

Team members need to:

- Know and understand North Memorial's Safety First Reporting Policy.
- Share concerns about occurrences and events with immediate manager/supervisor.
- Document occurrences for review by manager/supervisor.



Safety Data Sheets (SDS)

- [AACN Nursing Manual](#)
- [Agility](#)
- [Asum](#)
- [BDELaunchPad](#)
- [Cisco Unified Intelligence Center User Data](#)
- [CobbleStone Contract Insight](#) (new contract management software)
- [Compliance 360](#) (policy and document search ONLY)
- [Concur](#)
- [Dragon Medical One](#)
- [Dynamic Health](#)
- [EBSCO - Nursing Reference Center Plus](#)
- [Epic Training Information](#)
- [Everbridge](#)
- [ESMB](#)
- [HealthStream](#)
- [IDEA](#)
- [Sonifi \(iNvision\)](#)
- [Interqual / Interqual Admin](#)
- [MedApproved](#) (New Product Evaluation)
- [MedSpeed Courier Service](#)
- [MyChart](#)
- [MyHR](#)
- [MyTime](#)
- [PageUp Applicant Tracking System](#)
- [Password reset](#)
- [Privilege inquiry](#)
- [Recognition Central](#)
- [Report adult abuse](#)
- [Safety Data Sheets](#)
 - Main contact: [Mike Sumption](#)
- [Safety First Reporting](#)
 - [Report an event](#) (accessible when onsite or through the portal)
 - [Training and education](#)
- [ServiceNow](#)
 - [HR training module](#)
 - [HR job aide](#)
 - [IT job aide](#) (accessible when logged in to ServiceNow)
- [Sg2](#)
- [SMARTworks Converge](#)
- [Staples Advantage](#) - office supplies
- [Team Member Service Center](#)
- [Vendormate](#) (credentialing)



Safety Data Sheets (SDS)

A SDS gives detailed information about a chemical so that you can work safely with it. Read the SDS before using a chemical. If you have questions about a chemical, see your manager or supervisor. Information found on SDS:

- Chemical Identification.
- Hazardous Ingredients/Identification Information.
- Physical Data/Characteristics.
- Fire and Explosion Hazard Data or Physical Data.
- Reactivity Data.
- Health Hazard Data.
- Precautions for Safe Handling and Use or Spill or Leak Precautions.
- Special Protection Information or Control Measures.



MN & WI Employee Right to Know

Minnesota and Wisconsin have an *Employee Right to Know Act*. It is a combination of State and Federal laws that ensure team members are told about the dangers associated in working with hazardous substances, infectious agents, and harmful physical agents.

Hazardous Substances

Infectious Agents

Harmful Physical Agents

Click on each of the buttons above to learn more.



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Hazardous Substances

Infectious Agents

Harmful Physical Agents

Include chemicals or substances that are toxic, corrosive, irritants, flammables, highly reactive explosives, strong oxidizers, nuclear materials or by-products, sanitizers, some medications, or pressurized containers. It is a substance that may produce short-term or chronic long-term health effects.



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Hazardous Substances

Infectious Agents

Harmful Physical Agents

Include communicable bacteria, viruses, fungi or parasites that can cause illness as a result of exposure to the agent. Exposure may occur by inhalation (breathing in), ingestion (eating or drinking), injection or absorption through the skin.



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Hazardous Substances

Infectious Agents

Harmful Physical Agents

Include laser, noise, extreme heat or cold, dust, or non-ionizing and ionizing radiation such as from an x-ray machine.



MN & WI Employee Right to Know

Team Member's Role

North Memorial Health's Role

Team Member Rights

Click on
each of the buttons
to the left
to learn more.



MN & WI Employee Right to Know

Team Member's Role

North Memorial Health's Role

Team Member Rights

Team members are required to:

- Learn about the hazards of your job.
- Learn how to work safely.
- Know where to find information about these hazards.
- Report any unsafe situation to your manager/supervisor or the Safety and Security Department.
- Know how to access the SDS database on the NMHH Intranet.



MN & WI Employee Right to Know

Team Member's Role

North Memorial Health's Role

Team Member Rights

Employers are required to:

- Tell team members about hazards they may encounter at their jobs.
- Discuss what team members need to know to work safely.
- Show team members where they can find information about hazards.
- Evaluate all substances entering and existing in the workplace that may present hazards.
- Provide team member training at orientation and annually thereafter in SDS database access, use, and purpose.

Have information about job hazards accessible to employees and maintain a current SDS database.



MN & WI Employee Right to Know

Team Member's Role

North Memorial Health's Role

Team Member Rights

Team members have the right to:

- Refuse to work in an unsafe situation.
- Refuse to work if they have not been trained.
- Receive information about the hazards of their job.



Individual Factors that Can Affect Performance

A variety of factors contribute to safety. Attention to managing the human and environmental factors associated with adverse events can optimize patient, co-worker, and organizational safety.

- **Human factors** include items such as: fatigue, illness, stress, rushing through an assigned task, non-compliance to required safety education or not using critical thinking skills.
- **Environmental factors** can include things like: poor lighting, disorganized work areas or improperly maintained equipment.

Leaders and healthcare workers share responsibility for creating a safe environment to work and practice. It is important that all of us assess our work environment for safety, understand our own work performance and the performance of others, and obtain the needed training to operate equipment and technology. The goal is to work together for continuous improvement.



