Welcome to Augusta Health

General Orientation Self-Study
“Express Education”
The Orientation Process

Welcome to the Augusta Health team! This Express Education document is the first step in your onboarding experience. Express Education is a quick tour of key information that you will need for your first day on the job. After your hire date, you will attend a General Orientation session. General Orientation is an important part of the onboarding process to prepare you for success on the job and to help you better understand your role in our mission. General Orientation is mandatory for all employees, contract workers, students, and volunteers. Coordinated by your supervisor, you will also complete a departmental orientation where you will have the chance to ask and learn more about any topics and policies pertinent to your position. Ultimately, you are responsible for knowing and understanding the policies and procedures that apply to you.

Instructions for Completing Express Education

1. Review the Express Education document.
2. Print out the “Verification Checklist”, review and complete.
3. Be sure to bring the completed checklist with you on your first day of employment (or sooner once completed). You or your supervisor can send these documents to the Staff Education department.
4. Consult with your supervisor or the Staff Education department (540) 332-4720 if you have any questions or concerns.

Your Resources for Orientation…and Every Day.

Augusta Health is committed to your continual education. Continuing education helps us to take the best care of the patient and to meet various regulatory requirements. Education can occur both on a one-time and a yearly basis through a variety of methods (inservice, skills day, online, and in the classroom). All employees are responsible for completing all education, on time and with successful scoring.

Your supervisor, educators, trainers, and fellow team members will be your best resources during the orientation process. They can assist you with learning more about the Augusta Way and our policies and procedures.

HealthStream is our Healthcare Learning Center (HLC). You can use HealthStream to view your educational progress and to complete training assignments. You will learn more about HealthStream during your General Orientation session.

We use multiple communication channels to make sure that you have the information that you need to get the job done. All employees will have an email account, so be sure to check it frequently for essential information. Pulse is our intranet site and is a great resource for announcements, policies, procedures, job postings, benefits and much more. Look for more information about daily team huddles, department meetings, and Town Hall sessions during your departmental orientation.
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Mission

Our Mission is to promote the health and well-being of our community through access to excellent care. We are a non-profit, independent health system with community leadership. The members of our Community Board of Directors are your neighbors. Profits remain local and are reinvested back into the community. Our responsibility is to proactively meet the healthcare needs and expectations of the community. We have provided our community with the best healthcare possible for more than 100 years. How are we able to achieve our mission?

- Over 225 active full-time physicians and 60 employed physicians
- Over 2,000 staff members and over 500 volunteers
- 255 beds
- Over 25 practice sites

Vision

Our Vision is to be a vibrant, independent, community-based healthcare system that is the first choice for patients, physicians, and employees. We accomplish this by providing a satisfying experience for patients, a collaborative relationship among health professionals, and clinical excellence.

Values

The Augusta Health Values are Patient and Community Centeredness, Professionalism, Excellence, and Teamwork...or just remember P-P-E-T. Our success is dependent on each of us and our collective ability to demonstrate and live our values. Every employee and volunteer can make an important first and lasting impression on our patients, family, and community by practicing our values every day.

What does it mean to live our values? Let’s review each value with 5 key ways you can demonstrate and live P-P-E-T each day. And remember...these are some starting points. You will find your own ways to incorporate P-P-E-T with each patient and team interaction.
Five Key Ways You Can Demonstrate Patient Centeredness:

- Be sure to introduce yourself and welcome each patient by name whenever possible. For example, “Welcome to Augusta Health Mrs. Smith, we have been expecting you.” or “Mrs. Smith, my name is Mary and I will be doing your test today.”

- Ask patients about their preferences and involve them in their treatment plan and in all aspects of their care and stay.

- Treat each individual with dignity and respect...as they are the most important patient or visitor. Treat each patient as if they were a member of your family.

- Assure that all patient information is completely confidential. We will talk more about this later in Express Education as part of HIPAA and PHI.

- Always end each encounter with a simple question, “(Patient’s name), is there anything more that I can for you?”

Five Key Ways You Can Demonstrate Professionalism:

- Be sure to wear your name badge at all times while on duty. Project a positive, professional image at all times; in the hospital, in public, and on the phone.

- When dealing with complaints, remember that a polite and speedy response is often times more satisfying to a patient than resolving their initial reason for filing a complaint.

- Be respectful in all patient contacts. Remember the importance of body language. Make eye contact and smile. Speak clearly and slowly.

- Try to answer the phone within three rings and say “Thank-you for calling Augusta Health”, state the name of your department, and always provide your first name.

- YOU are the most important ambassador for Augusta Health, so always talk positively to your friends and neighbors about the services we have to offer the community.

Five Key Ways You Can Demonstrate Excellence:

- Safety is our number one concern. Always identify opportunities to promote safety for our patients and our co-workers. Look for any unsafe conditions or equipment, suspicious activities, or unclear policies or procedures. Report anything that might cause a safety issue to your supervisor immediately.

- Study your patient satisfaction scores to learn more about what makes for a satisfying patient visit experience. Work with your team to achieve high scores.

- Stay up-to-date on policies, procedures, and new technology in your work area to improve quality.

- Keep current on all mandatory education requirements for your role.
Remember, Augusta Health is our community hospital and people will judge us on our hospital’s appearance. Take the initiative to keep it clean by picking up trash or reporting any cleanliness problems immediately.

Five Key Ways You Can Demonstrate Teamwork:

- Treat all team members professionally, with dignity and respect. Refrain from gossip.
- Take ownership and responsibility for your work area by participating in the development of team and department goals.
- Collaborate with team members to solve problems and to improve our organization.
- Introduce yourself to new co-workers and help new employees become part of the team.
- Be sensitive and tolerant of other employee’s opinions and beliefs. If a conflict should arise and cannot be immediately resolved, contact your supervisor or manager.

We are a values-driven organization and work to intentionally bring more cultural emphasis through living our values. Read more about the Augusta Health values in the “Augusta Health Service Standards” publication. This booklet outlines how we put our values into practice every day. A copy will be included with your General Orientation packet and can also be found on Pulse. It is required reading for new Augusta Health team members.

As part of our community health emphasis, our campus is a Tobacco Free environment. This includes all of our facilities, on and off of our main campus. The Tobacco Free policy relates to all tobacco products, which include but are not limited to, smoking (e.g. cigarettes, pipes, cigars, cigarillos, electronic cigarettes, etc.) and/or using smokeless tobacco (e.g. snuff, snus, chew, spit, pellets, strips etc.) For employees and volunteers, contact Employee Health for nicotine replacement and smoking cessation alternatives. For our visitors, nicotine replacement therapy is available for purchase in the Augusta Health Outpatient Pharmacy. Preprinted orders for nicotine replacement therapy have been approved for our inpatients, along with smoking cessation materials.

Augusta Health Performance Pillars

Using our Mission, Vision, and Values to guide us, we have developed a game plan for success. We call this game plan our “Augusta Health Performance Pillars”. These six pillars help us to identify those areas where we can achieve our mission and live our values.

**Service**- Patient satisfaction; Goals tied to compensation and incentives.

**Quality**- Cost reduction by reducing clinical variation; Value based purchasing (core measures, patient satisfaction); Urinary catheter use reduction; Maintain hospital readmission performance.

**Growth**- Invest in facilities and technology; Market share; Admissions; Outpatient encounters; Broader service capabilities and new practice site opportunities.

**People**- Employee engagement and wellness.

**Finance**- Profitability; Productivity; Service line performance; Cost management and LEAN principles; Stewardship.

**Community**- Community health-needs assessment; Evaluate strategic plan; Fund development; Governance.
KEY POINTS - THE AUGUSTA WAY

- Our Mission is to promote the health and well-being of our community through access to excellent care.
- Our Vision is to be a vibrant, independent, community-based healthcare system that is the first choice for patients, physicians, and employees.
- The Augusta Health Values are Patient and Community Centeredness, Professionalism, Excellence, and Teamwork. Remember, P-P-E-T.
- Our Performance Pillars are Service, People, Quality, Growth, Finance, and Community.
- You can make an important first and lasting impression on our patients, family, and community by practicing our values every day.

