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**AMERICAN UNIVERSITY OF BEIRUT**  
**HOSPITAL SAFETY MANUAL**

**ENVIRONMENTAL HEALTH, SAFETY & RISK MANAGEMENT**

**HOSPITAL SAFETY DIVISION**

**July 2003**

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## **Forward**

The American university of Beirut (Campus, Medical Center, & AREC) is committed to providing its patients, students, employees and visitors with a safe environment.

The Hospital Safety Officer of the Environmental Health, Safety & Risk Management is responsible for implementing the University's safety program, inside the hospital, as prescribed by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO), local regulations and rules and regulations equivalent to the US National Fire Protection Association (NFPA), US National Institute of Health (NIH), US Center for Disease Control (CDC), the US Occupational Safety and Health Administration (OSHA) and the Environmental Protection Agency (EPA). To perform his duties the Hospital Safety Officer is assisted by a team of professionals from EHS&RM.

The purpose of this manual is to prescribe minimum requirements necessary to establish a reasonable level of a safe, functional, supportive and effective environment for patients, staff and other individuals in the hospital.

Moreover, the Hospital Safety Officer coordinates and provides the necessary training information along with details on work practices, safety equipment and facility design. It is the responsibility of the Department Director or Manager to ensure the safety and protection of personnel and property and that all his/her staff has attended these safety sessions.

This document and other pertinent safety training information and training materials may be obtained from the Hospital Safety Office.

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## **Important Phone Numbers**

Environmental Health, Safety & Risk Management:	2360
Hospital Safety Officer:	6019/2360
Fire Protection Engineer:	2360/8
Environmental Engineer	2360/1
Health Physics Services:	2360/3/7
Sanitarian:	2360/2
Risk Manager	2360/9
Bio-safety Office:	2360
Protection Office:	2400
University Health Services:	3000
Fire:	5555
Cardiac Arrest Team:	6666

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## **Fire Safety**

The Fire Plan covers the requirements associated with the roles and responsibilities of personnel at the fire's point of origin and away from the fire's point of origin. It also covers the roles and responsibilities in preparing for building evacuation, and the use of equipment for evacuating or transporting patients to areas of refuge.

The objective of this plan is to insure the safety and well-being of patients, visitors, staff and students by outlining generic guidelines and procedures to be followed upon the detection of fire or smoke.

In-service training and testing of all staff on the fire rules, regulations, policies and procedures is conducted by the Hospital Safety Officer. The department Director or Manager is responsible for training and testing the employee in specific procedures to be followed, and the use and location of fire alarm pull stations, fire extinguishers and evacuation exits.

Assessment of this training is accomplished by conducting regular fire drills. Fire drills summary reports are reviewed by the Environment of Care (EOC) Committee.

Fire Drills are conducted by the Hospital Safety Officer and the Life Safety Committee, quarterly on each shift. Before each drill, observers are stationed in different areas of the hospital to evaluate staff performance, and complete the checklist form.

For view, refer to the [EOC Manual / Fire Plan](#).

For more information, refer to [Fire Protection Manual](#).

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## **Lab Safety**

The plan covers the safety requirements associated with test and experimental work in laboratories. It includes risk assessments, roles and responsibilities of staff, handling and storage of chemicals, personal protective equipment, waste management, machines maintenance and inspection, spill containment and training of personnel.

The objective of this plan is to promote safety awareness and encourage safe work practices in the laboratory. The guidelines provided in the plan serve as a reminder of things staff can do to work more safely.

In-service training for all laboratory personnel on general lab safety, personal protective equipment use, chemical handling & storage, Material Safety Data Sheets (MSDS), and spill containment, is provided by the EHS&RM Department. The lab Supervisors are responsible to make sure that all staff in their sections attend the assigned safety sessions.

Assessment of this training and staff adherence to safety measures is accomplished by conducting regular laboratory inspections (twice/year) and spot checks. Inspection summary reports are reviewed by the Environment of Care (EOC) Committee.

Supervisors and Principal Investigators are to implement all possible measures to provide a safe working environment for those under their direction and to instruct them in safe working procedures. Situations requiring further assistance should be reported to the Department Head.

Department Heads, Chairs and Deans are responsible for overseeing the application of health and safety programs by ensuring that supervisory personnel reporting to them assume their responsibilities for adhering to safety regulations and guidelines. They are also required to identify those situations requiring further assistance or intervention.

For view, refer to [Laboratory Safety Manual](#).

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## **Hazardous Materials & Waste Management**

The plan covers the safety requirements associated with the management of hazardous and infectious waste. It includes the procedure for segregating, handling, treatment and disposal of medical waste.

The objective of this plan is to promote awareness on the proper mechanisms for interaction and oversight for controlling biological, chemical and radiological materials and waste.

In-service training for all hospital staff on the proper procedures for segregation and disposal of medical waste is provided by the Hospital Safety Officer and the Hospital Administration. It is the responsibility of the Departments Heads and Managers to insure that their staff abide to these procedures.

EHS&RM promote, through education, reasonable methods and means to foster safe practices for the controlled acquisition, handling, utilization and disposal of necessary hazardous materials.

The Hospital Safety Officer is responsible for monitoring the hazardous materials and waste management program, except fro the radioactive waste that is handled and monitored by the EHS&RM Health Physicist.

For view, refer to [Hazardous Materials/Wastes Management Plan](#).

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## **Radiation Safety**

The plan covers the safety requirements associated with handling, purchasing, operation and maintenance of equipment containing radioactive substances. It includes rules and regulations, application for use of radioactive machines and materials, emergency procedures, exposure and waste management.

The objective of this plan is to promote awareness among staff, handling radioactive materials, on the procedures and requirements that must be used to evaluate or control exposure to radiation.

The Health Physics Services has the overall responsibility for developing and administrating the Radiation Safety Program at AUBMC.

The Radiation Safety Committee (RSC) provides for oversight of the Radiation Safety Program to ensure safe use of radioactive materials. The RSC is responsible for formulating policies with regard to radiation safety and protection of the environment to ensure compliance with local regulations and rules and regulations equivalent to the US Nuclear Regulatory Commission (NRC), US Environmental Protection Agency (EPA), and the US Department of Transportation (DOT).

The health physicist provides management of the day-to-day operations of the Radiation Safety Program, and assures compliance with the national and international policies rules and regulations.

For view, refer to [Radiation Protection Handbook](#).

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## **Environment of Care**

The Environment of Care program covers safety requirements that regulate the general safety program of the hospital. It includes the Safety, Life Safety, Hazardous Materials & Waste Management, Security, Utility Management, Medical Equipment and Emergency Preparedness.

The objective of this program is to provide a safe, functional, supportive and effective environment for patients, staff, visitors and students. It describes how the hospital will provide an environment free of hazards and manages staff activities to reduce the risk of injuries.

This program is in compliance with the National laws and the Joint Commission for the Accreditation of Healthcare Organizations (JCAHO) standards. The Hospital Director provides the support and resources necessary for the success and maintenance of an effective Environment of Care program.

The overall responsibility for the Environment of Care program is that of the Hospital Safety Officer, in conjunction with the Environment of Care Committee.

For view, refer to [Environment of Care Manual](#).