

Safety/Environment of Care Orientation

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Safety Office

2020

Beth Israel Lahey Health 
Lahey Hospital & Medical Center

Safety Orientation

Objective:

- To ensure staff are competent in topics is required by law.
 - OSHA
 - EPA / MADEP
 - TJC
 - Lahey Safety Manual
- To keep colleagues safe at work.



Fire Prevention/Preparedness

- Take caution when working with heat-producing devices (from electrocautery to toasters)
- Know where your fire extinguishers, pull stations, and evacuation routes are located in your department.
- Do not block open **fire doors**.
- Do not block fire equipment.
- Keep area around sprinklers clear (18")
- Do not store materials or equipment in stairwells.
- Only specific wheeled equipment can be in corridors under certain conditions.



Fire Response: **RACER**



Rescue



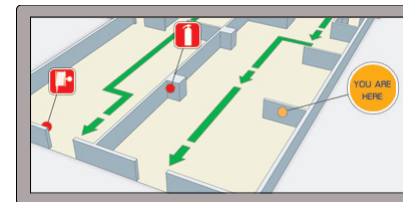
Alert



Contain

Extinguish

Relocate



RACER: Rescue

- Rescue those in immediate danger from fire/smoke if safe to do so.



RACER: Alert

- Activate building fire alarm by pulling nearest **pull station**
- Call out **FIRE** and fire location.
- Dial Emergency Number
Burlington: **x2300**
Peabody: **x2911**
All Other Locations: **911**



Give fire location and your name.

Fire Response must be activated even if the fire has already been extinguished.

RACER: Contain



- Contain fire by closing doors to all rooms in area
- Clear corridors of any wheeled equipment (patient lifts, etc.)
- Consider shutting off oxygen.
 - The clinical staff member in charge of the area must give permission for medical gases to be shut off.



RAC**E**R: Extinguish

Attempt to extinguish fire **ONLY** if:

- It is safe for you to do so
- The fire is small and manageable

Remember **P.A.S.S.**

- Pull out the safety pin
- Aim nozzle at base of fire – not the center
- Squeeze the trigger
- Sweep nozzle from side to side to cover base of fire.



RACE**R**: Relocate

- Relocate (evacuate) if told to do so OR if area has become unsafe
- **HORIZONTAL EVACUATION** – Patients are removed to the adjacent smoke compartment to a protected area – beyond fire doors
- **VERTICAL EVACUATION** – Downward movement to safe area using stairs, or elevators operated by hospital engineering or FD.
- Do not use elevators unless told to do so by the Fire Department or Lahey Security
- Always move toward exit.



Other Things to Know

In the hospital and hear **Fire Alarm** Not in Your Area?

- Personnel NOT in immediate danger **should not** evacuate unless ordered by the Fire Department or Lahey Security (Defend in Place)
 - Prepare patient lists
 - Be aware of what supplies would be needed to evacuate patients, if needed

Fire in another **non-hospital** building (business or ambulatory)?

- Stop work
- Shut off potentially dangerous equipment
- Keep important items (car & house keys) with you
- Evacuate the building

Fire Drills

- **Fire drill cone placed in area to be tested**
 - Labeled “Fire Drill” with flashing red beacon
- First person to see the cone must initiate the fire drill
- Follow **R.A.C.E.R.**
 - Be sure to pull fire alarm pull station!





Emergency Management

Lahey Hospital & Medical Center must be prepared to render care and comfort to victims resulting from any type of disaster, and to train its employees to render prompt and high level care in the rapid reception of large numbers of casualties.



Disaster Alert

- **INTERNAL OR EXTERNAL DISASTER:**
 - **Internal:** A situation in which the Hospital itself and/or its personnel, and patients are immediately affected by the disaster.
 - **External:** Occurs when the disaster affects the community outside of Lahey.
- **Scope of Disaster:** Fire, flooding, structural collapse, mechanical failure, explosion, bomb threat, sabotage, civil disorders, natural disasters resulting in damage to the institution itself.

