



Jones
WELLNESS CENTER
Environment of Care
Policy and Procedure Manual

Revised: 9/10/2024

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.01.01.01, EP1
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Designation of a Safety Officer

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimize risks in the environment of care.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

1. It is the policy of Jones Wellness Center to plan activities that minimize risks in the environment of care.
2. Jones Wellness Center has identified individuals to manage risk, coordinate risk reduction activities in the environment of care, collect information on deficiencies, and disseminate summaries of actions and results.
3. Jones Wellness Center has identified individuals to intervene whenever environmental conditions immediately threaten life or health or threaten or damage equipment or buildings.
4. Jones Wellness Center has a Risk Management/Health and Safety Manual with contains the following plans to assess and minimize risks associated with the environment of care:
 - a. Safety Manual
 - b. Security Manual
 - c. Fire Safety Manual
 - d. Utility System Manual

PROCEDURE

1. Jones Wellness Center has identified a Risk Manager for Jones Wellness Center.
2. Jones Wellness Center has identified key staff to assume the responsibility of identifying risks and intervening at the facility: The Founder has been designated by Jones Wellness Center.
3. Jones Wellness Center tracks deficiencies which include injuries, problems and use errors through the incident reporting system.
4. Jones Wellness Center has the following plans inclusive of the following:
 - a. Safety Manual
 - b. Security Manual
 - c. Fire Safety Manual
 - d. Utility System Manual

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.01.01.01, EP4-5
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Risk Management Plans

POLICY STATEMENT

1. It is the policy of Jones Wellness Center to provide and maintain a safe, accident-free, and healthy working environment for all employees, clients and visitors.
 - a. Jones Wellness Center believes in the importance of the individual employee and his or her right to derive both personal and professional satisfaction from the job.
 - b. Prevention of occupational injuries and illnesses is of such consequence to this belief that it will always be given a top priority spot in addressing the safety issues of Jones Wellness Center.
 - c. We encourage every employee to be actively involved in our safety program and to be prepared to respond appropriately in any type of emergency.
2. This means each employee is expected to read our Health and Safety policy and procedures, staff meeting minutes and operate all equipment in the proper manner, using safety protection where required, and use good judgment about safety in every part of the program.
3. Jones Wellness Center provides an overview of the proper use of equipment and performs regular inspections of the program sites for safety hazards and compliance with established guidelines.
 - a. Any incident that may occur is investigated so that any problems are corrected, and similar incidents are prevented in the future.
 - b. If you see anything that is in need of repair or replacement, inform your supervisor or a leadership staff member and our Property Manager will address and resolve the issue.
4. **Remember** -- Be an active part of Jones Wellness Center program and help to keep it a safe environment for everyone.
 - a. The program cares about everyone who is employed with us, engaged in our services and visits our program.
 - b. We strive to provide a safe, accident-free and healthy working environment.
5. Our Risk Management and Health/Safety Manuals have been developed to serve as a handy reference for basic safety procedures and in emergency situations.
 - a. Please read it carefully and review it often.

SAFETY PLAN

PURPOSE

The purpose and objective of this plan is to provide direction toward establishing and maintaining a safe environment for clients, visitors, and staff to reduce the risk of accidents and injuries in a cost-effective manner.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained. It is the responsibility of the Safety Officer and/or designee to disseminate this information to employees.

POLICY

1. It is the policy of Jones Wellness Center to have a plan to manage safety and security risks.
2. The Plan assists in the identification of safety and security risks associated with the environment of care that could affect individuals served, staff, and other people coming to Jones Wellness Center's facilities.
3. The Plan contains the actions to be taken to minimize identified safety and security risk associated with the physical environment.
4. Jones Wellness Center maintains all grounds and equipment to further minimize risks.
5. Jones Wellness Center controls access to and from areas identified as security sensitive.
6. Jones Wellness Center acts in accordance with product notices and recalls.
7. The goals and objectives of the Safety Management Plan include but are not limited to the following:
 - a. Support an efficient, comprehensive Safety Program
 - b. Assure that performance improvement activities evaluate the effectiveness of the Safety Program
 - c. Assure compliance to Federal, State, and County regulatory agencies
 - d. To communicate and train employees in all aspects of the Safety Management Plan
 - e. Integrate Risk Management and Performance Improvement activities into the overall Safety Program
 - f. Conduct Safety Rounds/Inspections on a minimum of a quarterly basis to ensure identification of Environmental hazards and unsafe practices
 - g. Utilize the Incident Reporting System and other occurrence reports to investigate events involving property damage, occupational illness and injury, or client and/or visitor injury

COMPONENTS:

1. The Safety Management Plan includes, but is not limited to the following components:
 - a. Design, implementation, support and maintenance of the Safety Management Program that is based on monitoring and evaluation of organizational experience, applicable law and regulation, and accepted practice. This is accomplished through:
 - i. The appointment of a Safety Officer by the Founder who is responsible for developing, implementing and monitoring Jones Wellness Center's Safety Management Plan and who is authorized to intervene whenever conditions exist that pose an immediate threat to life or health or pose a threat of damage to equipment or building.
 - b. Maintaining and supervising the building and grounds.
 - c. Conducting Safety Rounds/Inspections that proactively evaluates the impact of maintaining buildings, grounds, equipment, occupants, and internal physical systems on client, employee, and public safety.
 - d. Maintaining an efficient system for processing of and monitoring the completion of service requests.
 - e. Examining safety issues by appropriate representatives from administration, clinical services, and support services.
 - f. Reporting and investigating all incidents that involve property damage, occupational illness, and client, employee or visitor injury.
 - g. An orientation and education program that addresses general safety processes, area-specific safety, specific job-related hazards, and provision of safety related information through new employee orientation and continuing education.
 - h. Ongoing monitoring of performance regarding actual or potential risk related to the Safety of the Environment.
 - i. Safety policies that are developed in collaboration with associated departments and are approved by the Founder.

PROCEDURE

1. If any staff member determines that conditions pose an IMMEDIATE threat to life, health, or damage to property, equipment, or buildings, that staff member has the authority to intervene as deemed prudent and safe based upon guidelines provided in the Environment of Care Plans.
 - a. In addition, the staff member is responsible to immediately notify their immediate supervisor as soon as it is safe to do so.
2. The Safety Management Plan involves the following processes:
 - a. Risk Assessment occurring through the following:
 - i. The Founder and/or Designee will review Incident Reports.
 - b. Evaluating timely completion, proper completion, with follow-through as necessary, trends, potential for a claim related to professional liability, workers compensation, or property damage.
 - c. Overview of actions taken within given discipline regarding identified trends.
 - d. Provide recommendations to the Founder/Executive Leadership Team.
 - e. All disciplines will monitor professional literature and forward information regarding risk and safety issues to the Safety Officer and/or designee and their supervisor to accommodate department review and reviewed by the Founder and/or designee as deemed appropriate.
 - f. Surveillance activities are conducted on a minimum of a quarterly basis.
 - g. Date will be reviewed by the Safety Officer and/or designee and actions recommended to the Founder as necessary to determine the following:
 - i. Adherence to healthcare, industry, federal, state safety regulations.
 - ii. Adherence to Jones Wellness Center's Environment of Care Management Plans.
 - iii. Identify hazards/risks relating to building, grounds, equipment, occupants, and physical plant.
 - iv. Ensure enactment of product recall for all equipment utilizing practices consistent with this Plan.
 - v. Recommendations to amend problem areas.
 - vi. Alerting appropriate leadership staff of identified risks and potential impact on the client, visitor and staff safety.
 - h. Implementing proactive measures covered in policy and procedure providing direction regarding:
 - i. Contract Review
 - Client Grievances
 - Utilization Review
3. Incident Investigation
 - a. Client or Visitor Injury
 - i. The Safety Officer and/or designee will follow up with the staff where the incident occurred to ensure that appropriate medical care (clients) or relevant referrals (visitors) were provided immediately in addition to necessary follow-up.
 - ii. If determined to be a sentinel event, appropriate notifications and root cause analysis will be performed.
 - b. Employee Injury
 - i. Immediate investigation (on-site) and follow-up is facilitated by the Safety Officer and/or designee.
 - c. Property or Equipment Damage
 - i. Investigated by the Safety Officer and/or designee with expertise related to the damaged item.
 - d. Claims Management
 - i. The Safety Officer and others as designated by the Founder receive and review claims related to professional liability, visitor and employee injury, and property damage/loss.
 - e. The Founder and/or designee is responsible for transmitting information related to these potential claims to the insurance carrier, legal counsel, the appropriate Leadership staff and others as the situation warrants.
 - f. The Founder and/designee are responsible for setting up the claims management file to track the investigation, processing and defense of claims against the facility, and work with the legal counsel to collect documents and assist as necessary with preparation of testimony of impending litigation.
4. Equipment Safety and Maintenance:
 - a. Upon arrival of new equipment, the Safety Officer (or designee) will assess the equipment for safe use.

- b. All equipment (electrical and mechanical) will be inspected on an ongoing basis for the integrity of all working parts, cord, plug, etc.
- c. Corrective actions to address faulty equipment will be taken and logged after discussion and evaluation of options with the staff member responsible for the equipment.
- d. Items removed from the workplace for repairs will require an updated inspection prior to use.
- e. Rental or equipment on loan while original equipment is serviced will require inspection and employee education prior to introduction to the workplace.

5. Preventative Maintenance

- a. Schedules will be determined based on equipment needs.
- b. Logs will be maintained documenting preventative maintenance.

6. Product Recalls

- a. Will be handled by the Safety Officer and/or designee and will be logged in accordingly.

7. Employee Education

- a. A copy of the owner's manual including operating instructions will be made available to users of equipment.
- b. Supervisors will provide education to employees regarding proper use of equipment and related safety measures.
- c. Education will be documented in the employee's file.
- d. All employees will receive Safety Management Plan education during new hire orientation and will be reviewed annually.

8. Evaluation / Reporting

- a. The Safety Management Plan will be evaluated annually to determine if the scope and objectives performance and effectiveness of the plan are consistent with the intent of the plan.
 - i. Data gathered from surveillance rounds, questionnaires, and review by the Leadership will provide the basis for evaluation.
 - ii. The annual evaluation will be forwarded to the Founder.
 - iii. The quarterly activity summary will be submitted to the Founder.

Performance Improvement / Information Collection and Evaluation Systems (ICES).

- 1. The Safety Management Plan is established, supported and maintained based on measurement, assessment, and improvement activities of applicable law, experience and accepted practice.
 - a. This includes but is not limited to the Information Collection and Evaluation Systems (ICES) identified throughout the environment of care processes.
 - b. The information that is received, evaluated, acted upon and distributed includes Incident Reporting, safety inspection, training, education, and employee knowledge.
- 2. For the Safety Management Plan the ICES includes, but is not limited to Safety Surveillance activities, Risk Management, Employee Health, and other Performance Improvement activities being conducted throughout Jones Wellness Center.
- 3. Performance Standards
 - a. 100% of safety and environmental rounds will be completed monthly.
 - b. 90% of staff will know what incidents are reportable to the governing bodies and Joint Commission.

Safety Inspections and Plans

- 1. Jones Wellness Center ensures Jones Wellness Center has a comprehensive inspection each year by an external source.

