Safety Training

Students, Contractors, Volunteers and Job Shadows

Agenda

- Codes
- Infection Control
- Quality Control
- Hazard Communication
  - MSDS
  - Eye Wash Stations

Codes

- **The objective of this course is to educate you on the codes used at Island Hospital**

Codes

Code Red	Fire
Code Blue	Cardiac/Respiratory Arrest
Code Gray	Combative Person
Code Silver	Person with Weapon/Hostage Situation
Code Orange	Internal hazardous material spill
Code Amber	Infant or Child Abduction
Trauma Code	Major Trauma Patient in ED (Either a Full or modified)
Rapid Response	Summons the Rapid Response Team
External Triage	External Disaster
Code Delta	Activation of Hospital Decontamination Team
Internal Triage	Internal Disaster
Code Evac	Notification of pending evacuation

Code Red - Fire

"Code Red & location" is announced 3 times over the PA system.

IF the fire is in your area:

1. **R**escue patients, employees & visitors from danger.
2. **A**ctivate nearest pull station
3. **C**ontain the fire. Close doors and clear hallways.
4. **E**xtinguish if possible. Evacuate, if ordered.

IF the fire is **NOT** in your area:

1. Stay where you are.
2. Close doors.
3. Keep patients and visitors calm.
4. Wait for "All Clear" page or further instructions.

Code Red - Fire

If you are present in the Main Hospital when there is a Fire:

(this includes Inpatient areas, ED, Diagnostic Imaging, Lab, Central Registration, Surgery, Dietary, Materials Mgmt, Volunteers, IHRC, Home Health, Medical Records, Administration and Engineering.)

- Rescue patients, employees & visitors from danger.
- Activate nearest pull station and evacuate to the next fire compartment (fire compartments are separated by closed fire doors)
- Wait for further instructions.

Code Red - Fire

If you are present in an area Not in the Main Hospital when there is a Fire or Fire Drill:

(this includes Fidalgo Medical Associates, Anacortes Family Medicine, Oncology Clinic, Cardio-Pulmonary Rehab, Island Surgeons, Patient Accounts, Human Resources, Information Systems, Finance, Sleep Lab and Outpatient Rehab)

- Rescue patients, employees & visitors from danger.
- Activate nearest pull station and evacuate the building.
- Wait for further instructions.

Code Red - Fire

- **Purpose** – To communicate and mobilize a response to protect patients, visitors, staff and property in the event of a fire or smoke.

- **UNDER NO CIRCUMSTANCES SHOULD YOU GO THROUGH CLOSED FIRE DOORS!** These doors are to contain any smoke and prevent fire from spreading.

- **Code Red Drills** are conducted once per quarter, per shift. A person from Engineering will bring the **"Red Fire Light"** and turn it on; this is your **FIRE**. With the exception of evacuation any personnel or patients, react as if it is a **"Real Fire"** and do all of the steps stated in the *previous slide under; "IF THE FIRE IS IN YOUR AREA."*

CODE BLUE –Cardiopulmonary Arrest

- HEART OR RESPIRATION STOPPING (Adult, Child, and Infant)
- **Purpose** – To communicate and mobilize the immediate arrival of emergency equipment and specialized personnel to an adult or child whose heart or respiration has stopped
- **"Code Blue and location"** will be announced overhead 3 times.
- It is important that only those on the Code Team respond to the code.

Code Gray – Combative Person

- Combative person (Patient/Visitor/Staff)
- **PURPOSE**: To communicate and mobilize a response to protect patients, visitors, staff and property in the event of a combative person.
- **"Code Gray & location"** will be announced overhead 3 times.
- Code Gray buttons are located at the Central Registration desks, ER registration, inpatient admitting, ER, labor and delivery, pharmacy, main lobby reception desk, gift shop, cardiopulmonary rehab, oncology, patient accounts, Island Hospital Resource Center (IHRC), and West Main.
- Upon hearing the Code Gray, ***all*** available personnel are requested to appear & seem to be working normally. Do not make eye contact or seem confrontational. Do not interfere unless there is physical danger.
- ******Sheer number of people present should calm the situation******
- **If** the person has a weapon, use Code Silver instructions (DO NOT PAGE THIS OVERHEAD)

Code Silver – Weapon or Hostage Situation

- **Purpose**: To call a response team to assist staff in managing and/or de-escalating a potentially threatening situation and gain the cooperation of a person with a weapon or who has taken hostages within the facility or its grounds.

