

Title: Safety Management Plan

Policy #: EOC-02

Purpose:

The Safety Management Plan describes the programs used to manage the safety program to reduce the risk of injury for patients, staff and visitors. Safety risks may arise from the structure of the physical environment, from the performance of everyday tasks, or may be related to situations beyond the organization's control such as weather. At a minimum, this plan supports meeting the Environment of Care Joint Commission Standards along with other related regulatory requirements related to:

- hospital plans activities to minimize risks in the EOC
- hospital manages safety and security risks
- hospital provides a healthy and smoke-free environment
- hospital establishes and maintains a safe, functional environment
- hospital collects information to monitor conditions in the environment
- hospital analyzes identified environment of care issues

Scope:

The **Safety Management** Plan applies to all properties and facilities owned, occupied, or managed by Beth Israel Deaconess Medical Center (BIDMC), including clinical, research, and administrative areas on the main campus and at off-site locations. In some cases, certain responsibilities under the **Safety Management** Plan are shared with or delegated to local managers and/or outside parties such as landlords, tenants, or contractors. As applicable to particular locations, the **Safety Management** Plan also covers BIDMC patients, employees, clinical or research staff, and visitors present in these locations.

Objectives:

The objectives for the Safety Plan are developed from information gathered during risk assessment activities, annual evaluation of the previous year's plan activities, performance measures, incident reports and safety tours. The objectives include:

- Providing an environment free of recognized hazards;
- Effectively managing behavior-based, and equipment based risks of injury and illness;
- Completing safety risk assessments on a regular basis to identify known and potential risks and adverse impact. Implement procedures and controls to minimize the potential for adverse impact;
- Avoiding property loss, and adverse, internal or external, environmental impacts;
- Providing content for safety training of personnel to interact effectively with all aspects of their work environment;
- Striving for continuous program improvement; and,
- Responding to unplanned emergent events to develop safety parameters and guidance.

Plan Elements:

- Support provision of department- and job-specific safety training;
- Develop and track process and outcome indicators for key safety program areas, and use them to summarize findings, assess program effectiveness, and report regularly to designated committees, and ultimately, the governing board;
- Manage all applicable permits to ensure compliance;
- Assure that up-to-date safety policies and procedures are distributed, practiced, and enforced;
- Undergo annual review of objectives, scope, and performance.

II. Responsibilities**A. Administration**

The Administration of Beth Israel Deaconess Medical Center accepts responsibility for safety program leadership and effectiveness.

B. Environmental Health and Safety (EH&S)

The Director, EH&S is responsible for implementing and coordinating an effective, comprehensive, facility-wide safety management program. In addition the Director, EH&S or designee is appointed by the Chief Operating Officer to serve as Safety Officer. The Director/Safety Officer, in collaboration with senior management, other key safety specialists and departments, shall:

- Intervene in situations where the safety of persons, property, or the environment is immediately threatened, and develop a safety plan;
- Recruits expertise as necessary to provide assessments and interventions as required;
- Communicate and interact as necessary with all disciplines and levels of the organization;
- Collect data necessary for effective program management, and in particular, coordinate the information collection and evaluation through the Environment of Care Committee (EOCC);
- Conduct hazard surveillance and risk assessments, including exposure monitoring;
- Develop general policies and procedures for approval by the EOCC;
- Provide training programs and technical support;
- Monitor regulatory developments and compliance;
- Conduct periodic, department-specific audits of safety policies and procedures and employee training;
- Ensure that reports of incidents involving injury, illness, security, hazardous materials, fire safety, equipment, utility systems failures, and property or environmental damage are evaluated and investigated;

- Assess program effectiveness and assure continuous quality improvement;
- Assure the effectiveness and compliance of hazardous materials and hazardous waste programs;
- Manage all applicable permits to ensure compliance;
- Participate in emergency preparedness management;
- Participate in employee safety initiatives including investigations of injuries, root cause analysis and make recommendations for improvement;
- Provide leadership, direction and support to the Co-Chairs of EOCC;
- Communicate safety monitoring and response activities to the patient safety program;
- Respond to unplanned emergent events to monitor safety of staff, patients and visitors and develop event specific safety plan for responders and affected people; and,
- Provide a safety officer to the command center and to field to advise incident command team on safety issues, plans and direction.

C. Management

Managers, including supervisors and principal investigators, hold the key positions in safety plan implementation. They are responsible and accountable for safety plans in their respective areas. The success and effectiveness of safety programming depends on their support and in working closely with other key departments such as Health Care Quality, Environmental Health and Safety, Employee Health Management, and Public Safety. Managers shall:

- Act as, or appoint, a department safety liaison, who will serve as the primary safety contact on the unit and communicate information to other employees;
- Accept responsibility and accountability for overall safety in their areas, including employee actions and the performance of equipment and machines,
- Maintain Medical Center policies and procedures, assure they are available to employees, and assure that employees are knowledgeable regarding pertinent sections;
- Lead and/or participate in department-specific safety teams/risk assessments and plans for correction;
- Develop written department-specific safety policies addressing hazards recognized from risk assessments, and assure that these policies are implemented, enforced, and kept current through periodic review;
- Support periodic safety auditing activity by timely submission of department-specific policies and procedures to the Environmental Health & Safety Office upon request;
- Promote and maintain safety awareness, and encourage positive safety attitudes through personal example via involvement in and support of

safety activities;