Policy:

- 1. The external inspections, where applicable, cover:
 - a. Emergency warning devices, means of egress and emergency plans
 - b. Operation of fire equipment
 - c. Handling and storage of materials

- d. Operations involving hazardous materials, including the safe and effective management of hazardous materials
- e. Walking and working surfaces
- f. Health and sanitation provisions in food services for clients
- g. The working environment, including ventilation
- h. Fire protection in accordance with applicable state and local fire safety requirements

2. The following external authorities are used for on-site inspections:

- a. Agencies insurance company
- b. Representative of the LPC Board, Commission on Dietetic Registration, Texas Medical Board, and Board of Nursing
- c. A representative of the City Fire Marshal's office
- d. A representative of the Health Department
- e. Inspection reports are reviewed and available.
- f. All reports identify the areas covered as well as the location reviewed.

Safety Training for Organization Staff and Clients

1. Jones Wellness Center promotes a safe and secure environment by providing safety training for staff members of Jones Wellness Center as well as the clients engaged in services.

Policy:

- 1. Orientation of new employees, rehires, and part-time employees, are trained on the Internal and External emergencies/disasters.
 - a. This information provides the framework needed to address any type of weather or event that might arise.
- 2. The employees will be thoroughly instructed in job safety requirements and provided with an orientation to where emergency equipment is maintained as well as minor medical emergencies like First Aid Kits or the Poison Control number if needed.
- 3. In addition to employees, clients receive training to address internal and external emergencies/disasters.
 - a. This training is part of the agency's annual training and verification is noted in the training log with sign-in sheets for attendance.
- 4. Staff members are trained in First Aid and CPR if an injury or emergency occurs on the job with a staff member, client or visitor.
 - a. All employees working with clients maintain up to date current verification of First Aid and CPR training.
- 5. All staff and clients are instructed to report safety hazards should they become aware of anything broken or in need of repair or replacement.
 - a. Jones Wellness Center has a form that is utilized for this purpose and available when a safety hazard is identified.
 - b. This form is submitted to the Property Manager to inform, assess and repair.
- 6. Any time an accident occurs (staff, client or visitor), no matter how serious or how minor, and as soon as the injured is provided treatment, an Incident Report is completed.
 - a. This report identifies the situation to see what may have caused the problem, and how to prevent the situation from being repeated.
 - b. The more information that can be provided, the better chance Jones Wellness Center has of correcting the problem and decreasing the risk of injury.
 - c. Any individual involved in an accident is required to undergo a post-accident drug test within 24 hours.
- 7. All Maintenance Reports are completed and turned to the Property Manager who initiates the repair(s) needed.
 - a. Once the repair(s) or replacement(s) have taken place, the data is completed and reviewed to identify any trends taking place and the information becomes part of the Quality Assurance program.
- 8. Jones Wellness Center has created an annual training schedule, which includes training for both staff and clients to reduce the risk of health and safety issues.

SECURITY PLAN

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimize risks in the environment of care.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained. The Safety/Risk Manager to assist in the ongoing vigilance of the activities.

POLICY

It is the policy of Jones Wellness Center to have a written plan for providing a secure environment for everyone who enters Jones Wellness Center's facility.

GOALS AND OBJECTIVES:

1. The goals and objectives of the Security Management Plan include but are not limited to the following:
 - a. Support an efficient, comprehensive Security Management Program.
 - b. Assure that performance improvement activities evaluate the effectiveness of the Security Management Program.
 - c. Integrate Risk Management and Performance Improvement activities into the overall Security Management Program.
 - d. Utilize the Incident Reporting System and other occurrence reports to investigate events involving property damage, injury, thefts, vandalism or other security related occurrences.
 - e. Conduct Safety & Security Surveys to ensure the identification of environmental hazards and unsafe security practices.

COMPONENTS:

1. The Security Management Program includes, but is not limited to the following:
 - a. The appointment of a Safety Officer by the Founder/Leadership Team who is responsible for developing, implementing and monitoring Jones Wellness Center's Security Management Plan.
 - b. Addressing security issues concerning clients, visitors, employees or property.
 - c. Providing identification, as appropriate, for all clients, visitors and employees.
 - d. Controlling access to sensitive and high-risk areas, as determined by Jones Wellness Center.
 - e. Emergency procedures that address actions taken in the event of a security incident or failure, handling of situations involving VIP's or the media and provision of additional personnel to control human and vehicle traffic in and around the environment of care during disasters.

PROCEDURE

1. Security Issues Survey
 - a. At or around the time of this plan's annual review the following steps will be taken to gather information regarding security issues:
 - i. Review the past year's security incident reports and compare them with the past.
 - ii. Founder and Safety Officer will review feedback on the Security Issues Survey (attached).
 - iii. Upon evaluation, the Leadership will determine the need for continued or revised security measures.
2. Reporting and Investigating Security Issues
 - a. Security situations requiring assistance should be handled as follows:
 - i. Daytime- Alert the Founder or call 911 if it is an emergency that cannot be handled internally.
 - ii. Nighttime- Call the Founder for direction.
 - b. Incidents regarding security issues (listed below) must be documented on an incident report form.
 - c. The Founder will contact the Safety Officer and/or designee of the area where the problem occurred and address the extent of an investigation that is to occur.
 - d. Security related Incident Reports will be reviewed by the Founder and/or designee and recommendations regarding action to be taken in light of the incident report or investigation will be made.
3. Identification Procedures and Security Issues

- a. Confidentiality
 - i. Staff members are to make every effort to protect confidentiality:
 - 1. While in the workplace, staff is to keep client names or other identifying information out of the eyesight of people passing by their workstation who do not have privileges to view confidential information.
 - 2. Conversations about client treatment issues in public areas are discouraged.
 - 3. Information about clients is not to be shared in public.
 - 4. If a staff member witnesses client or staff confidentiality being violated, they are to inform their supervisor immediately.
- b. Unauthorized visitors
 - i. Includes individuals who have not been given permission by appropriate staff members to be in certain locations.
 - ii. All staff members should redirect unauthorized visitors to leave the property at once. If the visitor is unresponsive, the Founder is contacted for directions.
 - iii. The Founder will determine if the situation warrants contact with the police by calling 911.
- c. Substances
 - i. Substance abuse by staff is not tolerated. Suspected substance abuse by staff will be addressed through the following protocol:
 - 1. Employees will be requested to undergo an observed drug test at an independent organization.
 - 2. Positive Drug Tests:
 - a. Individuals will be terminated for testing positive on any drug test.
 - b. Substance abuse by clients is not tolerated. Suspected substance abuse by clients will be addressed through the following protocol:
 - c. Clients will be requested to undergo an observed drug test at Jones Wellness Center.
 - d. Positive Drug Tests:
 - e. If the individual requests assistance a referral to an outside treatment agency will be completed.
 - f. If the individual denies drug use and refuses a drug test, they will be discharged from the Jones Wellness Center.
- d. Weapons
 - i. Weapons are prohibited.
 - ii. Individuals carrying weapons are to be instructed to leave the property.
 - iii. The Founder should be alerted immediately.
 - iv. An incident report should be filed.
 - v. If an individual carrying a weapon or using it in a threatening way remains on the property, notify the local police immediately and then alert the Founder.
- e. Theft
 - i. An incident report should be completed if client, visitor, or staff items are stolen.
 - ii. Founder or designee will direct appropriate staff in investigating if necessary.
- f. News Media and Management of VIPs
 - i. Employees who receive questions from news media personnel should not answer the individual's questions but should refer them to the Founder.
 - ii. The Founder is the only individual with authority to invite the news media onto Jones Wellness Center's property.
 - iii. Employees who encounter media personnel on the property should indicate that they are on private property, instructing them to leave immediately.
 - iv. If an employee experiences resistance from the news media, they are to contact the Founder, or if the situation warrants, contact the police.

- v. Every precaution should be made to keep client identifying information and clients themselves out of the eyesight of news media.

4. Security sensitive areas:

- a. The following areas have been identified as security-sensitive areas, which means that extra measures may be taken to monitor or increase security measures/precautions. Some areas are limited to authorized staff members only.
 - i. Open Medical Records
 - ii. Closed Medical Records Storage
 - iii. Open and Closed Personnel Records- Requires authorization from the Founder prior to access.
 - iv. Corporate Office - Limited to senior leadership and other authorized personnel as determined by the Founder.
- b. Facility Keys and Alarm Access Code
 - i. The Founder makes the determination of key distribution for employees.
 - ii. Alarm Access Code information is determined by the Founder.

5. Communication Tools/Security Equipment

- a. Telephones - If the telephone system fails, employees have the following alternatives:
 - i. Web Fax lines that are not linked to the phone system.
 - ii. Cell Phones
- b. Equipment Maintenance: Preventative maintenance, inspection and testing requirements on all communication tools and/or security equipment is completed per schedule.
 - i. Lights on pathways, buildings, parking areas, etc. that individuals frequent
 - ii. Security alarm system
 - iii. Key card access during regular business hours (7 a.m. to 6 p.m. Monday through Friday)

6. Employee Education

- a. All employees will receive specific security education during new hire orientation and will be reviewed annually.

7. Evaluation / Reporting

- a. The Security Management Plan will be evaluated annually to determine if the scope and objectives, performance and effectiveness of the plan are consistent with the intent of the plan.
 - i. Data gathered from surveillance rounds, questionnaires, and review by the Leadership will provide the basis for evaluation.
 - ii. The annual evaluation will be forwarded to the Leadership Team. The quarterly activity summary will be submitted to the Leadership Team.
- b. Performance Standards related to this plan are measured and assessed on an ongoing basis and reported on a minimum of a quarterly basis to the Leadership.

PERFORMANCE IMPROVEMENT / INFORMATION COLLECTION AND EVALUATION SYSTEM (ICES)

- 1. The Security Management Plan is established, supported and maintained based on measurement, assessment and improvement activities.
 - a. This includes but is not limited to the Information Collection and Evaluation Systems (ICES).
 - b. The information that is evaluated, acted upon and distributed includes reports of utility system problems and/or failures, incident reporting, training, education and employee knowledge.
- 2. The Safety Officer and/or designee collects data and actions taken because of other organization-wide measurement and assessment functions such as Infection Control and Risk Management.

PERFORMANCE STANDARDS

- 1. 100% of employees will wear name badges for identification.
- 2. 90% of all employees will be able to verbalize where incident reports are kept.
- 3. 90% of staff will be able to verbalize what to do if confidentiality is breached.

Inspections and Investigations

Jones Wellness Center program has systems in place for inspections and investigations of Health and Safety matters.

Policy:

1. Jones Wellness Center has developed a prevention activity, which is systematic and used in a way to minimize physical hazards of Jones Wellness Center environment. Jones Wellness Center feels that the best way to eliminate hazards is through a plan of self-inspection.
2. Specific employees have been assigned to complete/conduct regularly scheduled self-inspection of the office. An inspection checklist is utilized for the completion of this task. Other sources which can be utilized for both inspections and investigations include:
 - a. Any maintenance request submitted
 - b. Employee suggestions
 - c. Client suggestions
 - d. Previous accident experiences
3. All findings of monthly self-inspection will be reviewed by:
 - a. The Founder
 - b. The Property Manager if needed
 - c. Other designated Organization staff members if needed
4. All issues identified will be corrected and the corrections will be noted on the form and become part of Jones Wellness Center's QA data.