OUR OBLIGATIONS

The Joint Commission, Performance Improvement and Risk Management

Because Augusta Health receives Medicare funding, we must be accredited by The Joint Commission (TJC). The Joint Commission evaluates and accredits nearly 21,000 health care organizations and programs in the United States. An independent, not-for-profit organization, TJC is the nation's predominant standards-setting and accrediting body in health care. To earn and maintain The Joint Commission's Gold Seal of Approval™, an organization must undergo an on-site survey by a Joint Commission survey team at least every three years. All patient care staff must be able to answer surveyors’ questions, so it is critical for you to attend inservices and to keep up with all mandatory training in preparation for the survey.

Determined by The Joint Commission, the National Patient Safety Goals are standards to which all accredited organizations must comply:

- Identify patients correctly by name and date of birth
- Improve staff communication
- Use medicines safely
- Use alarms safely
- Prevent infection
- Identify patient safety risks
- Prevent mistakes in surgery
Additionally, Augusta Health is certified by the Virginia Department of Health (VDOH) and the Center for Medicare and Medicaid Services (CMS). Each agency has established standards and regulations that we must comply with or risk the loss of funding.

**Performance Improvement**

Performance Improvement (PI) is exactly what it sounds like—improving our performance (costs, staffing, errors, satisfactions, safety, and timeliness). PI is done through data collection and analysis of information such as mortality rates, surgical events, medication errors, nosocomial infections, and patient satisfaction.

**Risk Management**

Risk Management (RM) is a proactive approach to safety and error reduction and includes medical malpractice and liability prevention. Augusta Health is insured and all employees and volunteers are covered as long as they work within the scope of their job description. At the heart of the RM program is Event Reporting through Meditech. Event Reporting is our internal, self-reporting of events that deviate from the expected, and/or when a variation from the set policy and procedures occurs. In the legal world, the Event Report is a protected document, and if mentioned in the chart, is discoverable.

All employees and volunteers have an obligation to report any events that are witnessed, discovered, or committed. A report includes a description of the event, how/if the patient was affected and what type of corrective action was taken as a result. It is very important to report events to protect ourselves and to initiate process improvements. Reporting events enables us to see patterns or trends that could prevent a serious outcome for a future patient. This proactive focus allows us to make Augusta Health a safer place for all of our patients.

The Joint Commission defines “sentinel events”, such as surgery on the wrong extremity, infant abduction, inpatient suicide, or a medication error causing death. If you discover such an event, it is important that you notify your supervisor immediately. He or she will help you to document the event correctly and notify hospital administration.

**Compliance**

Augusta Health is dedicated to providing the highest quality medical care to patients and to improving the overall health of the community. Our expectation is that we maintain the highest ethical standards and always comply with all laws, regulations, and professional standards. Our Compliance Program ensures that we all are committed to the prevention and detection of violations of the laws, regulations and standards, protects our patients’ rights, and shows that we try to “do the right thing.” The Compliance Program also helps to reduce financial loss through accurate coding and the prevention of billing errors.
Every department at Augusta Health has some type of agency regulation to follow. For example, Nutrition Services is regulated by the State Health Department’s guidelines, Radiology has Nuclear Regulatory Commission standards to follow, and Environmental Services adheres to the Virginia Department of Environmental Quality policies. Be sure to learn what department specific regulations apply to you and complete all compliance training.

Documentation is a key component of our compliance program. All documentation is to be descriptive and accurate, complete, legible, timely and signed/dated/timed. Our facility uses the Neil Davis Book of Abbreviations, so be sure to locate your unit’s copy. You should also identify the unapproved abbreviations and learn how to properly correct any entry errors.

Every employee, volunteer, student, or contract worker has a responsibility to help the community keep a strong, honest, and viable hospital. Reporting concerns and asking questions when something does not seem right will help us to monitor our compliance policies. What are some examples of reportable compliance issues?

- Submitting a bill for services not medically necessary, not documented, or not actually provided.
- Billing separately for services that should be billed as a single service.
- Drug diversion (illegal sale or redistribution of drugs).
- Quality of care concerns - may require a bill hold or review.
- Emergency medical treatment access (EMTALA) issues.
- Scope of practice issues (licensure/certification).
- Documentation concerns (falsification/medical necessity).
- HIPPA privacy/security issues.

Here are some simple steps for you to help us remain compliant:

- Follow all policies and procedures.
- You should ask questions or report any concerns if something does not seem “right”. Augusta Health has a non-retaliation environment.
- Help your staff members to be compliant by reminding them of policies and procedures.

If you observe or suspect misconduct or a violation of a compliance policy, you can report the action by any of the following methods:

- Use the chain of command/immediate supervisor.
- Contact the Chief Compliance Officer, Scott Jones at 540.245.7455 or djones2@augustahealth.com
- Use the anonymous compliance hotlines. Call 1.855.298.5598 or visit www.augustahealth.ethicspoint.com.
You have a duty and personal responsibility for our compliance. Things that you do on a daily basis may impact other areas of the hospital that you may not expect. For example, if you forget to document something that is billed, Augusta Health could be fined for billing for services not provided. Be aware of the potential sanctions and penalties for compliance violations.

HIPAA and PHI

Every patient has the right to privacy and confidentiality and Augusta Health is committed to protecting the privacy of our patients’ health information. It is your responsibility to keep our patients’ information safe and confidential. The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is a federal law that prohibits hospital representatives from disclosing confidential information. HIPAA recognizes the importance and value of this commitment and makes it a legal responsibility of healthcare professionals. Healthcare providers must be familiar with both state and federal laws relating to the use and disclosure of health information. HIPAA also establishes national standards for the privacy and security of individually-identifiable health information, also known as Protected Health Information (PHI).

How can we protect patient privacy and confidentiality? Access to PHI is for patient care or legitimate work needs only. Ask yourself, “Do I need this information to perform my job?” or “Does the person with whom I am about to share this info need to have it for patient care or to do their job?” Consider if you would want the information shared with others if you were the patient. Here are some other ways that we can protect our patient’s information:

- We are not careless with our paperwork, our conversations or our computer access. Protect your computer password. Do not leave the computer workstation with patient information displayed. Dispose of confidential information in secure shred bins.
- We embrace Augusta Health’s Privacy and Security policies.
- We are proactive about protecting PHI. Report suspected violations of privacy and/or confidentiality to Compliance.
- Do not look up any PHI unless it is required to do your job. Only access patient information for those who you are directly caring for as part of your job.
- Do not discuss PHI with family/friends even if you think that the patient wouldn’t mind.
- The transmission of PHI via email should be for business needs only and through the use of your Augusta Health email address. Do not use a personal webmail account (Google, Yahoo, etc.) to send or receive PHI, and do not send PHI to any personal email addresses (unless a patient requests and permits that his/her PHI be sent to their own email address). Send emails containing PHI using “Send and Encrypt” or with “Secure” in the subject header. All emails and web traffic is monitored for the transmission of PHI.
- Double-check fax numbers and always use Augusta Health fax cover sheet when faxing patient info.

Augusta Health does permit employees to access their own PHI (not spouse, child, or other family member). To obtain copies of a spouse or child’s medical records, contact Health Information Management.
To assist with privacy and confidentiality, be sure to review all computer awareness policies and training assigned to you. All users are assigned a unique user ID for log-in purposes; no one can have the same user name. Your user access to patient information is limited to minimum amount of info need for your job and is consistently reviewed for inappropriate use. Do not share your password with anyone; protection of your password is your responsibility. If you need to walk away from your computer, be sure to suspend or lock the computer before leaving the work area.

