ENVIRONMENT OF CARE

UPMC Systemwide Annual Mandatory Safety Training
In order for us to create an environment of care, we must pursue a high level of QUALITY & SAFETY as we maintain safe and secure space for staff and customers.
Safety Management
REMEMBER!
ALL UPMC staff are responsible for following established safety policies/procedures and maintaining a safe environment.
Safety management includes the proper identification, reporting, and correction of safety hazards or risks.

It is an important part of QUALITY & SAFETY to respond to safety issues in your environment.

It is the RESPONSIBILITY of all staff to document and report safety issues or hazards to their supervisor/manager.
UPMC Supply Chain Management monitors product and equipment recalls and coordinates response actions.

Departments and staff are responsible for initiating an appropriate response to recalls/alerts and reporting any recalls/alerts received from manufacturers UPMC Supply Chain.
Certain areas may be safety sensitive due to the materials used or stored:
- Medical or chemical waste storage areas
- Biological or chemical laboratories
- Electrical, mechanical, and boiler rooms
- Nuclear medicine

Other areas may have an increased level of security sensitivity:
- Emergency rooms
- Pharmacy
- Operating rooms
- Medical records
- Nurseries
Corridor Guidelines:

Equipment may NOT be charged or plugged into outlets in corridors.

Fire and building codes require building corridors and hallways be kept clear at all times, to accommodate emergency and everyday use.
PERMITTED - Actively used by staff

Workstations on wheels are permitted in the main corridor as long as they are in use.

Corridor Guidelines:

Equipment may NOT be charged or plugged into outlets in corridors.

Fire and building codes require building corridors and hallways be kept clear at all times, to accommodate emergency and everyday use.
NOT PERMITTED

Nothing is permitted to be in the corridor that is not in use, which includes chairs.

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Fire and building codes require building corridors and hallways be kept clear at all times, to accommodate emergency and everyday use.

NOT PERMITTED

Trash should NEVER be left in the corridor unattended.
Corridor Guidelines:

Equipment may NOT be charged or plugged into outlets in corridors.

Fire and building codes require building corridors and hallways be kept clear at all times, to accommodate emergency and everyday use.

NOT PERMITTED

Nothing is permitted to be in the corridor that is not in use, which includes chairs.
All UPMC staff have the responsibility and the authority to report serious patient-related and general safety events to their direct supervisor.
As one of UPMC’s core values, **QUALITY & SAFETY** is at the center of all we do, and staff safety is just as important as patient safety.

Safety is everyone’s responsibility. By working together, we can help reduce hazards in our workplaces. If you know there is a problem or hazard in your work area or if you notice something wrong, report it to your supervisor in order to correct the situation.

And if you do sustain an injury or see a safety hazard, be sure to report it to your supervisor.

Working safely and reducing hazards shows **DIGNITY & RESPECT** for other employees, patients, and visitors.
All UPMC staff have the opportunity to anonymously report serious events to the Commonwealth of Pennsylvania’s Patient Safety Authority by using the Serious Event Anonymous Report Form found in public areas of the hospital.

In addition to the Commonwealth of Pennsylvania, all staff, patients, and family members have the right to report any patient safety concerns directly to The Joint Commission.
Body Mechanics
Five Principles of Body Mechanics

Utilizing proper body mechanics is essential for reducing injuries. To achieve proper body mechanics, the five principles of body mechanics should be followed while performing job tasks.

Use the links to the left to review the five principles of body mechanics.
Holding Objects:

- Always hold objects close to your body.
- Keep elbows close to your sides when holding an object.
- Hold objects close to your stomach.
Symmetry

- Equally use both sides of your body.
- Try to use both hands when possible, instead of just one.
Immediately report your injury or illness to your supervisor or the administrator on duty AND to WorkPartners online via the Human Resources tab in My Hub or by calling 1-800-633-1197.

Emergency care may be sought from the closest emergency facility for life-or-limb threatening conditions.

