

D.18 SAMPLE ENVIRONMENT OF CARE (EOC) MANAGEMENT PLAN

OBJECTIVE: To provide a safe, functional, supportive and effective environment of care for patients, staff members, and other individuals that visit the Community Based Outpatient Clinic.

SCOPE: The Glens Falls Outpatient Clinic is administered through the Albany VA Medical Center. Its environment of care is an extension of the Medical Center Environment of Care. This plan applies the critical components of the Medical Center Plan to the clinic setting for the areas of safety, security, hazardous materials and wastes, emergency preparedness, life safety, equipment, and utilities.

PROCEDURES:

1. General

- a. All references in the text to Medical Center refer to the Albany VA Medical Center.
- b. There will be ongoing monitoring of performance indicators for each Environment of Care section aggregated across the Medical Center. The indicators will include data from this CBOC.
- c. An annual evaluation of the Environment of Care Management Plans and their effectiveness will be performed annually by the RN CBOC Clinic Manager at the end of the fiscal year and forwarded to the Contracting Officer's Representative (COR) for presentation to Local Environment of Care Workgroup.
- d. All clinic staff will participate in the Medical Center orientation and ongoing mandatory education process. This is supplemented by area-specific training as necessary that will include a review of this management plan and all referenced policies.
- e. Contractor will provide plan for handling temporary staff, coverage of sick personnel, etc.

2. Safety Management

- a. The Medical Center Safety Officer is responsible to oversee development, implementation and monitoring of safety management. He/she is authorized to intervene whenever conditions pose an immediate threat to life or health or threaten damage to equipment or buildings. Because the Safety Officer is not located on site, all staff are empowered to take the appropriate actions if there is a known threat. The Safety Officer should be immediately notified of any such intervention.
- b. Grounds are maintained by the property manager. This includes snow removal and the repair of physical deficiencies.
- c. A risk assessment is performed at least twice a year by the RN Clinic Manager to evaluate the impact of the buildings, grounds, equipment, and occupants on patient and public safety;
- d. The results of the risk assessment and all other safety issues that cannot be corrected locally are forwarded to the COR for presentation to Local Environment of Care Workgroup.
- e. All incidents of property damage, occupational illness, and patient, personnel, or visitor injury are reported to the Medical Center through ASISTS (employee or visitor), the Risk Management Incident Reporting system (patient) or on VA form 2162 (property damage) as appropriate.

3. Security Management

- a. The normal hours of operation for the Glens Falls CBOC are 8:00 AM to 4:30 PM, Monday through Friday, excluding National Holidays. The RN CBOC Manager controls keys to the site. All staff are issued keys. The first staff member arriving and the last to leave are responsible for unlocking and locking the clinic doors.
- b. The local police are contacted to respond to security incidents including violence, threats of violence, theft, abduction, and civil disturbances. Copies of all relevant police reports will be obtained and reviewed by the RN CBOC Manager.
- c. Medical records will be secured so that building maintenance staff cannot access them.

4. Management of Hazardous Materials and Wastes

- a. Known hazardous materials and wastes that may be found at the Glens Falls CBOC include infectious materials, chemotherapeutic agents, chemicals used for cleaning and other purposes, and mercury from sphygmomanometers and thermometers.

- b. All work in the CBOC is performed in accordance with the Exposure Control Plan
This includes:
 - Orientation and annual refresher training
 - Universal Precautions
 - Gloves and other appropriate PPE are readily available
 - All staff are offered a Hepatitis B vaccine.
- c. Infectious waste is disposed of as Regulated Medical wastes in red biohazard bags and/or sharps containers. The waste is removed transported and disposed of by _____, a regulated medical waste hauler.
- d. Infectious spills are cleaned up with a spill kit or mop and disinfected with _____ and disposed of as regulated medical waste.
- e. Chemicals are handled in accordance with the CBOC Hazard Communication Plan.
This includes:
 - Maintaining an inventory of all chemicals
 - Ensuring proper labeling of all chemicals
 - Maintaining Material Safety Data Sheets on site for all chemicals
 - Orientation and annual refresher training that describes the specific precautions, procedures, and protective equipment to be used when handling chemicals
- f. Chemicals are stored as required by their material safety data sheet.
- g. Chemical spills are cleaned up using a mop or a spill kit as appropriate.
- h. Mercury is cleaned up by using a mercury spill kit. The spill kit and waste is delivered to the Safety Office for proper disposal.
- i. The local fire department will be contacted if there is a large spill that cannot be safely cleaned by clinic staff. The clinic will be evacuated if necessary.

