# Monthly Safety Notice

February 2020

National Baromedical Services, Inc.

## **Complacency and Pencil Whipping**

#### **Background**

We all appreciate that safety in the hospital is of utmost importance. Everyone from regulatory bodies, to consultants, to hospital committees, to unit managers and safety directors are constantly seeking new ways to keep people alert and informed to potential hazards and are developing ways to mitigate them. Safety stops, time outs, huddles, check lists, you name it, they have been all part of planning committees for decades in hopes to keeping staff on their toes and avoid complacency. Any employee who has been properly oriented and completes their annual skills competencies will definitely tell you they know their job and what is expected of them.

#### The Issue

The problem is people are human and get distracted easily. When routines become too routine that is when things are missed or short cuts created, and accidents can happen. It is not a matter of if rather a matter of when; especially if you do not regularly take a step back and reevaluate the process. Unfortunately, not everyone interprets information the same way and clear concise communication is a challenge, especially when it is coming second and third hand. Over time, people begin to forget the original intent or create a new understanding on something for how a plan is to be carried out. People do not always ask questions to seek clarification for various reasons or they simply do not know what they do not know.

#### **Bottom Line**

In our hyperbaric medicine departments, we use checklists. We have daily, weekly, monthly, and semi-annual lists for the unit and for chambers and equipment. We have manufacturers, NFPA, TJC and UHMS telling us what we need to use and to document to ensure compliance for safety. The problem with checklists is people stop reading them or just stop critically thinking about the words on the pages. They simply whip out a checkmark or an initial, just as the person before them did and assume the previous person paid attention to the checklist. Sometimes in the interest of saving time, checklists are completed well before any inspecting occurs, for example the pretreatment and post treatment daily

unit checks are all signed off at the same time in the morning upon the unit opening. If you are reading this now and thinking to yourself, "oh wow, this is talking about me." You are right! NBS visits all clients annually and every one of the client centers have been caught doing this at least once. Part of the reason we change up the inspection forms is to make you read them again and hopefully pay closer attention to them. We work in an area where emergencies can and do occur. Anytime you chart or sign off an inspection early in anticipation of the final outcome you must realize that you are breaching your role as a healthcare provider and putting your credential on the line as well as the lives of others.

Attached are revised Unit and Chamber Inspection forms. Please begin using and let us know if you have questions about them. In addition, the 2020 HBO policies are posted on the NBS website. Please review them.

#### Attachments:

# **Hyperbaric Medicine Service**

## Daily Unit Inspection – Level 2

 $\mathbf{v} = \mathsf{OK}$  X = Finding: See notes below. N/A+ Not Applicable. Draw a line through days when the unit is closed Month

<b>V</b> = OK <b>X</b> = Finding: See notes below	. N/A+ Not Applicable. Draw a line through days when the unit is closed												Mon	tn				Year													
		Pre-treatments																						<del></del>							
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
INITIALS:																															
Turn ON chamber O2 flow, ensure LOX <b>50-70 psi; record value</b>																															
Medical air at <b>50 psi</b> ; <b>record value</b> minimum volume 500 psi																															
Chamber exhaust & supply hoses secured; no kinks																															
Inspect acrylic for blemishes; scratches, crazing																															
Fire extinguisher present																															
Chamber ground secure to hospital																															
Turn on air; confirm air mask flow																															
Post-treatments																															
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
INITIALS:																															
Disinfect inside chambers, stretchers, mattresses, pillows																															
Secure patient healthcare information																															
Turn OFF and bleed chamber O2 and air in lines. Air supply >500psi																															
Intercom battery charger indicator light glows as operational																															
Restock supplies & linen																															
Wipe down ancillary equipment with disinfectant																															
Ensure oxygen in portable E cylinders are full and closed.																															
Date/Time: Finding: (chamber related findings are documented in chamber log)											Reported by: Reported to: Follow-up: (Placed in chamber log?)																				

# **Hyperbaric Medicine Service Monthly Unit Inspection - Level 2**

Notification of Findings: V=OK,Completed X=Finding: Log in Notes N/A=Not Applicable Year:	January	February	March	April	Мау	June	July	August	September	October	November	December
Initials												
Hyperbaric Chamber Oxygen												
Confirm oxygen regulator settings are between <b>50-70psi</b> while gas is flowing. Alarms set at 45 low and 75 high												
Check for gas purity reading documents from gas deliveries												
High Pressure Medical Air Cylinders (H size, Yellow)												
Confirm high pressure air regulator settings, labeling, hoses secured, safety chains on												
Check the function of air (BIBS) system; ensure regulator set to <b>50psi</b> ; check alarms 45low and 55high if applicable												
Chambers												
Inspect stretcher mattresses, wedges and pillows for wear and cleanliness; remove tags												
Chamber door seals; clean debris; inspect for nicks causing leaks; rotate if still usable; note findings in chamber log												
Clean then lubricate brass door lugs with Krytox or other 100% oxygen compatible lubricant												
Wash stretchers, rails, gurney, tray, wheels with approved disinfectant												
Inspect & polish acrylic tubes with approved plastic polish. Buff scratches. Note findings in chamber log												
Remove and inspect in-chamber exhaust screens for debris; clean off as needed with soft cloth												
Inspect outdoor chamber exhausts mesh for debris and ensure presence of oxygen caution sign												
All Other Medical Equipment												
Inspect gurney rubber bumpers for deterioration/replace as needed												
Ensure all electrical devices are in proper working order; power strips checked by biomed annually												
Inspect all patient contact items for cleaniness; masks, tubing, Xmas tree, cuffs, ground cord/strap, rod, leads												
Check for current maintenance inspection stickers												
Inspect and clean with approved disinfectant: IV pumps, NIBP, vital signs and EKG monitors, glucometer												
Check supplies for expiration & adequate stock levels												
Clean TCOM monitor(s), cables and re-membrane as needed												
Problem/Follow-up: Include date and action performed; Use equipment maintenance log or chamber logs.												

### Hyperbaric Medicine Service Monthly Chamber Checks

Chamber Model and Serial #: Chamber # **Cycle Counter** Ground Record value of chamber ground Record monthly value on chamber Initials (Not to exceed 1  $\Omega$  ohm) cycle counter Date **Chamber Test Points Patient Ground Jack New Total Past Month** 

Refer to Sechrist - Chamber Ground Measurement and Wrist Verification Test Procedure for instructions