Non-emergency treatment and all follow-up care must be sought from a listed Workers' Compensation Health Care Panel provider.
EXCEPTION:
UPMC Bedford and HNA staff should notify their supervisor or Employee Health of any incidents.
Supervisors are responsible for the following:

The Supervisor reporting requirements are outlined in the UPMC Workers’ Compensation Policy.

- Making sure that injured staff receives the necessary treatment.
- Investigating and documenting the cause of the incident, including the implementation of corrective action to prevent future occurrences.
- Reporting the incident to UPMC WorkPartners Claims Management Services within 24 hours of the incident. (This task can be done by managers through My Hub or by calling UPMC WorkPartners at 1-800-633-1197.)
Security Management
For the safety of everyone, staff are responsible for reporting all security-related incidents to the security department or appropriate local authority to investigate.

If your facility does not have security officers on-site, please contact the administrator on duty (AOD) or the on-shift supervisor.
The UPMC Security Departments are responsible for addressing all security issues concerning patients, visitors, staff, and property. See Facility Specific Information.
General Security Functions

Review the list of general security functions to the right

- Protecting staff, patients, and visitors from harm and reasonable fear of harm.
- Maintaining a reasonable level of order, control, and safety.
- Enforcing rules and regulations.
- Protecting personal and UPMC property from theft, misuse, and vandalism.

Additional Responsibilities
ALL UPMC staff are provided with and **MUST** wear their ID badge in a visible manner.
A critical element in providing a safe/secure environment includes the identification (ID) of persons entering or working in UPMC facilities.

Patients are provided with proper ID in designated areas, such as all inpatient units and emergency departments.

Be especially cautious around sensitive areas, such as patient care areas, the pharmacies, and entrances into the facility.
Controlling Access to Sensitive Areas:

**TIP:** Sensitive areas, such as some inpatient floors, outpatient reception desks, and emergency departments, may be monitored by closed-circuit television cameras and/or equipped with panic alarms. Familiarize yourself with the locations of these devices.

- Be aware of and enforce the staff and visitor management plan that may be established for your area.

- Keep your UPMC ID badge, keys, and access codes in a secure location. Notify your supervisor and/or security if you lose or misplace any of them.
In hospital and non-hospital settings, visitors are NOT permitted to carry firearms.

In some locations, visitors possessing firearms and/or weapons MUST check them with the security department for proper storage while visiting the campus.
Please review the following policy:

Possession of Firearms or Weapons Policy

Visitors are NOT to carry firearms. Visitors possessing fire arms must check them with the security storage while visiting the campus.
Condition L is a code that is called if there is a patient who has wandered away from the unit without permission.

Security is responsible for managing the Condition L search process for “at-risk” missing patients.

In non-hospital settings, the Condition L policy is managed by the administrator/supervisor on off-shifts.
Be aware of forensic patients.

A forensic patient is a patient that is in the custody of law enforcement. The patient may be brought from prison or jail; may have been arrested or in the process of being arrested prior to admission; or may be arrested by law enforcement upon discharge.
When dealing with forensic patients, be aware of the following information:

- Notify security if you become aware of a forensic patient in your department or unit.
- Security will interact with police or other agencies to ensure the safety of staff, visitors, and other patients.
- Stay out of the way of an escapee to prevent potential injury and contact security immediately.
- Try to provide as much information as possible to the search team.
It is NOT the responsibility of UPMC or UPMC staff to restrain these patients from leaving, unless it is imperative for their medical treatment.
UPMC has a “zero-tolerance” Workplace Violence policy, which is accessible on the Infonet.
Need Help?
Who Can I Call?

If you need help dealing with workplace violence, consult with your manager, human resources, a security representative, or LifeSolutions. LifeSolutions can be reached at 1-800-647-3327.

If you are injured, contact WorkPartners at 1-866-229-3507 or the nearest emergency department.
Waste Management & Hazardous Materials
Departmental chemical inventories,
Including the name and quantity of chemicals in each area. The inventory must be updated at least annually.

Safety Data Sheets (SDS)
See Facility Specific Information for the procedure to access an SDS.

