
ENVIRONMENTAL SAFETY PROGRAM

Policy No. 6-018.1

PURPOSE

To establish the process by which the organization will address safety and risk management for both patients and organization personnel.

Definition

1. Environments: Building(s), delivery vehicle(s), equipment, and people.

POLICY

The organization will maintain an environmental safety program that addresses the office environment as well as the patient care environment, including, but not limited to:

1. Environmental safety, addressing hazards, injuries, storing and handling of environmental cleaning supplies, and unsafe practices
2. Security, addressing unsafe areas, on-call, isolation, and security concerns
3. Hazardous materials/wastes, addressing OSHA, EPA regulations, hazardous spills, health hazards, and reporting spills/exposures
4. Emergency management, addressing continuing care, communication, and prioritizing patients
5. Fire safety, addressing fire response, fire hazards, fire escape, and communication
6. Equipment management, addressing maintenance, recalls, cleaning, and set-up including the proper use, handling and care of desktop computers and laptop/clinical documentation devices
7. Utilities, addressing electrical outlets, grounding, and batteries

The senior management will have the responsibility for the following activities:

1. Designing the environmental safety program
2. Teaching organization personnel and patients how to implement the environmental safety program
3. Implementation of the environment of care processes
4. Measuring and assessing the effectiveness of the design

- A. Incidents related to home environment of the patient, including:
 - 1. Equipment malfunctions
 - 2. Patient endangerment
 - 3. Falls
 - 4. Medication errors
 - 5. Fires
 - 6. Electrical issues
 - B. Incidents related to home environment but specific to organization personnel, including:
 - 1. Organization personnel endangerment
 - 2. Equipment malfunction
 - 3. Medication errors
 - C. Incidents related to office environment, including:
 - 1. Equipment malfunction
 - 2. Fires
 - 3. Electrical issues
 - 4. Organization personnel falls/injuries
 - D. Outcomes of office environment safety checks, including fire drills
9. Any areas demonstrating a pattern or trend will be analyzed by the Performance Improvement Committee for development of recommendations and actions.
10. A summary of the results of measures will be forwarded to the existing oversight committees and the Governing Body.

All personnel should be made aware of the following housekeeping requirements of the OSHA standard on bloodborne pathogens:

1. Decontamination of Surfaces

- Immediately after completion of procedures.
- Immediately after end of work shifts.
- Immediately after becoming overtly contaminated with blood or other potentially infectious materials.

2. Protective Covering of Equipment and Environmental Surfaces

- Protective covering (plastic wrap, aluminum foil, imperviously-backed absorbent paper).
- Remove and replace at end of work shift.
- Replace when overtly contaminated with blood or other potentially infectious materials.

3. Decontamination of Equipment

- Routinely check for contamination.
- Decontaminate when contaminated with blood or other potentially infectious materials.
- Decontaminate prior to servicing or shipping.

4. Decontamination of Receptacles

- Inspect, clean, and disinfect on a regularly scheduled basis any reusable bins, pails, cans and similar receptacles which have a potential of becoming contaminated.
- Clean and decontaminate immediately, or as soon as possible, when visibly contaminated.

5. Clean Up

- Do not use hands to pick up broken glassware, which may be contaminated.
- Use mechanical means (brush and dustpan, tongs, or forceps) to pick up potentially contaminated broken glassware.

6. Handling of Specimens

- Place in a closeable, leakproof container prior to storage or transport.
- Color-code or label specimens according to OSHA standard on bloodborne pathogens.
- If it is likely that the primary container will be contaminated, place a second leakproof container over first container.
- If it is likely that the primary container will be punctured, place primary container in a leakproof, puncture-resistant secondary container.
- Color-code or label second container in same manner as primary container.

7. Reusable Items

- Decontaminate prior to washing or reprocessing if contaminated with blood or other potentially infectious materials.

