

# Safety Training

## Hospital and Associated Facilities

**HAWAII'  
PACIFIC  
HEALTH**

KAPI'OLANI  
PALI MOMI  
STRAUB  
WILCOX

# Emergency Preparedness

## **Welcome to the course on emergency preparedness.**

- Emergencies happen almost every day. All emergencies need an effective response. This course will give you information about how to respond to emergencies.
- You will learn about:
  - Who to contact in case of an emergency
  - Emergency codes and procedures for HPH hospital facilities
  - Emergency Communication Systems
  - Emergency Supplies in case of disaster

# Emergency Codes

- How to report an emergency code:
  - Dial x500.
  - State the nature of the emergency.
  - Give exact location; do not abbreviate your unit. (e.g., NOT PICU, say, Pediatric Intensive Care Unit).

# Emergency Codes – Code Black

## **Severe Weather (i.e., Hurricane, Tsunami, Earthquake)**

- Code Black will be called overhead when weather related disasters or the threat of a weather related disaster is expected to hit the Hawaiian Islands.
  - Remain calm. Do not panic.
  - Take cover from falling debris, as needed.
  - Stay away from glass windows, doors and mirrors.
  - Do not use elevators.
  - Do not go outdoors unless directed to do so by the Fire Dept., Police Dept. or the Hospital Incident Command System (HICS) Incident Commander.

# Code Black – Hurricane Procedures

## Severe Weather (i.e., Hurricane, Tsunami, Earthquake)

- Hurricane season extends from the beginning of June through November. When a storm has been identified and its track can be predicted with some certainty, a notice may be issued by the National Weather Service to those areas at risk. The following terms are used to indicate the different levels of alert:
  - **HURRICANE WATCH:** An announcement for specific areas advising that there is a potential threat of hurricane conditions
  - **HURRICANE WARNING:** A warning that sustained winds of 74 MPH or greater are expected in a specified area within 24 hours. If the hurricane's path is unusual or erratic, the warning may be issued only a few hours before the onset of the hurricane conditions.

# Are You and Your Family Members Prepared for an Emergency?

- **Being prepared** means being ready for any kind of emergency, be it a hurricane, utility disruption or manmade disaster.
- **Check with your supervisor** regarding your role and responsibilities at work in the case of a disaster.
- **Promote Family and Individual Preparedness.** If you and your family are prepared, our facilities will be better prepared to meet the needs of our patients in an emergency situation.

The following slides will provide important information on how to prepare yourself, your family, and your pets for a disaster in case you are required to report to work during an emergency situation.

# Get Ready Now

- **Planning what to do in advance is an important part of being prepared.**
- **Prepare Emergency Supplies**
  - Having emergency supply kits prepared will put the tools you need at your fingertips.
  - You may want to store items in an easy-carry bag, such as a shopping bag, backpack or duffle bag.
  - Having sufficient supplies for **two weeks** is recommended\*.

\*Hawaii State Department of Health – ‘Plan to Be Ready: The Hawaii Family Guide to Health Emergencies.’ [www.hawaii.gov/health](http://www.hawaii.gov/health)

# Recommended Supplies

- **Water** – One gallon of water per person per day for drinking and sanitation, stored in plastic containers.
- **Non-Perishable Food** – Ready-to-eat canned goods, as well as juice, staples (salt, sugar, pepper, spices, etc.) energy bars, vitamins, food for infants, and favorite snacks.
- **Clothing and bedding** – One complete change of clothes per person, diapers for babies, sturdy shoes or work boots, rain gear, blankets or sleeping bags, hat and gloves, sunglasses.
- **First Aid Kit** – Include Band-Aids, alcohol wipes, antibiotic cream and other wound-care supplies. Add non-prescription drugs such as Ibuprofen or aspirin, antacids, laxatives or stool softeners.
- **Prescription medications** – Include prescription medications such as insulin, heart and blood pressure medications, even an extra pair of glasses. (NOTE: Prescription medications expire and need to be rotated).
- **Tool and Supplies** – Emergency Preparedness manual, important documents, paper cups, plates, and plastic utensils, battery-operated radio and extra batteries, flashlight and extra batteries, cash or traveler's checks, change, utility knife, gloves, waterproof matches and other basic supplies.
- **Sanitation** – Toilet paper, wet wipes, liquid detergent, feminine supplies, deodorant, toothpaste or denture supplies, toothbrush, plastic garbage bags and ties, plastic bucket with tight lid, disinfectant spray, sunscreen and mosquito repellent, household bleach.



# Everyone Needs a Plan – Plan in Advance

- **Develop a Communications Plan**

- Your family may not be together when disaster strikes, so plan how you will contact one another and review what you will do in different situations.

- **Know where you will go**

- Depending on your circumstances and the nature of the emergency, the first important decision is whether you stay put or get away. Plan for both possibilities.
- Use common sense and available information. Watch TV, listen to the radio or check the Internet often for information or official instructions as it becomes available.
- If you're specifically told to evacuate or seek medical treatment, do so immediately.

# Don't Forget Your Pets

- **Your pet is an important member of your household.** Be sure to make plans in advance for them too!
- **Prepare** an animal emergency supply kit to include sufficient food, water, medicines, a backup collar and tag, a picture of you and your pet (in case you get separated), and favorite toys.
- **Plan** how you will assemble your pets and where you will go. Plan in advance for shelter alternatives that will work for both you and your pets. Develop a buddy system with your neighbors, friends or relatives to make sure that someone is available to care for or evacuate your pets if you are unable to do so.
- Talk to your pet's veterinarian about emergency planning. Gather contact information for emergency animal treatment. Keep one copy of these phone numbers on you and one in your pet's emergency supply kit.

# In All Cases, Remain Calm

- **Above all, remain calm, be patient and think before you act.**

## Remember:

1. Get a Kit
2. Make a Plan
3. Be Informed
4. Talk to your supervisor about your responsibilities in case of an emergency.

With these simple preparations, you can be ready for the unexpected.

# Roles and Responsibilities for Employees

- Employees are considered to be essential personnel.
- Always have your hospital identification badge with you.
- Prepare your family and wait for a call from your Department Manager.
- Call in to HPH's Employee Information Hotline at 983-2466 on O'ahu and Lana'i, or to 245-1466 on Kaua'i.
- When telephone communications are not available, please listen to local radio stations in your area.

# Roles and Responsibilities for Physicians

- Physicians are essential personnel.
- During an emergency, physicians will be notified by the Medical Staff Department.
- When notified, physicians must first report to the Medical Staff Department or the Hospital Emergency Operations Center (HEOC) for instructions.
- Always have your hospital identification badge with you.
- Call in to HPH's Employee Information Hotline at 983-2466 on O'ahu and Lana'i, or to 245-1466 on Kaua'i.
- When telephone communications are not available, please listen to local radio stations in your area.

