



Diagnostic, Rehab & Wellness Center



Good Samaritan Hospital



St. Mary's Medical Group



Highland Hills Village



Memory Care Center



Wound Healing Center



Colony Square Offices



Hospice House



Welcome

We're glad you're here!

The following presentation is one way to meet the compliance requirement that you complete an orientation prior to beginning your student rotation.





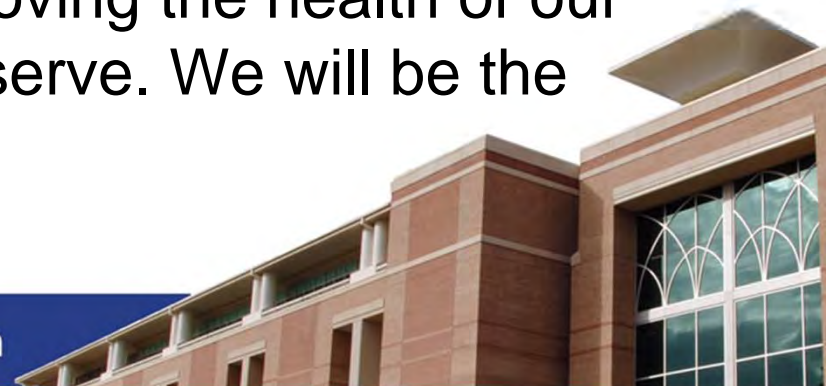
St. Mary's Mission & Vision

Mission

We, St. Mary's Health Care System and Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.

Vision

As a mission-driven, innovative health organization, we will become the national leader in improving the health of our communities and each person we serve. We will be the most trusted health partner for life.





Values

Reverence

We honor the sacredness and dignity of every person

Justice

We foster right relationships to promote the common good,
including sustainability of the Earth

Commitment to Those Who Are Poor

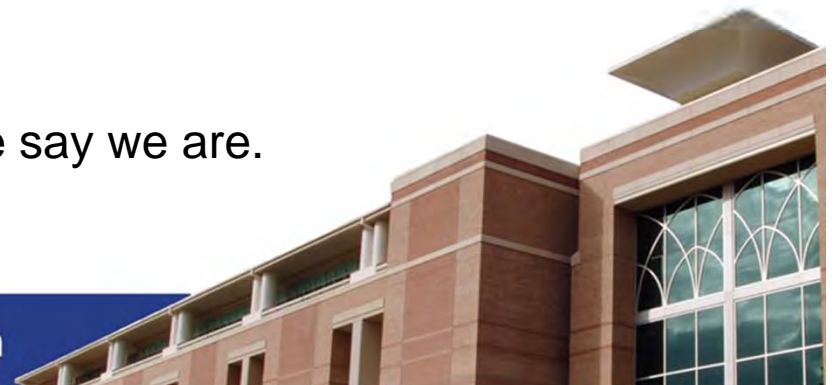
We stand with and serve those who are poor, especially those most vulnerable.

Stewardship

We honor our heritage and hold ourselves accountable for the human,
financial and natural resources entrusted to our care.

Integrity

We are faithful to who we say we are.





St. Mary's Health Care System, Inc.

- Full-service Community Hospital
- Joint Commission accredited since 1954
- Serving the people of Northeast Georgia for over 100 years.
- Values and mission are faith based.
- A part of Trinity Health, one of the largest multi-institutional Catholic health care deliver systems in the nation.



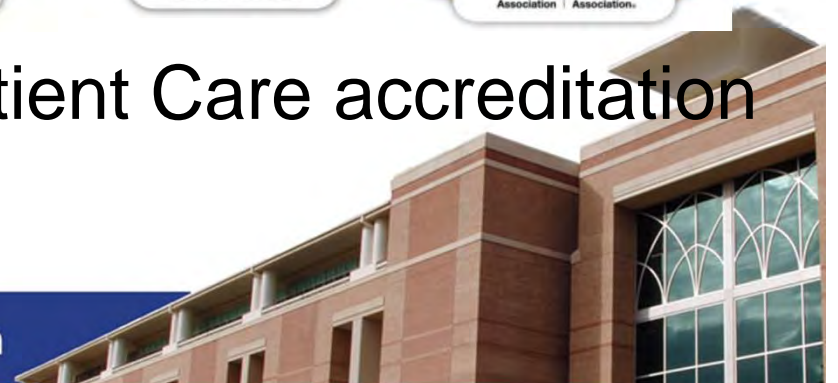


Uniquely Certified

- American Heart Stroke Association recognition:
 - GWTG Gold Plus Award – stroke – 5 years in a row
 - Target: Stroke Honor Roll – 3 years in a row.



- Society of cardiovascular Patient Care accreditation
 - Chest Pain Center – 2015





Healthgrades Rankings

- Among America's 100 Best Hospitals for:
 - Joint replacement
 - General surgery
 - Gastrointestinal care
- Excellence awards for
 - Joint Replacement
 - Stroke Care
 - GI Care
 - General Surgery
 - Clinical excellence
 - Patient safety
 - Outstanding patient experience
 - Women's health





Good Samaritan Hospital

- Opened November 2013
- Rural Critical Access Hospital located in Greensboro, GA
- Serving residents of Greene, Morgan, Putnam Counties, and beyond
- Georgia Alliance of Community Hospitals 2014 State's Small Hospital of the Year



St. Mary's Health Care System





Sacred Heart Hospital

- Acquired June 1, 2015
- Located in Lavonia, GA
- Serving residents of Franklin, Hart, Stephens Counties, and beyond
- Provides both inpatient and outpatient services



St. Mary's Health Care System





Unparalleled Continuum of Care

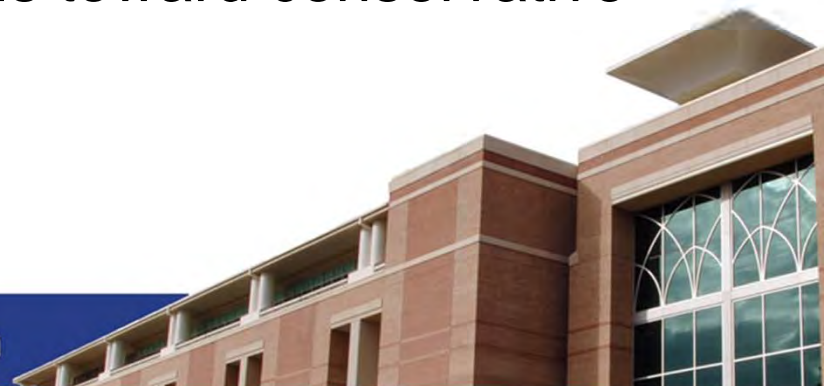
- St. Mary's Medical Group with physician offices across Northeast Georgia
- St. Mary's Home Health Care/Hospice Services
- St. Mary's Outpatient Diagnostic, Rehab & Wellness Center
- St. Mary's Highland Hills Village
- St. Mary's Center for Wound Healing





Dress Code

Each employee, student, observer, and volunteer conveys an image of St. Mary's through contact with others; and, it is an expectation to comply with the dress and appearance policy in order to make a positive impression. Therefore, employees, students, observers, and volunteers are expected to be neat, clean and presentable at all times. St. Mary's employees, students, observers, and volunteers should be particularly sensitive to what patients and visitors believe to be appropriate attire and grooming. Consequently, St. Mary's tendency is toward conservative appearance.





Dress Code

- **Class A clothing**

- Street clothes or business attire appropriate to the area assigned.

- **Female**

- Dresses or skirts shall not be shorter than 1 inch above the knee. Splits in skirts may not be any higher than 4 inches above the knee.
 - Dress slacks must be no shorter than the top of the ankle.
 - Sleeveless blouses or tops must be covered by a jacket or business-like blouse.
 - Shoes should be business-like and coordinate with the clothing being worn.

- **Male**

- Business casual-like slacks are required
 - Business casual collared shirt
 - Shoe material should provide a safe barrier from blood and body fluids
 - Footwear shall be business-like, neat and well maintained
 - Clean, quiet soles, and non-skid shoes
 - Shoe laces must be kept clean





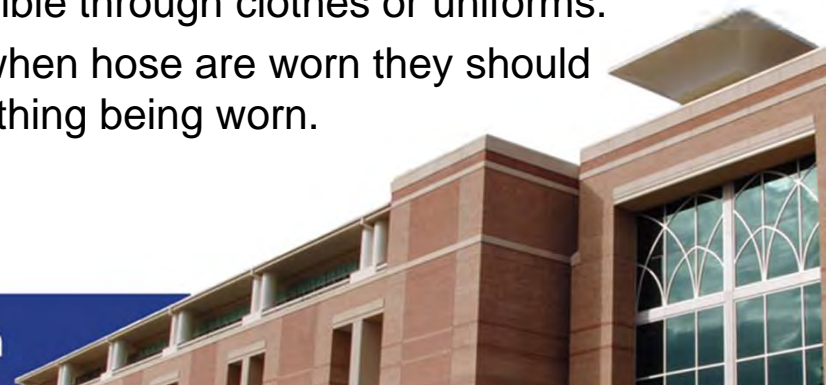
Dress Code

- **Class B clothing**

- Uniforms/scrubs are determined by the student's school.
 - Clinical areas or where dictated by departmental safety requirements the following guidelines shall apply.
 - Clean, closed toe, quiet soles, and non-skid shoes must be worn.
 - Shoe laces must be kept clean
 - Shoe material should provide a safe barrier from blood and body fluids.

- **Acceptable Attire**

- All clothing must be appropriately complete, neat, clean, and in good repair at all times. Faded, tie-dyed, bleached, torn, patched or un-hemmed clothing is not allowed.
- All clothing shall fit properly and be appropriate to the job being performed.
- Undergarments shall be worn but not be visible through clothes or uniforms.
- Women's hose are not required. However when hose are worn they should be of solid color and coordinate with the clothing being worn.





Dress Code

- **Acceptable Attire**

- No more than 2 ear rings per ear for women, and one stud ear ring total for men.
- Men's and women's socks also should be of a color appropriate to the color of clothing being worn.