8. Handling of Infectious Waste

- Place in closeable, leakproof containers or bags prior to disposal.
- Color-code or label containers or bags according to the OSHA standard.
- Place a second closeable, leakproof container or bag over the outside of the first container or bag if it is likely outside contamination of the primary container or bag will occur.
- Close and color-code or label the secondary container or bag in same manner as primary container.
- Observe all federal, state, and local laws when disposing of infectious waste.
- Dispose of sharps immediately after use.
- Dispose of sharps in a closeable, puncture-resistant, disposable container that is leakproof on sides and bottom.
- Label sharps disposal containers according to the OSHA standard.
- Make sharps disposal containers easily accessible in immediate area of sharps use. Routinely replace sharps disposal containers.
- Do not allow sharps disposal container to overfill.

9. Handling of Laundry

- Treat laundry that is contaminated with blood or other potentially infectious materials as if contaminated.
- Handle such laundry as little as possible and minimize agitation of laundry.
- Bag contaminated laundry at area of use.
- Do not sort or rinse contaminated laundry in patient areas.
- Label or color-code bags in which contaminated laundry is placed and transported.
- Place and transport contaminated laundry in a leakproof bag if it is wet or presents a potential for soak-through or leakage from the bag.
- Ensure that laundry workers wear protective clothing and other personal protective equipment to prevent occupational exposure during handling and sorting of laundry.

RECOGNIZING THE DANGERS

Name: _____

Job Title: _____

Organization Personnel Identification Number: _____

Employer/Facility: _____

Department: _____

Date of Training: _____

Organization Personnel's Signature: _____

I have received training covering the following. (Please check the appropriate boxes below):

- Spread of HIV and HBV infection in the general population
- Number of health care workers who have gotten HIV and HBV infections on the job
- Symptoms and effects of HIV and HBV infection
- Ways of preventing, detecting, and treating HIV and HBV infections

In addition, I have been informed that:

- Sexual contacts of people who have HIV and HBV infections and IV drug abusers are at special risk of getting the AIDS or HBV, and
- The risk to health care workers is increasing as HIV and HBV spread in the general population.

**ENVIRONMENTAL SAFETY—PATIENT
Policy No. 6-023.1**

PURPOSE

To outline the mechanism to identify any environmental, mobility, and bathroom safety risks related to patient care.

POLICY

The organization is committed to promoting a safe environment for care for the patient and family/caregiver.

PROCEDURE

1. During the initial visit, the clinician/technician admitting the patient for care/service, will conduct a home safety check to identify environmental safety issues related to the type of care/service to be provided.
2. The home safety assessment will be documented in the patient/service record and will include, but will not be limited to:
 - A. Infection control, including hand hygiene practices, respiratory hygiene practices and contact precautions as needed
 - B. Medication safety (as applicable)
 - C. Fall prevention
 - D. Lighting
 - E. Communication
 - F. Bathroom safety
 - G. Fire safety
 - H. Electrical safety
 - I. Child safety (as applicable)
3. Based on the assessment, the clinician/technician will provide prevention tips and suggestions on reducing any environmental safety risks.
4. Each patient will receive written home safety instructions.

- C. Stay away from windows.
- D. Store all glass and other breakable objects.
- E. If electricity is out:
 - 1. Use flashlights. Do not use candles until certain there is no gas leak.
 - 2. For patients on oxygen concentrators, switch to cylinders.
 - 3. Where possible, switch equipment to battery backup.
 - 4. For life support equipment, arrange for additional battery backup or move to an alternate location with power.
- F. Close all drapes.
- G. CLOSE exit doors.
- H. Monitor weather bulletins/radio announcements.
- I. Do not exit building until instructed.
- J. REMAIN CALM. DO NOT PANIC.

Floods

(Flood warnings, alerts, or an actual flood.)

- A. Precautions before the flood:
 - 1. When a flood alert or warning is issued, store drinking water.
 - 2. TURN OFF all unnecessary electrical appliances.
 - 3. Do not touch any electrical appliance unless it is dry.
 - 4. Open basement windows to equalize water pressure on the walls and foundation.
 - 5. Move patient to upper floor or to other designated areas.
 - 6. Move all essential equipment and supplies to safe areas.
- B. After the flood:
 - 1. Do not use any open flame devices until the building has been inspected for possible gas leaks.

