

Essentials

2020

Be Safe Today

Essentials 2020

- This is the 22st edition of Essentials, Winchester Hospital's annual review of key safety information.
- **Please review the materials, and answer the exercise questions by November 30, 2020.**

Dear Colleague,

It's that time again. Time to read our Essentials and to take the quiz that follows. Having read it I can attest that it's filled with valuable information to keep people safe: patients, co-workers, and you! We all need to participate. It's Essential!

Many thanks,

Rick

Rick Weiner MD

President

Winchester Hospital

Something Does Not Seem Right

Your safety is the most important thought you should have as you work. Being aware of who is in your work area and what they are doing helps to insure hospital-wide safety.

COVID -19 has changed the way we look at access to hospitals. In the past hospitals, during daytime hours, allowed open access for testing, procedures and visiting hours.

COVID risks now require tight access control.

Tailgating is the process when an **authorized** person enters a **secure area** and an **unauthorized** person enters behind them.

Sometimes a visitor or an employee enters a department by mistake.

If at times you “feel things just aren’t right.”
Trust your instincts.
Never ever hesitate to
STOP and ASK

What should you think about when a person is in your work area or hallway and seems out of place?

Does the person have a hospital badge?

Does the person have a COVID Screening sticker visible?

Does the person have a patient arm band on their wrist?

Does the person appear to be agitated or lost?

What does your “gut” say about the person?

What should I do?

Ask the person to please put on their badge.

Ask did they get COVID screened today.

Ask “ I notice you have an armband on, can I help you find where you need to go?”.

Ask a team member to go with you to chat with the person, if you have any concerns.

If the person creates a *fear response* in your “gut” call Security x2560 and move away from the person.

What if I call Security and there is no issue with the person I was concerned about?

The Security Officer will thank you for being aware of an unusual person in your work area and following your “gut”.

VIOLENT BEHAVIOR ACTIONS

- Keep your distance from an agitated person.
- Talk in a calm voice. Share that you are trying to help.
- Try to validate the person's feelings, even if you do not agree with them.
- Make the person aware that you bring no harm.
- Stay near a door so you can exit quickly.
- ***Never approach an agitated person alone or in an isolated part of the hospital***
- Call Security X2560 at the 1st sign of violence
- If situation is **out of control** call 3333 and report "Security Emergency" and location

Patient Belongings & Valuables

Steps to secure patient belongings & valuables:

1. Encourage patients to send items home
2. Take inventory and document all patient Belongings (Epic ***Patient Belongings*** flow sheets)
3. Label ALL patient belongings bags
4. Utilize the safe in registration for all valuables (wallets, \$\$)
5. Utilize over the bed signs to let the team know what belongings patients have with them
6. Upon discharge or unit transfer, document items were sent with the patient

Name:

**PLEASE HELP
KEEP TRACK OF MY:**

<input type="checkbox"/>		Dentures
<input type="checkbox"/>		Eye Glasses
<input type="checkbox"/>		Hearing Aids
<input type="checkbox"/>	Other:	

Securing Belongings

Be Sure to Properly Label ALL BAGS

Staff issue a Personal Belongings bag for each patient upon admission. Staff should affix an identification label or hand write patient's full name and MR# on each bag

Two types of patient belonging bags

- **GREEN patient belongings bag**
for large items
- **PINK patient belongings bag**
for smaller items



Encourage patients to take all items and belonging bags upon discharge

Patient Lost Valuables

DENTURES | EYE GLASSES | HEARING AIDS | PHONES



Lost items in a 6 month period of time:

iPhones, sets of dentures, hearing aids, eyeglasses, wallets with cash, jewelry and various clothing items.

Estimated losses for the year are on track to exceed: \$16,000

Items left behind:

More than 35 items left behind by patients during a 1 month period (August 2020) including clothing, shoes, cell chargers, eye glasses, and pillows. Half of items have No identifying patient information.

Armed Intruder

What should I do if I am confronted by a person looking to harm me with a weapon (handguns, rifles, knives, explosive devices, or anything else that is intended to be used to inflict bodily harm).

