURES

SECTION 8: Safety, Security, Emergency Management

POLICY: 8.007

**SUBJECT: Employee, Patient, and Visitor
Identification**

**POINT PERSON: BOB SPINUZZA
INTERIM DIRECTOR OF SECURITY**

**APPROVED: GREG ROBERTS
SUPERINTENDENT**

DATE: February 25, 2013

I. POLICY

A. An Oregon State Hospital (OSH) identification card shall be issued to each employee, volunteer, contractor, vendor, patient, and visitor as defined by this policy and procedure. The identification card shall be the property of OSH, and shall be returned to the appropriate supervisor upon request, and at termination of employment, contract assignment, or services with Oregon State Hospital.

1. It shall be the responsibility of the person issued the card to ensure that they are in compliance with this hospital policy. No person required to possess and display a proper identification card shall be admitted to or released from a secure OSH unit/treatment area who does not possess and display a proper identification card, unless either specifically and directly exempted by the Superintendent, or in the case the individuals are emergency personnel (fire, police, emergency medical technicians [EMTs]) responding to an emergency. OSH identification cards may be used only while the holder is conducting official hospital business.

2. All persons issued an OSH identification card shall be required to possess and display the identification card when on Oregon State Hospital grounds - face forward, above the waist. No part of the card may be covered, obstructed from view, or defaced in any way.

The identification card shall not be worn with other types of identification badges or reference cards unless approved by hospital administration.

3. The Standards and Compliance Department shall distribute annual cards which shall be attached to each employee's identification card

and worn at all times. These annual cards shall contain reminders related to accreditation standards; OSH mission, vision, and values statements; National Patient Safety Goal information; or other pertinent information that may change from year to year. The content of these annual cards shall be approved by the OSH Quality Council and OSH Superintendent's Cabinet. Employees are required to turn in these cards to the Communication Center, along with their photo ID badges, if they leave employment at OSH.

- B. Failure to comply with this policy and procedure may be grounds for disciplinary action.
- C. The Security Director or their designee shall be the Identification Card Coordinator for both Salem and Portland campuses. The Identification Card Coordinator shall be empowered to maintain supplies to carry out the provisions of this directive. Other hospital staff may be assigned to assist the Identification Card Coordinator.

II. DEFINITIONS

- A. "Contractor" means any person employed under a personal services contract with Oregon State Hospital or the Oregon Health Authority (OHA) who requires entrance into the secure perimeter or an OSH building that houses a treatment unit, e.g., interpreters, agency nursing staff.
- B. "Employee" means any person employed full-time, part-time or under temporary appointment at OSH.
- C. "Official Visitor" means any person designated by the Superintendent of Oregon State Hospital or designee, e.g., elected or appointed government officials, The Joint Commission (TJC) Surveyor, Centers for Medicare and Medicaid Services (CMS) Surveyor, Disability Rights Oregon, etc.
- D. "Patient" means any person who is receiving care and treatment at OSH.
- E. "Staff Visitor" means any person visiting a staff member of OSH.
- F. "Visitor" means any person approved to visit a patient of OSH for social or therapeutic reasons.
- G. "Volunteer" means any person approved by OSH Volunteer Services who donates his/her time and effort to enhance the activities and programs at OSH.

- H. "Vendor" means any person employed by an outside company who is under contract to OSH to provide a service, and who requires admission into OSH departments and programs for the purposes of providing that service, and requires entrance into a secure perimeter or an OSH building that houses a treatment unit, e.g., vending machine workers.

III. PROCEDURES

- A. Any employee/volunteer issued an OSH identification card shall be responsible to protect the identification card from damage, and prevent its theft or misuse.
- B. The Identification Card Coordinator shall maintain, in secure storage, a sufficient supply of blank proximity cards and identification card printer film.
- C. Staff Identification Cards
1. All employees shall be issued an identification card with accessibility and a dark blue border.
 2. Each new employee shall be:
 - a. Scheduled for identification card processing with the Identification Card Coordinator or designee; and
 - b. Provided instructions on the proper use of the identification card by the Education and Development Department during New Employee Orientation.
 3. The completed identification card shall be issued to the employee before completion of New Employee Orientation.
 4. Employees must request a new photograph identification card if their physical appearance changes substantially, e.g., grows a beard, shaves a beard, etc., the OSH identification card is incorrect as a result of a change in name or assignment, or the card is lost or stolen.
 5. Employees are strictly prohibited from lending/borrowing identification cards.
- D. Volunteer Identification Cards
1. All volunteers shall be issued an identification card with a green border.