- G. Drive with all possible caution. If caught in a blizzard, seek refuge immediately. Keep car radio on for weather information.

- H. If your car breaks down—turn flashers on or hang a cloth from the radio aerial; stay in your car. If car is stuck in snow or traffic jam and car is running, crack windows to prevent carbon monoxide poisoning and keep exhaust pipe free of snow. If engine is not running, you do not need to crack windows.

**ENVIRONMENTAL SAFETY—OFFICE
Policy No. 6-019.1**

PURPOSE

To outline general office safety practices of the organization.

POLICY

Community Choice Home Care, Inc. is committed to provide a safe environment for all personnel, and will instruct all personnel to take responsibility in maintaining a safe office environment.

Physical facilities will be in continuous compliance with OSHA (federal and state), CDC, ADA, and applicable state or local regulations for maintaining a safe employee environment.

PROCEDURE

1. All personnel will receive education on basic safety rules.
2. All personnel will be responsible for recognizing and avoiding unsafe conditions, as well as controlling or eliminating any hazards or exposures to injury.
3. Basic safety guidelines will be incorporated into the daily work habits of all personnel, both at the office and in the patient care environment:

Body Mechanics While Lifting Objects

- A. To lift an object, squat or bend knees, take hold of the item, and straighten up.
- B. Divide the weight of the object between both hands.
- C. Leg or thigh muscles must be used for lifting objects.
- D. Keep back straight when lifting.
- E. Keep object close, avoid reaching, do not jerk.
- F. Secure firm footing before lifting.
- G. Ask for assistance with heavy objects.
- H. Use weight lift belt for lifting heavy objects (over 25 pounds).

Prevention of Slips and Falls

- A. Wear supportive, closed-toe shoes.
- B. Clean up noted spills and trash.
- C. Identify wet floors.
- D. Observe WET FLOOR signs.
- E. Stay off wet floors until dry.
- F. Walk, do not run or slide across floor.
- G. Keep wastebaskets, stools, stands, and other mobile equipment out of aisles and other areas intended for walkways.

Prevention of Bruises, Lacerations, Skin Tears

- A. Keep all desk and file drawers closed when not in use.
- B. Open only one (1) file drawer at a time.
- C. Knock before entering a room.
- D. Take time to look before leaving a room.
- E. Check furniture regularly for rough edges, splinters, sharp edges, or loose casters.
- F. File drawers should never be "bumped" closed with body.
- G. Use sharp or pointed tools correctly and store in a safe manner.

Prevention of Burns and Skin Reactions

- A. Avoid skin contact with all chemicals and/or contaminants.
- B. Handle chemicals cautiously.
- C. Never spray chemicals toward face of another person.
- D. Use proper mixing ratios with all chemicals/cleaning solutions.
- E. If cleaning compounds produce fumes, use only in well ventilated areas.

- F. Mix only those chemicals together for which specific instructions have been written, to avoid making a dangerous combination.
 - G. Wash promptly if any chemical comes in contact with skin.
4. All areas of the organization, including passageways, storerooms, and service rooms, will be kept clean and orderly and in a sanitary condition.
 5. Personnel will not consume food or beverage in toilet rooms or in any other area exposed to toxic material.
 6. The organization will ensure that medical personnel or consultants are readily available for advice on matters of office health. First aid supplies will also be readily available.
 7. All storage will be stacked, blocked, interlocked, and limited in height so that it is secure against sliding or collapse.
 - A. Storage areas will be kept free from any accumulation of material that constitutes a hazard or pest harborage.
 - B. Where equipment is used, sufficient safe clearance will be allowed for aisles, at loading docks, through doorways, etc.
 8. Medications and nutrition therapy solutions will be prepared under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation, safety, and security.
 - A. Medication and nutrition therapy preparation will only be done by personnel with documented competencies regarding medication and nutrition therapy preparation.
 - B. The environment where medications or nutritional therapies are stored will be appropriate to the therapy preparations, in the office and patient environment. As appropriate to the setting, areas to consider include, if applicable:
 1. Functionally separate areas for sterile product preparation to minimize the possibility of particulate and microbial contamination.
 2. A suitable environment for preparing sterile products.
 3. Adequate safety equipment to protect personnel preparing cytotoxic or hazardous medications .
 9. The organization will have adequate toilet facilities.

