

SOUTH TEXAS VETERANS HEALTH CARE SYSTEM

HOUSESTAFF MANUAL

South Texas Veterans Health Care System

Audie L. Murphy VA Hospital and Clinics

Published by the

Office of the Associate Chief of Staff for Education

July 2014

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WHO IS ELIGIBLE FOR CARE?

Any person who served on active duty other than for training purposes, and received an honorable discharge, is eligible to apply for medical benefits through the Department of Veterans Affairs (VA). Some restrictions apply to those who entered active duty after September 7, 1980, and who did not complete 24 continuous months of active service. The Medical Administration Service (MAS) Eligibility Unit should be contacted at 210-617-5184 to determine proper eligibility. Non-service connected Veterans and those without statutory eligibility must provide income and net worth assessments on an annual basis and may be assessed a co-payment for care. The MAS staff can provide proper information regarding these charges. *The Veterans you are treating have earned their medical care through service to our country.*

"...to care for him who shall have borne the battle and for his widow, and his orphan..."
Abraham Lincoln, March 1865

BRIEF HISTORY AND OVERVIEW OF THE SOUTH TEXAS VETERANS HEALTH CARE SYSTEM

The Department of Veterans Affairs South Texas Veterans Health Care System (STVHCS) was created on March 17, 1995 with the integration of the Audie L. Murphy Memorial Veterans Hospital, San Antonio and the Kerrville VA Medical Center, Kerrville, TX. The system is comprised of two divisions referred to as the Audie L. Murphy VA Medical Center (VAMC) and the Satellite Outpatient Clinic Division. The STVHCS is part of the Veterans Integrated Service Network 17 (VISN 17), also known as the VA Heart of Texas Health Care Network.

Graduate Medical Education residencies are overwhelmingly based within the Audie Murphy VAMC as well as the Frank Tejada Outpatient Clinic (a member of the Satellite Outpatient Clinic Division). The Audie L. Murphy VAMC, named after the nation's most decorated World War II hero, began operations in October 1973. Satellite clinics are located in Kerrville (1947), San Antonio (1946), South Bexar County (1996), Victoria (1989), Harlingen (2004), north suburban San Antonio (North Central Federal Clinic, 2006), northwest San Antonio (Shavano Park, 2010), and near northwest San Antonio (Balcones Heights, 2010). Community-Based Outpatient Clinics (CBOCs) are located in Bishop (1998), Uvalde (1999), New Braunfels (2001), Seguin (2005), and four locations [with WellMed] in San Antonio (2000). These CBOC's are contracted to provide primary care services to veterans closer to their home or work.

The STVHCS operates as a single integrated system that provides a full continuum of care. The satellite clinics act as the first point of entry for many veterans. The clinics offer primary care and some specialty services while sharing resources with each other and their respective communities. When required, veterans are referred to the Audie L. Murphy VAMC for specialty care where they receive medicine, surgery, mental health, rehabilitation, spinal cord injury, and long-term care services.

The STVHCS is transitioning from a hospital-based system of care to a more efficient health care system rooted in primary and ambulatory care. To facilitate this transition, the STVHCS activated the Primary Care/Managed Care Product Line in July 1997. The mission of the Primary Care/Managed Care Product Line is to improve the health of patients by providing accessible, comprehensive, continuous, coordinated, and cost-effective care. The PACT (Patient-Aligned Care Teams; the VA's PCMH program) has been generated out of this effort and is our system of engaging our patients in comprehensive care.

The primary care team approach ensures improved continuity of care; access to care, supervision of care by senior physicians, and superior medical education, while facilitating fundamental health care research that will provide a basis for improving patient outcomes. The Primary Care/Managed Care Product Line provides unique opportunities and challenges to Housestaff to become active participants on the cutting edge of health care transformation.

CHAPTER 1--HOUSESTAFF PROCESSING & POLICIES

All Housestaff rotating or on-call at the VA are appointed by the Office of the Associate Chief of Staff for Education (ACOS/E) prior to their rotation at the VA. Only Housestaff so approved are allowed to see patients at the VA. Proper appointment is necessary for obtaining coverage under the Federal Tort Claims Act, for your protection. The Education Office is located on the 3rd floor in Room D317.2 in the Audie Murphy VA Hospital. The telephone number is 210-617-5109.

The UTHSCSA Program Director will certify, in writing prior to appointment, that residents meet the education, credentialing, and program requirements established by UTHSCSA in the applicable Accreditation Council for Graduate Medical Education (ACGME) accredited training program. Housestaff are responsible for providing documentation to support this statement—and credentials will be verified.

The ACGME accredits RESIDENCY TRAINING PROGRAMS, upon recommendation of the appropriate Residency Review Committee (RRC). Housestaff appointments at Audie Murphy are limited in duration to the minimum number of years required by the various specialty and sub-specialty boards for admission to their certifying examinations. Residents electing sub-specialty training usually move directly from the primary into the sub-specialty program, and they require re-approval at ALMD for this further on-site training.

RESIDENT SUPERVISION

Careful supervision and observation are required to determine the trainee's abilities to perform technical and interpretive procedures and to manage patients. Although they are not licensed independent practitioners, trainees must be given graded levels of responsibility while assuring quality care for patients. Supervision of trainees should be graded to provide gradually increased responsibility and maturation into the role of a judgmentally sound, technically skilled, and independently functioning credentialed provider. *Reference VHA Handbook 1400.1 dated December 2012 on Resident Supervision.*

Residents are supervised by credentialed providers ("staff attendings") who are licensed independent practitioners on the medical staff of the UTHSCSA teaching hospital in which they are attending. The staff attending must be credentialed in that hospital for the specialty care and diagnostic and therapeutic procedures that they are supervising. In this setting, the supervising staff attending is ultimately responsible for the care of the patient. Each UTHSCSA Program Director completes a listing of resident clinical activities that are permitted by year of training, the required level of supervision for each activity, and any requirements for performing an activity without direct supervision (all in your program's Resident Supervision policy). Annually, the Program Director determines if residents can progress to the next higher level of training. The requirements for progression to the next higher level of training are determined by standards set by each Program Director. This assessment is documented in the annual evaluation of the trainees.