Individual Factors that Can Affect Performance

Here are a few ideas on how and what you can do:

- Appreciate the safety challenges that come with operating equipment and technology.
- Apply critical thinking skills to perform work assignments safely.
- Address human factors such as getting enough rest prior to coming to work, staying home when ill, exercising to improve health and reduce stress levels and maintaining a healthy diet.
- Address environmental factors such as organizing and standardizing patient supply rooms so equipment can then be stored safely, while ensuring easy access to essential patient care and work supplies.



Concerns?

For ANY concern with Hazardous Substances, Infectious Agents or Harmful Physical Agents, contact:

- Manager/supervisor
- Safety and Security (# on back of ID badge)
- Compliance Hotline (# on back of ID badge); or via email at compliance@northmemorial.com

For more information on Hazardous Substances

- Electronic Safety Data Sheets (SDS) on North Net

Preventive Measures

- Recognize hazards communicated by signs/symbols
- Identify hazards and potential hazards before you start the task
- Know where to find information
- Learn what to do to protect yourself
- Report any unsafe situation to your manager/supervisor or Safety and Security
- Never use products from an unlabeled container. Contact Environmental Services (contact numbers found on NorthNet)



Signage

Biohazard Sign

- Blood/body fluid precaution. Use Personal Protective Equipment (PPE) as recommended.



Radiation Caution

Do NOT enter area without checking with the person in charge. Follow Distance, Time and Shielding guidelines:

- Distance: Keep a distance from the source of radiation.
- Time: Limit your time near the source.
- Shielding: Wear protection such as lead vests, gloves, eyewear, etc. Stay behind structural shields.



Radiation Safety

There are two primary sources of ionizing radiation within the healthcare setting: Equipment and Radioactive Materials.

Equipment

[Click here to learn more](#)

Radioactive Materials

[Click here to learn more](#)



Radiation Safety

Radiation protection involves effective measures employed by radiation workers to safeguard patients, team members, and the general public from unnecessary exposure to ionizing radiation. To do this our organization uses the radiation safety guiding principle of ALARA. ALARA stands for "as low as reasonably achievable". This means avoiding exposure to radiation that does not have a direct benefit to you, even if the dose is small.



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Radiation Safety

In order to follow ALARA principles these three basic protective measures in radiation safety: Time, Distance, Shielding

Time

Distance

Shielding



In most circumstances, an individual should spend the least amount of time in the room when an exposure is being made, should stand as far away from the radiation source as possible while still maintaining patient safety, and should always wear lead shielding when in the room during an x-ray exposure. If assigned a dosimetry badge, consistent and proper use is required.

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MRI Safety

Magnetic Resonance Imaging (MRI) is not ionizing radiation; instead it utilizes a very strong magnet and radiofrequency waves to image internal structures.

Safety Reminders:

- All individuals near the MRI need to be screened to determine if they are safe to be in the area.
- MRI has secure zones that cannot be accessed without clearance by MRI personnel.
- All objects must be evaluated by an MRI Technologist and deemed to be MRI safe before they are brought into the MRI area.
- **The magnet is always on**, whether a patient is being scanned or not.



Strong MAGNETIC FIELD
Magnet is **Always** On

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Radiation Safety

Radiation is a harmful physical agent. Radiation exposures can occur by unprotected exposure to radioactive materials or an x-ray machine.

- Radioactive materials are used for both diagnosis and treatment.
- For example, temporary or permanent patient implants of sealed radioactive sources are placed in surgery.
- All rooms where radioactive materials are stored and/or used are posted with a "Radioactive Materials" sign.



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Radiation Safety


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- When entering rooms, look for signs indicating where radioactive materials are stored. Any cabinet, refrigerator, package, bottle or other container marked with a yellow and magenta "Caution Radioactive Material" is a potential source of radiation exposure.
- When cleaning the area, work quickly and take only the materials you need with you. Do not empty trash containers marked "Radioactive Material". If you notice leaks or damage to any object labeled "Radioactive", do not attempt to clean. Close and lock the door. Call Safety and Security.
- Radioactive materials may be used in restricted patient rooms. Do not enter these rooms, check with the Patient Care Facilitator. These rooms will be posted with a yellow and magenta radiation caution sign. The radiation caution sign may be removed only by the Radiologist.



MRI Safety Zones

4 Safety zones are posted and described to control access to the MRI environment. MRI safety trained individuals monitor the area.



Click on each zone to
view warning label

Zone 1 - General Public

**Zone 2 – MRI Patient screening &
Preparation Personnel**

**Zone 3 - CAUTION: Restricted Access -
Control room area, supervised/screened
Personnel**

**Zone 4: DANGER: Restricted Access -
Scanner Location, Screened MRI
Patients under the direct supervision of
trained MRI personnel only.**



MRI Safety Zones

4 Safety zones are posted and described to control access to the MRI environment. MRI safety trained individuals monitor the area.

MRI	
MRI ZONE I	MRI Access Area

Zone 1 - General Public
Zone 2 – MRI Patient screening & Preparation Personnel
Zone 3 - CAUTION: Restricted Access - Control room area, supervised/screened Personnel
Zone 4: DANGER: Restricted Access - Scanner Location, Screened MRI Patients under the direct supervision of trained MRI personnel only.



MRI Safety Zones

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NOTICE	
MRI ZONE II	MRI Patient Screening and Preparation

Zone 1 - General Public
Zone 2 – MRI Patient screening & Preparation Personnel
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Indoor Air Quality (IAQ)

Hazardous Vapors and other Contaminants

The quality of indoor air depends on many factors, including structure, building material, outdoor environment and occupants. Indoor contaminants that have been shown to have health consequences come from indoor and outdoor sources, as well as from occupant related activities.

