General Hospital Safety

2016 Version

Intended for all new and current Associates of St. Elizabeth Healthcare
Content Expert:

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If you have other questions feel free to contact me at:

301-2924
After completing this educational module, the learner should be able to:

☑ Describe the fire plan and fire extinguisher use.
☑ Review daily hallway maintenance related to fire safety.
☑ List emergency response procedures.
☑ Distinguish key points of disposal of regular and hazardous waste.
☑ Recall measures to take in the event of a utility failure.
☑ Explain safety measures related to oxygen and other medical gases.
☑ Discuss Associate responsibility regarding equipment safety.
☑ Discuss hospital measures regarding security.
☑ Recognize and explain emergency codes.
☑ Recall 3 key points of MRI safety.
Before you consider fighting a fire.....
- Determine whether a fire is small and not spreading
- Confirm you have a safe exit path
- First defense is your fire extinguisher
- Assist any person in immediate danger without risk to self

<table>
<thead>
<tr>
<th>CLASSES OF FIRES</th>
<th>TYPES OF FIRES</th>
<th>PICTURE SYMBOL</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Wood, paper, cloth, trash &amp; other ordinary materials.</td>
<td>![Symbol]</td>
</tr>
<tr>
<td>B</td>
<td>Gasoline, oil, paint and other flammable liquids.</td>
<td>![Symbol]</td>
</tr>
<tr>
<td>C</td>
<td>May be used on fires involving live electrical equipment without danger to the operator.</td>
<td>![Symbol]</td>
</tr>
<tr>
<td>D</td>
<td>Combustible metals and combustible metal alloys.</td>
<td>![Symbol]</td>
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</tbody>
</table>
Most Common Types of Fire Extinguishers

Water APW-(Air Pressurized Water Mist)

- Filled with deionized water & pressurized air. Large squirt guns.
- Designed for class A & C fires. (Wood, paper, cloth, electrical)
- Takes away the “Heat” element.
- Can be found in specialty areas of hospital
- Do not use on liquid (fire could spread) or electrical fires unless the electrical source can be disconnected. Ex: Computer unplugged from outlet.
- Used in Operating Room and Lab.
- Only Mist extinguishers labeled MRI safe may be used in MRI unit due to Magnet in use.
Class ABC Fires

- Coats the fire with a thin layer of dust (yellow powder).
- Separates the fuel from “oxygen.”
- Greatest portion of powder is monoammonium phosphate.
- Pressurized with nitrogen.
- Dry chemical come in a variety of fire extinguishers – ABC, BC, & DC.
- IMPORTANT!!! Know what type of fire extinguisher is in your area.
- Red ABC fire extinguishers are used in almost all areas throughout the hospital.
**Fire Plan**

Any associate who detects smoke and/or flames of any type must take immediate action.

**R - Rescue** – Rescue/relocate all people in immediate danger from the fire

**A - Alert** – Activate the nearest alarm. Alert all people in the area.

**C - Confine/Contain the Fire & Smoke** – Close all doors and windows. Shut off oxygen (Nurse Manager, Respiratory Supervisor or designee).

**E - Extinguish** the fire if possible. **Evacuate** the area as instructed. **E** can also mean **Escape**.

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**Edgewood, Florence, Fort Thomas**

- Dial 22222
- Report a Code Red
- State your name and the location of the fire

**Covington, Grant Co, & Outside Facilities**

- Dial 911
- State your name & location of the fire
To Use the Extinguisher – P.A.S.S.

- **P**ull pin – Allows discharge.
- **A**im at base of fire. Don’t aim at flames.
- **S**queeze handle.
- **S**weep side to side from a distance of 10 feet, slowing moving forward.

Stand 10 feet away walk towards the fire sweeping side to side.

Pull pin – Allows discharge.
Aim – Hit the base, hit the fuel. Don’t aim at flames.
Squeeze- Release the pressure.
Sweep- Side to side from a distance of 10 feet, slowing moving forward.
Evacuation

▶ In the event of a Fire- We shelter in place but.....