Regular evaluations of Housestaff by faculty are required and Housestaff will be asked for feedback about their VA experience, as well.

DOCUMENTATION OF RESIDENT SUPERVISION

- Every patient encounter requires documentation of resident supervision. This is accomplished in the Computerized Patient Record System (CPRS).
- Every inpatient daily note by residents requires, minimally, an attestation in the note of the name of the attending (such as, "I have discussed and seen the patient with my attending, Dr. X., and he/she agrees", or "I have discussed the patient with my attending, Dr. X", or even, "My supervising attending is Dr. X".) These statements are templated in your daily progress notes; you merely

indicate the name of your attending. An attending's co-signature, or his addendum to the resident's note, or his separate note (but linked, by his/her verbiage) also suffices.

- Every admission H&P written must be accompanied by either an attending's addendum to your note or the attending's separate H&P; a co-signature or your simple attestation in your note does not suffice. This holds true for the pre-operative note as well, unless the attending writes all elements of the H&P and the pre-op note in the same document.
- Procedure (non-OR) notes require not only indication of attending, by name, but also their presence or not(if you are not "approved" yet to perform without direct supervision, the staff or other "approved" higher level resident must be present to supervise you).
- Clinic notes require any of the four types of documentation (separate but linked staff note; staff addendum; co-signature; or simply your attestation). If the patient has not been seen anywhere in Audie Murphy previously (i.e., your clinic visit is the first clinic visit to this hospital), your staff must write their own note or an addendum. In most cases for a first time visit to your specialty, your attending may want to write a note or addendum anyway.
- All, or almost all, of the above notes available for you in CPRS are templated, which makes it easy for Housestaff to be compliant with these rules.

FAQ'S:

Q. Does my attending need to write a note on every patient?

- A. No, your note suffices in most cases if you document your supervising attending, except for admission notes, pre-op notes, and the "first visit to our VA". Also, in the ICUs, the attendings will need to write his/her own note more frequently, depending on the rules at that local site of care.

Q. I am a senior medical resident and my clinic attending does not see some of my routine follow-up patients. How do I document this in the note?

- A. If your attending is available, then they are the attending of record. "My supervising attending is Dr. X." is sufficient for documenting the encounter. Remember, in the VA, your attending must be physically present in your "clinic area" for at least some of the time while the patient is there, as a resource for you.

Q. Do I have any responsibility for patient care?

- A. You always have responsibility for the care of your patients. However, as a trainee, your attending is medico-legally responsible for the care you give, as well.

MEDICAL LICENSURE

Upon appointment, Housestaff will have an institutional permit (obtained by the affiliate institution, [UTHSCSA] or a license from the State of Texas or any other State, in order to practice medicine in the VA. Individuals seeking to be licensed in the State of Texas should contact the Texas State Board of Medical Examiners in Austin, Texas. The telephone number is 800-248-4062. If this is your desire, you may want to discuss the need for this with your Program Director first.

PROFESSIONAL LIABILITY

When working at the VA, you are immune from individual liability as long as you are working within your approved (by your Program Director and VA Site Director) scope of practice. Protection is provided by the Federal Government under the Federal Tort Claims Act. You are expected to cooperate with the government's investigation of and defense of claims and/or lawsuits involving alleged professional negligence. If claims are paid on your behalf, you may be reported to the National Practitioner Data Bank.

APPOINTMENT PROCESS

There are three appointment categories for our residents:

- *Intermittent Appointment.* The VA has a Full Disbursement Agreement with University Health System (UHS) which serves as the Disbursing Agent (“DA”) for Housestaff stipends. This “DA” is a central reservoir out of which uniformity of salaries for residents working on “both sides of the street” is possible. All Housestaff except Dental (GPR, AEGD, Endo and Perio), Podiatry, and Internal Medicine Chief Residents* are appointed on an intermittent appointment. Under this agreement, all pay, leave, and benefits (including medical, dental, life, accidental death and dismemberment, long term disability insurance and worker's compensation) are administered through the Disbursing Agent.
- *VA Appointment.* Dental, Podiatry, Internal Medicine Chief Residents*, and VA special fellowships are paid directly by the VA and have a VA appointment. The VA administers all pay, benefits, leave, and insurance eligibility. *Refer to **Benefits** (below) for details.*
- *Without Compensation Appointment (WOC).* Dental and Podiatry who are not on VA payroll, and active duty military, are appointed under this appointment category.

BENEFITS

NOTE: This only applies to Housestaff appointed on a Full-Time VA Appointment (e.g., podiatrists, dentists, Internal Medicine Chief Residents). It does **not** apply to the majority of Housestaff who receive a paycheck from UHS through the Full Disbursement Agreement.

- **Physicals.** Housestaff on a VA Appointment are required to have a pre-employment physical prior to appointment. The physical is provided by the VA Employee Health physician.
- **Stipends** (salaries). Stipend levels are indicated on the contracts signed each year by the Housestaff officer and the STVHCS.
- **Paydays.** Pay periods are of two weeks duration, always ending on a Saturday. When you in-process at UHS, payroll information will be provided. Direct deposit is mandatory to the financial institution of your choice. Any changes to your records, such as Federal tax exemptions, residence address, etc., during the course of the year should be directed to the VA Payroll Section, at internal ext. 15882. After you have completed your assignment at the VA or change to a different funding source outside the VA, you must complete a clearance sheet prior to your departure. The UTHSCSA Program Coordinator provides this form, which includes stops at UT, UH, and VA.
- **Payroll Deductions.** Mandatory deductions from your paycheck are Federal Income Tax and FICA (Social Security). The FICA is a combination of Old Age Survivors Disability Insurance and Medicare. Other deductions can be arranged, at your request.
- **Vacation Leave.** It is understood that vacation days will be equitably taken from VA-assigned rotation time and UHS assigned time, when averaged over the total residents in the program and over the year.
 - Post Graduate Level II and above are entitled to 21 calendar days (15 duty days) per academic year as approved by the appropriate Residency Program Director and VA Service Chief.
 - Post Graduate Level I are entitled to 14 calendar days (10 duty days), approved by the appropriate Residency Program Director and VA Service Chief.
 - NOTE: If no duty is performed during the work week, the entire seven (7) days [Sunday through Saturday] is charged to vacation leave. Vacation leave must be taken during the academic year in which it is earned.
 - Housestaff renewing their appointments with the VA may retain unused vacation leave balances to the next leave year only as an exception. Requests for exception must be made in writing with a strong justification to the Residency Program Director and VA Service Chief; they will be considered on a case-by-case basis. Unused vacation days is not be paid upon termination of your appointment—don't fall behind!