RUN

HIDE

FIGHT

Run

- You have the right to protect yourself from harm.
- Know where to run to.
- Where is the nearest exit?
- If an armed intruder is in your area your safety is most important.
- Go even if others choose to stay
- Help others to run if time allows
- Do not try to move injured people
- Call 911, when it is safe to do so
- Call 3333, state “Armed Intruder” and location

Hide

- If you cannot or choose not to run find a place to hide.
- Go in a room and lock the door
- Place a bed, desk, file cabinets in front of the door
- Turn off cell phone, pagers, lights and remain quiet
- Do not come out until you hear the overhead all clear

Fight

- If your life is at risk and you cannot run or hide then you must protect yourself in any way possible.
- Fight to save your life by yelling or throwing things at the intruder or trying to disarm or incapacitate the intruder by using available items such as IV poles, medication carts, fire extinguishers, books, telephones, stretchers etc. to save your life.



Fire/Smoke Issues



- Smoke doors at times do not latch, ceiling tiles break and other fire safety concerns exist.
- 92% of 41 Highland Ave building has sprinkler coverage. Fire risk is low.
- Know evacuation route in a fire.
- Sprinklers can not be blocked. Keep all items 18 inches below a sprinkler head.
- Do not block pull stations and extinguishers.

FIRE - RACE

- **In case of smoke/fire think RACE**
- **R = Rescue:** remove any person threatened by fire or smoke.
- **A = Alarm:** pull the fire alarm box and dial 3333 (Off-site call 911 or 9-911) report a Fire Emergency and give the location and description of the fire. For cell phones use 911 and say both the **Town and State** for your location, such as Woburn, MA)
- **C = Contain:** close doors and windows throughout the area. If the fire is on your unit or on the same floor as your unit, clear the corridors of equipment. If the fire is not on your floor, move equipment in the corridor to one side.
- **E = Extinguish:** if there is no personal danger, attempt to extinguish the fire.

How to use a Fire Extinguisher

While holding the extinguisher upright:

P – Pull out the pin between the two handles.

A – Aim the nozzle at the base of the fire.

S – Squeeze the handles together.

S – Sweep the extinguisher from side to side until the fire is out.

Safety Data Sheets - SDS

Safety Data Sheets (SDS) are documents that provide safety information about chemicals.

- To locate a SDS, please follow the steps below:
- 1. Obtain the name of the chemical/product, example PURELL
- 2. Go to the **WinNet** page
- 3. Go to **Tools & Resources**
- 4. Select **SDS Finder**
- 5. Select **MSDSonline Search** on the list on the left.
- 7. Type in the name of the chemical/product - **PURELL**
- 8. Select the specific chemical/product you would like to view
- 9. Print the Safety Data Sheet
- 10. Review safety actions needed when using the chemical

Protection from Radiation

- “X-ray in Use” sign **DO NOT ENTER.**
- Any container leaking radioactive materials is cleaned up by trained staff.
- Wear lead shielding with X-ray procedures, or if not directly assisting, stay at least six feet away.
- Wear disposable gloves when handling radioactive waste.
- Minimize time spent in a patient’s room receiving radionuclide therapy. Signs must be posted if a patient is receiving this therapy.
- If pregnant and your job involves radiation exposure, notify your supervisor.

Infant Abduction

- “Infant Abduction” is the Hospital’s code phrase for a possible infant or toddler abduction.
- Go to nearest exit and let no one in or out
- Stay at exit until you hear the all clear
- Look for any suspicious activity and report it to Security STAT.

Report All work-related injury

- Report injury to your **Supervisor** immediately.
- Fill out **Occupational Injury/Illness Report**.
- Tell Emergency Department/health care provider your **injury is work-related**. Medical bills will be paid by the hospital.
- If you are out of work, contact **Employee Health** immediately.
- **Follow the recommendations of your medical provider.**

STAR for SAFETY

When you are performing a task think STAR.

S – Stop (Pause 1-2 seconds)

T – Think (Am I doing it right?)