▶ Evacuation will be ordered if:
  ▶ The fire cannot be controlled, or patients, visitors and employees are in immediate danger
  ▶ Two types of evacuation:
    ▶ Lateral - Evacuation through smoke/fire barrier doors to a safe area on the same floor
    ▶ Vertical - Evacuation of all occupants on a floor to another safe floor
  ▶ Evacuate patients nearest the fire first. If leaving the floor, evacuate patients in the following order:
    ▶ Ambulatory patients
    ▶ Wheelchair patients
    ▶ Bedfast patients

KNOW YOUR DEPARTMENT’S EVACUATION PLAN BEFORE YOU NEED TO USE IT!!!!
Fire Safety

- Fire alarm pull stations near exits and stairwells.
- **Never** obstruct the view of fire alarm pulls or fire extinguishers.
- Be aware of your surrounding and remove any item blocking the view of fire alarms/fire extinguishers. (Nothing can be adhered to a fire door.)
- When a fire alarm pull station is activated…
  - The fire alarm will sound
  - Fire doors will close (do not place anything near doors/emergency exit doors that would block them)
  - Strobe lights are activated
Fire Safety

**Daily Hallway Maintenance**

- All hallways must have 8 ft. of egress at all times.
- Equipment left unattended for more than 30 mins. is considered storage and must be removed.
- Doors cannot be propped open unless they are held open by authorized method such as a magnet hold (no door stops that slide under the door).
- Items placed on walls cannot extend more than 6” from wall
  - Must be approved
  - Must be hung in an approved way

Do Not Prop Open Doors
Fire Safety-18 inch Clearance Rule

Storage Clearance for Proper Sprinkler Functioning

- Storage must be kept at least 18 inches below the bottom of the sprinkler head.
- Shelving and items stored on top of shelving can extend to the ceiling if the shelving is against a wall that goes to the ceiling, and there are no sprinkler heads located directly above the shelving.

Examples of Proper Clearance

CAUTION
STORAGE MUST BE 18 INCHES BELOW SPRINKLERS
Fire Drills

- Provide practice and critique of our Fire Training & Response
- Occur on an unannounced basis
- Promotes targeted efforts to strengthen preparedness
- Identify strengths and weaknesses
- Are required by The Joint Commission and require full participation

Fire Drills prepare you for an actual event. If in doubt, this is the time to ask questions??

Can we use elevators?
The Edgewood Facility fire alarms are activated by department (the department is the zone). The fire alarm only rings where the problem occurs. Ex: If a fire alarm were activated on the 5th floor, the elevator would still work unless they are in alarm. All other elevators and floors would work as normal.

At the other facilities, they have a general alarm and everyone needs to respond. The elevators would not work until cleared by the fire department.
Know “your” Department Emergency and evacuation plan before you need to use it!

Know where the fire pulls and extinguishers are located.

Know RACE & PASS

Emergency Plans
Located on the Intranet Policies/procedures under Catalog/Emergency Plans
Fire Safety Management Plan
Located on the Intranet
Policies/Procedures under
Catalog/Safety/EC Plans
Hazardous Waste Disposal

- When necessary to dispose of any chemical/chemical containers, first review the SDS for instructions.
- If not clearly outlined on the SDS, contact your supervisor and/or Safety Officer to insure proper disposal.

- Biohazard symbol indicates item contains and/or soiled with blood or body fluids.
- Also referred to as “Infectious waste.”
- If an exposure to infectious waste occurs, immediately contact your supervisor and Employee Health.
- Infection Control Manual is located on the Intranet/Policies & Procedures/Catalog/Infection Control Manuals.

Blood/body fluids

Chemo only
Hazardous Waste  ------  Universal Precautions

Yellow bags are used for CHEMO waste “ONLY”

**Example:**
- Gowns
- Gloves
- Goggles
- Wipes
- Empty IVs & Tubings

**NOT-Linen**

Universal Precautions are used when handling all Linen that comes in contact with a patient.

All soiled Linens are handled with Universal Precautions

All Linen visibly soiled, (example blood, stool) goes into a blue linen bag and sent to laundry.
**Biohazard Waste versus General Waste**

**Infectious Waste Disposal**
(red biohazard waste bags)
- Items saturated with blood/OPIM that may drip or release contents when held vertical, squeezed or compacted.
- Containers of blood/OPIM body fluids that cannot be safely emptied or are not designed to be emptied (i.e., chest drainage systems).
- Blood bags & tubing.
- Dialysis waste containing blood/OPIM.
- Unfixed human tissue or organs.
- Laboratory biological waste.

**General Waste Disposal**
- Paper, plastic, glass.
- Food.
- Blue pads.
- Items such as diapers containing urine, feces, gastric contents.
- Sanitary napkins.
- emptied urinary drainage bags.
- Vials of saline/sterile water.
- Emptied and rinsed containers that held any body fluids.