Disaster Response

- Activation is announced overhead. Managers & key disaster personnel will receive text, email, and phone call from Lahey Notification System (LNS).
- When hearing this code, RETURN TO YOUR HOME DEPARTMENT unless you have a specific disaster role.
- Normal hospital operations may be altered/suspended.
- You may be asked to perform tasks that are different from your day-to-day responsibilities.
- All colleagues should be oriented to their specific departmental responsibilities. In a real disaster, you may be called at home and asked to report to work ASAP.
- “ALL CLEAR” is paged overhead and through LNS when the disaster is contained.

Violence Prevention

You can prevent violence!

1. Treat everyone with respect, and keep patients informed of wait times, procedures, etc.
2. Safely store any object that could be used as a weapon
 - Visitors and patients must leave weapons with security
3. Follow security procedures – wear ID badge
4. Stay calm and report all incidents to Security

Violence Response

IF VIOLENCE OCCURS:

- Take immediate action to protect yourself
- Call for help: alert other staff, call **Security**
- Remove patients and visitors from area
- Give the person what she/he wants
- Keep trying to calm him/her down until security or police arrive

Missing Person

- Notify your supervisor.
- Contact **Security**. Security will initiate “**Missing Person**” if necessary.
- Switchboard will announce “**Missing Person**” and a description of the person missing
- Upon hearing “**Missing Person**” announced, staff should:
 - Immediately attempt to observe the flow of traffic out of the area / department
 - Observe any suspicious persons. Observation does not include touching, harassing, etc. of patients or visitors.

Bomb Threat

Report any threats to Security as soon as possible.

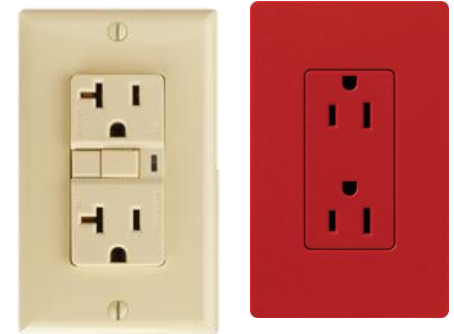
If you receive a threatening phone call:

1. Remain calm
2. Do not interrupt the caller
3. Listen carefully
 - Utilize the bomb threat checklist in the Rainbow Chart
 - Record exact message of the caller
 - Note exactly when, where and what time the event is to occur
4. Have the caller repeat the message if possible

NO overhead code will be called. Security & the Police will coordinate a search. You may be asked to search your area.

Emergency Power

- Lahey has procedures for reacting to utility failures.
- Emergency generators are present in Burlington & Peabody.
- All essential equipment should be plugged into emergency power outlets.
- In Burlington, **IVORY** or **RED** colored outlets are used for emergency power.
- In Peabody, **ONLY RED** outlets are used for emergency power.





Hazardous Materials and Waste

Hazardous materials & waste pose a physical or health risk.

Includes virgin chemicals, alcohols, cleaning products, biohazardous materials, drugs, ointments, medical gases

OSHA Hazard Communication Standard (“Right to Know”):

- Every employer must provide information regarding:
 - Hazards present in workplace and proper labeling.
 - How employees can reduce their risk of exposure.



OSHA Hazard Communication Standard

New in 2012:

OSHA has adopted :



into its Hazard Communication Standard.

Additional requirements
displaying hazards on chemical
labels










Change from “MSDS” to “**SDS**”

Standardized format of SDS
sections

GHS Pictograms

Store these in flammable cabinets to prevent fires.