- **Sick Leave.** Housestaff accumulate 15 calendar days of sick leave each year at the rate of approximately 1¼ days per month. Unused sick leave is not paid upon termination of your appointment. However, unused sick leave can be re-credited to the employee's sick leave account if he/she is re-employed by a federal agency.
 - **Vacation Leave for VA-Appointed Podiatry Residents.** Podiatry residents are categorized as Associated Health Trainees and earn four hours of vacation time each pay period for 26 pay periods. So, the total vacation time for Podiatry residents is 13 days for the academic year. Unused vacation leave is paid upon termination of the VA appointment.
 - **Sick Leave for VA-Appointed Podiatry Residents.** Podiatry residents are categorized as Associated Health Trainees and earn four hours of sick leave time each pay period for 26 pay periods. The total sick leave time for Podiatry residents is 13 days for the academic year. Unused sick leave is **not** paid upon termination of the VA appointment. However, unused sick leave can be re-credited to the employee's sick leave account if he/she is reemployed by a federal agency.
- **Administrative/Professional Leave.** Authorized Absence (AA) may be approved to attend scientific meetings and councils, present scientific papers, attend State and specialty board examinations, fulfill jury duty, etc. Requesting AA does not involve a charge to leave or loss of pay. The appropriate Residency Program Director and VA Service Chief must approve AA. It would be very unusual to travel to any events in any VA official travel status.
- **Parental Leave.** The Federal Government has a provision for granting parental leave under the Family Medical Leave Act.
- **Leave Without Pay (LWOP)** is a temporary, non-pay status/absence from duty.
- **Emergency Leave.** A limit of three calendar days is authorized for personal leave in case of death of a family member or sudden severe illness. The VA Service Chief has authority over this.
- **Health Benefits** are available through the Federal Employees Health Benefits Program. The FEHB program helps protect you and your family members against the cost of illness or accident. It is a *voluntary* program and you must enroll within 31 days from the date of your appointment. In the San Antonio area there are several plans available to cover individual needs. However, if you are in a non-pay status for an entire pay period or if your salary for a pay period does not cover the employee share of the premium, you are required to make the payment regardless.
- **Life Insurance** is available through the Federal Employees Group Life Insurance (FEGLI) Program. This program provides automatic basic coverage upon your appointment at the VA hospital. This insurance program is *voluntary*. Within 31 days from the date of your appointment, you must elect additional coverage or decline the basic life insurance coverage. If you decline insurance coverage a Human Resources Specialist will provide a waiver for your signature. The insurance program absorbs the premiums for up to one year in a non-pay status.
- **Workers' Compensation Coverage.** If you are a VA appointee, you are covered for workers' compensation under the provisions of the Federal Employees Compensation Act (FECA). Injuries or diseases incurred while on duty are immediately reported to your Chief of Service. (*Note: Housestaff paid under the Disbursement Agreement are covered through the Disbursing Agency*).
- **Uniforms and Laundry.** Housestaff on VA appointment wear the physician's coat provided by the VA in lieu of receiving a uniform allowance. Coats and laundry services are provided daily between the 7:45-9:00 a.m. and 3:00-4:00 p.m. in Environmental Management Service, Uniform Room L009. A VA Form 10-1148, Uniform Card, signed by the Service Chief is required before coats are issued

LEGAL HOLIDAYS—the following national holidays are observed by the VA:

Holiday	Date
New Year's Day	January 1 st
Martin Luther King Day	Third Monday in January
President's Day	Third Monday in February
Memorial Day	Last Monday in May
Independence Day	July 4 th
Labor Day	First Monday in September
Columbus Day	Second Monday in October
Veterans Day	November 11 th
Thanksgiving Day	Fourth Thursday in November
Christmas Day	December 25 th

When New Year's Day, Independence Day, Veterans Day, or Christmas falls on Saturday, the Friday immediately before is observed as the legal holiday; when the holiday falls on Sunday, the following Monday is the legal holiday.

Duty and call schedules during holidays at ALMD are arranged by the VA Service Chief and the training programs. These holidays in the VA are typically managed as if they were "Sundays"; if you are not on-call, time off in VA is granted as if it were Sunday. While many of these holidays are not "off" at UHS (and you'll have to work those full days if you are on a UHS rotation), there are also holidays at UHS for which, if you are on a VA rotation, you will not get the time off here (e.g., Battle of Flowers' Day; Christmas half-day schedules).

RESPONSIBILITY TO RECOGNIZE AND CARE FOR THE PATIENT AS A PERSON

VA beneficiaries—those persons being served by the VA—are a select group of individuals. Their medical care is provided for by law as a benefit for serving in the Armed Forces in the defense of our nation. When they request assistance, it is our opportunity to provide them our service. Legal eligibility will vary among the veterans.

