

SAFE WATCH

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Winston Kerr
Detective

Robert Sweeney
Lieutenant

Phone: 4-2825

Emergency Numbers:

Dial 911 or 632-3333

Non-Fire Emergencies 911
(Major Chemical Spills)

All Codes 321

Fire (Code Red) 321

First Edition—Safe Watch

Welcome to the first edition of *Safe Watch*. EH&S and University Police, Public Safety Office have joined



together to provide a bimonthly safety update to staff. Our goal is to provide current information on safety programs and initiatives effecting the

Hospital and Health Science Center. If you have a safety initiative you would like to highlight or an issue that you would like to see addressed in this newsletter, please contact us.

Jill Kavoukian

Associate Director, EH&S

SAFETY, IT'S A TEAM EFFORT



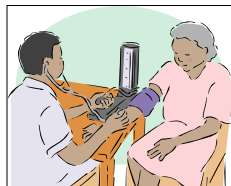
CONGRATULATIONS - SBUH Wins the H2E "Making Medicine Mercury Free" Award !!!

Contributed by Carol Malley

Congratulations SBUH on receiving the H2E "Making Medicine Mercury Free Award". This award is a one-time award given to facilities that have met the challenge of becoming virtually mercury free.

H2E, Hospitals for a Healthy Environment, is an organization whose primary goal is to educate health care professionals about pollution prevention opportunities in hospitals and health care systems.

H2E is a joint project of the American Hospital Association, Environmental Protection Agency, Health Care Without Harm, and American Nurses Association. To learn more about H2E,

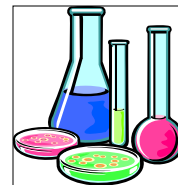


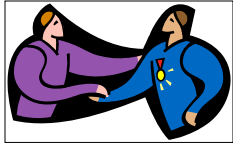
please visit their website at

www.h2e-online.org.

Stony Brook continues its efforts to reduce mercury in the hospital by further eliminating equipment that contains mercury such as thermometers, blood pressure units, and gastroenterology tubes. Mercury is also found in laboratory chemicals, pharmacological products, batteries, lamps, and cleaning agents. For a list of products that contain mercury, see EH&S Policy Number 8-11.

For additional information on mercury containing equipment or products, contact EH&S. When purchasing new products always opt for mercury free. Work with your suppliers and request mercury-free products whenever possible.





“You Got Caught Being Safe” 2006 Recipients

Contributed by Kathy Terwilliger

Congratulations to the following employees who received our “You Got Caught Being Safe” Recognition:

January winners:

1. Susan Little, L&D
2. Jim Prudenti, UHPP
3. Catherine McWilliams, Community Relations
4. Barbara Ludwig-Cull, Sleep Disorders Center

February winners:

1. Bill Mihailovich, Facilities Development

2. Mary Lee Schroeter, MICU
3. Winna So, EH&S
4. Henry MacLellan, 18N Surgery
5. Raymond Chan, Admin Application Support
5. Elann Quattrone, Cytology
6. John Falcone, UHPP
7. Nancy Ramsdell, ASC Recovery
8. Nicole Passaretti, Outpatient Pediatrics

March winners:

1. Sally Hall, Medical Records
2. Christine Edwards, Medical Records
3. Denise Heeren, 13N, Neurological Surgery
4. Susan Bronson, Andrology

The above employees went the extra mile in making the hospital a safer place to work by identifying and removing mercury equipment, donating chemicals to another lab, quickly following up on environmental round corrective actions to name a few.

Employees receive recognition and a small gift. Congratulations to our Recipients!

No Smoking Policy at University Hospital

Contributed by Scott Law



Smoking is prohibited anywhere inside University Hospital and within 50 feet of any

entrance to a University Hospital facility (this includes Tech Park and other facilities). This policy has been developed to keep the University Hospital in compliance with; NYS Public Health Law, Section 1399-0 and Suffolk County DOH regulations.

It is the responsibility of all University Hospital staff members

to enforce the Hospital's smoking policy by encouraging their colleagues, visitors and vendors to comply with the policy.

Employees who violate the policy may be reported to the employee's supervisor and to Labor Relations and may be subject to disciplinary action. Any person who fails to comply with the requirements of this policy may be in violation of Article 13e of the New York State Public Health Law and may be subject to the imposition of a civil

fine in addition to University disciplinary action.

Patients may not be sent to smoke in front of the UH if they are on IV's, pumps, or other medical equipment without the approval of their doctor and being accompanied by clinical staff. The nurse or physician responsible for the patient's care should counsel patients who refuse to comply with the Hospital's smoking policy. Repeat violations should be reported to University Police (911) for immediate follow-up action.

Safety Training Sessions

Contributed by Annette Falcetta

Open Hospital Respirator Fit Testing and Training is held on the third Thursday of each month from 2:00 — 3:00 p.m. in the Biomedical Engineering (BME) Conference Room located in the

HSC, Level 1, Room 141.

Hospital Recertification training for hospital staff not already attending Nursing or Lab Recertification has been scheduled.