**Disclosing Information to Patient's Family and Friends**

If family and/or friends are present, ask the patient for his/her permission to discuss their care in the presence of others. A patient may request to be a confidential patient. If so, do not give out any information to anyone who may ask about the patient. Once admitted, inpatients may request a 4 digit code that they can give to family members or friends who may call to request information about their condition. If the caller has the patient’s authorization code, it is an indication that the patient has approved the caller to receive information regarding their care.

Unless the patient is registered as confidential, HIPAA allows the release of information as follows:

- Caller must first ask about the patient by name.
- You can then acknowledge that the person is a patient.
- You can provide the patient’s location in the hospital.
- You may give a brief (1 or 2 words) description of the patient’s condition (i.e., stable, critical, resting well).

Information about patients on the Crossroads Behavioral Health Unit or those in the Alcohol/Drug Recovery program may only be shared by trained staff from those units and only in accordance with established unit and/or Federal policies.

**Compliance Contacts**

**Scott Jones, Chief Compliance Officer**
540-245-7455 or 610-564-1757
djones2@augustahealth.com

**Compliance Hotline**
1-855-298-5598
www.augustahealth.ethicspoint.com
Patient Rights and Responsibilities

Augusta Health must inform every patient or designated decision-maker of his or her rights. We accomplish this by providing patients with a copy of “Patient Rights and Responsibilities.” “Patient Rights and Responsibilities” are also posted in different areas of the organization, such as outpatient clinics and Augusta Health physician practices. Patients must be given information about their rights, knowledge of how to exercise their rights, resources to whom to complain if there is a concern, written information on advance directives, and notice of non-coverage when we are aware that a service may be terminated or not covered. The Federal government has created strong penalties and fines for not meeting these regulatory requirements.

We also have a responsibility to provide information on patient rights in a language that patients and their families understand and prefer. Civil Rights laws currently protect patients who have language barriers and our facility must meet these requirements. When dealing with patients, family members, or visitors who have special communication needs, we must provide accommodations to provide effective communication. This includes a telephonic language line, video remote interpreting, in-person interpreters, large print materials, telecommunications device for the deaf (TDD) access and other necessary steps to provide effective communication.

You play a very important role in patient rights. Be aware of your patient’s rights and responsibilities. These can be reviewed on the Augusta Health website under the “Patients and Visitors” tab. When a patient or his/her decision maker asks a question, you will be able to guide them in the right direction. Be sure you are doing your part to communicate effectively with the patient. Pulse has interpretation information or you can discuss options with the nurse assigned to the patient. Ask questions and seek information if you feel we are not meeting the patient’s needs. Think of ways to improve the process and give the suggestions to your supervisor.

Disability Awareness

Under the Americans with Disabilities Act (ADA), a person with a disability is:

- A person with a physical or mental impairment that substantially limits one or more major life activities (i.e., breathing, walking, concentrating, etc.).
- A person with a record of such physical or mental impairment.
- A person who is regarded as having such impairment.

People with disabilities face many barriers at provider sites, such as architectural barriers, inaccessible exam tables and weight scales, lack of interpreters and inflexible office procedures. They will often report being treated unfairly at practitioner offices because of their disabilities, often facing negative attitudes and a lack of knowledge about treating people with their specific disability.

Health promotion and prevention programs seldom target people with disabilities, resulting in inadequate receipt of preventative diagnostic testing they may require. Historically, care has focused on the disability at the expense of a primary care focus. Some people may be unable to open a door, climb stairs, fill out a form, or see or hear as a result of a disability. For people with disabilities, getting health care is difficult due to this lack of access.
Accessibility may need to be provided in an array of areas such as:

- Communication - deaf or hard of hearing, blind or low vision, or intellectual disability may require more time and alternative materials.
- Physical - wheelchair accessibility and counter heights.
- Medical equipment - scales, exam tables, chairs, and patient transfer lift.
- Programs - procedures and practices.

Ensure that physical, communication, and programmatic barriers do not inhibit participants with disabilities from obtaining all covered items and services.

- Look to be flexible in scheduling as an accommodation.
- Use quiet spaces and/or help in filling out forms.
- Provide extra time for instructions or explanation of care. Use simple language for medical instructions and forms.
- Use interpreters for those who are deaf or hard of hearing, or whose first language is not English.
- Use materials in alternate formats, including the option of large print or electronic text-to-speech programs.
- Ensure there are no obstructions in pathways that would inhibit free movement. Confirm routes of travel are easily navigable and accessible.
- Do not make incorrect or discriminatory assumptions about people with disabilities, i.e. people with disabilities cannot make informed decisions about their own care or people with mobility disabilities will not profit from exercise or nutritional programs.

**Diversity**

Simply put, diversity is allowing and respecting differences until the differences don't make a difference anymore. At Augusta Health, diversity refers to the differences we recognize in ourselves and in others. Diverse environments are beneficial because they can promote a better understanding of our differences, encourage creativity, and increase productivity. Diversity includes any differences based on:

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<thead>
<tr>
<th>Race</th>
<th>Gender</th>
<th>Ethnicity</th>
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<tr>
<td>Culture</td>
<td>Sexual Orientation</td>
<td>Physical Ability</td>
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<td>Physical Aspects</td>
<td>Speech Patterns</td>
<td>Level of Education</td>
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<td>Religious Beliefs</td>
<td>Economic Status</td>
<td>Social/Familial Status</td>
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<tr>
<td>Occupation</td>
<td>Value System</td>
<td>Country of Origin</td>
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You may not like or agree with everyone you encounter, but you do have an obligation to treat everyone with respect and equality. Do all that you can do to promote an environment of respect and acceptance to the various beliefs and ideas of your co-workers and patients.

- Think before your speak. If you accidentally offend someone, immediately apologize.
- Be sensitive to others.
- Listen more. Being heard increases a person’s self-esteem, confidence, and cooperation.
Avoid generalized language that suggests all or most of a group are the same. We are all individuals. Do not assume a person belongs to a group based on any one characteristic.

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**KEY POINTS - OUR OBLIGATIONS**

- Because Augusta Health receives Medicare funding, we must be accredited by The Joint Commission (TJC). TJC is the nation’s predominant standards-setting and accrediting body in health care.

- Our Compliance Program ensures that we all are committed to the prevention and detection of violations of the laws, regulations and standards, and protects our patients' rights. You have a duty and personal responsibility for our compliance.

- Every patient has the right to privacy and confidentiality. It is your responsibility to keep our patients' information safe and confidential.

- Be aware of your patient’s rights and responsibilities. These can be reviewed on the Augusta Health website under the “Patients and Visitors” tab.

- Ensure that various barriers do not inhibit our patients with disabilities from obtaining all covered items and services.

- Do all that you can do to promote an environment of respect and acceptance to the diverse beliefs and ideas of your co-workers and patients.

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**PATIENT CARE**

**Recognizing and Reporting Suspected Patient Abuse and Neglect**

Whether you are a staff member, student, contract worker, or volunteer, it is your responsibility to take the appropriate actions to ensure the safety and well-being of our patients at all times. This includes your awareness of the signs of potential abuse or neglect and reporting any suspected patient abuse or neglect to your supervisor.

What is abuse? Abuse is when the individual has been subjected to a non-accidental infliction of injury by a relative, caregiver or adult household member. Some examples would be physical, emotional, psychological, sexual abuse or financial exploitation. Abuse occurs in all age groups and the injuries may not be visible or match the situation. Often, the abuser may have been abused or learned the behavior as a way to cope or control.

What is neglect? Neglect is when a caregiver fails to provide medical or physical care, proper nutrition or satisfactory hygiene to their patient.
Under Virginia law, all healthcare workers are required to report any suspected case of abuse. Such persons are protected from civil and criminal liability. Immunity from liability also extends to the taking of photos and x-rays and the dissemination of these with the required reports. Trust your gut…report any suspected abuse or neglect.