SMOKING ENVIRONMENT

1. Consistent with applicable laws, Jones Wellness Center abides by the law of no smoking in any client residence.
2. There is also no smoking or use of any type of tobacco products (including smokeless) allowed inside Jones Wellness Center. Tobacco products of any kind will not be sold on Jones Wellness Center premises.
 - a. Tobacco products may include but are not limited to:
 - i. Cigarettes
 - ii. Cigars
 - iii. Chewing Tobacco
 - iv. Snuff
 - v. Electronic Cigarettes/Vapes
 - b. Smoking areas have been designated on the outside areas of the offices for those staff, clients or visitors who desire to smoke.
 - c. Any type of smoking product or smokeless tobacco product cannot be used during any scheduled inside or outdoor group.

RISK MANAGEMENT STANDARDS

1. Jones Wellness Center addresses Risk Management Standards for the safety of all employees, clients and visitors.
2. **Jones Wellness Center will:**
 - a. Provide a safe and healthy workplace and treatment center for the clients served and visitors to the program.
 - b. Complies with safety and health standards which includes Universal Precautions, Infection Prevention and Control, Communicable Diseases, Internal and External Emergencies, Transportation and Hazardous Materials.
 - c. Provide training addressing all Risk Management Standards.
 - d. Document all accidents/incidents on an Incident Report Form.
 - e. Record all incidents on the QA data for analysis and trends.
 - f. Identify actions for improvement and report those improvements in the monthly and annual QA.
3. **Employees will:**
 - a. Follow the Risk Management Standards and all safety and health rules
 - b. Report hazardous conditions to a supervisor
 - c. Report any job-related injuries or illnesses to their supervisor and properly seek treatment
 - d. Read all materials pertaining to Risk Management Health and Safety and participate in all scheduled trainings
4. **Methods of Compliance with Universal Precautions**

- a. Universal precautions shall be observed to prevent contact with body fluids or other potentially infectious materials.
- b. Follow the frequent handwashing to eliminate germs or the likely spreading of germs or other potentially infectious material.
- c. Food and drink shall not be kept in refrigerators, freezers, shelves, cabinets or other counter tops where potentially infectious material are kept, and handling of such materials shall be performed in such a manner to minimize splashing, spraying, spattering, and generation of droplets of these substances.
- d. Gloves shall be worn when it can be reasonably anticipated that the employee may have hand contact with a body fluid or other potentially infectious material. These gloves shall be used once only and shall be replaced as soon as practical when contaminated, torn, punctured, or when their ability to function as a barrier is compromised.

5. Regulated Waste

- a. Contaminated sharps shall be discarded immediately in biohazard containers that are:
 - i. Closable
 - ii. puncture resistant
 - iii. leak proof on side and bottom
- b. The container shall be:
 - i. easily accessible to personnel during work
 - ii. replaced routinely and not allowed to overfill

Communicable Diseases

- 1. Jones Wellness Center shall maintain infection control information for prevention and control of blood borne pathogens, including HIV/AIDS, Hepatitis B, other blood borne diseases as appropriate, Tuberculosis, and other communicable diseases.
- 2. All employees will be trained regarding HIV/AIDS and other blood borne pathogens on an annual basis.

Policy:

1. ACQUIRED IMMUNE DEFICIENCY SYNDROME (AIDS)

- a. If a client enters the program who has not requested testing during the initial phase of treatment and is requesting testing after admission, Jones Wellness Center utilizes the services of a community resource to provide HIV antibody testing.
- b. Clients and staff (if requested) have the option of this service to be provided with both education and confidential testing.
 - i. In addition, a risk assessment is available and confidential appropriate counseling provided when results are obtained.
- c. Education regarding AIDS is offered quarterly by the clinical staff of Jones Wellness Center.
 - i. Education is available to both staff and clients.
- d. It is Jones Wellness Center's policy that all staff wear gloves when handling any bodily fluid.
 - i. Should any staff member be stuck with a needle or sharp object with any type of bodily fluid, they have the right to request testing and any other follow-up medical procedures initiated and completed to reduce the risk of infection.

2. TUBERCULOSIS TESTING

- a. Recent studies by DHHS/Centers for Disease Control indicate clients and staff of mental health centers are at higher risk of becoming infected with TB.
- b. Therefore, prevention is a priority health issues at Jones Wellness Center program.
- c. All Jones Wellness Center staff are encouraged to have a Tuberculosis Skin Test and have the testing done on an annual basis.
 - i. If the results are positive, the employee must provide evidence that he/she has completed a recommended course of preventive or curative treatment as determined by their physician.

3. ILLNESS OR INJURY ON THE JOB

- a. Employees who become ill on the job or suffer any work-related injury, no matter how minor, must report immediately to their supervisor.
 - i. The supervisor will ensure the recording of the incident and assure that proper treatment has been obtained.

- ii. If neither of these individuals is available, the employee should report to any leadership staff on duty at the time.

4. SAFETY CONSIDERATIONS

- a. Safe work conditions are of primary importance in a treatment program setting.
 - i. Each employee is oriented on the safety precautions needed for the job responsibilities.
 - ii. All treatment programs are expected to be places of safety.
 - iii. Safety is essential to good client care, employee welfare and morale, and to good public relations.
 - iv. Therefore, the fundamental purpose of the program is to motivate all staff to be continually aware of basic safety practices and to apply them in their work activity.

SAFETY PROGRAM

Policy:

- 1. Jones Wellness Center leadership staff guides the overall safety program. Each employee is expected to cooperate fully with the safety guidelines and procedures by:
 - a. Thinking in terms of a safe environment
 - b. Reporting any defective equipment and unsafe conditions
 - c. Handling equipment safely; avoiding electrical devices when hands are wet
 - d. Keeping inflammable material away from open flame
 - e. Using proper methods when lifting and asking for assistance when necessary
 - f. Not attempting to do jobs for which one is not qualified or trained to do
 - g. Being safety conscious about everything relating to them, the clients and their job
- 2. **CHEMICAL HAZARDS AND TOXIC SUBSTANCES**
 - a. To protect employees from the harmful effects of possible exposure to chemical hazards, Jones Wellness Center will utilize specific cabinets to store any chemicals, which could be identified as a potential hazard.
 - b. This includes cleaning supplies which are stored in a specific area within the office.
 - c. Jones Wellness Center will secure all toxic substances for the safety, security and welfare of the staff and the clients of the program.
- 3. **FIRE AND DISASTER PLAN**
 - a. Jones Wellness Center has a detailed safety plan covering fires and other internal and external disasters.
 - b. Each employee is required to read all safety plans and clients are educated and trained on the internal and external safety plans.
 - c. Each staff member has the responsibility to become familiar with the specific procedure for Jones Wellness Center.
- 4. **SECURITY**
 - a. All employees are requested to cooperate in preventing vandalism and theft.
 - b. Employees can also help by observing the rules and regulations about the proper securing of Jones Wellness Center property and reporting any suspicious persons or circumstances.
 - c. All staff are required to have passwords on their computers and to secure the buildings when not in use.
- 5. **FIREARMS AND WEAPONS**
 - a. Firearms or weapons of any kind are not permitted on Jones Wellness Center property.
 - b. No employee is permitted to have any type of concealed weapon on their person or stored in their vehicles.
- 6. **THEFT**
 - a. Employees are strongly advised not to take excessive amounts of money or valuables to work.
 - b. All employees are responsible for their personal possessions while on any property belonging to or leased by Jones Wellness Center.
- 7. **REMOVING or DESTROYING ITEMS of JONES WELLNESS CENTER**
 - a. All property belonging to Jones Wellness Center program cannot be removed from the premises for personal use (electronic equipment, educational materials, policy and procedure manuals, clients or staff confidential information).

- i. All information entered, stored and secured on Jones Wellness Center's computers (network, electronic records, Microsoft documents, etc.) is the property of Jones Wellness Center.
- b. No staff member has the authority to destroy **ANY** Organization information.
 - i. All client information is protected under both Federal and State confidentiality laws and is legal documentation.

8. BUILDING SECURITY

- a. Employees shall cooperate in building security practices by:
 - i. Turning off the lights, closing all doors
 - ii. Locking all doors at the end of each day
 - iii. Activate an alarm if present; lock the office doors.
 - iv. All keys to Jones Wellness Center offices, file cabinets, desks, etc. must be returned to Jones Wellness Center's Founder upon termination or resignation of employment.

VIOLENCE IN THE WORKPLACE PLAN

POLICY:

1. Jones Wellness Center is committed to preventing any type of violence in the workplace.
 - a. All staff are responsible for implementing and maintaining a workplace that is free from harm.
 - b. Every employee is responsible for reading, understanding and seeking guidance with questions with Jones Wellness Center's policy and procedure on Violence in the Workplace.
 - c. Employees are responsible for providing a safe and secure environment for each other, our clients and any visitors.
 - d. All clients will be observed, and behavior will be assessed at time of intake to determine their potential for aggressive behavior.
 - e. Jones Wellness Center **does not** use any type of seclusion or restraints with any client.
 - f. **Interventions:** If a person becomes threatening or aggressive the following interventions will occur:
 - i. If a client is observed as becoming agitated, the client will be separated (via physical space) from other clients.
 - ii. A staff member will engage with the client to observe and understand what the client is experiencing.
 - iii. If the behaviors have escalated beyond a level where a safe verbal intervention can be accomplished, the local authorities will be notified via a 911 Emergency Response call.
 - iv. In some situations (harm to self or others), the client might be assessed for involuntary treatment by a state licensed crisis responder.
(<https://www.hhs.texas.gov/services/mental-health-substance-use/mental-health-substance-use-resources/find-your-local-mental-health-or-behavioral-health-authority>)

2. TRAINING SCHEDULE

- a. Jones Wellness Center trains staff on non-violent interventions initially by providing material for self-review upon hire and then per Jones Wellness Center's training schedule.
- b. The training materials are always available to all staff and located in the office of the Founder.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.01.01.01, EP 7
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Internal and External Emergency and Fire Safety Plans

INTERNAL AND EXTERNAL EMERGENCY & FIRE SAFETY PLANS

Jones Wellness Center has both internal and external emergency plans for the safety and security of the staff and clients.

1. Fires

- a. An annual review will take place by the City Fire Marshalls to ensure safety at the office(s). The report is maintained by the Founder in the Risk Management and Safety Manual.
- b. Fire drills are conducted at both the administrative and clinical offices. The time/shift will not be the same and drills are conducted by an assigned staff member of Jones Wellness Center. Response times for evacuation are documented on the report forms and submitted to the Founder.
- c. Quality assurance addresses the status of all Health and Safety issues and staff members are informed via scheduled meetings.
- d. Fire evacuation plans are posted in both the administrative and clinical offices.
- e. Fire extinguishers are in each building and training takes place with both staff and clients to address the use of the fire extinguishers. The acronyms P.A.S.S. are identified (Pull, Aim, Squeeze and Sweep) as a reminder in the use of a fire extinguisher. This acronym is located next to each fire extinguisher.
- f. Activities related to fire protection are part of the training.
- g. A monthly maintenance report is completed by the Founder which checks:
 - i. Smoke detectors
 - ii. Fire extinguishers
 - iii. Safety factors (external debris, uneven walkways, lighting etc.)
 - iv. Safety factors (internal extension cords, working lights, air conditioners etc.)