- **Unacceptable Attire**

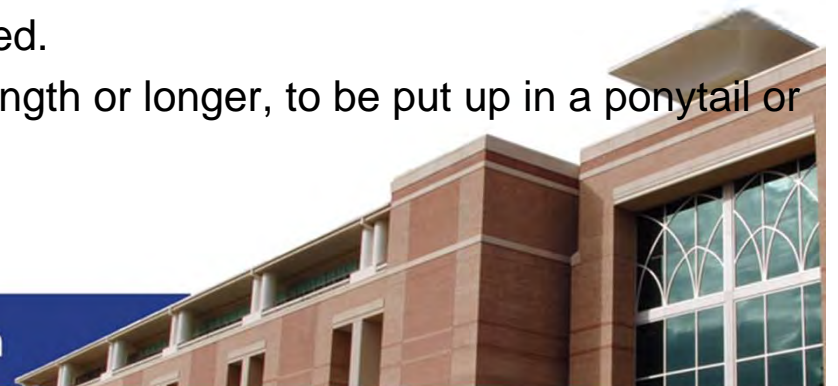
- Non-professional badges, buttons, insignias & printed comments on clothing
- Cargo, capris, or cropped pants
- Shorts, stirrup and leggings, culottes, gaucho pants, spandex, or split skirts
- Halter tops, tank tops, sleeveless, spaghetti straps, or tube tops
- Low cut necklines (no visible cleavage)
- Any clothing that reveals bare backs and/or midriffs
- Blue jeans, jean-styled and/or other denim clothing of any color
- Overalls





Dress Code

- **Unacceptable Attire continued**
 - Work-out or fitness-type clothing
 - See-through clothing or sheer fabrics
 - Extreme form fitting, revealing or provocative clothing
 - Flip-flops, thong-type or casual sandals
 - No platform shoes, or spiked heels
 - No Crocs or “Five Finger” type shoes
- **Appearance**
 - Hair shall be neat, clean, manageable and appropriately styled to meet safety standards of the related job function.
 - Extreme hair styles such as excessive teasing, extreme hair coloring, glitter, sparkles, and spray on hair paint are unacceptable.
 - Hats and combs worn in hair are not permitted.
 - Patient Care areas requires hair, shoulder length or longer, to be put up in a ponytail or fastened together.





Dress Code

- **Appearance continued**

- Facial hair must be clean and appropriately trimmed, and sideburns may not extend past the earlobes.
- Body jewelry is not permitted. Woman can wear no more than two piercings in each ear. Men can wear one stud earring total.
- No tattoos or body art shall be visible, they must be covered at all times.
- Heavy or bulky jewelry, bracelets, large dangling earrings or hoop-style earrings larger than one and one-half (1½) inches in diameter and large rings may not be worn.
- Ear gauges are not allowed.
- In areas of direct patient care or as dictated by departmental safety considerations:
 - No more than 2 rings and bracelets per hand (wedding sets are considered 1 ring)
 - Necklaces may be worn if secured under the uniform or clothing





Dress Code

- **Appearance continued**

- Fingernails and toenails shall be neat and clean. They must be appropriately trimmed to meet the safety and performance standards of their related job function.
- Extreme colored polish, nail art and nail jewelry are unacceptable. Examples of extreme include black, purple, blue, green, gold, silver or glitter.
- Frequent baths or showers and use of deodorant are expected.
- Perfume, cologne or fragrance is not to be worn in patient-care areas. Lightly scented fragrances used in moderation may be allowed in non-patient care areas.
- Cosmetics for women should be in natural shades and applied moderately
- Cosmetics are not allowed for men unless used for medical reasons such as the concealment of a disfigurement.





Dress Code

- **Appearance continued**

- Due to infection control considerations, all surgical personnel, all staff involved in cleaning processes, all direct patient caregivers, and all staff that prepares products such as patient-care equipment, food/beverages, medications, sterile instrumentation, and supplies for patients must adhere to these additional guidelines:
 - No artificial nails, nail wraps, gels or acrylic may be worn. Artificial nails are substances or devices applied to natural nails to augment, enhance, or extend the nails. They include but are not limited to bonding, tips, extenders, wraps, gels, tapes, acrylics, appliqués, inlays, nail jewelry, and nail piercing.
 - Nails shall be no longer than $\frac{1}{4}$ " beyond the tip of the finger.
 - No chipped nail polish or jagged edges.





Identification

- ID Badges/Cards must be worn at all times.
- Students will either wear their school badge and buddy badge or pick up a St. Mary's badge from the Graduate Medical Education Office. (Refer to Identification of Staff & Visitors Policy and Procedure.)
 - School Badges – Clinical, Practicum, and Non-clinical students
 - St. Mary's Badge – Instructors, Medical Students, Advance Practice, and Pharmacy Students.
- For verification – a valid Driver's license is required when picking up ID badge.





Integrity & Compliance Program

- Our commitment to act with integrity, making decisions based on the highest standards of ethical behavior and following all laws and regulations
- Resources to assist you in meeting your legal, ethical and professional responsibilities as a colleague St. Mary's and Trinity Health:
 - Standards of Conduct or Code of Conduct
 - Education and training
 - Policies, procedures and guidance
 - Assistance in answering your questions and reporting issues and concerns





Standards of Conduct

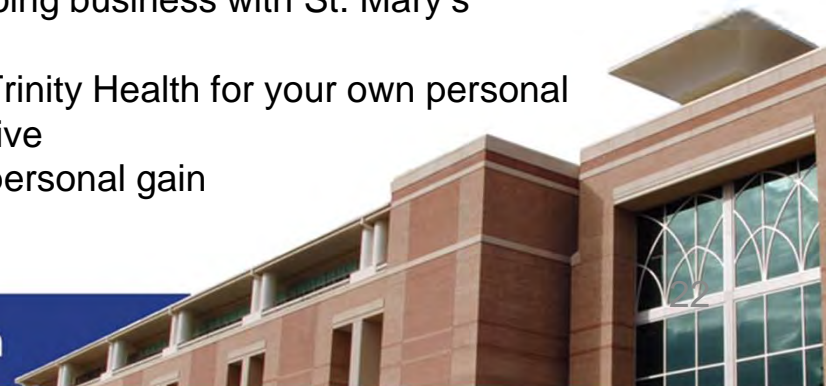
- **Fraud and Abuse: What's expected of you?**
 - Act with honesty and integrity in all St. Mary's activities
 - Follow all laws and regulations that apply to your work and ask for assistance if you have questions
 - Follow all requirements of government (e.g. Medicare and Medicaid) and other third-party payers that pay for health care services
 - Participate in training and education on laws and regulations that apply to your work responsibilities
 - Cooperate with any government investigation. Never destroy or alter documents or make false statements in connection with a government investigation





Standards of Conduct

- **False Claims Act** is a Federal law that makes it a crime to knowingly falsify a record or file a false claim involving federal health care programs (e.g., Medicare, Medicaid, etc.)
 - **Whistleblower protections:** The federal and state False Claims Acts protect anyone who files a False Claim lawsuit from being fired, demoted, threatened or harassed by their employer for filing the suit.
 - **Our Promise:** Our colleagues work hard to ensure that every claim for payment for the care we provide is correct and accurate, so that we do not violate the law, or break the trust we maintain with our patients and communities.
- **Conflicts of Interest:** A situation when outside activities or relationships influence - or could appear to influence - decisions you make in your work for St. Mary's and Trinity Health
 - Examples
 - Accepting or offering gifts from/to vendors doing business with St. Mary's or Trinity Health
 - Steering business away from St. Mary's or Trinity Health for your own personal gain, or the personal gain of a friend or relative
 - Using confidential business information for personal gain





Standards of Conduct

- **Conflicts of Interest continued**
 - Our responsibility
 - Maintain objectivity and avoid actual or potential Conflicts of Interests in relationships with vendors and business partners
 - Disclose and obtain advance approval from your supervisor of any situation that could represent a Conflict of Interest
 - Make decisions in the best interest of our patients and CHE Trinity Health
- **EMTALA:** Emergency Medical Treatment and Active Labor Act, commonly known as the Anti-Dumping regulation
 - Requires any facility with a dedicated Emergency Department to screen, treat and stabilize within their abilities/capacity anyone who presents with a potential emergent medical condition regardless of ability to pay.
 - Applicable to anyone presenting on our campus in need of, or requesting treatment for, an Emergent Medical Condition (“EMC”). It is NOT just an Emergency Department issue.





Standards of Conduct

- **Privacy and Security**

- Know how to safeguard and protect patient information used in your job according to CHE Trinity Health, St. Mary's Health Care System, and department policies and procedures.
- Notify a supervisor immediately if you become aware of lost, stolen or unprotected patient information.
- Identify/raise any concerns about the privacy and security of patient information with a supervisor or the St. Mary's Privacy Official, Tricia Davis.

- **Resources to Answer Your Questions**

- You are responsible for seeking answers to your questions and raising issues and concerns, particularly related to compliance with laws and regulations
- Many resources are available to assist you including:
 - Your Program Director (or program leaders)
 - Mission/Spiritual Care/Ethics
 - Quality and Performance Improvement
 - Privacy and Security Officials
 - Compliance Officer
 - The CHE Trinity Health Integrity Line





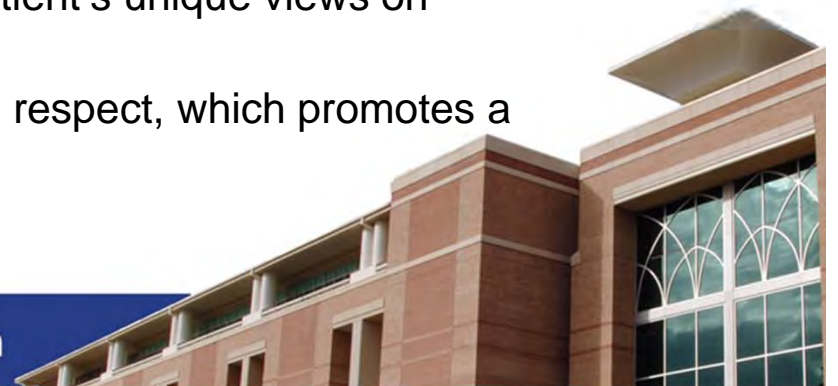
Patient Rights & Cultural Diversity

- **Patients have the right to:**

- Access Care
- Respect & Dignity
- Privacy & Confidentiality
- Personal Safety
- Information
- Communication
- Consent
- Consultation
- Refusal of Treatment

- **Cultural Diversity**

- We must always consider a patient's culture when giving care or addressing patients or families in the hospital.
- A patient may belong to ethnic, regional, religious and other groups where there are values, beliefs and practices that possibly affect how a patient views health care.
- Treat each patient as an individual.
- Avoid stereotyping and learn about each patient's unique views on health care.
- Each patient has the right to be treated with respect, which promotes a better response to their care.