What should you do if you suspect a patient has been subjected to abuse or neglect? You should report the abuse or neglect to your supervisor or to the Department of Social Services. A hospital Social Worker is available as a resource should you have any questions about whether or not a referral to the Department of Social Services is indicated or mediation between the hospital and family system is needed. In instances when you do not know which agency to contact, you can call the state abuse hotline at 1-800-522-7096 or the local Sheriff’s Department.

When reporting abuse or neglect, you will need to provide:

- The name, age, address of the person, and guardian information (if known) and the identity of the abuser (if known).
- Any other information that you believe would be helpful in establishing cause of injury or neglect.
- Your name and title. In Virginia, you do not have to identify yourself and you can request that your identity not be revealed.
- Document the report in the patient’s record and the name and identity of the person receiving the report (licensed professionals).
- The police are to be notified if there is evidence of physical assault and if the patient’s return home may result in further injury. The police are also to be notified in cases when a weapon was used in the commission of the assault or injury.
- Notify the department Director, Social Worker on call, and attending physician of the report.

**Hourly Rounding**

Consistent rounding lets our patients know that they are not alone. Rounding is not just looking in the room to document if the patient is up in a chair, sleeping in the bed, or talking on the phone. Rounding is addressing the patient by name, explaining who you are and presenting yourself in a friendly, helpful and courteous manner. If you are consistently rounding, you will build your patients’ trust in you as their healthcare professional and lets them know what they can expect from their time with you. With hourly rounding, we can greatly reduce call light use, reduce the frequent interruptions, noise and activity level increased by unmanageable call light use, and reduce the travelling back and forth to the patient’s room.

Any member of the patient care staff will visit all patients at least every hour. The key to successful rounding is ongoing communication between all care providers and all disciplines involved in the patients’ care. Rounding is a proactive approach to meeting our patients’ basic needs, resulting in positive outcomes such as increased patient satisfaction.
If you are a member of the ancillary staff, how can you help? What is your role in rounding? All disciplines may participate in patient (hourly) rounds to assure patient safety and well-being. Always notify the nursing staff of a patient’s needs if you are unable to address. Hourly rounding by the ancillary staff does not replace the nursing responsibility for the patient and the commitment to hourly rounding.

All staff (clinical and ancillary) should review the safety of the room and address or report any patients’ needs and requests as appropriate to the role. The clinical staff should include the 3 P’s and 3 R’s on their rounds. Ancillary staff can use the 3 P’s and 3R’s if it is within your scope of practice.

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<thead>
<tr>
<th>3 P’s</th>
<th>3 R’s</th>
<th>Positive Outcomes</th>
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<tbody>
<tr>
<td><strong>Pain</strong> - Evaluate the patient’s pain level, provide intervention and/or medication. Ask “How is your pain?”</td>
<td><strong>Rounds</strong> - Round for patient safety; prevent a fall or serious injury.</td>
<td>Within the next hour, round again, evaluate the plan, and document reassessment within the hour time frame.</td>
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<tr>
<td><strong>Potty</strong> - Offer assistance to use the BSC, BR, bedpan, or check for incontinence. Ask “Do you need to use the restroom?”</td>
<td><strong>Rooms</strong> - Check the room for safety. Ask yourself, “If I had to get in this room in an emergency, what would prevent me from getting to my patient?” Does the patient have a clear path to the bathroom?</td>
<td>Minimizes falls&lt;br&gt;Minimizes skin breakdown from incontinence&lt;br&gt;Enhances mobility</td>
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<tr>
<td><strong>Position</strong> - Help the patient get comfortable. Ask “Is there anything else I can do for you before I leave?”</td>
<td><strong>Relatives</strong> - Respond to questions, involve in plan of care, and express concern. Reassure the patient, remind when you will return.</td>
<td>Increases patient satisfaction&lt;br&gt;Enhances interventions provided&lt;br&gt;Opportunity for interaction</td>
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These simple questions guarantee answers. It demonstrates concern and leaves the impression that you have time and care about the patient. Be sure not to wake patients while performing hourly rounds, as rest is a vital component of the healing process.

**Fall Prevention Program**

The Fall Prevention Program identifies those patients who are at a high risk to falls. This includes the education of the staff, patient, and family to offer intervention for fall prevention. All staff and volunteers at Augusta Health should be familiar with the Fall Prevention Program and policies. Be sure to review the policies, learn more about the signage, what you can do to keep our patients safe from falls, and how you can educate families and patients about the program.
The nursing staff assesses every patient for fall risk. It is everyone’s responsibility to identify safety risks and concerns and report promptly. It is also your responsibility to report any falls, whether a patient, family member, visitor, or staff member.

Hospitalized patients at a high risk for falls will have the following indications:

- Yellow armband on patient’s wrist
- Use of yellow non-skid socks
- Use of bed alarms and chair alarms
- Risk or recent fall included in shift report
- Use of bedside commode unless contraindicated by physician or patient plan of care

Pediatric patients with a high risk for fall will have these indicators:

- A Humpty Dumpty magnet on the door outside the room
- These patients will have staff or family in attendance at all times
- Use of bed alarms and chair alarms

Outpatient areas have fall prevention policies adapted to their specific needs.

If you are not a member of the direct care staff and hear the bed/chair alarms, please be aware of the area. If you find a high risk patient standing, walking, or trying to get out of bed unassisted:

- Introduce yourself and state that you are there to help
- Have the patient sit down
- Notify the patient care staff of the patient’s need for assistance
- Stay with the patient until the patient care staff arrives

There are some simple things that we all can do to help minimize fall hazards. Keep the rooms and hallways free of clutter, allow for easy access to handrails and avoid trip hazards. Always lock wheels on beds and stretchers when not moving. Keep beds in the low position when not giving patient care. Clean up spills immediately. Keep items within easy reach of the patient, such as eyeglasses, hearing aids, walkers, etc.

**Stroke/STEMI**

A stroke occurs when a blood vessel that carries oxygen and nutrients to the brain is either blocked by a clot or bursts (or ruptures). When that happens, part of the brain cannot get the blood (and oxygen) it needs, so it and brain cells die. Stroke is the fifth leading cause of death, killing more than 137,000 people each year.
FAST is an easy way to remember the sudden signs of stroke. If you notice someone experiencing signs and symptoms of stroke, immediately call for help. Inside of the hospital, you would call a STROKE ALERT; outside of the hospital, you would call 9-1-1.

Augusta Health uses best practices in stroke care and has advanced certification by The Joint Commission as a Primary Stroke Center. If you have additional questions regarding the stroke program at Augusta Health, please refer to your department director or the Stroke Coordinator at 5741.

**KEY POINTS - PATIENT CARE**

- It is your responsibility to take the appropriate actions to ensure the safety and well-being of our patients at all times. This includes recognizing signs of abuse or neglect, hourly rounding as a proactive approach to patient care, and understanding the Fall Prevention Program.

- Under Virginia law, all healthcare workers are required to report any suspected case of abuse or neglect. You should report the abuse or neglect to your supervisor or to the Department of Social Services.

- Be sure to review the Fall Prevention Program so you can keep our patients safe from falls and educate families and patients about the program.

- Recognize the signs and symptoms of a stroke using FAST.
SAFETY

Emergency Codes and Emergency Operations Plan

Emergencies can happen at any time, so all staff, volunteers, students and contract workers need to be prepared ahead of time. During your departmental orientation, you will review the Emergency Operations Plan (EOP) found on your unit. (An electronic copy can also be found on Pulse.) Be sure to learn your exit routes, the location of emergency equipment and the communication system used in your work area. Your responsibility in an emergency is to know the procedures and duties ahead of time. In an emergency, report to your supervisor for directions. If you are off-duty, report to duty only if you are called to do so. Bring your badge and report to your supervisor upon arrival.

Emergency Codes

Special emergency code names are in use inside the hospital or Medical Office Building (MOB). If you are inside of the hospital or the MOB, you should call 2222 and announce the code word with exact location of the emergency. The switchboard will announce the code over the intercom and the appropriate teams will be activated. If you are elsewhere on the Augusta Health campus or at an off-site location (i.e. clinics), you should call 911.

