New Provider Orientation
Welcome

We’re glad you’re here!

The following presentation contains information that all members of the St. Mary’s Health Care System team (staff, providers, volunteers, and other learners) need to know and understand. Should you need additional information or clarification, please direct your questions to any supervisor, staff, or preceptor.

Most importantly, you are now part of the St. Mary's family!
Reflection

Today you join a healing ministry. We welcome you to a place where your values can be joined with the Mission, Vision and Values of Trinity Health. Together, we share both the responsibility and the privilege to contribute our very best so that we can serve as a compassionate and transforming healing presence. We invite you to see the sacred in the work you do, and to allow that sacredness to transform your experience as a Trinity Health colleague.

And so we offer this blessing upon you:

*May you see the dignity and goodness in each person you encounter, especially those who are impoverished in any way.*

*May you steward your talent and experience to uplift the people and communities we serve;*

*May you act with wisdom and compassion, for the care and safety of all.*

*May you speak for justice and integrity.*

*May you find fulfillment in work that is done with care and conviction.*

Amen
Our Core Values

REVERENCE: We honor the sacredness and dignity of every person

COMMITMENT TO THOSE WHO ARE POOR: We stand with and serve those who are poor, especially the most vulnerable

SAFETY: We embrace a culture that prevents harm and nurtures a healing, safe environment for all

JUSTICE: We foster right relationships to promote the common good, including sustainability of earth

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

INTEGRITY: We are faithful to who we say we are

Our Mission

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

• **Part of Trinity Health**, one of the largest multi-institutional Catholic health care delivery systems in the nation.

• St. Mary's Health Care System is the **only Catholic healthcare ministry in Northeast Georgia** and one of only a handful in the state.

• Our faith-based mission and approach to **caring for the whole person** -- body, mind and spirit -- distinguishes us from other healthcare providers.

• St. Mary's Health Care System provides a **comprehensive continuum of care**: inpatient, outpatient, diagnostic and rehab services; home health care and hospice services; independent and assisted living, and memory care.
St. Mary’s Founding

- The original St. Mary’s was opened in 1907 by Drs. Proctor and Fullilove. It was Athens’ first hospital. Despite its name, it was not a Catholic hospital.

- In 1918, Drs. Proctor and Fullilove built a larger, more modern replacement hospital on the site.

- Dr. Proctor and a nurse were killed in a car crash in 1924 while responding to an emergency call.

- Dr. Fullilove continued to operate St. Mary’s Hospital until his death in 1935. The wives of the two physicians worked to keep the hospital open but closed it in 1937.
Strong, Brave, Faithful Women

• We are here today because in **1938**, the community asked the Bishop of Savannah to reopen the hospital. He, in turn, asked the **Missionary Sisters of the Most Sacred Heart of Jesus** from Pennsylvania to come to Athens. They accepted the mission.

• The Sisters are an international congregation of women founded over 100 years ago in Germany in response to a call and need for missionaries in the South Pacific. So, most Sisters served in places like Papua New Guinea while others came to Georgia!

"**Being graced by the love of Christ, we are called to respond to God's love and to make that love present to everyone.**"
Earliest known photo of a Sister at St. Mary’s, circa 1938-1942, the time when the Sisters introduced the first infant incubator in Athens.
Sister Sara, one of the four founding Sisters and dietary supervisor for most of her 50 years at St. Mary’s. Also served as grounds supervisor.
Sr. Donna Marie, last Sister to serve as Hospital Administrator, giving an award to Mr. Bennie Tillman, circa 1964. Mr. Tillman was employed as a cook from 1949-1985.
The Sisters served in a wide variety of areas, including clinical and technical roles. Here, Sister Christina works in the lab with the Hycel Mark X, 1970s.
More Strong, Brave, Faithful Women
"The Walking Nuns"

St. Mary's Catholic Sponsorship transferred from the Missionary Sisters to the **Sisters of Mercy of the America's** in **1998**, when St. Mary's became part of Catholic Health East.
Sisters of Mercy

Founded by Catherine McAuley, the Sisters of Mercy are known as the “Walking Nuns” because, rather than remaining in a convent, they walked throughout the streets of Dublin to find and care for the poorest among them.

The Sisters of Mercy emphasize:

- Spirituality
- Social Justice
- Works of Mercy
- Service
- Community
Their Double Legacy Continues Through *Us*

The charisms and gifts of the Missionary Sisters and the Sisters of Mercy continue to be reflected in our Mission and Core Values.

The goal of Mission Services is to advance the mission and core values of St. Mary’s Health Care System. **Mission is why we serve.**

We support the diverse spiritual and religious needs of

- those we serve,
- those with whom we serve, and
- the communities in which we serve.
St. Mary’s Hospital, Athens

- 196-bed community hospital
- Joint Commission accredited since 1954
- Full services with medical/surgical inpatient care, emergency care, imaging and diagnostics, critical care, rehabilitation, respiratory services, nutrition and patient education
- Certified Chest Pain Center and Primary Stroke Center
- Named Georgia’s Large Hospital of the Year four times
St. Mary’s Good Samaritan Hospital

- 25-bed critical access hospital
- Serving Greene, Morgan & Putnam counties
- New facility opened 2013
- Georgia’s 1st Remote Treatment Stroke Center
- Coverdell Champion for Stroke Care 2016 & 2017
St. Mary’s Sacred Heart Hospital

- 56-bed community hospital
- New facility built 2012
- Part of St. Mary’s since 2015
- Serving Franklin, Hart & Stephens counties
- Designated Remote Treatment Stroke Center 2019
St. Mary’s Medical Group

- 70+ physicians and advanced practice providers in 24 locations
- 12 specialties
- Offices in 5 counties
- Accepting most insurance plans
- Same-day appointments & extended office hours in some locations
Internal Medicine Residency Program

- Joint effort with AU/UGA Medical Partnership
- Approved for 34 Internal Medicine residents
- Fully accredited by ACGME
- 3-year program with inpatient, outpatient & rural rotations
- Multiple graduates have chosen to remain in Georgia
Home Health Care/Hospice Services

- Serving patients in their homes since 1969
- Nursing, rehab, social work, aides, chaplains & more
- Home health in 10 counties
- Home hospice in 13 counties
- Region’s first inpatient hospice house

Georgia licenses 029-057 & 029-035
Palliative care: Hospital & home

- Maximizing quality of life for patients at any stage of illness
- Care provided by team of expert specialists
- Acute care setting since 2009
- Home-based program launched 2019 in Clarke, Oconee & Greene counties
St. Mary’s Highland Hills Village

An age-in-place retirement community offering...