Patient Rights & Cultural Diversity

- Guest/Language Services can provide interpretation Monday – Friday, 7:00 am to 4:00 pm.
- The Language Line can also be utilized 24/7 from designated phones in each department.



Available languages:

- Chinese
- Vietnamese
- Russian
- Arabic
- Korean
- Polish
- Bosnian
- Tamil
- Somali
- Farsi
- Portuguese
- Japanese
- Bengali
- Haitian Creole
- Albanian
- Armenian
- Indonesian
- Cambodian
- **Dozens** more...





Integrity Line 1-866-477-4661

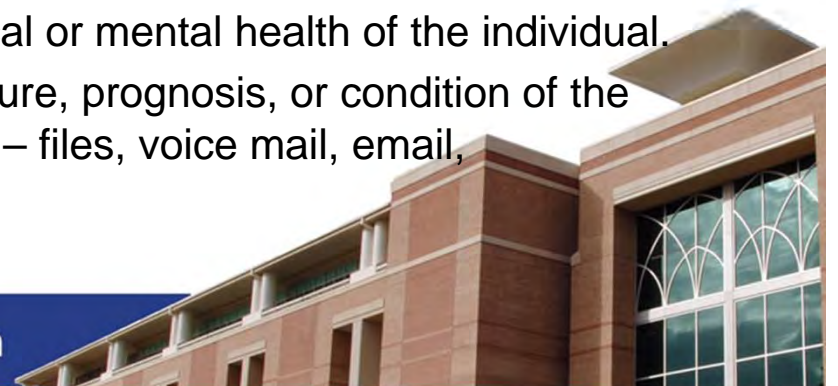
- Hotline service operated 24/7/365 by an outside service using trained professionals.
- Reports may also be filed online using **access code: THO** at www.mycompliancereport.com.
- Investigations are generally conducted within 30 days, and responses made available to the caller through the call center.
- Callers may remain anonymous, if they choose; all reports are treated confidentially.
- “No Retaliation” policy.





Privacy, Security, & Confidentiality

- **HIPAA:** Health Insurance Portability and Accountability Act 1996.
 - Federal Law that:
 - Protects Health Information
 - Gives patients more control over their Medical Records
 - Holds violators accountable
 - All information concerning patients is privileged information and should only be shared with individuals who have a need to know for treatment, payment, or operating purposes.
 - Protects an individual's health information and his/her demographic information. This is called "protected health information" or "PHI". Even without the patient's name, information meets the definition of PHI if:
 - you look at certain information and you can tell who the person is.
 - relates to past, present or future physical or mental health of the individual.
 - describes a disease, diagnosis, procedure, prognosis, or condition of the individual and can exist in any medium – files, voice mail, email, fax, or verbal communications.





Privacy, Security, & Confidentiality

- **HIPAA continued**

- Health providers can disclose an individual's PHI without the patient's authorization if the disclosure deals with treatment, payment, operations, or if the information is mandated by law. Otherwise, the patient will need to authorize the provider to make the disclosure.
- Requires the following entities to comply:
 - **Health Care Providers:** Any provider of medical or other health Services that bills or is paid for healthcare in the normal course of business. Health care includes preventive, diagnostic, therapeutic, rehabilitative, maintenance, or palliative care, and counseling, services, assessment, or procedure with respect to the physical or mental condition, or functional status of an individual.
 - **Health Care Clearinghouse:** Businesses that process or facilitate the processing of health information received from other businesses. It includes groups such as physician and hospital billing services.
 - **Health Plans:** Individuals or group plans that provide or pay the cost of medical care and includes both Medicare and Medicaid programs





Privacy, Security, & Confidentiality

Who is responsible for protecting privacy?

- Healthcare Providers
- Healthcare Plans
- Healthcare Clearing Houses
- Employees
- Volunteers
- Students
- Observers
- Venders

*We are all
responsible!*





Privacy, Security, & Confidentiality

- **HIPAA Privacy Rule**

- protects the privacy of individually identifiable health information.
- requires entities to give notice of privacy practices to every patient
- gives patients the right to request, access, amend, restrict, and complain regarding their PHI (Protected Health Information)
- Other forms of communication that the Privacy Rule applies:
 - Verbal communication – Do not talk with others about patients. Patient information should only be discussed with those that need to know.
 - Posting on Social Media – Do not post about patients, even in general terms.
 - Personal Devices – Do not transmit authorized PHI using personal cell phones or email.
 - Snooping into Medical Records – Only access patient records and areas appropriate to job function.





Privacy, Security, & Confidentiality

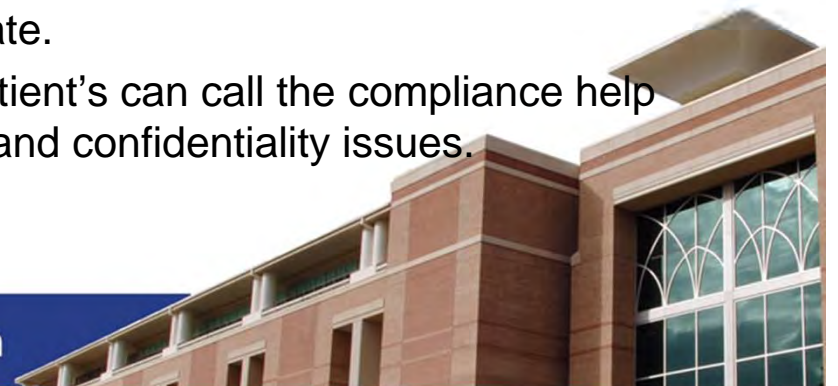
- **HIPAA Security Rule:**
 - addresses the security of electronic protected health information (EPHI).
 - Requires entities to have appropriate safeguards and controls in place to ensure confidentiality, integrity, and security of EPHI.
- **HIPAA Breach Notification Rule:**
 - Required covered entities and business associates to provide notification following a breach.
 - Requires entities to log all suspected and actual breaches.
 - Requires entities to annually file actual breaches with the Office of Civil Rights (OCR).





Privacy, Security, & Confidentiality

- **Other ways St. Mary's Health Care ensures privacy, security, and confidentiality**
 - Password protection – All medical records programs require password to access.
 - Release and disclosure of information – without valid patient authorization, consent, or legal exception, St. Mary's cannot disclose protected health information unless it is de-identifiable.
 - Patient authorization – patient or legal representation must give authorization for release of information.
 - Patient Rights – explained and given to patient's and families. The patient or person authorized to consent must sign and date that they were explained to him or her.
 - Disposal of PHI documents – paper records are scanned into electronic medical record then are shredded after the purge date.
 - Compliance Help Line (706) 355-7243 – Patient's can call the compliance help line for information about privacy, security, and confidentiality issues.





Privacy, Security, & Confidentiality

- **What can a patient do if they feel their HIPAA rights have been violated?**
 - A patient has the right to submit a complaint if he believes that the health provider has:
 - Improperly used or disclosed their PHI
 - Concerns about their HIPAA Privacy policies
 - Concerns about the provider's compliance of its privacy policies.
 - The patient may file the complaint with either of the following:
 - The provider's Chief Privacy Officer
 - The US Department of Health and Human Services, Office of Civil Rights, www.hhs.gov/ocr/hipaa
- **Violations for HIPAA can result in:**
 - Criminal Penalties
 - Monetary Fines
 - Tarnished Reputation
 - Loss of License
 - Termination





Emergency Preparedness



- **How to report an Emergency**
 - Non-Hospital: dial “911”
 - In Hospital: Dial “111”. State your name and title.
 - State the emergency (Code Red, Code Blue, etc.)
 - State your location
 - For Code Red, state what is burning.
- **DO NOT hang up until the operator has repeated the information back to you.**





Emergency Preparedness



If a code is called, look to your Preceptor or Hospital Staff for guidance.

Event	Revised Codes (as per recommended plain language standards)
Fire / Alarm	“Code Red” remains (no change)
Medical Emergency	“Code Blue” remains (no change)
Utility / Technology Interruption	“Facility Alert” + Type of Service Interruption + Descriptor + Location
Evacuation / Relocation	“Facility Alert” + Evacuation (or Relocation) + Descriptor + Location
Hazardous Materials Spill	“Facility Alert - Hazardous Material Spill” + Descriptor (if any) + Location
Mass Casualty Incident (MCI)	“Facility Alert - Mass Casualty Incident” + Descriptor (Trauma, Rad, Bio, Chem, or Unk)+ Location
Weather (e.g. Tornado)	“Facility Alert – [Applicable Weather] Warning”+ NWS Statement +Location
Infant/Child Abduction or Missing Person	“Security Alert - Missing Person” + Description of Person + Last Seen Location
Armed Intruder / Shooter/ Hostage Situation	“Security Alert – [Applicable Threat]” + Location + Perpetrator’s Description + “Stay Clear”
Bomb Threat / Suspicious Package	“Security Alert – [Applicable Threat]” + Location + “Stay Clear”
Controlled Access/Egress	“Security Alert – Lockdown Implemented” + Location
Behavioral Disturbance	“Security Alert – Public Safety Officers Needed” + Location





Emergency Preparedness

- **Code Red**

- **Fire Safety**

- Prepare yourself before fire strikes in the workplace.

- Memorize all exit and emergency routes.

- Identify all alarms. Learn how to operate fire extinguishers.

