



## Welcome to New Hire Orientation Day 2!



## AUHS Benefits

## *AU Health System*

## Benefit Options

Your Benefits. Your Way.

## Agenda

### **What**

- *What are my benefit options?*

### **Who**

- *Who can I cover under the plans?*

### **When**

- *When can I enroll?*
- *When can I make changes?*

### **Where**

- *Where do I find more information?*
- *Where do I go to enroll?*

## Enrollment Opportunities

- New Hire
- Open Enrollment - October
- Special Enrollments
- Life Change Events

Notify Benefit office no later than 30 days after the event

- Marriage
- Divorce
- Birth
- Death
- Change in Job Status
- Loss/Gain of other coverage

## What Are My Benefit Options?

- **Medical** – AUHS self-insured
  - Medical claims through UMR
  - Pharmacy claims through Navitus
  - Plans
    - Base (PPO) – default plan
    - Choice (HDHP)
    - Select (PPO)
- **Dental**
  - Carrier – Delta Dental
  - Plans
    - Core – includes orthodontics
    - Value
- **Vision**
  - Carrier – Eye Med
  - Plans
    - Elite – includes eye exam (\$10 co-pay)
    - Value

## Benefit Options

- **Life and AD&D Insurance**
  - Carrier – Prudential
  - Plans
    - **Employee Life and AD&D**
      - 1X annual salary Life and AD&D – employer paid
        - Additional employee paid coverage options
          - 1X to 6X annual salary Life and AD&D plans
    - **Dependent Life and AD&D Insurance**
      - Spouse - \$10K, \$30K, \$50K, or \$100K
      - Child - \$10K, \$15K, or \$20K

Note – AD&D election(s) must match Life Insurance option(s)

## Benefit Options

- **Spending Accounts**
  - Carrier – Bank of America
  - Plans
    - **Health Savings Account (HSA)**
      - Must be enrolled in a HDHP-Choice Plan
      - Employee annual contribution between \$100 and \$3,600 (single) and \$7,200 (family)
      - Employer annual contribution \$500 (single) or \$875 (family)
    - **Flexible Spending Accounts (FSA)**
      - Employee annual contributions between \$100 and \$2,750 into your Health Care FSA (Traditional or Limited Purpose)
    - **Dependent Care FSA**
      - Employee annual contributions between \$100 and \$5,000 into your Dependent Care FSA.

[www.myhealth.bankofamerica.com](http://www.myhealth.bankofamerica.com)

## Benefit Options

- **Retirement**
  - Carrier – Valic
  - Plans
    - **403(b)** – Employer match up to 5%
    - **457(b)**
- **Disability**
  - Carrier – Mutual of Omaha
  - Plans
    - **Short Term**
      - 50% option – Employer paid. Employee automatically enrolled at 366<sup>th</sup> day of service
      - 10% Buy-up – available through ESS during Open Enrollment the year following enrollment in 50% option. Employee paid.
    - **Long Term**
      - 50% option – Employer paid. Employee automatically enrolled at 366<sup>th</sup> day of service
      - 60% option – available through ESS during Open Enrollment the year following enrollment in 50% option. Employees pays cost difference.

## Benefit Options

- **Accident/Cancer/Medical/Hospital Indemnity/Critical Illness**
  - Carrier – Allstate
  - Enroll directly with Allstate
- **Home and Auto**
  - Carrier – Travelers
  - Enroll directly with Travelers
- **Legal Assistance**
  - Carrier – MetLife
  - Enroll through ESS
- **Pet Insurance**
  - Carrier – Nationwide Pet
  - Enroll directly with Nationwide
- **529 College Savings Plan**
  - Carrier – Blackrock
  - Enroll through Valic

## Who Can I Cover in the Plans I Elect?

### Eligible Dependents

- Legal Spouse
- Domestic Partner  
(*affidavit required*)
  - Life
  - Dental
  - Vision
- Dependent Child up to age 26

### Proof of Status

- Marriage Certificate/License
- Birth Certificate
- 1<sup>st</sup> page of federal tax form (1040/1040a/1040ez)
- Current Social Security Card

## Important

- Access [Employee Self Services](#)
- View [Benefits Enrollment Guide](#) and [Medical Summary of Benefits](#) and Coverage on the [Benefits Web Page](#).  
<https://my.augusta.edu/human-resources/benefits/>
- Complete First time enrollment within 30 days from date of hire. **On day 31 enrollment is closed and default coverage is applied.**
- You must complete on-line enrollment even if declining coverage
- AU Medical Center requires enrollment in Medical Coverage, or proof of other medical coverage.
- **Premiums cannot be refunded if you are defaulted and later provide proof of other coverage.**
- Make sure to have documents before enrolling
- Please, allow 7 to 14 days after on-line enrollment to receive cards

## Premiums

Please go to 2021 Benefit enrollment summary guide to see the premiums on the benefit web page at:

<https://my.augusta.edu/human-resources/benefits/>

Premiums and contributions for the followings plans are based on criteria specific to individual employees.

- Valic Contributions
- Basic/AD&D Life Insurance
- Short/Long Term Disability
- Nationwide Pet Insurance
- Travelers Auto/Home Insurance
- Allstate Products

## Surcharges

### Tobacco-Free Attestation

Employees are required to attest stating whether they, or any member covered under their Health System health plan, use tobacco products or not, and if they will abstain from tobacco use during the insurance year. The use of tobacco products will increase premiums by \$41.67 per month (\$500 annually).