The main contaminants include:

- Bio aerosols which include pathogens and allergens.
- Volatile organic compounds, such as alcohol and acetone.
- Formalin products.
- Cleaning products.
- Particulates, e.g. lead dust, asbestos.
- Combustion products such as carbon monoxide, or tobacco smoke.



Indoor Air Quality (IAQ) Continued

- Examples of common concerns identified by team members include exhaust fumes by the loading dock areas, and mold growth.
- The Maintenance Department maintains various types of air handling systems to assist in control of all known contaminants.
- Additionally, many processes are in place to test for and identify the source and abate as necessary.

If you have concerns with indoor air quality, contact Maintenance.



Fragrance Free Facility

Perfume, cologne, scented soap, hair products and lotions are NOT to be worn by hospital team members within the hospital (scented deodorant is permissible).

- Recognizing that sensitivity to fragrance is not limited to patient care areas; this policy applies to all team members, including employees, volunteers, physicians, students and contracted patient care providers.

**We share
the air.**

Please keep it
fragrance-free.



Hazardous Material Handling

Hazardous substances are any chemicals that can harm you (health hazard) or can create a dangerous situation (physical hazard) such as a fire or explosion.

- Before handling any chemical container for the first time, read the label. Warnings may be in words, pictures or symbols. Report any torn or illegible label to your manager/supervisor. Always carry and store chemicals in approved, properly labeled containers.
- A Safety Data Sheet (SDS) gives information about ingredients, what protective equipment to use, how it can enter your body, and signs of over exposure. SDS information is found on NorthNet. If needed, ask your manager/supervisor for help.
- Hazardous Material Spills/Leaks: People in the area are the first line of defense. If they have been trained to clean it up, they should take care of it.
 - Remove people to a safe area as needed (e.g. overcoming fumes)
 - Secure the area to prevent persons from coming in contact with the spill
 - Tell your manager/supervisor (off hospital campus clinics: escalate to your leader)
 - Call *99 at Robbinsdale or *77 at Maple Grove
 - Give Safety and Security a copy of the chemical's SDS



Hazardous Substances: Purpose & Storage

Hazardous substances (chemicals) help you perform many tasks. When used correctly, chemicals are safe. When used or stored incorrectly, they can harm you. Be informed about the chemicals that you use. A chemical that can potentially harm or injure you is classified as hazardous. A chemical can be either a physical hazard and/or health hazard. Hazardous Substances are stored in:

Original Containers

Some chemicals are used right from the manufacturer's **original container**. The manufacturer has already properly labeled these containers.

Transfer Containers

Some chemicals used within the organization are removed from their original container and transferred into another container. These containers are called a **transfer containers**. Transfer containers must be labeled with a **National Fire Protection Association (NFPA) 704** label or equivalent.

Hazardous Waste Disposal



Click on each of the images above for more information. Click Next button to continue.

Hazardous Waste Disposal

Place in used battery containers in your area. For hospital campuses, contact Environmental Services for pick up when your bucket needs to be emptied.



Batteries

Hazardous Waste Disposal

Return empty cartridges to Materials Management for recycling.



Toner cartridges (copier, fax, printer)

Hazardous Waste Disposal



If empty, place in regular waste/trash. If unable to use/get all of product out because of a damaged or expired container, call Environmental Services to pick up for disposal.

Aerosol Cans

Hazardous Waste Disposal



Put non-hazardous in the BLUE container in your area. Hazardous pharmaceutical waste, designated by a BLACK "Special Handling Required" label and/or an Omnicell "Special Handling Required" message, should be put in a BLACK container. Blood and sharps should not be placed in these containers.

Pharmaceutical Waste

Hazardous Waste Disposal



Follow established guidelines for disposal, labeling, and manifest management as appropriate.

Laboratory and Other Waste

Labeling Containers

Anytime a chemical is transferred from one container/bottle to a different one, the secondary bottle/container must be labeled with the following;

- Identify the chemical or product in the bottle.
- Appropriate hazard warnings.
- Expiration date.

Labeling Containers Example:
Taking a cleaning solution and putting it into another spray bottle. The spray bottle must be labeled with the name and any appropriate warnings.



****Failure to follow waste disposal regulations will result in county, state and federal fines****

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Pharmaceutical Waste

- Put non-hazardous pharmaceutical waste in the **BLUE** container in your area, if available.
- Hazardous pharmaceutical waste, designated by a **BLACK** "Special Handling Required" label and/or a Pyxis "Special Handling Required" message, should be put in a **BLACK** container. NO SHARPS OR BIOHAZARDOUS MATERIAL.
- Bottles of contrast media containing iodine are utilized in the Imaging Department. Iodine containing contrast bottles need to be disposed of in a **BLACK** container.



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Pharmaceutical Waste

- Exception: Controlled substances should NEVER be put into the **BLUE** or **BLACK** pharmaceutical waste or **RED** Sharps containers
- Controlled substances should be disposed of as follows:
 - All controlled substance waste will be disposed of in the CSRx bin near the Omnicell
 - Includes liquids, solids and patches
 - NMHH only: Anesthesia waste is collected and audited by pharmacy
 - All controlled substance waste needs to be documented with a witness in Omnicell



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Chemical Hazards/Risks

Physical Hazard
[Click here for more info](#)

Health Hazard
[Click here for more info](#)



Chemical Hazards/Risks

Physical Hazard

A chemical is a physical hazard if it can cause a dangerous situation (e.g., explosion, fire, toxic fumes) when it is exposed to another chemical or certain environmental conditions (heat, light, vibration [shock] and moisture). Chemicals that represent a physical hazard include combustible liquids, compressed gases, organic peroxide, explosives, oxidizers, flammables, pyrophorics, unstable-reactive, or water-reactive.