Abuse of the Patient

Abusing patients is unprofessional but it is especially egregious when directed at Veterans who at one time paid dues most of us did not. The maximum penalty for abusing a patient is removal from ALMD without allowance for return (which can put a resident's course of training at jeopardy). Appropriate penalties (admonishment, reprimand, suspension, or demotion) may be imposed if mitigating or extenuating circumstances warrant lesser penalty or the nature of the abuse is minor. Abuse of a minor nature includes such acts as teasing a patient; speaking harshly, rudely, or irritably to a patient; laughing at or ridiculing a patient; inappropriately scolding a patient; showing inappropriate indifference; etc. In certain instances, such acts can be considered major abuse.

Employees and Housestaff should report any complaint or evidence that a patient has been mistreated or abused in any way to the Chief of the Service to which the patient is assigned.

Abuse of the Resident

It occasionally occurs where verbal or physical abuse of the resident by patients or by an Audie Murphy employee occurs. Residents should strive greatly to maintain a professional demeanor but these incidents must be reported. Appropriate action may be taken against either patients or employee(s) who have demonstrated clearly inappropriate behavior.

COST CONTAINMENT

Residents are encouraged to understand the importance of cost effectiveness in the delivery of health care services. Cost containment can be accomplished without jeopardizing the quality of care by appropriate admission of patients, the judicious ordering of procedures, medications, equipment, etc., and by expediting the discharge of patients. Quality assurance activities are one mechanism to evaluate cost effectiveness.

ETHICS

Housestaff must comply with VA policies, procedures, and regulations governing ethics. Additionally, you may obtain a consult from the Ethics team when faced with difficult patient management decision by calling the Ethics Consultation Team. They can be reached at the pager numbers listed in the On-Call Roster (under "Quick Navigation" links, top right on the STVHCS home page).

RELEASE OF MEDICAL INFORMATION

Medical information in Audie Murphy is available through the Release of Information (ROI) office (internal ext. 15410) in the Medical Administration Service (MAS). You (but preferably your social worker) may complete personal insurance, legal, or medical forms for the veteran through this office to ensure compliance with the Privacy Act and HIPAA.

RELEASE OF INFORMATION (ROI) TO PRESS AND RADIO

Press, radio, and TV releases are the final responsibility of the Office of the Director through the Public Affairs Office. Information should not be released for use in magazines, newspapers, public reports, displays, films, etc., without specific approval of the Hospital Director or his designee.

MAINTAINING PATIENT CONFIDENTIALITY (PRIVACY ACT)

One of your responsibilities as a resident is to protect the confidentiality of all patient information. Our patients have a legal right to privacy and we, as their caregivers, have a legal and moral responsibility to protect that right. Common violations include leaving work lists with patient information in public places or discussing patient cases in public areas, such as elevators, hallways, or stairwells. Please do NOT do this! The Privacy Act and other Federal statutes provide penalties for the knowing and willful misuse or disclosure of confidential information to any person or agency not entitled to receive that information.

VHA PRIVACY POLICY

Training in VHA Privacy Policy is provided in the "Mandatory Training for Trainees" ("MTT") that you receive before you came to work in the VA. Employees, students, and medical residents may use the health information in VHA records only in the official performance of their duties for treatment, payment, and health care operation purposes. The minimum amount of information from these records necessary to fulfill or complete their official duties should be used. Information from VHA records that identify the patient and social security number can be released to the patient or another individual (third party) when a prior written authorization from the patient is obtained.

Veteran patients have rights as listed in the VHA Notice of Privacy Practices. Patients at STVHCS are given the right to opt-out of the facility directory during their inpatient episodes of care. If the patient requests to be opt-out, the facility will not be able to disclose ANY information about the patient to anyone, including callers, visitors, family, friends, non-VA clergy, or receive flowers, cards and most mail. The patient has the right to change their opt-out selection any time during their inpatient episode. As a

health care provider you may be asked to make the opt-out determination for an incapacitated patient in the patient's best interest. This decision is documented as a progress note in the medical record.

MEDICAL STATEMENTS

When asked by a patient or family member to provide a "medical statement", you may provide the facts of the illness as well as limitations that the illness may impose. DO NOT provide legal or court-requested documentations. It is recommended that you do not provide a statement with an opinion supporting carriage of a weapon or firearm.

PATIENT COMPLAINTS

If a patient or his family is dissatisfied, a member of the health care team (Physician, Nurse, Social Worker, etc.) is usually the first to know and resolution of the dissatisfaction should be done at the team level. If this is not possible, the health care team will determine at which level the dissatisfaction can be resolved or reviewed, i.e., supervisory level, Service Chief, top management. A team member will then discuss the patient's/family's dissatisfaction with that level of personnel to determine a resolution.

PATIENT ADVOCATE CONTACTS

Patients sometimes ask you where they can go to make general complaints about something that bothers them about their care or our facility. While we encourage you to do "recovery"---attempt to resolve issues with the patient at the simplest level-- Audie L. Murphy VAMC does have the Patient Advocate Office which patients or family members can contact. Sometimes that office can really untangle problems or frustrations for the patient. Have them call 949 3822.

SEXUAL HARASSMENT AND EXPLOITATION

Training and awareness of this issue, which the VA takes very seriously, is provided during your "MTT" orientation. Multiple Federal and state statutes hold that these are illegal and actionable under civil and criminal law. Sexual harassment includes unwelcome sexual advances, requests for sexual favors, verbal or physical conduct of sexual nature when:

- submission to such conduct is made either explicitly or implicitly;
- submission to or rejection of such conduct is used as a basis for evaluation in making personnel decisions affecting that individual; or
- such conduct has the purpose or effect of unreasonably interfering with an individual's performance as an administrator, staff, fellow, resident, or student, or creating an intimidating, hostile or offensive environment.

Examples of behavior that could be considered sexual misconduct or sexual harassment includes, but are not limited to:

- physical contact of a sexual nature including touching, patting, hugging, or brushing against a person's body;
- explicit or implicit propositions or offers to engage in sexual activity;
- comments of a sexual nature, including sexually explicit statements, questions, jokes or anecdotes; remarks of a sexual nature about a person's clothing or body; remarks about sexual activity; speculation about sexual experience;
- exposure to sexually oriented graffiti, pictures, posters, or materials; and/or
- physical interference with or restriction of an individual's movements.