### Spousal Surcharge

Employees adding a spouse to their medical plan will need to attest stating whether or not their spouse has the ability to obtain group health insurance through their own employer. For employees who want to continue coverage of their spouse on the Health System health plan when they have access to group health insurance through their own employer, an additional \$100/month (monthly) or \$46.15 (biweekly) spousal surcharge will be applied to their premium.

**Smoking Cessation Call 706-721-6744**

## Medical Plans

A side by side comparison of Medical Plans

Medical Plan Features	Medical Select Plan (PPO)	Medical Choice Plan (HDHP)	Medical Base Plan (PPO) – Default Plan
Coverage	In Network/UHC Network/ODN	In Network/UHC Network/ODN	In Network/UHC Network/ODN
<b>Deductible</b>			
Individual	\$500/\$750/Not Covered	\$1,500/\$2,000/Not Covered	\$2,000/\$4,000/Not Covered
Family	\$1,000/\$1,500/Not Covered	\$3,000/\$4,000/Not Covered	\$6,000/\$8,000/Not Covered
<b>Medical Out-of-pocket max (Includes deductible)</b>			
Individual	\$4,000/\$5,000 /Not Covered	\$4,500/\$6,000/Not Covered	\$5,000/\$5,100/Not Covered
Family	\$8,000/\$10,000 / Not Covered	(1) \$9,000/\$12,000/Not Covered	\$10,000/\$10,200/Not Covered
Office visit	*\$30/45%/Not Covered	20%/30%/Not Covered	35%/50%/Not Covered
Preventive visits	*\$0/\$0 /Not Covered	*\$0/\$0/Not Covered	*\$0/\$0/Not Covered
Inpatient care/surgery; Outpatient Surgery (per admit/surgery)	20%/45%/Not Covered	20%/30%/Not Covered	35%/50%/Not Covered
Outpatient lab/X-ray/non-hospital tests	*0%/45%/Not Covered	20%/30%/Not Covered	35%/50%/Not Covered
Emergency room	*\$150/\$150/\$150	20%/20%/20%	35%/35%/35%
Urgent Care	*\$40/\$100/Not Covered	20%/30%/Not Covered	35%/50%/Not Covered
Convenience Care	NA/\$50/Not Covered	NA/30%/Not Covered	NA/50%/Not Covered
Coinurance	20%/45%/Not Covered	20%/30%/Not Covered	35%/50%/Not Covered

(1) The maximum any one individual will pay out of pocket is \$6,550 each calendar year in the Choice HDHP, Family option

\* Deductible does not apply.

AU Medical Center is Self Insured for Medical  
Claims processed through UMR for Medical and Navitus for Pharmacy

## Wellness Incentives

Employees enrolled in AU Health System Select, Base, or Choice medical plans may earn up to a maximum of \$500 in either employer-provided HSA contributions (for Choice HDHP members) or in premium relief (for Select or Base PPO members), based on meeting the following requirements:

- The employee must be enrolled in an AUHS Group Health Plan **prior to January 1** of the plan year
- Both the Biometric Screening and Health Risk Assessment must be completed between **November and March** and
- Proof of completed activities must be submitted based on specific deadlines as set forth by Employee Health.
- Incentives will be provided twice during the calendar year during the months of July and November

## Cobra and Retirement Benefits

- Health Insurance
- Dental Insurance
- Vision Insurance

### Retirement Criteria

- 59 ½ years old
- Actively employed by AU Medical Center on the day before retirement
- Enrolled in benefits at least 3 years prior to retirement date

## Tuition Assistance

**Pre-paid tuition** – Employees attending Augusta University

**Tuition Reimbursement** – Employees attending other accredited colleges/universities

### Eligibility Requirements

- Employed at least 6 months
- No disciplinary actions within last 12 months
- Application submitted 30 days prior to first course
- 12 month work obligation upon graduation

### Contact Christy Roca

Compensation and Performance Specialist  
[croca@augusta.edu](mailto:croca@augusta.edu)  
706-721-3634



## Employee Assistance Program

Confidential Counseling

- Emotional Well-being
- Family and Relationships
- Legal and Financial
- Healthy Lifestyles
- Work and Life Transitions

Mutual of Omaha  
1-800-316-2796  
[Mutualofomaha.com/eap](http://Mutualofomaha.com/eap)

24 hours a day service

## Employee Discounts and Programs

<https://my.augusta.edu/human-resources/benefits/employee-discounts>

- Hearing aid discount - Eye Med
- Vision discount - Delta Dental
- Travelex -The Standard
- Museums on Us - Bank of America
- Working Advantage
- Real Appeal – weight loss program
- Local and Regional Merchants

## Default Coverage

What happens if you do not complete the on-line process?

### Base Medical Plan

- Employee only coverage
- Premiums deducted from pay check
- Non-tobacco Incentives cannot be applied

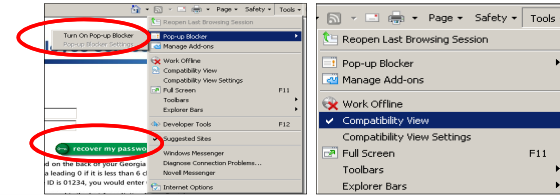
### Basic Life and Basic AD&D Insurance

- Unknown beneficiaries

Cannot be changed until Open Enrollment or a Life Change Event

## Enrollment Tips

- Make Sure You Have All Documents
- Use Internet Explorer as Your Browser
- Log on to Employee Self Service (ESS) at:  
<https://saas.unicornhro.com/scripts/cgiip.exe/WService=gwemployee/gwmain.r?CN=2484>
- Disable Pop-up Blockers
- Place ESS in Compatibility Mode



Where Do I Enroll ?  
What Do I Need to Enroll ?

