OVERVIEW

The General Safety Program has been created to provide and maintain a safe and healthy environment for all staff members, patients and visitors.

SCOPE & RELEVANCY

A. The program has been designed to prevent or diminish accidents injuries and illnesses in the workplace. The personal safety and health of all visitors, patients and employees of the Center is of utmost importance.

DEFINITIONS

A. CENTER means Warm Springs Surgical Center.

DUTIES OF KEY MEMBERS

A. ADMINISTRATOR
   a. The objective of the Administrator is to promote a safe, heathy environment throughout the Center. They are responsible for the overall implementation and maintenance of the Center's Injury and Illness Prevention Program. Duties include, but are not limited to:
      1. Education of all Managers on workplace safety and make them aware of potential workplace hazards to their employees.
      2. Monitoring compliance with training requirements of the program.
      3. Inspecting, recognizing, and evaluating workplace hazards on a continual basis.
      4. Developing and implementing methods for diminishing workplace hazards.
      5. Monitoring hazards to ensure they are taken care of in a timely manner.
B. MANAGERS
   a. Each manager is responsible for developing within themselves and their employees a positive attitude toward safety. Managers must be familiar with workplace hazards associated with the scope of their employees.
C. EMPLOYEES
   a. All employees are responsible for knowing policies and procedures as well as working safely and maintaining a safe and healthful work environment.

HAZARD ASSESSMENT

A. ENVIRONMENTAL SAFETY
   a. Each patient area is surveyed at least every 6 months. Other areas that may have a greater potential of a hazard are surveyed three times annually. All hazards are identified and corrective action is documented and enforced. Immediate hazards are corrected at the time they are noted; all others as soon as possible, no later than 15 days of discovery. Safety Committee may make unannounced rounds within any area of the Center. These rounds will focus on injury and illness hazards which may need further monitoring. Hazard communications, emergency preparedness, work place hazards and safety training audits will be conducted annually.
B. NEW MATTERS

a. The administrator will arrange for the inspection and investigation of any new substances, process, procedure or equipment that is introduced into the facility. This will to evaluate any potential occupational hazards the matter may contain.

C. HOUSEKEEPING
   a. Good housekeeping practices are an essential part of any effective safety program. Keeping the work area clean and neat reduces the risk of injury or accidents. To increase the ability of the workers to perform their jobs more efficiently, well organized work areas are encouraged. Each employee is responsible for their work area, keeping it neat and tidy. Managers are to make housekeeping rounds to ensure compliance.
   b. Immediately Report the following:
      1. Wet or Slippery Floors
      2. Equipment or furniture left in the halls or obstructing an entrance or exit
      3. Storage or use of combustibles near an open flame
      4. Improper storage of hazardous waste.

D. HAZARD REPORTING BY EMPLOYEES
   a. It is the responsibility of all employees to report any unsafe act or condition in their work environment.
   b. Immediately Report the following:
      1. Areas that may be Poorly Lit
      2. Unattended Children
      3. Defective Equipment
      4. Smoking on the Premises
      5. Careless Handling of the Equipment
   c. There will be no disciplinary action resulting from reporting an unsafe condition. Employees do have the option to remain anonymous when filing a report.

E. IMMEDIATE HAZARDS
   a. It the is the intent of the Center to abate all hazards once they have been identified. When such a hazard is present and it cannot be resolved immediately, all employees, patients and visitors will be vacated from the area until the hazard can be addressed.

F. DOCUMENTATION
   a. All rounds will be documented by the Safety Officer. They will be maintained for a period of at least three (3) years. They will include the name of the Person conducting the rounds, the areas examined, date of the rounds, if any hazards were identified, recommended corrective action. Course taken, date of compliance and signature of manager overseeing the actions.

EMERGENCY ACTION PLAN

A. Warm Springs Surgical Center has put into place a Disaster Plan. This is available to all employees. It is kept in the Administrator's office in the binder under EMERGENCY PLAN.

POLICIES & PROCEDURES FOR SAFETY

A. Safety polices have been developed and implemented to address the issues that apply to all employees. The policies and procedures for safety are kept in the Administrator's office in the OSHA binder under GENERAL SAFETY. It is available to all employees. The need for changes to the safety policies and procedures are reviewed regularly.

COMMUNICATION

A. General communication for changes or modifications will be a posting on the Blossom Springs WIKI and annually during the safety meetings.

ENFORCEMENT

A. Enforcement of all safety policies and procedures is the responsibility of the Managers. Compliance is mandatory and any violation of this program could result in progressive disciplinary action.

TRAINING

A. Awareness of potential health and safety hazards is critical to maintaining a safe work environment and to avoid injuries, illnesses and accidents in the work place. Warm Springs Surgical center is dedicated to instruction all employees in health and safe work practices. To achieve this goal, the Center will provide training to each employee with regard to the general safety programs.
B. TRAINING SCHEDULES
   a. All new employees will receive a general safety orientation according the Human Resource's policy.
   b. Employees will receive appropriate safety training upon receiving a new assignment they are unfamiliar with.
   c. An annual safety in-service will be conducted.
   d. Additional training will be required if re-enforcement is needed.
C. TRAINING OF MANAGERS
   a. It is the responsibility of Managers to be aware of potential health or safety hazards within their deposit. Annual safety program reviews will be conducted with the Administrator. All training records will be kept for a minimum of three (3) years.

ACCIDENT INVESTIGATION

A. Policy
   a. All occupational injuries and illnesses must be reported in a timely manner. Upon receipt of the incident report, the Administrator will start an investigation.
B. Responsibility & procedure
   a. Employee is responsible for reporting an occupational injury or illness to the Manager and the Administrator will start an investigation as outlined in the Human Resource Workman's Compensation Policy.

CORRECTIVE ACTION

A. All hazards are to be identified and corrective action taken as soon as possible to avoid re- occurrence of the same injury. Manager is responsible for compliance to correct the problem. All personal involved in correcting the hazardous condition will receive appropriate training on how to do so and will be provided with the necessary PPE and safeguards.

Warm Springs Surgical Center

ACCESSIBILITY

Purpose

Set the guidelines and standards for patients with disabilities to access the center.

Policy:

A. Warm Springs Surgical Center has patients by appointment only.
B. When scheduling, the clinic will confirm if a patient needs special accessibility accommodations and notate in schedule.
C. At appointment time, a staff member will meet patient outdoors and proceed with patient as necessary thru facility
   A. The staff member will inform other staff, discretely if possible, of any accessibility requirements as the patient moves within facility
D. Accommodations can include, but are not limited to:
   A. Opening doors
   B. Guiding patient safely around obstacles
   C. Clearing path of obstacles
   D. Guiding patient to accessible parking and bathrooms
   E. Reasonable accommodations as deemed necessary for patient safety and/or comfort
   F. ASL (sign language) needs will follow foreign language policy
   G. Assistance with reading and completing any forms, consents, admit, and discharge information

Documentation:

A. Document in patients chart if assistance with reading and or completing forms was provided