- To respond rapidly and effectively, memorize the acronym: **RACE**

- » **R Remove patients**

- » **A Activate the alarm**

- » **C Confine/contain the fire**

- » **E Evacuate or if safe to do so, Extinguish**

- The MRI Department will, in event of a fire, practice and implement R.A.C.E.; Rescue anyone in the area; Alarm the area; Confine the area; allow the sprinkler to extinguish the fire. ***DO NOT CARRY AN EXTINGUISHER INTO THIS AREA UNDER ANY CIRCUMSTANCES!***

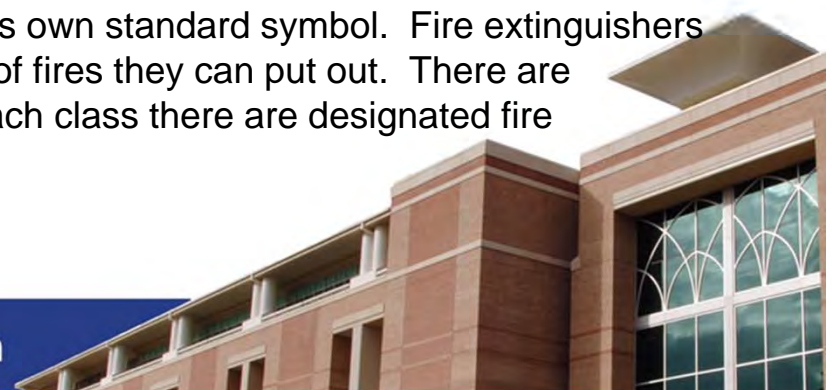




Emergency Preparedness

- **Code Red Continued**

- When you discover a fire, rescuing patients in immediate, life-threatening danger is always your top priority. This means you should always stop to investigate any unusual odor at once. If you smell smoke coming from behind a door:
 - Feel the door with the back of your hand before opening it
 - If it's too hot to touch, don't open it
 - If it's touchable, open it slowly
 - If you must enter the scene of the fire to rescue a patient, stay low, remember that smoke and heat rise to the ceiling. Crawl beneath them.
- Fire Extinguishers
 - Portable fire extinguishers are designed to put out a small fire or control a larger one until the fire department arrives. Just as there are different kinds of fires, there are different kinds of fire extinguishers.
 - Each of the three basic classes of fires has its own standard symbol. Fire extinguishers are labeled with the symbols for the classes of fires they can put out. There are 3 Classes of Fire: Class A, B, and C. For each class there are designated fire extinguishers.





Emergency Preparedness

Class A:

Ordinary combustibles such as wood, cloth, paper, rubber, and many plastics.



Class B:

Flammable liquids such as gasoline, oil, grease, tar, oil-based paint, lacquer, and flammable gas.



Class C:

Energized electrical equipment including wiring, fuse, boxes, circuit breakers, machinery, and appliances.



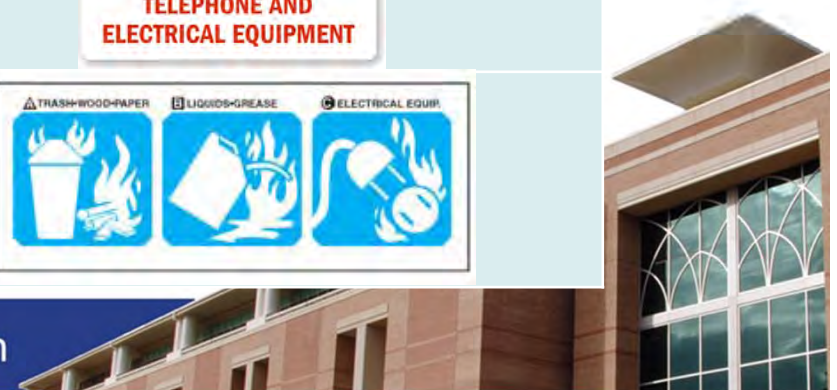
HALON

Use only on highly sophisticated equipment. Heavier-than-air gas settles into hard-to-reach places to smother the fire. This fluoro-carbon gas leaves no coating that could harm electronic equipment



A-B-C

All of the fire extinguishers at St. Mary's are "multipurpose" A-B-C models, which can be used on all three classes of fire.





Emergency Preparedness

HOW TO USE A FIRE EXTINGUISHER

Remember the Phrase **PASS**

1 Pull
the pin



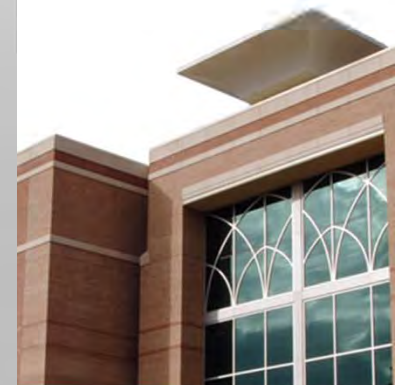
2 Aim at
the base
of the fire



3 Squeeze
the handle



4 Sweep
from side
to side





Safety

- **Electrical Safety**

- If equipment does not work properly, disconnect it, remove it from the patient care area, attach a “Remove from Service” tag and call Biomedical Engineering for repair.
- If equipment is dropped it must be inspected before being put back into use.
- If you notice a potential electrical hazard (equipment with cracks, broken switches, torn or frayed cords, bent plugs, or if liquid has been spilled on it, etc.) remove the equipment from service immediately
- Use only three prong plugs (no adapters)
- Never stack papers or books on electrical equipment
- Grasp plug, not cord when disconnecting equipment
- Use of electric razors on patients receiving oxygen is prohibited
- If a piece of equipment is dropped, notify the Bio-Med department because it must be inspected before being put back into use
- All electrical equipment must be inspected by the Bio-Med or Engineering department before being used in the hospital





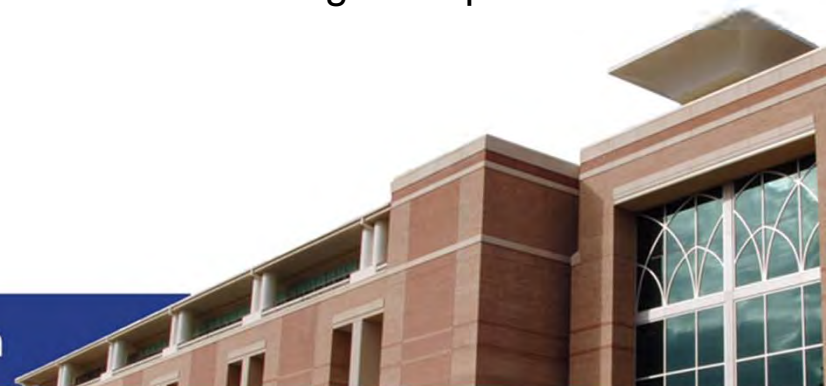
Safety

- **Electrical Safety continued**

- Never use extension cords unless they are approved by engineering and never bend plugs to make them fit into outlets
- Report defective electrical outlets and equipment so they can be repaired or replaced.

- **Radiation Safety**

- Three precautions to take around X-ray machines: Time, Distance, and Shielding
- Tell your supervisor if you might be pregnant.
- Stand 6 feet or more away from a mobile X-ray unit when an exposure is being made.
- A lead apron is required if you must remain in the room during an exposure.





Safety

- **MRI Safety**

- Magnetic Resonance Imaging (MRI) scanners use powerful magnets to obtain highly detailed images. It is 1 ½ times the magnetic pull of the earth. Extreme caution should be used when entering the MRI scan room.
- Always consult with the MR technologist before entering the room.
- Ensure that all credit cards, debit cards, work ID badge, cell phones, etc. have been removed from pockets.
- No ferrous objects...scissors, hemostats, screwdrivers, etc. Life threatening injuries can occur to anyone in the path of a ferrous object that has entered the magnetic field and grabbed by the magnetic force of the scanner.





Safety

- **General Safety**

- Keep everything in its proper place
- Clean up or report spills immediately
- Watch out for wet floors
- Report loose or worn flooring or torn carpet
- Correct problems or report any unsafe condition immediately
- Stay attentive
- Don't daydream or take shortcuts
- Place waste in appropriate receptacles
- **Report suspicion of impairment to Supervisor.**
 - Signs of Impairment:
 - Chronic absenteeism or tardiness
 - Abnormal or erratic behavior
 - Slurring of speech
 - Difficulty in recalling

