

University Hospital Student Orientation

1350 WALTON WAY AUGUSTA, GA 30901



Welcome to University Hospital



University Hospital's Mission is to improve the health of those we serve. Our Vision is that patients will insist on University, employees will be proud to be part of University and physicians will prefer University because we set the standard for high-quality, safe care and exceptional service.

We hope that you see our mission and vision throughout your time here at University Hospital.

Please let our staff know if there is anything that you need assistance with so that they can happily help you.

New Procedure to Enter/Exit



- All students will enter and exit the facility through the main entrance located at the front of the hospital.
 - Temperatures are taken upon entering the building by staff members located in the main lobby.
 - Any instructor or student who has a fever will not be admitted into the building.
 - Instructors and students will receive a sticker once cleared by the screener. These stickers are to be applied to the uniform near the badge and displayed during the entire shift.
 - Instructors and students are required to wear a surgical mask, which is to be worn in all areas during the entire shift. Surgical masks will be provided at screening entrances. The only exception is while eating or drinking in designated break areas.
- Students should observe social distancing while in the facility.
- Students are not allowed to provide or assist with the care of any patients who are rule-out or confirmed with Covid-19.

Expectations



- > Enjoy yourself, learn a lot!
- > Follow the policies of University Hospital
- > Follow your assigned faculty instructor or UH staff member's directions
- > Arrive on time and be dressed appropriately
- > NO cell phones, lap tops, or any other electronic personal devices (we are not responsible for lost or stolen property)
- ➤ University Hospital is a SMOKE-FREE campus. Use of tobacco products is prohibited within any University Hospital associated building or property.



Student Attire



DO wear

- > School Uniform
- > Student ID (must be visible at all times; do not wear at waist level)
- ➤ Scrubs or Casual Dress with lab coat
- Comfortable shoes (tennis shoes, crocs with socks are acceptable)
- Cover all visible tattoos

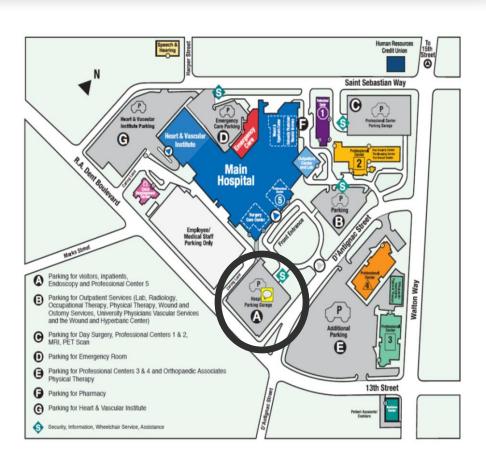
> Do NOT wear

- > Jeans or shorts
- > Low-cut blouses
- ➤ Tank tops, muscle shirts or T-shirts with advertisements
- > Any garment that shows stomach or buttock area
- ➤ Heels or open-toe shoes
- Dark eyeglasses
- Nose, lip, eyebrow, or tongue jewelry (minimum jewelry on fingers or ears)

Parking



- Free parking for instructors and students is allocated on the top level of the Hospital Parking Garage located next to the main hospital entrance on D'Antignac Street ONLY.
- Deck accessed from the circular drive in front of the hospital.
- Failure to park on the allocated levels may result in a ticket.
- ➤ If at anytime you would like an escort to your vehicle, please contact Security at 706-774-2295.



First Floor





Main Hospital Areas include:

- ➤ Main Lobby
- Cafeteria
- ➤ Food Court Chic Fil A
- ➤ Gift Shop
- Visitor Elevators

Heart & Vascular Institute Areas:

- New Moon Café
- Cardiopulmonary Rehab
- > CVP Diagnostics

Second Floor





Main Hospital Areas include:

- Main OR, PACU, Surgical Care Center
- > Radiology
- Emergency Department
- > Endoscopy
- Occupational and Physical Therapy

Heart & Vascular Institute Areas:

