

# SPRING 2013

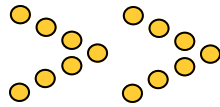
## 2013 General Membership Meetings

February 8  
May 10  
August 9  
November 8

**Time: 11:00 a.m.—2:00 p.m.**

The May 10th meeting will be held at the Lansing Area Safety Council located at 3315 S. Pennsylvania Avenue, Lansing MI 48190 [http: http://goo.gl/maps/DQSBn](http://goo.gl/maps/DQSBn)

Please RSVP to Sandy Allen, [smallen@coverys.com](mailto:smallen@coverys.com) if you plan to attend the meeting.



MICHIGAN HEALTH CARE SAFETY ASSOCIATION

*Advocating for Safety in Health Care*

## NEWSLETTER

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### 2013-2014 MHCSA Board

President: Ken Smith (Marsh Consulting)	Planning/Education Committee: Ken Smith (Marsh Consulting), Pierre Gonyon (Saint Joseph Mercy Hospital), Gary Schmekel (Marlette Regional Hospital)
Vice President: Janice Homola (Coverys)	Membership/Marketing: Ken Smith (Marsh Consulting), Pierre Gonyon (Saint Joseph Mercy Hospital), Gary Schmekel (Marlette Regional Hospital)
Treasurer: Sandy Allen (Coverys)	Past President: John Bolde (Munson Medical Center)
Secretary: Terry Fisk (Trinity Health)	

### LETTER FROM THE PRESIDENT



Hello MHCSA Members!!!

First, let us say: "Thank you", to everyone who renewed your 2013 MHCSA membership and "Welcome", to all of our new members!!! Next, I want to sincerely thank our past and present leadership teams who have worked so very hard at making our Association the best it can be. Over the past few years we have greatly benefited from our MHCSA officers with John Bolde and Russ Kolski leading the way.

Our goals for 2013 started by updating and revising our MHSCSA web site and IT capabilities and making them a more useful tool of communication for our members. We wanted to do our best to promote the use of our ListServ and web site to better assist users with current and value added information for all.

For the remaining of 2013 (and most of 2014) our primary focus will be on Healthcare Safety training and education. Included are topics such as:

- ◆ Flu Vaccine; presented by Teresa Fisk at our Feb. 8th meeting
- ◆ GHS (Global

Harmonized system); being presented by MIOSHA CET Division on May 10th.

- ◆ Violence in the Workplace
- ◆ Pharmaceutical Waste Management
- ◆ Personal Protective Equipment Standard
- ◆ EC Standards.

I have been involved with Healthcare Environmental Health and Safety for over 28 years now. During that time, we have all gained incredibly valuable experiences and have grown in our knowledge and skills to make the Healthcare industry a safer work environment. We have

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**MHCSA MISSION:** To promote and maintain "safety" as a primary function in the delivery of quality health care services.





MICHIGAN HEALTH CARE SAFETY ASSOCIATION



# QUARTERLY NEWSLETTER SPRING 2013

## LETTER FROM THE PRESIDENT (CONTINUED FROM PG. 1)

experienced good strong economies as well as challenges. Our country has also coped with devastating storms, floods and painful attacks to our schools, businesses and sporting events. Through it all, it is Healthcare that stands above all other industries as the one to serve and protect our fellow man from further harm. That is why I consider Healthcare to be the very best industry in the world. I have long ago recognized this same common trait among the healthcare safety professionals. Now that I am entering the last decade of my professional career I realize what really matters the most, and that is you....and our soul mates, our family, friends, peers, co-workers, clients and contacts. The only thing that really matters in life are relationships and if there ever was a time we needed each other it is now. Together we can accomplish so much more, while elevating our quality level and advancing to a holistic Culture of prevention!!!

MHCSA team and I personally want to thank each one of you for allowing me to serve you as President of our Association. Together, we are Better !!

*Kenneth D. Smith*

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So, we sincerely thank you for being a member of the

## 2013 MHCSA MTG. SCHEDULE AND MAY 10TH MTG LOGISTICS AND TOPIC

### Meeting Schedule

- February 8th
- May 10th
- August 9th
- November 8th

Time: 11:00 a.m.—2:00 p.m.