Example Employee ID#  
ID# on back of badge 101**123450**  
Add a leading 0\*

EE number is **012345**

Employee Self Services Link:  
<https://saas.unicornhro.com/scripts/cgiip.exe/WService=gwemployee/gwmain.r?CN=2484>

**Health**  
AUGUSTA UNIVERSITY

**Employee Self-Service**

Customer ID: 2484  
Employee ID:   
Password:

[login](#) [recover my password](#)

Employee ID: Your Employee ID can be found on the back of your AU Medical Center issued employee badge.

Your Employee ID (T&A) is located on the back of your employee badge to the right of ID #. It is the first five numbers following 101. Do not use the 0 at the end - 101xxxx0. When entering above, please add a leading 0 to the first five numbers after 101 and leave off the 0 at the end. For example, if your ID # is 101234560, you would enter 023456.

Password: Last 4 digits of your SS# and your birthday year. For example, if your SS# ends in 5678 and you were born in 1965, enter 56781965. Previous Users: Please use the same password that you have been using to date.

**Employee ID: 101123450**

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**Health**  
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Employee Contact - Validation

Please confirm that your home and work location information is correct, if not please update. Click on Update to apply changes or to verify current information. Click on OK to continue.

**Personal**

- Personal Data
- Address Information
- E-Mail Address
- Dependents
- Education
- Emergency Contacts
- Change Password
- Job Reviews
- Salary History
- Skills Information
- Certifications
- Employee Files
- Training Classes
- Training Enrollment
- Work Address Information

**Payroll**

- W-4
- Paid Time Off
- Time Off Request
- Paycheck Information
- Paycheck Calculator
- Direct Deposit Accounts
- W-2 History
- Voluntary Deduction(s)

**Benefits**

- Open Enrollment
- Benefit Statement
- Benefit Beneficiaries
- Total Compensation Statement

Home Mailing Address [update](#)

Effective Date:  
Address:

Phone Number:  
Cell Phone Number:

Work Location [update](#)

Effective Date:  
Building Code:  
Room Number:  
Phone Number:  
Cell Phone Number:  
Work Email Address:

[ok](#)

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**Health**  
AUGUSTA UNIVERSITY

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Benefits

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Welcome to The AU Health System's New Hire Benefits Enrollment process. You may return to the new hire benefits enrollment function at any time during the first 30 days of your hire date to make additional changes. Please make sure you click submit at the end of the process for your benefits to take effect. Failure to complete all of the steps in the process will result in your benefits not being set up.

An "important information" sheet is attached that must be read before beginning the enrollment process. It will also be helpful to review the benefit summary information on the AU Medical Center Employee Benefits website before entering the new hire enrollment process.

Click on the following links for review:

- Important Information
- 2020 Benefits Summary
- 2020 Enrollment Guide
- AUHS's Official Letter with Federally Required Communications
- 2020 Wellness Incentives
- Frequently Asked Questions
- Adoptive Benefits Plan Enrollment
- Additional Voluntary Benefits Information
- Dase Medical Plan Summary of Benefits & Coverages
- Choice Medical Plan Summary of Benefits & Coverages
- Select Medical Plan Summary of Benefits & Coverages

Click the Next button at the bottom of this page to begin your online new hire enrollment.

- 1 Verify Personal Information
- 2 Verify Dependent Information
- 3 Verify Information
- 4 Review and Elect Benefits
- 5 Review Elections
- 6 Benefit Statement

[next](#)

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# Complete Enroll On-Line

Follow the prompts to:

- Elect plans
- Add dependents
- Add beneficiaries
- Enter annual amount for spending accounts

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**Health** AUGUSTA UNIVERSITY 5 Review Elections

**Personal**

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**Flexible Spending Accounts**

You must click the Submit button to record your benefit elections.

You have elected the benefits listed below. Please review this information carefully. To make changes, click the Back button at the bottom of the page. When all information displayed below is correct, click the Submit button at the bottom of the page. Your benefit elections listed below will not be saved unless you click the Submit button. Your elections will be sent to your Benefits Department for approval.

Here are the costs per Bi-weekly pay period.

			Employee	Employer
Medical	You have selected Base Medical / Employee Only coverage.		\$60.78	\$132.19
Dental	You have selected to decline Dental coverage.		N/A	N/A
Vision	You have selected to decline Vision - Materials Only coverage.		N/A	N/A
Life/AD&D	You have selected Life/AD&D 1x / Employee Only coverage. Coverage amount is \$42,000. Primary beneficiaries are: (100.0000%).		\$0.00	\$1.78
Short Term Dis	You have selected STD 50% / Employee Only coverage.		\$0.00	\$15.72
Long Term Dis	You have selected LTD 50% / Employee Only coverage.		\$0.00	\$3.28
AD&D - Hartford	You have selected to decline Accidental Death/Disemb coverage.		N/A	N/A
Legal Insurance	You have selected to decline Legal Insurance coverage.		N/A	N/A

back submit

**Health** AUGUSTA UNIVERSITY 5 Review Elections

**Personal**

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- Address Information
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Message from webpage

Your benefit changes are accepted. Print and maintain a copy of this confirmation for your records. The printed confirmation page serves as proof of your benefit elections for the upcoming plan year.