All employees, regardless of location, must be familiar with all policies and the internal code names.

- **Code Blue**: A patient or visitor needs a physician immediately
- **Stroke Alert**: Patient with possible acute stroke
- **STEMI Alert**: Patient with possible acute MI (heart attack)
- **Code Black**: Bomb threat
- **Code Silver**: Active shooter or hostage situation
- **Code Orange**: Hazardous material spill
- **Code Pink**: Infant abduction
- **Code Adam**: Missing or abducted child
- **Code Yellow**: Missing adult
- **Code Green**: Potentially violent situation, usually with a patient but could be a visitor or staff member
- **Code Purple**: Disaster/Mass Causality event (external or internal)
- **Code Grey**: Tornado (announced as warning or alert)
- **Code Brown**: Building evacuation (partial or total)
- **Code Red**: Fire
In preparation for a Code Red alert, you should be familiar with a couple of acronyms—RACE and PASS.

**R**escue the patient or other staff. Know the evacuation routes from your department. When evacuation is ordered, move patients horizontally to an unaffected area on the same floor. Never use the elevators. Stay calm and give clear, exact directions. Once a room is evacuated, place a bed pillow or other white linen item on the hall floor in front of the patient’s room to show that the room has been cleared. Close all patient room doors and clear the hallways. Make sure to group and account for all patients, visitors, and employees.

**A**larm- activate the nearest the fire alarm. Dial 2222 (or call 911 if outside the main hospital).

**C**ontain smoke and fire, close the doors. Remain in a safe area until “all clear” is paged. Do not reopen doors unless you have felt to make sure that the door is cool to the touch. Offsite locations can begin evacuation.

**E**xtinguish the fire or evacuate the patient if so ordered.

To use a portable fire extinguisher, remember PASS.

- **P**ull the pin between the handles of the extinguisher.
- **A**im the nozzle at the base of the fire.
- **S**queeze the handles together.
- **S**weep from side to side.

**Workplace Violence**

Prevention is the best protection of workplace violence. Treat everyone with respect. Be friendly and listen. Respond promptly in a caring manner to help others to feel as comfortable as possible. Trust your gut feelings and watch for warning signs of violence:

- Frequent absences or tardiness
- Extreme or bizarre behavior
- Drug or alcohol problems
- Depression
- Poor impulse control
- Talking about or carrying weapons (only security and law enforcement are allowed to have weapons on Augusta Health premises)
- Verbalizations such as “I’ll get even with you”, “This place would be mass confusion if someone switched some of the charts”, “If I get fired, I won’t be leaving alone”, or “They won’t forget me after I leave this place.”
In addition to the warning signs, you may notice physical indications that an individual may become violent.

- Staring into space
- Flushed face and rapid breathing
- Tense or anxious posture, frequent shifting
- Pacing or restlessness
- Challenging authority, screaming, shouting, threats, frequent profanity
- Person stops interacting, “closes off” completely.

Report all incidents or suspicious behavior promptly to security, your manager, or shift supervisor. If the situation is dangerous, or likely to become dangerous, call 2222 (inside the hospital) and call for a Code Green. If you are at another location outside of the main hospital building, call 911. It may be appropriate to notify Augusta Health security as a second call. Remain calm and remove yourself from danger. If an employee is assaulted or battered, he or she should seek medical attention and as well as counseling.

**Report every violent incident, no matter how trivial it may seem.**

Augusta Health is committed to promoting a safe work environment and has a zero tolerance policy for workplace violence, including lateral or co-worker to co-worker violence. This includes bullying, harassment, intimidation, belittling, gossip, inappropriate or aggressive behaviors, teasing, ignoring, cursing or shouting. Augusta Health has a “no-retaliation” policy for those employees who report such incidents in good faith.

**Hazardous Materials**

Your job at Augusta Health may involve the handling, transporting, and/or disposing of hazardous substances. It is important for you to complete all safety training programs and follow all procedures to minimize any danger to yourself and to others. It is the law, our policy, and the safest practice.

Examples of Hazardous Materials and Waste include:

- Chemicals and Chemical Waste (acids, bases, and solvents, alcohols, creams and gels, pharmaceuticals, paints, solvents, oils, fuels, and cleaning supplies)
- Hazardous Drugs (chemotherapeutics/cytotoxic, antivirals, hormones, and other drugs)
- Radioactive Materials and Waste (radiology, nuclear medicine, anywhere x-rays are taken, radioactive implants, and anywhere lasers are used)
- Regulated Medical Waste (see Waste Management section for more info)
- Flammables, Corrosives, Poisons/Toxins, and Reactives
You have responsibilities in the safe handling of hazardous materials.

- Do not handle any substance without proper training.
- Always read the product labels and Safety Data Sheets (SDS) provided by the material manufacturer and adhere to all procedures regarding waste disposal. SDS sheets are located on Pulse and are accessible 24/7 for your review.
- Store chemicals in designated areas.
- Ensure adequate ventilation when working with chemicals and never mix chemicals.
- Use only approved disinfectants, absorbents, and neutralizing chemicals.
- Notify your immediate supervisor or person in charge when problems or violations occur.
- Always use the appropriate Personal Protective Equipment (PPE) when handling hazardous and infectious waste.

It is important for you to know the danger of these hazardous substances and how to prevent exposure. You can be exposed to these hazardous materials in various ways:

- Injuries from sharps (needles sticks, broken glass, etc.)
- Inhaling dust, vapors or gases
- Swallowing
- Absorption through skin
- Contact through broken skin
- Splashes into eyes

Waste Management

During all medical activities, it is crucial to prevent the exposure of healthcare workers, patients, waste handlers and the community to infections, toxins, and other hazardous healthcare waste. Healthcare Waste Management (HCWM) is the process that helps to ensure proper hospital hygiene and safety of healthcare workers and communities.

Disposal of healthcare waste

Regulated Medical Waste (RMW) must be contained in two leak-proof red plastic bags. Bags must be sealed by twisting the open end and “goose necking” with waterproof tape so that fluids cannot leak out of the bags. All bags must be labeled with the name of the hospital, room or area number, the date, and the RMW symbol.
All of these items are considered to be RMW:

- Cultures/Stocks or microorganisms and biologicals.
- Human blood and human body fluids, as well as waste containing human blood or human fluids, i.e. urine, body fluids or items contaminated with blood or body fluids.
- Tissues & other anatomical wastes.
- Sharps (needles, blades, broken glass, syringes with attached needles, sutures needles, scalpels). Sharps are to be placed in specially designed Sharps containers.
- Any residue or contaminated material used in clean-up of RMW.
- Any solid waste contaminated by or mixed with RMW
- Bandages, gauze and other absorbent materials that are saturated or would release human blood or body fluids in a liquid or semi-liquid state if compressed.
- Place all medical glass, broken glass, evac jars and pleuro vacs in a large 8-gallon sharps container. Suctions with blood and body fluids may be placed in a red waste bag and placed in trash cans in the Dirty Utility Room, but must contain isolize. See your manager or preceptor to find out where medical waste pickup areas are in your unit or department.

Solid waste is accumulated from the operating rooms, laboratories, patient rooms, emergency rooms, dirty utility rooms, labor and delivery, critical care, and treatment rooms. All of these waste items are to be placed in a clear trash bag:

- Empty medication vials.
- Uncontaminated surgery packs and other packaging materials.
- Diapers, facial tissues, sanitary napkins, under pads and adult incontinence products (unless healthcare professionals determine these items to be RMW).
- Surgical drapes – If not contaminated.
- PPE (gowns, gloves, masks) – If not contaminated.
- Procedure trays (disposable) – If not contaminated.
- Material not including sharps, containing small amounts of absorbed blood or body fluids, i.e. band aides, cotton balls, 2x2 gauze, etc.
- All other solid wastes not listed in the Department of Environmental Quality (DEQ) regulations & not identified by healthcare professional as infectious.
- Glass.
- Empty urine bags and tubing, suction canisters and tubing, IV solution bags and tubing, colostomy bags, ileostomy bags, urostomy bags, plastic fluid containers, internal feeding containers and tubing, hemo vacs and urine specimen cups, urinary catheters, plastic cannual, IV spikes, nasogastric tubes,
oxygen tubing and cannula, ventilator tubing, enema bags and tubing, enema bottles, thermometer probe covers, irrigating feeding syringes, and bedpan/urinals.