# Emergency Codes – Code Gray

## Security Assistance

- CODE GRAY will be called overhead when **patients or visitors are disorderly or combative** and assistance by all available personnel is needed immediately.
- Remain calm and move to a safe distance if possible.
- Use Panic Button if available in your department.
- Dial x500 and report a Code Gray at your location.
- Listen overhead for the announcement. If you don't hear it within 20 seconds, make the call again.
- Wait for "ALL CLEAR" notification.
- Refer to CODE GRAY Policy in your hospital specific safety corner.

# Emergency Codes – Code Green

## **Bomb Threat**

- CODE GREEN will be called overhead when there has been a BOMB THREAT.
- The Bomb Threat policy in the Emergency Management Manual must be strictly followed in case of a telephone threat, a written threat, a verbal threat or a suspicious package has been found in your department.
- Remain calm. Don't use cell phones, radios or pagers.
- Listen carefully to the caller and try to obtain as much information as possible.
- Notify your supervisor and evacuate if necessary.
- Wait for "ALL CLEAR" page.
- Refer to CODE GREEN Policy in your hospital specific safety corner.

# Emergency Codes – Code Orange

## **HazMat / Bioterrorism**

- CODE ORANGE (BIOTERRORISM) will be called overhead when there has been a bioterrorism chemical exposure brought into the hospital.
- Notify your supervisor immediately.
- Follow the directions of your immediate supervisor, as well as your departmental safety policies and procedures.
- Wait for "ALL CLEAR" notification.
- Refer to CODE ORANGE (BIOTERRORISM) Policy in your hospital specific safety corner.



# Emergency Codes – Code Orange

## HazMat – Hazardous Spill

- CODE ORANGE (HAZARDOUS SPILL) will be called overhead when a hazardous spill/leak has occurred in the hospital and cannot be contained or cleaned up without assistance from personnel outside of the department where the spill/leak has occurred.
- Dial x500 and report a Code Orange - Hazardous Spill at your location. Be sure to state the nature of the hazardous material spill.
- Isolate the spill or exposure (if able to do so safely) and evacuate the area if necessary.
- Retrieve the Safety Data Sheet (SDS) for the specific chemical(s) involved by contacting
  - 3E's SDS fax-on-demand at 1-800-451-8346 -or-
  - 3E online at [www.3eonline.com](http://www.3eonline.com) (to access the site, enter Username **HPACHLTH** and password **MSDS**).

# Emergency Codes – Code Orange

## **HazMat – Hazardous Spill**

- Clean up spill only if trained to do so and be sure to use proper Personal Protective Equipment (PPE).
- Wait for "ALL CLEAR" notification.
- Refer to CODE ORANGE (HAZARDOUS SPILL) Policy in your hospital specific safety corner.

# Emergency Codes – Code Pink

## **Abduction – Infant/Pediatric/Missing Person**

- CODE PINK will be called on the overhead when an infant, pediatric or adult patient is **missing or abducted**.
- Keep alert.
- Keep a lookout for individuals performing unusual and distinctive behaviors.
- Get a description of the suspicious individual(s) and direction of flight.
- Dial x500 and report a Code Pink at your location.
- Refer to the CODE PINK policy in your hospital specific safety corner.

# Emergency Codes – Code Red

## Fire

- CODE RED will be called on the overhead when fire or smoke has been located in the hospital.
- Apply the RACE fire response plan as quickly as possible and get EVERYONE away from the fire.
- Pull the fire alarm pull station nearest to your department.
- Dial x500 and report a Code Red at your location.
- If extinguishing the fire is possible, remember PASS when using the nearest fire extinguisher to your location.
- Stay in your own department unless otherwise instructed. Close all doors and obtain a three-room safety zone from the fire.
- Wait for "ALL CLEAR" notification.
- Refer to CODE RED Policy in your hospital specific safety corner.

# Emergency Codes – Code Silver

## Hostage Incident

- Remain calm. Do not panic.
- Do NOT report to the area to help.
- Leave if possible.
- Dial x500 and report a Code Silver at your location.
- Listen overhead for the announcement. If you don't hear it within 20 seconds, make the call again.
- Follow directions of hostage taker.
- Wait for "ALL CLEAR" notification.

# Emergency Codes – Code Triage

## Disaster Activation Plan

- CODE TRIAGE will be called overhead when there is a mass casualty incident involving trauma, hazardous materials or biological agents.  
**Time permitting, CODE TRIAGE-STANDBY may be called overhead providing the hospital with some preparation time.**
- Secure your property and contact your supervisor for instructions.
- If told to report to work, listen to the overhead page.
- Proper identification is needed to gain access to the facility.
- Follow procedures as directed by your supervisor.
- Continue to work as normal and wait for “ALL CLEAR” notification.
- Refer to CODE TRIAGE Policy in your hospital specific safety corner.

# Emergency Codes – Code Utilities

## **UTILITIES FAILURE**

**(i.e., Electrical, Sewage, Plumbing, HVAC, etc.)**

- CODE UTILITIES will be called overhead in the event of a utilities failure that severely and quickly impacts patient care and it cannot be maintained or contained without the help of people outside of the department.

# Emergency Codes – Code Utilities

## UTILITIES FAILURE

**(i.e., Electrical, Sewage, Plumbing, HVAC, etc.)**

- Remain calm.
- Dial x500 and report a Code Utilities at your location.
- Listen overhead for the announcement. If you don't hear it within 20 seconds, make the call again.
- Immediately evacuate patients away from the problem area as needed. Obtain a three-room safety zone from the incident.
- If possible, clear the incident area of all portable medical equipment, and turn off and unplug all stationary medical equipment in the incident area.
- Refer to CODE UTILITIES Policy in your hospital specific safety corner.



# Emergency Codes – Code White

## Active Shooter Situation

- **RUN | HIDE | FIGHT**
  - RUN: Have a route in mind, leave belongings behind, bring others with you
  - HIDE: If you cannot run, hide out of the shooters view, silence cell phone
  - FIGHT: If there are no other options, work together and be aggressive
- Know your work area for hiding places or escape routes
- Report any concerning behavior to your supervisor or Security
- Your safety is critical to ensuring the safety of our Patients
- Be prepared to assist with any recovery efforts such as:
  - Triage
  - Witness Statements
  - Counseling
- For more information contact your Safety Officer

# Emergency Management Plan

## **Evacuation Plan**

- Be sure to familiarize yourself with the evacuation plan for your area.

## **Emergency Management Drills**

- Emergency management drills are conducted at least twice a year to comply with regulatory requirements.
- Various scenarios are drilled in order to test all aspects of the Emergency Management Plan. Employee participation and feedback are critical for testing and improving the plan.
- Review and become familiar with the Emergency Management Plan and your department specific responsibilities, which are located in your hospital specific safety corner.

