



# Health & Safety Manual

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## **Safety Policy Statement**

It is the policy of The Arc of Carroll County that safety be considered of primary importance in all aspects of administration and daily operation. The administration is committed to providing a safe and healthy working environment for all individuals served and the staff who support them. The prevention of accidents in our organization must be a part of every operation and is every person's responsibility. Our safety program emphasizes training, teamwork, and individual responsibility. Please join me in concentrating our efforts to ensure safe working conditions and efficient, productive operations.

Remember, safety is **everyone's** responsibility.

Don Rowe  
Executive Director

## **Introduction to the Health & Safety Program**

Welcome to The Arc of Carroll County's Health & Safety Program! This program emphasizes three basic principles in order to ensure the safety of our individuals served and the staff that support them.

### *Training:*

Proper training is designed to enable employees to learn their jobs properly, bring new ideas to the workplace, and reinforce existing health and safety policies. Currently, all staff providing direct support to the individuals we serve are required to complete all trainings mandated by the Developmental Disabilities Administration. To support staff in implementing existing policy, training in First Aid, CPR, Slips Trips & Falls, Communicable Diseases, Bloodborne Pathogens, and Fire Safety are also offered.

### *Teamwork:*

State and Federal regulations made it a requirement to put safety first in all areas of business here at The Arc. It is the intent of the agency to comply with all applicable laws concerning health and safety. To accomplish this, everyone must constantly be aware of conditions that can lead to injuries and work together to ensure a healthy, safe workplace.

### *Individual Responsibility:*

Safety is everyone's responsibility. Staff cooperation in detecting, reporting, and correcting workplace hazards is needed. If the assumption is made that someone else will correct a dangerous situation, one or more people may be injured. All staff are required to either fix the situation themselves or report it to the appropriate personnel if required.

Please read this manual carefully. Following the procedures set forth will significantly reduce the risk of injury for individuals served and staff. By signing the acknowledgement included with this manual, each staff person will show they have received the required health and safety guidelines. If there are any questions regarding any policies contained in this manual, please see any member of the agency's Safety Committee for clarification.

## **Current Safety Committee Members**

**As of October 1, 2009**

*Outside Consultant:*

Craig Shaffer – SafetyWorks

*The Arc Staff:*

Don Rowe, Executive Director

Mary Jo Walla, Assistant Executive Director

Danna Blum, Director of Human Resources

Duane Campanello, Director of Transportation

Stephanie Bell, Quality Assurance Coordinator

Cristin Cellitto, Vocational Services Manager

Laura Syes, Vocational Program Coordinator

## **Health & Safety Guidelines**

### *General Guidelines:*

- Work in compliance with good health and safety practices posted, instructed, and/or discussed.
- Follow good housekeeping practices at all times. Clean up all waste and debris, and eliminate clutter when appropriate.
- Do not attempt to lift any object that is too heavy to lift alone. Keep knees bent and back as straight as possible when lifting. All lifting should be done with the legs, not the back.
- Horseplay, roughhousing, scuffling, or fighting are inappropriate and will not be tolerated on the job. What appears to be fun often results in injury. Participation in these behaviors may result in disciplinary action. Repeat offenders may be subject to termination.
- Wear appropriate safety equipment when engaging in any action that is hazardous. Always apply universal precautions when dealing with blood and other body fluids.
- Dispose of waste carefully and in the proper fashion.
- Report all injuries that occur to the appropriate supervisor and if necessary, the Director of Human Resources.
- Keep all emergency evacuation signs in place.
- All sidewalks should be kept clear of snow and ice. Sand and salt are located in the rear warehouse if needed.
- All address numbers should be posted outside in clear view at each licensed site, in order to aid crews responding to an emergency event.

### *Storage:*

- Maintain storage at least 36 inches away from all electrical control panels, sprinkler valves, and fire extinguishers.
- All storage should be kept at least 18 inches below all sprinkler heads.
- Keep all combustible storage at least 48 inches away from heating appliances and six (6) inches away from heating ducts.