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Chemical Hazards/Risks

Health Hazard

A chemical is a health hazard if its ingredients can cause health problems. Some of these effects will show up right away for example, within 24-hours (**acute health effect**); some effects show up later (**chronic health effect**). These chemicals can make you sick; cause vomiting, a fever or headache; irritate or burn the lungs, eyes, skin or mucous membranes; poison internal organs such as the liver, kidneys, or brain; cause cancer; damage the reproductive or central nervous system; damage bone marrow and lymph nodes, and cause death.

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Chemical Hazards/Risks Continued

There are three common ways that a chemical can enter your body (routes of entry):

Contact

Splashing a chemical on your skin or in your eyes.

Inhalation

Breathing in a chemical's fumes, vapors, mists, or dust particles.

Ingestion

Swallowing a chemical or food/drinks contaminated by a chemical.

- **If a chemical cannot get in, you win.** Protect yourself. Know how to safely handle, use, store, and dispose of the chemicals you use.

Click anywhere to continue.

- **Signs of overexposure** to a chemical include nausea, headache, fever, dizziness, burns, irritation of the eyes, nose, throat, or lungs, skin rash, blurred vision, fatigue, and vomiting. If you think you have had an overexposure to a chemical, tell your manager and get medical assistance according to procedure.



Cleaning Up and Identified Chemical Leak/Spill

1. If you know the chemical that has spilled, have the proper spill clean-up equipment, and have been trained, you can clean up a chemical.
2. Tell your manager/supervisor.
3. Use the provided spill clean-up kit/equipment within your department.
4. Know the locations of nearest eye wash stations and safety showers and how they work.
5. Fill out an incident report.
6. If you feel the spill is out of your ability to handle, Robbinsdale call *99 and Maple Grove call *77. Off hospital campus clinics, escalate situation to your leader.
 - If you do not know what has been spilled, you should follow the steps for handling an unidentified chemical spill.



Unknown/Unidentified Chemical Spills

Remove people to a safe area as needed (e.g., vapors/gases are overcoming). Clean up the spill, following directions on the container, SDS, and/or emergency spill kits. Use personal protective equipment per instructions.

- If a chemical splashes on you, wash the area. Use eyewash stations and showers if available.
- Tell your manager/supervisor and call Safety and Security.
- If spill is giving off vapors/gases, Safety and Security will dial 911.
- Fill out all appropriate Safety First Report.
- Get medical help.

Unknown/Unidentified Chemical Spills

Remove people to a safe area as needed (e.g., vapors/gases are overcoming). Clean up the spill, following directions on the container, SDS, and/or emergency spill kits. Use personal protective equipment per instructions.

- If a chemical splashes on you, wash the area. Use eyewash stations and showers if available.
- Tell your manager/supervisor and call Safety and Security.
- If spill is giving off vapors/gases, Safety and Security will dial 911.
- Fill out all appropriate Safety First Report.
- Get medical help.

Small Spills of Blood/Body Fluids

To manage small, contained blood/body fluid (BBF) spills:

- Block area to prevent access to contaminated area.
- Don clean gloves and protective equipment.
- Use disposable towels to absorb excess infectious material and discard into **red waste** bag.
- Disinfect the surface with a facility-approved disinfectant following product instructions for contact time.
- Follow up by cleaning the surface with a facility-approved disinfectant to remove any remaining soil.
- Discard all contaminated supplies into **red waste** bag.
- Perform hand hygiene after glove removal.



Large Spills of Blood/Body Fluids

Larger spills that cannot be contained:

- Block affected space to prevent access to contaminated surface.
- Contact Environmental Services and/or supervisor for contracted service.



Sharps Safety

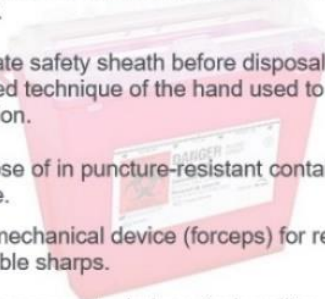
Sharps include:

- needles.
- scalpel blades.
- other objects that can penetrate the skin.



Safety Best Practices:

- Use only the approved safety mechanism to cover a used needle. Never use the disposable needle cover.
- Activate safety sheath before disposal, utilizing one handed technique of the hand used to perform the injection.
- Dispose of in puncture-resistant container at point of use.
- Use mechanical device (forceps) for removal of reusable sharps.
- Use a no-pass technique for handling sharps during surgical procedures.



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Sharps Safety

Sharps include:

- needles,

Additional information on infectious waste or sharps management may be obtained from Infection Prevention Policies or by contacting Infection Prevention or Environmental Services.



Safety Best Practices:

- Use only the approved safety mechanism to cover a used needle. Never use the disposable needle.
- Dispose of in puncture-resistant container at point of use.
- Use mechanical device (forceps) for removal of reusable sharps.
- Use a no-pass technique for handling sharps during surgical procedures.

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Infectious/Chemo/Pathological Waste Handling Disposal

Drag each type of waste to the appropriate color container.

Trace
Chemo

Bulk
Chemo

Pathological
Waste

Sharps

Incineration

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Red Biohazard Bag

Place blood or other potentially infectious material contaminated items in red biohazard bag

- May require double bag if large volume
- Sharps go in rigid container

Use standard precautions

- Contracted services manages pick up due to special handling needs

Failure to follow waste disposal regulations will result in county, state and federal fines.