HCS Pictograms and Hazards

Health Hazard  <ul style="list-style-type: none"> ▪ Carcinogen ▪ Mutagenicity ▪ Reproductive Toxicity ▪ Respiratory Sensitizer ▪ Target Organ Toxicity ▪ Aspiration Toxicity 	Flame  <ul style="list-style-type: none"> ▪ Flammables ▪ Pyrophorics ▪ Self-Heating ▪ Emits Flammable Gas ▪ Self-Reactives ▪ Organic Peroxides 	Exclamation Mark  <ul style="list-style-type: none"> ▪ Irritant (skin and eye) ▪ Skin Sensitizer ▪ Acute Toxicity ▪ Narcotic Effects ▪ Respiratory Tract Irritant ▪ Hazardous to Ozone Layer (Non-Mandatory)
Gas Cylinder  <ul style="list-style-type: none"> ▪ Gases Under Pressure 	Corrosion  <ul style="list-style-type: none"> ▪ Skin Corrosion/Burns ▪ Eye Damage ▪ Corrosive to Metals 	Exploding Bomb  <ul style="list-style-type: none"> ▪ Explosives ▪ Self-Reactives ▪ Organic Peroxides
Flame Over Circle  <ul style="list-style-type: none"> ▪ Oxidizers 	Environment (Non-Mandatory)  <ul style="list-style-type: none"> ▪ Aquatic Toxicity 	Skull and Crossbones  <ul style="list-style-type: none"> ▪ Acute Toxicity (fatal or toxic)



Store these in acid cabinets to avoid rusting and corrosion

Safety Data Sheets

Material Safety Data Sheets (MSDS) will be replaced with **Safety Data Sheets (SDS)**

A Safety Data Sheet (SDS) is a document provided by a chemical manufacturer or supplier that gives specific information on physical characteristics and health hazards associated with a chemical or chemical mixture.

- Format and language will be standardized
- Sections are always in the same place
- Hazard and Precaution Statements explain specific hazards and how to keep safe when using the product in plain English

NP NICE-PAK		SAFETY DATA SHEET		PDI	
1. Product and Company Identification					
Product identifier	Compound Tincture of Benzoin Swabstick			SDS0119-00	
Other means of identification	Not available				
Recommended use	Effective barrier between skin and bandage or application.				
Recommended restrictions	For Professional and Hospital Use				
Manufacturer/Importer/Supplier/Distributor information					
Manufacturer					
Company name	Professional Disposables International, Inc.				
Address	Two Nice-Pak Park Orangeburg, NY 10962-1376 United States				
Telephone	1-845-365-1700 (M-F 9am - 5pm)				
E-mail	Not available.				
Emergency phone number	1-800-999-6423				
2. Hazards Identification					
Physical hazards	Flammable liquids	Category 2			
Health hazards	Skin corrosion/irritation	Category 2			
	Serious eye damage/eye irritation	Category 2A			
	Sensitization, skin	Category 1			
Environmental hazards	Not classified.				
OSHA defined hazards	Not classified.				
Label elements					
	 				
Signal word	Danger				
Hazard statement	Highly flammable liquid and vapor. May cause skin irritation. May cause eye irritation. May cause an allergic skin reaction.				
Precautionary statement					
Prevention	Keep away from fire or flame. Keep container closed. Use good industrial hygiene practices in handling this material.				
Response	In case of fire: Use appropriate media to extinguish. If skin irritation occurs, discontinue use. If irritation persists, consult a physician. If in eyes: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. If eye irritation persists: Get medical advice/attention. Specific treatment (see product label).				
Storage	Store in a well-ventilated place. Keep cool.				
Disposal	Dispose of contents/container in accordance with local/regional/national/international regulations.				
Hazard(s) not otherwise classified (HNOC)	None known.				
Supplemental information	Not applicable.				