### *Fire Protection Equipment:*

- All fire extinguishers must be properly mounted, the top of which should not be positioned higher than five (5) feet above the floor. The extinguishers should be kept unobstructed by materials or objects.
- All fire extinguishers should be tagged indicating the date of last servicing. All fire extinguishers should be serviced annually.
- Fire alarm systems should be maintained in good working condition and staff should have working knowledge of the system in case of an emergency or a false alarm.
- All staff should know the evacuation system and ensure all procedures are individually tailored to meet the needs of individuals served at all licensed sites.

### *Emergency Vehicle Supplies*

- All Arc owned vehicles will contain road warning and hazard devices. There are also two portable kits containing these items for any staff utilizing their own vehicles to use. These kits are available from the Transportation office.

### *Electrical Guidelines:*

- Ensure all fixtures, wiring, and switches are secure.
- Keep extension cords off the floor and avoid long term use.
- Electrical cords should be the three (3) prong type and in proper working condition.

### *Kitchens:*

- All tables, counters, and shelving surfaces should be kept clean.
- All appliances are to be kept clean and in good working order.
- Keep the area free of insects and slippery materials.
- All paper towel dispensers should contain paper towels at all times.
- Keep trash cans clean and not overflowing.

### *Bathrooms:*

- Keep toilets and sinks in working condition, clean, and disinfected.
- Maintain shelves, walls, and partitions in good repair and clean.

- Water temperatures should be kept at 110 degrees Fahrenheit at all licensed sites in which individuals served are not capable of regulating water temperature are present. Reference should be made the each individual’s Individual Plan (IP) for all specific information.
- Toilet paper and paper towel dispensers should remain full at all times.
- Keep trash cans clean and not overflowing.

*Universal Precautions Equipment and Materials:*

- Ensure all sharps containers are properly labeled, used appropriately, and filled to no more than 75% of capacity.
- Universal precautions should be followed at all times.

*First Aid Supplies:*

- Each first aid box should be kept unlocked and include the following items at a minimum:
  - Various sized non-stick bandages and bandaids
  - Adhesive tape
  - Elastic “Ace” bandages
  - Gauze roller bandages
  - Sanitary pads
  - Cotton balls
  - Gloves
  - CPR mask
  - Hydrogen peroxide
  - Ear thermometer
  - Safety pins
  - Tweezers

- Scissors

*First Aid Procedures:*

All staff responsible for scheduling will ensure that there is at least one (1) staff member certified in First Aid and CPR on duty during all hours of program operation at all sites. Only first aid procedures learned in training may be utilized by Arc staff. Under no circumstances are staff allowed to administer medications without a Physician's Medication Order Form (PMOF). This is the policy of the Developmental Disabilities Administration and is also a key component of the Medication Technician Training Program (MTTP).

First aid equipment and supplies must be readily available at all licensed sites and all vehicles owned by The Arc.

## Procedures for Emergencies

According to the Assistant Civil Defense Director at the Carroll County Emergency Services Office (E.O.C.), the 911 emergency phone service, as part of the E.O.C. will coordinate the appropriate response in an emergency situation or disaster. The following procedures will be followed in the event of an emergency. In addition to what is listed below, please refer to the agency's *Emergency Preparedness Plan* for more in depth procedures on emergencies and disasters. Unless otherwise indicated, the listed procedures apply to all sites operated by The Arc of Carroll County, including all residential sites and the Albright Building.

### *Evacuation Procedure:*

Some emergencies will require evacuation. Refer to the information regarding each type of emergency to determine if and when evacuation is needed. Evacuation maps are placed at each licensed site and indicate primary and secondary evacuation routes. All staff are expected to be aware of primary and secondary exit locations at any site in which they are working.

In the event of an evacuation, staff will carry out the following general duties:

- Notify the appropriate administrative staff
- Direct individuals to the closest exit
- Transport and/or provide mobility assistance to individuals who are unable to evacuate independently. This information will be available in the individual's IP.
- Check all areas and provide assistance to any individuals who are using these areas.

### *Fires:*

The staff member who first notices smoke or fire is responsible for initiating the evacuation procedure. The fire department will take charge of the situation upon its arrival. Staff may use the fire extinguisher only as a last resort in circumstances where their safety or that of another in the area is in immediate jeopardy.