A – Act (Concentrate on the task then act)

R – Review (Self check to be sure the task was done correctly)

Patient Handling

Safe body mechanics alone is not enough to keep you safe from the demands of lifting, pushing, pulling and moving dependent patients.

- Overhead patient lifts and mobile safe patient handling equipment is used to reduce injury. The Safe Patient Handling policy (# 1659-CA) provides guidelines for staff.
- Evaluate the patient's mobility level prior to attempting to move them. If dependent, utilize the proper **safe patient handling equipment** for the task.
- Prepare bed to the **optimal height** and clear space to reduce obstructions and awkward postures.
- Get assistance and communicate with the patient and your team prior to the lift.
- Assistive lifting devices include overhead lifts, mobile patient lifts, stand assist devices, slide boards, slide sheets
- Use proper body mechanics when performing patient handling tasks.

Maintaining Your Workspace During the COVID-19 Outbreak

Maintaining a clean and hygienic workspace is important at all times and especially during the COVID-19 outbreak. Here are some things you can do to help keep everyone safe in the workplace.



Clean & Disinfect

- Clean surfaces you touch often such as tables, doorknobs, counters and phones with soap and water or a household cleaner.

Desk Phones

- Wipe down the entire phone, including ear and mouth piece, keypad, wires, cables and the surface below the unit.

Mobile Phones

- For instructions on how to disinfect your mobile devices, visit the manufacturer's website.

Computers

- Wipe down your computer mouse, keyboard and the surface below them.
- Add wipeable covers to electronics such as:
 - Tablets
 - Touch screens
 - Keyboards
 - Remote controls



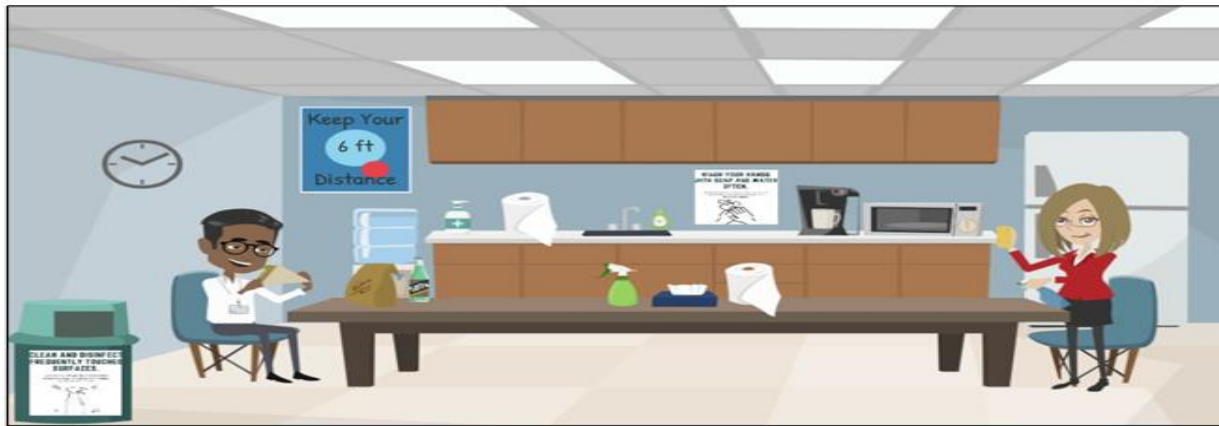
Hand Hygiene

- Wash your hands often with soap and water for 20 seconds. Always wash immediately after removing gloves and after contact with a person who is sick.
 - Hand sanitizer: If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol.
- Make sure to always wash your hands:
 - After blowing your nose, coughing or sneezing
 - After being outside
 - After using the restroom
 - Before eating or preparing food



Practice Social Distancing

- The Centers for Disease Control and Prevention (CDC) recommend keeping at least six feet of space between you and others. Be sure to do this in:
 - Elevators
 - Break rooms
 - Documentation rooms
 - Other common spaces