Report all exposure incidents to your supervisor, charge nurse, and/or instructor immediately (within 2 hours). Know all emergency procedures and always follow infection control procedures when cleaning and disinfecting rooms, floors and equipment, the handling, storing, and transporting of lab samples, laundry, and cleaning up spills.

Radiation and MRI Safety

Radiation Safety

When using proper precautions, ionizing radiation is safe and very useful. In the medical community, radiation is primarily used to diagnose illnesses, provide therapy to treat cancer, and for medical research. A three bladed design that is magenta, purple or black on yellow background is the international symbol for radiation. Every employee should recognize this radiation hazard sign. It may be located on doors to departments, hallways or rooms, work areas within a restricted area, waste cans, package labels, fume hoods, sinks, and refrigerators. All radioactive materials must be clearly labeled. If you see this sign in your work area and are unsure of what to do, you should contact the Radiation Safety Officer immediately.

Many areas throughout the hospital have the potential for employees to receive small amounts of radiation exposure. Always be sure that you are permitted to enter any posted area before entering. You should be aware of the following areas where there is potential for higher exposure to radiation:

- Radiology Department
- Cancer Center
- Nuclear Medicine
- Interventional Cardiology Lab

If you are assigned to work in any of these areas, you will have a department specific radiation orientation. If you do not work in these areas, but have questions concerning radiation exposure, contact the Radiation Safety Officer.

Magnetic Resonance Imaging (MRI) Safety

MRI is a diagnostic imaging procedure that uses a large magnet to produce pictures of a body's internal organs. Remember, the MRI magnet is always on, so patients and staff should not go into the room without screening and without an MRI tech present.
Other Safety Guidelines

Medical Equipment

Do not operate any medical equipment until you have been properly trained to use that specific piece of equipment. Report any medical equipment malfunction to the Maintenance or Clinical Engineering Department. Complete and attach the “Equipment Malfunction” tag to the defective equipment.

Always keep portable oxygen cylinders secured in the upright position in the rack or on the cart.

Utilities and Electrical Safety

There are emergency power receptacles (red colored outlets) located throughout the hospital. Only essential equipment should be plugged into these outlets.

Electrical safety guidelines:

- Report cracked or broken outlets and light switches.
- Report flickering lights and switches that seem hot to the touch.
- Report power cords with cuts or damage.
- Only hospital supplied extension cords and outlet strips may be used.
- Only hospital supplied portable space heaters may be used.
- Patient owned medical equipment must be inspected prior to use.
- Turn off equipment using the power switch before unplugging from receptacle.

Back Safety and Body Mechanics

Healthcare workers are at high risk for back pain and injury. Most injuries are due to muscle strain, but other injuries may be related to disc problems such as herniation or degenerative disc disease. When the back is used properly, you can reduce your chances of injury and pain. Proper posture and body mechanics are absolutely crucial to the success of any workplace improvements.

Remember, use large muscles for lifting and holding; smaller muscles for manipulative and repetitive movements. Keep joints in a neutral position and keep work close to your body. When standing, keep your knees flexed, maintain good posture, wear comfortable shoes, and use a foot rest when standing for long periods of time. Practice the principles of safe lifting:

- Know your limits. Test the load and get help when needed.
- Stay close to the work, keeping feet apart.
- Let your legs do the work. Bend at the hips and knees. Lift with your legs, not your back.
- Keep your head up and back aligned. Maintain 3 natural curves.
- Pivot with your feet; avoid twisting at the waist.
- Breathe.
- Push or pull rather than lift when possible.
- Never try to catch a falling object.
- Use the tools available to you help you lift.

Moving a patient is very different than moving an object, as most patients weigh more than the maximum allowed for a “safe lift” established by the National Institute for Occupational Safety and Health (NIOSH). When should you use lift devices? Augusta Health expects the safe patient handling equipment to be used for anyone who qualifies as requiring the equipment which is done by assessment (in IP) or an algorithm (in OP areas). If your patient is unable to bear weight or unsteady on their feet, if you are performing a lateral transfer, or if you are turning or repositioning your patient, you should use a lift device.

Lifting and twisting are not the only ways that you can injure your back. Remember to keep good posture when performing computer work, driving, vacuuming, laundry, etc. Be cognizant of good ergonomics when typing. Use supportive equipment, such as a wrist rest or copy holder. Avoid twisting and maintain a neutral position when sitting or standing. Reduce eye strain using adequate lighting and taking breaks. Change positions frequently; even when you cannot stand up, try to keep your feet moving. Rotate your tasks as the job allows. Be mindful of your proper posture and body mechanics.

If you are injured, perform any necessary first aid and report the incident to your supervisor within 8 hours of the occurrence. Fill out the Employee Occurrence Forms (found on Pulse) and report to Employee Health Services. All injuries and illnesses are to be reported to Employee Health. Our Workers’ Compensation Protocol requires you to use the facilities within the Emergency Department or Employee Health; you cannot use your Personal Care Physician (PCP). Employee Health updates are required annually, so be on the lookout for notices and reminders for your appointment.
INFECTION CONTROL

All employees, students, contract workers and volunteers, regardless of work area, must follow our infection prevention and control policies to protect ourselves and our patients, co-workers, family and community from the spread of infection. There are two types of infection that we will review in this module; Community Acquired Infections (CAI) and Healthcare Associated Infections (HAI).

Community Acquired Infections (CAI) are those infections that patients have at time of admission. Some may be communicable, such as tuberculous, chickenpox, dengue fever, and head lice. Some CAI are not communicable, like pneumonia, urinary tract infections, infected bed sores, and blood stream infections.

Healthcare Associated Infections (HAI) are not present or incubating at the time of admission. Examples include ventilator associated pneumonia, Foley related urinary tract infection, central line associated blood stream infection, post-operative pneumonia, and surgical site infection.

There are five main methods for the prevention and spread of infection:

1. Hand Hygiene
2. Respiratory Etiquette
3. Standard Precautions
4. Isolation Precautions
5. Sterile Technique

KEY POINTS - SAFETY

> Review the Augusta Health Emergency Operations Plan (EOP) and your departmental policies to be prepared in the event of an emergency.

> Special emergency code names are in use inside the hospital or Medical Office Building (MOB). If you are inside of the hospital or the MOB, you should call 2222 and announce the code word with exact location of the emergency. If you are elsewhere on the Augusta Health campus or at an off-site location (i.e. clinics), you should call 911.

> Prevention is the best protection of workplace violence. Report all incidents or suspicious behavior promptly to security, your manager, or shift supervisor.

> It is important for you to complete all safety training programs and follow all procedures to minimize any danger to yourself and to others. Report all exposure incidents to your supervisor, charge nurse, and/or instructor immediately (within 2 hours).

> Do not operate any equipment until you have been properly trained to use that specific piece of equipment.

> Healthcare workers are at high-risk for back pain and injury. Most injuries are due to muscle strain, but proper posture and body mechanics can reduce your chances of injury and pain.
Hand Hygiene

Using common sense and practicing good hygiene can decrease the spread of infection. The primary way to cleanse our hands in the healthcare setting is with an alcohol based hand rinse. (Do not use alcohol based hand rinse if visibly soiled or in patients with C.diff infection.)