- Do not respond unless specifically assigned to respond; the area should be evacuated of all nonessential personnel.

- **Do NOT call Code Silver overhead – call 911**.

- 911 should be called immediately and staff should await arrival of Anacortes Police Department.

Code Orange-
Hazardous Material Spill or Release

- **Purpose**: To communicate and activate a response that will protect patients, staff, and others in case of a hazardous material spill or release, identify unsafe exposure conditions, and help to safely evacuate an area if necessary with the health care facility or on its grounds

- **"Code Orange and location"** will be announced overhead 3 times. Housekeeping staff has been trained to respond to internal hazardous spills.

Code Amber Alert- Infant/Child Abduction

- **Purpose**: A Code Amber Alert should be initiated when an infant or child is missing or suspected abduction.

- **"Code Amber Alert"** will be announced 3 times.

- The main concern is to keep the infant/child unharmed.

Code Amber Alert- Infant/Child Abduction

- Do Not be confrontational: Observe any defining qualities of the suspected abductor (color of eyes, hair, clothes, shoes, height, weight, build, gender, race). Take note if they are carrying any bags, backpacks, suitcases or anything that could possibly hold a newborn. If possible, get the color, make, model and license plate number of vehicle and direction headed.

- Any personnel near an entrance/exit are to remain there and observe until “All Clear” is announced. DO NOT let anyone in, except nursing personnel with a proper Hospital ID badge or responding law enforcement personnel.

- Each department is responsible for searching their own areas.

- Engineering and Housekeeping personnel will assemble at Labor & Delivery entrance and search the facility.

Code Evac – Full or Partial

Purpose: To notify staff of a pending Evacuation of our healthcare facility

“Code Evac Full or Partial” will be paged overhead 3 times.

A partial evacuation means only one area is going to be evacuated at this time. The patients and staff **will not** be evacuated outside of the hospital.

A full evacuation means we **will** be evacuating all patients and staff out of the building. Follow the Evacuation Manual for your area.

Clearing a Code

Purpose: To notify everyone in the facility that the code previously announced is now cleared.

“Code (insert code name) all clear”

- Paged overhead 3 times.

Example “Code Red all clear, Code Red all clear, Code Red all clear.”

Infection Control

Infection Facts

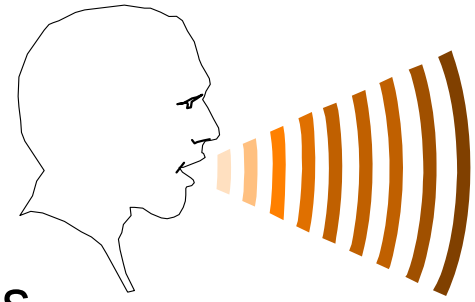
- You do not have to look sick to spread an infection. Infectious organisms may be present even when signs/symptoms or a diagnosis are absent.
- If you are exposed to an infectious organism you might not become sick if you are immune or resistant.
- *You become sick* when a large enough dose of a infectious organism overcomes your defense systems (immunity).

Infection Facts

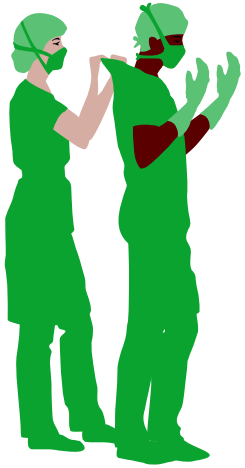
Infectious organisms can be spread by the following routes:

- direct contact with blood or,
- contact with other body substances such as respiratory droplets or,

contact with tiny airborne particles which form when moisture evaporates from large droplets.



Infection Precautions



Standard Precautions include:

- Personal protective equipment (PPE)
- Safe work practices
- Effective sanitation / housekeeping
- Immunization against Hepatitis B
- Report to the Emergency Department for evaluation of exposures

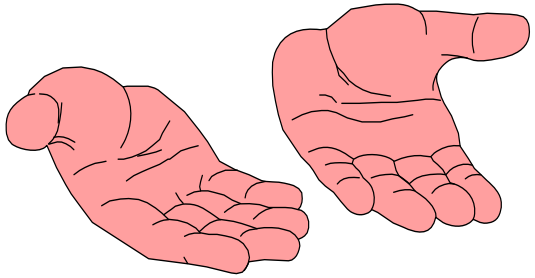
Infection Precautions

Personal protective equipment is used to avoid contact with blood/body substances