Proper labeling of chemicals
Please review the Written Hazard Communication Plan. See Facility Specific Information.
The SDS is organized into 16 user-friendly sections and includes information such as:

- The properties of each chemical.
- The physical, health, and environmental health hazards.
- Protective measures.
- Safety precautions for handling, storing, and transporting the chemical.

Familiarize yourself with a chemical's SDS before beginning to work with the chemical.
**SDS SECTIONS**

1. Identification
2. Hazard(s) identification
3. Ingredients
4. First-aid measures
5. Fire-fighting measures
6. Accidental release measures
7. Handling and storage
8. Exposure controls/personal protection
9. Physical and chemical properties
10. Stability and reactivity
11. Toxicological information
12. Ecological information
13. Disposal considerations
14. Transport information
15. Regulatory information
16. Other information

* = These sections are optional
When using a chemical, the pictograms, signal words, hazard statements, and precautionary statements will help you understand how to safely use the product.

In the event of a spill or exposure, the precautionary statements will guide the proper response.
PRODUCT LABELING

Click on the pulsing icons for information about OSHA product labeling.
Product Name
Name of the product and information on the supplier.
Handling and Storage

Handling and storage, PPE, first aid, and fire response information.
Pictogram

Pictogram showing hazards identification. Signal words: Danger, Warning, Caution.
Additional Information

This section contains any additional information important to a specific chemical.
LABEL PICTOGRAMS:

Click and drag all of the label pictograms over the correct description then, click submit.
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TYPES OF WASTE

Review information about the different types of waste found at UPMC campuses.

If you need additional support, please contact your housekeeping or environmental services manager or director.
RECYCLABLE WASTE
Do you know...?

- Where the recycling bins are located within your facility?
- What items are currently being recycled within your facility?
- The color of the can liner used in the various recycling containers?
- Who to call if you notice that a recycling bin needs to be emptied?
- If it is acceptable to co-mingle regular waste with recycled waste?

If you are not sure about any of the questions above, please contact your Housekeeping or Environmental Services Director or Manager.
RECYCLABLE WASTE

Practice Recycling

- Recycling requires commitment to proper disposal.
- Placing the wrong item in the wrong container will lead to additional costs and rejection by the recycler.

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<th>Recycling/Blue Bins</th>
<th>Confidential Document Bins</th>
<th>Facilities Department</th>
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<th>Dietary Department</th>
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<tr>
<td>Plastic</td>
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<td>Light Bulbs</td>
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</tr>
<tr>
<td>Paper</td>
<td>Microfiche</td>
<td>Cardboard</td>
<td></td>
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<tr>
<td>Aluminum Cana</td>
<td>Confidential Material</td>
<td>Wooden Pallets</td>
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</tbody>
</table>
HAZARDOUS WASTE

- Hazardous wastes are chemicals that are considered to be flammable, toxic, reactive, or corrosive.
- This includes mercury and mercury-containing equipment, used oil, paint thinner, alcohol, xylene, lead and lead aprons, collodion, hydrochloric acid, batteries, fluorescent lamp bulbs, etc.
- Hazardous waste should **NEVER** be placed in RED BAGS!
- Environmental Health and Safety (EH&S) has procedures for the disposal of hazardous waste. The procedures are outlined in the Waste Management Policy.
PATHOLOGICAL WASTE

- This includes items such as tissue specimens, organs, animal carcasses used in research, etc.
- Pathological waste can be placed in red biohazard boxes; however, the outer cardboard box MUST be marked "Pathological Waste."
RADIOACTIVE WASTE

This includes items contaminated with radioactive materials.
REGULATED MEDICAL WASTE (INFECTIONOUS) DISPOSAL

- There may be more restrictive sorting requirements in areas like the O.R. or other invasive procedural departments.
- Items that are visibly contaminated with blood or body fluids are considered infectious. Diapers, masks, gloves, or gowns generally are not infectious, unless contaminated with blood or body fluids.
- Infectious waste should be placed in RED biohazard infectious waste bags or an approved sharps container.
- **Exception:** All linen, regardless of the degree of soiling, are returned to the laundry and not discarded. NEVER place linen in the red biohazard bags.
- Non-infectious items, such as regular trash, chemicals, etc., should NEVER be placed into red biohazard bags.