New

Where to Access

- **Safety Data Sheets** can be obtained:
 - Online lookup on Massnet ([Massnet > “Safety Data Sheet \(SDS\) Look-up”](#))
 - In department-specific binder (if available)
 - Ask your manager or call the Safety Officer at **x5203**
 - Contact the manufacturer via website, email, or phone
 - **Last resort: Call MSDSOnline at 888-362-7416**
- **Help on labeling and storing chemicals:** call Safety at **x5203**

Helpful Links

Ask the Coder
Benefits Center
BLS/ACLS Resources
Cattell Library Resources
CareForms
CE Calendar - Nursing
Central Supply Catalog
CME Tracking Calendar



Publications
Request Lahey Epic Access
Request Medical Photography
[Safety Data Sheet \(SDS\)](#)
SharePoint Lobby
Video Listing

New Incoming Labeling Requirements

- Name, Address and telephone number of supplier
- The product identifier
- A signal word
- Hazard statement(s)
- Precautionary statement(s)
- Pictogram(s)



(800) 321-OSHA (6742)

SAMPLE LABEL	
PRODUCT IDENTIFIER CODE _____ Product Name _____	HAZARD PICTOGRAMS  
SUPPLIER IDENTIFICATION Company Name _____ Street Address _____ City _____ State _____ Postal Code _____ Country _____ Emergency Phone Number _____	SIGNAL WORD Danger
PRECAUTIONARY STATEMENTS Keep container tightly closed. Store in cool, well ventilated place that is locked. Keep away from heat/sparks/open flame. No smoking. Only use non-sparking tools. Use explosion-proof electrical equipment. Take precautionary measure against static discharge. Ground and bond container and receiving equipment. Do not breathe vapors. Wear Protective gloves. Do not eat, drink or smoke when using this product. Wash hands thoroughly after handling. Dispose of in accordance with local, regional, national, international regulations as specified. In Case of Fire: use dry chemical (BC) or Carbon dioxide (CO ₂) fire extinguisher to extinguish. First Aid If exposed call Poison Center. If on skin (on hair): Take off immediately any contaminated clothing. Rinse skin with water.	HAZARD STATEMENT Highly flammable liquid and vapor. May cause liver and kidney damage. SUPPLEMENTAL INFORMATION Directions for use _____ _____ _____ Fill weight: _____ Lot Number _____ Gross weight: _____ Fill Date: _____ Expiration Date: _____

Workplace Container Labels

- All containers at Lahey Hospital & Medical Center, including secondary containers, must be labeled with the following information:
 1. **Identity of the material stored in the container**
 2. **Appropriate hazard warnings defining hazards associated with the material stored in the container.**
- Labels must be clear, prominent, and in English.



Hazardous Pharmaceuticals

Hazardous **Drugs** (HD) are pharmaceuticals that are hazardous to handle.

Hazardous **Waste** (HW) are pharmaceuticals (and other chemicals) that are considered to be hazardous to dispose of.



Pyxis and MAR notifications will alert staff if a drug is an HD and/or if it requires HW disposal. This will also print on the label.

Information on the proper handling and management of both Hazardous Drugs and Hazardous Waste, including appropriate Personal Protective Equipment (PPE) and waste disposal procedures is available on Massnet under “Nursing @ Lahey”.

Disposing of Chemicals

- If it has a **hazardous characteristic**, it cannot go in the trash or down the drain.
- Heavily Regulated



Large fines for disposing of hazardous waste into trash!
Large costs for disposing of colored bins!
Contact **Safety** if you are unsure of how to dispose.