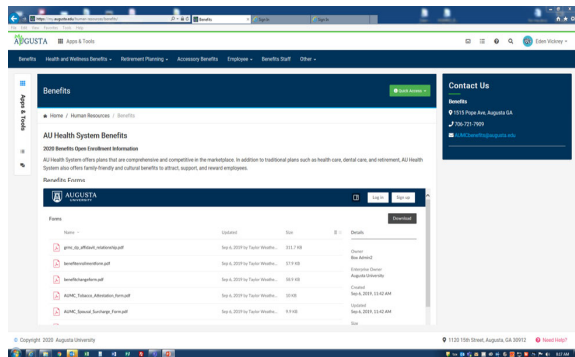
OK

			Employee	Employer
Long Term Dis	You have selected LTD 50% / Employee Only coverage.		\$0.00	\$3.28
AD&D - Hartford	You have selected to decline Accidental Death/Disemb coverage.		N/A	N/A
Legal Insurance	You have selected to decline Legal Insurance coverage.		N/A	N/A

back submit

## Medical Center Benefits Website

<https://my.augusta.edu/human-resources/benefits/>



## Medical Center Benefits Team

Phone: 706-721-7909  
 E-mail: [AUMCBENEFITS@augusta.edu](mailto:AUMCBENEFITS@augusta.edu)

Staff:

- Donna Knowles, Manager, Benefits and Records
- Eden Vickrey, Benefits Analyst
- Wanda Lowe, Benefits Specialist
- Joyce Loyal, Benefits Coordinator

Office Hours: Monday - Friday 8:00 a.m. to 5 p.m. (by appointment only)

Location: 699 Broad Street-8<sup>th</sup> floor



# Questions & Answers



## Interpreter and Translation Services

## INTERPRETER AND TRANSLATION SERVICES

*Culturally and Linguistically Appropriate Services (CLAS)*



## National CLAS Standards Department of Health and Human Services

### Principal Standard (Standard 1)

To provide effective, equitable, understandable and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy and other communication needs.



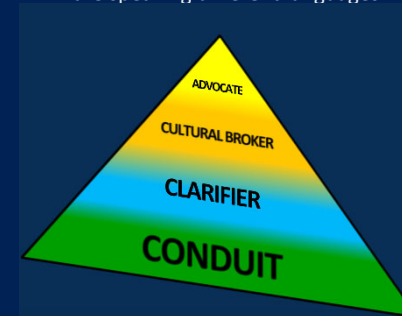
## National CLAS Standards Department of Health and Human Services

- Governance, Leadership and Workforce (Standards 2 - 4)
- Communication and Language Assistance (Standards 5 - 8)
  - ✓ Must offer and provide language assistance at every point of contact
  - ✓ Must provide to patients verbal and written notices
  - ✓ Must assure the competency of interpreters and bilingual staff
  - ✓ Must make available materials and signage
- Engagement, Continuous Improvement and Accountability (Standards 9 - 15)



## Role of the Medical Interpreter

To facilitate understanding in communication between people who are speaking different languages.



## Cyracom International "Blue Phone"

- Over-the-phone interpretation services 24/7
- Professional Medical Interpreters
- More than 80 languages available



## DT Interpreting - Deaf Talk

- American Sign Language (ASL) Interpreters
- Live Stream ASL Interpreters 24/7
- In-Person ASL interpreters available by appointment



## Legal and Accreditation Requirements

### Department of Health and Human Services, Office of Minority Health

Effective March 1, 2001 the National CLAS standards. In April of 2013, new enhanced National CLAS standards were introduced for advancing and sustaining CLAS policy and practices in health care.

<http://minorityhealth.hhs.gov>

### The Joint Commission

Effective January 1, 2012, hospital accreditation requirements to advance effective communication, cultural competence, and patient and family centered care. <http://www.jointcommission.org>

### Southern Association of Colleges and Schools Commission on Colleges (SACSCOC)

Diversity in higher education is critical to the social and economic future of this country. Consequently, the Commission supports the leadership role of its member institutions in promoting and sustaining diversity in all arenas of higher education. <http://www.sacscoc.org>

### American Disability Act (ADA)

Effective March 1, 2012, ADA makes it illegal for a healthcare provider to ask young family members to "interpret". <http://www.ada.gov>

### Interpreter and Translation Services

<https://my.augusta.edu/patient-family-engagement/interpreter>



## INTERPRETER AND TRANSLATION SERVICES

706-721-6929

[mcghiclas@augusta.edu](mailto:mcghiclas@augusta.edu)