- > CVCC
- > CV2
- > Cath Lab

**Area locations are subject to change due to ED renovation construction.

Other Units and Departments



Main Hospital

- 3rd Floor W.G. Watson Women's Center:
 - Labor & Delivery
 - Labor & Delivery Operating Room
 - OB/Postpartum
 - Well Baby Nursery
 - Special Care Nursery
- 4th Floor:
 - 4N GYN/Antepartum Unit
 - 4SW Intermediate Care Unit
- 5th Floor:
 - 5NS Intermediate Care/Stroke Unit
 - 5W Neuro ICU Unit
- 6th Floor:
 - 6NS Medical Surgical Unit
 - 6W Medical ICU Unit
- 7th Floor:
 - 7NS Medical Surgical/GI/Pulmonary Unit
 - 7W Intermediate Care Unit
- 8th Floor:
 - 8NS Medical Surgical/Renal Unit
 - Hemodialysis Suite
- 9th Floor:
 - 9OSC Orthopedic Spine Center
- 10th Floor:
 - 10NS Medical Surgical Unit
 - 10W Oncology Unit

Heart & Vascular Institute (HVI)

- 2nd Floor:
 - Cardiovascular Care Center (CVCC)
 - CV2 (chest pain observation unit)
 - CVPACU Critical Care Telemetry
- 3rd Floor:
 - CV3 Critical & Intermediate Care
- 4th Floor:
 - CV4 Intermediate Care Unit

**Education & Development is located on the 3rd floor near the lab and EEG.

Computer Access & EPIC Training (Limited)





- All EPIC electronic health information training is located on the 3rd floor of the main hospital near the Lab and EEG department (see map).
- All instructors and students who are scheduled to receive computer and EPIC access, will be sent 2 emails from IS that will (a) notify you of your ST ID number, (b) instruct you to change your password and enroll in Self-Serve Password Reset (SSPR).
 - ➤ Please complete this prior to your scheduled EPIC training date.
 - ➤ Please remember your ST ID number and password and bring to training.
- Do not tell others your username and/or password. Failure to comply will result in your access being terminated.

Elevator Etiquette



- Patients have the top priority on the use of our elevators.
- Anyone riding service elevators are to yield to patients.
- Stairs are to be used when going up one floor or down two floors when possible.





HIPAA: Health Insurance Portability & Accountability Act



- ➤ Patient confidentiality should be maintained at all times. All patient protected health information (PHI) whether written, verbal, or electronic should be discussed with the appropriate personnel only in areas where confidentiality will be protected.
- ➤ Restrict access to those who have need, reason, and permission to have it. Refer any questions to staff.



- The Privacy Rule...Limits the use and disclosure of health information that may be made without patient's authorization
- > PHI includes:
 - Name, SSN, Address, and Telephone Number

FairWarning® Patient Privacy Monitoring Program



- Provides ability to use automated monitoring to detect unauthorized or inappropriate access of patient information
- ➤ HIPAA Privacy Rule specifies that the only appropriate reasons to access PHI are:
 - > Treatment
 - > Payment
 - Operations

Please do NOT:

- Look at a family member's record
- Look at your own record
- Look at a neighbor or coworkers record
- Look at a friend's record

University Hospital Leadership will act on any findings of inappropriate access

Penalties for Violations



Carries possibility of both civil and/or criminal penalties

May impose civil monetary penalties on covered entities of \$100-\$50,000 per failure with a maximum penalty of \$1.5 million.

Department of Justice may also impose criminal penalties and sanctions

Corporate Compliance



- ➤ Fraud versus Abuse Ensure that all communication is truthful, accurate and complete.
- > Ethics
 - > Never solicit gifts or money
 - ➤ You may accept perishable or consumable gifts (food or flowers).
- > Use resources wisely
 - > Materials
 - > Supplies
 - > Equipment
 - > Information





Policy H -01 Appendix 1 Whistleblowers (relator)



- ➤Individual who brings an action under False Claims Act may receive between 25% – 30% of proceeds plus attorney's fees
- ➤If Government decides to intervene in case then Individual may receive between 15% - 25% of the proceeds





If something looks wrong, you should react to it!

- ➤ If you believe you have information about an activity that may be unethical or illegal, you should discuss your concern with your instructor as soon as practical.
- > See Something, Say Something!
- > Report this to the unit supervisor!

