

WHITING FORENSICHOSPITAL

OPERATIONAL PROCEDURE MANUAL

SECTION II:	ORGANIZATION FOCUSED FUNCTIONS
CHAPTER 7	MANAGEMENT OF THE ENVIRONMENT OF CARE
Governing Body Approval:	6/10/18
REVISED:	

POLICY

To provide a safe, functional, and effective environment for patients, staff and visitors in accord with the mission of the Whiting Forensic Hospital (WFH) and the Department of Mental Health and Addiction Services (DMHAS) and standards from JCAHO, OSHA, Department of Public Health and other regulatory agencies. To instill a sense of responsibility for safety in all employees, at all levels of the organization and to empower staff at the local (unit) level to identify and create solutions to causes of accidents and injuries, reduce and control environmental hazards and risks, and to maintain safe conditions for patients, visitors and staff.

To implement a plan for the Management of the Environment of Care that supports the provision of quality patient care and support services by focusing on injury prevention, maintenance of the environment, and the special needs of the patient population.

I. Introduction

The MEC Program is structured to address the following environmental categories:

- Safety; (including suicide reduction within the physical environment)
- Security
- Hazardous Material & Waste
- Fire Prevention
- Bio-Medical Equipment
- Utility Systems
- Product Evaluation
- Employee Health and Safety
- Emergency Management

Each of these areas is addressed in documented plans. Each plan contains the following elements:

1. Orientation and education components that provide specific information to individuals on the proper processes for integrating with the environment of care;
2. Emergency procedures to be followed when components of the environment of care fail;
3. Performance standards that are used to measure the effectiveness of the program;

II. MEC Program Design

- The design of the MEC outlines the structure and composition of the committees and work groups that carry on the tasks associated with the MEC Program.
- The design of the MEC Program includes provision for three types of committees and seven functional work groups. Each of these entities has specific functions that contribute to an integrated program, which promote the goals of the hospital.
- The Chief of Fiscal Services chairs the MEC Committee, serves as the MEC Director and is responsible for preparing the Safety Management Plan and reviewing the effectiveness of the Program. The Safety Management Plan is approved by the Governing Body.

A. Hospital MEC Committee

1. The Hospital MEC Committee is chaired by the Chief of Fiscal Services, meets monthly, and includes the following members:
 - Police Lieutenants; or designee
 - Maintenance Supervisor 1
 - Infection Preventionist;
 - Nursing Executive representative
 - Director of Accreditation, Regulatory Compliance and Program Improvement
 - Food Services representative
 - Ambulatory Care staff member
 - Building Superintendent 1
 - Unit Directors
2. The functions of the Hospital MEC Committee include:
 - a. Review of status of environmental rounds,
 - b. Planning & executing Emergency Preparedness Drills,
 - c. Approving Utility & Equipment Management Programs,
 - d. Approving Hazardous Materials Procedures,

- e. Approving annual MEC plan;
- f. Reviewing equipment and utility failure data,
- g. Reporting quarterly to the Governing Body,
- h. Approving social environment monitoring tools,
- i. Product evaluation;
- j. Approving staff education plan;
- k. Reviewing incident trends;
- l. Reviewing the effectiveness of action plans to reduce incidents;
- m. Ensure the proper safety signage within the Division;
- n. Schedule, coordinate and perform environmental rounds to all patient care units at a frequency of once every six months and perform annual environmental rounds of all non-patient care areas within their division or building;
- o. Complete safety environmental rounds reports for hazards that are identified and initiate immediate corrective action;
- p. Review EC rounds sheets for trends, repeat items, and provide written reports to the Governing Body;
- q. Coordinate with Plant Operations to ensure that all Interim Life Safety Measures (ILSM) are taken when construction is going on within a building;
- r. Attend construction meetings as needed to ensure that ILSM are adhered to;
- s. Assist in the planning and execution of Disaster Drills ; and
- t. Assure compliance with all MEC Standards

D. Director of Hospital MEC Program

The Chief of Fiscal Services is designated by the Chief Executive Officer to coordinate the Hospital's MEC program. Annually, the CEO delegates to this individual as Hospital Safety Director the authority to take immediate action to address issues that present a significant risk to the safety of patients, staff and visitors.

Duties and responsibilities of the Director of the Hospital MEC Program:

- a. Chairing the Hospital MEC Committee;
- b. Preparing and presenting quarterly reports to the Governing Body;
- c. Coordinating communications with Unit Directors and/or Program Managers
- d. Acting as Hospital liaison with outside agencies (i.e., State Fire Marshall, OSHA, Health Department, and the Department of Energy & Environmental Protection (DEEP));
- e. Overseeing the development and implementation of each of the Management Plans for the functional elements; including Safety, Hazmat and Fire Prevention
- f. Completing and submitting annual TJC Periodic Performance Review (PPR)

- g. Performing the completion of the Statements of Conditions and coordinating requirements for improvement. (Plan For Improvement (PFI));
- h. Developing and implementing performance improvement projects relating to MEC,
- i. Drafting policies and procedures as needed.
- j. Coordinates in-service education regarding fire drills and provides in-service education regarding the OSHA Haz-Comm Standard; coordinates with MOSD in-services for fire drills, the OSHA Hazardous, Communications Standards, and all other mandatory safety trainings such as CPR, Blood-Borne Pathogens, and Emergency Preparedness;
- k. Interfaces with necessary personnel, such as the Infection Control Coordinator, to insure that services and training are provided;
- l. Ensures the proper safety signage within the hospital; performs monthly safety inspections;
- m. Provides written reports to the Hospital MEC Committee;
- n. Completes safety inspection reports for hazards that are identified and initiates immediate corrective action;
- o. Monitors safety systems within the building quarterly, including but not limited to, the personal alarms and paging systems on a quarterly basis;
- p. Coordinates with the Plant Facilities Engineer to insure that all interim life safety measures are taken when construction is going on within the building;
- q. Attends construction meetings as needed to insure that interim life safety measures are adhered to; and
- r. Serves as primary contact in the planning and execution of disaster drills