These **DO** go in the red bag:

Contaminated:

- Visibly Bloody Gloves
- Visibly Bloody Plastic Tubing
- Visibly Contaminated PPE
- Saturated Gauze
- Saturated Bandages
- Blood Saturated Items
- Blood & Body Fluids
- Closed Sharps
- Disposable Containers

Special handling and marking may be required:
• Certain Pathological Waste
• Trace-Chemotherapy Waste

These **DON'T** go in the red bag:



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Safe Patient Handling

North Memorial is committed to providing patients with the safest care possible. Patients who require assistance to move will be handled in accordance with the Safe Patient Handling policy. Mechanical lifting equipment and/or other approved patient moving aids will be used in all circumstances when lifting/moving patients except when *absolutely necessary*, such as during a medical emergency. This policy complies with regulatory requirements in regard to health and safety of both patients and team members.

North Memorial will use *Safety First Reporting* as well as the Team Member Injury Report to track patient and caregiver injury trends that occur when lifting, positioning or transferring. Those tasks identified as having caused or likely to cause an injury will be assessed by the Safe Patient Handling Committee to determine equipment or educational needs. Further action will be taken to prevent future occurrences.

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Providing a Safe Lifting Environment

Use lift equipment whenever possible such as stands, mobile lifts, ceiling lifts, transfer devices, gait belt, wheelchair etc. Your decision to use lift equipment is the most effective factor in improving patient and your safety.

- Lack of time is never a reason to take shortcuts for patients and your safety.
- You can stop the line anytime you feel unsafe with any patient handling task and equipment not being used.
- If you get resistance from anyone regarding using the equipment, you can be assured that you are supported by leadership and can discuss your concerns at any time.

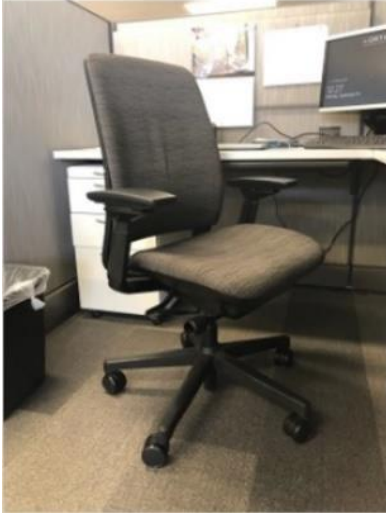


Providing a Safe Lifting Environment Continued

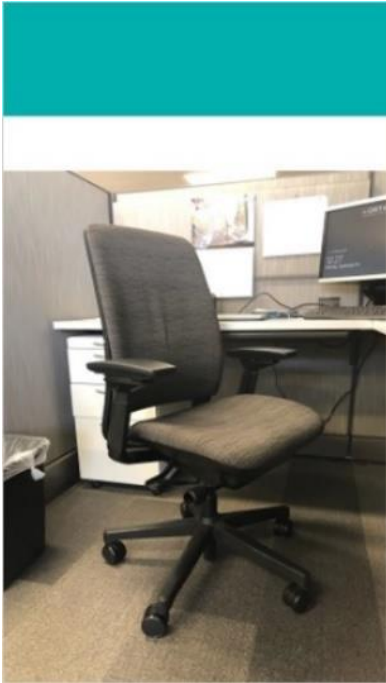
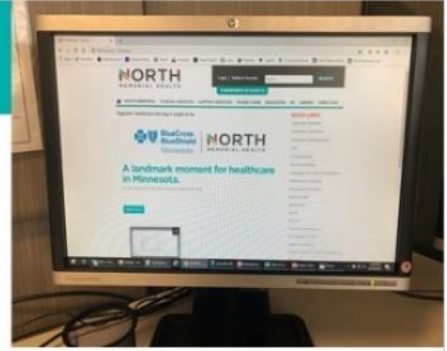
- Patients are at risk of being injured (such as falling or pulling on their arms) during a transfer if necessary equipment is not being used.
- Research shows that team members should not be lifting more than 35 lbs. of a patient's weight during any transfer or repositioning task.
- Research shows that increasing the number of staff helping you DOES NOT improve safety during a patient transfer—it can actually increase the risk of a patient falling.
- If a patient requires more than minimal assistance (i.e. assist of 1), the appropriate stand assist or lift equipment should be used.



Ergonomics/Back Injury Prevention



Click on each of the images for more tips on using that equipment.



- Sit as far back in the chair as possible
- Adjust the seat height so your shoulders are down and relaxed and your elbows and forearms are at 90 degree position with your wrists and hands straight
- Adjust the armrests so your shoulders and arms are relaxed and supported. Consider removing the armrests if they do not adjust or are in the way.
- Adjust the seat back (lumbar) height so the inward curve of your lower back is comfortably supported by the chair's lumbar support.
- Adjust the seat back tilt so that your upper and lower back is comfortably supported in a slightly reclined position.
- Ensure that your feet are resting flat on the floor and your thighs are level or parallel to the floor while sitting back in the chair. A footrest should be used if your feet are not comfortably resting on the floor.

TIP: Frequent positional changes and stretching can significantly help to minimize fatigue.

[Back](#)

- Pull up close to your keyboard so there is a comfortable 90 degree angle bend in your elbow.
- Keep the mouse as close as possible to the keyboard on the same work level.
- Don't reach!
- Maintain a level or neutral wrist position. If you rest your wrists on the work surface you may want to use a wrist rest for keyboard and mouse.
- Maintain the keyboard tray in slightly negative tilted position (-5 to -10 degree angle).