2. Fire Plan

- a. In the event of a fire emergency, staff will be able to function in such a manner to protect the clients and to summon help from the local 911 Emergency Fire Department
 - i. **When notified of a fire (Fire Alarm going off or the Smell of Smoke):**
 1. Call Fire Rescue 911 Immediately to report the location of the emergency.
 2. Remove all clients from the area and notify all staff. Remain calm-Do Not Panic.
 3. Contact the Founder.
 4. Close all doors.
 5. Relocate all clients to the designated safe area.
 6. If the fire is small and can be extinguished, use one of the fire extinguishers in the area, which are in working order and checked annually.
 7. If there is no fire, inform the emergency staff that there could be the possibility of a carbon monoxide emergency due to the alarm sounding.

3. Fire Safety Information

a. Fire Extinguishers

- i. In case of fire, Jones Wellness Center has fire extinguishers located throughout the office. The Property Manager is responsible for maintenance of fire equipment to prevent and control ignitions or fires.
- ii. Jones Wellness Center shall control accumulations of flammable and combustible materials so that they do not contribute to a fire emergency.
- iii. Jones Wellness Center will conduct emergency evacuation drills on a scheduled basis.

EMERGENCY PREPAREDNESS PLAN

2. In the event of any disaster (including but not limited to severe storms, floods, tornadoes, fire, hurricanes, prolonged loss of heat, light, water, air condition), interim arrangements to evacuate the premises is determined by the Leadership staff and the decision will be based on what plan will utilized to best meet the physical needs of clients, staff and visitors.
 - i. Jones Wellness Center utilizes the leadership staff, clinical staff and paraprofessional staff in the event of a disaster.
 1. The Founder is the first point of contact in the event of a disaster.
 2. In case the Founder being unavailable, the Founder is the second in command.
 - ii. In the event of an unexpected disaster, employees on the job will observe the current situation and will immediately contact the Founder for directions.
 1. The staff will then arrange and organize the best defense for the safety and security off all individuals on the property, which includes the office.
 - iii. Jones Wellness Center staff have been trained and oriented regarding the exact location, contents, and use of fire extinguishers and first aid supplies and equipment.
 1. Fire extinguishers are in plain sight throughout each building.
 2. First aid supplies are in the wall in group room. The First Aid kit location is clearly marked for easy access.
 - iv. Staff are trained in CPR/First Aid and can handle minor emergencies.
 - v. There will be an annual fire and safety inspection completed by the local municipality.
 1. The inspection will be completed annually.
 2. Any deficiencies will be noted, and a correction of deficiency will be made.
 - vi. Jones Wellness Center has fire and smoke detectors.
 1. The smoke detectors have visual signals that are suitable for the hearing-impaired to visually observe batteries in need of replacement.
 2. All equipment is checked monthly by the Founder.
 - vii. Jones Wellness Center has posted emergency evacuation routes in the office.
 - viii. Jones Wellness Center has emergency lighting via flashlights and emergency exit signs of Jones Wellness Center that are powered by an emergency power supply.
 - ix. Jones Wellness Center has flashlights in designated areas to provide lighting to areas as needed and to be utilized by both staff and clients in the event of a power outage or emergency.
 - x. Jones Wellness Center grounds are maintained appropriately to provide a safe environment for clients, staff and visitors.
 - xi. Jones Wellness Center is designed for staff and clients to have easy access to treatment areas, walkways, and areas to facilitate foot travel for all individuals.
 1. Individuals have access to drinking water with cup dispensers, toilets and hand washing facilities.
 - xii. Jones Wellness Center keeps all toxic and/or flammable substances in a secured area away from clients.
 - xiii. The program created a system for the protection of client records in the event of a disaster.
 1. The following is the plan used for the protection and preservation of records in case of a disaster.
 2. All records are electronic and back-up in the cloud based system. If paper copies are given, they are uploaded electronically and paper copies are returned or shredded.
 3. All electronic information is stored via Cloud backup daily.
 - xiv. Emergency evacuation routes are posted in administrative offices and the clinical area.
 1. It is the responsibility of Jones Wellness Center's Founder to ensure all clients and visitors are evacuated safely, and the 911 Emergency Response is notified.

4. Bomb Threats/Violent or Other Threatening Situations

- a. In the event of a bomb threat or other threatening situation (such as possession of firearms or explosives) the staff member receiving the threat will initiate an immediate evacuation to clear all buildings and call 911 Emergency to report the situation.

- i. The Founder will be contacted immediately, or the designee assigned if the Founder is not available at the time.
- ii. All clients and staff members will leave the building and assemble in the designated evacuation area.
- iii. Staff present will ensure that everyone has evacuated by completing both a quick walk through (when personal safety is not at risk) and/or conducting a head count to ensure that all clients and/or staff members are safe and accounted for.
- iv. Both staff and clients will follow the directions of the 911 Emergency Fire and Rescue staff when they arrive on the scene.
- b. In the event of a hostage or other violent or potentially violent situation, the staff member becoming aware of the situation will immediately call 911 Emergency Response for help and inform all other staff members who are on the premises.
 - i. If possible, both staff and clients will be moved to another area for safety and security.
 - ii. All staff are encouraged to seek safety and not try and negotiate in a potentially violent situation.
 - iii. 911 Emergency Response members are trained for these situations and will take charge upon arrival.
 - iv. The staff member making the 911 Emergency call will provide all information available (if known about the individual who is presenting a threatening situation).

External Emergencies Contact Person

In the event of a disaster resulting in the closure of Jones Wellness Center, one administrative staff member (located on Leadership On Call Sheet) will be identified as the contact for each staff member to contact, which then initiates the Emergency Telephone Tree. Leadership On Call Sheet will be updated monthly and have at least three contacts in order to call until a leader is contacted in case of emergency.

Emergency Telephone Tree

- a. In the event of a closure due to a disaster the identified staff member will initiate the use of the telephone tree by contacting the Founder. An effort will be made to contact all agency personnel to transmit information regarding the emergency and the plans of action. If a staff person is unable to reach their designated contact, then they are to proceed to the next staff person listed on the emergency phone tree until contact is made.
- b. All personnel listed on the telephone tree will be given a copy of the emergency telephone tree. Phone numbers are highly confidential and are not to be shared with anyone who is not an employee of Jones Wellness Center.
- c. The emergency phone tree may be used in the case of any emergency including but not limited to fire, hurricane, tornado, thunderstorms, ice storm, flood, and any extreme weather conditions.

Closure Due to a Natural Disaster or Other Emergency

Jones Wellness Center's goal is to provide services for clients but when a natural disaster or emergency arises that causes the inability to provide those services at the program the following will take place:

1. The staff will inform the Founder by giving the circumstances and possible time or date of the program being closed.
2. The Founder and/or designee will call and advise any Outpatient clients of the closure and when services might start again onsite.
3. All clinical services will resume when the program offices and administrative offices are safe or a new temporary facility is found (if it is going to be a long-term closure).
4. In the event of a natural disaster, Jones Wellness Center will follow through with plans when either a Warning is issued or a Watch is in effect by the National Weather Service. If a Warning is issued, Jones Wellness Center will initiate the "Get Ready" mode of operation. If the National Weather Service issues a "Watch", then Jones Wellness Center will plan to evacuate if/as directed to do so. This will be activated by the Safety Officer.
5. The Founder will contact the Medical Director.
 - a. The Medical Director will provide direction concerning client medications, if needed.
 - b. The Founder will assign:
 - i. One staff member will be responsible for the security of client files.

- ii. One or more staff member(s) will be responsible for the transportation of clients to their destination.
- iii. One staff member will be responsible for making sure all agency cars and vans are filled with gas daily.
- iv. One staff member will make sure emergency equipment is available (flashlights, batteries, emergency radio and generator (all if needed).
- c. The Texas Health and Human Services will be notified.
- d. Joint Commission representatives will be notified.
- e. All client emergency contacts will be notified by a clinical staff member.

6. Once the emergency is over and all Jones Wellness Center has been given clearance to return to Jones Wellness Center, clients will be advised and the administrative and clinical office is reopened. All client emergency contacts will be notified of their safe return by a clinical staff member.

Temporary Shelter

- 1. Jones Wellness Center is committed to providing temporary shelter, if necessary, to our clients and staff in the event of severe emergency conditions (i.e. severe storms, floods, tornadoes, fire, hurricanes) that impact the integrity of Jones Wellness Center, it will be the responsibility of the Founder to establish temporary shelter for clients and staff within the area, once a severe emergency has been identified by TV, radio and/or the state. In addition, the American Red Cross will also identify temporary shelters within the community (generally within 2-4 hours of a disaster or 2-4 days of required evacuation due to a natural disaster).
 - a. The Founder or the designated staff member is responsible for making arrangements with an identified emergency shelter in the area for severe emergency conditions.
 - b. The American Red Cross has identified shelters or other appropriate local community organizations to temporarily shelter clients and staff if Jones Wellness Center facilities are unsafe for occupancy.
 - c. Agreements between the American Red Cross and Jones Wellness Center are between the representative of the American Red Cross and the agency's Founder.
 - d. When there is an emergency that requires clients and staff members to evacuate Jones Wellness Center to a temporary shelter, Jones Wellness Center will implement the standard procedure for emergencies then evacuate to the temporary site.
 - e. Jones Wellness Center staff members will accompany clients to the temporary shelter and remain with the clients until the American Red Cross has established it is safe to return to the facility and the emergency no longer requires and/or meets evacuation standards.
 - f. The Texas Health and Human Services and the Joint Commission representative shall be informed immediately in the event of an evacuation to a temporary shelter due to an internal or external emergency and will be notified when the emergency evacuation status has ended.
 - g. All activity arising from a temporary evacuation will be documented utilizing the Incident Report which is available on the website of both HHS and Joint Commission.
 - h. The program staff will convene at the earliest possible time and will explore: the process of the evacuation, the positive plans, issues that arose, adjustments needed and corrective actions to be addressed and implemented as necessary.

Emergency Response:

- 1. All incoming casualties will be treated according to the external disaster plan. Casualties resulting from Jones Wellness Center property damage will be treated according to the internal disaster plan. In the event Jones Wellness Center is damaged, a partial or total evacuation will be determined by the Founder.
- 2. Refer to Jones Wellness Center Emergency Evacuation/Disaster Plan.
- 3. Each department will maintain the on-call system in the event relief staff are unable to report to their designated shifts.

Responsibilities:

- 1. The Safety Officer will activate the Emergency Management Plan.
 - a. After damage assessment reports have been received from all departments, the Safety Officer with the potential input from emergency responders and/or Leadership as needed will determine whether a partial or total evacuation of Jones Wellness Center is necessary.

- b. Check that all communications systems are functioning. If systems are down, initiate actions to restore service or use other resources, i.e., walkie-talkies, messengers.
- c. Upon assessment of the emergency situation, the Safety Officer will delegate responsibilities to Jones Wellness Center personnel present and notify Leadership On Call (if Leadership is not present).
- d. The Safety Officer will coordinate efforts with local agencies.
- e. The Safety Officer will delegate authority to department directors to utilize their resources and personnel in response to the emergency. Respond with mutual aid as needed.
- f. Personnel will provide information on community resources to local clients in need of assistance in obtaining food, lodging, heat or other necessities.
- g. Jones Wellness Center personnel will provide status reports to the Safety Officer.

