UT GME Resident Orientation 2022

Erlanger Health System Safety and Emergency Preparedness

- General Safety
- Hazard Communication
- Fire Safety
- Electrical Safety
- Slips, Trips and Falls
- Emergency Preparedness
- Infant/Child Abduction
- Active Shooter





Keys to Safety

- Prevention, planning and preparation are key to keeping the workplace safe in any adverse situation or event.
- EHS has developed policies and protocols that outline expected behaviors and roles which are designed toward maintaining a safe environment.

Hazards

- OSHA has defined 5 types of hazards
 - Biological
 - Chemical
 - Psychological
 - Physical
 - Environmental/ mechanical/biochemical



Workplace Hazard Examples

Biological

- Caused by infectious agents such as:
- COVID-19
 - VRE
 - MRSA
 - HBV
 - HBC
 - Tuberculosis



Chemical

- Substances that are toxic or irritating to the body:
 - Detergents
 - Solvents
 - Disinfectants
 - Sterilizing agents
 - WAG's*
 - Hazardous drugs
 - Mercury

*WAG=Waste anesthetic gases⁴

Workplace Hazard Examples

Psychological

- Situations or events that yield emotional stress or strain such as:
 - Working with patients who have life-threatening conditions
 - Working with demanding patients or family
 - Death
 - Overwork/overtime
 - Understaffing
 - Inadequate resources
 - Equipment malfunctions/outages
 - Lack of control within the work setting

Physical

- Environmental exposures which may result in physical harm such as:
 - Radiation
 - Lasers
 - Noise
 - Electrical equipment
 - Extreme temperatures
 - Violence
 - Patient/family
 - Peer to peer
 - Bullying

Workplace Hazard Examples

- Environmental/mechanical/biochemical hazards can be described as adverse events which may lead to accidents, injury, strain or discomfort such as:
 - Lifting and moving patients
 - Repetitive tasks
 - Tripping hazards
 - Air quality
 - Cluttered work environment
 - Confined space

Hazards and Healthcare Professionals

- Safety and awareness of hazards is important for those with direct patient contact and care. Knowing how to protect yourself, your patients/families and your peers is central to providing for safe quality care outcomes.
- Erlanger promotes and advocates that physicians, clinical and non-clinical employees wash their hands to protect the patient and family health as well as protect personal

- Biological infectious agents enter the body through mucous membranes, needle sticks, puncture wounds, cut or cracked skin
 - Examples include:
 Blood, other body
 fluids or body tissues



Safeguards include appropriate use of **PPE*** when handling patient blood, body fluids, whenever there is a risk for contact, and with all invasive procedures

*PPE= Personal Protective Equipment

- Chemical hazards are those items which require a warning label and should have a SDS* sheet
- Safeguards include:
 - Being proactive
 - Appropriate warning label on chemical container
 - Identifying where the SDS can be located on the intranet
 - Recognizing how to use the chemical correctly
 - Understanding how to correctly clean up a spill
 - Wearing the appropriate PPE
 - Practicing Standard Precautions

 Psychological stresses are part of the healthcare workplace; however, learning how to successfully deal with workplace stressors can greatly reduce its impact on the employee.



- Safeguards include but are not limited to:
 - Department debriefing
 - Group/peer support
 - Communication with manager
 - Ensuring your physical health through nutrition, exercise and rest
 - Asking for help from Erlanger HR EAP*

*EAP= Employee Assistance Program¹⁰

- Physical hazards result from a variety of exposure types such as:
 - Radiation
 - Noise
 - Electrical equipment
 - Violence

- Safeguards begin with:
 - Adhering to the rule of time, distance and shielding with potential radiation
 - Reducing noise in your department or unit as much as possible
 - Recognizing symptoms of noise fatigue (such as alarm fatigue) and taking steps to prevent this
 - Recognizing how to use electrical equipment safely and who to call for repairs
 - Training in crisis prevention and de-escalation techniques

- Environmental, mechanical and biochemical hazards occur with:
 - Improper use of body mechanics
 - Improper use, care and clean up for your environment
 - Improper use of equipment or resources