More Information
CHEMOTHERAPEUTIC WASTE

This includes items contaminated with antineoplastic agents.
GENERAL WASTE

This includes items such as food waste, coffee cups, etc.
BATTERY DISPOSAL

- For battery disposal within the hospitals, contact the safety officer.
- For battery disposal in non-hospital sites, contact BioTronics, ISD, or Environmental Health & Safety.
- Bulk battery disposal occurs through scheduled pickups managed by various departments. The appropriate department for your business unit will indicate when internal battery collections will occur; please contact them regarding scheduling.

All alkaline batteries (A, AA, AAA, C, D, 9 volt) are considered general waste and may be discarded in normal trash collection. Specific business units may also recycle these batteries.
Compressed Gas Cylinder Safety

- Cylinders should be labeled to identify the contents.
- Gas cylinders **MUST** be properly secured at all times to prevent tipping, falling, or rolling.
- All compressed gas cylinders **MUST** be segregated:
  - In the hospital as “full,” “partial,” or “empty.”
  - In other areas as “full” or “empty.”
  - See Facility Specific Information.
- Quantities of stored gas cylinders (full and empty) should be as small as possible.
- The storage areas should be properly labeled to indicate the PRESENCE of oxygen.
- Transportation mesh shields and other combustible attachments should be removed from tanks.
Fire Safety Management
Most facilities use a coded term for fire emergencies.

Fire alarms in some facilities will be announced in the “fire zone.” The fire zone is defined as the floor affected, one floor above, and one floor below. See Facility Specific Information.
Staff should avoid using elevators in areas where a fire emergency has been reported.
Oxygen Shut-off

In the event of a fire, it may be necessary to shut-off supplied oxygen. To do this, follow the directions for your facility.
**RAC E**

**Rescue** everyone from immediate danger.

Pull the nearest pull station **Alarm** and dial the emergency number for your location to report the fire. Some non-hospital locations may dial 911.

**Contain** the fire/smoke by closing doors and windows.

**Extinguish** the fire if it is safe to do so. It may also stand for **Evacuation** in certain facilities.
Evacuation Procedures

Hospital buildings follow the "shelter-in-place" principle when a fire emergency occurs. Evacuation of the hospital typically occurs only when instruction is given by the Fire Marshal or local Fire Department.

Most non-hospital buildings evacuate upon activation of the fire alarm. See Facility Specific Information.

Hospital Evacuation Scenario
Smoking is prohibited in ALL UPMC facilities and near hazardous areas, such as exterior oxygen storage.

Open flames (candles, displays, etc.) are also prohibited.

Clean Air/Smoke-Free Campus Policy
<table>
<thead>
<tr>
<th>CLASS A</th>
<th>CLASS B</th>
<th>CLASS C</th>
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<td>FLAMMABLE LIQUIDS</td>
<td>ELECTRIC EQUIPMENT</td>
</tr>
<tr>
<td>COMBUSTIBLES</td>
<td>Fires involving oils, gasoline,</td>
<td>Fires involving wiring, fuse</td>
</tr>
<tr>
<td></td>
<td>kerosene, and common organic</td>
<td>boxes, and other energized</td>
</tr>
<tr>
<td></td>
<td>solvents used in laboratories</td>
<td>electrical equipment</td>
</tr>
</tbody>
</table>

- **CLASS A**: Fires involving paper, cloth, wood, rubber, and many plastics.
- **CLASS B**: Fires involving oils, gasoline, kerosene, and common organic solvents used in laboratories.
- **CLASS C**: Fires involving wiring, fuse boxes, and other energized electrical equipment.
Fire Extinguishers

Most extinguishers utilized at UPMC are multipurpose, **Class ABC extinguishers**. This type of extinguisher is good on all three classes of fires.

ABC extinguishers are red in color and contain dry chemical as the extinguishing agent.

NEVER use a **Class A (Water)** extinguisher on a Class B or Class C fire.
In the event of a fire, remember PASS:
P - Pull
A - Aim
S - Squeeze
S - Sweep
UPMC staff should NEVER use a fire hose. Fire hoses installed in UPMC buildings are for use by municipal firefighters ONLY.
Keep your environment safe by follow the corresponding fire prevention tips.