The following will outline specifics per Jones Wellness Center HVA findings:

TORNADO AND STORM RESPONSE PLAN

1. Mitigation:

- a. To prepare for the event of a severe thunderstorm or tornado. A tornado is a powerful, violent storm of short duration formed of winds rotating at very high speeds.
 - i. These storms start out as a funnel-shaped cloud which drops to the ground.
 - ii. A tornado can destroy buildings, uproot trees, and hurl objects, animals and people great distances.
 - iii. When a tornado hits a building, the high winds can tear the building apart, collapsing walls and shattering windows.
 - iv. The debris caused by this destruction is launched through the air causing even more destruction.
 - v. Tornadoes occur in many parts of the world including all fifty states.
 - vi. They can occur in any season, but are most prominent during the months of April, May and June.
 - vii. Tornadoes occur with the lowest frequency during December and January.
 - viii. They can occur any time of day or night but are most likely during the warmest hours of the day.

2. Warnings:

- a. The following types of announcements are issued by the National Severe Forecast Center to alert communities of impending severe weather.
 - i. This information is communicated to local offices of the National Weather Service and distributed from there to the community through radio and television stations.
 - ii. Law enforcement and emergency forces are also alerted.
- b. **Tornado Watch:** A TORNADO WATCH is issued to areas potentially threatened by a tornado.
 - i. The announcement specifies the area covered by the watch and the time period during which the probability of a tornado is expected to be dangerously high.
- c. **Tornado Warning:** A TORNADO WARNING is issued when a funnel cloud or tornado is actually spotted in the area or is indicated by radar.
 - i. The announcement indicates the location of the tornado at the time it is detected, the direction it is traveling, the area through which it is expected to travel and the time period during which the tornado is expected to move through the area being warned.
- d. Note: All watches and warnings end at the time indicated unless extended by the National Weather Service.

3. Preparedness:

- a. Jones Wellness Center has established emergency back-up communication to address power outages which would render landline phones inoperable.
- b. Cell phones are available at all locations: Emergency phone list is located in each facility's operational binder.
- c. Jones Wellness Center has a designated tornado shelter location that is listed on the evacuation maps located throughout the building.

4. Response:

- a. The Safety Officer is responsible for activating the response and delegating tasks as described below.
- b. The following general safety guidelines is to be utilized:
 - i. All personnel will review their severe thunderstorm/tornado disaster plans and evacuation plan.
 - ii. Close shades or drapes over all windows.
- c. Remove all items not essential for patient care and place in drawers or lockers.
- d. Secure non-patient care areas by removing items and placing them in lockers.
- e. Advise and reassure patients that the above precautions are taken whenever there is a severe weather warning.
- f. Remove loose objects from the desk and countertops and windowsills.
- g. Secure all wheeled carts in your work area.
- h. If a tornado warning is issued, the following procedures will be instituted:
 - i. Personnel will begin to move clients to designated safe areas. This usually means rooms without windows and/ or rooms that are securely within the facility. (Refer to posted maps for safe areas.)
 - ii. Maintain appropriate space in corridors for personnel to move safely among patients.
 - iii. Close all doors.

- iv. Staff will assist patients in lying flat or crouching down with their head covered. All personnel will also assume the prone or crouching positions and keep their heads covered.
- i. All personnel will assist in restoring their work areas to normal operations.
- j. Personnel will assess their department for damage or safety hazards and report them to the supervisor.
- k. After offices/group rooms have been evaluated for damage and safety hazards, patients may be allowed to move freely throughout the facility.

5. During a Tornado

- a. Remain calm. Think through the consequences of any action you take. Try to remain calm and reassure others. Focus on SAFETY of staff and clients.
- b. If indoors, watch for falling plaster, light fixtures and other objects. Watch out for high bookcases, cabinets, shelves, and other furniture which might slide, topple or be blown from tornado winds. Stay away from windows and doors. Seek shelter in a secure room without windows.
- c. If in danger, get under a table or desk, in a corner away from windows, or in a strong doorway. Do not run outside, that could be more dangerous than remaining inside.
- d. If you must leave the building, choose your exit as carefully as possible. Our primary concern is the safety, security, welfare, and care of the clients we serve and those who are employed with our agency.

6. Recovery:

- a. The Safety Officer will activate recovery efforts.
- b. The Safety Officer are to notify the staff when services are restored and document the event through an Emergency Disaster Drill. The Safety Officer will complete Incident Reports and Maintenance Requests as needed.
- c. The following actions will be taken post-tornado when the “All Clear” is given:
 - i. Check for injuries to clients and staff. Render first aid assistance if required.
 - ii. Try to contact 911 Emergency Response immediately.
 - 1. If they cannot immediately respond, check for fires or fire hazards – spills of flammable or combustible liquids, or leaks of flammable gasses.
- d. If possible (do not put anyone at risk) check utility lines and equipment for damage.
 - i. If gas leaks exist, shut off gas valves.
 - ii. Shut off electrical power if there is damage to wiring.
 - iii. Report damage to Safety Officer.
 - iv. Do not use matches, lighters, or open flame appliances until you are sure no gas leaks exist.
 - v. Do not operate electrical switches or appliances if gas leaks are suspected.
 - vi. This creates sparks, which can ignite gas from broken lines.
- e. See to it that spilled chemicals or other potentially harmful materials are marked off and no one goes near the area until 911 Emergency Response arrives.
- f. Check to see that sewage lines are intact before permitting continued flushing of toilets.
- g. All personnel will assist in restoring their work areas to normal operations.
- h. Personnel will assess their department for damage or safety hazards and report them to the supervisor.
- i. After offices/group rooms have been evaluated for damage and safety hazards, patients may be allowed to move freely throughout the facility.

SNOWFALL, BLIZZARD and ICE STORM RESPONSE PLAN

1. Mitigation:

- a. To prepare for the event of snowfall, blizzard and ice storm.
- b. Accumulation of snow and ice can result in road closures or blockages, which can result in isolation for the outside worlds including but not limited to basic utilities and food sources.
- c. During severe storms, heavy snow and/or ice burden can cause roofs to collapse, knock down trees and powerlines, resulting in outages.
- d. They occur most regularly during colder months but can happen outside those seasons.

2. Warnings:

- a. The National and Regional Weather Service issues the following types of warnings and watches associated with winter storms.
 - i. **Winter Storm Watch** A Winter Storm Watch is issued when there is the potential for significant and hazardous winter weather within 48 hours.
 1. It does not mean that significant and hazardous winter weather will occur, it only means it is possible.
 - ii. **Winter Storm Warning:** Significant and hazardous winter weather is defined as a combination of:
 1. 5 inches or more of snow/sleet within a 12-hour period or 7 inches or more of snow/sleet within a 24-hour period AND/OR
 2. Enough ice accumulation to cause damage to trees or powerlines; and/or
 3. A life threatening or damaging combination of snow and/or ice accumulation with wind.
 - iii. **Blizzard Warning:** Snow and strong winds (gusts up to 35 mph or great) will combine to produce a blinding snow (near zero visibility), deep drifts, and life threatening wind chill; expected to occur for three hours or longer.

3. Preparedness:

- a. Jones Wellness Center has an established three days of emergency supplies if necessary.
- b. Jones Wellness Center will regularly check supplies for maintenance and expiration to ensure that supplies are usable when/if needed.
- c. Jones Wellness Center has snow/ice supplies located in Supply Closet (i.e. sandbags, shovel, road salt or ice melt).
- d. Jones Wellness Center has established emergency back-up communication to address power outages which would render landline phones inoperable.
- e. Foliage and debris will be regularly maintained away from buildings to prevent any hazards in such conditions.
- f. Cell phones are available at all locations: Emergency phone list is located in the facility's operational binder in the Employee Cabinet.
- g. Warming centers can be located locally if there is a need for evacuation due to lack of heat.
- h. In case of personnel not being able to leave the facility, the Safety Officer will coordinate efforts to supply emergency shelter for staff that may be forced to stay onsite.

4. Response:

- a. The Safety Officer is responsible for activating the response and delegating tasks as described below.
- b. The following general safety guidelines is to be utilized:
 - i. Safety Officer will stay informed by listening to local news, weather channel and national and regional weather service for situation developments.
 - ii. All personnel will review their disaster plans and evacuation plan.
 - iii. Stay indoors whenever possible.
 - iv. Staff will maintain walkways in and out of the facility to ensure safe entrances and exits. (This may be with shoveling, ice melt, etc.)
 - v. Ensure backup supplies are ready and available if needed.
 1. If backup supplies are utilized, staff will inform the utility company about any outages immediately, ensuring that they are aware of the outage.
 2. Never use generators indoors.
 3. Use individual heavy-duty, outdoor-rated cords to plug in other appliances.
 4. Safety Officer will inform Leader On Call of developments.
 - vi. Advise and reassure patients that the above precautions are taken whenever there is a severe weather warning.

5. Recovery:

- a. The Safety Officer will activate recovery efforts.
- b. The Safety Officer will coordinate staff to clear away snow/ice safely, ensuring staff do not overexert themselves and ensure that people have good footing.
- c. The Safety Officer will assess for any damage and complete Maintenance Requests and/or Incident Reports as needed.
- d. The Safety Officer will notify the staff when services will and document the event through an Emergency Disaster Drill. The Safety Officer will complete Incident Reports and Maintenance Requests as needed.

FLOOD (DAM INDUDATION) RESPONSE PLAN

1. Mitigation:

- a. Flooding is a temporary overflow of water onto land that is normally dry. Floods are the most common disaster in the United States. Failing to evacuate flooded areas or entering flood waters can lead to injury or death. The flood based on the local dam could be catastrophic. Large flooding of waters can also cause debris flows. Floods may:
 - i. Result from rain, snow, coastal storms, storm surges and overflows of dams and other water systems.
 - ii. Develop slowly or quickly. Flash floods can come with no warning.
 - iii. Cause outages, disrupt transportation, damage buildings and create landslides.

2. WARNINGS:

- a. Warnings, Advisories, Watches and Information Statements - The National Weather Service issues the following associated with floods:
 - i. **Flash Flood Warning: Take Action** - A Flash Flood Warning is issued when a flash flood is imminent or occurring.
 - 1. If you are in a flood prone area, move immediately to higher ground.
 - 2. A flash flood is a sudden violent flood that can take from minutes to hours to develop.
 - 3. It is even possible to experience a flash flood in areas not immediately receiving rain.
 - ii. **Flood Warning: Take Action** – A Flood Warning is issued when the hazardous weather event is imminent or already happening.
 - 1. A Flood Warning is issued if flooding is imminent or occurring.
 - iii. **Flood Advisory: Be Aware** – A Flood Advisory is issued when a specific weather event that is forecast to occur may become a nuisance.
 - 1. A Flood Advisory is issued when flooding is not expected to be bad enough to issue a warning.
 - 2. However, it may cause significant inconvenience, and if caution is not exercised, it could lead to situations that may threaten life and/or property.
 - iv. **Flood Watch: Be Prepared** – A Flood Watch is issued when conditions are favorable for a specific hazardous weather event to occur.
 - 1. A Flood Watch is issued when conditions are favorable for flooding.
 - 2. It does not mean flooding will occur, but it is possible.