- Independent living
- Assisted living
- Memory care
- Restaurant-quality dining
- Full-time activities director
- Onsite primary care physician visits
Alzheimer’s & Dementia Care

- Part of Highland Hills Village
- Secure, compassionate & comfortable
- 34-bed facility with private rooms for individuals and couples
- Spouses with different care needs can remain close together
- Memory care support group for loved ones
Outpatient & Wellness Center

Four services. One location.

• Radiology – MRI, CT, bone density, mammography, ultrasound & echocardiography
• Rehab – PT, OT & SLP
• Laboratory collection site
• Wellness center

2470 Daniells Bridge Road, Athens
Center for Wound Healing

- Advanced care for wounds due to diabetes, vascular disease, pressure ulcers, etc.
- Therapies: Hyperbaric oxygen, negative pressure, compression, infection control
- Freestanding facility on Atlanta Highway
- Includes ambulatory infusion center for outpatient IV medication administration
Volunteer & Auxiliary services

• 300+ volunteers at all 3 hospitals & hospice
• Improving the experience of patients & visitors
• Raising funds & support for St. Mary’s healing ministry
• Operating St. Mary’s Auxiliary Thrift Store, staffing Gift Shops, visiting patients & more
Community Benefit

- $522 million local & state economic impact
- $223 million in total direct expenditures
- $15.9 million in uncompensated care
  - Indigent care
  - Charity care
  - Unreimbursed community services
- 4,612 Georgia full-time jobs created
- 1,887 FTE directly employed
Senior Leadership Team

**Stonish Pierce**  
President & CEO, St. Mary’s Health Care System

**Candice Frix**  
Vice President, Chief Nursing Officer

**Stephen Berry**  
Interim, Chief Medical Officer

**Jeff Brown**  
Vice President, Operations
Senior Leadership Team

Janice Dunn
Vice President,
Chief Financial Officer

Brittainy Horne
Vice President Strategy &
Ambulatory Services

Beth Patrick
Chief Human Resource
Officer
Senior Leadership Team

Liz Schoen  
Vice President, General Counsel

Julie Carter  
Vice President, Mission Services

Terry Chartier  
Director of Information Services
Physician Leadership Team

Patrick Willis, MD
Medical Staff President,
St. Mary’s Hospital

Alan Morgan, MD
Medical Staff President – Elect,
St. Mary’s Hospital

Aaron Carr, MD
Medical Staff Secretary/Treasurer,
St. Mary’s Hospital

Leland Perry, MD
Immediate Past President
St. Mary’s Hospital
Physician Leadership Team

Dave Ringer, MD  
Chief of Staff,  
Good Samaritan Hospital

Craig Colby, MD  
Medical Staff Secretary,  
Good Samaritan Hospital

Richard White, MD  
Chief of Staff,  
Sacred Heart Hospital

Morgan Wood, MD  
Vice Chief of Staff  
Sacred Heart Hospital
Physician Leadership Team
Department Leaders – St. Mary’s Hospital

Dr. Leland Perry
Chief of Anesthesiology

Dr. Erick Avelar
Chief of Cardiology

Dr. Pat Eagleson
Chief of Emergency Medicine

Dr. Robert Meyer
Chief of Medicine

Dr. Neil Woodall
Chief of Neuro Sciences

Dr. Meredith Bolton
Chief of OB/GYN

Dr. Julian (JP) Price
Chief of Orthopedic Surgery

Dr. Benjamin McCurdy
Chief of Pain Management

Dr. Joseph Gaines
Chief of Pathology

Dr. Charles Potter
Chief of Pediatrics

Dr. Chris Tomingas
Chief of Radiology

Dr. Sergio Mejias
Chief of Surgery

Dr. Clay Chappell
Medical Director of Cardiac Cath Lab

Dr. Eduardo Martinez
Medical Director of Pulmonary/Critical Care

Dr. Adam Traill
Medical Director of Hospitalist Services

Dr. McKay Crowley
MEC Member at Large Medicine

Dr. Kathleen Jeffery
MEC Member at Large Surgery

Dr. Steve Berry
Medical Director of Health Informatics

Exceptional Care For Life.

St. Mary’s Health Care System. Member of Trinity Health.
Introduction to Trinity Health
One of the Largest Catholic Health Care Systems in the Nation

- **$20.2B** in Revenue
- **25** States
- **1.4M** Attributed Lives
- **$1.2B** Community Benefit Ministry
- **115K** Colleagues
- **6.8K** Employed Physicians & Clinicians
- **25.8K** Affiliated Physicians
- **89** Hospitals*
- **17** Clinically Integrated Networks
- **131** Continuing Care Locations*
- **25** PACE Center Locations*
- **125** Urgent Care Locations*

*Owned, managed or in JOAs or JVs

**FY21 data unless noted**
Exclusions: Mercy Chicago Hospital transitioned to Insight Chicago (June 2021); Mercy Philadelphia Hospital transitioned to Penn Medicine (March 2021)
Our Mission, Vision, and Values inform our past, present, and future and will endure.

Our Mission
We, Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.

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

Reverence
• I connect with compassion and courtesy
• I respect every person.

Commitment To Those Who Are Poor
• I reach out to help those in need
• I notice when others are suffering or struggling and reach out to comfort and assist them

Safety
• I speak up whenever I have a safety concern and express gratitude to others who raise a safety concern.
• I address abusive, disruptive, discriminatory or culturally insensitive behaviors.