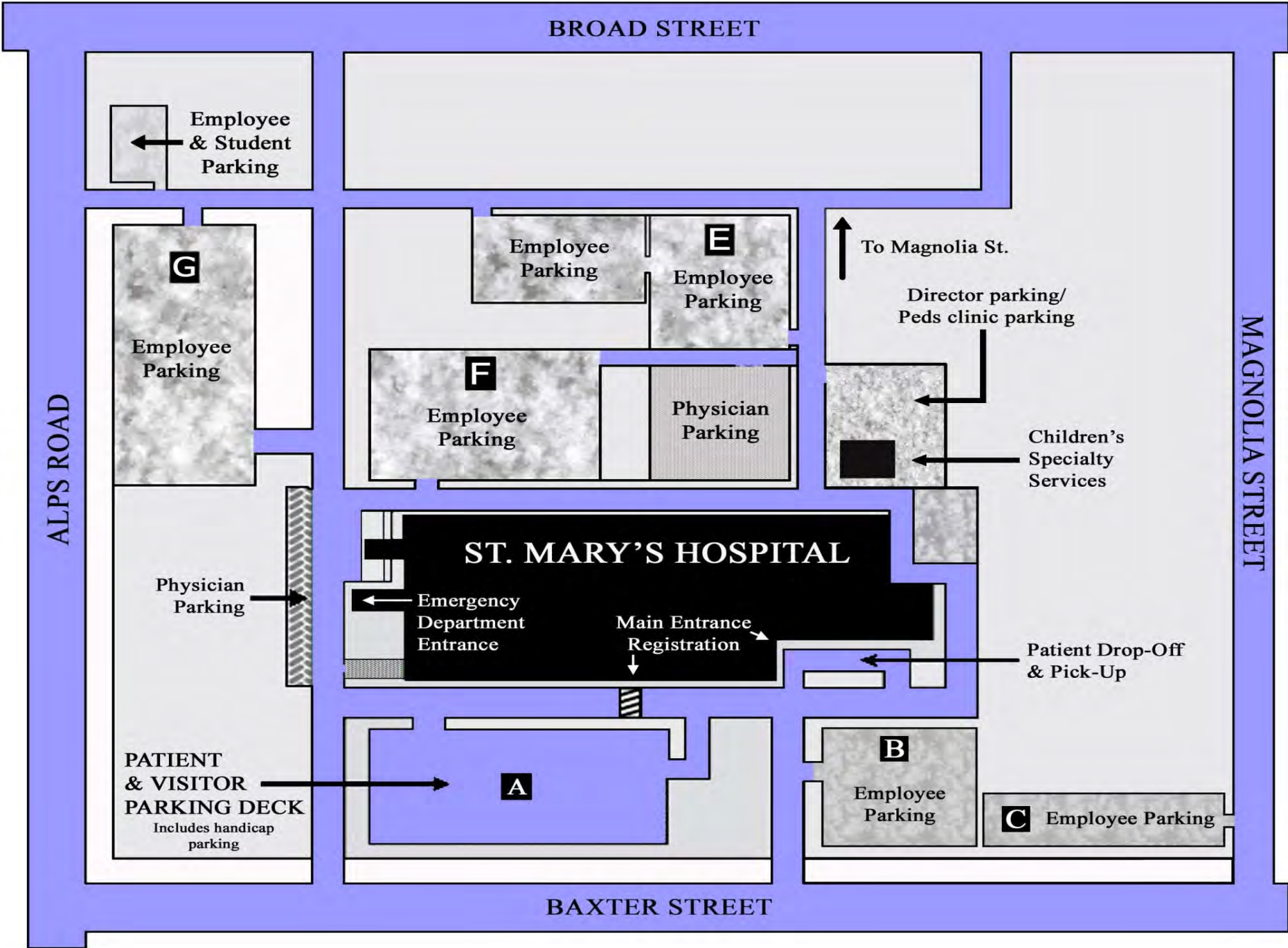




Security

1. Suspicious person – Call 111
2. Alcohol/Drugs are not allowed
3. Weapons are not allowed
4. **DON'T Think it will be ok! CALL 111**
5. Be sure to secure all valuables and equipment
6. Smoking - Tobacco free campus
7. Parking: All employees should have a parking permit.
8. Contractors working at STMH daily will wear picture Ids. All others will wear numbered ID's

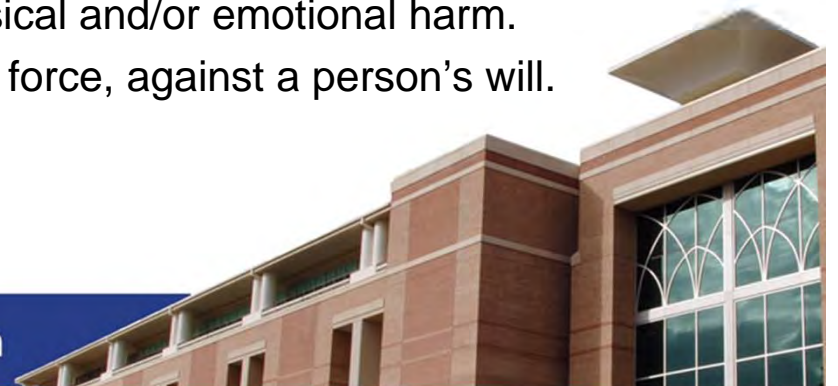






Abuse & Neglect

- Every patient has the right to have access to protective services.
- Possible victims of abuse and neglect are identified using objective criteria.
- Anyone who reasonably believes that the physical or mental health or welfare of a patient receiving medical services, has been, is/or will be adversely affected by abuse or neglect by a person must report it.
- Abuse and neglect includes the following:
 - **Physical Assault:** The violent physical or verbal attack or use of physical force resulting in physical and/or emotional harm.
 - **Domestic Abuse:** The intentional violent or controlling behavior in the context of an intimate relationship, resulting in physical and/or emotional harm.
 - **Rape:** The unlawful sexual intercourse, by force, against a person's will.





Abuse & Neglect

- Types of abuse and neglect continued:
 - **Sexual Assault:** An unlawful sexual act (fondling, masturbation, unclothing, oral and/or genital contact) or the use of objects for physical stimulation performed upon another without consent.
 - **Child and Elder Abuse and Neglect:** To willfully inflict bodily harm and/or to passively or actively withhold medicine, food, clothing, treatments, basic hygiene and emotional support from a person age 60 years and older or a child under age 18 by a spouse, child, family member, legal guardian or caregiver.





Patient Safety

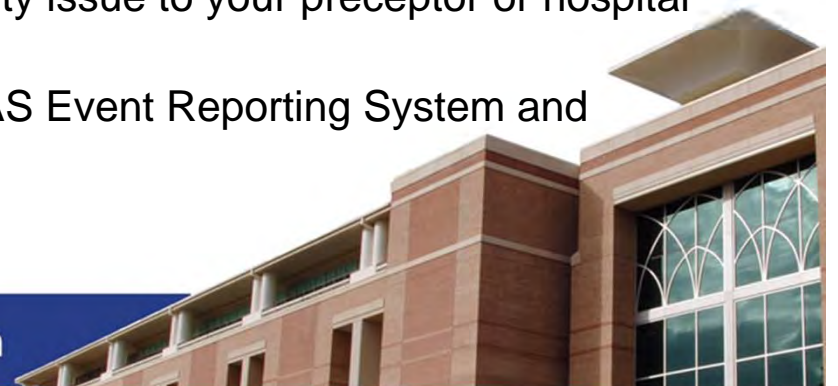
- Everyone in the hospital has a role in making health care safe.
- Health care organizations across the country are working to make health care safety a priority.
- Each person can play a vital role by becoming an active, involved member of the healthcare team.
- Effective **Team Communication** is an important part of ensuring the safety of each patient.
- The staff of St. Mary's uses a standardized process for communication called **SBAR**. When discussing important patient information throughout the continuum of a patient's care, the following format is most effective:
 - **S**ituation
 - **B**ackground
 - **A**ssessment
 - **R**ecommendation





Patient Safety

- **So what is being done to improve patient safety and reduce risks to patients?**
 - Recognizing and acknowledging the risks to patient safety and the potential for medical and health care errors;
 - Being proactive instead of reactive and initiating actions to reduce risks;
 - Not hiding problems but reporting what has been found and the actions taken;
 - Looking at hospital processes and systems;
 - Minimizing individual blame if involved in a medical or health care error;
 - Learning everything we can about medical/health care errors;
 - Sharing knowledge to effect behavioral changes
- **What can you as a healthcare team member do?**
 - Immediately report any potential patient safety issue to your preceptor or hospital staff.
 - The incident will be documented in the MIDAS Event Reporting System and submitted to the Risk Manager.





Infection Prevention

We're all part of the TEAM!

Keep your HANDS CLEAN!

- Hand washing or hand decontamination is the single most important means of preventing the spread of infections.
 - There are 3 considerations that will help you decide the level of hand hygiene care you need.
 - Environment
 - Patient risk of infection
 - Staff level of contamination
- Perform hand hygiene using either a non-antimicrobial soap and water or an alcohol-based hand rub.
- Clean hands when they are visibly dirty or contaminated with blood or other body substances, before eating and drinking, and after using the restroom.





Infection Prevention

CDC
National Center for
Infectious Disease Control

CLEAN HANDS SAVE LIVES

Protect patients, protect yourself

Influenza
Staphylococcus
Candida
Klebsiella
Pseudomonas
RSV
Enterococcus

Alcohol-rub or wash
before and after *EVERY* contact.

www.cdc.gov/handhygiene

St. Mary's Health Care System



Infection Prevention

- **Hand-washing Technique**
 - **Non-antimicrobial Soap & Water**
 - Apply soap to wet hands.
 - Lather and vigorously rub hands together, covering all surfaces of hands, fingers and fingernails for at least 15 seconds.
 - Rinse thoroughly under a stream of warm water.
 - Dry completely with a disposable paper towel.
 - Use disposable towel to turn off water.





Infection Prevention

FIGHT GERMS BY WASHING YOUR HANDS!

1 Wet your hands

2 Soap

3 Lather and scrub - 20 sec

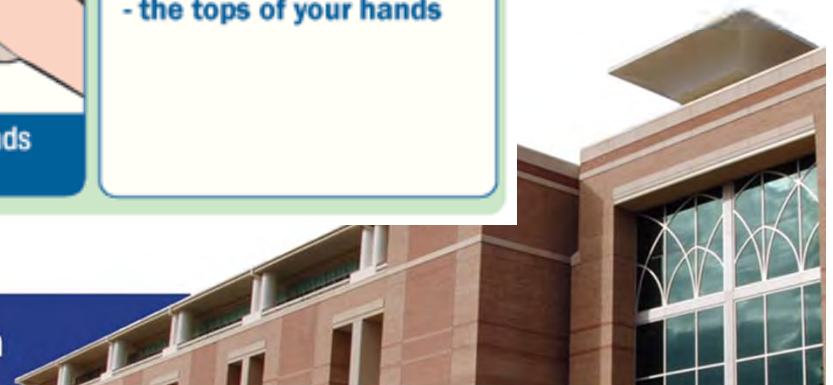
4 Rinse - 10 sec

5 Turn off tap

6 Dry your hands

DONT FORGET TO WASH:

- between your fingers
- under your nails
- the tops of your hands

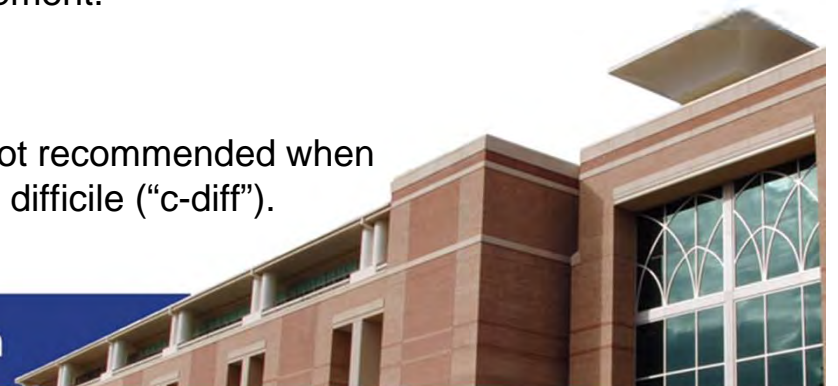




Infection Prevention

– Alcohol-Based Hand Rub

- Dispense product into palm of hand.
- Rub until dry, taking care to apply to all surfaces of fingers and hands.
- Indications - If hands are not visibly soiled, hand hygiene may be performed using an alcohol-based hand rub in the following situations:
 - » Before having direct contact with patients.
 - » After contact with body fluids, excretions, mucous membranes or non-intact skin.
 - » Before donning sterile gloves when inserting indwelling urinary catheters, peripheral vascular catheters, or other invasive devices.
 - » After removing gloves.
 - » After contact with the patient's intact skin (i.e. taking a pulse or blood pressure, and lifting a patient).
 - » When moving from a contaminated body site during patient care.
 - » Before entering or re-entering equipment.
 - » Before medication preparation.
 - » After giving direct care to a patient.
 - » Use of alcohol-based hand rub is not recommended when caring for patients with *Clostridium difficile* ("c-diff").





