

POLICY MANUAL

Subject: Safety Monitoring of
Outpatient Offices

Effective Date: 12/16/96

Initiated By: Russell Taylor
Safety Director

Approved By: James B. Moore
Chief Executive Officer

Review Dates: 11/08RT, 11/11RT, 12/13RT
11/14 RT

Revision Dates: 12/99 CSF/RT
12/05RT

POLICY:

In order to maintain an environment conducive to the safety of our patients, visitors, and staff in an outpatient setting of Cumberland Heights, the Environment of Care Officer or designee, through the Environment of Care Committee, will monitor safety management issues on an ongoing basis

PROCEDURE:

Information will be collected from the following sources:

A. Incident Reports

- 1) All incidents are to be reported in the form of a summary so as to protect the confidentiality of the report.
- 2) Original copies of completed incident reports are forwarded to the QM Dept. Copies of environmental incidents, including safety and security, will be forwarded to the Environment of Care Officer by the QM Dept.
- 3) Reports are given by the Quality Management Director or designee at the Safety Committee meetings.

B. Safety Inspections

- 1) Emergency Drills and/or Actual Events are reported monthly to the QM Dept by the Program Coordinator of the Outpatient offices. This report includes the location, date/time, type of emergency, listing of persons involved, and description of all details regarding the emergency circumstances and response actions. These reports are reviewed regularly by the Quality Management Director and the Environment of Care Officer.
- 2) Safety & Infection Control Reports are submitted monthly to the QM Dept by the Program Coordinator of the Outpatient offices. This report includes safety inspections of exits, fire extinguishers, lighting, sanitation and general cleanliness, and safety training for new employees. It also

includes infection control inspections of biohazard containers and employee procedures.

- 3) Environmental Tours will be led by a team designated by the Environment of Care Committee at least twice per year for all clinical areas.
- 4) Annual inspections are conducted by the State of Tennessee Department of Mental Health and Substance Abuse Services. All findings and plans of correction are reported to the QM Dept and the Environment of Care Officer and are to be addressed immediately.
- 5) Local code inspections may be conducted by the authority having jurisdiction.
- 6) All above information will be presented by the Environment of Care Officer to the Environment of Care Committee.

C. Infection Control

- 1) All incidents of infection control exposures are reported to the Infection Control Specialist, the Director of Quality Management, and the Environment of Care Officer. All incidents are reported in the form of a summary so as to protect the confidentiality of the report.
- 2) The Infection Control Specialist or designee will complete an Infection Control Exposure Event Record and submit to the QM Dept.
- 3) Reports are given by the Infection Control Specialist to the Safety Committee.

All reports and recommendations are summarized by the QM Dept for the Environment of Care Committee meetings so they may be reviewed and recommendations can be finalized.