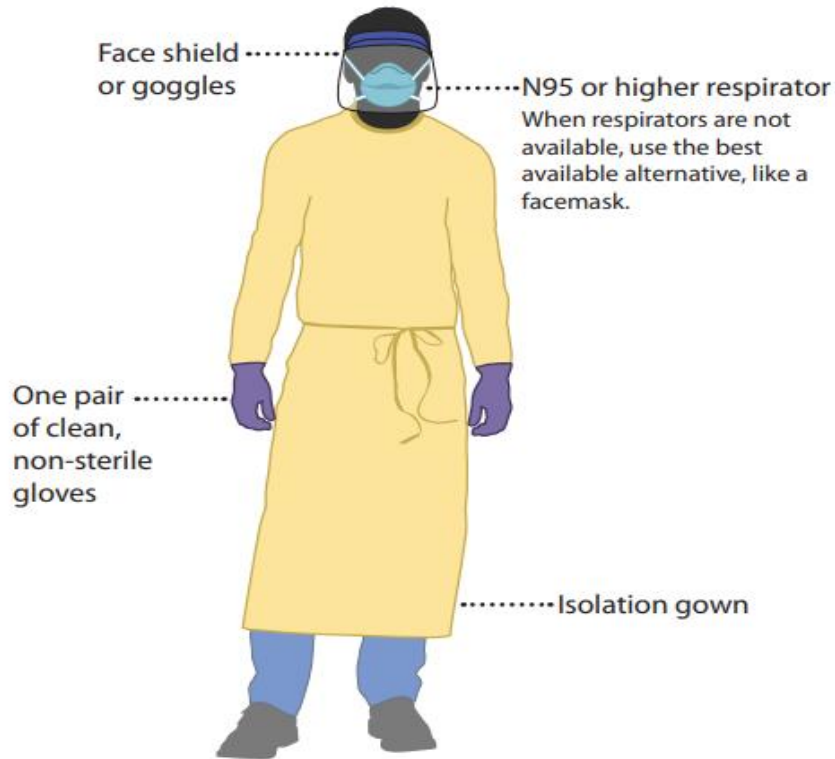


Staff Lounge/Breakroom/Eating Area

- **Only a certain amount people/person can be in the space when eating, while droplet/surgical mask are off. Unmasked staff must remain at least 6 feet apart. If more than the allotted amounts of staff are in the breakroom, others must remain masked.**
- **Employee breaks and meal periods should be staggered whenever feasible to limit the number of employees in communal spaces at one time.**
- **Please consider alternative space: cafeteria, coffee shop, third floor patio and various other outside tables, weather permitting**
- **Clean eating space before and after eating with disinfecting spray/wipe.**
- **Before utilizing shared items, wash/purell hands. Disinfect item(s) after use.**
- **When removing mask to eat or drink, wash your hands with soap and water**
- **Please store your goggle/face protection and masks in a clean bin in your designated unit location**

COVID-19 Personal Protective Equipment (PPE) for Healthcare Personnel

Preferred PPE – Use N95 or Higher Respirator



Acceptable Alternative PPE – Use Facemask



15-11162-01-01/2020

[cdc.gov/COVID19](https://www.cdc.gov/COVID19)

Is COVID - 19 causing you stress?

Difficulty sleeping

Increased anger over small things

Fear of going to the store

Increase in negative thoughts

Difficulty in concentration

Feelings of guilt

Fear of getting COVID – 19

The Employee Assistance Program is a Free, Confidential Resource

To get Assistance:

Call 24/7 800-624-5544


Or go online www.ndbh.com

- **Press Log in**
- **Choose Program : Employee Assistance Program**
- **Enter company code : Winchester Hospital**
- **Select COVID – 19 Resources**

Broken Equipment ?

- ***STOP DO NOT USE IT!!***
 - Pull equipment out of service
 - Place Red tag on it and call x 2505
 - If injury, secure equipment and call the Risk Manager On-call
 - Broken door, light and ceiling tiles and non-patient equipment, and other repair issues call SRC at x2500

Do you want to fall? NO

- Report fall risks to SRC x2500
- Watch where you are stepping 
- Report ice risks in parking lots to the Shuttle Drivers
- When responding to a bed alarm do not run (if Patient Falls start Fall protocol)
- *See a spill on the floor take action to reduce the fall risk, towels, floor sign, call for help*
- Tie your shoes!
- Frequent intentional rounding for precautions reduces patient falls

Reporting Adverse Events

- Electronic Occurrence Assessment Report (EOAR) System used to report any unexpected, actual or near miss event, or an event related undesired outcome to a patient, visitor or the building.
- The Patient Advocate is available to help resolve complaints that you or your supervisor are unable to resolve or that you need assistance with.