## Infection Prevention

# Infection Prevention: What's Your Role?

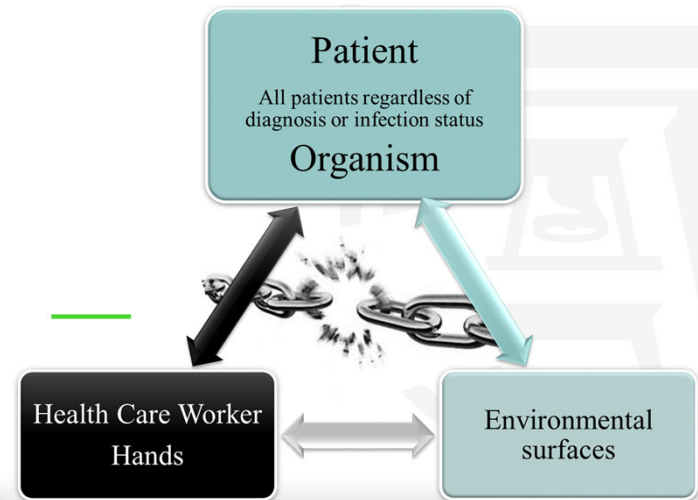
*Infection Prevention, Ext. 1-2224*

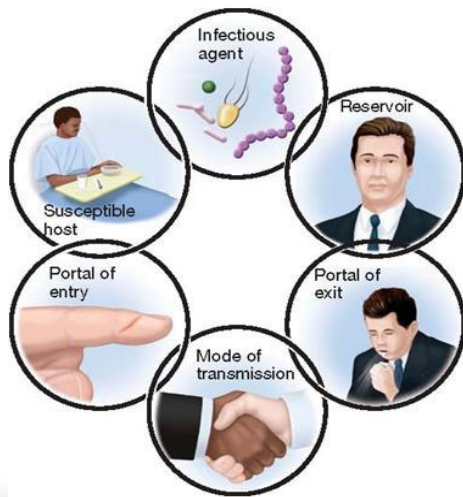
## Objectives

- Discuss National Patient Safety Goals
- Discuss hand hygiene practices and requirements
- Recognize differences between standard and transmission-based precautions
- Discuss the financial impact of HAI
- Identify prevention strategies for HAI, MDROs, and HCW exposure
- Discuss proper application and removal of PPE
- Discuss Environmental Hygiene
- Discuss Sharps Safety, Bloodborne Pathogens & Exposures

## 2020 National Patient Safety Goal No. 7 Prevent Infections

- **NPSG.07.01.01:** Adhere to Hand Hygiene guidelines.
- **NPSG.07.03.01:** Use proven guidelines to prevent infections that are difficult to treat.
- **NPSG.07.04.01:** Use proven guidelines to prevent infection of the blood from central lines.
- **NPSG.07.05.01:** Use proven guidelines to prevent infection after surgery.
- **NPSG.07.06.01:** Use proven guidelines to prevent infections of the urinary tract that are caused by catheters.





## Examples of How Germs are Spread by Contact

- Contact Precautions
  - Direct: person-to-person contact
    - Hand to hand
    - Hand to patient's skin
  - Indirect: objects to hand contact
    - Bed and Linens
    - Light switch and plumbing fixtures
    - Door knobs/plates/handles
    - TV remote

## Two Types of Precautions

- Standard Precautions
  - Foundation of infection prevention
  - Component of the bloodborne pathogen exposure control plan
- Transmission-Based Precautions
  - Implemented for known or suspected infection with the potential to be spread

IC.02.01.01 EP3

## Where Do Standard Precautions Apply?

- Standard precautions are the foundation for preventing transmission of infectious diseases.
- **They apply to all patients and across all healthcare settings** (e.g., hospitals, ambulatory surgery centers, freestanding specialty care sites, interventional sites).

## Standard Precautions Include Practices for:

- Hand Hygiene
- PPE
- Environmental control
- Respiratory hygiene/cough etiquette
- Sharps safety
- Patient resuscitation
- Textiles and laundry

## Hand Hygiene

- The most common mode of pathogen transmission is via hands!
- Clean hands are the single most important factor in preventing pathogen spread and antibiotic resistance in healthcare settings.
- Hand hygiene reduces the incidence of healthcare associated infections.
- Wearing gloves does not replace hand hygiene.



NPSG 07.01.01

## Hand Hygiene Guidelines: When?

- Entering & exiting a patient room
- Before and after patient contact
- Before and after contact with the patient's environment
- Before donning gloves and after removing gloves
- When hands will be moving from a contaminated body site to a clean body site during patient care
- When visibly dirty, contaminated, or soiled



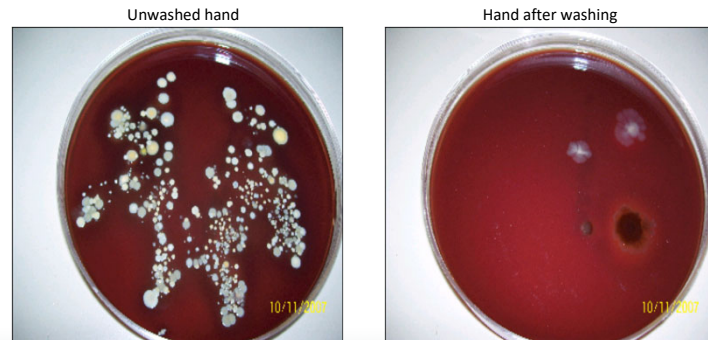
**We all must adhere to Hand Hygiene guidelines**

NPSG 07.01.01

## Clean Hands Count



## Cultures of Health Care Workers Hands



## Alcohol-Based Hand Sanitizer

- Hospital approved alcohol based hand sanitizer (foam/gel) is an acceptable form of hand hygiene if hands are not visibly dirty.
- Apply to palm of one hand and rub hands together covering all surfaces of both hands until dry.
- ATTENTION: When caring for patients with **Clostridium difficile**, other spore forming bacteria, or **norovirus**, wash hands with soap and water.

## Summary

- While a hand hygiene program alone cannot absolutely control disease transmission, it remains the **cornerstone of all effective prevention programs** and the foundation upon which other practices are designed.
- In this context, hand hygiene continues to offer one of the **simplest and most effective solutions to help prevent infections**, maximize patient safety, and improve healthcare outcomes across the continuum of care.

## Healthcare-Associated Infections

- Healthcare-associated infections (HAIs) are infections any patient acquires while receiving medical treatment in a healthcare facility.
- HAIs are a major but often preventable threat to patient safety.

