

SUBJECT: SAFETY MANAGEMENT PLAN	REFERENCE #1003
DEPARTMENT: HOSPITALWIDE	PAGE: 1
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APPROVED BY:	EFFECTIVE:
	REVISED:

MISSION:

Insert your mission statement for the Safety Management Plan. Be sure that the mission for the plan reflects the mission statement of the organization. *You will want to emphasize that the plan focuses on the management of the environmental safety of patients, staff and others through identification of safety risks and the planning and implementing of processes to minimize the likelihood of those risks.*

SCOPE:

The scope of the Safety Management Plan defines the processes which _____ Hospital (list all sites that are included in this plan) utilizes to provide our patients, personnel and visitors with a physical environment free of hazards and manages activities proactively through risk assessment to reduce the risk of injuries to patients, staff and other individuals coming to the hospital.

Note: If your organization has multiple sites or locations, you may choose to have separate management plans for each location or have one comprehensive set of plans. Whichever method your organization chooses, the organization must address specific risks and any unique conditions at each site/location.

OBJECTIVES:

The objective of _____ Hospital's Safety Management Plan is to control known and potential safety hazards to our patients, personnel and visitors.

GOALS:

- The goals of _____ Hospital's Safety Management Plan include the following:
 - Maintain a safe environment and conditions for patients, personnel and visitors
 - Reduce and control environmental hazards and risks of safety-related incidents by proactively evaluating systems in place and make the necessary changes through the Safety/Environment of Care Committee, Performance Improvement Committee, administration and departmental participation
 - Reduce and prevent accidents and injuries to patients, staff and visitors
 - Provide education to all personnel on the elements of the Safety Management Program

SUBJECT: RISK ASSESSMENT PROGRAM	REFERENCE #1015
DEPARTMENT: SAFETY/ENVIRONMENT OF CARE COMMITTEE	PAGE: 1 OF: 1
APPROVED BY:	EFFECTIVE: REVISED:

POLICY:

- The hospital risk assessment program is designed to evaluate, reduce and control environmental hazards and risks of safety-related incidents to the buildings, grounds, equipment, occupants, internal physical systems and safe practices of hospital employees as they impact patient care and safety.
- The risk assessment program includes a proactive risk assessment process for identification of hazards that could potentially compromise patient care in occupied areas of the organization’s buildings during demolition, construction and/or renovation work; environmental rounds of the facility to ensure safety-related issues are not present, safe practices are performed by staff and staff knowledge of safety practices; and incident review for potential risks.
- The performance improvement program for the Safety/Environment of Care Committee is designed to monitor the level of safety compliance at the hospital, and to identify any situations that detract from the goal of providing a safe and secure environment for patients, employees, medical staff and visitors. Any risks that are identified through proactive risk assessments, environmental tours, performance measure monitoring, etc., will be evaluated, and have procedures and controls put into place to reduce to the lowest possible point the adverse impact on the safety and health of patients, personnel, medical staff and visitors of the hospital. For those cases, where appropriate and deemed necessary, the failure mode effects and analysis process will be undertaken.

PROCEDURE:

- Environmental Rounds/Hazard Surveillance Surveys:
 - There is an ongoing program in place to perform Environmental Rounds/Hazard Surveillance Surveys on all patient care areas at six (6) month intervals and annually in non-patient care departments, i.e., Business Office.
 - The Safety Officer is responsible for ensuring rounds/surveys are completed by individuals who have expertise in safety-related issues, documented and information collected and evaluated regarding environmental deficiencies, safety hazards, unsafe practices and staff knowledge at minimum of the above described intervals in all hospital departments/services.
 - Reports from the rounds/surveys are forwarded to the next Safety/Environment of Care Committee meeting following the survey date which includes a summary report of findings and the current status of improvement projects.