HIPAA and Social Media















WHAT HAPPENS AT UNIVERSITY HOSPITAL, STAYS AT UNIVERSITY **HOSPITAL!**

























HIPAA and Social Media



You are personally responsible for your posts. You must make it clear that the views expressed are solely your personal views and do not necessarily represent the views of University Health Care System and its employees.

You may not post pictures of patients **or** family of patients taken on any University Health Care System property – even with the subject's permission.

You may not disclose confidential or proprietary University Health Care System information.

HIPAA and Social Media



"A slip of the lip-pa violates HIPAA." (Parkview Health Student Passport, 2014)

If you think it might compromise HIPAA...

Don't post it!

Teamwork in Healthcare



- ➤ We all have heard the word "teamwork" and have a general understanding of its meaning. We know on a personal level that we like to work with "team" players because it makes the work environment more pleasant and the work gets done more efficiently and in less time.
- ➤ Do you know, however, what teamwork means to and for our patients? Is it mandatory and required or can we just do it sometimes when we feel like it?
- > Teamwork is crucially important to our patients. It is required. It is mandatory. Our failure to work as a team can affect patient outcomes.

Teamwork



Three Key Components:

- ➤ Coordination of patient care
- ➤ Interdisciplinary focus

➤ Good communication among ALL healthcare

providers



Important Role of the Student Care Giver



Communicate important information as soon as you become aware...SEE SOMETHING, SAY SOMETHING!

Patient Safety: National Goals and Requirements



- Use at least two Patient Identifiers
- > Patient name and medical record number from...
 - Medication Administration Record
 - Physicians Orders
 - > Patient ID Band
- ➤ Lab Computer Slip & Patient ID Band

The patient's room number should **NEVER** be used as an identifier!

Effective Communication is Crucial



- ➤ Most errors result from flawed communications systems and process problems.
- > Use standardization of abbreviations
- ➤ Remember: Only designated University Hospital personnel can accept verbal orders

Identification Procedures Prior to Surgery



Checked by unit nurse, pre-op holding area and OR:

- ➤ Patient arm band
- ➤ Surgical Site Mark
- ➤ Procedure Checklist

Clinical Alarm Systems



Serve as a safety feature for our patients

Examples are:

- > IV Pumps
- > Heart Monitor Alarms
- Bed Fall Monitors



Codes



- ➤ Code Red Uncontrollable Fire
- Code Blue Respiratory/Cardiac Arrest
- ➤ Code Orange Chemical incident has occurred
- Code Pink Infant Abduction
- ➤ Code Amber 17 years or younger abduction
- Code Grey Violent/Combative Patient or Family member. No weapons involved.
- ➤ Code Black Bomb Threat
- ➤ Code Silver Active Shooter
- ➤ Code Triage Standby A Disaster has occurred but there is time to prepare.
- ➤ Code Triage A disaster has occurred.
- > Type of Lockdowns: Total, Controlled, or EDL (specific to the ED)

IF a Code is called, please follow the instructions of your faculty instructor or assigned UHCS staff member.

Code Red



Remain calm but notify unit personnel immediately!

Steps to follow ...

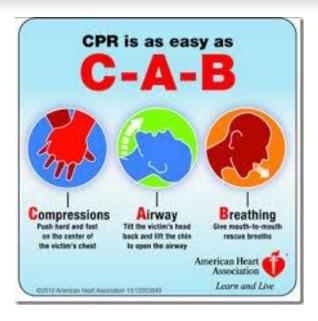
- 1. Remove anyone in danger
- 2. Close the door to the area
- 3. Pull the nearest fire alarm
- 4. Dial 66, tell the operator the exact location of the fire
- 5. Close as many doors as possible and attempt to put out small fires.

Code Blue



If you find a patient who is unresponsive & not breathing

- ➤ call aloud for "help!"
- ➤ activate 'code blue' by dialing '66'
- report the situation and room number to the operator
- ➤ if determined to be pulseless, initiate CPR until additional help arrives





Code Pink - Infant & Pediatric Security



- ➤ Hospital ID band placed prior to care being provided
- ➤ Matching hospital ID bands are placed on accompanying parents or guardians
- > Staff working with children, including transporters, must wear a University Hospital ID badge that is easily visible.
- > Women's Center staff wear a badge with a **bright pink** border.