- Safeguards include but are not limited to:
 - Knowing where information or resources are housed to give you the information or knowledge needed to protect your patients, family, peers and yourself
 - Removing and reporting equipment malfunctions
 - Being proactive with safety at all times
 - Reporting any concerns or questions to the Safety Officer: John Loetscher at 423-778-8190

Important Contact Information

- Safety Officer and Corporate Preparedness Officer: John Loetscher, VP Facilities x8190
- Medical Director, EROC, and Pre-Hospital and Disaster Medicine for Erlanger: Ron Buchheit, MD, FAAEM, x7628, <u>Dr.Ron.Buchheit@erlanger.org</u>
- Emergency Management & Special Operations Manager/Flight Paramedic: Seth Gentry, FP-C, NRP x8021, <u>Seth.Gentry@Erlanger.org</u>
- Maintenance/Engineering/Biomed: x7777
- Also call x7777 if you need to identify a Safe Zone (SZ) near the area in which you are located. If no answer, it likely means the system is overloaded with calls, so dial 911 to reach the local 911 operators
- Security: x7614
- Security Emergency: x6911 (Off Campus locations should dial 911 for security emergencies)

Fire Safety

- **Prevention** is the key to fire safety
- Erlanger is a <u>tobacco-free campus</u>

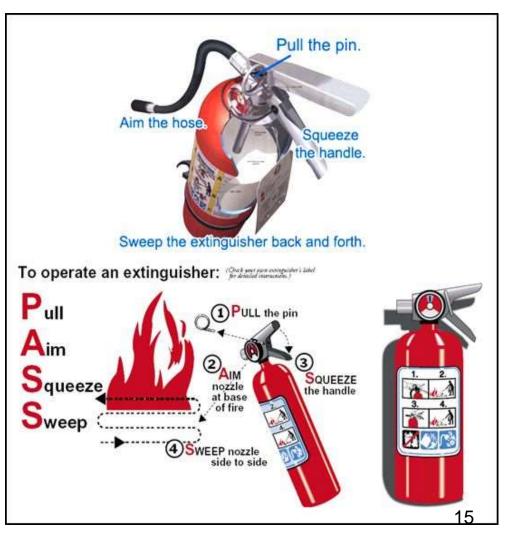


- Do not use faulty equipment; remove it and notify Engineering, Maintenance, or BioMed (X 7777)
- In case of fire, practice **RACE**:
 - Remove the person from danger
 - Activate the fire alarm
 - Contain the fire
 - Extinguish the fire/Evacuate the area

Fire Safety

When using a fire extinguisher, remember to: PASS

- Pull the pin
- Aim the nozzle
- Squeeze the trigger/levers
- Sweep side to side



References

Fire Safety ADM 8316.1060

Slips, Trips, and Falls

 Prevention is the best defense for slips, trips and falls



Slips, Trips, and Falls

- Slips is a of loss of friction
- Prevention of slips can be accomplished using a few key actions. Examples are:
 - Keep floors clean and dry
 - Use rubber mats and nonskid strips to increase friction
 - Secure rugs with skidresistant backing
 - Post safety signs

- Trips is a loss of footing.
- Trips can be prevented by the following examples:
 - Keep floors uncluttered
 - Repair uneven flooring
 - Use proper lighting
 - Post safety signs

Slips, Trips, and Falls

- Most falls that occur are "foot" falls or "short" falls, meaning that the fall is the result of slipping or tripping.
- Fall prevention includes, but is not limited to, the following examples:
 - Keep stairs/steps clean of clutter and well lit
 - Be aware of tubing, monitor cables, etc. in patient care areas
 - Maintain your balance when stepping up or down
 - Staircases should have sturdy handrails
 - Select ladders that reflect the height you need
 - Always lock ladder into position before climbing
 - Hold ladder rail with both hands

Disaster Safety

- Disasters can be described as:
 - Natural Severe Thunderstorms, Tornadoes, Winter Weather
 - Technological Utility Failures
 - Major transportation accidents
 - Terrorism
 - Nuclear, biological, chemical and radiologic events

Emergency Preparedness

To appropriately respond to any disaster event:

- Identify
 - What disasters could impact this area?
 - (Hamilton County Severe Weather)
 - What is the probability it will?
 - What strategies are necessary for dealing with each event?

- Prepare
 - EHS has an Emergency Operations Plan (EOP).
 Refer to Emergency Operation Plan, All Hazards 8316.221
 - Employees are educated on disaster response and role expectations as outlined in their department.