Justice
• I build and maintain healthy and trusting relationships
• I avoid judging others because of differences or circumstances

Stewardship
• I support others in fulfilling Our Mission
• I own every problem and seek to find a resolution

Integrity
• I practice gratitude
• I take responsibility for my role as a team member
Trinity Health’s TogetherHealth Strategy: (what we want to be)

Trinity Health is a Catholic, mission-driven health organization that provides comprehensive and coordinated health and well-being services through a network of organizations and partnerships for our members - colleagues, physicians and people in communities - across the United States.

Trinity Health provides care for all in body, mind and spirit, demonstrating that:

We Listen
We Partner in Achieving Health Goals
We Make It Easy
Trinity Health Values our Medical Staff Partners

• We are committed to working closely with our medical staff members to build a health system to provide better care, better health at lower cost.
• Our fiscally sound national ministry focuses on **quality** and provides you access to:
  • A culture based on shared mission, values and vision – and driven to be the most trusted health partner for life
  • Engaged colleagues who reflect the diversity of our communities
  • Having a voice in decision-making
  • Leadership on a national level
    • Phenomenal collective knowledge
    • Diverse clinical staffs across the country
    • Resources and the ability to leverage skills and scale
    • Advocacy at national, state and local levels
    • Payer contracting
    • Collaboratives that lead to establishment of national standards of practice
    • Trinity Health National Accrediting body – ACCME for CMEs
    • Teaching hospitals and international health programs
    • Commitment to personal and professional health and resilience
Clinical Framework teams create standard work for care redesign and delivery and are inclusive of clinicians from our ministries.

Clinical Framework

- Clinical Excellence Councils (CEC)
- Clinical Leadership Groups (CLG)
- Clinical Service Groups (CSG)
- Teams are interdisciplinary who address
  - clinical variation
  - TogetherCare documentation
  - AND make the decisions regarding their work.
Clinical variation encompasses a wide array of variation and opportunities due to the multiple root causes that clinical framework teams address.

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Choice</td>
<td>Products, resources, order sets. Driven by organizational availability, existing standards</td>
</tr>
<tr>
<td>Care delivery: organization</td>
<td>CIN Practice variation, palliative care, LOS. Driven by system workflows, state requirements</td>
</tr>
<tr>
<td>Care delivery: clinician</td>
<td>Physician variation within a DRG, or practice. Driven by workflows, practice patterns, history and autonomy</td>
</tr>
<tr>
<td>Appropriate care</td>
<td>Choosing Wisely, Evidence based care. Driven by autonomy, history</td>
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</table>
Clinicians across the ministries are also involved in the provision of feedback that supports framework team decision-making.

Each month hundreds of practicing clinicians are asked to provide feedback using the Clinical Leadership Update on the clinical work under consideration.

The clinician feedback loop plus the membership of the clinical teams place clinical decision-making in the hands of those doing the actual work.

All previous CLU’s can be found here:

SO - Clinical Framework Teams - Home (sharepoint.com)
For privacy concerns, call the Privacy Line at
For integrity or compliance concerns, call the Integrity Line at
You can use the 24-hour Integrity Line to report a concern: 1-866-477-4661
Examples of Diversity, Equity, and Inclusion Efforts

- Unconscious Bias Training
- Diversity, Equity, and Inclusion Councils at Every Ministry
- Colleague Resource Groups
Laws and Regulations – Resources and Information for Medical Staff

• Medicare updates billing regulations annually [Medicare | CMS](#).
  • The Medicare Administrative Contractors also publish newsletters.
• States and Federal government frequently adopt and implement new laws and regulations.
• Trinity Health posts information for patients and providers on its websites.
• Trinity Health shares education with medical staff and implements updates in hospital medical records’ systems.
• Hospital Medical Staff leaders and Chief Medical Officers also provide information and updates to medical staff members as appropriate.
• Providers are encouraged to access information from the American Medical Association, state medical societies and the Centers for Medicare and Medicaid Services.
Supply Chain Overview

- Contracting for supplies and services is centralized and led by Strategic Sourcing
- All clinical supplies are evaluated by Expert Panels to select products that offer the best outcomes and value
  - Expert Panels for physician specialty items are comprised of practicing physicians utilizing the items under consideration
- Ministries are accountable for compliance to the contracted portfolio of supplies
  - Local Supply Chain Directors and/or operational leaders should be contacted to confirm items and services included in the Trinity Health contract portfolio
  - Requests for use of non-contracted physician specialty items is considered by a physician led exceptions review committee
Medical Staff/Physician Leadership at the System Office

- **Dan Roth, MD**, Executive VP, Chief Clinical Officer
- **Tammy Lundstrom, MD, JD**, Senior VP, Chief Medical Officer
- **Mark LePage, MD**, Senior VP, Medical Groups and Ambulatory Strategy
- **Emily Brower**, Senior VP, Clinical Integration
- **Tom Peterson, MD**, VP, Chief Safety Officer
- **Murielle Beene**, Senior VP, Chief Health Information Officer
- **Anne Wynne**, Director, Medical Staff Services/CPI
Mission Services
Mission Services

• **Formation** – resources and opportunities for colleagues to understand and apply core values

• **Ethics** – serve as a resource for clinical, organizational and social ethics

• **Spiritual Care** – for patients, residents, families and colleagues

• **Spirituality in the Workplace** – honor the sacred and healing encounters that occur every day

• **Language/Translation Services**
Spiritual Care

Professionally-trained chaplains are onsite at
• St. Mary's Hospital Athens
• St. Mary's Good Samaritan Hospital
• St. Mary's Sacred Heart Hospital
• Highland Hills Village
• Home Hospice/Hospice House

The chaplains are available to all colleagues and can be reached by calling 2-3276
When to Call a Chaplain?

