SE05

RISK MANAGEMENT

The healthcare facility works to provide a safe environment for patients, families, visitors, staff members and volunteers. Staff are encouraged to proactively identify potential risks, to report them, and to provide solutions how to prevent these risks. Examples of risks are: physical (e.g. infrastructure, equipment, security and fire safety measures); medical (e.g. hospital acquired infections, occupational health risk, emergency response, medication errors, near misses, adverse events); environmental risks (e.g. waste management) and financial and legal risks (revenue, stock control, compliance with rules and regulations). Measures taken to minimize risks are monitored for effectiveness.

The SafeCare standards cover the full range of clinical services and management functions for healthcare facilities in 13 Service Elements. These Service Elements contain a number of standards that relate to specific services or functions. The rationale of each standard is explained by the standard intent and gives you an idea what the standard really entails.

Each standard contains measurable elements, also called criteria. Measurable elements are related to specific processes, assets or documents (e.g. process for triage, resuscitation equipment or a job description for the lab manager). Compliance to each measurable element is assessed, and scores awarded are either Fully Compliant (FC), Partially Compliant (PC), Non-Compliant (NC) or Not Applicable (NA). The combined scores of the underlying measurable elements reflect the level of compliance to the whole standard.

5.1 5.1.1 The healthcare facility managers and leaders develop, implement and maintain an effective risk management program in the organization.

STANDARD INTENT:

In order to prevent accidents and injuries to patients, staff, and visitors within a healthcare facility, managers and leaders must be aware of potential risks and work to reduce them. As variation and risk are always present in healthcare facilities, they must be identified and managed by everyone. Healthcare facility managers are responsible for developing and maintaining a risk management program that includes the following elements:

- one or more qualified and/or skilled and/or experienced individuals supervise the implementation and daily operation of the risk management program;
- identifying all risks (physical, environmental, medical, financial, legal, operational, etc.) relating to organizational processes and systems, staff, patients, visitors and physical facilities;
• maintaining an accurate current risk register, which is reviewed when there are changes in systems, processes, or physical facilities;
• the development and implementation of risk management processes and activities;
• a system for monitoring negative incidents/near misses/ adverse (sentinel) events and it includes the documentation of interventions and responses to recorded incidents;
• on-going in-service training of all staff in the risk program, including reporting of adverse events, is documented.

MEASURABLE ELEMENTS:

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.

STANDARD INTENT:

Every organization needs to be aware of the likely internal or external events for which a rapid and organized response is necessary to protect patients, staff and others. Thus, if seasonal flooding is a possibility, or interruption of water or electricity, or brush fires are likely, the healthcare facility develops, implements and tests the response plan.

Besides the plan for emergencies like, floods, fires etcetera there should also be an emergency plan for outbreaks of e.g. infectious diseases (e.g. Ebola). Because such events are rare, the response plan is written and all staff are trained on and rehearse the plan to be prepared when an event suddenly occurs. The facilities response to an emergency is in cooperation with other community agencies when appropriate.
MEASURABLE ELEMENTS:

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.

STANDARD INTENT:

A staff health and safety program is important to maintain staff physical and mental health, satisfaction, productivity, and safe conditions for work. Because of their contact with patients and patients’ infective material, many healthcare workers are at risk for exposure to and possible transmission of vaccine-preventable diseases. Identifying epidemiologically important infections, determining staff at high risk for these infections, and implementing screening and prevention programs (such as immunizations, vaccinations, and prophylaxis) can significantly reduce the incidence of infectious disease transmission.

How a healthcare facility orients and trains staff, provides a safe workplace, maintains equipment and medical technology, and many other factors determine the health and well-being of staff. A staff health and safety program can be located within the healthcare facility or be integrated into external programs. Whatever the staffing and structure of the program, staff understand how to report, to be treated for, and to receive counseling and follow-up for injuries such as those that may result from needle-sticks, exposure to infectious diseases, or workplace violence; the identification of risks and hazardous conditions in the healthcare facility; and other health and safety matters. The program may also provide for initial employment health screening, periodic preventive immunizations and examinations, and treatment for common work-related conditions, such as back injuries, or more urgent injuries.
5.1 Staff have access to an occupational health and safety (OHS) program that meets applicable legislation and/or regulation.

5.1.2 A designated staff member monitors the staff occupational health and safety (OHS) program.

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

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

5.2 Security of staff, volunteers, patients, and visitors is ensured.

STANDARD INTENT:

Patients and staff rely on the healthcare facility to provide a safe environment. This is also true for the families of patients, volunteers, and other visitors. Places where individuals may be at risk are recorded in the risk registry (see 5.1.2) and actions are taken to reduce the risks. Such actions may include security lighting outside when it is dark, restricting access to certain areas that may have vulnerable or young patients, removing or locking up medications and other potentially dangerous materials.

When a situation arises or an incident has occurred (such as an assault on a staff member by a patient), staff must know how to obtain immediate assistance.

MEASURABLE ELEMENTS:

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.

STANDARD INTENT:

The basic elements of a fire safety program ensure the following:

- fire prevention measures are implemented e.g. not placing heaters near curtains, unplugging electrical appliances when not in use;
- staff are trained on the early detection of fire and/or smoke;
- staff know how to use various means of suppression (fire extinguishers or fire blankets) to manage flammable and hazardous materials, and this equipment is readily available; and
- there are designated safe exits and floor plans to assist visitors and staff in exiting the building safely.

The building size, number of levels, type of building materials and number of staff determine what types of fire equipment are available and ready for use at all times. Staff are trained in how to respond to fire and smoke (including evacuation procedures) and who outside the organization needs to be notified when an incident occurs.

The organization complies with applicable local, regional or national fire regulations and corrects problems identified on inspections.

MEASURABLE ELEMENTS:

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.

STANDARD INTENT:

Infections are frequently brought into a healthcare organization or can be endemic within the organization. Infections associated with healthcare facilities (nosocomial infections) contribute to numerous patient deaths each year worldwide. Thus, infections are a significant patient and staff safety issue.

To combat infections, each healthcare facility needs to have an infection control program that names responsible staff, cleaning and sterilization procedures, early identification and containment of infections and the use of personal protective materials such as gloves, masks, gowns, etc. Since healthcare facility-acquired infections can be a public health issue, they are often reported to public health agencies.

The healthcare facility has to have a system in place that describes how to isolate an infectious patient.

A member of staff should be selected to coordinate all the IPC related activities within the healthcare facility. This member of staff should be experienced and well trained. Because the knowledge regarding infections changes often and because the behaviors needed for good infection control practices are frequently forgotten, constant reminders and in-service education are essential to an effective program.

MEASURABLE ELEMENTS:

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.

STANDARD INTENT:

Healthcare organizations each day generate a considerable amount of waste that must be disposed of correctly to prevent injury, infection and contamination. Some wastes are considered “infectious” and thus are managed according to a written plan to protect the community, workers and patients compliant with local bylaws and regulations. Color-coded containers are effective ways to separate waste into the different types. Each staff member is trained on the correct disposal of waste and plays an important role in the waste disposal process. Monitoring of correct disposal and removal therefore is key. This is also the case when contract workers dispose of the waste for the healthcare facility.

Small healthcare facilities may have to make arrangements with larger institutions to dispose of their infectious waste.

MEASURABLE ELEMENTS:

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.