# Backup Communications System

- **There are several communications systems available during emergencies, internally and externally.**
  - Normal telephone service
  - MEDICOM
  - Cellular phones
  - Hand-held radios
  - Power fail phones
  - Written communication delivered by messengers
  - Amateur radio
  - Facsimile (fax)
  - Email

# Backup Disaster Supplies

**Backup supplies are available in case a disaster should strike.**

- Distribution of the disaster supplies will be determined by the Hospital Command Center in times of disaster.
- Supply, Processing & Distribution Department - maintains an inventory of patient care supplies and equipment.

# Emergency Management Web Site

- To access more information and resources regarding the Emergency Management Program at Hawai'i Pacific Health and/or your hospital facility, go to your facility's intranet home page, click **Emergency Management**.

# Summary

- Dial x500 to report an emergency.
- Be sure that you are prepared for any kind of emergency, before it strikes.
- Prepare an emergency supply kit with sufficient supplies for two weeks.
- Be familiar with the emergency codes and appropriate procedures.

---

<b>Code Black</b>	<b>Severe Weather</b>
<b>Code Gray</b>	<b>Security Assistance</b>
<b>Code Green</b>	<b>Bomb Threat</b>
<b>Code Orange</b>	<b>Hazmat – Bioterrorism/Spill</b>
<b>Code Pink</b>	<b>Abduction – Infant/Pediatric/Missing Person</b>
<b>Code Red</b>	<b>Fire</b>
<b>Code Silver</b>	<b>Hostage</b>
<b>Code Triage</b>	<b>Disaster Activation Plan</b>
<b>Code Utilities</b>	<b>Utilities Failure</b>
<b>Code White</b>	<b>Active Shooter</b>

---

# Fire Safety

**Welcome to the course on fire safety.**

**“Fire” is a dreaded word in any hospital.**

- As part of the Hawai'i Pacific Health team, you share responsibility for the safety of patients, visitors and staff. In order to handle a fire emergency, you must be familiar with your facility's procedures and the specific actions you are expected to perform. Your individual actions could make the difference between life safety and disaster.
- You can help keep everyone safe when you know:
  - How to prevent fires
  - What to do if a fire occurs



# Fire Safety: Objectives

- After completing this course, you should be able to:
  - Identify the three sides of the fire triangle.
  - Discuss the importance of fire safety.
  - List common causes of fire in the health care setting.
  - List methods for preventing fires.
  - Know your facility's safety features.
  - List the steps of RACE.
  - List the steps of PASS.

# Fire Emergency Preparedness

- Fires in health care facilities can be especially dangerous.
- **YOUR RESPONSIBILITIES:**
  - Know your role in a fire emergency
  - Know the locations of fire alarms, extinguishers and exits
  - Take fire drills seriously – practice so you respond automatically
  - Know your department's evacuation plan and routes
  - Know where smoke compartments are throughout the facility
  - Observe and promote the NO SMOKING policy
  - Report electrical hazards or equipment not working properly

# Fire Plan

**Hawai'i Pacific Health and its subsidiaries  
have a fire plan in place.**

- The fire plan describes what to do during a fire.

YOU must:

- Know your duties and responsibilities under the fire plan
- Attend all training classes related to fire safety
- Participate in all fire drills, as required

# Fire Triangle

- Fires need:

- Fuel
- Oxygen
- Heat



- These three items make up the fire triangle.
- A fire will break out whenever these items come together in the right amounts.

# Fire Prevention

- When you know what to do to help prevent fires from starting, you can reduce the risk of fire in your facility and improve patient and staff safety. Always remember that prevention is the best defense against fire.
- **NO SMOKING POLICY** – Hawai'i Pacific Health facilities are smoke-free. Please help us keep it that way by confronting anyone who is not following policy; be it staff, patients or visitors.
- **COMBUSTIBLE MATERIALS AND WASTE** – Store combustibles away from heat sources. Store waste in appropriate containers.
- **FLAMMABLE LIQUIDS AND GASES** – Follow special storage, handling and disposal procedures for flammables. Refer to the SDS for these procedures.
- **ELECTRICAL EQUIPMENT** – Always inspect for frayed power cords and broken plugs before using equipment and report any damage.

# Fire Alarm Systems

**If prevention efforts fail and a fire breaks out, you must be prepared to respond.**

- Your facility has safety features to ensure an effective response.
- These safety features include:
  - Fire alarm systems
  - Fire extinguishers
  - Emergency exit routes and doors
  - Smoke and fire doors and partitions
  - Fire plan

# Fire Emergency Actions: RACE

<b>R: Rescue/Remove</b>	Remove patients and others from immediate danger.
<b>A: Alert/Alarm others</b>	Activate the nearest fire alarm pull station if available. Dial x500 and give your name and exact location of fire.
<b>C: Confine or Contain the fire</b>	Close doors and windows to the room of fire origin – this cuts off oxygen supply and helps to contain the fire.
<b>E: Extinguish or Evacuate</b>	If the fire is in an enclosed area, touch the door before opening. Do not open the door if it feels hot. If the door can be touched without discomfort, enter the room to fight the fire with an ABC fire extinguisher. It is your responsibility to know the location of extinguishers and how to use them. Otherwise, prepare to evacuate.

# Fire Extinguishers: How to Use

To use an extinguisher, remember **P A S S**:

**P**ull the pin.

**A**im the nozzle at the base of the fire.

**S**queeze the handle in five-second bursts.

**S**weep the nozzle from side to side across the base of the fire.



# Fire Extinguishers

- Different types of fire-extinguisher materials fight different types of fires. Each fire extinguisher has a label to show which types of fire it can fight.
- Types of fires include:
  - **Class A:** wood, cloth, paper, and plastic fires
  - **Class B:** gasoline, kerosene, and oil fires
  - **Class C:** electrical fires
- **YOU MUST:**
  - Know where to find the nearest fire extinguisher.
  - Know which types of fire extinguishers are available in your facility.
  - Follow guidelines for choosing a fire extinguisher for a particular types of fire.
  - Know how to use a fire extinguisher.

# Fire Exit Routes

- Emergency exit routes and doors are another important safety feature.
- YOU must:
  - Know exit and evacuation routes.
  - Keep exit routes and exits clear.
  - Know where to find equipment for evacuating patients during a fire.
  - Know how to use this equipment.

# Fire Evacuation: Important Points

- When evacuating patients:
  - Do not evacuate any patient past the room of fire origin. Patients who cannot reach a fire or smoke door without passing the room of fire origin may need to be evacuated to the outside of the building. These patients then may enter a safe zone of the building from the outside.
  - After removing all patients from a room, close the room door. Mark the room as empty, according to the facility guidelines. For example, some facility place a pillow on the floor outside the room.
  - Move charts with patients.
  - During vertical evacuations, use stairwells. Avoid elevators.
  - Remember, it is your responsibility to know all routes of evacuation.