GRIEVANCES; MECHANISMS FOR SOLVING PROBLEMS

Chief Residents serve as the first point of contact for Housestaff with complaints or grievances. Resolution of problems will begin with the Chief Resident and will be raised to a higher level only if the situation cannot be resolved.

Each training program in ALMD is sponsored by a professional service that coordinates with the Office of the Associate Chief of Staff for Education (ACOS/E). Each Service has an assigned "VA Site Director" (senior VA faculty with primary responsibility for the resident training at ALMD) and who coordinates your VA training (including problems) with your program.

PHYSICIAN IMPAIRMENT/SUBSTANCE ABUSE

If you realize that you are personally impaired by depression, other psychiatric difficulty, alcohol or drug abuse, or if you perceive that a faculty member or other trainee may be so impaired, your PD should be directly consulted; there are established and effective mechanisms for help.

Additionally, information on treatment of physician faculty and Housestaff impaired due to such illnesses is available by contacting the Bexar County Medical Society, Physician Health and Rehabilitation Committee at 210-734-6691.

COMMITTEES OF INTEREST TO HOUSESTAFF OFFICERS

The following Boards/Committees are in place at ALMD; your participation on them may be useful to you (for familiarization for the future, but also for your CV), and will also be useful to us. Many board members do not have the direct visibility of patient care that you do. Participation may be secured through the office of the ACOS-Education, who can coordinate with your program leadership (for your time).

CLINICAL EXECUTIVE BOARD coordinates research, education, and medical activities; reviews recommendations and findings requiring approval and/or action by the board; recommends professional policies to the Hospital Director; and reviews the professional accreditation functions to ensure compliance with TJC requirements. It is the Medical Staff Committee equivalent in other hospitals. The Chief of Staff is chairperson. We would like housestaff to be represented on this board and we encourage your interest.

QUALITY EXECUTIVE BOARD (QEB) oversees the implementation of total quality improvement (TQI) principles and philosophy throughout the organization. The QEB is responsible for formation of interdisciplinary assessment and improvement teams that address process issues and systems' problems. The QEB is responsible for training, communication, award, and recognition and measurement activities in reference to TQI. The QEB also oversees adherence to The Joint Commission (TJC) standards. If interested in committee participation, contact the ACOS-Education at 15109.

INTEGRATED ETHICS COMMITTEE (IEC) addresses ethical issues that arise in the provision of patient care. Staff, patients, families, or other interested parties may initiate an Ethics Consult. The Ethics Consultation Team can be reached at the pager numbers listed in the On-Call Roster (under "Quick Navigation" links, top right on the STVHCS home page). If interested in committee participation, contact the ACOS-Education at 15109.

MEDICAL RECORDS COMMITTEE assesses the adequacy of the medical records; insure conformity with VA policies and compliance with the Joint Commission on Accreditation of Healthcare Organizations (TJC). The Committee reports to the Clinical Executive Board on a quarterly basis. Housestaff are represented on this committee. If interested in committee participation, contact the ACOS-Education at 15109.

RESIDENT SUPERVISION COMMITTEE addresses not only the mechanisms for appropriate documentation of the faculty/resident training experience, but also monitors the residents' environment of training. It is chaired by the ACOS/E and, as you may expect, may be an extremely useful committee for you. Chief Residents for Internal Medicine and for Surgery already participate.

CHAPTER 2 - SUPPORT SERVICES

This chapter addresses those support services around the facility that are necessary or useful for you to do your job daily.

CANTEEN SERVICE (CAFETERIA):

- **Food Service** – next to the Main Entrance on first floor
 - Weekdays 7:00 a.m.-6:00 p.m.
 - Weekends 8:00 a.m.-2:30 p.m.
 - Holidays CLOSED (except Veterans Day--open 8:00 a.m. - 2:30 p.m.)
 - After hours food and drink: Audie Murphy provides meals for those residents on-call at the VA. Residents (not medical students!) on-call can find the evening meal in the refrigerator located in the call rooms' suite (D306) in the Education Service area. During daytime hours, please use the Canteen.
- **Retail Store** – co-located in the rear of the Canteen
 - Weekdays 7:00 a.m. to 4:00 p.m.
 - Weekends 8:00 a.m. to 2:30 p.m.
 - Holidays CLOSED (except Veterans Day--opens 8:00 a.m. to 2:30 p.m.)

LIBRARY SERVICES

STVHCS has moved over to an entirely on-line library and database package. This includes the widely used general reference "Up-to-Date", the search engine Ovid, and an exhaustive list of complete medical texts at "e-books". All of these robust on-line services can be accessed from the STVHCS home page (Database-Publications on left-hand menu; click and fly-out), or in CPRS through the Tools Menu.

HOUSESTAFF MEAL CARD

Meal vouchers for use in the cafeteria ("canteen") are issued to those residents who meet well-defined on-call criteria. These paper vouchers are distributed through your UTHSCSA Program Coordinator. This meal card will not make purchases at the Retail Store. NOTE: A more up-to-date automated system is still awaited as of 2014.

PHOTOGRAPHY SERVICE

Limited photography service (but very professional) is available through the Office of Public Affairs (OPA). For additional information you may contact them at VA ext. 16130.

PARKING

Parking is provided for most Housestaff at University Hospital (only the "VA PAID" categories, including podiatry/dentistry/Med Chief Residents, can be issued VA parking tags). Card operated electronic gates control access to these areas. (After hours parking at the VA in the visitor lots is allowed for everyone).