• A death occurs
• During a code – blue, stroke, rapid response
• When patients or family members are struggling to cope with hospitalization (excessive crying, shaking, refusing to participate, etc.) Don’t ask if they want a chaplain, just contact us!
• When a patient or family member needs assistance contacting a representative of their faith tradition or a specific faith ritual is requested
• When there are unique/complex family dynamics
• New diagnosis or significant change in the plan of care
• Feelings of loneliness, isolation, grief, or anxiety are expressed
• After a decision to withdraw life-sustaining therapies
• Staff support is needed – we are here for you too!
Ethical and Religious Directives for Catholic Health Care Services

As a Catholic health care system, we abide by the Ethical and Religious Directives for Catholic Health Care Services (ERDs). The ERDs reaffirm the ethical standards of behavior that flow from the Church's teaching about the dignity of the human person. They are the source of authoritative guidance on moral issues in health care, including issues in care for the beginning of life and care for the seriously ill and dying. Beyond these important clinical issues, the ERDs address the social responsibility of Catholic health care, its role in the community and its responsibility as a steward of health care resources. The ERDs can be found in their entirety at: Ethical and Religious Directives for Catholic Health Care Services

PART ONE The Social Responsibility of Catholic Health Care Services
PART TWO The Pastoral and Spiritual Responsibility of Catholic Health Care
PART THREE The Professional-Patient Relationship
PART FOUR Issues in Care for the Beginning of Life
PART FIVE Issues in Care for the Seriously Ill and Dying
PART SIX Collaborative Arrangements with Other Health Care Organizations and Providers
Language Services

- As a matter of quality of care and respect for patients, patients’ families or friends should NOT be relied upon for translation services.
- **Dedicated iPads** loaded with an app to **Cyracom** interpreter services are available at each hospital and at most other St. Mary’s locations.
- **Cyracom** provides interpreter services for more than 100 languages as well as American Sign Language interpretation services.
- At St. Mary’s Athens, an on-site Spanish interpreter is available during certain hours and when pre-arranged.
- For assistance with interpreter services, contact Mission Services at extension **2-3276** (706-389-3276)
What is expected of me as a Medical or Allied Health Staff member?
Respect in the Workplace

We expect our colleagues to treat everyone they encounter with equal respect and fairness, in accordance with Trinity Health’s Mission, Core Values, Code of Conduct, and St. Mary’s Health Care System’s Service Excellence Standards.
Code of Conduct, Bylaws & Other Resources

Medical Staff policies & other helpful resources can be found on our intranet home page by selecting Departments > Medical Staff Services

- Code of Conduct policy outlines expected behaviors, and process for reporting & responding to conduct issues
- Bylaws and other provider policies are under the “Bylaws Documents” link
- Call Schedules are posted for each Hospital
- Provider Privilege lookup tool
Professional Practice Evaluation

**Focused Professional Practice Evaluation (FPPE):**

- Every new privilege granted to a provider, both at initial appointment or during an existing term or at reappointment, must be evaluated. This period of evaluation is called Focused Professional Practice Evaluation (FPPE).
- When questions arise regarding a privilege, a period of focused review may be initiated to assess and/or confirm competence.
- The FPPE period allows providers to constructively participate in all aspects of patient care within their specialty, and allows the Medical Staff to orient the provider, as well as assess their ability and fit within the organization.

**Ongoing Professional Practice Evaluation (OPPE):**

- Once privileges are assessed and competence is confirmed, providers transition into Ongoing Professional Practice Evaluations (OPPE). OPPEs are completed every six months on every privileged provider.
Dress Code

• All clothes and uniforms must be appropriately complete, neat, and clean and in good repair at all times. Faded, tie-dyed, bleached, torn, patched or un-hemmed clothing is not allowed.

• All clothing shall fit properly and be appropriate to the job being performed.

• Hair shall be neat, clean, manageable and appropriately styled to meet the safety standards of the related job function (glitter, sparkles and spray-on hair paint are unacceptable).

• Extreme styles such as excessive teasing or extreme hair coloring are not permitted.

• Hats, caps or headwear are allowed only if required as part of the uniform or for religious purposes.

• No tattoos or body art shall be visible. Any tattoos and body art must be covered at all times.

• Jewelry may not be worn in any visibly pierced body part except ears.

• Fingernails and toenails shall be neat and clean. They must be appropriately trimmed to meet the safety and performance standards of their related job function.

• Extreme colored polish, nail art and nail jewelry are unacceptable.

• Footwear shall be business-like, neat and well maintained.
Harassment

St. Mary’s Health Care System is committed to providing a work environment that is respectful and free from all conduct which could be considered harassing, abusive, disorderly, offensive, intimidating, or disruptive.

This policy focuses mainly on conduct related to: Race, Religion, Color, Gender, Age, National Origin, Disability, Height, Weight, Marital Status, Veteran Status, and Sexual Orientation.

Offensive behavior can be:

• Sexual advances or propositions
• Jokes, banter, or innuendo
• Physical contact
• Sexual comments or discussions
• Stereotyping
• Intentionally offensive or not
• Welcome by the recipient or not

No retaliation for reporting harassment!
Violence Prohibited

In keeping with the spirit and intent of this policy and to ensure that St. Mary's Health Care Ministries' objectives are met, the organization is committed to the following:

• To provide a safe and healthful work environment.
• To take prompt remedial action up to and including immediate termination of any associate who engages in threatening, intimidating, coercing, or harassing behavior or acts of violence, or who uses any obscene, abusive or threatening language or gestures toward another associate or non-associate.
• To take appropriate action when dealing with former associates or non-associates on St. Mary's facilities premises who engage in such behavior. Such action may include notifying the police department or other law enforcement personnel and prosecuting violators of this policy to the maximum extent of the law.
• To prohibit associates, former associates, and non-associates from bringing unauthorized firearms, dangerous or hazardous devices or substances, or other weapons onto St. Mary's Health Care System, Inc. premises within the extent of the law.
• To establish viable security measures to ensure that St. Mary's Health Care System, Inc. premises are safe and secure to the maximum extent possible.
• Associates are encouraged to take appropriate measures to protect themselves in the event they are the victim of a violent act perpetrated by any person (including patients, visitors, associates, personal acquaintances, etc.) to ensure their safety and prevent injury.
• Associates should not place themselves in danger by investigating or interceding in any commotion or disturbances.
• Associates must immediately report any instances of violence or threats of violence in the workplace to their supervisor/manager/director and/or Security. If the victim of a violent act, the associate must complete an employee injury report form and go to Employee Health /Health Works for an evaluation. If Employee Health/Health Works is not open, the associate may report to the Emergency Department for evaluation.
• Any associate who displays a tendency to engage in violent, abusive or threatening behavior may be referred to the Employee Assistance Program (EAP) for counseling or other treatment, if appropriate.
Drug-Free & Smoke-Free

St. Mary’s Health Care System is committed to maintaining a safe and drug-free work environment for colleagues, patients and visitors. We adhere to state and federal regulations.