3. Preparedness:

- a. Jones Wellness Center has signed up for the community warning system as well as has access to the Emergency alert system (EAS) and National Oceanic and Atmospheric Administration (NOAA) Weather Radio to provide emergency alerts.
 - i. According to the [FEMA Flood Map](#), the agency is not part of a flood zone.
 - ii. A copy of the location community evacuation route is included in this plan, which maps out how to evacuate from the facility.
- b. Jones Wellness Center has an established three days of emergency supplies if necessary.
 - i. Jones Wellness Center will regularly check supplies for maintenance and expiration to ensure that supplies are usable when/if needed.
- c. Jones Wellness Center has established emergency back-up communication to address power outages which would render landline phones inoperable.
- d. Foliage and debris will be regularly maintained away from buildings to prevent any hazards in such conditions.
 - i. The grounds are regularly monitored for any side of potential hazards each month with the facility inspection.
- e. Cell phones are available at all locations:
 - i. An emergency phone list is in each facility's operational binder.
- f. In case of personnel not being able to leave the facility, the Safety Officer will coordinate efforts to supply emergency shelter for staff that may be forced to stay onsite.

4. Response:

- a. The Safety Officer is responsible for activating the response and delegating tasks as described below.
 - i. Monitor warning systems and follow alerts accordingly.
- b. Jones Wellness Center will stay in place unless officials instruct otherwise.
- c. Jones Wellness Center will leave immediately if told to do so following evacuation routes.
- d. Jones Wellness Center will request assistance if transportation aid is required and follow Red Cross and/or emergency personnel instructions to do so.
- e. If evacuation is necessary, contact the Red Cross or text SHELTER + Zip code to 43362 for the nearest shelter in the area.
- f. The following general safety guidelines is to be utilized:
 - i. Safety Officer will stay informed by listening to local news, weather channel and national and regional weather service for situation developments.
 - ii. Personnel will stay alert for any warning signs.
 - iii. Do not walk, swim or drive through flood waters.
 - iv. Remember, just six inches of moving water can knock you down, and one foot of moving water can sweep your vehicle away.
 - v. Avoid river valleys and low-lying areas during times of danger.
 - vi. If you are near a stream or channel, be alert for any sudden increase or decrease in water flow or water that changes from clear to muddy.
 - vii. Get to the highest level if trapped in a building.
 - 1. Only get on the roof if it is necessary and once there, signal for help.
 - 2. Do not climb into a closed attic to avoid getting trapped by rising floodwater.
 - viii. Check for injuries to clients and staff.
 - 1. Render first aid assistance if required.
 - ix. Try to contact 911 Emergency Response immediately.
 - 1. If they cannot immediately respond, check for hazards.
 - x. All personnel will review their disaster plans and evacuation plan.
 - xi. Stay indoors whenever possible.
 - xii. If in water, then grab onto something that floats, such as a raft or tree trunk.
 - xiii. Avoid wading in floodwater, which can contain dangerous debris.
 - 1. Water may be deeper than it appears.
 - xiv. Be aware of the risk of electrocution.
 - 1. Underground or down power lines can electrically charge water.
 - 2. Do not touch electrical equipment if it is wet or you are standing in water.
 - xv. Stay away from damaged buildings, roads or bridges.
 - xvi. Ensure backup supplies are ready and available if needed.
 - 1. If backup supplies are utilized, staff will inform utility company about any outages immediately, ensuring that they are aware of the outage.
 - 2. Never use generators indoors.
 - 3. Use individual heavy-duty, outdoor-rated cords to plug in other appliances.
 - 4. Safety Officer will inform Leader On Call of developments.
 - xvii. Advise and reassure patients that the above precautions are taken whenever there is a severe weather warning.

5. Recovery:

- a. The Safety Officer will activate recovery efforts.
- b. The Safety Officer is to notify the staff when services are restored and document the event through an Emergency Disaster Drill.
 - i. The Safety Officer will complete Incident Reports and Maintenance Requests as needed.
- c. The following actions will be taken post-event when the “All Clear” is given:
 - i. Check for injuries to clients and staff. Render first aid assistance if required.
 - ii. Try to contact 911 Emergency Response immediately. If they cannot immediately respond, check for fires or fire hazards – spills of flammable or combustible liquids, or leaks of flammable gasses.
 - iii. If possible (do not put anyone at risk) check utility lines and equipment for damage.
 - 1. If gas leaks exist, shut off gas valves.

2. Shut off electrical power if there is damage to wiring.
3. Report damage to Safety Officer.
4. Do not use matches, lighters, or open flame appliances until you are sure no gas leaks exist.
5. Do not operate electrical switches or appliances if gas leaks are suspected.
6. This creates sparks, which can ignite gas from broken lines.

- iv. See to it that spilled chemicals or other potentially harmful materials are marked off and no one goes near the area until 911 Emergency Response arrives.
- v. Check to see that sewage lines are intact before permitting continued flushing of toilets.
- vi. Wear heavy work gloves, protective clothing and boots during clean up and use appropriate face coverings or masks if cleaning mold or other debris.
- vii. Be aware that animals may be in the facility after flooding.
- viii. Avoid wading in floodwater, which can be contaminated and contain dangerous debris.
 1. Underground or downed powerlines can also electrically charge the water.
- ix. All personnel will assist in restoring their work areas to normal operations.
- x. Personnel will assess their department for damage or safety hazards and report them to the supervisor.

- d. After offices/group rooms have been evaluated for damage and safety hazards, patients may be allowed to move freely throughout the facility.

HEAT/HUMIDITY RESPONSE PLAN

1. Mitigation:

- a. Extreme heat is a period of high heat and humidity with temperatures above 90 degrees for at least two to three days.
 - i. In extreme heat your body works extra hard to maintain a normal temperature, which can lead to death.
 - ii. Extreme heat is responsible for the highest number of annual deaths among all weather-related hazards.

2. WARNINGS:

- a. Warnings, Advisories, Watches and Information Statements - The National Weather Service issues the following associated with heat:
 - i. **Excessive Heat Warning – Take Action** – An Excessive Heat Warning is issued with 12 hours of the onset of extremely dangerous heat conditions.
 - 1. The general rule of thumb for this Warning is when the maximum heat index temperature is expected to be 105 degrees or higher for at least two days and night time air temperatures will not drop below 75 degrees; however these criteria vary across the country, especially for areas not used to extreme heat conditions.
 - a. If you don't take precautions immediately when conditions are extreme, you may become seriously ill or even die.
 - ii. **Excessive Heat Watches – Be Prepared** – Heat watches are issued when conditions are favorable for an excessive heat event in the next 24 to 72 hours.
 - 1. A Watch is used when the risk of a heat wave has increased but its occurrence and timing is still uncertain.
 - iii. **Heat Advisory: Take Action** – A Heat Advisory is issued within 12 hours of the onset of extremely dangerous heat conditions.
 - 1. The general rule of thumb for this Advisory is when the maximum heat index temperature is expected to be 100 degrees or higher for at least 2 days, and night time air temperature will not drop below 75 degrees; however these criteria vary across the country, especially for areas that are not used to dangerous heat conditions.
 - a. Take precautions to avoid heat illness.
 - b. If you don't take precautions, you may become seriously ill or even die.
 - iv. **Excessive Heat Outlooks – Be Aware** – The outlooks are issued when the potential exists for an excessive heat event in the next three to seven days.
 - 1. An Outlook provides information to those who need considerable lead-time to prepare for the event.

3. Preparedness:

- a. Jones Wellness Center has taken measures to secure regular heating and cooling in the facility.
 - i. Personnel will utilize curtains when possible.
 - ii. Weather-strips are installed on doors and windows.
 - iii. Window reflectors are used to reflect heat back outside.
 - iv. Insulation is used to help keep heat out.
 - v. Ventilation system is set up for regulating heat.
 - vi. Air conditioning is utilized.
- b. Jones Wellness Center has an established three days of emergency supplies if necessary.
 - i. Jones Wellness Center will regularly check supplies for maintenance and expiration to ensure that supplies are usable when/if needed.

4. Response:

- a. The Safety Officer is responsible for activating the response and delegating tasks as described below.
 - i. Monitor warning systems and follow alerts accordingly.
 - ii. Safety Officer will help promote safety guidelines with staff, clients and others in the facility.
 - iii. If evacuation is necessary, local cooling centers can be located by dialing 211.
- iv. The following general safety guidelines is to be utilized:

1. Safety Officer will stay informed by listening to local news, weather channel and national and regional weather service for situation developments.
2. Promote patients to take cool showers or baths.
3. Wear loose, lightweight, light-colored clothing.
4. Minimize time outside if possible.
5. If outside, find shade and protect your face.
6. Drink plenty of fluids to stay hydrated.
7. Avoid high-energy activities or work outdoors.
8. Watch for heat cramps, heat exhaustion and heat stroke.

5. Recovery:

- a. The Safety Officer will activate recovery efforts.
- b. The Safety Officer is to notify the staff when services are restored and document the event through an Emergency Disaster Drill.
 - i. The Safety Officer will complete Incident Reports and Maintenance Requests as needed.

WILDFIRE RESPONSE PLAN

1. Mitigation:

- a. Wildfires are unplanned fires that burn in natural areas like forests, grasslands or prairies. These dangerous fires spread quickly and can devastate not only wildlife and natural areas but also communities.
- b. **WARNINGS:** Warnings, Advisories, Watches and Information Statements - The National Weather Service (NWS) and Houston Fire Department's Emergency Notification System issues the following associated with wildfires:
 - i. **Red Flag Warning: Take Action** – Be extremely careful with open flames.
 - 1. NWS issues a Red Flag Warning, in conjunction with land management agencies, to alert land managers to an ongoing or imminent critical fire weather pattern.
 - 2. NWS issues a Red Flag Warning when fire conditions are ongoing or expected to occur shortly.
 - ii. **Fire Weather Watch: Be Prepared** – A Watch alerts land managers and the public that upcoming weather conditions could result in extensive wildland fire occurrence or extreme fire behavior.
 - 1. A Watch means critical fire weather conditions are possible but not imminent or occurring.
 - iii. **Extreme Fire Behavior** – This alert implies a wildfire likely to rage out of control.
 - 1. It is often hard to predict these fires because they behave erratically, sometimes dangerously.
 - 2. One of more of the following criteria must be met:
 - a. Moving fast: High rate of spread
 - b. Prolific crowning and/or spotting
 - c. Presence of fire whirls
 - d. Strong convection column

2. Preparedness:

- a. Jones Wellness Center has signed up for the community warning system as well as has access to the Emergency alert system (EAS) and Wireless Emergency Alert (WEA).
 - i. A copy of the location community evacuation route is included in this plan, which maps out how to evacuate from the facility.
 - ii. Jones Wellness Center also monitors the [air quality alerts](https://www.airnow.gov/) (<https://www.airnow.gov/>) for safety of air quality.
- b. Jones Wellness Center has an established three days of emergency supplies if necessary.
 - i. Jones Wellness Center will regularly check supplies for maintenance and expiration to ensure that supplies are usable when/if needed.
- c. Jones Wellness Center has established emergency back-up communication to address power outages which would render landline phones inoperable.
- d. Foliage and debris will be regularly maintained away from buildings to prevent any hazards in such conditions.
 - i. The grounds are regularly monitored for any sides of potential hazards each month with the facility inspection.
- e. Cell phones are available at all locations: Emergency phone list is located in the facility's operational binder.
- f. In case of personnel not being able to leave the facility, the Safety Officer will coordinate efforts to supply emergency shelter for staff that may be forced to stay onsite.