PHYSICIAN CALL ROOMS

A635	CCU Call Room
D306	Non-ICU Call Rooms (not reserved by program; use whichever room is unoccupied)
D712.1	MICU Call Room
E205	SICU Call Room

Environmental Management Service (EMS) provides sanitary maintenance and provides linens (stacked on the beds) to the physician call rooms, in the early afternoon. We do get occasional complaints regarding unkempt call rooms, no linens not being provided, or even insects being seen. **Please let the Education Office know if these rooms are not being serviced! Call internal ext. 15109.**

SCRUB ATTIRE/DOCTOR'S COATS

Scrubs at the VA are distributed through the "Scrub Avail" automated system. There are three locations: 1st floor by the Service elevators; OR (only for those working in the Surgical Suite); and on the 7th floor in the Main Elevator area. This system is user friendly and allows 24/7 access. If you need scrubs during your rotation at the VA, contact EMS, Room L015 or at internal ext. 16889 and they will issue you a bar-coded access badge. Scrub attire cannot leave the hospital complex: the risk of spreading blood borne pathogens prompted this restriction.

Doctor's coats will be issued from the uniform room, Room L029, with a completed VA Form 10-1148 (Uniform Issue Card) issued by your assigned service at the VA. Note: Doctor's coats are issued to only physicians/dentists/podiatrists on a **VA paid appointment**, so unfortunately most of the residents (intermittent appointment under the Disbursement Agreement) do not qualify.

POLICE NOTIFICATION PROCEDURES

An employee or STVHCS affiliate is authorized, urged and expected to notify the VA Police as soon as possible when they are aware of actual or suspected criminal activity or emergency conditions (i.e. theft, assault, disturbance, threat, suicide or attempts, etc.). Contact the VA Police at ALMD internal ext. 15911. You may also visit the VA Police Desk which (during construction of the main lobby) is temporarily located outside the building near the flagpole (exit through Polytrauma Center).

CHAPTER 3 - COMPUTER SYSTEM

After you have been properly approved and appointed through the VA Education Office, you will receive computer access codes. You are assigned both a Network access code and a VISTA access code. Residents (not students, yet) also receive a "PIV" card (a smart card with an identifying chip; especially useful for signing on quickly, but also necessary for easily writing outpatient controlled substances).

- Log into the VA computer Network using your PIV card and PIN (or Network User Name/Password).
- Log into the CPRS through the VISTA system using your VISTA Access/Verify Code (see Appendix A)
- If logging into VISTA for the first time, change your electronic signature/verification code (see Appendix B)

THE COMPUTERIZED PATIENT RECORD SYSTEM (CPRS)

The Department of Veterans Affairs has a computerized patient record system that can be accessed in a variety of ways. You can view and use the system by signing on with VISTA passwords. There is an excellent on-line, interactive training module at <http://www.vehu.va.gov/cprstraining/>.

VIEWING THE ELECTRONIC MEDICAL RECORD (CPRS)

- Double-click on the CPRS Icon on the desktop or from your Windows "Start" button at lower left of desktop.
- Enter your VISTA Access Code; press TAB enter your Verify Code and click OK or press return
- Enter patient's name, or SSN, or first initial of last name and last four digits of SSN in the middle column text query box
- After the **Cover Sheet** builds, select from Tabs at bottom to view desired portion of record
- To see details of **orders**, place cursor over the order and double-click to see.
- To see medications, click on Medication tab
- To see **Notes**, select by clicking on the Notes Tab and click on note date to view
 - At the Notes page, you will see Templates on the left-hand menu bar. Multiple different kinds of notes can be found here (Admission, Progress, Procedure, PASS, etc.). One important Template note is the "Medical Student note". This is the ONLY note that your medical students are allowed to use; once they open it, they can populate it as an H&P, or progress note, etc. By using the template the note will be labeled "Medical Student Note", which is required.
- To see details of entries on the list, hold your pointer still over the entry date and you will see the note title, clinic name, date of note and author

COPY AND PASTE (CLONED NOTES)

- This function of CPRS can be both a powerful tool and a dangerous weakness if misused. Clinical, financial, and legal problems may result when text is copied in a manner that implies the author or someone else obtained historical information, performed an exam, and/or documented a plan of care when the author or someone else did not personally do it.
- It becomes obvious that you are not writing a correct note when crucial, time-dependent elements from one day are incorrectly copied into the next day. Edit these notes carefully!
- Never copy one doctor's signature block into another note.
- Do not copy entire laboratory findings, radiology reports and other information in the record verbatim into a note. Data copied into the record should be specific, brief, and pertinent to the care provided.
- Do not re-enter previously recorded data.
- Authors are liable for the content of copied items within the notes they authenticate. Use of copy and paste functionality is monitored and where violations occur findings are reported to the Medical Record Committee for determination of disciplinary or other adverse action.

There are significant medicolegal ramifications of improperly edited copy/paste notes. Unfortunately there may be disciplinary ramifications. Be careful!

PROCESSING NOTIFICATIONS IN CPRS

- Sign on to CPRS as described in the previous section.
- See your alerts (notifications) at the bottom of the patient selection window.
- Highlight the notification to process.
- If just an info alert, processing will make it disappear; if an action alert; processing will take you to the part of the chart requiring processing (i.e., signing a note, etc.)
- After an alert is processed, click on NEXT at the bottom right of your window.
- To end notification processing, select another patient, or close CPRS.

ORDERING CONSULTS IN CPRS

- Sign on to CPRS using your Access and Verify Codes
- Choose your patient
- Click on Consult tab
- Click on New Consult button
- Select the consult service to whom you are sending consult. (There is now also an “e-consult menu” that can be selected if you think your question could be answered electronically, without the patient actually seeing the consultant).
- Fill in patient information (mandatory to enter provisional diagnosis, reason for consult, and to answer all questions)
- Click on “Accept Order”
- You’re not finished yet; the order needs to be signed! Go to Orders tab
- Select your unsigned consult by placing the cursor over it and left-mouse clicking once to highlight it
- Click on Action on the menu bar
- Click on Sign Selected
- Enter your Electronic Signature Code

TOOLS MENU

Under Tools (on the top menu bar) in CPRS, you can directly access the Library databases, e.g., Up-to-Date and Ovid Full-text; the Audie Murphy Formulary; IMED consents; VISTA radiology (view X-rays), standing ICU protocols; Resident call schedules; Resident pager numbers; the Shift Hand-Off tool, and others.