Violation of this policy are
• subject to applicable reporting to the state department of licensure
• disciplinary action up to and including termination
St. Mary’s Clinical Quality Goals

• Zero Harm: Patient Safety and Employee Safety
  • Measured by Patient Safety Indicators (PSI), Falls with Injury Rate, and OHSA Recordable Injury Rates
  • Goal of increasing event reporting (Midas) to improve our systems/processes (especially precursor events/near misses/unsafe conditions)

• Patient Experience: Inpatient and Emergency Department
  • Measured by “Likelihood to Recommend” Scores on patient satisfaction surveys

• Length of Stay Reduction and Clinically Appropriate Next Site of Care
  • Working with physicians and all team members to determine what barriers are preventing patients from going home
  • Discharging to the least restrictive, clinically appropriate, discharge disposition. If a patient came from home, consider, “Why not home?” on d/c

• Clinical Quality Improvement:
  • Prevent and Reduce Hospital Acquired Infections
    • CLABSI
    • CAUTI
    • Hospital Onset C.diff
    • MRSA blood stream infections
    • Surgical Site infections
    • Hand Hygiene performance

• Reduce Readmissions
  • All-Cause 30 Day Readmissions for Medicare Patients
Influenza & Covid Vaccination Program

St. Mary’s complies with CDC guidance for healthcare provider (HCP) vaccinations

- In the US, Flu season officially lasts from October through May, but is now being seen year-round.
- The CDC recommends annual Flu vaccination for everyone aged 6 months and up as soon as vaccine becomes available.
- Unless they have a qualifying/approved exemption, **all** healthcare providers must obtain a Flu vaccine. Vaccines are provided for all HCP during the STMH Flu Vaccine Campaign in the fall.
- If exempt, HCP must adhere to mask requirements during the influenza season & when prevalence of Covid indicates masking.
- Visit the CDC website for HCP resources: https://www.cdc.gov/flu/professionals/vaccination/index.htm

Contact the Employee Health Office at 706.389.2141 for further information
Infection Prevention & Hospital Acquired Infection (HAI)

CLABSI—Central Line Associated Bloodstream Infection
- **Right Line, Right Patient, Right Time**
  - CLABSI cause increased morbidity, mortality, length of stay, and hospital costs
  - Some factors for increased risk for CLABSI:
    - Clinicians inserting/maintaining line lacking competency
    - Line being in place >72 hours
    - Less appropriate site (more risk is associated with femoral or IJ sites)
    - Dressing compromise/line contamination
  - Some factors to help prevent CLABSI:
    - Proper hand hygiene
    - Follow full-barrier precautions at insertion
    - Daily review of necessity of catheter/
      Remove catheter as soon as possible
    - CHG site prep/ daily bath with CHG for patient

SSI—Surgical Site Infections
- SSI are the second largest number of HAI
  - SSI cause increased hospital days, increased costs, higher risk of disability, and higher risk of mortality
  - Decrease the risk by utilizing SCIP (Surgical Care Improvement Project) measures such as:
    - Appropriate antibiotic prophylaxis
    - Appropriate skin/site preparation
    - Appropriate prep for bowel surgery
    - Regulation of glucose level, oxygenation, and temperature
    - Decolonization of patient preoperatively
  - Incorporate Enhanced Recovery Pathway
  - Patient education

CAUTI—Catheter Associated Urinary Tract Infection
- Urinary Catheter Stewardship
  - Most common type of HAI
  - Consult STMH Indwelling Urinary Catheter policy for CAUTI Prevention Bundle details
  - Utilize decision support for ordering cultures
  - **Prolonged use of IUC increases risk of CAUTI**
    - Consider alternatives to indwelling catheter
    - If no alternative to IUC, complete a daily review of the need for a catheter
  - Adherence to hand hygiene and the proper insertion/maintenance of catheter decreases the risk

MDRO (Multi-drug Resistant Organisms)—Prevention Strategies
- MDRO-defined as microorganisms that are resistant to one or more classes of antimicrobial agents
  - To prevent the spread:
    - Prompt identification of MDRO status and appropriate patient isolation
    - Follow Antibiotic Stewardship guidelines
    - Proper hand hygiene and cleaning of equipment
Joint Commission certifications

- Advanced Primary Stroke
- Total Knee Replacement
- Total Hip Replacement
- Spine Surgery

Review the following slides for guidelines, performance initiatives and goals specific to each program. Clinical leaders for each program can be reached through Epic's Secure Chat (Haiku app):

- Stroke: Whitney Barfield, RN
- Hip/Knee: Ann Gomes, RN
- Spine: Michael Shaw, RN

St. Mary’s has been continuously accredited since 1954
Thrombectomy-Capable Stroke Center

- Provides comprehensive care and education to patients with Stroke and TIA.
- Clinical Practice Guidelines:
  - AHA/ASA Guidelines for the Early Management of Patients with Acute Ischemic Stroke (since 2019)
  - Guidelines for the Prevention of Stroke in Patients with Stroke or TIA (2021)
- Standardized Stroke Order Sets:
  - Neurology – Ischemic Stroke Thrombolytic Admission
  - Neurology – Ischemic Stroke Nonthrombolytic Admission
  - Neurology- Aneurysmal Subarachnoid Hemorrhage Admission
- Stroke Performance Initiatives
  - Door-to-Needle (tenecteplase (TNK)): 85% 60 min or less
  - Door-to-Skin Puncture (mechanical thrombectomy): 90 min or less
- Thrombectomy-Capable Certified – only Hospital certified in GA
Total Hip & Total Knee Program