# Priority of Evacuation

- In the event of an evacuation, evacuate those in *immediate* danger first.
  - 1<sup>st</sup> – the patients closest to the fire.
  - 2<sup>nd</sup> – patients in the rooms on either side of the fire.
  - 3<sup>rd</sup> – patient and visitors are to be removed next. Walking patients and visitors are to be removed next.
- **DO NOT LEAVE AN AMBULATORY PATIENT WITHOUT GUIDANCE.**

# Fire Evacuation: Horizontal vs. Vertical

- Horizontal evacuation procedures
  - Horizontal evacuation will always be used first.
  - Evacuate to a “safe area” on the same unit (i.e., another safe compartment) or to a “safe area” on the same level that is closer to a way out.
- Vertical evacuation procedures
  - Only used upon order of Hospital Incident Commander and/or the Fire Department.
  - Use stairwells AFTER they have been assessed for damage.
  - If possible, use a stairwell as far from the incident to allow a way in for relief workers.
- **Use elevators ONLY upon direction of the Fire Department.**

# Fire Evacuation: Partial

- Partial evacuation refers to the removal of a patient or personnel from the immediate threat or danger of fire or smoke inhalation.
- A “safe area” is defined as a location beyond the immediate threat of danger (i.e., to another safe compartment, through a safe emergency exit or stairwell, or to the outside of the building).
- The partial evacuation plan is only used when the fire/disaster is confined to an area or under control to extinguish. As people are evacuated from each room, the door should be closed and the room marked as empty, according to the facility guidelines. For example, some facilities place a pillow on the floor outside the room.

# Summary

- Fires need fuel, oxygen and heat. A fire will break out whenever these items come together in the right amounts.
- To prevent fires related to smoking, Hawai'i Pacific Health facilities observe and promote the NO SMOKING policy.
- Help prevent fires by not overloading wall outlets, keeping corridors and passageways clear and keeping heat-producing devices away from objects that may burn.
- Know where to find the nearest fire extinguisher on your unit. To use a fire extinguisher, remember PASS.
- In case of a fire emergency, remember RACE.
- In the event of an evacuation, evacuate those from immediate danger first.

# General Safety & Security Management

## **Welcome to the course in General Safety and Security Management.**

- This course has been designed to help ensure the safety and security of all patients, employee and visitors, by providing you with pertinent information regarding Hawai'i Pacific Health's safety policies and procedures regarding:

- Safety & Security Officers	- Slips, Trips and Falls
- Medical Equipment	- Hazardous Materials and Waste
- Radiation/MRI Safety	- Security & Workplace Violence
- Ergonomics	- Utility Systems



# General Safety & Security Management

- Safe working conditions are the responsibility of every employee.
- Hawai'i Pacific Health strives to provide every patient, employee and visitor a safe and healthful environment in which to recover, work or visit. To this end, every effort is made to obtain the best possible level of accident prevention and health preservation.
- Employees are responsible for supporting and participating in the safety program by always observing safety precautions and reporting potentially hazardous conditions immediately to their manager.

# Safety Officers

**You must know who the Safety Officer  
is at your facility.**

<b>Pali Momi Medical Center</b>	<b>Kapi'olani Medical Center for Women &amp; Children</b>	<b>Straub Clinic &amp; Hospital</b>	<b>Wilcox Memorial Hospital and Kaua'i Medical Clinic</b>
Tony Miranda	Fego Alconcel	Shane Correia	Donald Pilker
485-4131	983-6496	529-4967	245-1145

# Accident Prevention

- If an accident occurs, notify your supervisor immediately.
- Unsafe conditions need to be corrected as soon as possible.
- Be constantly aware of safety.
- Wear the right clothing for the job.
- Keep heavy or bulky items on lower shelves (waist level).
- Open and close doors with caution.
- Keep drawers closed when not in use.
- Use proper body mechanics when lifting and use appropriate equipment.
- Dispose of all sharps into sharps containers.

# Slips, Trips and Falls

**Slips, trips, and falls in the workplace cause injuries and deaths every year.**

**Take safety measures to prevent incidents.**

- Keep floors clean and dry
- Walk, don't run
- Wear the right footwear for the job
- Prevent spills by covering drinks
- Take extra precautions on rainy days - close umbrellas prior to entering
- Keep the work area neat and clean - keep hallways clear
- Clean up spills right away
- Do not walk through stalls in parking garage

# Ergonomics

**Ergonomics is the science of designing the job to fit the worker.**

- A mismatch between the physical capacity of workers and the demands of the job can result in work-related musculoskeletal disorders (MSD).
- Prolonged exposure to risk factors can cause damage and lead to a work-related MSD.
- Good ergonomic practices can lead to fewer work-related injuries and prevent MSD.

# Musculoskeletal Disorders (MSD)

- Musculoskeletal Disorders (MSD) are:
  - Injuries or disorders to nerves, muscles, blood vessels, and ligaments
  - Usually in the upper areas of the body

# Musculoskeletal Disorders (MSD)

## Common Signs & Symptoms

- Decreased range of motion & grip strength
- Loss of muscle function
- Numbness or difficulty moving fingers
- Stiff joints
- Back pain

## Risk factors

- Repetition – doing the same motions over and over again.
- Forceful exertions – the amount of physical effort required to perform a task.
- Awkward postures – the position your body is in.
- Contact stress – pressing the body against a hard or sharp edge.
- Vibration – operating vibrating tools or equipment.

## Prevention

- Reduce or eliminate ergonomic risk factors.
- Follow all work and safety procedures.
- Be familiar with the signs and symptoms of MSD.
- Request a work-site assessment if your work environment is uncomfortable.
- Immediately report all injuries to your supervisor.

# Ergonomic and Back Safety Tips

## Proper Lifting Techniques

- Lift with your legs by bending your knees
- Keep your back straight.
- Keep the object close to your body.
- Get help if object is heavy or awkward.

## Mechanical Aids and Assistance

- Get help and use mechanical lifts or other patient transfer devices as indicated when transferring or repositioning patients.

## Adjust your Position and Pace

- Change positions frequently to avoid repeated stress
- Reduce repetitions by switching tasks
- Pace yourself by taking breaks

## Working with Video Display Terminals

- Feet should be flat on the floors, knees level with hips, lower back supported
- Arms should rest at sides with elbows at a right angle and wrists straight
- Sit about arm's length away, with screen tilted back slightly
- The top line of the screen should be just below eye level when you're sitting upright



# Work Injury Line (W.I.L.)

## What to do in the case you are injured:

- Notify your supervisor (or supervisor on duty) immediately after an injury/illness.
- Call the Work Injury Line (W.I.L.) within 24 hours or as soon as possible to report your injury.
  - **Oahu: 535-7200**
  - **Neighbor Islands: 1-877-776-7200**
- After notifying your supervisor, seek appropriate medical care. If involved in a blood or body fluid exposure (e.g. needle stick) report to the Emergency department and contact Employee Health.