Code Definitions.....

- Code Red
- Code Orange
- Code Black
- Code Evacuation
- Code Triage Standby
- Code Triage Activate
- Code Lockdown
- Code Pink
- Code Ella
- Code Grey
- Code Grey B
- Code Silver
- Code Blue
- Code "Five"

Fire **Hazardous Material** Severe Weather Evacuation Impending Event **Emergency Operation Plan** Activated **Facility Lockdown** Infant/Child Abduction **Missing Adult Patient Security Needed Bomb Threat Active Shooter** Adult Cardiac Arrest

Pediatric Cardiac Arrest

Your Responsibilities.....



- When you hear Code Triage.....Respond promptly to the Command Center located in the Probasco Auditorium (Erlanger Medical Mall Ground Floor, off the C Elevator and near the Valet Parking entrance, and the Plaza Ambulatory entrance. The Command Center number is <u>9100.</u>
- You will report to Probasco for incident accountability and to receive their assignments during the Disaster if the code is enacted. You may be required to leave your name, cell # (or pager number if appropriate) so you can be contacted if needed for an assignment.
- After you report to the Probasco Auditorium Command Center, you will be informed regarding where to go next. If you have questions, please ask the person in charge at the Command in the Hospital Command Center (after hours and weekends) at extension 9100.
- Remember..... YOUR actions may save a life!





Infant and Child Abduction

- It is the intent of EHS/Children's Hospital to proactively protect neonatal, infants and pediatric patients. To facilitate this:
 - All newborns are equipped with security devices placed on the newborn at birth
 - Children's Hospital, BEH Women's Services and Erlanger East employees wear color coded ID badges
 - <u>All</u> Employees/Physicians/Students/Volunteers/Vendors are required to wear ID Badges
 - Staff are educated on potential abductor behaviors

Code Pink

- Code Pink refers to an infant or child abduction (Refer to policy 8316.008)
- Synopsis of Code Pink:
 - Call Security at x6911
 - Description of infant/child and abductor
 - Assigned personnel will be stationed at exits
 - Unit will be searched
 - Marketing/Public Relations communicates with media

• Code Silver refers to an Active Shooter (Refer to policy 8316.1073)

Synopsis of Code Silver:

- Call Security at x6911
- Beware of your environment & possible dangers
- Take note of the two nearest exits in any facility you visit.
- If you are in an office, stay there and secure the door and avoid windows.
- If you are in a hallway, get into a room and secure the door.
- As a last resort, attempt to take the active shooter down. When the shooter is at close range and you cannot flee, your chance of survival is much greater if you try to incapacitate him/her.

 How to respond when an active shooter is in your area Quickly determine the most reasonable way to protect your own life.
 Remember that visitors, patients and vendors are likely to follow the lead of employees and managers during an active shooter situation.

Evacuate

- If there is an accessible escape path attempt to evacuate the premises, be sure to:
- Have an escape route and plan in mind.
- Evacuate regardless of whether others agree to follow.
- Leave your belongings behind
- Help others escape if possible
- Prevent individuals from entering an area where the active shooter may be

- Evacuate (Continued)
 - Keep your hands visible
 - Follow the instructions of any police officers
 - Do not attempt to move wounded people
 - Call 911 when you are safe

Hide Out

- If evacuation is not possible find a place to hide where the active shooter is less likely to find you.
- Your hiding place should: (Contact Security for assistance to designate Safe Zone if area has not been predetermined "SZ"):
 - Be out of the active shooter's view
 - Provide protection if shots are fired in your direction (i.e. an office with a closed and locked door)
- To prevent an active shooter from entering your hiding place:
 - Lock the door
 - Blockade the door with heavy furniture

- If the active shooter is nearby:
 - Lock the door
 - Silence your cell phone and/or pager
 - Turn off any source of noise (i.e. radios, televisions)
 - Hide behind large items (i.e. cabinets, desks)
 - Remain quiet
- If evacuation and hiding out are not possible:
 - Remain Calm Dial 911, if possible, to alert police to the active shooter's location
 - If you cannot speak leave the line open and allow the dispatcher to listen