HAZARD SURVEILLANCE DETECTION SURVEY SURGICAL SERVICES

Inspectors: _____ Title: _____ Date: _____

Area Surveyed: _____

Received by Committee: _____ Sent to Department: _____ Action Copy Returned: _____

Work Practices	Y	N	N/A	Comments
1. Staff able to demonstrate knowledge and skill of their role and expected participation in the safety management program?				
2. Staff able to demonstrate knowledge and skill of their role and expected participation in the security management program?				
3. Staff able to demonstrate knowledge and skill of their role and expected participation in the hazardous materials and waste management program?				
4. Staff able to demonstrate knowledge and skill of their role and expected participation in the emergency management program?				
5. Staff able to demonstrate knowledge and skill of their role and expected participation in the life safety/fire prevention program?				
6. Staff able to demonstrate knowledge and skill of their role and expected participation in the medical equipment management program?				
7. Staff able to demonstrate knowledge and skill of their role and expected participation in the utility systems management program?				
8. All nursing personnel instructed in proper lifting and body mechanics? If yes, by whom? How often?				
9. Instructions given in use of oxygen and its hazards?				
10. Signs available when oxygen in use? Last date training given?				
11. How are equipment malfunctions reported? Tags used to identify hazards?				
12. Is equipment being repaired locked out? Do all employees know lock out rules?				
13. Standard Precautions observed at all times?				
14. OSHA Bloodborne Pathogens Regulations observed?				
15. Personal protective equipment provided? Instructed in use of that equipment? Equipment used appropriately?				
16. Are adequate hand hygiene facilities provided?				

SUBJECT: USE OF CLINICAL ALARMS ON MEDICAL EQUIPMENT	REFERENCE #4011
	PAGE: 1 OF: 1
DEPARTMENT: HOSPITALWIDE	EFFECTIVE:
APPROVED BY:	REVISED:

POLICY:

It is the policy of this institution to assure that all clinical alarms and medical equipment alarm systems utilized for patient care are properly operational and alarms are activated when the appropriate settings are in use.

PROCEDURE:

- Routine preventive maintenance and testing of clinical alarms and alarm systems associated with medical equipment will be performed by the Engineering/Biomedical Department:
 - The Engineering/Biomedical staff will inventory all equipment/devices that are equipped with an alarm that is designed to elicit a response.
 - This includes all medical (patient care) equipment such as ventilators, infusion pumps, anesthesia gas monitors, hemodynamic monitors, etc., as well as safety and security alarms such as infant abduction alarms, patient “wander guard/fall alarms”, etc.
 - Each piece of medical equipment/device to be utilized for patient care will be inventoried for risk.
 - Each safety/security alarm throughout the institution will be inventoried for risk.
 - Assess each device and assign a risk score based on inherent risk of the device (or safety/security system) failing to alarm or failing to draw the attention of staff (staff do not respond to alarm).
 - Risk scoring risk will be assigned on a 0 - 5 scale, with **0** (zero) being **no risk** to patient **5** (five) being **serious risk** including possible death to the patient.
 - Testing of all equipment/devices and safety/security systems will be performed, starting with devices with the highest risk potential. Testing is designed to ensure the alarming mechanism (audible, visual, both) is functioning according to the manufacturer's specifications.

PERFORMANCE IMPROVEMENT MONITORING AND EVALUATION PLAN

Department: Safety/Environment of Care Committee

Scope: Safety/Environment of Care Committee's function is to provide a safe, functional, supportive and effective environment for patients, staff members, volunteers and visitors to the organization

Date: _____

Responsibility: Safety Officer, Department Managers, Safety/Environment of Care Committee

Priority Focus Area	Performance Measures/Outcomes	Related Functions	Benchmark Goal	Data Collection (Methodology)	Integration and Collaboration
Equipment Use	- All intrusion and panic alarms tested monthly	Environment of Care		Data are collected from Alarm Testing Logs. Data will be aggregated and presented in report format by the Security Director or PI designee. Conclusions, recommendations, actions and evaluations will be reported along with the aggregated report to Safety/Environment of Care Committee and other appropriate committees according to meeting schedules.	Security Department Engineering Department Safety Officer Safety/Environment of Care Committee
	- # of medical equipment incident reports - # of user-related errors failures	Environment of Care Human Resources		Data are collected from Medical Equipment Incident Reports and User Error/Failure Reports. Data will be aggregated and presented in report format by the Engineering Department Director or PI designee. Conclusions, recommendations, actions and evaluations will be reported along with the aggregated report to the Safety/Environment of Care Committee and other appropriate committees according to meeting schedule.	Engineering/Biomed Department Department Managers Safety/Environment of Care Committee