COMPUTER HELP DESK SERVICES

Any computer related problems or questions may be directed to the Office of Information Technology, Customer Support Section Help Desk at internal ext. 15519. Our *local* Help Desk at this number is staffed Monday through Friday, 6:30 a.m. to 6:00 p.m., except government holidays. Outside of these hours, the national help desk answers, and they can still do password resets for Windows (network) logins, or verify code resets for VISTA login. They do have visibility of your updated training status (i.e., if you haven’t done your annual Mandatory Training for Trainees, or MTT) and they CANNOT grant you access if that training has not been performed. (You’ll have to get someone else on your team to write notes or orders, and tackle this the next day after you do the MTT).

FAQ'S:

Q. I'm returning to the VA after at least 90 days and I my computer codes will not allow me access to the Network/CPRS. What do I do?

- A. During the normal work day, call the help desk at 15109, and ask to have your codes reactivated. After normal duty hours/evening/weekends, call the same number, and a national help desk assistant can help you (to a limited extent). Both day and night help desks will occasionally roll over to a "call back" but our experience is that this occurs fairly quickly.

INFORMATION SECURITY AWARENESS

The Computer Security Act and VA Directive 6210 mandates annual Information Security Awareness training. Housestaff receive this training through the MTT module. If you are not current on your MTT, personnel at the Help Desk can see that, and they will be unable to "open you up" until you have done that. (You need to have your TMS User ID and Password ready. Go to "Education and Training" on the left hand menu on the Home Page; fly out, then click on the TMS button; click on User Login; enter User ID and Password; you should see the MTT as the only thing on your learning plan. Click, and do it.)

PASSWORDS

Your VA network "login" (vhastx.....) will not change during the duration of your training at Audie Murphy. Your "password", however, will need to change every 90 days, and must be of "high complexity".

They must:

- be at least eight characters in length;
- contain at least three of these four character types:
 - upper case letters
 - lower case letters
 - numbers
 - special characters (such as #, &, *, or @), and
- be changed at least every 90 days

To increase the protection of VA systems:

- Do not use words found in any dictionary, spelled forward or backwards
- Do not display passwords on screens or any other media at any time, and do not store passwords in clear-text (unencrypted) form
- Take appropriate actions to prevent others from observing your passwords
- Change your password when it has been compromised, or when you suspect that it has been compromised
- Do not write down or store passwords in automatic log-in scripts, software macros, terminal function keys, or any place where others might discover them
- Do not disclose or share your password with anyone

In the unlikely event your VA computer (which is highly protected) acquires a virus, stop using it immediately and contact the Service ADPAC (your services' IT Coordinator), or call the STX OIT Help Desk at internal ext. 15519.

CONFIDENTIALITY

As a VA computer user, one of the most important things you can do to contribute to good computer security is to protect the confidentiality of our data. An emphasis on confidentiality is the condition in which VA's information is only available to those people who need it to do their jobs.

DO NOT walk away from your computer without logging off and do not leave hard copy patient records or documents where they are not adequately controlled. DO NOT TALK about a veteran's case in a public place, like the hallway, elevator, or the Canteen.

LARGE VOLUME DATA DRIVES

The VA has moved to a "no thumb drive" environment because these data storage devices, which can store large amounts of patient-related material, are easily lost. The use of external memory devices is forbidden and any attempts to use them in a VA computer will result in your computer being locked or automatically shutting down. Most of the CD drives on VA computers have also been inactivated.

EXTERNAL ACCESS TO VA COMPUTERS THROUGH CAG

Housestaff can apply through the Education office (15109) for permission for access to the VA network computers through the Citrix Access Gateway (CAG). This operates like any other external-access gateway. A formal application is filed, however, and it takes a day or two to come back (from the Information Security Office). You can get the instructions for that application physically in the Education Office, or you can go to the Home Page, then Information Security on the left hand menu, then "Request VPN Account" on the right-hand menu, then follow instructions. You'll be notified by e-mail when you can sign in from outside VA.

BACKUPS

Backups are your best defense to protect your data against viruses and other malicious software. OIT is responsible for backing up data stored on network servers but not on individual PCs. **YOU** are responsible for backing up all data stored on your PC, which is done by saving your work to the H-Drive (in "My Documents"). Remember, if you are dialing into the VA system through the CAG from outside the firewall, you can access elements you've saved back onto your H drive but will not be able to see things you've saved on your original desktop.

EMAIL SECURITY

In the VA, email is a vital communications tool. Proper use of email is essential to ensure that this resource is uninterrupted. Chain letters and hoax messages rob us of valuable computer space and processing speed. DELETE these messages and DO NOT forward or reply with stop or unsubscribe requests. These messages are sent by the thousands and slow down network capability.

Sensitive information should NOT be sent by email unless it is sent securely (i.e. encrypted). In particular, no patient name or "first letter and last 4"—which could identify a patient—should ever be sent over unsecure email; nor should you send email with ANY identifying personal or clinical patient data. It is acceptable to communicate about patients through encrypted email (not easy to obtain for Housestaff) or by sending TWO separate email messages: one with case-related data but no identifiers and the other with only first letter of last name and "last 4" but no personal or case data of any kind. Of course, you

can communicate between physicians within a patient's CPRS record by using the "additional signer" selection after you have signed your note or your addendum.

TRANSFERRING DATA OUT OF THE VA

It's hard, and you must be careful; losing some patient records over the years has sensitized the VA to this occurrence. You can't use thumb drives nor write on CD burners. You CAN e-mail data, to include (for instance) X-rays "across the street" for purposes of case presentations or discussions but MAKE SURE identifiers have been removed from those images or files. LOGBOOKS—physical logbooks, with intrinsic identifiers in them are bluntly not allowed. Logs with separate "links", by codes or letters for instance, to a code on a separate document or file could be used however.