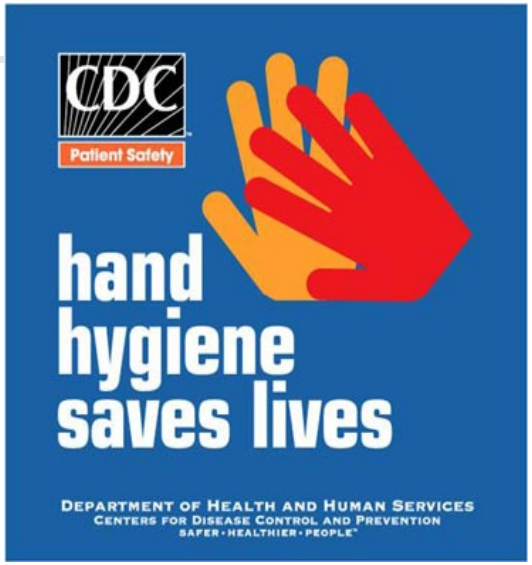
- Gloves
- Cover gowns/aprons
- Masks
- Goggles/glasses
- Face shield
- Resuscitation equipment

Hand Hygiene

- Following any work likely to contaminate hands
- After removing gloves
- Before and after patient contact
- After using the rest room



Hand Disinfectants



- Use hand disinfectants unless hands are soiled
- Apply product to one hand and rub hands together covering all surfaces of the hands and fingers until evaporated

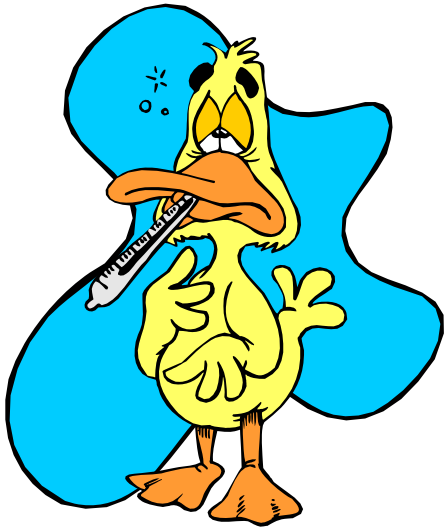
HANDWASHING

- Use soap for 15 seconds
- Rinse hands well and dry with paper towel
- Use paper towel to turn off water

Standard Precautions: Respiratory Etiquette

Standard Precautions including respiratory etiquette are used at all times. Indications for respiratory etiquette include :

- Cough
- Congestion
- Rhinorrhea (Runny Nose)
- Mild Respiratory Infection



Seasonal Influenza

The “flu” is a contagious respiratory illness caused by influenza viruses. It can cause mild to severe illness, and at times can lead to death. The best way to prevent the flu is by getting a flu **vaccination** each year.

Influenza Transmission

Infectious Period (*How long I will be contagious*)

- Adults- 1 ***day before*** and 5 days after the onset of symptoms
- Children- ***2-3 day before*** and ≥ 10 days after the onset of symptoms
- Persons who has a compromised immune system- Can shed the virus for weeks to months.

Infection Prevention- It's In Your Hands!

Influenza Vaccine Myths

"The flu shot can give me the flu"

- Injectable influenza vaccine is not a live virus and ***cannot*** transmit the virus