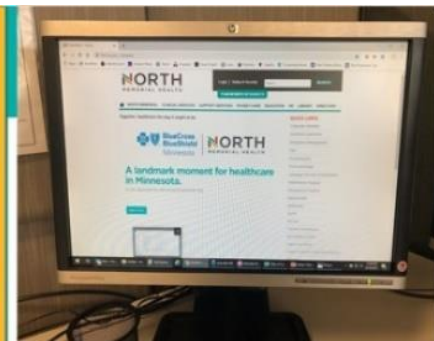
TIP: Incorporating short cut keys will help minimize mousing.

Back



- Center the monitor directly in front of you.
- Position the top of the monitor at eye level. (If you wear bifocals, lower the monitor to a comfortable reading level.)
- Position the monitor at a distance for easy viewing while sitting back in your chair. This is typically an arm's length away.

Back



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Other Considerations

- Use a headset if on the phone more than 25% of the workday.
- Position frequently used items within easy reach (e.g. phone, stapler, etc.).
- Use a document holder and position it close to or in-line with the monitor.



Questions? Contact Team Member Health



Use Proper Lifting Techniques

- Test the weight of the load before lifting.
- Keep the load close. Assume a wide base of support and bend your knees.
- Pivot your feet. Don't twist!
- Use smooth, controlled movements. Avoid rapid or jerking motions!
- Keep your head up and tighten your stomach muscles as you lift!
- Keep items within a safe lifting zone-between shoulders and waist.



Ten Easy Tips to Maintaining A Healthy Back

1	2	3	4	5
Use proper lifting techniques <ul style="list-style-type: none"> • Test the weight of the load before lifting • Keep the load close • Assume a wide base of support and bend your knees • Pivot your feet - don't twist • Use smooth, controlled movements. Avoid rapid or jerking motions • Keep your head up and tighten your stomach muscles as you lift • Keep items within a safe lifting zone-between shoulders and waist 				
6	7	8	9	10

Ten Easy Tips to Maintaining A Healthy Back

1	2	3	4	5
Use equipment when possible <ul style="list-style-type: none"> • Patient lifting devices (EZ stand, mobile lifts, lateral transfer assist device, etc), carts, etc 				
6	7	8	9	10

Ten Easy Tips to Maintaining A Healthy Back

1	2	3	4	5
Ask for assistance when lifting heavy objects.				
6	7	8	9	10

Ten Easy Tips to Maintaining A Healthy Back

1	2	3	4	5
Maintain Good Posture <ul style="list-style-type: none">• Keep the natural curve of the spine. Don't slouch!				
6	7	8	9	10

Ten Easy Tips to Maintaining A Healthy Back

1	2	3	4	5
<p>Avoid prolonged postures - Change positions frequently throughout the day.</p> <div> <div> STANDING <ul style="list-style-type: none"> • Stand on an anti-fatigue mat • Wear comfortable footwear • Prop your foot up on a stool or elevated surface • Keep a slight bend in your knees - don't lock your knees </div> <div> SITTING <ul style="list-style-type: none"> • Sit as far back in the chair as possible • Adjust the chair for proper posture and comfort • Ensure that your feet are comfortably resting on the floor and your thighs are level or parallel to the floor while sitting back in the chair. A footrest should be used if your feet are not comfortably resting on the floor. • Adjust the seat height so your shoulders are down and relaxed and your elbows are at a comfortable right-angle position with your wrists and hands straight • Keep work close - don't reach </div> </div>				
6	7	8	9	10

Ten Easy Tips to Maintaining A Healthy Back

1	2	3	4	5
<p>Stretch frequently throughout the day.</p>				
6	7	8	9	10

Ten Easy Tips to Maintaining A Healthy Back

1	2	3	4	5
Maintain a healthy diet.				
6	7	8	9	10

Ten Easy Tips to Maintaining A Healthy Back

1	2	3	4	5
Maintain an adequate level of physical fitness/exercise.				
6	7	8	9	10

Ten Easy Tips to Maintaining A Healthy Back

1

2

3

4

5

Maintain good sleeping posture.
Sleep on a firm mattress on your back or side rather than your stomach whenever possible.

6

7

8

9

10

Ten Easy Tips to Maintaining A Healthy Back

1

2

3

4

5

Maintain a healthy lifestyle.

6

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10

Back Injury Reporting

North Memorial Health (NMH) is committed to providing patients with the safest care possible. Patients who require assistance to move will be handled in accordance with the Safe Patient Handling policy. Mechanical lifting equipment and/or other approved patient moving aids will be used in all circumstances when lifting/moving patients except when absolutely necessary, such as during a medical emergency. This policy complies with regulatory requirements regarding health and safety of both patients and team members.

NMH will use Safety First Reporting as well as the Team Member Injury Report to track patient and caregiver injury trends that occur when lifting, positioning, or transferring. Those tasks identified as having caused or likely to cause an injury will be assessed by the Safe Patient Handling committee to determine equipment or educational needs. Further action will be taken to prevent future occurrences.



Work Related Injury/Illness Reporting

The safety and health of team members is of primary importance. It is North Memorial's desire that no team member has an injury or illness because of a work situation. Sometimes injuries or illnesses do occur and are work-related. Work-related injuries or illnesses must be documented in accordance with state and federal regulations. The team member, the manager/supervisor, and the Team Member Health Center (TMHC) all have responsibilities for this process.



