

POLICY AND PROCEDURE CONCERNING SAFETY AND SANITATION

I. PURPOSE

The purpose of this policy and procedure is to assure that the Outcome “People are safe” (Personal Outcomes developed by The Council) is met for each individual supported by the agency. The policy and procedure is developed in compliance with Regulations 205 NAC 4 012.03U and 015.05; Title 175 Chapter 3 004.01, .02, .04 inclusive .05, .06, .07, .09D1, .09D2, 004.011 and 004.15; Life Safety Code, 1994 Chapters 22, 23 and 31.

II. AUTHORITY

This policy and procedure has been implemented with the approval of the Governing Board and/or its designee.

III. PROCEDURAL DIRECTIVES

A. Each Area Program will have a Safety Committee. At a minimum, the Safety Committee will be comprised of the following:

- At least one member will be a person receiving services from the agency
- At least one management person
- At least one Direct Support Staff

The Committee will be chaired by the Area Director or designee and will meet at least quarterly. Members will be appointed by the Area Director for a term of one year. Members may serve unlimited consecutive terms.

B. Responsibilities of the Safety Committee

The responsibilities of the Safety Committee will be primarily proactive. The Committee will be responsible for:

1. Visiting new 24 hour service settings within 30 days of occupancy to evaluate and assist in emergency planning.
2. Providing direction in planning for seasonal or anticipated safety issues, such as tornado season, heat precautions or winterizing vehicles.
3. Investigating, arranging for/providing resources and training on a variety of safety issues.

4. Reviewing accident reports forms, evacuation reports and self survey forms to determine if any action is needed to prevent future safety problems.
5. Serving as a resource for IPP teams in addressing safety issues.
6. Committee activity will be documented in meeting minutes and distributed to Committee members, area facilities, and retained for at least two years in the area office.

C. Safety Committee Guidelines

1. Safety Checklist

- a. Each area program will complete the **Safety Checklist** (Appendix A) for each assisted service setting, at least every two (2) months, to document any safety issues.
- b. Safety Checklists will be returned to the Area Director & kept on file.
- c. Any item which needs to be corrected will be done immediately. If it is not possible to correct it immediately, action to protect people in the setting must be taken and documented.

2. Property Checklist

- a. Each area program will complete the **Property Checklist** (Appendix B) for each assisted service setting, at least quarterly (every three months), to document any safety issues.
- b. Property Checklists will be returned to the Area Director and kept on file.
- c. Property Checklists for assisted settings owned by Region IV will also be sent to the CEO on a quarterly basis.
- d. Any item which needs to be corrected will be done immediately. If it is not possible to correct it immediately, action to protect people in the setting must be taken and documented.

3. Temperature Checklist

- a. Each area program will complete the **Temperature Checklist** (Appendix C) for each assisted service setting, at least every week.
- b. Temperature Checklists will be returned to the Area Director and kept on file.
- c. Any item which needs to be corrected will be done immediately. If it is not possible to correct it immediately, action to protect people in the setting must be taken and documented.

4. Maintenance

- a. All preventive maintenance activities (preseason heating and cooling inspections, appliance inspections, painting, battery replacements, etc.) will be documented.
- b. Repair activities will also be documented.

5. Fire Drills

- a. Fire drills will be conducted at least six times per year on a bimonthly basis in all assisted settings so that individuals and staff learn to evacuate calmly and efficiently. Simulated “blocked exits” should be used occasionally.
- b. In assisted residential settings, **at least two** of the drills will be conducted during the hours of sleep (see Appendix D **Life Safety Code**).
- c. The Emergency Evacuation Reporting Form (Appendix E) will be used to document these drills.

6. Tornado drills

Tornado drills will be conducted monthly April through September. The ***Emergency Evacuation Reporting Form*** (Appendix E) will be used to document these drills.

7. Storm shelter

Designated storm shelters should be located on the lowest floor of any assisted settings, away from windows and external doors and preferably in the center of the building. A tornado kit with radio, flashlight, first aid kit and blankets will be available.

8. Occupational Health Hazard

It is the policy of the agency to assure that persons receiving services will not work with potential health hazards until the person receiving services, the person’s legal guardian or the parent (in the case of a minor child) has been notified of the potential hazards.

Upon identification of a potential health hazard, the agency will notify people receiving services, their families, guardians, and other Individual Program Planning team members of any known risks of exposure to occupational health hazards. Notification shall not exceed 30 days from the agency becoming aware of the occupational health hazard. The policy is not intended to address environmental health hazards such as sick building syndrome.

Notification of the potential hazard shall be on the **Occupational Health Hazard** form (see Appendix F) and will include:

- a. A description of the hazard.
- b. A list of relevant symptoms and appropriate emergency treatment for exposure of injury.
- c. A description of proper safety procedure and precautions for safe use of, and exposure to the hazard, including any reasonable accommodation made relevant to the disability of the person served to ensure personal safety.
- d. A place on the notice for a signature by the person served, guardian, or parent (in case of minor child).

The agency must maintain documentation of the notification, signed by the person receiving services, the person's legal guardian, or the parent in the case of a minor child. A copy of the completed and signed notice will be mailed to the Services Coordinator of the person served. The notice will be brought to the team and will be documented in the Individual Program Plan.

This policy is enacted per Administrative Directive from the Department of Public Institutions-May 24, 1996.

11/98; 5/01; 12/07