### *Hazardous Materials Incidents:*

The staff member who first notices the incident will immediately clear that area of all people, or if necessary, initiate the evacuation procedures. The appropriate administrative staff will be immediately notified. Any hazardous material incident, after placing a call to 911 if required, is to be handled similarly to a fire emergency, where the fire department will take charge of the situation upon arrival.

### *Severe Weather:*

For all weather events, The Arc's day program will follow Carroll County Public School System's schedule of operations. All staff scheduled to report to the Albright Building should call extension 200 for information regarding weather events. In the event a severe weather condition arises during day program hours, all appropriate staff will be notified and transportation of all individuals will be conducted before conditions deteriorate. If sufficient warning is not possible, the appropriate emergency procedures will be implemented.

### *Power Failure:*

In the event of a power failure, the administration will evaluate potential safety concerns related to the use of natural/alternative lighting and ventilation. If the situation is deemed safe, waiting for power to be restored will be the required response. If the situation is deemed unsafe, the evacuation procedures will be implemented. All staff are responsible for helping keep all individuals served calm throughout the entire situation.

### *Bomb Threats:*

Any individual who receives a bomb threat will immediately notify the administration. Staff will then proceed to evacuate the site and 911 will be called. All evacuated individuals and staff should move as far away from the building as possible for safety and remain there until emergency officials arrive.

### *Medical Emergencies:*

In the event of a medical emergency, each individual's face sheet and medical information should be retrieved and be available for reference by either the appropriate administrative staff, the delegating nurse, or for hospital staff if necessary. Each face sheet will contain the following information at the very minimum:

- Name
- Date of birth
- Address
- Phone number
- Social security number
- Insurance information
- Emergency contact person and his/her information
- Allergies
- Guardian's name and information (if necessary)
- Service Coordinator
- Diagnosis and medication list

A copy of the face sheet will be taken by staff for all community activities. For the Residential Department, each resident's complete file containing detailed medical information will be kept in the Health Services office and is accessible to appropriate staff. A duplicate copy of this file is

located at the resident's home. For individuals served in all other departments, each file contains a medical information section with the required information.

#### *Emergency Medical Conditions:*

If an individual served is injured or ill, the staff responding to the situation must make a determination as to whether an emergency medical condition exists. The following situations are always considered emergencies:

- Uncontrollable bleeding
- Accidents causing severe injury
- No heartbeat or pulse
- Loss of consciousness (not related to seizure activity)
- Abnormal seizure activity (refer to individual's nursing plan of care for details)
- Electrical shock
- Drowning
- Extreme physical discomfort, including chest pain, dizziness, or unsteadiness

If an emergency medical condition exists, staff will immediately call 911 and then Dimensional Health Care Associates (DHCA), our delegating nursing agency. The individual's Program Coordinator will then be notified, who will then contact the individual's family or caregiver and any other appropriate staff (i.e. Health Services Coordinator). The coordinator or a staff person designated by the coordinator should accompany the individual served to the Emergency Room with his or her medical file in order to be an advocate during the situation. The coordinator will be responsible for continued communication and further arrangements between the hospital, individual served, family, and other team members. All follow up including incident reports will be completed and submitted to the Quality Assurance Coordinator within 24 hours of the incident occurring.

#### *Non-Emergency Medical Conditions:*

Examples of non-emergency medical conditions include small cuts, splinters, bruises, complaints of minor discomfort, a fever of 101 degrees Fahrenheit, the onset of diarrhea, a rash lasting for several days, a persistent sore throat, complaints of headache, and limping.

Direct care staff will observe the individual for signs of illness and injury. Staff will notify DHCA who will make a determination of the degree of care needed. Staff should follow all instructions provided by DHCA, and follow the incident reporting process.

#### *Emergency Drills:*

Emergency drills should be performed monthly at all licensed sites. In the Residential Program, drills should be documented on the emergency drill form and handed in to the appropriate

Program Coordinator with the monthly paperwork. Drills at the Albright Building will be conducted as part of the Safety Committee's function.