Code Pink

- Called for a possible <u>infant</u> abduction
- (Well Baby Nursery or Special Care Nursery)





Code Amber – Infant & Pediatric Security



- ➤ Called once the determination has been made that there has been possible pediatric abduction
- > 17 years and younger
- ➤ Could be from anywhere in the hospital that cares for a pediatric patient.



- There will be an overhead announcement of Code
 Amber with location and description of missing pediatric patient
- You will need to ...
 - constantly look for child of that description
 - ➤ If seen, notify security immediately!
 - ➤ Give description of person accompanying child and location where was seen
 - Stay in location until Security arrives

Code Triage – Emergency Preparedness



- ➤ Indicates a major incident causing influx of casualties beyond ER's design and capabilities
 - > natural disaster such as fire or flood
 - > a man made disaster such as a train wreck
- ➤ 2 Code Triage Drills per calendar year
 - > This will not impact your clinicals
- ➤ In the event of an actual "Code Triage":
 - Consult unit management for instruction





Code Grey



- > Call "66" when a patient or visitor is at risk for harming their self or others.
- > Trained hospital staff will respond
 - > Security
 - > Resource Nurse
 - > Trained ED staff
- ➤ May need to initiate restraints if cannot calm patient or visitor



Non-violent Restraints



- ➤ Allow us to provide acute medical-surgical care that supports healing
 - ➤ For example ...
 - ➤ patients who are unable or unwilling to comply with instructions not to climb out of bed or not to pull on lines or tubes



Violent or Self-Destructive Restraints



- ➤ Used to protect an individual against injury to him-herself or others caused by an emotional or behavioral disorder
- > Does not include:
 - straps for operating room tables,X-ray tables and stretchers



- restraints used by law enforcement, including shackles and handcuffs
- > Chemical Restraint includes medications used in response to emergent, dangerous behavior

Goals at University Hospital



- Prevent or reduce use of restraint and seclusion for patients
- ➤ Make every effort to use non-physical interventions whenever possible

Restraints



University Hospital's philosophy is to create an environment that will...

- Protect patient's health and safety
- Preserve patient's dignity, rights and well being
- ➤ Limit use to situations in which patient is at imminent risk of harming self or others
- Provide adequate resources
- Maximize safety for both patients and staff
- Minimize emergency circumstances
- Educate staff

Chemical Spills









- Requires that everyone be removed from the immediate area
- Call Code Orange if needed
- Report the spill to a UH staff member immediately
- ➤ He/she will have access to the MSDS (Material Safety Data Sheet) available for housekeeping to clean the spill.

Infection Prevention









Infection Prevention



- ➤ Standard Precautions interrupt contact and indirect contact transmission for most organisms.
- ➤ Hand Hygiene and barrier use are both parts of Standard Precautions.
- The most common means of transmitting organisms from patient to patient is on the hands of healthcare workers.
- ➤ Hand hygiene is the best way to interrupt spread.

Best Hand Hygiene - CDC



GOOD BETTER BEST Plain soap and water Antimicrobial soap at scrub sinks Sanitizers throughout all care areas

Hand Sanitizer



- Use <u>routinely</u> for hand hygiene except when hands are *visibly* soiled
- Apply adequate amount from dispenser as recommended by manufacturer to cover all surfaces
- Cover all surfaces including
 - > Two inches above the wrists
 - > fingernails
- Rub together until all surfaces are dry
- ➤ Allow complete drying before touching anything



Hand sanitizing should be performed...



Every time you enter or exit a patient room

- ➤ Before entering a patient's room or approaching bedside
- ➤ Before putting on gloves (clean or sterile)
- ➤ After contact with patient's intact skin
- ➤ After glove removal of any type
- After contact with any high-touch surface in patient's room
 - bed rails and controls
 - > IV pumps
 - > light switch, BP cuff, etc.

Handwashing



- > Skin Cleanser
- Plain soap
- > Agents that speed handwashing
- > Emollients and skin conditioners
 - > reduces irritation
- > Is **NOT** antibacterial
- Required when
 - hands are visibly soiled
 - > after cleaning stool
 - > after toileting
 - > after a body fluid exposure



Handwashing



- Remove lab coat or roll up long sleeves
 Point fingers down and wash vigorously for 15-20 seconds, rubbing all surfaces of lathered hands and rinsing under a stream of water
- > Turn off the faucet with a clean paper towel
- > For better germ kill, sanitize after washing every time!