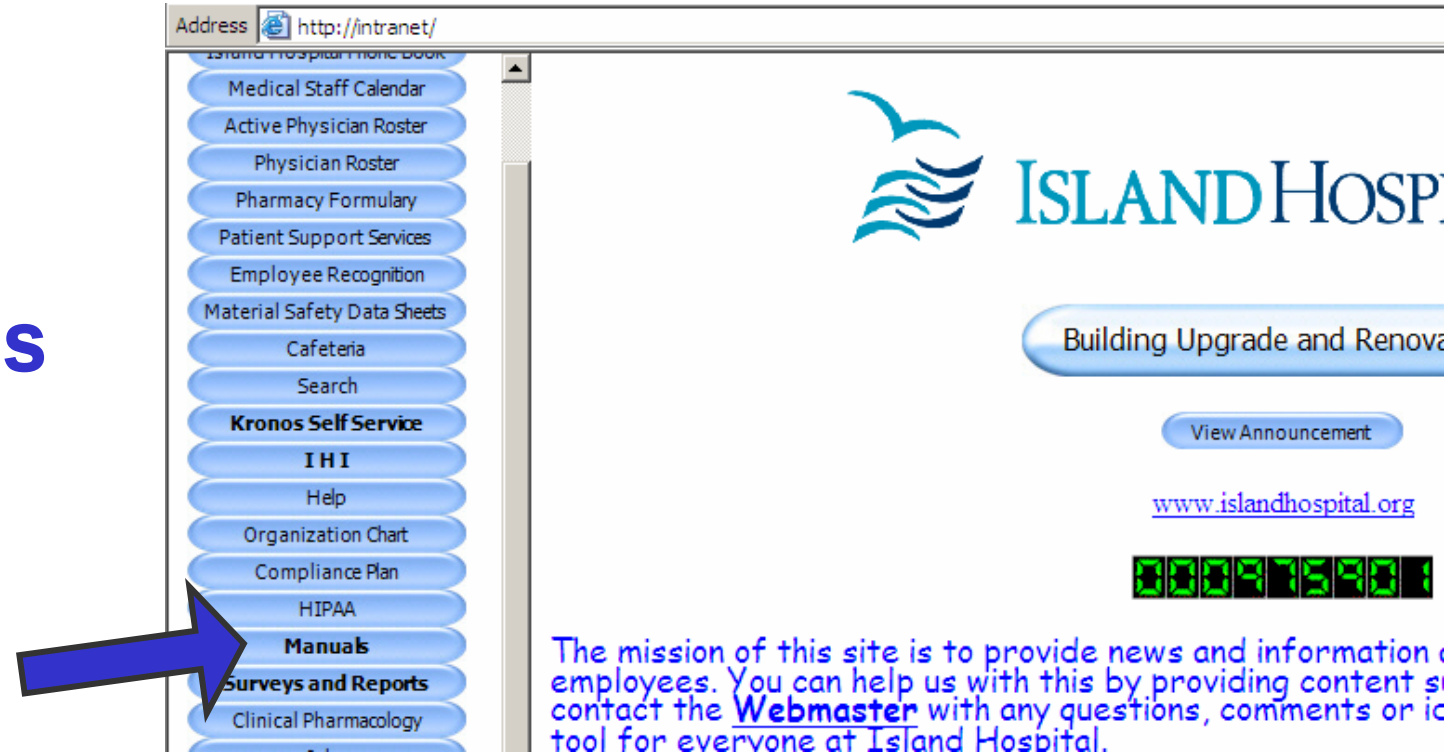
- It takes 10-14 days for the vaccine to become effective-people who develop influenza after vaccination were probably exposed to the virus before it was effective

Infection Prevention- It's In Your Hands!

Where can I find the Infection Control Manual?

Island Hospital Infection Control Manual can be found on the Hospital's Intranet Site by:

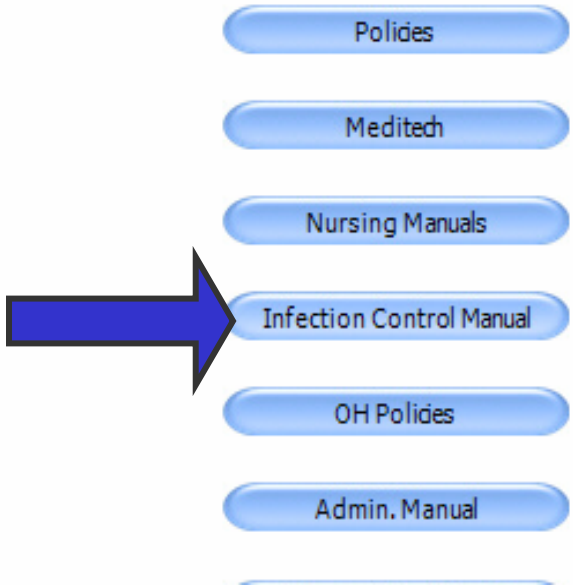
Select Manuals



Where can I find the Infection Control Manual?

This will open a page with several IH Manuals

Select the Infection Control Manual



QUALITY IMPROVEMENT

Continuous Quality Improvement, Patient Safety and Beyond

History of Continuous Quality Improvement (CQI)

- CQI began with Japanese companies trying to make their products and processes better
- One of the questions asked was how good is good enough?'
- This quote from W. Edwards Deming is the philosophy behind CQI:

"Quality must improve continuously and forever.
Meeting specifications is not enough if better is possible."