You should cleanse your hands:

- Before entering a patient’s room
- When exiting a patient’s room
- After contact with a patient or anything in the immediate patient area
- Before donning gloves
- After removing gloves
- Between patient visits
- After using the restroom
- When going from a dirty to a clean site on a patient
- When hands are visibly soiled
- Before eating

Handwashing is the single most important precaution for preventing the spread of infection. Steps for effective hand washing:

- Turn on the water and get your hands wet.
- Apply soap.
- Scrub for 15 seconds (you can sing the ABC song twice).
- Rinse.
- Leave the water running.
- Use a paper towel to turn the water off.
- Get a clean paper towel to dry your hands, use the paper towel to open the door, and then discard.

Respiratory Hygiene and Cough Etiquette

Anyone; i.e., staff, patients, or visitors, with signs of a cold or other respiratory infection (i.e. cough, congestion, rhinorrhea, or increased production of respiratory secretions) will:

- Wear a surgical mask or procedure mask (which ties or loops securely). Instruct patients to keep the mask securely on their face.
- For patients who cannot tolerate a mask or are otherwise unable to wear a mask, give them a box of tissues and instruct them to cover their mouth and nose when coughing or sneezing.
• Inform patients to use tissues to control nasal discharges. These patients should be physically separated from other patients by at least 3 feet in order to prevent possible droplet spread of infection.

• Patients should dispose of used tissues in a no-touch trash receptacle.

• Use thorough hand hygiene (hand washing or alcohol hand rinse) after using tissues or when in contact with respiratory secretions. Ensure that the palms of hands, webs of fingers and the back of the hands are covered with the rinse.

• Reinforce these instructions and provide your patients and their visitors with written or verbal information on the importance of hand hygiene.

Infection Prevention and Control Practices

All employees, regardless of work area, are responsible for understanding and following infection control and bloodborne pathogens guidelines. Bloodborne pathogens are germs that are present in human blood and can cause diseases in humans.

Environmental Cleaning and Laundry

Follow hospital procedures for the cleaning and disinfection of environmental surfaces, beds and rails, bedside equipment, and other frequently touched surfaces. Use gloves to handle, transport and process used linen soiled with blood, body fluids, secretions and/or excretions in a manner to prevent the spread of microorganisms. All laundry must be placed in a fluid-proof bag. If the outside of the bag is visibly soiled with blood or body fluids, place the bag inside another fluid-proof bag.

Patient Care Equipment

Patient care equipment soiled with blood, body fluids, secretions and/or excretions should be handled in a manner to prevent the transfer of microorganisms. Ensure that reusable equipment is not used for the care of another patient until Central Processing has properly cleaned it. See Policy Manager for Patient Care Equipment Cleaning and Storage.

Sharps and Regulated Medical Waste

Take care to prevent injury when using or handling, cleaning or disposing of; needles, scalpels, and other sharp instruments. Contaminated needles and other contaminated sharps should not be bent, recapped, or removed unless the employer can demonstrate that no alternative is feasible or that such an action is required by a specific medical or dental procedure. If bending, recapping, or needle removal must occur use a mechanical device or a one-handed technique. Contaminated reusable sharps shall be placed in the appropriate containers immediately (or as soon as possible after use) until properly reprocessed.

Warning labels shall be affixed to containers of regulated waste, refrigerators and freezers containing blood or other potentially infectious material, and other containers used to store, transport, or ship blood or other potentially infectious materials.
Specimen Transport and Specimen Storage

All patient specimens should be considered infectious. Before sending to laboratory, place specimens inside plastic biohazard bags. Do not send soiled containers to the laboratory. Do not place food or drink in the refrigerators, freezers, cabinets or other areas where any patient specimens are placed.

Blood Spills

Clean up blood spills promptly. To clean spills, block off the spill area. Locate the Emergency Spill Kit within your department. Wear gloves and apply “absorbent” to the spill. Place paper towels over the spill, clean up the spillage and dispose of the paper towels in a regulated medical waste bag. Flood the spill area with hospital grade germicidal clean (ask your department director where your germicide is stored), leaving it in place for ten minutes before wiping it up. Clean broken glass with a broom and dustpan; and dispose in an impermeable container, such as a large sharps container.

Personal Hygiene

Eating, drinking, smoking, applying cosmetics or lip balm, and the handling of contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure.

Standard Precautions

All employees that come into contact with a patient will use standard precautions. Standard precautions require the use of personal protective equipment (PPE), such as gloves, eyewear, masks and gowns to prevent exposure to blood, body fluids, secretions, excretions, and contaminated items.

Gloves: Wear gloves when exposure to bloodborne pathogens is likely. Put on clean gloves just before touching mucous membranes and non-intact skin. Wash hands immediately after gloves are removed and between patient contacts.

Mask and Eye Protection or Face Shield: Use mask and eye protection or a face shield to protect the mucous membranes of your eyes, nose and mouth during procedures and patient care activities that are likely to generate splashes or sprays of blood and body fluids.

Gowns: Use a gown to protect skin and clothing during patient care that is likely to generate splashes or sprays of blood and body fluids. Remove soiled gowns as promptly as possible and wash hands.

Barrier Ventilation Devices: Use barrier ventilation devices such as pocket masks and ventilation bags when assisting with a ventilation alternative to mouth-to-mouth resuscitation.

Isolation Precautions

All employees must be trained in the proper application and removal of PPE prior to entering any isolation area. Volunteers should not enter isolation rooms. Consult your supervisor or the Infection Control Department for additional training or if you should have any questions.
There are category specific isolation precautions, in addition to the Standard Precautions. Each category has specific procedures based on the transmission mode. Follow the signage and the procedures in the infection control policies for the following types of isolation precautions:

**Droplet:** Infection transmitted through large air droplet particles. In addition to Standard Precautions, use gloves and a mask when you are within 3 feet of the patient, or when you enter the room. During transport, place a surgical mask on the patient.

**Airborne:** Infection transmitted through air nuclei. In addition to Standard Precautions, use gloves and a N95 mask. Practice strict hand washing hygiene. Use a negative air pressure room; keep the room door closed and the patient in the room. During transport, place a surgical mask on the patient.

**Contact:** If you anticipate contact with the patient, use gloves and a gown. In addition to Standard Precautions, practice strict hand washing hygiene. Limit transporting the patient from the room.

**Sterile Technique**

Aseptic technique is a set of specific practices and procedures performed under carefully controlled conditions with the goal of minimizing contamination by pathogens, protecting the patient from infection and preventing the spread of pathogens.

**Difficult Organisms**

**C. diff:** Clostridium difficile

*Symptoms:* Mild to severe diarrhea lasting 3 to 5 days (or more), loose/watery/foul smelling stools with mucous or blood.

*Precautions:* Use strict handwashing hygiene with **soap and water**. Do not use alcohol rinse, foam to prevent this infection. Use gloves and protective gown. Clean and disinfect patient care equipment and environmental surfaces thoroughly with a bleach product.

Place patients in Contact Isolation for undiagnosed diarrhea and/or pending C. Diff results.

**MRSA:** Methicillin Resistant Staphylococcus Aureus

*Symptoms:* Symptoms may not be specific; people can be carriers with no symptoms. Infections with MRSA can include pneumonia, urinary tract infection, bloodstream infection, or skin infection.

*Precautions:* Use contact isolation precautions for infected or colonized patients. If you are performing procedures which may cause droplet exposure, such as wound dressing changes, suctioning, bathing, catheterization, etc., add a mask to the PPE precautions.

**VRE:** Vancomycin Resistant Enterococcus (Enterococcus is a bacteria that we all have in our colons.)

*Symptoms:* Symptoms may not be specific; people can be carriers with no symptoms. Infections with VRE can include urinary tract infection, bloodstream infection, or skin infection.
Precautions: Use contact isolation precautions for infected or colonized patients. If you are performing procedures which may cause droplet exposure, such as wound dressing changes, suctioning, bathing, catheterization, etc., add a mask to the PPE precautions.