Check your calendars and sign up for your yearly recertification training. See page 4 for registration instructions and listing of dates.



How to Reduce Sharps Injuries

Contributed by Kathy Terwilliger



1. Plan for safe handling and disposal before beginning any procedure using needles.
2. Use and activate sharp safety devices.
3. Dispose of sharp immediately into sharps container located in the area of generation. Do not leave in linen, on dietary trays or on top of sharps container.
4. Do not discard sharps in regular trash.
5. Do not carry a used sharp from one location to another.
6. When a sharps containers is full, contact Hospital Custodial Services at 4-1455 for removal.
7. Tell your supervisor about any sharps hazards that you observe in your work environment.

<http://www.cdc.gov/sharpsafety>



Tip of the Month

Characteristics of a Hazardous Waste:

1. Toxicity
2. Reactivity
3. Ignitability
4. Corrosivity

Collect it...Cap it...Label it...Dispose of properly!

Code M CQI Team

Contributed by Scott Law



During the past two years a CQI group has been working on improvements to the University Hospital Code M procedures. An initial survey of Code M's was conducted that showed a 24% rate of inappropriate Code M calls and staff injuries occurring during 5% of the Code M's.

In 2005 The CQI task group through the University Hospital

Policy and Procedure committee introduced two new policies, one on Crisis Intervention and the second on Code M's. The new policies along with a three-tiered training approach have resulted in drastic reductions in the rate of inappropriate Code M's as well as reducing the number of injuries.

During the period from September 2005 – March 2006, data was collected on over 270 Code M's. The

data showed a reduction in the rate of inappropriate Code M's from 24% to 1% and in the number of injuries from 5% to 2%. This data has been very encouraging to the members of the Code M CQI group who represent multiple disciplines including; Nursing, Environmental Health and Safety and University Police. Most importantly, the findings should result in a safer environment for both our Patients and staff.

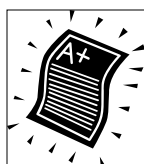
EC Rounds Commonly Missed Questions???

Contributed by Kathy Terwilliger

What questions are missed most during safety rounds (Answers in Bold):

1. How do you access EH&S Policies? **Inside SBUH webpage.**

2. What is the Major Chemical



Spill Emergency Number? **911 (University Police)**

3. What is RACE? **Remove, Alarm, Confine, Extinguish/Evacuate**

4. Where are the MSDS (Material

Safety Data Sheet) Books located? **Know the location of your MSDS Book and how to access the online MSDSPro Database.**

5. Where is the Disaster Kit located? **Know the location in your department.**

EH&S Healthcare Staff



Specialist. She replaces Clifford

Please join us in welcoming Carol Ann Malley. She is the new EH&S Healthcare

Environmental

Specialist. She replaces Clifford

Knee who has moved on to become the Manager of Hazardous Waste for the University. Carol has a B.S. and M.S. in the environmental field and comes to us after working for both the county and federal governments as well as the private sector. Carol

has agreed to be the editor of the newly created SAFE WATCH newsletter. She looks forward to assisting the hospital meet and exceed their environmental goals.

Welcome Carol!

2006 Recertification Day Schedule

(This Recertification Day training is intended for all Hospital staff *excluding* those employees who attend Nursing Re-Certification training, *i.e.* RN's, LPN's, Nursing Station Clerks, CA's or Lab Re-Certification training.)

On-Site Training (for employees who work in the Hospital or HSC)

Course Code: HTRCD1

Date	Time	Location
April 18	4:00pm-7:30pm	HSC, L3 , LH 5
May 11	7:00am-10:30am	HSC, L2, LH 4
June 7	9:00am-12:30pm	HSC, L3, LH5
July 25	12:00pm-3:30pm	HSC, L3, LH 5
August 10	7:00am-10:30am	To Be Announced
September 27	4:00pm-7:30pm	To Be Announced
October 17	9:00am-12:30pm	To Be Announced
November 7	4:00pm-7:30pm	To Be Announced
November 29	9:00am-12:30pm	To Be Announced
December 4	12:00pm-3:30pm	To Be Announced
December 14	9:00am-12:30PM	To Be Announced

Off-Site Training (for employees in Tech Park/Off-site locations)

Course Code: HTRCD2

Date	Time	Location
April 12	9:00am-11:00am	Holiday Inn Express
May 16	9:00am-11:00am	Holiday Inn Express
September 7	9:00am-11:00am	Holiday Inn Express
November 14	9:00am-11:00am	Holiday Inn Express
December 6	9:00am-11:00am	Holiday Inn Express

Registration Process

To register for a Recertification Day a registration form needs to be completed and sent to Corporate Education and Training. Completed registration forms may be faxed or sent interoffice to:

SBUH Corporate Education & Training
15 Technology Drive
Z=9155
FAX = 4-9806
Attention: Berri Brine

A confirmation will be sent 1-2 weeks prior to your scheduled session.

Any questions pertaining to Recertification Day training can be directed to Berri Brine at 444- 4757.