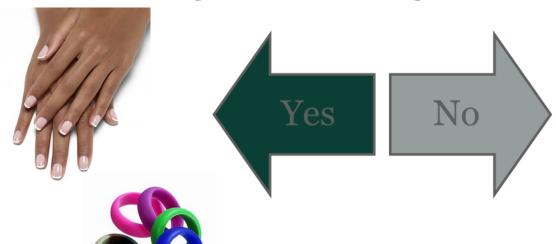


WASH then SANITIZE

Nails and Jewelry



- ➤ No artificial fingernails
- Natural nails no longer than 1/4 inch long (preferably 1/8 inch)
- ➤ Cuticles and nails are well groomed
- >Avoid rings with settings & bracelets







Infection Prevention



Change your gloves between tasks and never wear gloves outside of the patient's room unless providing direct care.

Dirty gloves spread germs to clean areas!

When Standard Precautions are Not Enough



- > Expanded Precautions are used
 - > Contact Precautions
 - ➤ Contact Precautions Environmental
 - ➤ Droplet Precautions
 - > Airborne Precautions

Contact Precautions



- ➤ Used for patients with MRSA, VRE and E-CR. Room borders on HEV board are blue. Use gown and gloves from the Standard Precautions Supply Basket in the room.
- ➤ You may know MRSA and VRE. E-CR stands for Enterobacter type organisms that are resistant to carbapenems. This means they are resistant to all major classes of antibiotics.
- Contact Precautions are also used for lice and scabies and wounds with too much drainage to be contained in a dressing.



Contact Precautions -Environmental



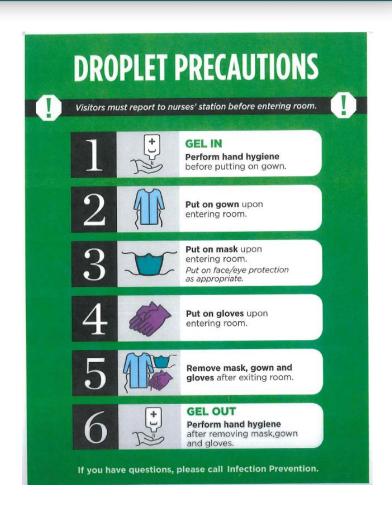
- Some organisms are not killed by hand gel nor the usual cleaners used by housekeeping. These organisms usually cause diarrhea. An example is C. diff, an organism that causes antibiotic related diarrhea.
- Hand washing when leaving the room is mandatory.
- Follow that by gelling.
- ➤ This and the following types of isolation all require isolation supply carts.



Droplet Precautions



- ➤ Used for infections or conditions where large wet respiratory droplets or numerous skin scales are generated; usually suspect Covid19, pneumonia or Stevens Johnson syndrome.
- ➤ A negative pressure room is not needed.
 - * exceptions: Covid19



Airborne Precautions



- ➤ Unless you have been fit tested by our Employee Health Office for a PR used at University Hospital, you cannot enter the room of a patient on Airborne Precautions.
- This type of isolation is most often used for suspect Covid19 or TB. We use this isolation frequently, but actual MTB is seldom identified.



Who can get an infection at UHCS?



- ➤ Everyone who comes into the hospital is at risk. Some are more at risk than others.
- ➤ Patients have the most risk. Visitors are also at risk because they may not know what to do to protect themselves
- > Healthcare workers have the least risk.