Infection Prevention

HAND HYGIENE TECHNIQUE

WITH ALCOHOL-BASED FORMULATION

 <p>1</p>	 <p>2</p>	 <p>3</p>
<p>Apply a palmful of sanitizer in palm and cover all surfaces of hands and fingers</p>		<p>Rub hands palm to palm</p>
 <p>5</p>	 <p>6</p>	 <p>7</p>
<p>Right palm over left back of hand with fingers interlaced and vice versa</p>	<p>Palm to palm with fingers interlaced</p>	<p>Back of fingers in palms with fingers interlocked</p>
 <p>7</p>	 <p>8</p>	 <p>9</p> <p>20-30 Seconds</p>
<p>Rotational rubbing of thumb in palm and vice versa</p>	<p>Rotational rubbing with clasped fingers in palm and vice versa</p>	<p>Once dry your hands are safe</p>

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Infection Prevention

- **Environmental Cleaning**
 - All items and surfaces used for multiple patient contacts must be disinfected between uses. This includes items you carry with you
 - Any blood or potentially infectious material must be cleaned and decontaminated immediately
- **Engineering Controls** - Controls and practices that remove or isolate hazards in the work place.
 - Sharps disposal containers
 - Self-sheathing or needleless systems
 - Safer medical devices
 - Medical waste containers
 - Biological Safety Cabinets
 - Resuscitation mouthpieces/bags





Infection Prevention

- **General Workplace Practices**

- Things **not to do** while in patient care areas, laboratories or other contaminated work areas:
 - Eating
 - Drinking
 - storing of food
 - applying cosmetics/lip balm
 - handling of contact lenses
- Food and drink may only be stored in a refrigerator *intended for food storage*. Staff and patient food refrigerators are separate.





Infection Prevention

- **Transmission-Based Precautions**
 - What Do We Do?



**Protect
Ourselves!**





Transmission-Based Precautions

- Used in addition to Standard Precautions
- Used for patients known or suspected to be infected with **highly transmissible** or **epidemiologically important** pathogens



Isolation Caddy



SUPER SANI-CLOTH®
GERMICIDAL DISPOSABLE WIPE
TOALLITAS GERMICIDAS DESECHABLES

Use on hard, non-porous environmental surfaces.
Úselas en superficies ambientales duras y no porosas.

GENERAL GUIDELINES FOR USE:
INSTRUCCIONES GENERALES DE USO:



1. Always dispense wipe through lid. Wear gloves when dispensing and using this product. Find center of wipe roll, twist corner of wipe into a point and thread through the hole in the container lid. Pull through about one inch. Replace lid.
Siempre dispense limpien por la tapa. Use guantes para suministrar y utilizar este producto. Quite la tapa, retire el rollo al centro y deséchelo. Localice el centro del rollo de toallitas, retuerza el vértice de la toallita para formar una punta y hágala pasar por el orificio de la tapa del bote. Jálele aproximadamente una pulgada hasta afuera. Vuelva a colocar la tapa.



2. Cover the opening half way with one hand. Remove wipe with a uniform pull away from face and eyes. When not in use, keep lid closed to prevent moisture loss.
Cubra la mitad de la abertura con una mano. Retire la toallita de un tirón, en dirección contraria a la cara y a los ojos. Cuando no esté usando las toallitas, mantenga la tapa cerrada para evitar la pérdida de la humedad.



3a. When heavy soil is present, clean and then disinfect. To Clean: Use first wipe to remove heavy soil from surface. To Disinfect: Use second wipe to thoroughly wet surface for a full two (2) minutes.
En caso de mucha suciedad, limpie y luego desinfecte. Para limpiar: Use la primera toallita para quitar la suciedad más importante de la superficie. Para desinfectar: Use una segunda toallita para mojar bien la superficie durante dos (2) minutos completos.



3b. In the absence of heavy soil, take a clean wipe and thoroughly wet surface for a full two (2) minutes to disinfect.
Si no hay mucha suciedad, tome una toallita limpia y moje bien la superficie durante dos (2) minutos completos para desinfectarla.



4. Treated surface must remain visibly wet for a full two (2) minutes*. Use additional wipe (s) if needed to assure continuous two (2) minute wet contact time. Allow to air dry.
La superficie tratada debe quedar visiblemente mojada durante dos (2) minutos completos. Use una o más toallitas adicionales, de ser necesario, para asegurar un tiempo de contacto húmedo constante de dos (2) minutos. Deje que se seque al aire.*



5. Do not reuse towelette. Dispose of used towelette in trash, or in accordance with local regulations for infectious waste disposal. Do not flush in toilet.
No vuelva a utilizar la toallita. Bote a la basura la toallita usada o deséchela de acuerdo con las regulaciones locales para la eliminación de residuos infecciosos. No la tire por el inodoro.



NOT FOR USE ON SKIN!
THIS IS NOT A BABY WIPE.
¡NO LAS USE EN LA PIEL!
NO SON TOALLITAS PARA BEBÉS



PDI
BE THE DIFFERENCE™

* Please note, what looks visibly wet on one surface type may look different on another surface type. Disinfectants are affected by surface humidity, temperature and air flow. These factors must be taken into consideration when following label directions.
* Tenga en cuenta que lo que parece visiblemente húmedo sobre un tipo de superficie puede verse diferente sobre otro tipo de superficie. La velocidad de evaporación depende de la humedad, la temperatura y el flujo de aire en el ambiente. Estos factores deben tenerse en cuenta al seguir las instrucciones de la etiqueta.
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SANI-CLOTH® BLEACH
GERMICIDAL DISPOSABLE WIPE
TOALLITAS GERMICIDAS DESECHABLES

Use on hard, non-porous environmental surfaces.
Úselas en superficies ambientales duras y no porosas.

GENERAL GUIDELINES FOR USE:
INSTRUCCIONES GENERALES DE USO:



1. Always dispense wipe through lid. Wear gloves when dispensing and using this product. Find center of wipe roll, twist corner of wipe into a point and thread through the hole in the container lid. Pull through about one inch. Replace lid.
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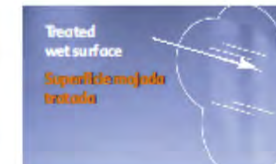
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Cubra la mitad de la abertura con una mano. Retire la toallita de un tirón, en dirección contraria a la cara y a los ojos. Cuando no esté usando las toallitas, mantenga la tapa cerrada para evitar la pérdida de la humedad.



3a. When heavy soil is present, clean and then disinfect. To Clean: Use first wipe to remove heavy soil from surface. To Disinfect: Use second wipe to thoroughly wet surface for a full four (4) minutes.
En caso de mucha suciedad, limpie y luego desinfecte. Para limpiar: Use la primera toallita para quitar la suciedad más importante de la superficie. Para desinfectar: Use una segunda toallita para mojar bien la superficie durante cuatro (4) minutos completos.



3b. In the absence of heavy soil, take a clean wipe and thoroughly wet surface for a full four (4) minutes to disinfect.
Si no hay mucha suciedad, tome una toallita limpia y moje bien la superficie durante cuatro (4) minutos completos para desinfectarla.



4. Treated surface must remain visibly wet for a full four (4) minutes*. Use additional wipe (s) if needed to assure continuous four (4) minute wet contact time. Allow to air dry.
La superficie tratada debe quedar visiblemente mojada durante cuatro (4) minutos completos. Use toallitas adicionales, de ser necesario, para asegurar un tiempo de contacto húmedo constante de cuatro (4) minutos. Deje que se seque al aire.*



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NOT FOR USE ON SKIN!
THIS IS NOT A BABY WIPE.
¡NO LAS USE EN LA PIEL!
NO SON TOALLITAS PARA BEBÉS



PDI
BE THE DIFFERENCE™

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Isolation Precautions

- **Contact Precautions**

- When we are notified by the lab a patient has **MRSA**, **ESBLs**, **CRE**, **VRE** or another **MDRO**, they are placed on *Contact Precautions*
- Place **High Alert sticker** on the chart
- Contact Precautions Require:
 - Gowns and Gloves
 - Dedicated equipment
 - Disinfect shared equipment before removing from room
 - Meticulous environmental cleaning
 - Notification to other departments before transportation
 - Wash hands





Isolation Precautions



The Safe Zone is an area inside of a patient's room where personal protective equipment is **not** required. The safe zone is marked by a yellow line on the floor.

Personal protective equipment is required if you must cross the Safe Zone line into the patient's environment.





Contact Precautions

STOP

CONTACT PRECAUTIONS

GOWN ALWAYS:



GLOVES ALWAYS:



HAND HYGIENE ALWAYS!
Before and after contact with the patient or their environment.



Purple top cleaner
is used to disinfect all surfaces



VISITORS:
Please see nurse before entering patient's room
VISITAS:
Por favor hablen con la enfermera antes de entrar al cuarto.





Contact Precautions

- **Colonization vs Infection**

- If you carry a bacteria on your body without signs of an infection then we call that being “**colonized**” or a “carrier”. In most cases you will not experience sickness or symptoms and do not need to be treated.
- If you develop an **infection** from that bacteria then you will need an antibiotic to treat the infection.
- If that bacteria is a MDRO, then the antibiotic choice is limited to what the is sensitive to the bacteria.