- Provides comprehensive care and education to patients receiving Total Hip or Total Knee Replacements

- Performance Improvements
  - Early Ambulation Program
  - Establishing a Pain Goal Prior to Surgery
  - Patients understand pain medications at discharge
  - Appropriate pain medications will be given based on doctor’s orders

- Clinical Practice Guidelines
  - Best Practice Guideline Total Hip Replacement, Bodden J Coppola, C., NAON;
  - Best Practice Guideline Total Knee Replacement, Mori, C., Ribsam, V., NAON
Spine Program

- Provides comprehensive care and education to patients receiving spine procedures
- Clinical Practice Guidelines
  - Assessment of chronic pain
  - NASS. Diagnosis and treatment of cervical radiculopathy from degenerative disorders
  - Clinical Systems Improvement. Adult Acute and Subacute Low Back Pain.
- Spine Performance Measures
  - Administer appropriate pain medication
  - Encourage early ambulation
  - Ensure preop baths are completed
  - Educate and encourage use of incentive spirometry
- Spine Performance Initiatives
  - Improve process of preop clearance
  - Decrease SSI and LOS
  - Develop standardized multimodal pain order sets
- Future Goals
  - Continue to grow and progress the spine surgical services
Illness & Impairment Recognition

The Hospital and its Medical Staff are committed to providing quality care, which can be compromised if a practitioner is suffering from impairment.

- Impairment means substance abuse or a physical, mental or emotional condition that adversely affects someone's ability to practice safely and competently.
- Practitioners suffering from an impairment are encouraged to voluntarily bring the issue to the Practitioner Health Committee so that appropriate steps can be taken to protect patients and to help the physician to practice safely and competently
  - Confidentiality will be upheld to every extent possible
- Anyone who is concerned that a practitioner who is on Hospital premises is impaired and poses an immediate threat to the health and safety of patients should immediately notify the department chief, the President of the Medical Staff, or their designees.
- Anyone who is concerned that a practitioner is impaired (not an immediate threat) should submit a written report to the President of the Medical Staff factually describing the incident(s) that led to the concern.
- Details of how Impairment issues are handled can be found in the Practitioner Health Issues policy, located on the Intranet and the Medical Staff Office.

- **GA’s Physician Health Program** provides confidential referral, treatment oversight & monitoring – St. Mary’s, the Medical Partnership & the GA Composite Medical Board recommend & use this program!
Assessing & Managing Pain

The Hospital and its Medical Staff are committed to appropriately assessing and managing each patient’s pain.

- It is the policy of St. Mary’s that all patients in all care settings will receive pain assessment and management.
- Physicians are encouraged to review the full policy, “Pain Management”, on the St. Mary’s Intranet site yearly. It may also be reviewed in detail with the nursing staff at any time.
- The focus of the pain management program is to provide pain control that is timely, safe, evidence-based and multimodal. The policy describes how this will be accomplished.
- Assessment scales used to measure pain intensity should be appropriate to the patient’s developmental, physical, emotional and cognitive ability. The following scales may be used: providing a comprehensive initial assessment and regular reassessments of pain;
  - The 0 to 10 “verbal numeric intensity scale” or the “Wong Baker Faces” scale;
  - The FLACC pain scale if the patient is unable or unwilling to self-report;
  - Newborns in the NICU will be assessed using the “CRIES” pain scale;
  - Use the Clinical Pain Observation Tool (CPOT) for nonverbal/sedated patients (ICU).
Patient Restraints

- It is the policy of St. Mary’s to create a physical, social and organizational environment that limits the use of restraint to clinically appropriate and adequately justified situations.
- Physicians are encouraged to review the full policy, “Restraints”, on the Intranet site yearly. It may also be reviewed in detail with the nursing staff or CMO at any time.
- Highlights relating to physician ordering of Restraints:
  - Remember to sign, date & time the orders daily to start or continue restraints;
  - For Violent Restraints, you must evaluate the patient within 1 hour of the initial order;
  - The order can be renewed every 4 hours for age 18 & older; 2 hours for ages 9-17; & every hour under age 9 for up to 24 hours. After the 24 hour period, another face to face evaluation is required if issuing a new order.
Patient Experience
Patient Experience of Care

• Also referred to as: Patient Perception of Care/Patient Satisfaction
• **Everyone plays a role**
• Measured by HCAHPS
• A key commitment to our values of **Reverence, Justice and Safety**
Patient Rights & Cultural Diversity

• **Patients have the right to:**
  - Access Care
  - Respect & Dignity
  - Privacy & Confidentiality

• **Personal Safety**
  - Information
  - Communication

• **Consent**
  - Consultation
  - Refusal of Treatment

• **Cultural Diversity: We must always...**
  - Consider a patient’s culture when giving care or addressing patients or families in any setting, including the hospital, clinic, outpatient facility, office or home.
  - Remember that a patient may belong to ethnic, regional, religious and other groups where there are values, beliefs and practices that possibly affect how a patient views health care.
  - Treat each patient as an individual.
  - Avoid stereotyping and learn about each patient’s unique views on health care.
  - **Remember that** each patient has the right to be treated with respect, which promotes a better response to their care.
# Patient Grievances at Each Location

<table>
<thead>
<tr>
<th>Contact</th>
<th>Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nicole Hackney</td>
<td>St. Mary’s Athens &amp; other facilities not listed below</td>
</tr>
<tr>
<td>Kim Tyler</td>
<td>Good Samaritan Hospital</td>
</tr>
<tr>
<td>Lauren Papka</td>
<td>Sacred Heart Hospital</td>
</tr>
<tr>
<td>Brandt Halbach</td>
<td>SMMG physician practices</td>
</tr>
<tr>
<td>HHV Administration Office</td>
<td>Highland Hills Village</td>
</tr>
<tr>
<td>Sandra Stephenson</td>
<td>HHC/Hospice/Home Palliative Care</td>
</tr>
</tbody>
</table>
WE ARE ALL A PART OF THE PATIENT EXPERIENCE
Safety, Security, and Emergency Preparedness
Emergency Preparedness

If there’s a Disaster in the community, providers should respond as follows:

• Employed or contracted physicians: Report to your contracted hospital’s Physicians Lounge

• Medical Staff Officers and Department Chairs: Report to your respective hospital’s Physicians Lounge

• All other physicians: Report to the nearest hospital’s Physicians Lounge

*Note that EMS will respond according to trauma protocols.

