

## SE05 - Risk Management

### 5.1 - Program planning

**5.1.1** - The healthcare facility managers and leaders develop, implement and maintain an effective risk management program in the organization.

**5.1.1.1** - A qualified/experienced individual/team is responsible for risk management.

**5.1.1.2** - All risks, both clinical and non-clinical, are identified and recorded in a risk register.

**5.1.1.3** - Based on the identified risks corrective and/or preventive actions (CAPA) are defined and implemented.

**5.1.1.4** - All staff receive on-going in-service training about risk management.

**5.1.2** - The healthcare facility develops and implements a plan(s) to respond to likely emergencies.

**5.1.2.1** - There are documents that describe the organizations response to likely emergencies (including bomb threats, fire, flooding, natural disasters, failure of water and electrical supplies).

**5.1.2.2** - There is document that describes the healthcare facility's response to a contagious disease outbreak (e.g. Ebola).

**5.1.2.3** - Staff participate in a rehearsal of the emergency plan(s), with community agencies when appropriate.

**5.1.2.4** - There is documentation that the emergency plan(s) is reviewed.

**5.1.3** - The healthcare facility has an occupational health and safety (OHS) program.

**5.1.3.1** - Staff have access to an occupational health and safety (OHS) program that meets applicable legislation and/or regulation.

**5.1.3.2** - A designated staff member monitors the staff occupational health and safety (OHS) program.

**5.1.3.3** - The healthcare facility has written procedures that guide the staff for occupational health and safety activities defined in the OHS program.

**5.1.3.4** - Healthcare facility staff receive continuous occupational health and safety (OHS) training and this is documented.

## 5.2 - Safe and secure environment

**5.2.1** - Security of staff, volunteers, patients, and visitors is ensured.

**5.2.1.1** - There is a security system for limiting access to restricted areas in the healthcare facility.

**5.2.1.2** - There is a process to report safety and security issues.

**5.2.1.3** - The healthcare facility has a process for protecting patients and staff from assault and a mechanism is available for summoning the assistance of security/police/protection service in the case of an emergency.

**5.2.1.4** - Alert systems and signals are in working order and tested every month.

**5.2.2** - The healthcare facility ensures that all persons present in the facility are safe from fire and smoke.

**5.2.2.1** - Sufficient fire detection and firefighting equipment is available and operational according to the healthcare facility needs and local, regional or national fire regulations.

**5.2.2.2** - Firefighting equipment is regularly inspected and serviced.

**5.2.2.3** - A floor plan, showing the location of firefighting equipment, electrical distribution board, the location of medical gases and other flammable materials and the evacuation routes and emergency exits, is displayed.

**5.2.2.4** - A fire safety program for staff includes information and training on fire prevention and evacuation procedures.

## 5.3 - Infection prevention and control (IPC)

**5.3.1** - The healthcare facility designs and implements an IPC program to reduce the risk of infections in patients and healthcare workers.

**5.3.1.1** - Policies and procedures on infection prevention control (IPC) are in place and guide the staff in the implementation.

**5.3.1.2** - A qualified member of staff monitors the infection control program.

**5.3.1.3** - Regular in-service training is given to all staff on the subject of infection control.

**5.3.1.4** - Data from IPC monitoring is analyzed for internal use and external reporting to the appropriate external public health agencies.

**5.3.2** - The healthcare facility handles, stores and disposes of waste in a safe, and coordinated manner.

**5.3.2.1** - Healthcare waste collection assets are available and allow for color-coded segregation.

**5.3.2.2** - There is a waste management plan, consistent with current local bylaws and regulations.

**5.3.2.3** - A training program for staff on waste management is available and implemented.

**5.3.2.4** - The waste disposal and removal according to the waste management plan is monitored.