Pharmaceutical Waste Management



WASTE CLASS	NOT LABELED / IDENTIFIED	LABELED / IDENTIFIED HAZARDOUS BY PHARMACY		NOT LABELED / OTHER WASTE STREAMS				
	NON-RCRA PHARMACEUTICAL WASTE*	RCRA PHARMACEUTICAL WASTE*	INCOMPATIBLE Rx WASTE (SEND TO PHARMACY)	MAINTENANCE IV SOLUTIONS	SHARPS/ INFECTIOUS WASTE	CONTROLLED SUBSTANCE WASTE	TRACE CHEMOTHERAPY WASTE	EMPTY/TRACE VIALS AND IV BAGS
RCRA CODE		Special Handling Black & Black With Packaging	Special Handling - Return to Pharmacy			CONTROLLED SUBSTANCES		EMPTY ITEMS
DESCRIPTION AND EXAMPLES OF WASTE	<p>Pharmaceutical Waste <u>without</u> a Waste Code</p> <p>This includes medication left in a vial or IV, and pills.</p> <p>Examples of Non-RCRA Waste:</p> <ul style="list-style-type: none">• Pills & Tablets• Full or partial Vials• Full or partial IV's with Rx medication instilled (keep tubing attached and place in recloseable bag)• Lotions, creams and ointments must be capped <p>Note: All Rx waste without a waste code defaults to the blue container unless it is in a syringe or ampoule. Absorbent pads should be used when their is potential for waste that may leak.</p>	<p>Pharmaceutical Waste with a Waste Code</p> <p>This includes P- and U-listed hazardous pharmaceutical wastes and those that have a hazardous characteristic.</p> <p>Examples of RCRA Waste:</p> <ul style="list-style-type: none">• Pills & Tablets• Full or partial Vials• Bulk chemotherapy or hazardous drugs (more than 3% residual volume)• Supplies, soiled material and PPE from large hazardous drug spills clean-up• Lotions, creams and ointments must be capped	<p>Pharmaceutical Waste that Must Be Segregated for Transportation</p> <p>Incompatible pharmaceutical waste requires segregation to meet US DOT, safety & disposal facility requirements. Dispose in resealable bag and use hospital defined procedure for returning to pharmacy.</p> <p>Examples of Incompatible Rx Waste:</p> <ul style="list-style-type: none">• Aerosols• Corrosives• Oxidizers	<p>IV Solutions <u>without</u> Pharmaceuticals Instilled</p> <p>These items can be poured/dropped of down the drain. Drain disposal may require publicly owned treatment works (POTW) approval. Check with your state and/or POTW for more information.</p> <p>Examples of Maintenance IV Solutions:</p> <ul style="list-style-type: none">• Potassium Chloride• Potassium Phosphate• Sodium Phosphate• Calcium• Sodium Bicarbonate• Dextrose• Saline <p>Note: IV solutions with pharmaceuticals instilled cannot be disposed in this manner.</p>	<p>Sharp Waste Capable of Inflicting Punctures or Cuts</p> <p>Objects that are contaminated or have the potential to be contaminated with an infectious substance and are capable of penetrating skin or packaging materials.</p> <p>Examples of Sharps/Infectious Waste:</p> <ul style="list-style-type: none">• Needles• Broken glass vials• Broken ampoules• Blood / syringe• Scalpels / blades / lancets• Razors• Pins• Clips / staples• Trocars• Inducers• Guide wires <p>Note: Replace if the sharps container is more than 75% full.</p>	<p>Controlled Substance Waste</p> <p>This includes pills, tablets, capsules, patches, IV's, vials and ampoules. The contents of IV's, vials, ampoules and syringes should be emptied/ expunged into the container. Follow hospital policy for disposing vials. Place empty ampoules and syringes into a sharps container.</p> <p>RCRA controlled substance waste should be placed in a separate container designated for RCRA controlled substance waste.</p>	<p>Chemotherapy Waste that Has Residual Content</p> <p>Sometimes referred to as 'RCRA Empty', these items contain residual chemo waste after being expelled from their container and contain 3% or less by weight of the total container capacity. This category also includes PPE that is not saturated with chemotherapy waste.</p> <p>Note: Any chemotherapy waste that has more than 3%, or saturated PPE is considered Bulk Chemo and should be returned to Pharmacy.</p> <p>Examples of Trace Chemotherapy Waste:</p> <ul style="list-style-type: none">• Empty vial• Empty syringe• Gown• Gloves• Goggles• Wipes• Empty IV / tubing	<p>Non-RCRA Pharmaceutical & Empty/Trace Containers</p> <p>These are empty or trace vials, IV bags/bottles and other containers that contained non-RCRA pharmaceutical waste.</p> <p>Dispose of empty/trace containers per hospital policy.</p> <ul style="list-style-type: none">• Empty Vials• Empty IV Bags• Empty IV Tubing <p>In most states and counties it is permissible to dispose of the above mentioned empty containers in the regular trash.</p> <p>Empty syringes and ampoules place in red sharps container.</p>
	PHI	FOLLOW HOSPITAL POLICY REGARDING WASTE STREAMS CONTAINING PHI/PII						
NOT PERMITTED	<p>X NO BLOOD PRODUCTS OR INFECTIOUS WASTE</p> <p>X NO SYRINGES OR AMPOULES</p> <p>X NO CONTROLLED SUBSTANCES</p> <p>X NO SHARPS</p>	<p>X NO BLOOD PRODUCTS OR INFECTIOUS WASTE</p> <p>X NO SYRINGES OR AMPOULES IN 8 GAL</p> <p>X NO CONTROLLED SUBSTANCES</p> <p>X NO INCOMPATIBLE PHARMACEUTICAL WASTE</p>	<p>X NO CONTROLLED SUBSTANCES</p> <p>X NO PHARMACEUTICAL WASTE</p>	<p>X NO CONTROLLED SUBSTANCES</p> <p>X NO BLOOD PRODUCTS OR INFECTIOUS WASTE</p>	<p>X NO CONTROLLED SUBSTANCES</p> <p>X NO PHARMACEUTICAL WASTE</p> <p>X NO FREE LIQUIDS</p>	<p>X NO SYRINGES, VIALS OR AMPOULES</p> <p>X NO DRUGS OTHER THAN CONTROLLED SUBSTANCES</p>	<p>X NO CONTROLLED SUBSTANCES</p> <p>X NO BULK CHEMOTHERAPY</p>	<p>X NO CONTROLLED SUBSTANCES</p> <p>X NO SHARPS</p>