## Reportable HAIs

HAI	Increase in LOS	Excess Cost Per Patient
Catheter Associated Urinary Tract Infection (CAUTI)	1 extra day	\$1000
Surgical Site Infection (SSI)	11.2 extra days	\$20,800
Ventilator Associated Pneumonia (VAP)	13.1 extra days	\$40,000
Central Line Associated Bloodstream Infection (CLABSI)	10.4 extra days	\$70,696

<https://www.beckershospitalreview.com/quality/how-hais-lead-to-direct-indirect-and-unintended-hospital-costs.html>

<https://www.ahrq.gov/hai/cusp/clabsi-final-companion/clabsicomp4c.html>

NPSG 7

## Multi Drug Resistant Organisms (MDRO)

- Bacteria that are resistant to multiple antibiotics
- Safety goal NPSG 7.01.01:
- Evidence based practice
  - Hand hygiene
  - Prompt identification of colonized patients upon positive culture or readmission (MDRO code)
  - Transmission-based precautions
  - Environmental hygiene

NPSG 07.01.01

## MDRO Codes

Code		Transmission-Based Precautions
CRE	Carbapenem Resistant/Carbapenemase producing Enterobacteriaceae	Expanded Precautions
VRS	Vancomycin Resistant Staphylococcus aureus	Expanded Precautions
CF	Cystic Fibrosis	Contact Precautions
ESB	Extended Spectrum Beta Lactamase (ESBL) producing organism	Contact Precautions

MDRO codes are only applied and removed by Infection Prevention. Policy Tech has policies to guide you in your practice.

## Multi-drug Resistant Organisms

- Patients who are identified as previously or currently positive with an organism that is transmissible in the healthcare setting have their patient label “coded” with an MDRO code specific to the organism.
- It may also be found in the “MDRO” code field in IDX and Powerchart.
- Inpatients, outpatients, HCWs, faculty, and students are coded in the same manner.

Dummy, Patient MDR  
 DOB 12/1/46 EMRN: #####  
 Acct #: 1111111  
 11/2/05 Location: XX XXXX  
 \* #####



# MDRO Code: location on banner bar

## CONTACT PRECAUTIONS

ALL VISITORS: REPORT TO THE NURSES STATION

- HANDS:** Wash before entering room, upon exit and as necessary.
- GOWN:** Wear to enter and inside room.
- GLOVES:** Wear to enter and inside room.
- MASK:** Not required.
- ROOM/DOOR:** May remain open.

## AIRBORNE PRECAUTIONS

ALL VISITORS: REPORT TO THE NURSES STATION

- HANDS:** Wash before entering room, upon exit and as necessary.
- GOWN:** Not required.
- GLOVES:** Not required.
- MASK:** Wear N-95 mask to enter and inside the room.
- ROOM/DOOR:** May remain closed at all times.

## DROPLET PRECAUTIONS

ALL VISITORS: REPORT TO THE NURSES STATION

- HANDS:** Wash before entering room, upon exit & as necessary.
- GOWN:** Not required.
- GLOVES:** Not required.
- MASK:** Wear to enter & inside the room.
- ROOM/DOOR:** May remain open.

## EXPANDED CONTACT PRECAUTIONS

ALL VISITORS: REPORT TO THE NURSES STATION

- STAFF:** Designated staff only.
- HANDS:** Wash before entering room, upon exit & as necessary.
- GOWN:** Wear to enter & inside room.
- GLOVES:** Wear to enter & inside room.
- MASK:** May be required to enter room depending on source.
- ROOM/DOOR:** May remain open.

## EMERGING PATHOGEN DROPLET/CONTACT PRECAUTIONS

All Family/Support Persons, Students and Volunteers: Report to Nurses Station

- STAFF:** Limit staff when possible
- HANDS:** Sanitize or wash before entering room, upon exit and as necessary
- GOWN:** Required
- GLOVES:** Required
- FACE:** Wear Cone/Surgical mask  
High Risk Areas: N-95 mask with RISK of aerosolizing procedures. Eye protection required (goggles or face shield)
- DOOR:** Door must be closed at all times
- ROOM:** Terminal cleaning and TRU-D of room is required  
*\*All TRU-D room exceptions require Nursing Supervision approval; Terminal cleaning required with all room turnovers*

Personal Protective Equipment:	Personal Protective Equipment:
Put On in this order:	Take Off and dispose of PPE in this order:
1. Wash or sanitize hands	1. Goggles and Gown: Perform Hand Hygiene
2. Gown, cone/surgical mask, goggles/face shield, gloves	2. Reusable goggles/face shield then sanitize. Perform Hand Hygiene
	3. Cone/surgical mask or N-95. Perform Hand Hygiene

## EMERGING PATHOGEN AIRBORNE/CONTACT PRECAUTIONS

All Family/Support Persons, Students and Volunteers: Report to Nurses Station

- STAFF:** Limit staff when possible
- HANDS:** Sanitize or wash before entering room, upon exit and as necessary
- GOWN:** Required
- GLOVES:** Required
- FACE:** Wear N-95 mask or respirator  
Eye protection required (goggles or face shield)
- DOOR:** Door must be closed at all times
- ROOM:** Negative Pressure Room or Hepa Filter required  
Terminal cleaning and TRU-D of room is required  
*\*All TRU-D room exceptions require Nursing Supervision approval; Terminal cleaning required with all room turnovers*

Personal Protective Equipment:	Personal Protective Equipment:
Put On in this order:	Take Off and dispose of PPE in this order:
1. Wash or sanitize hands	1. Goggles and Gown: Perform Hand Hygiene
2. Gown, N-95, goggles/face shield, gloves	2. Lock Room/Close Door: Perform Hand Hygiene
	3. Reusable goggles/face shield then sanitize. Perform Hand Hygiene
	4. Remove N-95 outside the room. Perform Hand Hygiene

## Personal protective equipment (PPE)

- PPE can consist of gloves, gowns, masks, face shields, goggles
- An essential component of Standard Precautions and Transmission-Based Precautions.
- Healthcare workers choose the required items to protect themselves.
- Being able to correctly apply and remove PPE helps ensure that they work in the intended manner.
- Taking off PPE apparel ranks among the most critical of topics in infection prevention.