2. It is the responsibility of the Director of Volunteer Services or the Education and Development Department New Employee Orientation Coordinator to request a picture identification card for volunteers.
3. If it is determined that a volunteer is in need of a proximity card for access to the secure perimeter, a request should be sent to the Director of Security or designee for review and approval.
4. Volunteers issued a non-photograph identification shall be required each time they report to the hospital to sign in at the Communications Center and sign for an identification card after presenting a photograph identification, e.g., drivers license, state identification card, etc., before a green identification card is issued. At the end of the volunteer work, the volunteer shall be required to check in with the Communications Center, turn in the identification card, and sign out.
5. Communications Center must verify that a person is an approved volunteer through a master list of approved volunteers that shall be provided to the Communications Center for verification by the Director of Volunteer Services monthly before issuing the card or allowing the person access to hospital facilities.

E. Patient Identification Cards

1. Each patient shall be issued an identification card with no accessibility and have a purple background color.
2. New photograph identification cards shall be prepared for patients on the day of admission, and when the patient's appearance is altered, e.g., grows a beard, shaves a beard, etc.
3. The Identification Card Coordinator or designee shall be responsible to ensure that an OSH identification card is made for any patient admitted.
4. If the identification card is lost, stolen, or damaged beyond use, the Communications Center shall be notified immediately.
 - a. Upon receipt of the patient badge request, the Identification Card Coordinator or designee shall make arrangements to replace the photograph identification card within 24 hours from the date of the request. Requests over a weekend of holiday may take longer to reproduce.

- b. The unit shall submit a patient ID request form and forward it to the Communications Center with, "Attention Identification Card Coordinator" (see Attachment A). If a new photo needs to be taken, a security tech shall be assigned to take and process the photo.
- c. A maximum of five temporary patient badges shall be maintained on each unit to be made available to patients who are awaiting replacement badges. If replacement temporary patient badges are needed, the unit shall notify the Identification Card Coordinator.

5. All OSH patients are required to wear the identification when:

- a. Leaving the secure perimeter of a unit with the Forensic Program and Adult Treatment Services (ATS) Program;
- b. On the grounds of OSH.
- c. Patients who are participating in an unsupervised activity, including passes, placement visits, etc., off grounds of OSH must carry their identification cards on their person.
- d. During a supervised activity off OSH grounds, the staff person present must carry the identification card.

6. When not in their possession, the patient identification cards shall be stored in a secure area on the unit specified by the Nurse Manager. The Geropsychiatric Treatment Services unit staff shall keep patients' identification cards at all times unless the patient is able to keep their own card;

7. As is required of employees and volunteers, staff shall be expected to arrange for a patient to be re-photographed if the patient's personal appearance changes substantially.

F. Visitors

- 1. OSH visitors, including staff visitors, shall be issued an identification card with no accessibility and red coloring on the lower half, with no photograph. The card shall indicate, "Oregon State Hospital Visitor."
- 2. It is the responsibility of each program director and department head or designee to provide the Communications Center with a written notice of all persons approved to visit a patient, and to advise the

Communications Center, in writing, of any changes to a patient's approved visitor list.

3. Minors shall require no identification other than the assurance of the accompanying adult that the child is the person who has been approved to visit. Documentation in the form of a waiver signed by the parent or legal guardian shall be kept on each unit.
4. All OSH visitors, other than official visitors, shall check in at the Communications Center.
5. Communications Center staff shall:
 - a. Verify that the person is approved to visit;
 - b. Verify the visitor is who they claim by requiring the visitor to present a valid form of photo identification (driver's license, etc.);
 - c. Require the visitor to sign in and out on the visitor's log;
 - d. Issue the visitor a visitor identification card; and
 - e. Direct the visitor to the reception area in the appropriate building.
6. Special visits by persons not on an approved list may be approved only by the attending Physician, Physician on Duty (OD), Program Director or designee.
7. Communications Center staff in Salem/Reception Desk staff in Portland shall notify the appropriate unit that an approved visitor is on the way.
8. Visitors must be fully clothed in a manner which is not likely to provoke complaints from other patients, other visitors, or staff. Communications Center staff in Salem/Reception Desk staff in Portland may deny visitation if visitors are not deemed to be appropriately attired (See OSH Policy and Procedure 8.026, *Visitors*).
9. Communications Center staff in Salem, or Reception Desk staff in Portland, are responsible to assess visitors for intoxication or being under the influence of substances. Visitors believed to be intoxicated or under the influence shall not be allowed to visit.