## **Accidents and Illnesses**

The staff person who witnesses an accident or onset of illness will complete an Incident/Error/Injury Report form. The report is to be made as soon as possible, but at a minimum, by the end of the workday, and will not exceed 24 hours from the time the incident occurred. The report will describe the injury or illness in detail, including date, time, location, persons involved, and action taken. The individual's Program Coordinator will be responsible for contact all necessary parties including families, caregivers, and Service Coordinators. This form should be submitted to the staff person's direct supervisor, who will review the report and then pass it along to the Quality Assurance Coordinator for processing.

## Procedures for Infection Control

### *Universal Precautions:*

Universal precautions are an infection control approach whereby all human blood and certain body fluids are treated as if they are known to be infectious for bloodborne pathogens. **All** potentially infectious material **must** be handled using universal precautions.

Universal precautions are used to prevent parenteral (piercing mucous membranes or the skin barrier by needle sticks, human bites, cuts, and abrasions), mucous membrane, and non-intact skin exposures of workers to bloodborne pathogens, including Human Immunodeficiency Virus (HIV) and the Hepatitis viruses. They are meant to supplement rather than replace routine methods for infection control such as hand washing and use of gloves.

All staff will receive annual training on bloodborne pathogens and universal precautions and will also be offered the Hepatitis B vaccination. The Arc is not obligated to offer the vaccination to employees who have previously received the series or those who through antibody testing are immune. Staff can refuse the vaccination, but a waiver must be signed. The employee does have the right to request vaccination at a later date.

All staff must routinely use appropriate barrier precautions to prevent skin and mucous membrane exposure when contact with blood or other body fluids with other individuals is anticipated.

### *Body Fluids to Which Universal Precautions Apply:*

- Blood and other body fluids containing visible blood
- Semen and vaginal/cervical secretions
- Cerebrospinal fluid
- Amniotic fluid
- Synovial fluid
- Pleural fluid
- Peritoneal fluid
- Pericardial fluid
- Saliva in dental procedures
- All body fluids in situations where it is difficult or impossible to differentiate between fluids

Universal precautions also apply to any body tissue. In addition, although the risk of transmission of bloodborne pathogens is low, universal precautions also apply to feces, nasal secretions, sputum, vomit, tears, urine, breast milk, and saliva.

The chart on the following page lists various tasks common to this field and the required precautions. Keep in mind that for normal direct contact (i.e. shaking hands), no precautions are required.

| <u>Activity</u>                                    | <u>Precautions Required</u> |        |       |                |      |
|--|-----------------------------|--------|-------|----------------|------|
|  | Hand washing                | Gloves | Apron | Eye Protection | Mask |
| Bathing  | X                           |        |       |                |      |
| Bleeding Injuries                                  | X                           | X      |       |                |      |
| Urinary Catheter Care                              | X                           | X      |       |                |      |
| Handling Soiled Linen                              | X                           | X      | X*    |                |      |
| Cleaning Up Incontinence                           | X                           | X      |       |                |      |
| Direct Care of Client With Frequent Forceful Cough | X                           | X      | X*    | X*             | X*   |
| Wound Care   | X                           | X      | X*    |                | X*   |
| Administration of Medications:                     |                             |        |       |                |      |
| Rectal   | X                           | X      |       |                |      |
| Oral   | X                           |        |       |                |      |
| Eye/Nose Drops                                     | X                           | X      |       |                |      |
| Topical  | X                           | X      |       |                |      |
| Injectables  | X                           | X      |       |                |      |
| Handling Infectious Waste                          | X                           | X      | X*    |                |      |
| Peri/Anal Care                                     | X                           | X      |       |                |      |
| Routine Feeding                                    | X                           |        |       |                |      |
| Tube Feeding                                       | X                           | X      |       |                |      |
| Brushing Teeth                                     | X                           | X      |       |                |      |
| Stoma/Ostomy Care                                  | X                           | X      |       |                |      |
| Fingerstick  | X                           | X      |       |                |      |

\*In extraordinary situations, these additional precautions may be necessary.

### *Gloves:*

Gloves must be used when touching blood and body fluids, mucous membrane, or non-intact skin of any other individual. Gloves should also be used when handling items or surfaces soiled with blood or body fluids of any type.

Gloves **must** be changed after each activity and between individuals. Ensure that gloves of proper size are worn and always change gloves if there are any rips or tears. After removing gloves, always wash hands. If the glove supply at any particular site is running low, notify your direct supervisor so that a constant supply is always maintained.

