CONNECTICUT VALLEY HOSPITAL OPERATIONAL PROCEDURE MANUAL

SECTION II:	ORGANIZATION FOCUSED FUNCTIONS
CHAPTER 7:	Management of the Environment of Care
PROCEDURE 7.17	Hot Spot Environmental Rounds
REVISED:	06/14; 06/18
Governing Body Approval:	06/14; 06/27/2018(electronic vote)

PURPOSE: To provide a standardized process for the assessment of the physical environment to minimize the risk of patient or staff injury due to environmental factors.

SCOPE: Hospital and Division leadership

POLICY:

In order to foster a safe physical environment for patients, the hospital conducts weekly "Hot Spot" environmental rounds to identify potential safety hazards.

PROCEDURE:

As a result of hospital wide environmental rounds, regulatory findings, Safety Huddle discussions, patient and staff observations, and/or changes in the physical environment, items identified as potential risks are submitted to the Environment of Care Committee for inclusion on the weekly Hot Spot rounds form. The results are reported to the Division and Hospital-wide EC Committee on a monthly basis, and included as appropriate in reporting to the Quality, Risk and Safety (QRS) Committee and Governing body.

I. Risk Identification

A. Hot Spot rounds are conducted on each facility unit on a weekly basis as follows:

- 1. Rounds for the 1st week of the month are completed by 1st shift Nursing Staff.
- 2. Rounds for the 2^{nd} week of the month are completed by 2^{nd} shift Nursing Staff.
- 3. Rounds for the 3rd week of the month are completed by 3rd shift Nursing Staff.
- 4. Rounds for the 4th week of the month are completed by Unit Director.

B. The completed rounds are documented on the Environmental Hot Spot form as follows:

- 1. The unit, including building (i.e. W2S, M4B) is entered in the unit block.
- 2. The date of the rounds is entered in the date block.
- 3. The name of the person completing the rounds is legibly entered into the signature block.
- 4. The week of the month the rounds are completed for is circled.
- 5. The items reviewed are checked as yes/no/ or N/A as appropriate depending on condition noted on unit.
- 6. The notes field should be used to describe issues identified and corrective actions (i.e submission of a work order).

- 7. The completed Hot Spot form is sent to the Division EC Coordinators for review and presentation of issues at Division EC meeting.
- 8. The completed Hot Spot form is also sent to the Maintenance Department (FAX x5721) to facilitate hospital-wide analysis and tracking of identified issues. The data will be reviewed on a monthly basis at the Hillwide EC Committee.

II. Risk Reduction Tracking

- A. The Governing Body By-Laws charge the Environment of Care Committee with several tasks related to the maintenance of a Culture of Safety at CVH. The Hot Spot Environmental Rounds play a key part in accomplishment of their charge.
 - 1. The results of Hot Spot rounds are collected and analyzed on a monthly basis for the following issues:
 - a) Trends
 - b) Patterns
 - c) Correction of Deficiencies
 - 2. A report on the analysis results is presented at the monthly hill-wide meeting.
 - 3. The committee will recommend any necessary follow-up actions based on their review of the report.
 - 4. The committee will attempt to limit the Hot Spot form to ten high priority items to facilitate reliable completion of the survey process.
 - 5. The committee may add items to the Hot Spot form based on input from environmental rounds, regulatory findings, Safety Huddle discussions, patient and staff observations, and/or changes in the physical environment environmental survey.
 - 6. The committee may also choose to drop items from the Hot Spot form to maintain the desired length, move facility focus to new priority items, or based on evidence of sustained compliance.
- B. Reporting Linkage
 - 1. Any significant trends, patterns, or actions related to the Hot Spot Environmental Rounds should be included in the monthly report to the QRS Committee.
 - 2. The compliance rates for items on the Hot Spot form, and actions taken to address identified issues should be included in the quarterly Environment of Care report to Governing Body.

