

**WHITING FORENSIC HOSPITAL
OPERATIONAL PROCEDURE MANUAL**

SECTION II:	ORGANIZATION FOCUSED FUNCTIONS
CHAPTER 7:	Management of the Environment of Care
PROCEDURE 7.17	Environmental Hot Spot Rounds
Governing Body Approval	6/10/18, 3/15/19
REVISED:	3/11/19

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: All hospital Staff

POLICY:

In order to foster a safe physical environment for patients, the hospital conducts weekly environmental “Hot Spots” rounds, on all Clinical Care Units, to identify potential safety hazards.

PROCEDURE:

As a result of hospital wide environmental rounds, regulatory findings, morning risk management meeting 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 Spots Rounds. The results are reported to the Hospital-wide EOC 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 2nd week of the month are completed by 2nd 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 the Nurse Supervisor.

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

1. The unit, including building (i.e. DS2, WH1) 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 signs and prints their name.
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 the unit.
6. The “notes” field should be used document issues identified and corrective actions (i.e. submission of a work order).
7. The completed Hot Spot logs must be faxed weekly to the COO/designee to facilitate hospital wide tracking of issues, aggregation and analysis of data, for presentation at monthly EOC meetings.

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 WFH. The Environmental Hot Spots Rounds plays a key part in ensuring a safe environment. .

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 EOC 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 Spots Rounds to high priority/high risk items to facilitate reliable completion of the survey process and corresponding corrective action.
5. The committee may add items to the Hot Spot form based on input from environmental rounds, regulatory findings, morning risk management meeting discussions, patient and staff observations, and/or changes in the physical environment environmental survey.
6. The committee may choose to drop items from the Hot Spot form based on evidence of sustained compliance or to move facility focus to new priority items.

B. Reporting Linkage

1. Any significant trends, patterns, or actions related to the Environmental Hot Spots Rounds should be included in the quarterly report to the Governing Body.

2. The compliance rates for items on the Environmental Hot Spot rounds and actions taken to address identified issues should be included in the quarterly Environment of Care report to Governing Body.