- Take action against the active shooter as a last resort and only when your life is in imminent danger attempt to disrupt and/or incapacitate the active shooter by:
 - Acting as aggressively as possible against him/her
 - Throwing items and improvising weapons
 - Yelling
 - Committing to your actions

• Actions of the Security Department

The Hospital Security Dept will respond in force. Their first priority shall be to:

- Secure a perimeter around (also above and below if possible) the active shooter.
- Attempt to engage the shooter in conversation, ask what's wrong, are they hurt, etc. This may stop the shooting and allow time for more back up

- Actions of the Security Department (Continued)
 - Secure a perimeter around (also above and below if possible) the active shooter.
 - Attempt to engage the shooter in conversation, ask what's wrong, are they hurt, etc. This may stop the shooting and allow time for more back up
 - Use the Hospital off duty law enforcement when possible.
 - Only return fire when your life or the life of another is in jeopardy and when safe to do so.
 - All security officers on post shall wear a ballistic vest.

- How to Respond When Law Enforcement Arrives
 - Secure a perimeter around (also above and below if possible) the active shooter.
 - Law enforcement's purpose is to stop the active shooter as soon as possible. Officers will proceed directly to the area in which the last shots were heard.
 - Officers usually arrive in teams of four (4)
 - Officers may wear regular patrol uniforms or external bulletproof vests, Kevlar helmets and other tactical equipment.
 - Officers may be armed with rifles, shotguns, handguns
 - Officers may use pepper spray or tear gas to control the situation
 - Officers may shout commands and may push individuals to the ground for their safety.

- How to react when law enforcement arrives:
 - Remain calm and follow officers instructions
 - Put down any items in your hands (i.e. bags, jackets)
 - Immediately raise hands and spread fingers
 - Keep hands visible at all times
 - Avoid making quick movements toward officers such as holding on to them for safety
 - Avoid pointing, screaming and/or yelling
 - Do not stop to ask officers for help or direction when evacuating just proceed in the direction from which officers are entering the premises
 - Information to provide to law enforcement or 911 operator:
 - Location of the active shooter
 - Number of shooters if more than one

- How to react when law enforcement arrives:
 - Information to provide to law enforcement or 911 operator:
 - Physical description of shooter(s)
 - Number of potential victims at the location
- The first officers to arrive to the scene will not stop to help injured persons. Expect rescue teams comprised of additional officers and emergency medical personnel to follow the initial officers. These rescue teams will treat and remove any injured persons. They may also call upon able-bodied individuals to assist in removing the wounded from the premises.
- Once you have reached a safe location or an assembly point you will likely be held in that area by law enforcement until the situation is under control and all witnesses have been identified and questioned. Do not leave until law enforcement authorities have instructed you to do so.

Human Resources Responsibilities

- Conduct effective employee screening and background checks
- Encourage reporting signs of potentially violent behavior
- Counseling services available to employees Critical Incident Stress Debriefing/Counseling

Reactions of Managers during an Active Shooter Situation

- Employees and visitors and others are likely to follow the lead of managers during an emergency situation.
- During the emergency managers should be familiar with the departmental emergency operation plan and be prepared to:
 - Take immediate action
 - Remain calm
 - Lock and barricade doors
 - Evacuate staff and customers via a preplanned evacuation route to a safe area.
 - Shelter in place (Designated "Safe Zones "SZ"

Managing the Consequences of an Active Shooter Situation

After the active shooter has been incapacitated and is no longer a threat, human resources and/or management should engage in post-event assessments and activities including:

- An accounting of all individuals at a designated assembly point to determine who if anyone is missing and potentially injured
- Determining a method for notifying families of individuals affected by the active shooter including notification of any casualties
- Assessing the psychological state of individuals at the scene and referring them to health care specialists accordingly
- Identifying and filling any critical personnel or operational gaps left in the organization as a result of the active shooter

- Due to the increase in violence and shootings recently (nationwide) --
 - Erlanger Administration is discussing any needed changes to this policy.
 - Erlanger is also considering and Active Shooter Drill and Training.
 - The University leadership has requested that our Residents, Fellows, Faculty, and Staff be included in these sessions.

?? QUESTIONS ??

Contact Dr.Ron.Buchheit@Erlanger.org



Keys to Safety: Prevention, Planning and Preparation