Work Related Injury/Illness Reporting

What should you do to report an occupational injury or illness (due to work)?
Click on the buttons below to view your responsibilities and your manager's responsibilities.

Team Member Responsibilities

[Click here for more info](#)

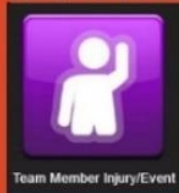
Manager/Supervisor Responsibilities

[Click here for more info](#)

Work Related Injury/Illness Reporting

Team Member Responsibilities

- Immediately report the work-related injury/illness (including blood/body fluid exposures) to your manager/supervisor or designee.
- Report your injury via Safety First and contact TMHC (hours as listed) or Emergency Department if medical triage or care required.
- Attend all follow up appointments with TMHC and maintain communication with all appropriate parties.



What should you do to report an occupational injury or illness (due to work)?
Click on the buttons below to view your responsibilities and your manager's responsibilities.

Manager/Supervisor Responsibilities

[Click here for more info](#)

[Back](#)

Work Related Injury/Illness Reporting

What should you do to report an occupational injury or illness?
Click on the buttons below to view your responsibilities.

Team Member Responsibilities

[Click here for more info](#)

[Back](#)

Manager/Supervisor Responsibilities

- Direct the injured team member to TMHC or ED as appropriate.
- Review circumstances related to the injury or illness for measures that would prevent this type of incident from occurring again to this or other team members.
- Review restrictions to determine if the team member can work in the assigned department; discuss with the Team Member Health Center possible work options.
- Maintain ongoing communication with the team member and the Team Member Health Center.
- For injuries that involve: loss of life, hospitalization, loss of eye or amputation, immediate escalation is required as OSHA reporting mandated within 8-24 hours.

Team Member Health Center Responsibilities

- The Team Member Health Center handles all required MN OSHA documentation.
- Coordinate and monitor medical care.
- Communicate work limitations to manager/supervisor.
- Initiate First Report of Injury as required by law.
- Review incidents to identify trends and to correct possible unsafe working conditions.

MN AWAIR

Click each letter of the acronym

A

W

A

I

R

Why does North Memorial have the AWAIR Plan?

North Memorial Health is committed to providing and supporting safety training to encourage a positive attitude, which strengthens safety awareness. Training of all team members is vital to a successful safety management program. The AWAIR Plan ensures that safety training begins during team member orientation and continues throughout the course of employment. Continual safety training, monitoring, and interaction between team members and manager/supervisors aid in the prevention of accidents.



What Are Team Member Responsibilities?

All team members play an important role in the safety of your hospital and are responsible for keeping the work environment safe. Responsibilities of the team member include:

- Always report any injuries or accidents to your immediate manager/supervisor.
- Report unsafe work practices or hazards immediately to your manager/supervisor.
- Complete safety training as required and participate in safety activities.
- Be familiar with the proper use of required personal protective equipment, limitations and maintenance. Most importantly, wear or use the PPE when performing activities that require such protection.
- Footwear appropriate for the job is required per hospital policy.



What Are Team Member Responsibilities?

Additional responsibilities of the team member include:

- Don't remove safety guards from any equipment. Don't operate any equipment if a safety guard is missing.
- When entering hallways from offices look both ways.
- Notice mirrors at "T" intersections and check for people around the corner.
- Practical jokes and horseplay can lead to accidents and will not be tolerated. Never distract the attention of another Team Member.
- Obey all warning signs posted throughout the facility or affixed to equipment.
- Complete timely health protection, training or testing (e.g. FIT test, Mantoux).



AWAIR Plan and Corrective Action

Corrective action procedures are established to address any disregard of North Memorial Health's policies, procedures, and safety rules, or who is repeatedly negligent in their duties. Corrective action is set up to first counsel, however North Memorial Health cannot and will not permit negligent team member to repeatedly injure themselves and/or put their fellow team members at risk.

Remember, you are the key to a safe work environment!



Vendor Certification Program

Vendor representatives are the people that enter Maple Grove Hospital to sell their products and services. The business partner is the company they work for. All vendor representatives and business partners must complete the Vendor Certification Program before selling products and providing services inside our hospital. Please complete Certification program through VendorMate



Vendor Certification Program Continued

We have many reasons for the vendor representatives to complete the Vendor Certification Program:

- The program helps us meet regulatory requirements.
- Promote the safest environment of care for our patients.
- Attain the best business practice to control cost and maintain contracts.
- Products purchased meet patient needs as specified by clinicians.
- So they can obtain a visible ID badge.

It is important for the vendors to complete certification, so they have a better understanding of Maple Grove Hospital's expectations. The program is easy for the vendor to complete online. Appointments must be made prior to a vendor showing up at Maple Grove Hospital. If a vendor representative does not have an appointment, they are not allowed to stay on Maple Grove Hospital property. **The vendor representative must wear a Maple Grove Hospital issued ID badge.** If the vendor is not wearing a badge, they must return to the designated check-in site to receive an ID badge.



As a system, we want to send a clear message to the vendor

- Vendors will complete the form for New Product and Equipment Introduction for all new products (FDA, 510k and/or new to Maple Grove Hospital).
- Vendors complete Vendor Certification Program on-line.
- Vendors always wear Maple Grove Hospital ID badge.
- Vendors comply with research expectations.
- If you see a vendor without a Maple Grove Hospital issued ID badge, let someone know! The vendor is not following Maple Grove Hospital policy! Please ask that vendor to return to the Safety and Security desk by the ECC entrance door to check in and pick up a badge. The staff at the Security desk will check to see if the vendor has completed the certification program before handing out a badge.