- **MRSA Nasal Screening**

- High-risk populations are screened for MRSA on admission:
 - Rehab
 - Nursing Home
 - Inpatient hospitalization within 1 year (St. Mary's included)
 - Hemodialysis
 - Long term acute care
 - Correctional Facilities

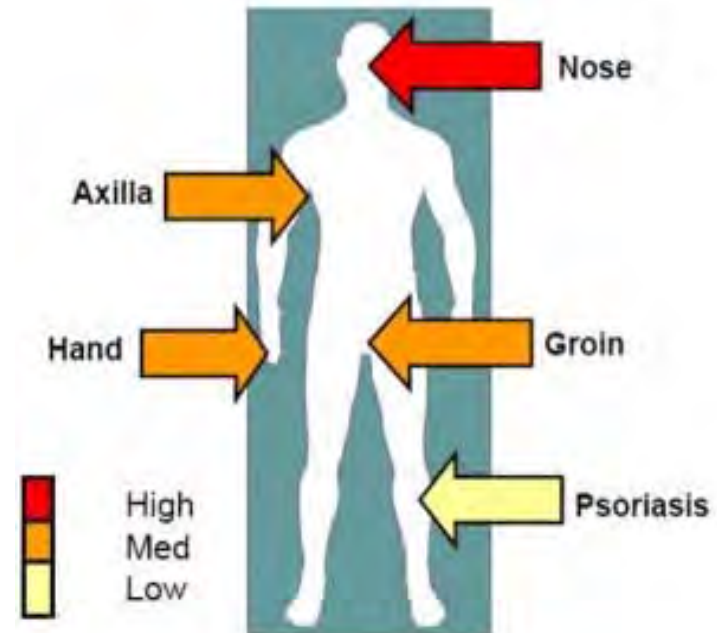




Contact Precautions

- **Methicillin Resistant Staph aureus**

- Gram positive cocci in clusters
- Staph aureus is a skin loving bacteria
- Colonizes in:
 - Nasal passages
 - Pharynx
 - Wounds
 - Skin
 - Axilla
 - Perineum



- **MRSA Readmission**

- Patients with a prior history of MRSA will be placed in isolation on readmission
 - 2nd year negative screening cultures will be required to remove patient from isolation
 - 3rd year patient may be removed from isolation without screening if no risk factors





Contact Precautions

- **ESBL**

- Extended spectrum beta-lactamases' (ESBLs) are gram negative organisms that produce an enzyme which inactivates beta-lactam antibiotics
 - Penicillins
 - Cephalosporins
- Usually treated with our last line of defense for gram negative pathogens
 - Carbapenem antibiotics
- We do not place readmits on Precautions at this time, however; if the infection has been recent call Infection Control for further instructions

- **CRE**

- Carbapenem-resistant Enterobacteriaceae (CRE)
 - Gram negative bacillus
 - Most common type in the USA is Carbapenem-resistant Klebsiella pneumonia or CKP
 - E coli is becoming increasingly common
 - CRE bacteremia and urosepsis are associated with very high mortality rates
- Unusual Forms of Carbapenemase-producing organisms
 - New Delhi Metallo-B-lactamase or NDM-1 and Verona Integron-mediated Metallo-B-lactamase or VIM
 - At this time these are usually isolated from patients who receive medical treatment outside of the US





Contact Precautions

- **VRE**

- Vancomycin-Resistant Enterococci is a gram positive cocci
- Part of the normal GI flora and female genital tract flora
- VRE lives for long periods of time in the environment and on surfaces
- After acquisition of the resistance pattern it may persist for long periods of time and is considered to be a colonization
- Patients with a prior history of VRE will be placed in isolation on readmission
 - Consult Infection Control for instruction regarding discontinuation of isolation for VRE patients

- **Other MDRO's**

- | | | |
|-------------------------|-----------------|--------------------|
| – Staph aureus | – Acinetobacter | – Burkholderia |
| – Enterococcus | – E coli | – Stenotrophomonas |
| – Clostridium difficile | – Klebsiella | – Salmonella |
| – Pseudomonas | – Citrobacter | – Burkholderia |
| – Strep pneumo | – TB | – Stenotrophomonas |
| – Enterobacter | – Gonorrhea | – Salmonella |





Enhanced Precautions

- When we are notified by the lab a patient has **C. difficile**, the patient is placed on *Enhanced Precautions*
- Place **High Alert sticker** on the chart
- Enhanced Precautions require:
 - Gowns and Gloves
 - Dedicated Equipment
 - Disinfect and use **Bleach** wipes before removing shared equipment from room
 - Notification to other departments before transportation
 - Wash hands
- We have a Nurse-driven protocol to collect specimen if patient comes in with or develops diarrhea within the first 3 days of admission





Enhanced Precautions

ENHANCED PRECAUTIONS

GOWN ALWAYS: 

GLOVES ALWAYS: 

BLEACH WIPES ALWAYS: 

HAND WASHING with soap & water ALWAYS!
After contact with the patient or their environment. 

VISITORS:
Please see nurse before entering patient's room
VISITAS:
Por favor hablen con la enfermera antes de entrar al cuarto.

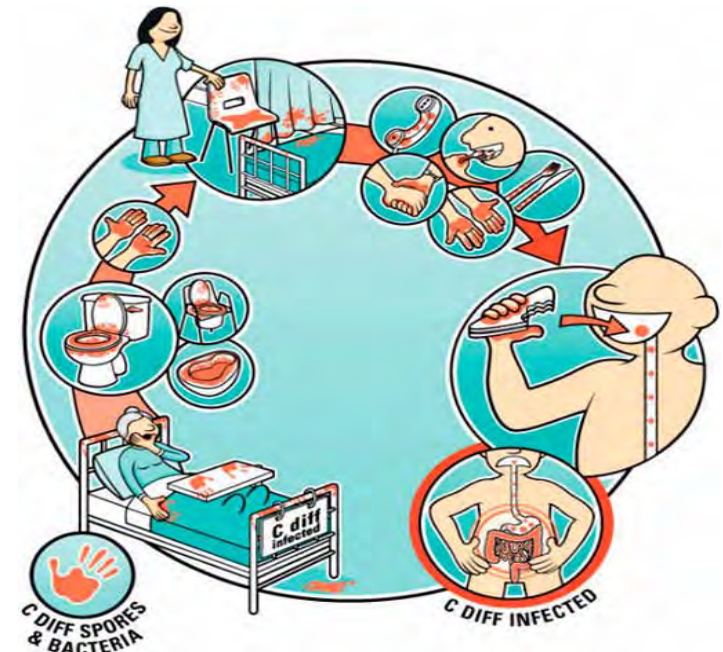




Enhanced Precautions

- **C. difficile Infections**

- Spread through fecal oral route
- Ingested as vegetative or spore form
- Vegetative is killed by stomach acid
- Spore passes through stomach unharmed into the intestines
- If the gut flora has been altered the spore turns the vegetative state and releases the toxins...causing disease
- Can also remain in the gut in spore form without causing disease and is considered colonization
- What alters the gut flora?
 - **# 1 cause is antibiotics**
 - Gastrointestinal surgery
 - Chemotherapy
 - Serious underlying diseases especially of the intestine
 - Enemas, laxatives
 - Age





Enhanced Precautions

- **C. difficile symptoms**

- Watery diarrhea – minimal blood if any
- Strong odor
- Fever
- Abdominal cramping
- Dehydration
- Nausea
- Loss of appetite

- **C. difficile & hand hygiene**

- Alcohol hand gel is **not** as effective as hand washing in ridding the hands of C. difficile spores
- Use alcohol hand gel before donning gloves (don't forget the gown!) and entering the room.
- When exiting, remove gloves, **WASH HANDS** and then use alcohol hand gel





Droplet Precautions


- When we are notified by the lab a patient has an **Influenza, Mumps, Mycoplasma Pneumonia, or Pertussis (whooping cough)**, we place the patient on *Droplet Precautions*
- *90% of our Droplet Precautions are FLU related*
- Place **High Alert sticker** on the chart
- Droplet precautions require:
 - Gowns and Gloves
 - Dedicated Equipment
 - Masks
 - Notification to other departments before transportation
 - Wash hands








Droplet Precautions

**STOP
DROPLET PRECAUTIONS**


MASK ALWAYS
MASK WITH SHIELD WITHIN 3 FT


GOWN ALWAYS:


GLOVES ALWAYS:


HAND HYGIENE ALWAYS!
Before and after contact with the patient or their environment.

VISITORS:
Please see nurse before entering patient's room
VISITAS:
Por favor hablen con la enfermera antes de entrar al cuarto.





Airborne Precautions

- When we are notified by the lab a patient has **TB, Measles (rubeola), Chickenpox** or **Shingles**, we place the patient on *Airborne Precautions*
- Place **High Alert sticker** on the chart
- Must be fit tested and wear N95 mask in room
- Must use a PAPR (powered air-purifying respirator)
- Airborne precautions require:
 - Gowns and Gloves
 - Dedicated Equipment
 - **N-95 Mask**
 - Keep door closed
 - Notification to other departments before transportation
 - Wash hands





Airborne Precautions

AIRBORNE PRECAUTIONS

Always use

Standard Precautions:

**ANYONE ENTERING THIS
ROOM MUST WEAR:**



N-95 RESPIRATOR

Visitors **MUST** see nurse for instructions on proper use



KEEP DOOR CLOSED

at all times

to maintain **NEGATIVE** pressure.

VISITORS:

Please see nurse before entering patient's room

VISITAS:

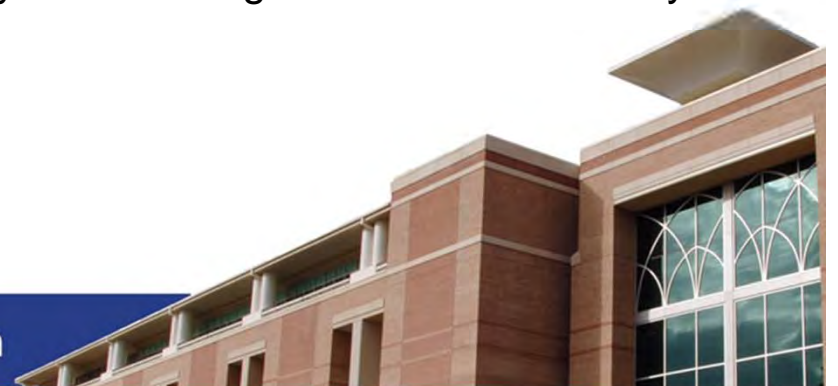
Por favor hablen con la enfermera antes de entrar al cuarto.