# Visitor Safety

- **What to do in the event that you witness or discover a visitor injury:**
  - Unless life threatening, assist the visitor to the Emergency Room for treatment. If an emergency exists, call the Emergency Room for assistance.
  - Complete an on-line incident report by clicking the RL: Event Reporting link located on your hospital's intranet home page. Should the visitor refuse treatment or examination, document this on the report.
  - Forward the completed report to your supervisor.

# Medical Equipment Management

- **The Medical Equipment Management Program was established to promote safe and proper performance of medical equipment.**
- This program is administered by the Biomedical Engineering Department in cooperation with Nursing and other supporting departments within the organization.
- Users of medical equipment must complete department-specific equipment training during their initial orientation process.
- They will be able to describe or demonstrate:
  1. Capabilities, limitations and special applications of equipment.
  2. Operating and safety procedures for equipment use.
  3. Emergency procedures in the event of equipment failure.
  4. Processes for reporting equipment problems, and requesting repair service.

# Use of Medical Equipment

## **Help prevent equipment related accidents in your facility:**

- Verify that your medical equipment is safe to use by confirming:
  - The Biomedical Inspection sticker date is NOT expired.
  - The power plug is not damaged, and has three prongs.
- Turn equipment "OFF" before pulling the plug out of an outlet. Always pull the plug, NEVER the cord.
- Extension cords are prohibited, except in specific temporary or emergency situations.
- When Medical equipment fails:
  - REMOVE from service.
  - "TAG-OUT" with a Biomedical Work Request (on intranet; click on Biomed).
  - Notify Biomed (automatic notification sent to Biomed if online Work Order is completed).

# Use of Medical Equipment

- In the event of an electrical fire or electrical shock, UNPLUG equipment power cord.
- Liquids conduct electricity and create electrical hazards; keep away from equipment and power connections.
- Check that medical equipment is operational after power surges or temporary blackouts.
- Use RED power outlets for life support equipment when available. They provide emergency power during electrical outages.

# Safe Medical Device Act (SMDA)

**The SMDA applies to all medical equipment,  
not just electrical devices.**

- If you become aware of information that suggests a device has caused or contributed to the death, serious illness or serious injury of a patient of the facility:
  1. Immediately notify your supervisor.
  2. Record all settings, displays, and observations; take pictures if deemed useful.
  3. Turn equipment and information over to Biomed. Have Security hold equipment if Biomed is not on site.
  4. Complete an on-line incident report by clicking the PEMINIC link located on your hospital's intranet home page.

# Radiation Safety

**Radiation is used for patient diagnosis and treatment.**

- Exposure to radiation can increase the risk of cancer. Therefore, it is important to protect against exposure.
- Most of these sources are found in:
  - Radiology
  - Nuclear Medicine
- If you work with these sources, or your work requires you to go into restricted areas, you will receive additional radiation safety training.
- This training will explain how to keep radiation exposures to yourself and patients As Low As Reasonably Achievable (ALARA).

# Radiation Caution Signs

- **How to identify areas with radiation or radioactive materials:**
  - Warning signs will contain the three-bladed Radiation Symbol and a description of the hazard.
  - Warnings for radioactive material will say “Caution: Radioactive Materials”.
  - If radiation levels are high, sign will say “Caution: Radiation Area”.



# Restricted Areas

- Do not enter areas labeled with radiation caution signs unless you have received appropriate training, or are supervised by trained personnel.
- Never handle items that are labeled with the radiation symbol unless you have been trained to do so.
- Radioactive materials are required to be secured at all times. If you see a package or item labeled with the radiation symbol outside of a restricted area, notify the Radiation Safety Officer through the Operator.
- If you have questions about the use of radiation in the hospital, contact the Radiation Safety Officer.

# Radiation Safety Officer

*O'ahu Facilities:*

**Ronald Frick**

Phone#: 373-7009

*Kaua'i Facilities:*

**Dr. John Culliney**

Phone#: 245-1293

# Radiation Safety: Time, Distance, Shielding

- Minimize the amount of **time** that you are exposed to the source.
- Wear gloves and a lab coat at all times when handling radioactive materials or potentially contaminated materials (e.g., patient excretions). Wash hands after removing gloves.
- Maximize the **distance** between yourself and the source.
- Use appropriate **shielding** (lead, concrete) to reduce your radiation exposure.

# Radiation Safety Precautions

- Where radioactive materials are present, do NOT:
  - Eat
  - Drink
  - Smoke
  - Apply cosmetics
- Never store food or drinks in a refrigerator designated for radioactive materials.
- Dispose of contaminated sharps appropriately.

# MRI Safety Precautions

- The MRI contains a magnet that is ALWAYS on and is up to 60,000 times the magnetic field strength of the earth.
- When entering the MRI room you are exposed to the magnetic field; it is important that all staff follow MRI safety guidelines and policies to avoid accident or injury

# MRI Safety Precautions

- Safety Zones are Identified with signage as indicated below:
  - Zone I**      General Public
  - Zone II**     Unscreened MRI patients and staff
  - Zone III**    Screened MRI patients and staff
  - Zone IV**    Screened MRI patients and staff under direct supervision of MRI staff
- Never enter an MRI system room without clearance from an MRI staff member, even in an emergency situation.
- Staff must undergo verbal screening before entering Zone III.
- Screening questions include but are not limited to assessment for cardiac pacemakers, electronic or magnetically activated devices, artificial limbs, or metal implants.

# MRI Safety Precautions

- Before entering the MRI room, you must remove:
  - Metallic personal belongings
  - Watches
  - Pocket knives
  - Nail clippers
  - Jewelry
  - Hearing aids
  - Dentures and metal partials that can be removed
  - Credit cards
  - Watches
  - Cell phones; Pagers

# MRI Safety Precautions

- Metal objects may become dangerous projectiles and are NOT ALLOWED into the MRI room.
- Some examples include:
  - Wheelchairs
  - Vacuum Cleaners
  - Oxygen tanks
  - Hammers
  - Chairs
  - Scissors
  - Floors buffers
  - Carts
  - Equipment belts
  - Pepper spray
  - Flashlights
  - Handcuffs
  - Stools



# Hazardous Materials and Waste

**The most dangerous chemical is the one WITHOUT a label.**

- The most important label information is a single word indicating how hazardous the chemical is:

**“DANGER” -- “WARNING” -- “CAUTION”**

- Labels provide information on:

▪ Chemical name and chemical ingredients	▪ Protective equipment needed
▪ Name, address, phone number of manufacturer	▪ First aid instructions
▪ If product is flammable, reactive or radioactive	▪ Proper storage, use and disposal
▪ Target organs that may be affected by use	▪ Type of fire extinguisher to use

# OSHA Hazard Communication Standard

- **The law requires that chemical manufacturers and importers:**
  - Communicate their findings by way of labels and Safety Data Sheets (SDS) for every product they manufacture and distribute.
  - Evaluate products and ascertain whether hazardous characteristics exist for anyone using their product.