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*In the state of WA, non-RCRA pharmaceutical waste is referred to as State-Only Dangerous Waste and RCRA pharmaceutical waste is referred to as Dangerous Waste.

Chemical Exposure

If you are exposed to any **hazardous/biohazardous** chemical: skin, inhalation, ingestion, etc, do the following **immediately**:

1. Get Help

- Obtain or ask someone to obtain the chemical's SDS
- Proceed to Employee Health if minor
- After hours; go to the Emergency Room
- If you have been exposed through the eyes, find the closest **eyewash station** and rinse for 15 minutes, then proceed to ER.

2. Ensure that a Safety Report is completed!



Chemical Spill

- **For small spills:** Department Managers will train their staff to clean all reasonably sized spills within their departments.
- **Should a large spill occur, or you are uncomfortable with cleaning up a small spill, do the following immediately:**
 - Clear the area of all patients, staff, visitors, etc.
 - Call the **Spill Team** at the Emergency Number.

Burlington	x2300
Peabody	x2911
All Other Locations	Pager 8242

- Give location and type of chemical spilled.
- Ensure that a Safety Report is completed
- Spill Response Team: will assess hazard and determine if spill can be safely cleaned with available equipment.
- Remember: never throw spill clean-up materials into the regular trash.
 - Hazardous chemical spill clean-up materials must be treated as hazardous waste!



Other Safety Hazards

Electrical Hazards

Slips, Trips, Falls

Lifting/Moving

Working with Machinery

**Think about safety
before any task**

&

**Report safety hazards
to your manager**

General Safety – Your Resources

- Emergency response and notification information can be found in the **Initial Action Response Guide** in every department and on Massnet in the **Safety Manual**.