Interpreter Services

- Interpreter services are provided to non-English / limited English speaking or hearing impaired patient who requires or requests an interpreter.
- ***In a medical emergency***, a medical or hospital staff member is to page Interpreter Services and use his/her best judgment to communicate in the fastest and most effective way given the situation and need not wait for an interpreter in person to arrive. Use the Video Remote Interpreting or Language Line, while waiting for an interpreter in person.
- Upon registration the patient is asked what language they prefer to receive their medical information.

Interpreter Services

- Interpreter services are offered to patients or their substitute decision maker.
- The patient/substitute decision maker requests Interpreter services, the medical/hospital Staff arranges for the services. Until Interpreter Services have been arranged and are available, staff will communicate with the patient through the language line.
- Interpreter services are to be arranged in advance for appointments, planned treatments, elective procedures, informed consent, communication throughout hospitalization, etc.

Family or Friends as Interpreters

- Family/friends can interpret for **non-medical information**, such as registration
- **Do not suggest** patients to use family /friends as interpreters for **medical information**
- ***Minors (under 18) are NOT to be used as Interpreters***
- If patient declines Interpreter Services and requests a family member, staff will communicate to the patient that Interpreter Services are legally guaranteed and free of charge
- If patient declines services, staff will have the patient sign the Declination of Interpreter Services Form.
- Staff has the right to request the use of an interpreter to perform professional linguistic services for optimal communication **even if the patient declines interpreter services**

Interpreter Services

- Staff documents in the medical record: a) the use of interpreter services, b) if an interpreter is used, the name of the interpreter and language used, c) if applicable, the Declination of Interpreter Services form must be filed in the paper medical record.
- If a staff member has any concerns, they should notify their manager or the Nursing Supervisor.
- For information on how to access Interpreter Services, refer to the policy #1523-CA , pages 3-6.
- Video Remote Interpreting and Language Line is to be used when it can be documented by medical/hospital staff that there is either no reasonable way to anticipate the need for contracted interpreters for a particular language, or there occurs in a particular instance an inability to provide competent interpreter services by a contracted interpreter.

MRI Safety



Goals and Objectives:

•**Goal:** The purpose of these slides is to educate and inform those working in and around MRI environment. Keeping people SAFE is our number 1 priority.

•**Objectives:**

- What is an MRI.
- MRI safety when working in and around the MRI environment.
- Identify MRI Zones.
- Identify MRI Labeling.
- Avoid potential hazards.

The Magnet is “ON”!

MRI:



- MRI stands for Magnetic Resonance Imaging (MRI).
- MRIs create images of patients without utilizing ionizing radiation.
- MRI scanners are more powerful more than the earth's magnetic field!
- MRI scanners are ALWAYS on...even when not in use!