- Keep the work area clean and free of clutter and trash.
- Keep all storage at a minimum of 18 inches below the ceiling.
- Eliminate all corridor storage.
- Refrain from charging electrical equipment in the corridor.
- Identify location of fire systems and equipment and review how to use/activate them.
- Review responsibilities for shutting off oxygen during an emergency.
- Use and store only the minimal amounts of flammable and combustible materials in your area.
- Decorations **may not** be hung from ceilings, ceiling light fixtures, sprinkler heads, or on doors of storage rooms, fire or smoke doors, offices, or patient rooms.

- Non-combustible artificial trees and decorations must have UL or similar label.

- Decorations should be arranged so they do not interfere with corridors, exit doors, fire alarm pull stations, fire extinguishers, fire hoses, oxygen shutoff valves, or electric outlets.

- Decorations must be placed away from heat sources and/or electrical equipment.

- Decorations are prohibited in contaminated areas such as soiled utility rooms.
Medical Equipment Management
Malfunctioning equipment should be removed from service immediately and red-tagged if appropriate. Notify the Clinical Engineering (BioTronics) department.

- **Never** use medical equipment that has been removed from service.
- **Never** use medical equipment that you have not been properly trained to operate.
- **Never** use new medical equipment that has not obtained an incoming inspection by Clinical Engineering (BioTronics).
- Carefully inspect equipment before each use.
SAFE MEDICAL DEVICE ACT

Requires that anyone who witnesses, discovers, or otherwise becomes aware of information that a piece of medical equipment has, may cause, or contributes to the injury or death of a patient is responsible for immediately assessing the patient, removing the equipment from service, and notifying the proper manager.
Removing Equipment from Service

Review information about removing malfunctioning medical equipment from service by clicking the numbered buttons to the right.
Removing Equipment from Service

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Remove the damaged/broken equipment from service.
Removing Equipment from Service

Review information about removing malfunctioning medical equipment from service by clicking the numbered buttons to the right.

Report the incident to your manager/supervisor.
Removing Equipment from Service

Review information about removing malfunctioning medical equipment from service by clicking the numbered buttons to the right.

Fill out the red tag with requested information; remove the white peel-off label from the tag and attach the red tag to equipment.
Removing Equipment from Service

Review information about removing malfunctioning medical equipment from service by clicking the numbered buttons to the right.

In an **inpatient setting**, complete an Initial Incident Event Report (IIER) within Risk Master and report the incident to the Patient Safety Officer/Risk Management.
Removing Equipment from Service

Review information about removing malfunctioning medical equipment from service by clicking the numbered buttons to the right.

Contact Clinical Engineering (BioTronics) as soon as possible to assess the equipment.
What is a utility system?

Electric
Water
Air conditioning
Medical gases
Heating
Elevators
Tube systems
Ventilation
Hospitals and other designated buildings are equipped with **red emergency power outlets**. These outlets should be used for critical equipment (e.g., ventilators, IV pumps, etc.).

These outlets are connected to emergency generators and may experience a momentary (approx. 8-10 sec.) power interruption during the transfer over to generator power.
Extension cords may only be used in emergency situations for a short time.

Contact maintenance if additional outlets are needed.

Power strips may only be used in patient care areas under certain circumstances. Check with your hospital’s Safety Officer for proper use.

Daisy chaining (connecting multiple power strips) is prohibited.
SPACE HEATERS

Oil filled electric radiator or ceramic heaters (which do not exceed 212°F) are permitted in non-patient care areas, but must be plugged directly into a wall outlet.

Open element space heaters with exposed coils are NOT permitted.

NONE of these items are permitted in any UPMC Senior Communities facility or the U.S. Steel Tower.
At UPMC, **Quality & Safety** means that we provide a safe environment for staff and customers by preparing our team to address emergency situations, security issues, and handling medical equipment and waste materials.

**Quality & Safety** cannot be sacrificed or compromised.