# Safety Data Sheets (SDS)

## Hawai'i Pacific Health uses the SDS Fax-on-Demand Program

In case of chemical exposures or spills:

- Call: **1-800-451-8346**
- Provide the product name & manufacturer, and nearest fax machine number
- The SDS will be faxed to you

Access 3E's Healthcare SDS Database at:

- [www.3eonline.com](http://www.3eonline.com)
- To login: enter Username **HPACHLTH** and password **MSDS**
- Search by Product Name, Manufacturer, Chemical Name, CAS# (Chemical Abstract Services #)

# Safety Data Sheets (SDS)

## **Before you start any job you should:**

- Read product labels and SDS sheets
- Identify unsafe materials and choose the equipment needed to safely work with them
- Never mix chemicals together unless specifically instructed to do so
- Always follow facility procedures and know the steps to take in an emergency
- Ask questions

## **RIGHT TO KNOW**

- You have the right to refuse to work with any material if your employer has NOT:
  - Supplied the SDS
  - Provided training and protective equipment needed
- You CANNOT be fired, disciplined or discriminated against for exercising your rights

# Safety Data Sheets (SDS)

## **SDS provides information on:**

- Chemical Name
- Ingredients that are hazardous
- Physical Characteristics
- Fire and Explosive Capability
- Reactivity to water or other chemicals
- Health Hazards
- Proper Storage, Use and Disposal
- Special Precautions or Protective Equipment needed

# MSDS = SDS

- OSHA is currently revising the Hazard Communication Standard and aligning with the Globally Harmonized System of Classification and labeling of Chemicals (GHS)

# MSDS = SDS

- ***What does this all Mean??***

- ***December 1, 2014*** – By this date, All Employees need to understand the change from MSDS to SDS and where to find information on the SDS, especially in section 2 where critical hazard information is located.
- ***June 1, 2015*** – By this date, chemical manufacturers and distributors should have completed their reclassification of chemicals and be shipping GHS formatted SDSs and labels with their shipments.
- ***December 1, 2015*** – Distributors have an additional 6 months beyond the June 1, 2015 date to pass along manufacturer labels and SDSs in the older formats.
- ***June 1, 2016*** – By this date employers should be fully compliant with HazCom 2012. That includes making any necessary updates to their HazCom program, training employees on any newly identified chemical hazards (identification of new hazards is likely during the reclassification process chemical manufacturers undertake), and updating safety data sheets libraries and secondary labels.

## Minimum Information for an SDS

	Heading	Subheading
1.	Identification	<p>(a) Product identifier used on the label;</p> <p>(b) Other means of identification;</p> <p>(c) Recommended use of the chemical and restrictions on use;</p> <p>(d) Name, address, and telephone number of the chemical manufacturer, importer, or other responsible party;</p> <p>(e) Emergency phone number.</p>
2.	Hazard(s) identification	<p>(a) Classification of the chemical in accordance with paragraph (d) of §1910.1200;</p> <p>(b) Signal word, hazard statement(s), symbol(s) and precautionary statement(s) in accordance with paragraph (f) of §1910.1200. (Hazard symbols may be provided as graphical reproductions in black and white or the name of the symbol, e.g., flame, skull and crossbones);</p> <p>(c) Describe any hazards not otherwise classified that have been identified during the classification process;</p> <p>(d) Where an ingredient with unknown acute toxicity is used in a mixture at a concentration = 1% and the mixture is not classified based on testing of the mixture as a whole, a statement that X% of the mixture consists of ingredient(s) of unknown acute toxicity is required.</p>
3.	Composition/ information on ingredients	<p>Except as provided for in paragraph (i) of §1910.1200 on trade secrets:</p> <p><b>For Substances</b></p> <p>(a) Chemical name;</p> <p>(b) Common name and synonyms;</p> <p>(c) CAS number and other unique identifiers;</p> <p>(d) Impurities and stabilizing additives which are themselves classified and which contribute to the classification of the substance.</p> <p><b>For Mixtures</b></p> <p>In addition to the information required for substances:</p> <p>(a) The chemical name and concentration (exact percentage) or concentration ranges of all ingredients which are classified as health hazards in accordance with paragraph (d) of §1910.1200 and</p> <p>(1) are present above their cut-off/concentration limits; or</p> <p>(2) present a health risk below the cut-off/concentration limits.</p> <p>(b) The concentration (exact percentage) shall be specified unless a trade secret claim is made in accordance with paragraph (i) of §1910.1200, when there is batch-to-batch variability in the production of a mixture, or for a group of substantially similar mixtures (See A.0.5.1.2) with similar chemical composition. In these cases, concentration ranges may be used.</p> <p><b>For All Chemicals Where a Trade Secret is Claimed</b></p> <p>Where a trade secret is claimed in accordance with paragraph (i) of §1910.1200, a statement that the specific chemical identity and/or exact percentage (concentration) of composition has been withheld as a trade secret is required.</p>



4.	<b>First-aid measures</b>	<p>(a) Description of necessary measures, subdivided according to the different routes of exposure, i.e., inhalation, skin and eye contact, and ingestion;</p> <p>(b) Most important symptoms/effects, acute and delayed.</p> <p>(c) Indication of immediate medical attention and special treatment needed, if necessary.</p>
5.	<b>Fire-fighting measures</b>	<p>(a) Suitable (and unsuitable) extinguishing media.</p> <p>(b) Specific hazards arising from the chemical (e.g., nature of any hazardous combustion products).</p> <p>(c) Special protective equipment and precautions for fire-fighters.</p>
6.	<b>Accidental release measures</b>	<p>(a) Personal precautions, protective equipment, and emergency procedures.</p> <p>(b) Methods and materials for containment and cleaning up.</p>
7.	<b>Handling and storage</b>	<p>(a) Precautions for safe handling.</p> <p>(b) Conditions for safe storage, including any incompatibilities.</p>
8.	<b>Exposure controls/personal protection</b>	<p>(a) OSHA permissible exposure limit (PEL), American Conference of Governmental Industrial Hygienists (ACGIH) Threshold Limit Value (TLV), and any other exposure limit used or recommended by the chemical manufacturer, importer, or employer preparing the safety data sheet, where available.</p> <p>(b) Appropriate engineering controls.</p> <p>(c) Individual protection measures, such as personal protective equipment.</p>
9.	<b>Physical and chemical properties</b>	<p>(a) Appearance (physical state, color, etc.);</p> <p>(b) Odor;</p> <p>(c) Odor threshold;</p> <p>(d) pH;</p> <p>(e) Melting point/freezing point;</p> <p>(f) Initial boiling point and boiling range;</p> <p>(g) Flash point;</p> <p>(h) Evaporation rate;</p> <p>(i) Flammability (solid, gas);</p> <p>(j) Upper/lower flammability or explosive limits;</p> <p>(k) Vapor pressure;</p> <p>(l) Vapor density;</p> <p>(m) Relative density;</p> <p>(n) Solubility(ies);</p> <p>(o) Partition coefficient: n-octanol/water;</p> <p>(p) Auto-ignition temperature;</p> <p>(q) Decomposition temperature;</p> <p>(r) Viscosity.</p>
10.	<b>Stability and reactivity</b>	<p>(a) Reactivity;</p> <p>(b) Chemical stability;</p> <p>(c) Possibility of hazardous reactions;</p> <p>(d) Conditions to avoid (e.g., static discharge, shock, or vibration);</p> <p>(e) Incompatible materials;</p> <p>(f) Hazardous decomposition products.</p>