RESPONSIBILITIES

YOU have an obligation to protect VA information assets. All employees, contractors, residents, students, and volunteers have a responsibility to be familiar with VA security policies, procedures, rules, and regulations (know what to do, how to do it, and why).

Every VA facility has an Information Security Officer (ISO) and at least one Alternate Information Security Officer (AISO) who can help answer questions you may have about your security responsibilities. The STVHCS ISO and AISOs are:

- Gerald Stewart, ISO 210 616-8165
- Donald Clark, AISO 210 616-8166
- Mike Lumby, AISO 210 616-8393

For questions or assistance regarding information security at the University of Texas Health Care System (UTHSCSA), contact the Chief Information Security Officer at 210 567-5900.

ETHICAL BEHAVIOR

Computer security ethics are the basis for the decisions and choices you make about how you conduct yourself while using VA information assets. You face ethical issues every day and often they are not easy issues, and how you respond says a lot about your character. Ethical decision-making is an obligation, not an option.

VA Computer Ethics are a code of conduct that spells out the standards and values that VA computer users are expected to live up to and instill in their co-workers. Much of the following is covered in your MTT.

Ethical behavior includes the following code of conduct:

- Users are responsible for their use of computer hardware, accounts, and user-IDs. These should be used only for authorized purposes.
- Log off your PC or workstation before you leave the work area.
- Protect sensitive information. Maintain control of sensitive data and dispose of it properly when you no longer need it.
- Be a good role model and encourage your co-workers to behave ethically.
- Do not share your password ever, not even with the OIT Help Desk, other OIT staff or security personnel.
- Do not view or use another person's computer files, programs, or data without permission, or for personal gain, curiosity, etc. Only access information required to do your job.
- Do not attempt to modify computer systems or software in an unauthorized manner.

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- Do not send random, commercial, political, obscene, harassing, or threatening electronic messages through e-mail, bulletin boards, networks, or newsgroups. E-mail is subject to monitoring, and its misuse is punishable.
- If you are unsure of what decision to make, ask yourself the following questions:
 - Would you want your boss or co-workers to know about your actions?
 - Would you want the action you are considering to be printed in the local paper?
 - How would you feel if someone else did the action that you are thinking of to you (if your positions were reversed)?

Appendix A – LOGGING ON TO VISTA AS A NEW USER

(You have to do this within 24 hours of first being handed your computer access codes by the Education Office).

USERNAME: VISTA [Enter]

Access Code: TYPE IN [Enter]

Verify Code: TYPE IN [Enter]

- You are prompted to enter your Electronic Signature Code; follow the directions, type your code, and [Enter].
- You are prompted to enter your Electronic Signature Code a second time for verification type your code and [Enter].
- You are prompted to electronically sign the Computer Security Agreement. Read the agreement and type in your electronic signature code. IF YOU REFUSE TO SIGN THE AGREEMENT, YOU WILL NOT BE PERMITTED TO LOG ON.

The VISTA will prompt you to type in a NEW verify code. Type in the code and [Enter].

- Your verify code must be 8-20 characters and must contain three of the following four elements:
 - Lowercase letters
 - uppercase letters
 - numbers
 - special characters (e.g. \$* & #)

Logging on to PC Network System (If you do not use the PIV card to login).

Type in your Network User Name (large or small caps): VHASTX_____ (VHASTX is always the first part of your user name) (Press TAB key to get to the next field; DO NOT PRESS THE ENTER KEY)

- The first time you log onto the network, your PASSWORD will be PASSWORD1. Type in your User Name a second time at the Network Password prompt.
- Domain should already read VHA17 (that's especially important through the CAG, which always asks for it)
- Press [Enter] only after you entered your password, or click OK

Each User must change their password at their first log on. The computer will prompt you to change your password as follows (USE TAB KEY TO NAVIGATE THROUGH FIELDS):

Old Password: <TAB-Do not type anything here>

New Password:

Confirm Password:

Old Password: The old password automatically defaults to PASSWORD1. If the new password is not accepted, you will be returned to this window again and you will have to type in PASSWORD1.

New Password: Your password must meet fairly complicated security requirements:

- It must contain at least eight characters
- It must contain three of the following:
 - Lowercase letters
 - uppercase letters
 - numbers
 - special characters (e.g. \$* & #)

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Confirm New Password: You are required to retype your new password for verification. Press [Enter] after entering your new password. You will receive a message advising you that your password was successfully changed.

Appendix B – CHANGING YOUR ELECTRONIC SIGNATURE CODE

- Sign on to VISTA using your Access and Verify Codes
- At any prompt, type TBOX [Enter]; Type EL [Enter]
- Press [ENTER] six times until you get to Electronic Signature
- If you already have an electronic signature and you want to change it, type in your current signature code and [ENTER]
- You will be prompted to enter a new signature code. It must be at least 6-20 characters, but with NO special characters; it can be alphabetical, alphanumerical, or numerical
- Type your new electronic signature code [ENTER]
- Type your new electronic signature code again to verify [ENTER]

MEMORIZE YOUR SIGNATURE CODE. DO NOT LET ANYONE ELSE KNOW IT. A DOCUMENT SIGNED WITH AN ELECTRONIC SIGNATURE CODE CONSTITUTES A LEGALLY SIGNED DOCUMENT.

If you forgot your signature code, call the OIT Help Desk at ext. 15519; they will clear the old code from the system and create a new one for you.

IF YOU EXPERIENCE PROBLEMS WITH NETWORK OR VISTA PASSWORDS, CONTACT THE OIT HELP DESK AT EXT. 15519, MONDAY THROUGH FRIDAY, 6:00 a.m. – 6:00 p.m. AFTER 6 P.M., THESE PROBLEM CALLS ROUTE TO A NATIONAL CPRS COORDINATOR WHO CAN HELP YOU WITH A MORE LIMITED MENU OF ACTIONS.