Questions about disaster processes can be referred to Joe Lockman, Director of Safety & Security, 706-510-9777
Emergency Preparedness

• How to report an Emergency
  • Dial:
    • Non-Hospital: “9-911”
    • St. Mary’s Hospital: “111,” state your name and title.
    • Sacred Heart Hospital: “0,” state your name and title.
    • Good Samaritan Hospital: “*78” (Intercom system) and announce the emergency.
  • State the emergency (Code Red, Code Blue, Missing Person, etc.)
  • State your location
  • For Code Red, state what is burning.

• DO NOT hang up until the operator has repeated the information back to you.
# Emergency Preparedness

<table>
<thead>
<tr>
<th>Event</th>
<th>Revised Codes (as per recommended plain language standards)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fire / Alarm</td>
<td>“Code Red” remains (no change)</td>
</tr>
<tr>
<td>Medical Emergency</td>
<td>“Code Blue” remains (no change)</td>
</tr>
<tr>
<td>Utility / Technology Interruption</td>
<td>“Facility Alert” + Type of Service Interruption + Descriptor + Location</td>
</tr>
<tr>
<td>Evacuation / Relocation</td>
<td>“Facility Alert” + Evacuation (or Relocation) + Descriptor + Location</td>
</tr>
<tr>
<td>Hazardous Materials Spill</td>
<td>“Facility Alert - Hazardous Material Spill” + Descriptor (if any) + Location</td>
</tr>
<tr>
<td>Mass Casualty Incident (MCI)</td>
<td>“Facility Alert - Mass Casualty Incident” + Descriptor (Trauma, Rad, Bio, Chem, or Unk)+ Location</td>
</tr>
<tr>
<td>Weather (e.g. Tornado)</td>
<td>“Facility Alert – [Applicable Weather] Warning”+ NWS Statement +Location</td>
</tr>
<tr>
<td>Infant/Child Abduction or Missing Person</td>
<td>“Security Alert - Missing Person” + Description of Person + Last Seen Location</td>
</tr>
<tr>
<td>Armed Intruder / Shooter/ Hostage Situation</td>
<td>“Security Alert – [Applicable Threat]” + Location + Perpetrator’s Description + “Stay Clear” **Be familiar with rooms with green dots above the door – these rooms can be locked and have limited windows.</td>
</tr>
<tr>
<td>Controlled Access / Egress</td>
<td>“Security Alert – Lockdown Implemented” + Location</td>
</tr>
<tr>
<td>Behavioral Disturbance</td>
<td>“Security Alert – Public Safety Officers Needed” + Location</td>
</tr>
</tbody>
</table>

*Students and Observers – If a code is called, look to your Preceptor or Hospital Staff for guidance.*
Emergency Preparedness

Code Red

• Fire Safety
  • Prepare yourself before fire strikes in the workplace.
    • Memorize all exit and emergency routes.
    • Identify all alarms. Learn how to operate fire extinguishers.
    • To respond rapidly and effectively, memorize the acronym: RACE
      • R Remove patients
      • A Activate the alarm
      • C Confine/contain the fire
      • E Evacuate or if safe to do so, Extinguish

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

• When you discover a fire, *rescuing patients in immediate, life-threatening danger is always your top priority.* This means you should always stop to investigate any unusual odor at once. If you smell smoke coming from behind a door:
  • Feel the door with the back of your hand before opening it
  • If it’s too hot to touch, don’t open it
  • If it’s touchable, open it slowly
  • If you must enter the scene of the fire to rescue a patient, stay low, remember that smoke and heat rise to the ceiling. Crawl beneath them.

• Fire Extinguishers
  • Portable fire extinguishers are designed to put out a small fire or control a larger one until the fire department arrives. Just as there are different kinds of fires, there are different kinds of fire extinguishers.
  • Each of the three basic classes of fires has its own standard symbol. Fire extinguishers are labeled with the symbols for the classes of fires they can put out. There are 3 Classes of Fire: Class A, B, and C. For each class there are designated fire extinguishers.
<table>
<thead>
<tr>
<th>Class A:</th>
<th>Ordinary combustibles such as wood, cloth, paper, rubber, and many plastics.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class B:</td>
<td>Flammable liquids such as gasoline, oil, grease, tar, oil-based paint, lacquer, and flammable gas.</td>
</tr>
<tr>
<td>Class C:</td>
<td>Energized electrical equipment including wiring, fuse, boxes, circuit breakers, machinery, and appliances.</td>
</tr>
<tr>
<td>HALON</td>
<td>Use only on highly sophisticated equipment. Heavier-than-air gas settles into hard-to-reach places to smother the fire. This fluoro-carbon gas leaves no coating that could harm electronic equipment.</td>
</tr>
<tr>
<td>A-B-C</td>
<td>All of the fire extinguishers at St. Mary's are “multipurpose” A-B-C models, which can be used on all three classes of fire.</td>
</tr>
</tbody>
</table>
St. Mary’s method for communicating information with all providers is by **Email**.

The Email address provided in your original application is used to send Hospital updates. Be sure and **check your inbox regularly** for information such as:

- Service line updates;
- Emerging infections;
- Medication shortages;
- Other updates that effect providers.