- Assure job-specific safety training prior to an initial exposure to a hazard and annually thereafter;
- Provide employees with protective equipment as needed, assure instruction in its proper use, and enforce use when specified;
- Take prompt corrective action whenever unsafe conditions or actions are observed;
- Assure that all accidents/incidents are promptly reported, that the causes of all safety incidents are investigated thoroughly, and that corrective actions taken to prevent incident recurrence are implemented and effective;
- Conduct periodic safety inspections of all work areas and operations which focus on elimination of unsafe conditions and employment of safe work practices;
- Implement an emergency preparedness plan in accordance with other medical center policies; and,
- Report internally and provide follow-up on medical device or equipment failure/recall efforts. The Pharmacy Administration promptly responds to drug recalls. The Pharmacy Department in collaboration with others coordinates processes for locating and arranging retrieval or retrieving impacted drugs. The hospital follows its internal processes for notifying prescribers and patients when appropriate of drug recalls. Please refer to Pharmacy policy 05-02-06 on Drug Recalls and Drug Discontinuation and Environment of Care Policy E0C-27 on Product, Pharmaceutical and Device Recall/Alert Notification Management for additional information. The Food Services recalls involve following directions from our vendors if it affects the department. Food Services would be asked to remove the item from the operation and discard of it.

D. Employees

Employees are responsible for cooperating with all aspects of safety management, including compliance with all safety rules and regulations, and continuously practicing safety while performing their duties. It is emphasized that each employee has a responsibility for safety. Therefore, each employee shall:

- Follow safety instructions and ask the supervisor for clarification when confused or unsure;
- Participate actively at all safety training programs;
- Report promptly any unsafe conditions and incidents to the supervisor, and help in correction and follow-up;
- Keep work areas clean and orderly at all times;
- Use only equipment which is approved and for which you have authorization and training, and operate it in accordance with all safety instructions;
- Report any injury, illness, or exposure to your supervisor and through the Employee Incident reporting system, and get prompt medical treatment;
- Wear proper protective equipment;

- Dress in accordance with departmental requirements; and,
- Abide by all safety rules and practices, and take an active part in fulfilling your role in the safety program.

E. Organization & Responsibility

The Environment of Care Committee (EOCC) functions as BIDMC's environmental safety committee; is multidisciplinary including representation from administration, clinical services, research, and support areas. The President has appointed the chairperson(s). The committee, through its chairperson(s) and/or the Safety Officer, is empowered by the Chief Executive Officer to intervene, make recommendations, and direct actions whenever circumstances exist that result in an unsafe condition.

This committee will proactively lead, advise and assist in implementing the safety program, and in making it an integral part of all ongoing functions within the medical center. The major responsibilities of the committee members are to:

- Meet at least ten times per year;
- Oversee and lead a comprehensive and coordinated system for assessing the medical center, off-sites, leased buildings safety, health and environmental risks to all persons (patients, visitors, employees) and property;
- Monitor those activities required to ensure that BIDMC is in continuous compliance with regulatory standards in relation to the care environment;
- Align EOCC goals with institutional goals;
- Prioritize and oversee selected performance improvement projects relating to the care of the environment;
- Establish and approve institutional policy and procedures that relate specifically to safety and the environment of care;
- Collect and evaluate information pertinent to the safety plan, including the various functional areas defined under TJC's Environment of Care, Infection Control, Emergency Management, Life Safety and other applicable standards;
- Review relevant patient/visitor incident summaries and implement follow up where indicated;
- Review of EOC program quarterly reports;
- Review program plans and make recommendations for annual goals and quality indicators;
- Encourage and review suggestions for improving safety practices and procedures;
- Review department-specific safety policies, procedures and training programs;
- Analyze and resolve EOC issues in a timely manner;
- Implement and investigate recommended corrective actions;
- Report findings and recommendations in writing to the governing body, administration, nursing and medical staffs, and other departments and services when indicated;
- Audit department-specific safety policies, work practices, and training

- programs;
- Establish mutually supportive relationships and exchange of information between Environmental Health & Safety, Infection Control/ Hospital Epidemiology, Radiation Safety, Health Care Quality Process Improvement and Patient Safety, Employee Health Management, Public Safety/Security, Maintenance, Clinical Engineering, Emergency Management, Capital Facilities and Engineering, Research and Maintenance Safety Committees and other departments/committees with significant involvement in the overall safety of the medical center;
- Provide environment of care related information for use in orientation of new employees and as part of continuing education programs;
- Disseminate current and applicable safety regulations;
- Create safety work teams when needed, assign their tasks, assure the appropriateness of their performance indicators and monitor their progress; and,
- Provide a process through the EOCC to make annual recommendations to senior management for operating plan goals and funding. Provide support and leadership as appropriate in achieving these goals.

F. Effectiveness

The objectives, scope, performance and effectiveness of the Safety Management Plan and its supporting documentation will be reviewed and evaluated annually by the EOC Committee. Needed revisions will be recommended, approved and implemented. Senior Management and the Board of Directors receive regular reports of the activities of the EOCC. They review reports and, as appropriate, communicate concerns and administrative support to facilitate the on-going activities of the Safety Plan.

Approved By:

Vice President Sponsor: Jarrod Dore, VP, Cap. Facilities & Matthew Larkin, COO

☒ **Senior Management Team: 6/2024**

**Pete Healy
Chair**

☒ **EOC Committee: 7/10/24**

**J. Dore & K. Murray Co-
Chairs**

Requestor Name: Christine Powers, Director EH&S

Original Date Approved: 6/1998

Next Review: 7/2025

Revised: 9/05, 12/06, 2/07, 3/08, 4/09, 6/10, 7/1, 10/12, 9/13, 10/14, 10/15, 12/16, 12/17, 1/19, 1/20, 6/22, 6/23, 6/24

Eliminated