3. Response:

- a. The Safety Officer is responsible for activating the response and delegating tasks as described below.
 - i. Monitor warning systems and follow alerts accordingly.
 - ii. Masks will be distributed if air quality is an unhealthy level.
 - iii. Jones Wellness Center will stay in place unless officials instruct otherwise.
- b. Jones Wellness Center will leave immediately if told to do so following evacuation routes.

- c. Jones Wellness Center will request assistance if transportation aid is required and follow Red Cross and/or emergency personnel instructions to do so.
- d. If evacuation is necessary, contact the Red Cross or text SHELTER + Zip code to 43362 for the nearest shelter in the area.

4. Recovery:

- a. The Safety Officer will activate recovery efforts.
- b. The Safety Officer is to notify the staff when services are restored and document the event through an Emergency Disaster Drill. The Safety Officer will complete Incident Reports and Maintenance Requests as needed.
- c. The following actions will be taken post-event when the “All Clear” is given:
 - i. Check for injuries to clients and staff. Render first aid assistance if required.
 - ii. Try to contact 911 Emergency Response immediately. If they cannot immediately respond, check for fires or fire hazards – spills of flammable or combustible liquids, or leaks of flammable gasses.
 - iii. If possible (do not put anyone at risk) check utility lines and equipment for damage. If gas leaks exist, shut off gas valves. Shut off electrical power if there is damage to wiring. Report damage to Safety Officer. Do not use matches, lighters, or open flame appliances until you are sure no gas leaks exist. Do not operate electrical switches or appliances if gas leaks are suspected. This creates sparks, which can ignite gas from broken lines.
 - iv. See to it that spilled chemicals or other potentially harmful materials are marked off and no one goes near the area until 911 Emergency Response arrives.
 - v. Check to see that sewage lines are intact before permitting continued flushing of toilets.
 - vi. Wear heavy work gloves, protective clothing and boots during clean up and use appropriate face coverings or masks if cleaning.
 - vii. Be aware that animals may be in the facility after flooding.
 - viii. Avoid wading in floodwater, which can be contaminated and contain dangerous debris. Underground or downed powerlines can also electrically charge the water.
 - ix. All personnel will assist in restoring their work areas to normal operations.
 - x. Personnel will assess their department for damage or safety hazards and report them to the supervisor.

Facility Safety

- 1. Jones Wellness Center ensures a facility that is safe while providing any service to the clients, visitors and staff members.
- 2. Jones Wellness Center ensures the best possible measures are taken for the safety and protection of all persons within the facility's physical environment (property and buildings, leased or owned).
- 3. Jones Wellness Center policies and procedures shall include, but are not limited to:
 - a. Jones Wellness Center meets the fire and safety regulations, code, and/or statutory requirements of federal, state, and/or local government.
 - b. Jones Wellness Center is inspected by the Houston Fire Marshal on a yearly basis.
 - c. Jones Wellness Center has plans and diagrams posted noting emergency routes, also emergency preparedness plans have been developed to help staff provide effective utilization of resources to best meet the physical needs of clients, visitors, and staff during any disaster (including, but not limited to, severe storms, floods, tornadoes, fire, hurricanes, loss of use, electricity).
 - d. At the first warning of possible high water or flooding, all persons at Jones Wellness Center (clients, visitors, and staff) will evacuate the facility.
 - e. In case of an explosion the same steps as for fire will be followed. All bomb threats should be reported to 911 Emergency Response immediately and the Founder.
 - f. All clients and staff have access to flashlights, which will provide lighting in case of a loss of electricity. Flashlights will be accessible for easy access.
 - g. In case of loss of heat or air conditioning, depending on the condition of the weather (maybe temporary due to electrical “Electrical Power shortages by high use due to the location), staff will notify the Property Manager (temporary) and Founder (need to evacuate) and all persons at Jones Wellness Center will leave the facility/building until the problem has been resolved. In the event of a long-term situation,

Jones Wellness Center might utilize the option to seek temporary provisions in a more comfortable setting.

- h. In case of prolonged loss of water, Jones Wellness Center will bring in ample water for consumption and plumbing services to the capacity necessary to meet the needs of Jones Wellness Center's staff and clients or will initiate evacuation per direction of local authorities.
- i. All changes to the said plans shall be revised as needed and the plans will be evaluated annually by the administrative staff of Jones Wellness Center and in final review by the Founder. For all above disasters and depending on the condition of the buildings, all administrative staff will watch the local news/paper for any pending issues related to either a possible internal issue or more importantly external storms, which could have a direct impact on services offered at Jones Wellness Center.

HYGIENE AND SANITATION

- 2. Jones Wellness Center shall provide:
 - i. Lavatories and toilet facilities for all staff, clients and visitors.
 - ii. All accommodation will be in working order and privacy will be maintained.
 - iii. Water is available through the local utilities.
 - iv. The water is from an approved public water supply, which is tested and treated as necessary, thereby maintaining a determination as an approved water supply by the authority having jurisdiction to do so.

MEDICAL EMERGENCY PROCEDURE

911 Emergency Response will be notified immediately in the event of any medical emergency.

DOCUMENTATION PROCEDURES

1. MINOR INJURIES (requiring doctor/outpatient care)

- a. Incident Reports are used to report all minor injuries requiring doctor and/or outpatient care. Incident Reports are completed by the staff member(s) observing the minor injuries and/or engaged in any part of the event.

2. MAJOR INJURIES

- a. Jones Wellness Center's Founder is to be notified immediately by the staff member engaged in observing any major injury to a staff member, client or visitor.
- b. An incident report is completed in full to identify the event and is reviewed by the Founder.
 - i. Events prior to, during and after will be reviewed and analyzed to identify any trends.
 - ii. Trends noted will be resolved to the best of Jones Wellness Center's ability.
- c. In the case of a fatality, Jones Wellness Center will notify the state agency, L&I and the Joint Commission immediately.

CLIENT ILLNESS / ACCIDENT

- 1. Jones Wellness Center staff is knowledgeable about possible medical complications resulting from mental health. The staff are not, however, medically qualified to diagnose or give advice regarding medical conditions. Therefore, whenever any medical emergency arises, staff will adhere to the following procedures regarding illness or accident for clients.

a. SUDDEN ILLNESS/ACCIDENT:

- i. Staff will immediately determine whether the client is alert and coherent. If the staff member has a doubt, they will ask some of the following questions:
 - 1. What is your name?
 - 2. Who am I?
 - 3. Where are you?
 - 4. What day is it?
- ii. If the client is *responsive*, Staff will try to determine the source of the illness/accident site.
 - 1. Notify the contracted physician.
 - 2. Follow the directions of medical staff.

3. If necessary, call 911 Emergency Response and provide all the information requested.
4. Complete an incident report.

- iii. If the client is *unresponsive*, immediately call for help from other staff.
 1. Have another staff person call **911 Emergency Response**.
 2. Stay with the person until medical help arrives.
 3. Contact the person's emergency contact person(s).
 4. Notify the Founder.
 5. Complete an Incident Report.

REPORTING OF INCIDENTS:

1. As soon as practicable, and in no event longer than 30 minutes from the time the staff member became aware of the incident, staff shall report to the Founder, any incident in which a client or staff member is involved, this is called a critical incident: [Critical Incidents](#) (<https://www.hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/behavioral-health-provider/hcbs-amh/hcbs-amh-critical-incident-reporting-faq.pdf>) are as follows:
 - a. Abuse, neglect and exploitation of patient;
 - b. Allegations against patients rights (federal and state laws and regulations protect participants applying for or receiving benefits from discrimination based on race, color, national origin, sex, age, religion, disability, political beliefs, and sexual orientation);
 - c. Behavioral health emergencies or psychiatric hospitalizations necessitating assessment and treatment by emergency medical services, mobile crisis outreach team, or an emergency room, and crisis facilities, as well as those requiring inpatient care at acute care hospitals, and public and private inpatient psychiatric facilities;
 - d. Medical emergencies or hospitalizations such as physical injuries, illnesses or medical complications necessitating assessment and treatment by emergency medical services, urgent care facilities, or an emergency room as well as those requiring inpatient care due to serious illness or injury after an accident or after surgery;
 - e. Self-abuse, self-harm, or self-neglect, including suicidal behavior, self-inflicted injuries, refusing medications, refusing to eat, or neglecting personal hygiene;
 - f. Legal or justice system involvement refers to any alleged illegal activity committed by the participant, involving law enforcement, such as arrests, incarceration, parole violation, criminal court appearances/charges, illegal drug use and shoplifting;
 - g. Restraint refers to a situation involving a participant who is behaving in a violent or self-destructive manner and in which preventive, less restrictive measures or verbal techniques have been determined to be ineffective and it is immediately necessary to restrain the individual to prevent imminent probable death or substantial bodily harm to self or others;
 - h. Medication errors, including non-adherence, wrong dosage, wrong medication, wrong timing, missed dose, irregular administration, errors involving documentation, storage, prescription, and failure to refill medications on time;
 - i. Incidents caused by the patient, such as verbal and/or physical abuse, sexual assault, or threats, or actual physical assault against staff or other members;
 - j. Contraband, such as weapons or illicit drugs;
 - k. Patient departure, specifically when they cannot be located or in the case of elopement, requires that a missing person report to be filed with the law enforcement within 72 hours of the departure;
 - l. Eviction from primary residence;
 - m. Property destruction, damage, or fire setting and arson;
 - n. Environmental emergencies, such living facility impacted by power outage, floods or other natural calamities, or disruption of utility services;
 - o. Death of a patient; and
 - p. Extended nursing home placement.
2. Any significant incidents not listed above will be staffed by the administrative staff and advice will be obtained from the identified licensing representative from DSHS.
3. Incident reports shall be made immediately verbally, and in writing within one business day to both the state licensing agency and the accreditation organization.

4. Incident reports shall be maintained with the Quality Assurance data for review, analysis and possible identification of trends.
5. Any incident involving required notification to the State will be reported by the Founder of Jones Wellness Center as well as local law enforcement authorities.
 - a. Immediately the state licensing agency will be notified and an Incident Report will be completed for all agencies requiring original and/or copies.

REPORTING OF CRITICAL INCIDENTS:

Policy:

1. Jones Wellness Center has this written policy and procedure for the reporting of every critical incident, including but not limited to, the following:
 - a. the prescribed format, the reporting time frame, the information content to adequately report and describe the critical incident, and to whom the information is disseminated too.