Bundles

- **Bundles** are a small straightforward set of practices that, when performed **collectively**, **reliably** and **continuously**, have been proven to improve patient outcome.
 - **VAP Bundle**
 - Head of the Bed 30°
 - Daily Sedation Vacation and daily assessment of readiness to extubate
 - PUD Prophylaxis
 - DVT Prophylaxis Co Ag therapy
 - Teds/SCDs started within 24 hrs.
 - VAP bundle on chart.
 - CXR.
 - Sedation Protocol signed scale given by MD weaning mechanics done daily 8am.q1 sedation check.
 - Mouth care q2 /CHG rinse twice a day





Bundles

– Central Line Bundle

- Hand hygiene before insertion/manipulation
- Maximal barrier precautions during insertion
- Chlorhexidine (CHG) skin antisepsis
- Optimal site selection (**subclavian is first choice**)
- Prompt removal of unnecessary lines
- IV Team checks central lines everyday


– Bladder Bundle

- Bladder Aseptic insertion and proper maintenance is paramount
- Ultrasound may avoid indwelling catheterization
- Condom or intermittent catheterization in appropriate patients
- Do not use the indwelling catheter unless you must!
- Early removal of the catheter using reminders
- Nurse Driven Removal Policy





Bundles


ST. MARY'S
HEALTH CARE SYSTEM

URINARY CATHETER REMOVAL NURSE PROTOCOL

PROTOCOL:
The risk of a catheter-associated urinary tract infection (CAUTI) increases the longer an indwelling urinary catheter stays in place. The need for continued catheterization should be assessed at least daily and the urinary catheter removed by a registered nurse, consistent with the scope of nursing practice, as soon as qualifying indications are no longer met.

QUALIFYING INDICATIONS for an indwelling urinary catheter:

1. Hematuria, gross
2. Obstruction, urinary
3. Urologic surgery
4. Decubitus ulcer – open sacral or perineal wound in incontinent patient.
5. I & O critical for patient management or hemodynamic instability
6. No code/comfort care/hospice care
7. Immobility due to physical constraints (e.g., unstable fracture, IABP)

ACTION:

REMOVE CATHETER: ASSESS FOR VOIDING WITHIN SIX (6) HOURS

- Document removal time and date in the Electronic Medical Record.
- If patient has not voided within 6 hours after removing urinary catheter, assess patient for urinary retention; straight cath patient.
- If patient has not voided within 6 hours after straight cath, notify physician.

Catheter Removed by:

Nursing Signature Required Printed Name Date _____ Time _____

Patient Sticker

HOUDINI

- H** Hematuria, gross
O Obstruction, urinary
U Urologic surgery
D Decubitus ulcer-open sacral wound
I & O I & O critical for patient
N No code/comfort care/hospice care
I Immobility due to physical constraint (e.g., unstable fracture, IABP)





Bundles

- **Clostridium difficile Bundle**

Bundles for Prevention of C. difficile Infection (CDI)

Antimicrobial and Drug Management Bundle

- Evidence-based management and treatment
- Judicious use of all antibiotics
- Robust A.S. program led by pharmacy and physician champion (ex, hospitalist)
- Assess use of probiotics
- Assess use of proton pump inhibitors
- Educate providers and patients

Detection Bundle

- Early Recognition: Simple Diagnosis
- Testing criteria
- Proper collection and handling of specimens (timeframe and temperature)
- Appropriate testing
 - PCR
 - Antigen/toxin assay
- Retesting criteria
 - No testing for cure

Cleaning Bundle

- Environment
- Equipment
 - ID C. diff contaminated equipment for cleaning
- Daily cleaning
- Terminal cleaning
- Use of checklist
- Appropriate dwell time for cleaning solutions
- Competency assessment

Practice Bundle

- Early isolation
- Contact Precautions
 - Gowns
 - Gloves
 - Signage
 - Hand Hygiene with soap and water
- Equipment
 - Available
 - Dedicated
 - Disposable
 - Disinfected if reusable

People Bundle

- Administrative support
- Competency
- Compliance
- Coach
- Communicate
- Involve and educate patients/families
- Educate all staff
- Collaborative efforts beyond the hospital





Influenza Measures

- Flu season officially lasts from October to May in the United States, but it is now being seen year-round.
- The CDC recommends that everyone 6 months of age and older get their yearly flu vaccine as soon as vaccines become available in their community.
- The Centers for Disease Control and Prevention (CDC) recommend vaccination of all workers in health care settings
- For more information, visit:
<http://www.medscape.org/viewarticle/732969>





Influenza Measures

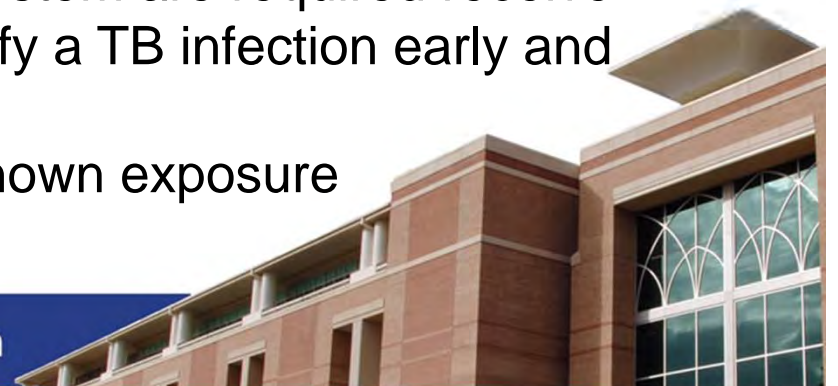
- All employees, physicians, volunteers, allied health care workers, medical students, CRNA's, clinical students, and onsite contract employees of St. Mary's Health Care System (STMH) shall be provided the influenza vaccine annually during the STMH flu vaccination campaign.
- Employees will be required to obtain or decline vaccination by December 15th of each calendar year. Records will be maintained documenting vaccinations and declinations.
- If vaccine shortages occur or if CDC recommendations are altered, the CEO, or Influenza Task Force as the designee of the CEO, may suspend or revoke all or part of this policy.





Tuberculosis (TB)

- TB, or Tuberculosis, is a disease caused by bacteria called Mycobacterium Tuberculosis, The bacteria can attack any part of the body, but they usually attack the lungs.
- The increasing number of TB cases in the U.S. since the 1980s are attributed to the following:
 - The association of TB with the HIV epidemic
 - Increasing immigration from countries where TB is common
 - Transmission in congregate settings (e.g. health care facilities, correctional facilities, and homeless shelters)
- All employees, physicians, volunteers, allied health care workers, medical students, CRNA's, clinical students, and onsite contract employees of St. Mary's Health Care System are required receive a TB skin test annually in order to identify a TB infection early and prevent active disease.
- Testing will also be conducted after a known exposure to a TB patient.





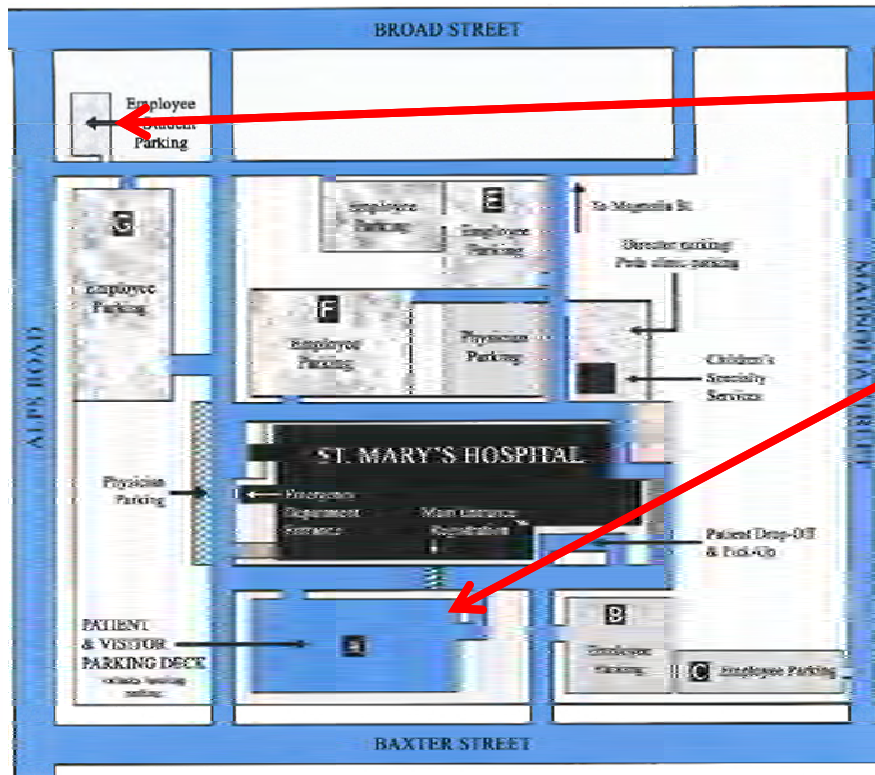
Tuberculosis (TB)

- All new employees working in areas that may have exposure to TB patients will receive TB education upon employment and on an annual basis.
- All healthcare workers and students with direct patient care duties will be screened and provided the appropriate respiratory protection (N-95) mask fitting annually per OSHA guidelines.
 - Any healthcare worker who cannot be fit tested with an N-95 mask will be instructed on the location and use of a positive air pressure respirator (PAPR)
 - The department director will be notified of any employee requiring the use of a PAPR.





Parking at St. Mary's Hospital



Student parking area

The deck is for our patients and visitors. **Students and employees are not authorized to park in the deck between 7:00am – 7:00pm Monday through Friday.**

**Parking at other St. Mary's Locations:
Please check with your preceptor for
student parking areas.**



You have completed the Student Orientation. Please complete the remainder online documents.

We hope you enjoy your experience.

**Thank you for choosing
St. Mary's Health Care System!**