Island Hospital Quality/Patient Safety Structure

Board of Commissioners
Board Quality Council

Administration/Leadership

- Annual Goal Setting
- Departmental Quality Measures
- Patient & Staff Satisfaction
- Environment of Care Assessments
- Emergency Preparedness
- Safe Patient Handling/Ergonomics
- Infection Control
- Employee Health
- Regulatory Requirements:
  - Det Norske Veritas (DNV)
  - Department of Health
  - Medicare (CMS)

Medical Staff

- Medical Executive Committee
- QA Committee
- Credentials & Bylaws Committee
- Medicine Department
  - Pharmacy & Therapeutics
  - Med Mgmt/Adverse Drug Events
- Surgery Department
  - Anesthesia Committee
  - Operative complications
  - Trauma Committee
- Obstetric/Pediatrics Department
- Emergency Dept Committee
- Clinical Ethics Committee
- Cancer Committee
  - ACOS Accreditation Requirements

Each of these committees, activities and programs helps improve quality of patient care and safety for patients and staff.

The following slides will illustrate how we share the results of our quality improvement efforts.

Quality Dashboard:

Available to all staff via the intranet *(on the left hand side of the home page, click on the blue button 'Surveys & Reports', then 'Quality Dashboard')*

Updated monthly and presented to the hospital Board

Front page is a summary that uses stoplight colors;

= the rate for Island Hospital is not as good as it should be and needs careful attention

= the rate for Island Hospital is not as good as it has been, or could be, and work needs to continue or a plan developed.

= the rate for Island Hospital is where we would like it to be and we want to work to keep it there.

= best score possible!

Island Hospital's CQI Team Process - "FADE"

Step 1

Focus on the problem statement

Step 2

Analyze the data

Step 3

Develop and implement action plan

Step 4

Evaluate the results

This process can be used anytime there is an area identified for improvement. CQI teams can be any size.

Reporting Events:

Adverse events, Sentinel events, Incident reports

A law passed in 2006 requires Washington State Hospitals to notify the Department of Health within 48 hours anytime an adverse event occurs that is listed in the NQF (National Quality Forum) list of serious reportable events.

The list includes:

Surgery events (5 specific events listed)

Patient death or serious disability associated with specific situations (16 specific situations listed)

Infant discharged to the wrong person

Abduction of a patient

Stage 3 or 4 pressure ulcers acquired AFTER admission to the hospital

A line delivering oxygen or other gas to a patient contains the wrong gas

Care ordered by or provided by someone impersonating a licensed healthcare provider

Sexual assault on a patient within or on the grounds of the hospital

Ways you can impact quality

1. Look for ways to improve every process
2. Listen to your customers; aim to exceed their expectations
3. Treat your co-workers and other departments as customers
4. Confront safety and quality issues when you see them - wherever you see them
5. Stretch; don't settle
6. Seize opportunities to get involved
7. Look for solutions
8. Appreciate quality when you see it
9. Pursue continuous improvement in yourself
10. Become a safety and quality advocate

Remember our Island Hospital Promise:

'*Your best healthcare experience begins at Island Hospital. We always place your emotional and medical needs first and foremost.'*

Incident Reporting at Island Hospital

What to report?

Accidents

Things that happen that are “unusual” or “not right”

Complaints or concerns

How to report?

Electronically via the Meditech system. All incidents are entered as either a Patient Notification or Non-Patient Notification. The icon for each is on the same screen used to access Meditech e-mail.

What happens to the reports?

The QI/Risk Dept tracks all incidents. Each Director/Manager is responsible for responding to incidents in their area(s). Aggregate data is reported to the Safety Committee and to the Board Quality Council.

Hazard Communication

MSDS Sheet

- Material Safety Data Sheets (MSDS) are the internationally standardized way to document the hazardous properties of chemicals and other hazardous agents. Chemical companies provide such data sheets, and collections of MSDS sheets are available from several sources.

- Material Safety Data Sheets are available on the Island Hospital Intranet and hard copies can be found in Materials Management

Eye Wash Stations

- Eye wash stations can be found in areas where employees may be working with hazardous materials or chemicals.
- Locations include:
  - Surgery/Pathology
  - Clinics
  - Housekeeping
  - Emergency Department
  - Lab
  - Facilities Engineering