

GENERAL SAFETY

Policy and Procedure

OBJECTIVE:

1. To provide a hazard-free environment within the facility and on the premises and to minimize or eliminate facility damage through accidents or fires.
2. To comply with regulations as prescribed by state and local code, other regulatory agencies and to comply with legislation relating to OSHA, Workers Compensation, and all other applicable laws and/or regulations.
3. To provide additional safety as needed during construction phases and to ensure that all contractors are oriented to the facility safety rules and regulations and that safety is addressed at regular contractor meetings.
4. To create an attitude of concern in the prevention of injury and occupational diseases to employees, visitors and patients.

Environmental Safety Program:

Safety assessments are accomplished in several different ways;

1. Insurance liability carrier performs inspections of building and premises accompanied by Administration.
 - a. Reports are filed and maintained by the CEO
2. Minnesota Deputy Fire Marshal performs building inspection accompanied by a representative from Maintenance.
 - a. Reports are filed and maintained by the CEO
3. Environmental safety inspections are performed quarterly by the members of the Safety Committee, as assigned by the Safety Coordinator.
 - a. Items inspected include, but are not limited to; exit routes, PPE, fire extinguishers, electrical equipment, lighting, smoking policy, storage areas, fire doors, grounds and parking lots.

Procedure for Disposition of Deficiencies:

The safety committee will evaluate and categorize life safety items and those items seriously affecting patient, visitor, or employees.

1. Top Priorities
 - a. Work orders are called in to or delivered to the Maintenance Department. Immediate action to correct deficiency is mandatory.
2. Less serious deficiencies
 - a. Department Managers affected is notified. Immediate action to correct deficiency is mandatory.
3. Fire Marshal reports
 - a. All reports are answered immediately regarding the disposition of deficiencies
 - i. Reports are filed and maintained by the CEO

4. Life safety items or issues that have a potential for compromising patients, visitors or employee safety are addressed to the Safety Committee. All issues are dealt with immediately.

Safety Committee Organization and Responsibility

The Safety Committee is comprised of representatives from various departments to include; Acute Care, Clinic, Public Health, Administration, Maintenance, and Housekeeping.

Administration

- Continuous participation with visible leadership
- Commit funds
- Appropriate time to develop and implement program
- Administer program
- Develop policy
- Review injury and insurance data annually

Safety Coordinator

- Personal commitment to safety
- Establish yearly objectives and goals
- Provide budgetary requests for proper equipment and training
- Arrange for, and/or conduct training
- Participate in annual review
- Ensure adherence to governmental regulations and company safety rules
- Investigate accidents
- Promote accident reporting within 24 hours of notification

Safety Committee

- Promote the Safety Program
- Advise management of safety issues and needs
- Make formal recommendations
- Plan and promote safety activities
- Evaluate the effectiveness of the program
- Conduct routine inspections
- Investigate potential problems and near misses
- Set goals and objectives

Safety Committee Chair

- Coordinate the activities of the committee's recommendations
- Review all safety suggestions submitted by employees presenting information to the committee

Department Managers/Supervisor/Lead People

- Maintain a positive attitude about safety
- Hold direct responsibility for safety within their work group taking corrective action when needed

- Ongoing inspections
- Rule enforcement with disciplinary action when needed
- Solicit employee input regarding safety issues

Employees

- Support the safety program
- Follow the safety rules and procedures
- Work safely
- Promptly report hazardous conditions
- Suggest improvements
- Communicate safety to co-workers
- Use personal protective equipment (PPE)
- Participate in annual safety training
- Understand unsafe acts which could result in disciplinary action

Safety Policy Review:

1. Safety policies are reviewed following the *Policy Review Procedure*.
2. Evaluation of effectiveness of the Safety Committee is completed quarterly and reported to the QA/QI Committee.

Orientation/Education of Employees:

1. All employees must complete safety orientation to include, but not limited to:
 - a. Safety related materials
 - b. Fire Plan
 - c. Hazardous Communications
 - d. AWAIR
 - e. LOTO
 - f. Safety Reporting
 - g. Emergency Preparedness
2. Documentation is filed and maintained by administration
3. All departments are encouraged to discuss safety as part of their regularly scheduled staff meetings.

Incident Reporting:

- A system, if incident reporting has been established, which will enable proper investigation to determine cause, corrective action, and preventive measures.
- Accurate incident reporting and investigation is considered to be a major component of effective management.
- All employee incident reports are completed and routed to their Department Manager and Administration.
- Incident reports involving patients and visitors are completed and routed to the appropriate Department Manager and Administration.
- All incident report summaries are presented at each Safety Committee meeting.

Information Distribution:

- Meeting agendas and minutes of the Safety Committee are forwarded to:
 1. Administration
 2. QA/QI Committee

Safety Management Plan Tool Information Collection Tools:

1. Survey/inspection by outside agencies
2. Safety management tracking sheets
3. Risk Management reports
4. Equipment and utility management reports
5. Environmental safety inspection reports
6. Incident report summary
7. Needle/sharps report summary
8. Patient survey forms
9. Visual observation
10. Drill reports