Location: The meetings will be held at the Lansing Area Safety Council located at 3315 S. Pennsylvania Avenue, Lansing MI 48190 <http://goo.gl/maps/DQSBn>

### May 10th Logistics and Topic

**Please RSVP to Sandy Allen, [smallen@coverys.com](mailto:smallen@coverys.com) if you plan to attend the meeting.**

**Call in Number for meeting:**

**1-646-583-7415**

**Attendee Audio PIN Number: 84419651#**

### “Globally Harmonized System (GHS)”

The MIOSHA Hazard Communication Standard (HCS) is now aligned with the Globally Harmonized System of Classification and Labeling of Chemicals (GHS). This presentation will highlight the revisions to MIOSHA standard Part 42, 92, & 430 Hazard Communication including new requirements for hazard classification, labeling, safety data sheets and employee information and training. This program will also provide information on written materials and training resources that are available to assist employers with compliance and training activities.



Jenelle K. Thelen, Industrial Hygienist,  
Michigan Department of Licensing &  
Regulatory Affairs Michigan Occupational  
Safety & Health Administration

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**HIGHLIGHTS FROM FEBRUARY 8TH MEMBERSHIP MEETING**  
**BY TERRY FISK**

The education session during our February 8th meeting was a presentation on Influenza Prevention "The Trinity Health Journey". The presentation focused on the development and implementation of a comprehensive system wide Influenza Prevention Plan including the requirement of vaccination as a condition of employment for over 55,000 associates. The plan was implemented during the 2012/2013 flu season and has resulted in an average associate vaccination rate exceeding 95%. The goal was 90%.

The success of the program was the result of senior leadership support and management support at all levels; alignment with the "Culture of Safety" development of a position paper which defined the goals, objectives and the benefits of the plan; consistent messaging through the Communication' Departments; development and approval of a system-wide clinical Influenza Prevention policy; development of an implementation tool kit and associate training module.

Some of the unplanned benefits of the plan included the development of a more robust process around vaccination documentation and vaccine related reactions and greater management accountability for monitoring their associates throughout the campaign season. Trinity Health also feels that this journey has positioned them for a more comprehensive approach for associate vaccination, medical surveillance and emergency preparedness.

**13TH ANNUAL SAFE PATIENT HANDLING EAST CONFERENCE HIGHLIGHTS BY TERRY FISK**



The 13th Annual Safe Patient Handling (SPH) East Conference was held on March 18-22, 2013 Rosen Shingle Creek, Orlando, Florida. The following information represents data and leading practices discussed during some of the break out sessions:

- ◆ Radiology experiences 2x more lateral transfers than nursing. At this hospital the speaker reported that placing slings under patients coming from the ED or other areas of the hospital made a huge impact on the transfer of patients in radiology. They did have ceiling mounted lifts and mobile lifts in the department and used air transfer mattresses for lateral transfers.
- ◆ Susan Gallagher, RN, PhD gave a good presentation on hygiene and the patient of size. She emphasized that full protocol and planning for obese patients start as early as possible prior to the patient being admitted. More and more hospitals have Mobility Managers who are involved in this planning. Recommended resource: VISN8 Bariatric Tool Kit.
- ◆ SPH & Workplace Violence- Nursing Assistants are at highest risk for workplace violence because they are front facing with the patient. Interventions that reduce agitation is key. Bathing is high risk. Need more research in this area.
- ◆ Pressure ulcers– A quantitative study of slings and different bed surfaces indicated no significant change in pressure or temperature. The results suggest an insignificant contribution to the risk of pressure ulcers through the use of slings during patient transfer. There is need for additional research.
- ◆ Relationship Based Care– Theoretical model for transforming practice based on common vision, common goals and relationships. Speaker noted that algorithms are great training tools but that simpler tools to determine the patient's ability and mobility needs are easier for nurses to use and understand. Interesting fact: 54% of the time when a patient falls there is an injury to the associate.

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