E. Functional Work Teams

1. There are seven Functional Work Teams that are each responsible for a functional element of the MEC standards. Each Team is comprised of representatives of the staff that are responsible for the element. The seven Functional Teams are:
 - Safety;
 - Security;
 - Hazardous Material and Waste;
 - Emergency Preparedness;

- Fire Safety;
 - Medical Equipment; and
 - Utility Systems.
2. General responsibilities of a Functional Work Team include:
- a. developing the Management Plan relating to the respective functional element;
 - b. meeting periodically to review goal progress;
 - c. reviewing System Failures/Incidents relating to the function;
 - d. developing Performance Standards and Indicators; and
 - e. reporting quarterly to Hospital MEC Committee on Performance Measures.

Each plan contains a listing of Team Members, Chairs, and delineates responsibilities.

F. Role of the Functional Work Team Leader:

1. takes responsibility for the development and execution of the MEC Plan for the Work Team. The MEC Plan for the Functional Work Team will include a series of goals related to the critical elements of the functions monitored by that Work Team;
2. conducts monitoring activities that measure the effectiveness of the plan. These monitoring activities take the form of inspections, interviews, records of drills, and review of logs;
3. prepares and presents periodic reports to the Hospital MEC Committee. These reports describe the activities of the committee including educational initiatives and system failures;
4. chairs periodic meetings of the work group as needed, but not less than quarterly; and
5. receives technical supervision from the Hospital MEC director on issues relating to safety.

G. Role of the Program Safety Officer:

1. develops and executes the Safety Plan for his/her unit. The MEC Plan includes a series of goals related to the particular population served by the unit;
2. conducts safety inspections within his/her unit. Inspections include the monitoring of bio-hazardous storage areas, electrical safety, the adequacy of environmental services, and the social environment. These inspections are coordinated with the divisional Infection Control Coordinator and the Environmental Services Team members;
3. assesses and follows up on incidents;
4. reports, administratively, to the Program Manager on issues of safety, and receives technical supervision from the Hospital MEC Director and the MEC Coordinator.

H. Design of the Treatment Environment

1. Safety

The Hospital is attentive to the importance of the treatment environment in the recovery process. Of primary importance is adherence to Life Safety Code. To this end, the

Hospital utilizes professional architects and engineers in preparing plans for major renovation projects.

Major construction projects are also reviewed by the DMHAS Chief of Engineering and code review specialists from the Office of the State Fire Marshal.

In designing renovation projects, consulting architects and engineers utilize the guidelines for Design and Construction of Hospitals and Health Care Facilities. Design elements are customized to accommodate specific requirements for WFH.

2. Hazard Surveillance

The Hospital utilizes several data sources for collecting information relating to hazards in the environment. The following inspections take place at prescribed frequencies:

INSPECTION	CONDUCTED BY	FREQUENCY
Fire Safety	State Fire Marshal	Annually
Grounds Safety	Plant Engineer	Quarterly
M.E.C. Rounds	MEC Director	Monthly
Infection Control	Infection Control Preventionist	Monthly

Reports of inspections are reviewed monthly at the Hospital-Wide meetings. Results and action plans are documented in the respective minutes.

In addition, staff who identify hazards, report them to the Plant Operations unit. These items are addressed and documented through the work order system. (Correction reports are generated monthly and distributed to the MEC Director.)

3. Privacy, Dignity and the Therapeutic Environment

- a. The treatment units at Whiting Forensic Hospital are designed and maintained in a fashion that promotes patient privacy, and dignity. An effort is made to enhance the environment with art work and plants. Each patient's bedroom area includes a wardrobe and bedside table to store his/her belongings. Patients are permitted to keep certain personal electrical items based on an assessment and their level of function, and unit security concerns.
- b. Patient rooms are designed to provide maximum privacy. The MEC Committee conducts monthly environmental rounds to review personalization of patient rooms as well as the suitability of storage units.
- c. Privacy for patients is maintained through a system designed to prevent the public from associating a patient with a diagnosis through a) securing patient's medical records, b) no identifying signage or other visual cues, and c) through the use of space provided on each unit for private discussions with patients and their families about

treatment issues and discharge planning. Visiting rooms are provided for these discussions in some areas.

- d. As an integral part of the treatment process, Whiting Forensic Hospital encourages the use of social activities through the construction and maintenance of treatment spaces. Renovations include wiring necessary for data ports for computer use.
- e. In the Dutcher Building, a patient “Mall” has been developed to add additional treatment space and program opportunities for those patients that may not have attained a level allowing grounds privileges.
- f. The Page Hall Mall is a centralized treatment space that affords patients that have attained the appropriate levels, the opportunity to attend groups outside the residence buildings.

4. Smoking Policy

Whiting Forensic Hospital, as a health care provider, has a smoking policy that prohibits smoking in all buildings.

I. Information Collection and Evaluation System (ICES)

The Hospital Safety Management Plan describes the process for the systematic collection and evaluation of information. This incident reporting system yields valuable information, which is used in preventing future accidents and incidents. Aggregated information is analyzed at the Unit, and Hospital-Wide level on a quarterly basis. Conclusions are drawn and recommendations for improvements are made and implemented.

Portions of this Policy were excerpted from the Electronic Comprehensive Accreditation Manual for Hospitals 2000