- A. Where toilet rooms will be occupied by no more than one (1) person at a time, they should be able to be locked from the inside, and must contain at least one (1) water closet; separate toilet rooms for each sex is not needed.
 - B. Adequate washing facilities will be provided in every toilet room or be adjacent thereto.
 - C. A suitable cleansing agent, individual hand towels or other approved apparatus for drying the hands, and receptacles for disposing of hand towels, will be provided at washing facilities.
10. The organization will annually conduct a formal office environment inspection, using the Office Environment Checklist. (See "Office Environment Checklist" Addendum 6-019.A.)
- A. A calendar of inspection will be determined by the Performance Improvement Committee.
 - B. The office environment inspection will include at a minimum:
 - 1. Posting of certificates of occupancy as required by local law and regulation
 - 2. Fire and emergency exits
 - a. Clearly detail areas of entrance and egress
 - b. Lighted exit signs when required are functional
 - 3. Areas containing hazardous materials are clearly marked and access is controlled.
 - 4. Hazardous chemicals and solutions are clearly labeled and stored and access is controlled.
 - 5. Facilities are barrier free and/or special arrangements are made to provide access as required by the ADA.
 - C. Annual fire drill will be conducted
 - D. Fire drills (as applicable) and health inspection reports will indicate compliance and be available for review
11. The following safety precautions have been established for all personnel to follow when emergency conditions warrant such action. These safety precautions are not all-inconclusive. Others may be added or become necessary during the actual emergency.

Severe Weather/Earthquakes

- A. Have emergency equipment and medical supplies readily available.

Policy No. 6-019.5

- B. Close all drapes.
- C. Move away from windows.
- D. Stay away from windows.
- E. CLOSE exit doors.
- F. Go to inside room of building with no windows, if available.
- G. Do not enter damaged portions of the building until instructed.
- H. Monitor weather bulletins/radio announcements.
- I. Do not exit building until instructed.
- J. REMAIN CALM. DO NOT PANIC.

Floods

(Flood warnings, alerts, or an actual flood.)

- A. Precautions before the flood:
 - 1. Make sure emergency supplies and equipment are readily available.
 - 2. When a flood alert or warning is issued, store drinking water.
 - 3. TURN OFF all unnecessary electrical equipment.
 - 4. Do not touch any electrical equipment unless it is dry.
- B. Precautions if evacuation of building is ordered:
 - 1. Travel only routes designated.
 - 2. Do not try to cross a stream or other water areas unless you are sure it is safe.
 - 3. Monitor local radio broadcast.
 - 4. Watch for fallen trees, live wires, etc.
 - 5. Watch for washed-out roads, earth slides, broken water lines, etc.
 - 6. Watch for areas where rivers, lakes, or streams may flood suddenly.

C. After the flood:

1. Do not enter the building until an all-clear has been given.
2. Do not use any open flame devices until the building has been inspected for possible gas leaks.
3. Do not turn on any electrical equipment that may have gotten wet.
4. Shovel out mud while it is still moist.

D. Flash Floods:

1. Remember, flash floods can happen without warning.
2. When a flash flood warning is issued, take immediate action.
3. Follow all instructions issued without delay.

Snow Emergency

(Snow emergencies or winter storms)

- A. Keep a one (1) to two (2) week supply of heating fuel, food, and water on hand in case of isolation in office.
- B. Keep emergency supplies on hand, e.g., blankets and flashlights.
- C. Carry a cellular phone (if available).
- D. Dress appropriately—wear several layers of loose, lightweight warm clothing, mittens, and winter headgear to cover head and face.