

UW Medicine

2017 ANNUAL REFRESHER TRAINING

**UNIVERSITY OF WASHINGTON MEDICAL CENTER
INFORMATION SHEET**

MISSION & PATIENTS ARE FIRST

MISSION

University of Washington Medical Center Improves Health by Providing Exceptional Patient and Family Centered Care In an Environment of Education and Innovation.

VISION

To be the Safest Medical Center.

To be a Thriving Medical Center.

To be a Medical Center of Choice for patients, faculty and staff.

CULTURAL COMPETENCY

UWMC supports equal access to health care services for all patients, no matter where they were born, what language they speak, or what their hearing status may be. Staff from Interpreter Services provide language support for patients by telephone, in person in the medical center, and in video format.

Call Interpreter Services at 206-598-4425, or email intrpsvc@u.washington.edu.

INFECTION PREVENTION

Utilize Powered-Air-Purifying Respirators (PAPR) should be reserved for aerosolizing/cough producing procedures.

To report equipment failures: Contact Clinical Engineering

To report exposures or concerns: Contact Employee Health/Infection Prevention/Nursing Supervisor

Antimicrobial Stewardship

Did you know?

- 50% of hospitalized patients are given an antibiotic
- 1 in 8 clinic patients are given an antibiotic
- AND at least 30% of these prescriptions are medically unnecessary
- Antibiotics are associated with:
 - Adverse reactions (like allergic reactions)
 - Increased bacterial resistance, leading to more illnesses, complications, and deaths
 - Increased C. difficile infections
- How can I help?
 - Know why your patients are taking antibiotics and for how long
 - Educate patients that the majority of colds and upper respiratory infections are caused by viruses and do not require antibiotic treatment
- Questions?
 - Contact the Antimicrobial Stewardship Program at your facility
 - HMC/UWMC Antibiotic Guidelines are available at: <https://occam.uwmedicine.org>

PATIENT SAFETY



The Patient Safety Network (PSN) is the online incident reporting system for University of Washington Medical Center.

What do you need to know about the Patient Safety Network:

- The Patient Safety Team reviews every reported event.
- Emails are immediately sent to managers.
- Data is reviewed for trends.
- Events and trends may be used to support system changes.
- PSN is a way to get the right people notified of your concern.
- Contact your Patients Safety Network representative to find out how to anonymously report events.

Where can you access the PSN?

- The icon to access the PSN is on any UW Medicine computer or desktop – correct??? Not...
- Easy to access and easy to use

ENVIRONMENT OF CARE

Medical Emergencies in the Medical Centers: **CALL 222**

Activate when staff discovers a person who is:

- In cardiac and/or respiratory arrest
- Unconscious and does not appear to be breathing
- Unconscious and breathing

- Unresponsive or unable to communicate
- Presenting symptoms of stroke

Initiate Basic Life Support (CPR), if trained to do so.

EMERGENCY CODES

EMERGENCY CODE	EMERGENCY SITUATION
Code Red	Fire
Code Blue	Medical Emergency
Code Orange Internal	Chemical/Radiation Spill
Code Orange External	Victim Decontamination
Code Gray	Out of Control Patient
Code Silver	Active Shooter
Amber Alert	Infant Abduction
Code Zebra	Informational Alert
External Triage	External Disaster
Internal Triage	Patient Evacuation/Internal Disaster

A **Code Blue** will be paged to the Code Team who will respond to the event.

For Medical Emergencies in other offsite locations or outside the Medical Centers: **CALL 911**

Code Silver - Active Shooter: An emergency response to an active shooter event.

Main UWMC hospital - **DIAL 222**

Dial 222 to reach the hospital operator to report a Code Silver and describe a hostage situation or active shooter.

Other UWMC off-site locations - **DIAL 911**

Outside and off site clinics call 911 to report a hostage situation or active shooter.

ACCESSING SDS/MSDS

Mychem website: You can find the link “MyChem/MSDS” on the intranet under “Top Tools”



In the event of a MyChem outage, Security has redundant access to all SDS/MSDSs.

Call Security Services/Public Safety when an SDS/MSDS is needed urgently and MyChem is not functioning.