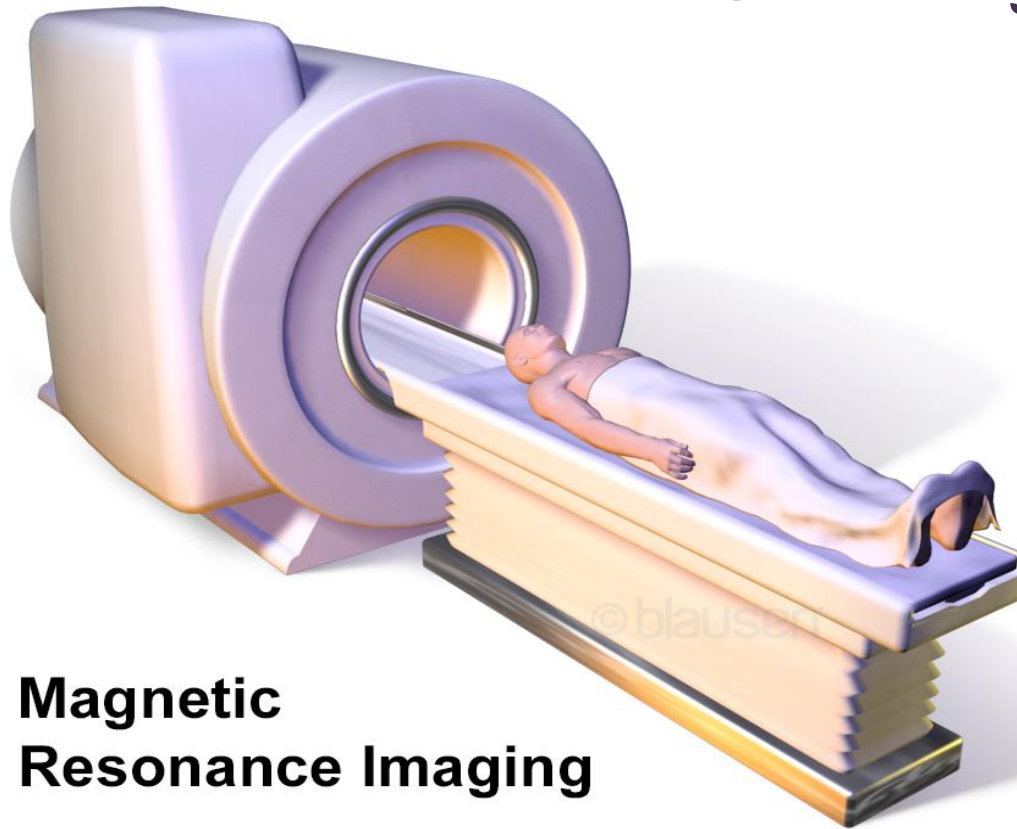
The Magnet is always “ON”!

Safety in the MRI Suite: Non MRI Personnel

- Access to the MRI Department is strictly controlled. ONLY MRI personnel will be permitted in the MRI suite without supervision.
- A MRI Ferromagnetic Screening Form is required for ALL Non MRI personnel entering Zone III. This completed form must be reviewed by an MRI Technologist, prior to Zone III admittance.
- All Non MRI personnel entering Zone III must remove ALL extraneous items from his/her person.
- These items will be placed in a secure bin, while the individual is present in Zone III.
- Those individuals entering the scan room, (Zone IV), must undergo further metal detection screening.



Patient Screening:



Magnetic Resonance Imaging



Patients **must undergo** ferromagnetic detection screening prior to entering the MRI Suite.

MRI Safety Zones:

MRI	
MRI ZONE I	MRI Access Area

Lobby/Reception Area
NO Restrictions

NOTICE	
MRI ZONE II	MRI Patient Screening and Preparation

Changing/Screening Rooms
NOT for the general public

 CAUTION	
MRI ZONE III	Restricted Access Screened MRI Patients and MRI Personnel Only

Control Area
Access Restricted
visitors/patients must be screened and supervised

 DANGER	
MRI ZONE IV	Restricted Access Screened MRI Patients Under Direct Supervision of Trained MRI Personnel Only

Scanner Room
Access Restricted
Visitors/patients must be screened and supervised

MRI Labeling:



Safe

MR Safe: an item that poses no known hazards in all MR imaging environments. Using this terminology “MR Safe” -items are non-conducting, non-metallic, and non-magnetic.



Conditional

MR Conditional: an item that has demonstrated to pose no known hazards in a specified MR environment with specified conditions of use. Field conditions that define the MR environment include static magnetic field strength, spatial gradient, time rate of change of the magnetic field, RF fields, and specific absorption rate (SAR).



Unsafe

MR Unsafe: an item that is known to pose hazards in all MRI environments. MR unsafe items include magnetic items such as a pair of ferromagnetic scissors.

Communication is key to
the safety of us all!

Time to take the quiz!

Thanks.

If you have any questions please contact
Steve Shea at 781-756-2542.