

Orange Bag Waste?

Hospital to move from red to orange bags

What is the common term for medically-regulated waste? Until now, we've called it "red bag waste," but not any more.

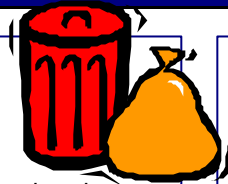
Beginning this month, the Hospital will move from red to orange bags for medical waste. The move will allow the hospital to send the waste to the landfill after it has been sterilized.

The Hospital installed a medical waste autoclave in 2003 and will begin to autoclave all medical waste, except sharps, later this month. This should result in significant savings for the Hospital.

In the last few years, UK Hospital has packaged and shipped medical waste for disposal. For years before that, the Hospital incinerated its medical waste. Both methods are expensive.

Rules for medically-regulated waste

- Use orange bags for medically-regulated waste. That includes:
 - Materials saturated with blood or body fluids
 - Items from known-infectious patients
- The simple rule: If it used to go in a red bag, put it in an orange bag now.
- Place other medically regulated waste in red barrels. That includes:
 - Fluid-filled containers
 - Bloody tubing
 - Blood transfusion bags
 - Dialysis filters
 - Chest tube valves
- Red barrels will be lined with orange bags.
- Orange bags will be marked with the biohazard symbol.
- Place all disposable sharps—needles, syringes, and scalpels—in sharps containers. Never throw a sharp in a bag of any sort.



Hazard Communication Program is Guide to Chemical Safety

Updated chemical inventory due March 1, 2004.

It's time for every department to complete the 2004 hazardous chemical inventory. For your convenience, the inventory form is included in this mailing. In order to ensure that the Hospital completes a thorough inventory, every area is required to submit an inventory, even if that area does not use hazardous chemicals or mercury-containing products.

Submit your inventory by campus mail or email by March 1, 2004.

[Use Hazard Communication Manual to Train Staff](#)

Every area is required to have a Hazard Communication Manual that is accessible to employees. Accessible means:

- Located in an area that is open to staff whenever they are on duty
- Employees know what the manual is and where it is located
- Information in the manual is written in a language that the employees understand

The manual must be complete and up to date so that you can use it to train employees about the chemicals they use or will come in contact with in the workplace.

This manual is inspected by the Hospital Safety Surveillance Team during semi-annual inspections and may be reviewed by external surveyors, such as JCAHO or OSHA, as well.

Read Hospital Policy 10-11, available at { [HYPERLINK](http://www.hosp.uky.edu/policies/policyindex_f_h.asp?PolicyManual=10&PolicySection=24) http://www.hosp.uky.edu/policies/policyindex_f_h.asp?PolicyManual=10&PolicySection=24 }.

Hospital Departments Not Meeting Safety Inspection Requirements

Safety inspections seen as key to continuous facility readiness

In the last half of 2003, less than 60% of departments scored 90% or higher on the semi-annual safety inspection. Safety inspection criteria have been developed with strict attention to regulatory requirements. That means that almost half the Hospital does not meet the minimum standard and could not pass an inspection by OSHA, JCAHO, the fire marshal, or another regulatory body.

In general, the inspection criteria are divided into categories that mirror the areas of JCAHO's Environment of Care standards. Those are:

- Safety
- Hazardous Materials
- Fire Prevention (Life Safety)
- Emergency Management
- Utilities Management

- Medical Equipment Management
- Security

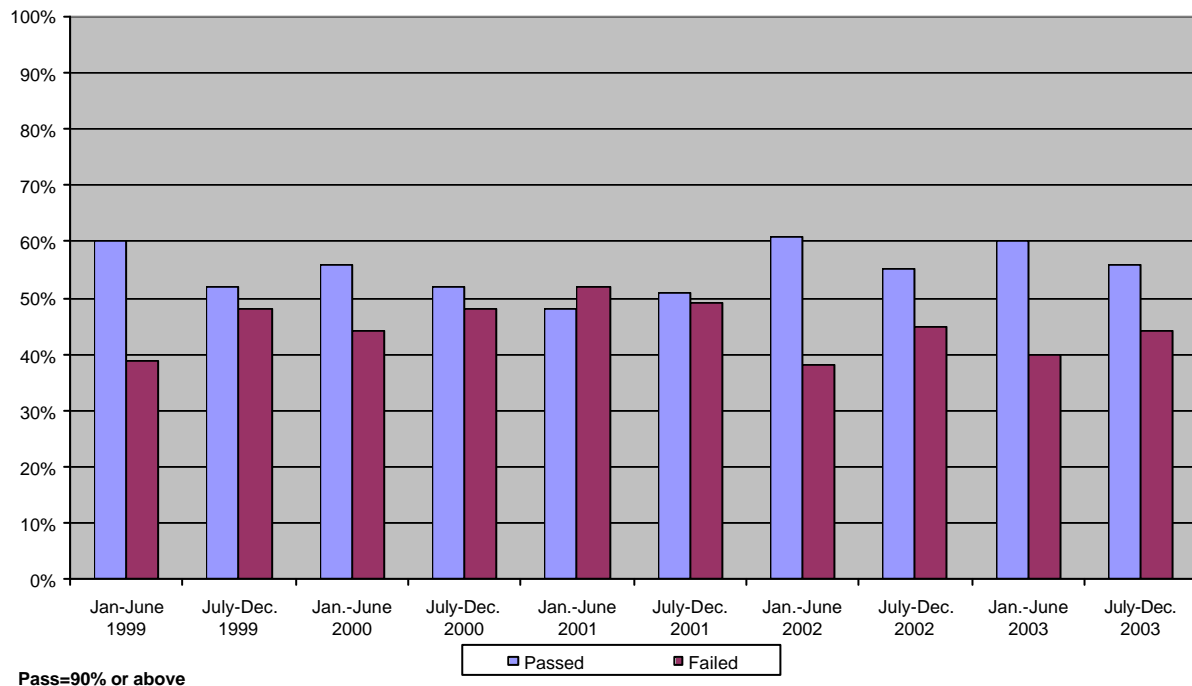
The inspection also includes housekeeping standards developed during Operation Pride several years ago. JCAHO standards incorporate many other regulatory compliance standards.

The Hospital requires that each department score 90% or higher on the overall inspection and 95% or higher on the fire prevention or life safety standards.

The average score was 77%, with some departments scoring as high as 100% and other as low as 31%.

In general, departments that score very low on a safety inspection do so because they haven't resolved the problems identified in prior inspections.

Hospital Inspection Trends Pass/Fail Comparison by Percentage



This newsletter is distributed to Hospital leaders and safety training coordinators to help them fulfill their safety responsibilities.