ALL slides on PPE are OSHA.

## Things to Remember in PPE

- Keep gloved hands away from face
- Avoid touching or adjusting other PPE
- Remove gloves if they become torn; perform hand hygiene before donning new gloves
- Limit surfaces and items touched

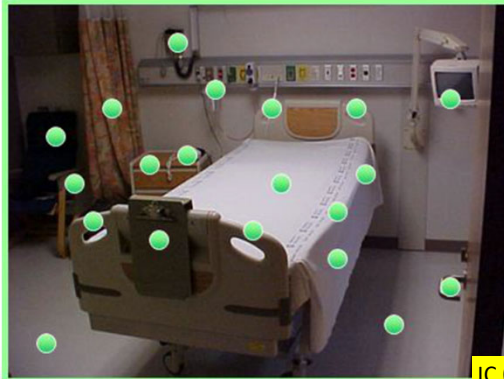
## Sequence for Donning PPE

1. First and foremost perform Hand Hygiene
2. Gown
3. Mask
4. Face shield or goggle (if applicable)
5. Gloves

## Sequence for Removing PPE

1. Gloves
2. Hand Hygiene
3. Face shield or goggles (if applicable)
4. Gown
5. Mask
  - i. Surgical or cone mask : take off at doorway, **before** leaving patient room.
  - ii. N-95 Mask or respirator : take off **after** leaving patient room, in anteroom or hallway, when door is closed.
6. PAPR (respirator)
  - i. Removed outside room, after door has been closed

## Environmental Hygiene: Commonly Touched Surfaces in Patient's room



IC.02.02.01

## Environmental Hygiene

- This is **NOT** just EVS' responsibility!!
- Routinely clean and disinfect the environment and other frequently touched surfaces.
- Use the hospital-approved disinfectant for your area/department & ***know the appropriate contact time!***
- Clean up blood and body substance spills promptly
  - Small spills (<500 ml) – Department/Unit responsibility
  - Large spills (>500 ml) – Environmental Services responsibility
- Chemical spill or unknown substance : call Safety Dept.

INFECTION CONTROL, NPSG  
(MDROs), & OSHA BBP



### Super Sani—Purple

- 2 mins contact time
- Effective against 30+ microorganisms



### Alcohol Free—Gray

- 3 mins contact time
- Effective against 40+ microorganisms



### Bleach—Orange Wipes

- 4 mins contact time
- Effective against 50+ microorganisms



## Environmental Hygiene in the OR



### Oxivir Tb Wipes & Solution

- 1 minute contact time for most organisms including HBV, HCV, HIV
- Tuberculocidal in 5 minutes
- Fungicidal in 10 minutes

Operating Room has dedicated cleaning staff that are specially trained for the environment.

## Ultraviolet Light TruD



- after a patient is discharged & a terminal clean of room is complete
- targets leftover organisms
- specially trained staff
- REQUIRED :
  - Expanded & Enteric Contact
  - In OR, once every 24hrs.
- Recommended : all TBP rooms
- any room can be done & should be done as census allows

## Patient Care Equipment



- Must be cleaned and disinfected **between patient use** with appropriate hospital-approved germicidal (including clinic tables, BP cuffs, etc).
- Disinfect equipment **before it leaves the patient's room.**
  - If it **cannot** be disinfected before it leaves the patient room, cover with a red biohazard bag and move to the area where it can be cleaned then disinfected.
  - Cleaned then disinfected equipment shall be **stored in the clean storage room** or covered with a clear plastic bag.

IC.02.02.01

## Stethoscopes

- The bell is cleaned with an alcohol wipe **after every patient contact.**
- If a patient is on transmission-based precautions, the isolation cart should have single patient use stethoscopes dedicated for patient care.



## Respiratory Etiquette



- Flu season is October through March
- Respiratory etiquette applies year round!
- Use tissues and dispose immediately after use
- Do not sneeze/cough into hands—use elbow or tissue
- Perform hand hygiene after touching face
- Use mask if necessary in public areas

OSHA & BBP

# Modified Family Presence

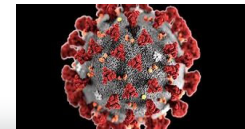


Guests under 18 cannot be above the second floor unless they are a patient, parent/guardian of a patient, or going to an appointment.

(there are few exceptions to this policy)

# Covid-19 Considerations

- Modified family presence in effect
- Positive patients, patients under investigation (PUI) and patients on Covid 19 units may not have visitors at this time.
- All others may have 1 support person (2 in pediatrics).
- Visitors are screened, receive a sticker to wear while in hospital and are required to wear a mask at all times.



# Covid-19 Considerations

## Mask and Face Covering Requirement Updates

**RATIONALE:** To ensure staff and students are aware of personal protective equipment (PPE) to be worn at AU Health facilities.

**FACIAL COVERINGS ARE REQUIRED FOR ALL INDIVIDUALS INSIDE AU HEALTH BUILDINGS**

### Medical Grade Masks:

- All persons, including healthcare workers, who enter the following high risk areas **MUST** wear a **medical grade mask**:
  - 5 West
  - 8 South
  - All Critical Care areas
  - Oncology units and Bone Marrow Transplant unit
  - CHOG COVID Units
  - Labor and Delivery
  - Emergency Services
- Follow the mask guidelines in the following graphic: [PPE Guidance for COVID-19](#)



### Cloth Masks/Facial Coverings:

- Cloth masks may be worn by healthcare workers in direct patient care in non-high risk areas as defined above but **medical grade masks are preferred**
- Cloth masks must be made from cotton, polyester, or similar type fabric of sufficient thickness to be expected to provide a droplet barrier.
  - Masks and other face coverings made from fleece, netting, or other obviously porous material are not acceptable for wear by visitors / support persons or staff.