### *Hand Washing:*

Hand washing is one of the most effective yet overlooked infection control precautions. It should consist of washing and rinsing hands, forearms, and wrists thoroughly in warm running water. Hands and other exposed skin surfaces should be washed immediately if contaminated with blood and other body fluids or after removing gloves.

To wash hands properly, rub all parts of hands and wrists with soap and water or an alcohol based hand sanitizer. Wash hands for at least 15 seconds.

### *Resuscitation Devices:*

A mouth to mouth resuscitation device must be available for use in each first aid kit to minimize the need for direct contact during CPR.

### *Cleaning Spills:*

Spills of blood or body fluids on any surface must be cleaned up as soon as possible. Appropriate disinfecting cleaners should be used to decontaminate the area.

### *Trash:*

Any potentially hazardous waste materials should be placed in a leak proof plastic bag and disposed of away from other trash. All containers that have a reasonable likelihood for becoming contaminated must be inspected, decontaminated, and cleaned on a regular basis. The decontamination process must be additionally conducted upon notice of any visible contamination.

### *Laundry:*

While wearing gloves, laundry that is soiled with potentially infectious material must be placed in a leak proof plastic bag and carried directly to the washing machine. Contaminated laundry is to be washed in hot water separately from other laundry.

### *Exposure Incidents:*

An exposure incident is defined as a specific eye, mouth or other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious material. If an exposure incident occurs, follow these steps: remain calm, wash the affected area with soap and water, and report the incident to the appropriate administrative staff person immediately. The employee will be sent for a free medical evaluation and appropriate testing and treatment. Counseling may be provided depending on the results of the testing, if appropriate.

The staff member's direct supervisor, with the assistance and involvement of the Quality Assurance Coordinator and/or the Director of Human Resources, will investigate the incident in search of circumstances, route of exposure, and any existing hazards that may need correction. The investigation and plan of action will be submitted within 21 days to the Executive Director. The administration will keep a record of each incident reported.

Staff members with skin lesions should refrain from direct patient care. Staff with exudative lesions or weeping dermatitis should refrain from all direct care and from handling patient care equipment until the condition is resolved.

Although pregnant workers are not known to be at greater risk of contracting bloodborne pathogens than workers who are not pregnant, if they do develop infection during pregnancy, the infant is at risk of infection resulting from perinatal transmission. Because of the risk, pregnant workers should be especially familiar with and strictly adhere to the use of universal precautions.

Every Arc staff person is required to adhere to universal precautions. Failure to comply may result in disciplinary action. In addition, no employees should eat, drink, smoke, apply cosmetics or lip balm, or handle contact lenses in an area where they may be exposed to blood or other potentially infectious materials.

### *Communicable Illnesses and Diseases:*

All staff also receive training regarding communicable diseases and their prevention. Please refer to the fact sheets at the end of this manual for more comprehensive information regarding the following communicable diseases: Common Cold, Chicken Pox, Clostridium Difficile, Conjunctivitis, Measles, Hepatitis (A, B, & C), Herpes, HIV, Impetigo, Influenza, Lice, Lyme Disease, Mononucleosis, MRSA, Ringworm, Rubella, Scabies, Scarlet Fever, Sexually Transmitted Diseases, Strep Throat, Thrush, Tuberculosis, and Yeast Infection.

## **Procedures to Handle, Administer, Store, & Dispose of Medications**

Refer to the Maryland Developmental Disabilities Administration's Medication Technician Training Program for complete and detailed information regarding medication administration procedures. In addition to the following policy, The Arc follows the *Medication and Nursing Related Policies and Procedures* developed by DHCA, which are compliant with COMAR 10.27.11, COMAR 10.22, and CMT 10.39.

### *Basic Medication Administration Principles:*

Each individual receiving services should have input regarding the receipt of medication, and should be given an explanation of the medication's purpose. In those instances where an individual does not understand, his or her proponent should be involved. A positive approach should be used when giving medications. Because of this, the use of physical force or the hiding of medication in food in order to administer is prohibited. Each individual served has the right to refuse medication.