MDRO: Multidrug Resistant Gram Negative Organisms

Symptoms: Symptoms will be specific to the type of infection. Infections can include urinary tract infection, bloodstream infection, or skin infection

Examples: Terms used to describe MDRO include Extended Spectrum Beta Lactamase (ESBL) or Carbapenem Resistant Enterobacteriaceae (CRE). These include various gram negative bacteria such as E. coli, Pseudomonas, Klebsiella, and Serratia. These bacteria are resistant to our more powerful antibiotics.

Precautions: Use contact isolation precautions for infected or colonized patients. If you are performing procedures which may cause droplet exposure, such as wound dressing changes, suctioning, bathing, catheterization, etc., add a mask to the PPE precautions.

Tuberculosis: Tuberculosis (TB) is an airborne disease.

Symptoms: Cough lasting three or more weeks, coughing up blood, unintentional weight loss, fatigue, fever, night sweats, chills, or loss of appetite

Precautions: Place patient in negative-pressure room. Keep patients in their room as much as possible and have them wear a surgical mask when outside of their room. Contact the Infection Prevention and Control team before discontinuing isolation.

Notify maintenance daily to check the patient’s room for negative pressure. Keep all doors and windows closed. Wear a N-95 mask that has been previously fit-tested (OSHA mandate), with a fit-check conducted before entering a patient’s room.

Place patients in Airborne Isolation for undiagnosed pulmonary illness until TB has been ruled out.

What to Do If You Are Exposed to Blood or Body Fluids

For needle sticks and cuts, wash the wound with soap and water. Order a blood panel from the source patient as “Needlestick Panel” STAT. For splashes to the eyes, nose or mouth, flush or irrigate with saline or sterile water and wash for 10 to 12 minutes. Notify your supervisor or charge nurse of the occurrence and complete the Occurrence Report forms (located on Pulse under “Employee Health”). Notify Employee Health Services at ext. 4725 within 1 to 2 hours to ensure that you receive appropriate care.

If an exposure occurs after 5:00pm, on a weekend day or a holiday, please follow this protocol:

- Call the nursing supervisor at ext. 4100 or use pager number 887-9001 and inform them of the occurrence. You will be instructed to pick up a “Needlestick Packet” from the supervisor’s office. This packet contains a baseline request lab form, consent for treatment lab form, and resource information for the employee’s bloodwork.
• Have your blood drawn through the lab (available to register 24/7). Use the phone in the lab to call back for assistance.

• Send the source patient’s bloodwork to the lab as a “Needlestick Panel” STAT.

• The nursing supervisor will receive the source patient’s HIV result and will inform the exposed employee of the results.

• If the HIV results are positive, or if the exposure is considered “high risk”, the employee will be sent to the Emergency Department (ED) to be seen by the ED physician.

• As soon as you are able, call Employee Health Services at ext. 4725 to set up a post-occurrence appointment.

• The nursing supervisor will notify Employee Health of the occurrence, but you can page one of the Employee Health nurses for any questions or concerns you may have related to the exposure prior to your individual appointment.

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**KEY POINTS – INFECTION CONTROL**

- All employees and volunteers must follow our infection prevention and control policies to protect ourselves and our patients, co-workers, family and community from the spread of infection.

- Handwashing is the single most important precaution for preventing the spread of infection; the more you wash your hands, the less likely for your chance of infection.

- All employees, regardless of work area, are responsible for understanding and following infection control and bloodborne pathogens guidelines. Standard precautions require that you use personal protective equipment (PPE), such as gloves, eyewear, masks and gowns to prevent exposure to blood, body fluids, secretions, excretions, and contaminated items.

- All employees must be trained in the proper application and removal of PPE prior to entering any isolation area. Volunteers should not enter isolation rooms. Consult your supervisor or the infection prevention team for additional training or if you should have any questions.

- If you are exposed to blood or body fluids, perform the necessary first aid care. Notify your supervisor or charge nurse of the occurrence and complete the Occurrence Report forms (located on Pulse under “Employee Health”). Notify Employee Health Services at ext. 4725 within 1 to 2 hours to ensure that you receive appropriate care.
Congratulations!

You have completed the Express Education module. Remember, this is just one part in your onboarding journey at Augusta Health. Here are some next steps you should look to complete with the guidance of your supervisor:

→ Remember to drop off your completed Verification Checklist to Staff Education.

→ Complete all mandatory training assignments in HealthStream.

→ Attend an upcoming General Orientation session.

→ Complete your departmental orientation with the assistance of your educators, supervisor, and team members.

→ Visit Pulse and review the policies and procedures mentioned in this module.

Good luck and welcome to the Augusta Health team.
GLOSSARY OF TERMS:

The Americans with Disabilities Act of 1990 (ADA): Landmark disability rights law prohibiting discrimination against people with disabilities in five major areas—employment, state and local government, public accommodations, transportation and communication.

Centers for Disease Control (CDC): The CDC is a federal agency under the Department of Health and Human Services (HHS) and is the leading national public health institute of the United States.

Centers for Medicare and Medicaid Services (CMS): A federal agency under the Department of Health and Human Services (HSS) that administers Medicare, Medicaid, the Children’s Health Insurance Program (CHIP), and the Health Insurance Marketplace.

Department of Environmental Quality (DEQ): The DEQ administers state and federal laws and regulations for air quality, water quality, water supply and land protection.

Emergency Medical Treatment and Active Labor Act of 1986 (EMTALA): This law ensures public access to emergency services regardless of ability to pay.

Emergency Operations Plan (EOP): Ensures the effective organizational response to incidents that affect the environment of care within Augusta Health and may require a deviance from the usual day-to-day operations.

Employee Occurrence Forms: Forms to be completed if you have experienced an on-the-job injury or exposure. Blood and body fluid exposures need to be reported within 1-2 hours of the occurrence and injuries are to be reported within 8 hours of the incident. They can be located on Pulse.

Health Insurance Portability and Accountability Act of 1996 (HIPAA): The HIPAA Privacy Rule establishes national standards to protect individuals’ medical records and other personal health information and applies to health plans, health care clearinghouses, and those health care providers that conduct certain health care transactions electronically.

HealthStream: Our internal learning center, used to schedule and track classroom and online learning. Be sure to visit your HealthStream account regularly to stay on top of all training requirements.

The Joint Commission: An independent, not-for-profit organization, The Joint Commission accredits and certifies nearly 21,000 health care organizations and programs in the United States.

Occupational Safety and Health Administration (OSHA): Government agency that assures safe and healthful conditions in the workplace by setting and enforcing standards and by providing training, outreach, education, and assistance.

Office of Civil Rights (OCR): Enforces laws against discrimination based on race, color, national origin, disability, age, sex, and religion by certain healthcare and human services providers and health insurance plans.

Office of Inspector General (OIG): Protects the integrity of Department of Health and Human Services (HHS) programs as well as the health and welfare of program beneficiaries.
**Patient Rights and Responsibilities:** A set of protections that addresses any expectations the patient may have while a patient in our hospital and also provides directions for obtaining assistance with questions and concerns.

**Personal Protective Equipment (PPE):** Equipment that is worn to minimize exposure to hazards, such as gloves, foot protection, eye and hearing protective devices, hard hats, respirators, and full body suits.

**Protected Health Information (PHI):** Defined by the Health Insurance Portability and Accountability Act of 1996 (HIPAA), PHI is any information that can identify, or reasonably identify, the identity of a patient and relates to their healthcare (past, present or future). PHI can be oral, written, or electronic media.

**Pulse:** Our intranet. Visit Pulse frequently for announcements and other key information.

**Rounding:** A proactive approach to address patients’ needs with hourly visits that develop trust and lead to increased patient satisfaction.

**Safety Data Sheets (SDS):** Documents that accompany a hazardous chemical and provides detailed information for the safe handling, use, storage, and disposal of the chemical.