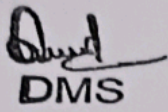


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### **SAFETY POLICY:**

Choithram Hospital will ensure that the practice of medical and nursing care in this hospital will ensure patient safety which satisfies the standards set forth by National Accreditation Board for Hospitals and healthcare providers (4th edition, December 2015).

#### **There is a structured patient-safety programme in the organization**

- a. The patient-safety programme is developed, implemented and maintained by a multi-disciplinary committee.
- b. The safety committee is multidisciplinary and includes representation from management, clinical, nursing, non-clinical, and engineering and safety officers.
- c. The patient-safety programme is documented.
- d. The programme is documented in detail in safety manual.
- e. The patient-safety programme is comprehensive and covers all the major elements related to patient safety and risk management.
- f. The programme describes the comprehensive patient safety risk assessment and also addresses the risk reduction strategy.
- g. The scope of the programme is defined to include adverse events ranging from "no harm" to "sentinel events".
- h. The programme addresses the identification and reporting of the incidence, analysis, segregating & interpreting from "no harms" to "sentinel events"
- i. There are designated individual for coordinating and implementing the patient-safety programme.
- j. The chairman of the safety committee and the team is well aware of general and patient safety and will be responsible to take the decision whenever any intervention is required.
- k. The designated programme is communicated and coordinated amongst all the staff of the organization through appropriate training mechanism.
- l. The patient safety rounds are carried out periodically and in every quarter facility management round as part of many audit programs including the audit of patient safety goals.



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- m. The patient-safety programme identifies opportunities for improvement based on review at pre-defined intervals.
- n. After assessing findings of each safety round and on analysing the incidence reports, the detailed root cause analysis reveals the areas and opportunity of improvement. This is also documented.
- o. The patient-safety programme is a continuous process and updated at least once in a year.
- p. The patient safety is paramount for us, the patient safety programme is continuously followed and updated at least once in a year. Detail programme is mentioned in safety and engineering manual.
- q. The organization adapts and implements national/international patient-safety goals/solutions.
- r. Hospital has adopted the WHO patient safety goals and does the audits on the basis of the standard checklist. This audit is being conducted twice in month and findings are reported and analysed. Detail programme is mentioned in Safety manual.

**POLICY:**

The patient's safety during their stay in the hospital is of paramount importance.

It is the policy of Choithram Hospital, to provide for a safe and healthful environment for every patient receiving medical care, for each staff member in performance of his / her duties and obligations, and for every visitors and volunteer who enters upon the premises.

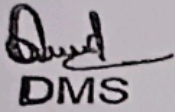
To this end, a comprehensive safety program addresses accident prevention, fire protection, and health preservation. To ensure this the hospital has constituted a 'Safety Committee' to oversee the hospital safety programme.

All adverse events occurring during the process of patient care is recorded, investigated and remedial action is initiated.

Hospital management will provide all necessary resources to minimize such risks.

Patient safety and Facility safety audits checklist are made and used as a tool for assessing compliance and the report is analyzed for RCA CAPA and presented to Management for further improvement.



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**PROCEDURE:**


**Safety Committee:** The safety committee is responsible for developing and maintaining safety policies, procedures, plan, standards and safety rules to include supervising and training personnel in departmental safety standards, policies and procedures. Develop and issue policy for patient, staff and visitor safety and security. Monitor training and implementation. Monitor occupational health and safety. To identify the potential safety and security risks in the hospital, to co-ordinate, develop, implement and monitor the safety plan and policies. To inspect the patient safety devices across the organization periodically. To have facility inspection rounds to ensure safety quarterly in both patient care areas and in non-patient care areas. To document inspection reports and to take corrective and preventive actions. To impart safety education programme for all the staff. All accidents, no matter how minor, will be reported immediately to the casualty in-charge or safety committee. Action plan is discussed based on CAPA.

**Risk Assessment:** The hospital has entrusted the safety committee to have a risk analysis across the hospital so that they can be avoided at any cost.

All the sentinel events, adverse events are analyzed and root cause analysis is done for all the events occurring inside the hospital. This is submitted to management and discussed in Core committee meetings.

**Potential risk assessment:** Hazard identification, risk assessment (HIRA) and control measures are introduced to aim at providing a basis for identifying, evaluating and justifying the selection of control measures for eliminating or reducing risk. Employer and employees are provided with sufficient knowledge, awareness and understanding of major risks/accidents at the facility. This is also mentioned in the Safety manual.



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## PATIENT SAFETY MANAGEMENT PROGRAMME


- Patient Safety Management programme is a system to identify all possible hazards the patient may be exposed to during his /her journey through the hospital in the course of the treatment & taking all possible precautionary measures to ensure that not only she/he recovers from the disease process (if possible) as quickly as possible but also remains safe & protected from all possible hazards & unexpected complications due to human or system failure.
- Our Organisation has become increasingly conscious of its responsibility towards safety of the patients, partly because of the genuine concern & partly because of the fear of heavy penalties in terms of loss of image & huge financial compensations due to civil/ criminal negligence law suits.

### ESSENTIALS OF PSMP-

Patient safety program is a continuous program involving all the following activities-

- a. Constituting a Patient safety management committee with wide representation from all the major departments & including the Pharmacy, HK, Linen & laundry, Dietary, CSSD & Engineering support services. The program shall be under the direct supervision of the DMS & shall also include the representation from various committees such as HIC committee, Medical audit/ nursing audit committee, Ethics committee & BM waste management committee.
- b. Identification of all possible hazards such as-
  - Unsafe building especially those in the earthquake prone areas & not designed/ retrofitted for earthquake resistance.
  - Unsafe equipment, Engineering services, materials, environs.
  - Ill trained unqualified, negligent staff.
  - Unsafe practices/ processes.
- c. Implementation of effective (and timely) measures to eliminate the risks/ hazards & to improve the patient's safety to the acceptable level.
- d. Periodic regular review (Internal audit) of effectiveness of the system.



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- e. A system of continuous monitoring & analysis of the sentinel/ adverse & even near miss events to identify the lacunae & take corrective actions.
- f. A system of informing & educating the patients/ visiting public to cooperate in warding off the hazards.
- g. A system of impartial audit to validate the safety measures implemented.
- PSMP involves creating an organisation culture where safety of the patients, staff as well as visitors comes first & foremost. In our HCO, our Hospital Administrator shall play a crucial role & responsibility for the success of the program. They shall be the guardian of the patients who are fully dependent on the hospital management for prevention of hazards they all are exposed to.
- The PSMP is organisation wide & encompassing the entire spectrum of activities, minor or major. No activity, service or department shall be treated as absolutely safe requiring no monitoring/ control.

#### **IDENTIFICATION OF RISK FACTORS-**

Our HCO has adopted a more comprehensive approach, which is based on the study of outcome, structure & process. Outcome, i.e. patient safety is dependent on the safety of infrastructure available & the processes used to deliver the services. Therefore, a systematic study of the infrastructure & the processes used in all areas, with a view to find out " what can go wrong, where, and what needs to be done", does provide the right answers.

#### **a. INFRASTRUCTURE RISK FACTORS-**

##### **i. Buildings-**

Collapse of buildings/ ceilings or other mishaps are not unheard of. An effective safety program of our HCO ensures that the-

- Structural engineering norms have been followed while erecting the structure.
- The building materials used are as per the standard norms.
- The internal plastering on the ceilings & walls is as per the norms.
- The terraces, roofs, balconies have protective railings.