**Infectious Waste disposal costs more than 10 times that of regular trash.**
**Red Bag Waste:** Blood, Other Potentially Infectious Material, Items with Caked or Dried Blood, or Items with Visible Blood Contamination dispose of in biohazard containers.

**Empty Sharps:** Needles, Syringes, Scalpels, Culture Slides, Culture Dishes, Broken Capillary Tubes, Broken Rigid Plastic, Exposed Ends of Dental Wires dispose of in red sharps containers.

**Narcotics:** Scheduled Drugs, Controlled Substances, DEA Controlled Items dispose of according to current hospital policy.

**Plain IV Solutions:** Lactated Ringers, Dextrose, Saline, Potassium, Electrolytes, Sodium Bicarbonate dispose of in the sanitary sewer.
# Healthcare RX Waste Stream Management

## Labeled / Identified Hazardous by Pharmacy

<table>
<thead>
<tr>
<th>Sort Code</th>
<th>No Code</th>
<th>BKC or PBKC</th>
<th>SP, SPO, SPC</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Non-Hazardous Rx Waste</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All Rx wastes without a code default to the blue container. Any waste with the potential to leak must be placed in a Ziptop bag. It is not permitted by the DOT to transport free fluids.</td>
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<tr>
<td><strong>Examples of Non-RCRA Waste:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Antibiotics</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>- Tylenol</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Aspirin</td>
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<td></td>
<td></td>
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<tr>
<td>- IV's with medication left. Keep tubing attached and place in Ziptop bag.</td>
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<td></td>
<td></td>
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<tr>
<td>- Creams ointments cramped or in Ziptop bag</td>
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<td></td>
<td></td>
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<tr>
<td>- Media soaked in sponges or paper towel placed in Ziptop bag</td>
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<td></td>
<td></td>
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<tr>
<td>- PIL's &amp; tablets</td>
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<td></td>
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<tr>
<td>- Vials with medication</td>
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<td></td>
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</tbody>
</table>

## Hazardous Rx Waste

| **2 Gallon Black Sharps Container** | | | |
| Syringe, ampoule or sharp with medication left (bulk), with or without a needle | | | |
| - It not controlled substance | | | |

| **PBKC (extra hazardous)** | | | |
| Capture empty packaging for this waste stream. | | | |
| - Nicotine / Nicotrol | | | |
| - Coughcold / Warfarin | | | |

## Incompatible Hazardous waste

| **Chemotherapy Rx Waste** | | | |
| | | | |
| | | | |

## Chemotherapy Rx Waste

| **BULK** | **TRACE** | **Items that can be cut and poured down the drain:** | | |
| - Chemotherapy Agents | - Empty Vials | - Needles | | |
| - IV's with Residual Chemotherapy Agents | - Empty Syringes | - Empty Syringes | | |
| - Chemotherapy Spill Cleanup Debris | - Gloves | - Gloves | | |
| - Containers with Residual Chemotherapy Agents | - Goggles | - Goggles | | |
| - Tablets | - Wipes | - Wipes | | |

## Maintenance IV Solutions (No Medications)

| **Sharps / Infectious Waste** | | | |
| | | | |
| | | | |

## Bag and Send Back to Pharmacy

| **NO CONTROLLED SUBSTANCES** -- in any of the above containers. | | | |
| **NO SHARPS** -- except 2 Gallon Hazardous Sharps or Red Containers. | | | |
Utility Failure

Water – Emergency water is available
- All employees & patients should conserve water
- Water containers distributed
- If outage long, bottled water supplied for drinking &
  plant engineering personnel will distribute containers of
  water used for basic sanitary purposes
- Some systems that require water will shut down
  - Central heat & air
  - Ice machines & other water dependent machines

Ventilation
- Failures usually due to a component of system versus
  entire system failure
- Notify Plant Engineering so repairs are made promptly
Utility Failure

Electricity

Loss of Normal Power resulting in Emergency Generator Power

Emergency Power /on site system generators that provide backup electric utility source

Keep in Mind

- Red plugs & light switches/red colored cover plates on outlets indicate outlets & lights on emergency power. (However, at Grant County all outlets are on emergency power. Plugs & switches are not color coded).
- All equipment on emergency power will have a 10 second interruption from outage.
- Disconnect or turn off all unnecessary electrical items.
- You must be prepared to deliver critical patient care.
- When power is restored, gradually turn on needed equipment.
- If equipment not running or operating properly, call Plant Engineering.
## Oxygen Safety