5. Management of Emergency Preparedness

- a. Emergencies may include fire, violence, threats of violence, utility loss, a hazardous material release, or extreme weather conditions.
- b. A staff member will call 911 from a safe location to notify the appropriate authorities.
- c. All personnel will evacuate the building to a point of safety if there is any emergency that poses an imminent risk to them. Staff is responsible to ensure that all patients visiting the clinic are accounted for.
- d. The property manager will be contacted if there is a failure of a utility system serving the clinic.
- e. The clinic will be closed if there is an emergency that prevents the clinic from providing adequate patient care. If the clinic is expected to remain closed, all affected patients will be contacted by telephone to reschedule appointments
- f. The RN Clinic Manager and the Medical Center Safety Officer will be notified as soon as practical of the clinic emergency and any actions taken.
- g. All emergency situations will be documented. The RN Clinic Manager will ensure that a critique of clinic response is conducted and any identified improvements are implemented. A summary of emergencies and actions taken will be forwarded through the COR for reporting to the Environment of Care workgroup.

6. Management of Life Safety

- a. All efforts will be taken by staff to prevent fires including constant vigilance for fire hazards, prohibition of open flames, proper storage of flammable materials, and preventing the accumulation of combustible or flammable waste.
- b. The clinic space will be maintained in accordance with the most recent published version of the Life Safety Code.
- c. All portable fire extinguishers, fire sprinkler systems, fire alarm systems, emergency egress lighting, and other fire protection features will be maintained in accordance with the most current NFPA standard applicable. Records of maintenance will be maintained on the clinic site.
- d. In the event of a fire, staff will employ RACE:
 - R – Rescue
 - A – Alarm

C – Contain

E – Extinguish

Rescue: Staff will first attempt to rescue any human life in imminent danger from a fire

Alarm: Staff will notify other clinic staff and call 911 from a safe location to notify the Local Fire Department.

Contain: Doors in the clinic will be close to inhibit the spread of smoke and fire.

Extinguish: Only if their personal safety is assured, staff will attempt to extinguish the fire using a portable fire extinguisher.

- e. All personnel will evacuate the building to a point of safety if there is a fire or fire alarm. Staff is responsible to ensure that all patients visiting the clinic are accounted for.
- f. All incidents of fire will be reported to the RN Clinic Manager and the Medical Center Safety Officer as soon as practical. A follow-up report will be made using VA Form 2162 and reported through the COR to the Environment of Care Workgroup.

7. Management of Medical Equipment

- a. Medical equipment will be selected and maintained in accordance with the Medical Center Policy.
- b. A risk assessment will be performed on all equipment in accordance with the Medical Center Policy.
- c. All Medical Equipment with sufficient identified risk will be included in the Medical Center Medical Equipment Program. Maintenance and testing frequency will be conducted as established by the Equipment Program.
- d. The clinic will maintain procedures to be used in the event of a failure of a critical piece of medical equipment. If a piece of equipment fails and the procedure cannot be continued, the appointment will be rescheduled.
- e. The Medical Center Environment of Care Workgroup reviews equipment hazards and product recalls. Clinic staff will take appropriate actions as directed.
- f. All medical equipment incidents will be reported using the Risk Management Incident Reporting system. A summary of equipment incident will be reported through the MVA Care Line to the Medical Center Environment of Care workgroup.

8. Utility Management

- a. A risk assessment will be performed for each utility system serving the clinic in accordance with the Medical Center Utility Management Plan. The assessment will evaluate the impact of the component on:
 - Life support systems,
 - Infection control systems,
 - Environmental support systems,
 - Equipment-support systems, and
 - Communication systems;
- b. If a utility system is determined to be critical, individual system components will be assessed.
- c. All components identified as critical will be included in an inspection, testing and maintenance program.
- d. Risk assessments will be reviewed annually and whenever there is a major change in clinic operations.
- e. The building manager, utility company, or VA Information Services will be contacted as appropriate if there is utility system failure or the shutdown of a utility system is necessary.
- f. The clinic will be closed if there is an emergency that prevents the clinic from providing adequate patient care. If the clinic is expected to remain closed, all affected patients will be contacted by telephone to reschedule appointments.