Contact the Medical Staff Office at 706.389.3940 to change your preferred Email address.
Provider Parking – St. Mary’s Hospital

⭐ **Physician Parking:** There are 85 spaces located nearest to the Hospital designated for physician use. Three gated lots are accessible by physician ID badge, including the top half of the parking deck. Physician badges also work in all staff lots.

- **Allied Health Providers:** Allied health providers are able to park in all colleague areas. Lots B, C, E, F & G are gated and accessible by ID badge. Lot H is open and available to anyone.

- **Security** is available for badge assistance and for escorts to any lot upon request; call 706-389-3991.

Please be mindful of patient & guest parking areas, and only park in spaces designated for colleague use. Patients are the reason we are here!
All students must park in designated areas.

- **Good Samaritan Hospital** – park behind the hospital in employee parking.
- **Sacred Heart Hospital** – park in the front visitor’s entrance.
- **St. Mary’s Hospital** – students park in lot H
- **Security** is available for badge assistance and for escorts to any lot upon request; call **706-389-3991**

**Do not park in** patient & guest parking areas. Patients are the reason we are here!
Safety

General Safety
- Keep everything in its proper place
- Clean up or report spills immediately
- Watch out for wet floors
- Report loose or worn flooring or torn carpet
- Correct problems or report any unsafe condition immediately
- Stay attentive
- Don’t daydream or take shortcuts
- Place waste in appropriate receptacles
- **Report suspicion of impairment to Supervisor.**
  - Signs of Impairment:
    - Chronic absenteeism or tardiness
    - Abnormal or erratic behavior
Your ID badge must be worn at all times while you are on duty. Your badge is a critical component of workplace safety and customer service. ID badges must be worn at or above chest-level.

- Facility access – external & internal
- Parking lot access

Security
- If you see a suspicious person/situation at one of our facilities:
  - Non-Hospital: Dial 9-911
  - St. Mary’s Hospital: Dial 111
  - Sacred Heart Hospital: Dial “0”
  - Good Samaritan Hospital: Dial “78” and state the emergency
- Alcohol/Drugs are not allowed
- Weapons are not allowed
- DON’T think it will be ok! – Report it!
- Be sure to secure all valuables and equipment
- Smoking - Tobacco free campus
- Parking – All staff should have a parking permit
- Contractors working at STMH will wear picture ID. All others will wear numbered ID’s
Key Contacts
## Key Contacts

<table>
<thead>
<tr>
<th>Trinity Health Integrity &amp; Compliance</th>
<th>Benefits Information / Workday Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone: 1-886-477-4661</td>
<td>Human Resources Service Center</td>
</tr>
<tr>
<td>Online: <a href="http://www.mycompliancereport.com">www.mycompliancereport.com</a> Access Code ‘THO’</td>
<td>Phone: 1-877-750-4748</td>
</tr>
<tr>
<td></td>
<td>Email: <a href="mailto:HR4U@trinity-health.org">HR4U@trinity-health.org</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Employee Assistance Program</th>
<th>Retirement Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carebridge Phone: 1-800-437-0911</td>
<td><a href="http://www.myfidelity.com/trinityhealth">www.myfidelity.com/trinityhealth</a></td>
</tr>
<tr>
<td>Secure Access Code: BKKR5</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Etime Timekeeping System</th>
<th>Interpretation Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email: <a href="mailto:Tammi.wiatrowski@stmarysathens.org">Tammi.wiatrowski@stmarysathens.org</a></td>
<td>Phone: 706-389-3276</td>
</tr>
<tr>
<td>Phone: 706-389-2619.</td>
<td></td>
</tr>
</tbody>
</table>

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<tr>
<th>Security Services (Hospital Locations)</th>
<th>Security Services (Non - Hospital Locations)</th>
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<td>- St. Mary’s Hospital:  Dial 111</td>
<td>Non-Hospital:  Dial 9-911</td>
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*Security Services (Non - Hospital Locations)*
- Non-Hospital:  Dial 9-911
New Colleague Orientation Conclusion
As a Trinity Health Colleague, I Commit to...

- Delivering people-centered, quality health care services with compassion, dignity and respect for each individual.
- Delivering services inclusive of race, color, religion, gender, sexual orientation, marital status, national origin, citizenship, age, disability, genetic information, payer source, ability to pay, or any other characteristic protected by law.
- Demonstrating the highest levels of ethical and professional conduct at all times and under all circumstances.
- Speaking professionally and respectfully to those I serve.
- Treating others with honesty, dignity and reverence.
- Behaving in a manner that enhances a spirit of cooperation, mutual respect and trust among all members of the team.
- Working with others in an inclusive and culturally welcoming environment.
Our uniqueness, our individuality, and our life experience molds us into fascinating beings. I hope we can embrace that. I pray we may all challenge ourselves to delve into the deepest resources of our hearts to cultivate an atmosphere of understanding, acceptance, tolerance, and compassion. We are all in this life together.

- Linda Thompson
A Blessing For Your New Job

May your new work excite your heart, kindle in your mind creativity to journey beyond the old limits of all that has become wearisome.

May this work challenge you toward new frontiers that will emerge as you begin to approach them, calling forth from you the full force and depth of your undiscovered gifts.

May the work fit the rhythms of your soul, enabling you to draw from the invisible new ideas and a vision that will inspire. Remember to be kind to those who work for you. Endeavor to remain aware of the quiet world that lives behind each face.

Be fair in your expectations, compassionate in your criticism. May you have the grace of encouragement to awaken the gift in the other’s heart, building in them the confidence to follow the call of the gift.

May you come to know that work which emerges from the mind of love will have beauty and form.

May this new work be worthy of the energy of your heart and the light of your thought.

May your work assume a proper space in your life; instead of owning or using you, may it challenge and refine you, bringing you every day further into the wonder of your heart.


We pray that you find support, peace, community and passion here at St. Mary’s. May the work you do bring you a sense of great joy. Many blessings on the journey ahead.

Best Wishes, The Spiritual Care Team
You have completed the orientation.
Please complete the remainder online documents.

We hope you enjoy your experience

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