Influenza



➤ Healthy healthcare workers may not get very sick with the flu – but if they give it to their patients, that is another story

➤ Healthy healthcare workers may not get very sick with the flu
– but if they take it home to their families, that is another story

➤ Influenza is easy to prevent

- > Preventing influenza is the responsibility of every healthcare worker
- ➤ Masks must be worn during flu season IF you do not take the vaccine

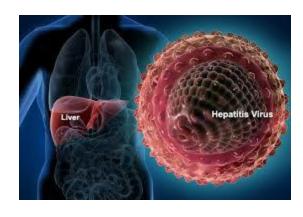


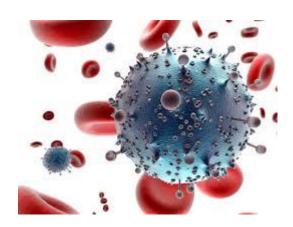
Blood Borne Pathogens



- **HBV** (Hepatitis B Virus)
 - Hardy and a significant risk!Vaccination

 - > Can be transmitted through caked, dried blood and contaminated surfaces!
- HCV (Hepatitis C Virus)Very High Risk!
- > **HIV** (Human Immunodeficiency Virus)
 - > Fragile and a smaller Risk





Steps for Protection



Use <u>Standard Precautions</u> with everyone!

- ➤ Wear gloves, mask, gown, and face shield as needed
- Use excellent Standard and Standard Environmental Precautions
- > Never recap needles



Sharps Disposal





- Dispose of all sharps in sharps disposal container
 - including broken glass
 - <u>excluding</u> anything contaminated with mercury
- ➤ Notify unit supervisor when sharps level is approaching full
- Never recap needles

> NEVER:

- stick needles into mattresses or leave them dangling or taped to surfaces without appropriate cover
- bend, cut, or break contaminated needles

What to do in the event of an exposure



Stop what you are doing and have someone relieve you so that you can do the following:

- ➤ Wash the affected area
- ➤ Go to Employee Health for evaluation
- ➤ After hours, on weekends, and holidays contact the ANS (beeper 77-1442), Resource Nurse (beeper 77-2300) or dial the operator
- ➤Go directly to the ED for eye exposures
- ➤ Complete an incident report



Biomedical Waste



Biological Waste: <u>free liquids</u> not directly discarded into sewer system

****All waste that is put in a red bag in the Soiled Utility Room is to be bagged in a clear bag at the point of origin****

What gets discarded in Biomedical Waste:

- > Empty blood bags and tubing
- Blood saturated dressing
- Clear plastic bags showing biohazard label
- > Pleurovacs
- ➤ Hemovacs (if leaking, empty contents down the drain)
- Suction canister removed from patient rooms

Confidential Waste



- ➤ Paper waste containing patient-sensitive information such as name, medical record number, diagnosis, etc.
- ➤ To be placed in designated container for shredding on unit
- ➤ IV bags/other name-labeled disposables (including antibiotic mini-bags). This is confidential waste that *cannot be shred*.
 - ➤ Do **NOT** dispose in regular trash
 - ➤ Dispose as Biomedical Waste

Toxicity Reduction



- ➤ Batteries tape terminals and discard in special battery waste containers
- Mercury wastes (UHCS should not have anything containing mercury)
 - cleaned by Environmental Services and managed as a hazardous waste
 - > contact the unit supervisor





Loss of Power



- > Emergency generators come on within 10 seconds.
- ➤ Direct life support equipment should always be plugged into a red outlet.
- > Red outlets work when there is loss of power.
- > Remain calm
- ➤ Whistles, bells or noisemakers are given to patients to replace the nurse call-light
- > Flashlights are available at nurses stations
- > Bottled water is used if access to water is lost
- > Telephones are backed up by emergency generators place only emergency calls

Elevator Failure





- > Remain calm!
- Use elevator phone to report
 - ➤ No need to dial call is automatic
 - > Help is immediate!
- ➤ Elevators continue to work in emergencies such as fire
- ➤ If smoke is detected in elevator lobby, those elevators will go to 1st floor

Clinical Paperwork



After review of this presentation, please complete the following forms:

- > 1. Confidentiality and Network Access Agreement
- 2. Clinical Agreement
- > 3. UHS Clinical Orientation Post Test Answer Sheet

Individual students complete and return ALL FORMS to UH Student Placement [studentplacement@uh.org]

Cohorts/clinical groups: Clinical groups will return forms to their campus clinical coordinator for forwarding to UH. Clinical coordinators will only forward 1 & 2. Form 3 will be kept on file with in the academic program.

Welcome to University Hospital!



We hope that your clinical rotation will be enjoyable, exciting & a great learning experience!