### Oxygen/Other Medical Gases
- Supplied from Central locations/Warehouse
- Know where the shut offs are in your area
  - Must not be blocked
  - Must be accessible
  - Usually near nurses station
  - It is the responsibility of the Nurse Manager, Respiratory supervisor or designee to see shut off valve is turned off in a fire situation
- Contact Plant Engineering if failure occurs

### Oxygen cylinder Safety
- Should be safely stored with valves closed, in a carrier or rack (No more than 12 full cylinders in a smoke compartment, including wheelchairs & stretchers)
- Damaged tank can act like a rocket or missile
- O2 cylinders on wheelchairs or stretchers are considered working stock unless they sit longer than 30 minutes
- O2 cylinders must be stored in racks, not lying on floor, beds or hanging from hook.
Clinical Engineering provides support to all departments that use medical, clinical, therapeutic and diagnostic imaging equipment.

- Medical Equipment that malfunctions/fails must be removed from service and reported to Clinical Engineering.

- Emergency services are provided 7 days a week/24 hours a day by calling 301-2439 or ext. 12439
Clinical Engineering Services

Clinical Engineering Department
QA/PM Inspection Completed
Expires: _________________
If expired, contact Clinical Engineering

If the date on the label is expired
**Discontinue use** and contact Clinical Engineering.

Scheduled QA/PM not required
For service, contact Clinical Engineering

Clinical Engineering maintains an inventory of all medical equipment. Items that are not inspected on a regular basis will have this label.

Clinical Engineering confirms the operational & electrical safety of all medical equipment (demo, loaner, rental) brought into the medical center. This label indicates that the confirmation has been performed. The label should not be removed until the equipment has left the medical center.

Electrical Safety Testing Passed
Medical device malfunctions which result/or resulted in patient injury, serious illness or death, must be reported to supervision, risk management & Clinical Engineering.

For more information see “Investigation and Reporting of Incidents Involving Medical Devices” – Risk Management Policy.
SECURITY: St. Elizabeth Healthcare ID Badge

- Your badge must be worn at all times when working on SEH property.
- The ID badge identifies you as a member of the Healthcare system.
- In the event of bioterrorism or other mass disaster, you will not be able to gain access to any Healthcare system facilities without your ID Badge.
Security

Sensitive Areas

- Identify people before opening door/know who you are granting access
- Secure areas are equipped with panic alarms
- Know how to use panic alarms
- Some areas have circuit cameras/monitored by Security
- When accessing secure areas, make sure door closes securely behind you. This will not allow access by someone else.

Contact Security EXT 12270

- Call Immediately To Report:
  - Suspicious people
  - Fire/smoke (after activating fire alarm)
  - Vandalism
  - Assault
  - Theft/missing property
  - Disturbances
  - Any other event you consider security related

Number one security problem is unattended/unsecured property like purses!
Emergency Codes – **Code Blue**

**Code Blue**

**Do you know what to do?**

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**Cardiac or Respiratory Arrest (Adult or child)**

- Medical Emergency somewhere in the hospital.
- Dial 22222 - Activate the Code Blue button
- The location is sent via pager and phone msg. to the code team. This code is not announced.
- The Code management is addressed under **Mosby Skills- Code Management**
- Assist the Code team
- In non-hospital sites call 911
Code Red - An announcement that indicates a possible fire, smoke or condition exist that requires IMMEDIATE ACTION

- Dial 22222 – Report a code red. The location is announced with the code
- When a fire alarm is activated, this signals the switchboard & the Fire Department dispatcher

Follow R. A. C. E.
- R-Rescue, A-Alert, C-Contain (if possible),
  E-Extinguish, Evacuate or Escape

Fire Extinguisher use P.A.S.S. –
- P-Pull, A- Aim, S-Squeeze, S-Sweep

Elevators can be used at Edgewood if not in alarm. All other hospitals when cleared by the Fire Department.
Emergency Codes – *Code Pink*

**Infant/Child Abduction**
- St. Elizabeth has installed an infant alarm system to prevent infant abductions.
- Should a confirmed abduction occur, a “Code Pink” announcement will be made over the PA system.
- *During code pink, all available staff need to secure doors to exits and stairways and stay alert*
- Staff will follow the department plan as specified in their department section of the Disaster Plan.
- Non-Critical departments should have staff report any suspicious person/persons with infants/children or suspicious activity to Security immediately.
Weather Emergency – Tornado Watch