11.	<b>Toxicological information</b>	<p>Description of the various toxicological (health) effects and the available data used to identify those effects, including:</p> <ul style="list-style-type: none"> <li>(a) Information on the likely routes of exposure (inhalation, ingestion, skin and eye contact);</li> <li>(b) Symptoms related to the physical, chemical and toxicological characteristics;</li> <li>(c) Delayed and immediate effects and also chronic effects from short- and long-term exposure;</li> <li>(d) Numerical measures of toxicity (such as acute toxicity estimates).</li> </ul> <p>(e) Whether the hazardous chemical is listed in the National Toxicology Program (NTP) Report on Carcinogens (latest edition) or has been found to be a potential carcinogen in the International Agency for Research on Cancer (IARC) Monographs (latest edition), or by OSHA.</p>
12.	<b>Ecological information (Non-mandatory)</b>	<ul style="list-style-type: none"> <li>(a) Ecotoxicity (aquatic and terrestrial, where available);</li> <li>(b) Persistence and degradability;</li> <li>(c) Bioaccumulative potential;</li> <li>(d) Mobility in soil;</li> <li>(e) Other adverse effects (such as hazardous to the ozone layer).</li> </ul>
13.	<b>Disposal considerations (Non-mandatory)</b>	Description of waste residues and information on their safe handling and methods of disposal, including the disposal of any contaminated packaging.
14.	<b>Transport information (Non-mandatory)</b>	<ul style="list-style-type: none"> <li>(a) UN number;</li> <li>(b) UN proper shipping name;</li> <li>(c) Transport hazard class(es);</li> <li>(d) Packing group, if applicable;</li> <li>(e) Environmental hazards (e.g., Marine pollutant (Yes/No));</li> <li>(f) Transport in bulk (according to Annex II of MARPOL 73/78 and the IBC Code);</li> <li>(g) Special precautions which a user needs to be aware of, or needs to comply with, in connection with transport or conveyance either within or outside their premises.</li> </ul>
15.	<b>Regulatory information (Non-mandatory)</b>	Safety, health and environmental regulations specific for the product in question.
16.	<b>Other information, including date of preparation or last revision</b>	The date of preparation of the SDS or the last change to it.

# Security Management

- **Hawai'i Pacific Health strives to provide a safe and secure environment and to reduce the probability of harmful incidents.**

## BASIC GUIDELINES:

- **Always be alert** - you are the eyes and ears of the hospital.
- **Always wear your identification badge** - question persons without ID badges or contact Security.
- **Report all incidents** - no matter how small. This helps us to make changes as needed.
- **Know the emergency codes and alarms** - e.g., Code Gray (Security Alert), Code Pink (Infant or Pediatric Abduction/Missing Person), and the locations of panic alarms in your area.

# Workplace Violence

- **Workplace violence is any act or threat of physical violence, harassment, intimidation or other threatening disruptive behavior that occurs at the work site (as defined by OSHA).**
- **Concerns should be raised when a person:**
  - Exhibits emotional instability or violent behavior.
  - Exhibits signs of extreme stress or anger with no outlets.
  - Undergoes profound personality changes.
  - Makes threat or alludes to acts of workplace violence.
  - Exhibits signs of extreme paranoia, depression or suicidal thoughts.
  - Displays excessive reactions to hospital policies.
  - Displays inappropriate behavior at any time.
  - Exhibits signs of drug or alcohol abuse.
  - Demonstrates any disruptive behavior.

# Workplace Violence

**Hawai'i Pacific Health has a zero-tolerance to workplace violence.**

**Anyone of any age, gender, ethnicity, tenure, background or position may commit an act of violence.**

The following are prohibited, not permitted and not tolerated:

- Firearms, illegal weapons on property owned or lease are prohibited.
- Weapons in desks, lockers, or personal belongings on premises are not permitted.
- Disruptive behavior that could be interpreted as a threat will not be tolerated. A threat is considered, but not limited to, any statement or action by an individual that constitutes a clear and present and/or future danger to a patient, visitor, employee, physician or property.
- Should a threat or fear of harm occur, contact Security immediately.

# Harassment is Prohibited

- Harassment includes any unwelcome verbal or physical conduct which:
  - Affects job status;
  - Harasses, disrupts or interferes with work performance
  - Creates an intimidating, offensive or hostile work environment
- Harassing conduct is regarded as particularly serious when it is based on an individual's “protected category”
  - Protected categories include any characteristic protected by state or federal law.
  - Ex: race, color, religion, national origin, ancestry, citizenship, sex, age, physical or mental disability, sexual orientation, etc.

# Harassment is Prohibited

## **Hawai'i Pacific Health prohibits any form of harassment.**

- Report all incidents immediately to your supervisor, Human Resources, or Corporate Compliance. All reported incidents to resolve complaints of harassment will be investigated and dealt with.
- Harassment can occur in a variety of circumstances, including but not limited to the following:
  - The victim as well as the harasser may be a man or a woman. The victim does not have to be of the opposite sex.
  - The harasser can be the victim's supervisor, an agent of the employer, a supervisor in another area, a co-worker, or a non-employee.
  - The victim does not have to be the person harassed but could be anyone affected by the offensive conduct.
  - Harassment may occur without economic injury to or discharge of the victim.
  - The harasser's conduct must be unwelcome.
- It is helpful for the victim to directly inform the harasser that the conduct is unwelcome and must stop.

# Utilities Management

**The Utilities Management program helps to assure the operational reliability of the utility systems.**

- The program also covers the response to failures of the utility systems which support patient care environment.
- The utility systems include:

Electrical Distribution	Elevators	Air Conditioning
Hot/Cold Water Distribution	Sewage Removal Systems	Steam Distribution
Medical Gas Systems	Medical Vacuum Systems	Telephone Systems
Nurse Call	Pneumatic Tube System	



# Utilities Management

**Utility system problems, failures and user errors should be reported immediately to your supervisor and Facilities/Plant Operations for investigation and follow up.**

- The location and use of emergency shutoff controls should be reviewed with your supervisor.