10. Visitors shall not be allowed to enter or exit the secure perimeter until and unless they are under OSH staff escort. Visitors must be escorted from and to the secure perimeter gate in the reception area by unit staff, and remain under staff supervision while inside the secure perimeter. The degree of supervision applied to each visitor shall be determined by the staff based on the status of the patient and the assessed potential for the visitor to cause a security problem.
11. It is the responsibility of the escort of patient visitors, prior to entering a secure area, to perform the necessary security procedures to ensure the visitor is not in the possession of any unauthorized item. Visitor's purses, handbags, and coats shall be secured in visitor lockers outside the secure area. Communication Center shall determine whether items brought in by a visitor are allowed on the assigned unit by verifying it against the contraband list approved for that unit. Controlled gates/doors to a secure area shall not be activated until the Communications Center has been assured by escort staff that these activities have been performed.
12. Upon conclusion of a visit, security or unit staff shall notify the Communications Center by telephone/two-way radio that the visitor is cleared to leave. The visitor identification card shall be retrieved by unit staff and returned to the Communications Center via interdepartmental mail.
13. Visitors for staff may visit only in non-patient care areas. They may not visit any area inside the secure perimeter.

G. Official Visitors

1. All official visitors in Salem shall check in at the Communication Center. Official visitors shall not be issued identification cards.
2. Official visitors shall be allowed to enter a secure perimeter only under staff escort but must remain under staff escort at all times while in the secure perimeter.
3. It is the responsibility of the escort, prior to entering the secure area, to perform the necessary security procedures to ensure the official visitor is not in the possession of any unauthorized item.
4. If an official visitor has been approved access to more than one unit, they need not return to the reception area until the work is completed. Escort responsibility may be transferred between staff from different units.

5. Staff that supervise and escort official visitors who possess tools of the trade or other items of contraband shall adhere to OSH Policy and Procedure 8.024, *Tool/Sharp Security*.
6. Official visitors shall not be allowed to exit a secure perimeter unless they are under escort and the Communications Center in Salem, or unless the Reception Desk in Portland is notified via radio by the escort staff that the official visitor is cleared to exit.

H. Contractors and Vendors

1. Contractors and vendors shall check in at the Communications Center in Salem, or the Reception desk in Portland, and shall be issued a temporary contractor / vendor badge.
2. Contractors and vendors shall be escorted while inside the secure perimeter or patient care area and must remain under staff escort at all times.
3. It is the responsibility of the escort to perform necessary security procedures to ensure the contractor/vendor is not in possession of any unauthorized item. If the contractor/vendor requires access to more than one treatment area, they need not return to the Communications Center. Escort responsibility shall be transferred between staff from different units.
4. Independent clinical or administrative contractors, long-term agency nurses, interpreters, or OHA employees who regularly work at OSH, or have assigned duties related to hospital operations, may be issued a staff or contractor identification card with picture, and do not require escort. The request shall be sent to the Director of Security or designee for review and approval.

I. Replacement

1. Lost or stolen identification cards shall be reported to the Communications Center in Salem/Reception Desk in Portland immediately. Any OSH identification card holder shall complete the "Loss of Keys Identification Badge" report. (See Attachment B.) The card holder must supply a copy of the incident report that was submitted to the report.
2. Staff persons requesting replacements for lost or stolen identification cards shall be charged a \$10.00 fee, payable to the Business Office prior to obtaining the card. A request from the Business Office shall be attached to the form, noting payment was made.

3. Any OSH identification card holder shall return the previously issued OSH identification card (unless lost or stolen) before receiving a replacement identification card. The Identification Card Coordinator or designee will verify all information is correct before re-issuing the badge.

J. Suspension

1. The OSH Superintendent or designee may suspend the authorization to use the OSH identification card at any time. In the event this occurs, the Communications Center in Salem/Reception Desk in Portland shall be notified immediately to deactivate the badge in question.
2. All identification card holders notified verbally and/or in writing of the suspension of their OSH identification card shall immediately surrender or return the identification card to the OSH Communications Center in Salem or Reception Desk in Portland.

K. Temporary Staff Badges

1. Staff that come to work, but do not have their regular badge can request a temporary badge. Temporary badges are only issued for a period not to exceed 24 hours in duration. Staff must sign in and out at the Communication Center and return the badge at the end of their shift. Loss of a temporary badge will cost \$10.00 per badge. In the event the badge is not returned, the Director of Security shall contact the employee's supervisor.
2. Staff who lose or misplace badge can get a temporary badge issued during the time they are waiting on their new badge. The temporary badge will only be valid during the time to replace the badge. Employees shall submit all of their documentation to the Identification Card Coordinator within 7 calendar days of loss. (See Section I. Replacement Number 1-2.)

IV. REFERENCES

OSH Policy and Procedure 8.032, *Access to Patient Care Areas*
OSH Policy and Procedure 8.026, *Visitors*

Replaces Oregon State Hospital Policy and Procedure 8.007, *Employee, Patient and Visitor Identification*, dated 5/30/2006.