ACCESS TO PERINATAL UNITS – STAFF RIGHTS & RESPONSIBILITIES






All inpatient infant units are secured (4SA-NICU, 6E-Labor & Delivery, 6S-Antepatum and 5S-Maternal Infant Care).

Authorized staff are provided access via their UWMC employee ID badge based on the need for immediate and repeated access for their individual work.

Your access permits ONLY you to enter. You may NOT admit others by using your badge.

Staff who demonstrate a failure to assure integrity of these or any secured units/areas may be subject to loss of departmental access and/or corrective action up to and including dismissal.

WASTE SEPARATION (SEE NEXT PAGE)

Linen Waste (Reusable)	Pharmaceutical Waste (Chemical Waste)	Regulated Medical Waste (Sharps Waste)	Regulated Medical Waste (Non-Sharp)	Solid Waste-Trash (Non-hazardous Solids)
<ol style="list-style-type: none"> All soiled linen should be returned to the Laundry Torn, stain, or unacceptable linen should be placed in the soiled linen and returned to the Laundry for inspection Soiled linen must be kept separated from clean linen Soiled linen is handled to minimize microbial contamination into the environment and protect employees from body substance pathogens 	<p>A non-viable pharmaceutical is an item that cannot be used or returned to Pharmacy</p> <ol style="list-style-type: none"> Syringes, tubex, carpjects without sharps with pourable residual medical IV bags and tubing with pourable residual medication Partially used/residual pharmaceuticals Chemical spill clean-up Dropped items that cannot be given to patients (pills, patches or gum). Debris associated with seven P-Listed Drugs: <ol style="list-style-type: none"> Arsenic Trioxide Epinephrine Nicotine Phentermine Physostigmine Physostigmine salicylate Warfarin ~0.3%. All chemotherapy drugs and debris Used narcotic patches cut in half 	<p>All hypodermic needles, IV tubing with needles attached syringes, scalpel blades, lancets and glass slides. Trocars, introducers, guide wires, sharps from procedures and specimen devices</p> 	<p>Human blood and blood products Human blood and blood components in free flowing form including materials that are saturated and dripping with blood or bodily fluids.</p> <ol style="list-style-type: none"> Blood tubing/bags/hemovac/pleur-evacs Soaked/dripping bloody dressings Plastic bottles with bloody fluids Suction canisters and liners with bloody fluids or other potentially infectious materials All disposable items soaked or dripping with blood or other potentially infectious material 	<ol style="list-style-type: none"> Non-hazardous debris Non-recyclable packaging Dressings Chux Diapers Gloves Empty foley bags and other drainage bags Disposable patient items Non-dripping gauze and bandages 
UWMC Consolidated Laundry	Hazardous Waste Incinerator in AR	Autoclaved UWMC Waste Management	Autoclaved UWMC Waste Management	Municipal Waste Landfill in Oregon

MEDICAL EQUIPMENT FAILURES

All medical equipment used in patient care areas is inspected before first use.

Loaner equipment, rental, physician owned, research evaluation equipment must also be inspected prior to being used in a patient care area.

EQUIPMENT FAILURE TO DOS

Report all medical equipment problems.

Equipment involved with possible injury or death of a patient must be removed immediately. **DO NOT** change device settings!

Report all equipment-related injuries, 'near-misses,' or potential problems.

Use of patient-owned equipment is strongly discouraged. Patient-owned equipment shall be inspected by clinicians to assure proper functioning and safety.

Extension cords are not allowed in patient care areas, unless approved.

UTILITY ISSUES & FAILURES

Within ten seconds of a power outage, specific areas and essential systems will automatically transfer to the emergency power system.

POWER OUTAGE TO DOS

Turn off unnecessary electrical equipment. Ensure critical equipment is plugged into red outlets.

Remain calm and in your work area.

Locate flash lights.

Continue work duties, where possible.

Should another emergency suffer power loss, follow procedures for both emergencies.

UTILITIES THAT MAY BE AFFECTED
Heating, cooling, and ventilation
Water supply and sewer backups: DO NOT put items down sinks, hoppers and toilets that do not belong, such as towels or Sani-cloths, this can cause the plumbing system to back up.
Pneumatic tube system
Elevators: If you get stuck in an elevator, stay calm and use the emergency number located in the elevator.
Medical gas and vacuum
Telephones