Quality Standards and Regulation

- In order to care for patients under state and federal programs, all facilities must adhere to the Centers for Medicare and Medicaid's Conditions of Participation and prove compliance through accreditation processes facilitated by agencies with deeming authority.
- Det Norske Veritas (DNV) is one of these agencies through which North Memorial Robbinsdale Hospital, North Memorial Maple Grove Hospital, our hospital-based specialty clinics and our Comprehensive Stroke Program are accredited.
- Accreditation with DNV also requires additional certification to the ISO 9001:2015 Quality Management Systems Requirements, which provide a framework by which we monitor and continually improve our processes and ensure consistent experiences and care for our patients. We have adopted these standards in all areas of the organization, not just those accredited by DNV.



Quality Management System

- Quality Management System (QMS) is the framework by which we monitor and continually improve our processes within the organization.
- At a department or unit level you will see your QMS reflected in your quality board/quality scorecard.
 - Know where your quality board/quality scorecard is located.
 - Understand the work you are focused on to improve the care you give to our patients.
 - Know how this work reflects the overall QMS of the organization (strategic priorities).
 - For example; a lower Hand Hygiene rate of 80% at a department level affects the overall Hand Hygiene rate of the hospital – 89%. Therefore, an incremental improvement in Hand Hygiene will help to improve the overall hospital rate.



Quality Management System Continued

- We perform internal audits to assess the strength and compliance of our quality system. This is another way to say that we are “doing what we say we are doing” as reflected in our policies and procedures.
- Specially trained internal auditors focus on high risk processes in each department as a way to proactively identify areas of vulnerability within our organization. This allows us the time to fix our process so that it matches procedure/policy.



Participating in Care that Conflicts with Cultural Values, Ethics, or Religious Beliefs

Talk to your manager/supervisor if you are unable to participate in care that you feel is in conflict with your cultural values, ethics, or religious beliefs. Every effort will be made to meet the needs of team members without jeopardizing patient care.



Resolving Ethical Questions or Concerns

NMH Biomedical Ethics Committee is here as a consult service to review ethical situations while using the principles of biomedical ethics.

- A request for a consult can be made by any team member, patient/surrogate decision maker.
- A Biomedical Ethics consult can be done:
 - Through Epic/Amion.
 - Phone the hospital operator "O" and ask to page the Ethics Coordinator for you.
- Common issues include:
 - Determining a family decision maker when the patient is unable to participate in discussions around their care.
 - Expected/possible harm versus benefit of available treatment options.
- Concerns should be escalated to your manager or provider lead.



Resolving Ethical Questions or Concerns

To arrange an Ethics Consult:

- Contact the administrative manager and explain the patient situation as well as the need and urgency of the ethics consultation. Off hospital campus clinics, contact your leader.
- The administrative manager will discuss the case with the ethics facilitator to determine if an ethics consultation is appropriate (available during business hours M-F).
- If appropriate, the ethics facilitator will (in coordination with requester, care team, and patient/family as appropriate) arrange a date, time, and location for the ethics consult.
- Refer to "Ethical Issues in Patient Care" attachments A and B in C360 for additional details, tools and procedures.
- The Medical Staff Coordinator at North Memorial will send out an Everbridge message to all ethics committee members, notifying them of the ethics consult and meeting details.



Workplace Violence and Situational Awareness for Team Members

2023



What is Workplace Violence?

Workplace violence is any act or threat of physical violence, harassment, intimidation, or other threatening disruptive behavior that occurs at the work site.

<https://www.osha.gov/workplace-violence>



What is Workplace Violence?

There are four types of workplace violence.

Criminal Intent

Patient/Client
Violence

Worker-on-worker
Violence

Personal Relationship
Violence

Click on each box above for more information.



What is Workplace Violence?

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- An example of violence with criminal intent would be a robbery, or being assaulted in the parking garage at your place of employment (CDC, 2014).
- Though this type of violence is possible in the hospital setting, it is typically more prominent in locations that carry cash on site.



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- This type of violence includes patients, their family members, and visitors (CDC, 2014).
- Often referred to as client-on-worker violence, this can range from verbal abuse, threats, or physical abuse in the healthcare setting against providers (CDC, 2014).
- Most commonly experienced in the healthcare setting, this is the focus of workplace violence prevention.
- An example would be a patient becoming physically combative against a nurse or nursing assistant.
- Another would be a patient being verbally abusive in the waiting area.
- Unfortunately, no area of healthcare is immune to this type of violence.

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- This type of violence occurs between coworkers, or from someone in a supervisory position.
- Emotional and/or verbal abuse such as intimidation, humiliation, or bullying is included in this type of violence.



What is Workplace Violence?

There are four types of workplace violence.

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Violence



- A current or former personally related or intimate person that is threatening, and/or assaulting a staff member (CDC, 2014).
- An example is when the domestic abuser follows the healthcare worker to their workplace, or shows up during their shift (CDC, 2014).
- This is not only dangerous for the healthcare worker, but could possibly endanger other staff members, patients, or visitors (CDC, 2014).

NMH's policy regarding workplace violence

NMH recognizes that it is in the best interest of the community, team members, patients, and the organization as a whole, to maintain an environment which is free from violence and harassment and misuse of power and authority. Threats, harassment, aggressive or violent behavior by team members, patients, visitors, relatives, acquaintances, strangers, vendors, or others will not be tolerated.



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