INITIAL ACTION RESPONSE GUIDE **Emergency Procedures**

Lahey Hospital & Medical Center
25 Mall Road, Burlington, MA

Beth Israel Lahey Health 
Lahey Hospital & Medical Center

Helpful Links

[Ask the Coder](#)
[Benefits Center](#)
[BLS/ACLS Resources](#)
[Cattell Library Resources](#)
[CareForms](#)
[CE Calendar - Nursing](#)
[Central Supply Catalog](#)
[CME Tracking Calendar](#)

[HR Center](#)

[Initial Action Response Guide | BUR](#)

[Initial Action Response Guide | PEA](#)

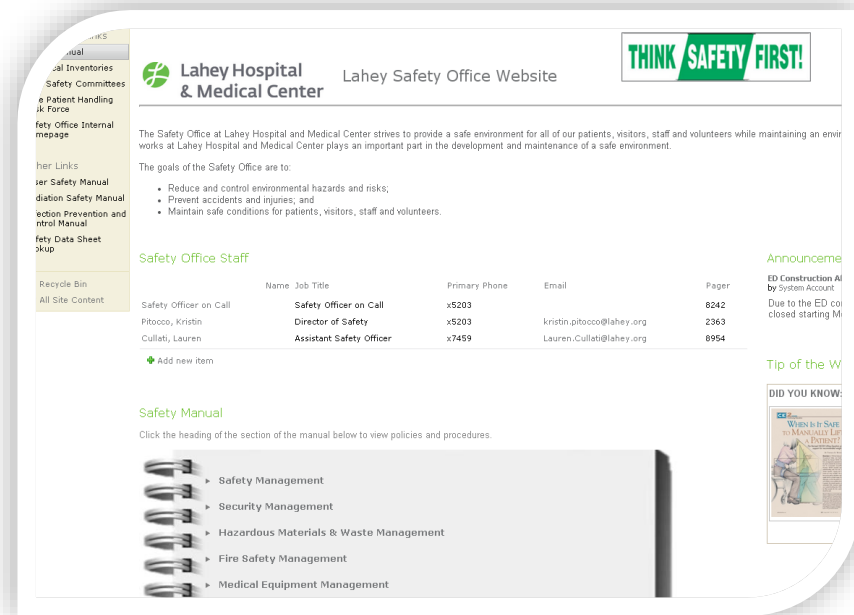
[Inpatient Consults](#)

[IS Support Center \(Help Desk\)](#)

[Joint Commission](#)

General Safety – Your Resources

- Lahey has several **Safety & EOC Committees** that review safety issues and trends throughout the organization
- All Lahey **Policies** are found on Massnet
- (Massnet → Colleague Resources → “Safety Manual”)
- Report unsafe conditions or incidents via **SafeSpot**
- Contact the **Safety Officer** at x5203 or safety@lahey.org with any safety questions or concerns



The screenshot shows the Lahey Hospital & Medical Center Safety Office Website. It includes a sidebar with links to various safety resources, a main content area with a mission statement and goals, a staff directory table, and a section for the Safety Manual.

Lahey Hospital & Medical Center Lahey Safety Office Website

THINK SAFETY FIRST!

The Safety Office at Lahey Hospital and Medical Center strives to provide a safe environment for all of our patients, visitors, staff and volunteers while maintaining an environment of safety at Lahey Hospital and Medical Center plays an important part in the development and maintenance of a safe environment.

The goals of the Safety Office are to:

- Reduce and control environmental hazards and risks;
- Prevent accidents and injuries; and
- Maintain safe conditions for patients, visitors, staff and volunteers.

Safety Office Staff

Name	Job Title	Primary Phone	Email	Pager
Pitocco, Kristin	Safety Officer on Call	x5203		6242
Cullati, Lauren	Director of Safety	x5203	kristin.pitocco@lahey.org	2363
	Assistant Safety Officer	x7459	Lauren.Cullati@lahey.org	6954

◆ Add new item

Safety Manual

Click the heading of the section of the manual below to view policies and procedures.

- ▶ Safety Management
- ▶ Security Management
- ▶ Hazardous Materials & Waste Management
- ▶ Fire Safety Management
- ▶ Medical Equipment Management

Announcements

ED Construction Al
by System Account
Due to the ED coi
closed starting M

Tip of the W

DID YOU KNOW?

When it's Safe
to Manually Lift
a Patient



Questions?