Only medications which have been prescribed by a licensed health care professional can be administered to an individual served. Medications must be prescribed for the benefit of that individual, not as a substitute for programming.

### *Medication Technicians:*

Only unlicensed persons who have passed the MTTP and have been certified by the Board of Nursing are authorized to administer medications. The job of the Medication Technician includes the administration and documentation of medication, observing individuals for changes in their physical or mental status, and reporting these changes to the delegating nurse.

### *Medications:*

All medications must have a pharmacy label that clearly and accurately indicates the following:

- Pharmacy name, address, and phone number
- Individual's Name
- Prescription number
- Date prescription was filled
- Name of medication
- Directions for use (including dosage and frequency)
- Reason for use
- Special instructions (if necessary)
- Name of prescribing health care professional

The pharmacy label or PMOF form should **never** be altered by hand.

All medications must be stored in the original containers used by the pharmacist. State of Maryland regulations require that all medication administered in a DDA setting be packaged in bubble packs. All medications should be sorted and stored by individual, with oral and topical meds separated. Medications should be stored in a locked container with the key only accessible to medication technicians. Medications that need to be chilled should be kept in a locked box in the refrigerator. All Schedule II controlled drugs (as dictated by the controlled substances Act of 1970) must be stored under a doubled locked system and require staff to sign off on a special form at the start of their shifts. Two locks on one container do not meet these guidelines.

Disposal of medications should occur when medication is discontinued before all of it has been dispensed, the individual has refused to take the medication after it is has been poured, the medication has fallen on the floor or becomes contaminated in some other way, or if the medication has expired. Please do not flush medications or throw them in the trash. They should be brought to the Albright Building and placed in the disposal container for this purpose. All schedule II controlled drugs **must** be given to the delegating nurse for disposal.

*The “Six Rights” of Medication Administration:*

- The **right person**.
  - Know the individuals being served and be familiar with their medication regimen.
- Receives the **right medication**.
  - Perform the THREE WAY CHECK (PMOF, Pharmacy label, Medication Administration Record). If the three do not match or if the medication has expired, **STOP AND NOTIFY YOUR SUPERVISOR**.
- In the **right dose**.
  - Ensure that the prescribed dosage is the dosage being administered. Do not guess! If there are any questions, ask a supervisor **before** administering the medication.
- At the **right time**.
  - For most medications, there is a one hour window before and after the listed time for administration. All seizure and behavior modifying medications should be given on the **exact** time listed on the PMOF.
- By the **right method/route**.
  - Ensure that the medication is given in the method asked. If there is confusion between the route requested, ask a supervisor **before** administering the medication.
- Followed by the **right charting and documentation** procedures.
  - Immediately after giving medications, chart the administration using the guidelines contained within the MTTP.

### *Self Administration Procedures:*

Some individuals may be able to take partial or complete responsibility for the administration of their own medications. In order to determine an individual's participation level, a self medication readiness assessment must be completed and the individual's primary care doctor must approve of the self administration. The individual will also be assessed regularly by the delegating nurse. Please see Chapter 8 of the MTTP manual for more information regarding the self administration of medications.

### *Safety Principles of Medication Administration:*

The following principles will help maintain the safety of the environment during administration and reduce the risk for medication errors:

- Wash hands before and after administering medications to each individual.
- Full attention should be given to the task of medication administration.
- Prepare and administer for only one individual at a time.
- Staff should only administer and chart medications they have poured themselves.
- Chart each individual's medications immediately after administering them.
- Ensure the PMOF, MAR, and pharmacy label match exactly before administering medications.
- Never pour medications and leave them to be taken later in the day.
- Ensure the individual has an adequate amount of liquid to take medications with.
- Stay with the individual during the entire administration of medications.
- Never leave medications unattended or the medication cabinet unlocked.
- Do not give medications that have changed color.
- Only administer medications that are properly packaged in bubble packs.
- Never hide a medication error.

## **Policy on Smoking**

As stated in State of Maryland law, smoking is not permitted inside any Arc owned or operated sites, including all residential sites, the Albright Building, or in any agency vehicles. Smoking by staff, individuals, and visitors is only permitted outside at the designated smoking areas.