# Sharps safety

OSHA & BBP

- Never recap needles
- Use safety devices whenever possible and never alter safety mechanism of a safety device
- Report all device failures
- Place ALL sharp items (needles, vacutainers, glass) into the appropriate rigid, puncture-resistant container for transport or disposal



## Healthcare Workers Risk of Exposure

- Bloodborne pathogens—occupational exposure to blood and all body substances secretions, excretions (except sweat), regardless of whether it contains visible blood
- Risks associated with:
  - Needle sticks or other sharps injury
  - Mucosal contact (eyes, inside nose and/or mouth)
  - Non-intact skin exposure



## Bloodborne Pathogen Exposure

- Healthcare workers most at risk for exposure to Hepatitis B (HBV), Hepatitis C (HCV), and HIV
- Mechanisms of exposure include:
  - Contaminated needle sticks or cuts from other sharp instruments
  - Eye, nose, mouth, or non-intact skin contact with blood or other potentially infectious material
- Exposure risk is determined by YOUR tasks/duties performed
- The Bloodborne Pathogen Exposure Control Plan located in the Infection Control Manual

## Employee Exposures

- Employee Health and Wellness handles employee bloodborne pathogen exposures
- During business hours, call Employee Health and Wellness to receive packet of forms
- After business hours, go to the ED. Always follow up with Employee Health and Wellness
- For more information, call Employee Health and Wellness at 706-721-3418

## Alphabetic Disease Listing Location

- An alphabetical disease listing is located in Policy Tech in the Transmission Based Precautions policy & on the Epidemiology Department page.
- Very helpful document for determining any isolation or precaution requirements!

Apps & Tools

Departments Leadership Calendars News Policies Help

**Click on Departments**

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- Daily Roll Call
- Who's on Call
- AUMC Paging
- TimeNet

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Apps & Tools

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Legal Affairs

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Apps & Tools

Epidemiology News & Events Resources

Alerts and Advisories

Useful Information

It's that time again, and flu season is here! Click on the link below to access the Flu Shot Clinic Calendar

2017-2018 Flu Shot Clinic Calendar.pdf

Weekly Flu Report

This weekly report may be found on the Department of Public Health website at <https://dph.georgia.gov/flu-activity-georgia>

Respiratory Pathogen Panel

Open the document below to check out the most up-to-date stats on flu activity in the hospital! There is also information on other respiratory pathogens identified in our patient population.

Pathogen Activity January 2017.pdf

Patient Safety Data System (PSDS): Denominator Data Application

Hand Hygiene Tracer Tool: Guest Access

Travel Clinic Assistant

Alphabetical Disease/Organism Listing for Transmission-Based Precautions

The Travel Clinical Information provides clinical information on travel-related diseases from 191 countries. Diseases with recent outbreaks occurring in the last 2 years are listed first. For recent outbreaks, information on clinical symptoms, transmission, infection control, and reporting to the Georgia Department of Public Health are provided.

The second table lists additional endemic and/or travel-related diseases that may be acquired by travelers to a country. Disease links are provided for additional information on symptoms, transmission, testing, and/or treatment.


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Addendum 1, Alphabetical Disease/Organism Listing for Transmission-Based Precautions (929)  
Page 1 of 50

Use the table below as a guide for applying the appropriate transmission-based precautions; additional measures may be required and assessed on a case by case basis. Upper respiratory viral infections in young pediatric patients (infants through 5 years of age) require contact and droplet precautions for the duration of illness.

DISEASE/ORGANISM	CATEGORY OF PRECAUTIONS	INFECTIVE MATERIAL	DURATION OF PRECAUTIONS	COMMENTS
<b>Abcesses</b>				
Draining, major	Contact	Drainage	Duration of drainage or until contained by dressing	If specific organism isolated, see specific listing for further precautions. Major = no dressing or dressing does not adequately contain the drainage.
Draining, minor or limited; not draining	Standard	Drainage		Minor or limited = dressing covers the wound and adequately contains the drainage, closed drainage system adequately contains the drainage, or infected area is small such as a stitch abcess.
<b>Acquired Immunodeficiency Syndrome (AIDS) (See Human Immunodeficiency Virus)</b>				
<b>Actinomyces</b>		Standard	No person to person transmission.	
<b>Adenovirus Infection</b> (See agent specific guidance under conjunctivitis, gastroenteritis, respiratory infection, pneumonia)	Droplet and Contact	Respiratory secretions and feces	Duration of hospitalization	In infants and immunocompromised patients, see Respiratory Syncytial Virus (RSV). During epidemics patients believed to have adenovirus infection may share the same room. Consult with Hospital Epidemiology at such times.
<b>AIDS (See Human Immunodeficiency Virus Infection)</b>				


Addendum No.: 1  
For Policy No.: 929  
Originally Issued: 10/01/1988  
Last Revision: May 2016

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# Questions?

# Thank You


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## Thank you for your participation!

**Your next steps:**

- Send your JagStart Forms to [Jagstart@augusta.edu](mailto:Jagstart@augusta.edu)
- Check in with Your Manager
- Get your Badge
- Register with Parking
- Purchase Your Scrubs

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