- National weather service or local TV station information indicates conditions in Kenton, Campbell, Boone or Grant County are capable of producing a tornado.
- Security will notify operator to make the announcement to activate the tornado watch. A computer screen will pop-up on all SEHC table computers with an alert to the weather condition.
- Monitor weather conditions for updates.
- Keep patients and visitors updated.
- Remain calm & alert for further information.
Weather Emergency – *Tornado Warning*

National weather service or local TV station has issued a tornado warning for Kenton, Campbell, Boone or Grant County. *A tornado has been sited.*

- Return to your department
- Close blinds and drapes for protection
- Cover patient with blankets/Turn bed away from windows
- Instruct ambulatory patients and visitors to take shelter in the bathroom
- Close all fire doors and unit doors
- If visitors-seek shelter in lower level hallway, keep them away from windows
- For personal safety, seek cover in areas such as med rooms, kitchen or interior spaces
- *“Do not transport patients to other areas during a tornado warning”*
- During shift change for personal protection associates should consider remaining in the building
An External Event involves an incident beyond the immediate boundaries of the hospital.
- Incidents resulting in a sudden arrival of a large number of casualties.
- Contaminated or contagious victims that seek emergency treatment.
- Other External Emergencies include snowstorms, utility outages, and tornadoes that may not impact the hospital directly, but impact the facility.
Emergency Codes – **Code Yellow**

** Exists when the hospital is expecting a large influx of casualties from community

- Security verifies information by contacting official agencies of the area.
- A Control Center for coordination of activity within the facilities will be activated which includes; contact with other area hospitals/community agencies within the disaster site if possible.
- All personnel should respond to their assigned hospital. Nursing staff may be recalled/called in as needed.
- Cancellation of Code Yellow will be announced by PBX operator as “ALL CLEAR.”
**Code Orange** is used to describe a hazardous spill of known or unknown substance

- Each product that is hazardous must have a SDS supplied by the manufacturer
- This document has a variety of information including: **How to handle spills**
- Should a spill occur, the SPIL plan should be followed
  - **S** - Secure the Area
  - **P** - Protect those in the immediate area from exposure
  - **I** - Inform others of the spill – **Call 22222**
  - **L** - Leave the clean-up to trained personnel
- The department using the spilled substance will clean it up.
Emergency Codes – **Code Armstrong**

- **Code Armstrong** – An announcement that staff is needed to respond to a hostile situation.
- **Call 22222**
- This may be activated in any area needing assistance.
- A Security officer and other assigned staff will respond to the area and provide needed support.
- Staff who have not been specifically trained to respond to a Code Armstrong should not attempt to intervene. This could escalate the situation and cause harm to self & others.
- When situation is under control an “All Clear” will be announced.

Security & trained personnel will respond
**Emergency Codes – Code Silver**

- **Code Silver** – Armed persons have been sighted.
- Employees identifying the situation should immediately go to a safe area and contact 22222.
- **Follow instructions provided by Security**
- If Code Silver is inside Hospital, Security will instruct operator to announce location of Incident.
- If evacuation of patients and visitors can be done safely by using the fire evacuation route, then every attempt should be made to do so.
- If patients & visitors cannot be safely evacuated, it will be necessary for staff to lock or close doors and shelter in place.
- Employees not in the immediate area shall shelter in place.
- When police arrive, staff will assist under their direction.
- **If a patient requires movement, police must be notified.**

Do NOT approach or attempt to disarm, contact security 12270.
“BOMB” Threat!

Information received from “any” source that an explosive device may be/or is, placed in a facility.

Information Gathering
Person receiving the threat should record as much data as possible
- Exact words of caller & time
- Sex of caller
- Speech traits
- Location of device
- Detonation time & type
- Background noises if discernible
- Look at display and write down phone number on screen/ask for help to retrieve phone number when caller hangs up

Notification – Call 22222. Offsite call 911
Person receiving the threat informs the Security Department who notifies operator to call the following
- Local police & fire, administrator on call, Director of Plant Engineering
- Other administrative personnel

Security
Notifies Nursing Supervisor who notifies all nursing units

“This information is not announced over the public address system, nor is any information given to an unauthorized person.”
Emergency Codes – **ALL CLEAR!**

- **All Clear** is announced to notify staff the emergency is over.

- **All Clear** announcements are not utilized for code blue.
MRI Safety – The Magnetic Field is ALWAYS ON- 
even during power failures!

- The Magnetic Field can cause 
  metal objects to fly into the 
  bore of the magnet with great 
  force and speed.

- This includes pacemakers and 
  implanted defibrillators

- The closer you are to the 
  Magnet, the stronger the field.

CAUTION: Always ask MRI staff for instructions