## Basic Staff Response

Facility	Hospital Operator	Facilities/Plant Ops	Security
Pali Momi Medical Center	“0”	485-4666	485-4390
Kapi‘olani Medical Center for Women & Children		983-8397	983-6011
Straub Clinic & Hospital		529-4960	522-4064
Wilcox and Kaua‘i Medical Clinic		245-1146	245-1050

# Systems Failure: Basic Staff Response

Systems Failure	Problem	Contact	Responsibility of User
Air Conditioning	System Down	Facilities/Plant Ops (Hospital Operator)	Use Portable fans.
Electrical Power Failure Emergency Generators Work	Many lights are out. Only RED outlets work.	Facilities/Plant Ops (Hospital Operator)	Ensure that life support systems are on emergency power (red outlets). Ventilate patient by hand as necessary. Complete cases in progress ASAP. Use flashlights.
Electrical Power Failure – Total or Partial	Failure of all electrical systems	Facilities/Plant Ops (Hospital Operator)	Utilize flashlights and lanterns, hand ventilate patients, manually regulate IVs, don't start new cases.
Elevator Out of Service	All vertical movement will have to be by stairwells	Facilities/Plant Ops (Hospital Operator)	Review fire and evacuation plans, establish services on first or second floor, use carry teams to move critical patients and equipment to other floors.

# Systems Failure:

## Basic Staff Response

Systems Failure	Problem	Contact	Responsibility of User
Elevator Stopped between Floors	Elevator alarm bell sounding	Facilities/Plant Ops (Hospital Operator)	Keep verbal contact with personnel still in elevator and let them know help is on its way. Do NOT attempt to rescue passengers.
Fire Alarm System	No fire alarm or sprinklers	Facilities/Plant Ops (Hospital Operator)	Institute Fire Watch, minimize fire hazards, use phone or runners to report fire.
Sewer Stoppage	Drains backing up	Facilities/Plant Ops (Hospital Operator)	Do not flush toilets; use red bags in toilets
Telephones	No phone service	Hospital Operator	Use overhead paging, emergency phones, pay phones, use runners as needed.
Water	Sinks and toilets inoperative	Facilities/Plant Ops (Hospital Operator)	Institute Fire Watch; conserve water, use bottled water for drinking. Be sure to turn off water in sinks, use RED bags in toilet.

# Pneumatic Tube System

**Please review the following information ONLY if your facility uses a Pneumatic Tube System.**

- **The pneumatic tube system is a computerized information transport system.**
- There are several such computerized stations located throughout the hospital. Please refer to the following manuals and policies and procedures on proper use of this stem.
  - Translogic Pneumatic Tube System Manual
  - Translogic (vendor authored)
  - CTS (Computerized Tube System) Guidelines

# Pneumatic Tube System

**Please review the following information ONLY if your facility uses a Pneumatic Tube System.**

**Should any spills or problems occur with the pneumatic tube system:**

- Shut down your system right away by pressing:
  - Special Function
  - 91
  - “Enter” on the control panel at your station
- Immediately after, call the Facilities/Plant Operations Department through the operator.

# Environment of Care Web Site

- To access more information and resources regarding the Environment of Care Program at Hawai'i Pacific Health and/or your hospital facility, go to your facility's intranet home page, click Environment of Care.
- This site includes important information regarding policies & procedures, documents, resources, a calendar of events, announcements, etc.

# The Safe Handling of Trash and Patient Protected Health Information

- You are being asked to complete this HLC module to provide you with the information you need to keep yourself, your co-workers and your patients safe:
  - when handling the disposal of biohazard materials
  - when disposing of red bagged items, empty red bags, and red sharps box items
  - when disposing of any items containing patient protected health information

# Biohazard Waste/**Red Bag** Disposal

Biohazard waste is any waste contaminated with potentially infectious agents or materials that may pose a threat to public health or the environment.

The following substances/items must be placed in a red biohazard bag and then placed in the Red Trash Bin.

- Blood
- Blood Tubing/Bag
- Bloody Dressing
- Potentially Infectious Material
- Container or Bag with a Biohazard Sticker or Emblem (even if unused)



**\*Do not place any **red bags** or containers/bags with biohazard stickers or emblems (even if un-used) in the regular trash containers.**



# Sharps Disposal

Biohazard Waste that has the potential to puncture skin must be placed in sharps disposal containers.

- Needles
- Blades
- Scalpel
- Razor
- Pins/Clips
- Trocars
- Tubex/Carpject
- Introducers
- Guidewires
- Specimen Device in Endoscopy
- Staples
- Syringes (with needle)

\*Glass beverage containers are **not** biohazardous



**\*Do not place sharps containers, even if empty, in the regular trash containers.**

# Patient Protected Health Information

Patient protected health information (PHI) is individually identifiable information including but not limited to: name, birthdate, address, SS#, phone number, and MRN.

## *Examples:*

- *Any labels* with patient information (encounter, address, medication, specimen, etc.)
- Lab slips/requisitions
- ID Bands
- Nurse Reports/Surgery Schedules

# Disposal of PHI

- Disposal of PHI must be completed in one of the following ways:
  - Placed in Access shred bins
  - Blacked out with marker
  - Perforated pharmacy medication labels peeled away

\*Legible PHI items **MUST NOT** be placed in **ANY** trash containers.

# Failure to Comply

- Our organization can be fined and vendors can refuse to pick up our waste.
- Individuals found to be in violation of improperly disposing of biohazard waste and/or patient information can be:
  - Subject to progressive discipline up to and including termination of employment
  - Held personally liable with fines and possible imprisonment

# Summary

## Remember:

- Know who your facility's Safety Office is.
- SMDA (Safe Medical Devices Act) requires you to notify your supervisor (or the supervisor on duty) immediately after an incident that involved a device that caused or contributed to the death, serious illness or serious injury of a patient.
- Common signs and symptoms of musculoskeletal disorders include: decreased range of motion and grip strength; loss of muscle function; numbness or difficulty moving fingers; stiff joints; and back pain.
- Before using medical equipment, confirm the following: 1) The Inspection sticker is not over due. 2) The power plug is not damaged (missing prongs).
- Be aware of Radiation Warning signs that contain the three-bladed Radiation Symbol and a description of the hazard.

# Summary

- Safety Data Sheets (SDS) can be retrieved at:
  - Fax-on-demand at 1-800-451-8346 -or-
  - Online at [www.3eonline.com](http://www.3eonline.com)
- In the case of a utility system failure at your facility, report it immediately to your supervisor and Plant Operations/Facilities for investigation and follow up.
- Workplace violence is any act or statement that causes harm, or fear of harm and is related to a person's employment. Respond to violence by getting yourself and others to safety. Alert others in the area and call the hospital operator (or have someone else call) by dialing x500.
- All employees should know the Harassment Policy. Employees who experience or see harassment, should report the incident.