Procedure:

1. A critical Incident Report will be prepared and filed upon the occurrence or the first awareness of, any accident, injury, potentially dangerous situation, abuse, improper action or impropriety occurring to, or on the part of, staff, clients, visitors which occurs on the property of Jones Wellness Center, or in the company of Jones Wellness Center staff.
 - a. The administrative staff will annually evaluate all completed critical incidents and will report the analyzed data.
 - i. The results will be used to formulate program goals to meet client care and changes to the facility environment for the next upcoming fiscal year of Jones Wellness Center.
 - b. Critical incidents can be but are not limited to the following:
 - c. Abuse, neglect and exploitation of patient;
 - d. Allegations against patients rights (federal and state laws and regulations protect participants applying for or receiving benefits from discrimination based on race, color, national origin, sex, age, religion, disability, political beliefs, and sexual orientation);
 - e. Behavioral health emergencies or psychiatric hospitalizations necessitating assessment and treatment by emergency medical services, mobile crisis outreach team, or an emergency room, and crisis facilities, as well as those requiring inpatient care at acute care hospitals, and public and private inpatient psychiatric facilities;
 - f. Medical emergencies or hospitalizations such as physical injuries, illnesses or medical complications necessitating assessment and treatment by emergency medical services, urgent care facilities, or an emergency room as well as those requiring inpatient care due to serious illness or injury after an accident or after surgery;
 - g. Self-abuse, self-harm, or self-neglect, including suicidal behavior, self-inflicted injuries, refusing medications, refusing to eat, or neglecting personal hygiene;
 - h. Legal or justice system involvement refers to any alleged illegal activity committed by the participant, involving law enforcement, such as arrests, incarceration, parole violation, criminal court appearances/charges, illegal drug use and shoplifting;
 - i. Restraint refers to a situation involving a participant who is behaving in a violent or self-destructive manner and in which preventive, less restrictive measures or verbal techniques have been determined to be ineffective and it is immediately necessary to restrain the individual to prevent imminent probable death or substantial bodily harm to self or others;
 - j. Medication errors, including non-adherence, wrong dosage, wrong medication, wrong timing, missed dose, irregular administration, errors involving documentation, storage, prescription, and failure to refill medications on time;
 - k. Incidents caused by the patient, such as verbal and/or physical abuse, sexual assault, or threats, or actual physical assault against staff or other members;
 - l. Contraband, such as weapons or illicit drugs;

- m. Patient departure, specifically when they cannot be located or in the case of elopement, requires that a missing person report to be filed with the law enforcement within 72 hours of the departure;
- n. Eviction from primary residence;
- o. Property destruction, damage, or fire setting and arson;
- p. Environmental emergencies, such living facility impacted by power outage, floods or other natural calamities, or disruption of utility services;
- q. Death of a patient; and
- r. Extended nursing home placement.

Reporting:

1. The Founder receiving knowledge of any critical incidents shall report said incident to the DSHS.
2. The documentation of critical incidents shall minimally include:
 - a. The facility, address, name and signature of the person(s) reporting the incident;
 - b. The name(s) of the client(s), staff member(s) or visitor (s) property involved;
 - c. The time, date, and physical location of the incident;
 - d. The time and date the incident was reported and the name of the staff person within Jones Wellness Center to whom it was reported;
 - e. A description of the incident;
 - f. Resolution or action taken, date action was taken, and signature of appropriate staff member(s);
 - g. The severity of each injury, if applicable. Severity shall be indicated as follows:
 - i. No off-site medical care required, or first aid care administered on-site;
 - ii. Medical care by a physician or follow-up attention required; or
 - iii. Hospitalization or immediate off-site medical attention was required.
3. The Founder having knowledge of potential liability shall report said liability to the DSHS.
 - a. The Founder shall forward a written report of the potential liability within 24 hours.

INFECTION CONTROL PROGRAM

To provide protection to employees, which will prevent potentially serious exposures while handling human body fluid specimens and biohazardous material.

1. Body Fluids

- a. Prior to working with human blood or body fluids, employees are encouraged by the leadership staff to research the Hepatitis B vaccination information available (via the Department of Health) to make their own personal decision concerning protection from Hepatitis B vaccination.
- b. All staff involved/participating in urine screenings are required to take appropriate precautionary measures when handling specimen containers.
 - i. Specifically, to protect against exposure to specimens or related materials, gloves must be always worn.
- c. Any staff member at risk of or who would be accidentally stuck by a needle from a client (diabetic insulin dependent, etc.) who could be at a high risk of exposure to numerous diseases including the possibility of one being HIV positive, is requested to have FLT testing and other follow-up to reduce risk of infection.

2. Spills of Body Fluids:

- a. Staff will contain the spill (if feasible) and can be done safely, wearing gloves, and using absorbent material such as paper towels.
- b. Thoroughly wash all exposed skin using 70% ethyl alcohol followed by disinfectant soap.
- c. To decontaminate, use 1 part bleach to 10 parts waters. Pour the disinfectant around the spill and allow it to flow into the spill. To minimize aerosolizing, do not pour the solution directly onto the spill.
- d. Paper towels soaked with bleach may be used to cover the spill and the surrounding area.
- e. Let stand for a minimum of 10 minutes.

- f. Using a dustpan and squeegee, or similar device, transfer all contaminated materials (paper towels, glass, liquid, gloves, etc.) to appropriate disposal containers (plastic bags in cardboard boxes or metal containers).
- g. Notify your supervisor immediately.

3. Procedures for Handling Body Fluids Samples

- a. Human Immunodeficiency Virus (HIV) and Hepatitis B Virus (HBV) are transmissible through blood and body fluids.
 - i. Therefore, any person handling human blood or body fluids (urine) must have had the appropriate training for their own health and safety.
- b. When handling specimens, assume that all specimens are high risk.
- c. The additional precautions below should be used for specimens:
 - i. Handle low volume samples only in specifically designated areas and on easily cleanable surfaces that can be disinfected effectively.
 - ii. Wear protective clothing (if available) and latex gloves.
 - iii. Store all samples in capped, sealed, and labeled tubes or designated containers.
 - iv. Dispose of contaminated materials into biohazard bags.
 - v. Wash your hands thoroughly.

4. Blood-Borne Pathogens Plan

- a. The purpose of this plan is to establish guidelines for minimizing risk of exposure, create a working environment that is conducive to employee safety, and to provide education about risks and precautions. Jones Wellness Center will achieve this by:
 - i. Notifying employees that Hepatitis B vaccinations are available through the employee health insurance.
 - ii. Training on universal precautions.
 - iii. Post-exposure follow-up.
 - iv. Training for all employees.

5. What is exposure?

- a. An exposure can be defined as, “reasonably anticipated eye, skin, mucous membrane or potential contact with blood or other infectious materials. Infectious materials include semen, vaginal fluid, urine, any fluid that is visibly contaminated with blood, and all body fluids where it is difficult to distinguish between body fluids.”

6. What can put an employee at risk?

- a. Providing first aid to an individual who is bleeding without the use of gloves or other protective equipment.
- b. Physical contact with clients which results in blood being drawn (i.e. consumer biting or scratching staff-there can be dried blood beneath fingernails).
- c. Performing CPR without the use of protective equipment especially if blood is present.
- d. Any exposure to blood when skin is not intact.
- e. Cleaning contaminated surfaces without the use of gloves.

7. Who is at risk?

- a. Any employee of Jones Wellness Center, client or visitor who comes into contact with contaminated fluid. Each Jones Wellness Center staff member will assess their risk for exposure. This assessment will include:
 - i. Possible methods of exposure;
 - ii. Accessibility to proper cleaning supplies and protective equipment;
 - iii. Education and understanding of employees on issues of exposure and proper use of universal precautions.

Universal Precautions

1. Employees will be trained in the use of universal precautions as part of their orientation and training takes place on an annual basis. Universal precautions will be used to prevent contact with potentially contaminated fluids.
 - a. Employees will wear gloves when in potential contact with bodily fluids.

- b. Employees will wash their hands before and after use of gloves.
- c. Employees will dispose of gloves after each use and will change gloves between contacts.
- d. If an exposure occurs the employee will thoroughly cleanse the area with soap and water.
- e. If the exposure occurs to a mucous membrane/the eyes, the employee will thoroughly flush the area with water.
- f. Employees will report exposure to their supervisor immediately.
- g. Employees are encouraged to research vaccines and make a personal decision concerning whether to have the vaccine. Employees have the benefit of using their insurance provided by Jones Wellness Center.

USE OF BLEACH AND WATER FOR CLEANING

PROCEDURES:

- 1. Use a bleach solution of 1-part bleach to 10 parts water. Too much bleach can form a sealant on the counter and too little may not disinfect.
- 2. Bleach water must be changed daily as the effectiveness of bleach diminishes the longer it is diluted with water.
- 3. Cleaning spills that contain body fluids, gloves are worn.
- 4. Dispose of the contaminated cleaning supplies (i.e. paper towels and gloves) immediately in a biohazard waste container.

EXPOSURE CONTROL PLAN FOR HEPATITIS B (Vaccine/Recomb Ivax HB)

- 1. Hepatitis B virus (HBV) is a major health hazard to workers who have frequent human blood or blood product contact.
- 2. All employees who are routinely exposed to human blood and body fluids are considered at risk of exposure to hepatitis B.

THE VACCINE TO PROTECT AGAINST HEPATITIS B

- 1. Bristol-Myers Squibb offers the synthetic hepatitis B vaccine (Recomb Ivax HB) to employees who have frequent blood contact according to the Centers for Disease Control recommendations.
 - a. Employees can contact their insurance company to inquire about coverage.
- 2. The Occupational Safety and Health Administration's ruling on exposures to "Bloodborne Pathogens" require employees to treat blood and certain body fluids as potentially infectious and to take steps to prevent infections.
 - a. The rule requires that hepatitis B vaccines can be made available from an employee's primary care physician (PCP), within ten (10) days of requesting the vaccine.
 - b. The vaccine consists of three separate injections given intramuscularly according to the following schedule:
 - i. Dose #1: ----- Elected start date
 - ii. Dose #2: ----- One month later
 - iii. Dose #3: ----- Six months after first dose.
 - iv. Post-Hepatitis Titer: -- One month after injection #3
 - c. Responsiveness to the vaccine has been shown to be age dependent and ranges from 91-99% in adults receiving all three injections of the vaccine in the arm, on schedule.
- 3. Hepatitis B vaccine (Recomb Ivax HB) will not prevent hepatitis that is caused by other agents such as hepatitis A virus, non-A/non-B hepatitis virus, or other viruses that may infect the liver.
 - a. Long-term studies of healthy adults indicate that immunologic memory remains intact for at least nine years and confers protection against chronic HBV infection, even though anti-HBs levels may become low or decline below detectable levels (1).

SAFETY OF THE VACCINE

- 1. Hepatitis B vaccine is a synthetic, non-infectious, viral vaccine derived from hepatitis B surface antigen. It is produced in yeast cells. Immediate side effects are minimal, and no long-term reactions have been reported.
- 2. Each lot is safety tested in primates.
- 3. No known cases of hepatitis B or non-A/non-B hepatitis or AIDS have been transmitted with the vaccine.

POSSIBLE SIDE EFFECTS OF THE VACCINE

1. Recomb Ivax HB vaccine is generally well tolerated. Possible side effects may include:
 - a. Injection site soreness or redness, fatigue, fever, chills, irritability, sweating, nausea, abdominal pain or cramping, vomiting, diarrhea, lymph node swelling, muscle aches, joint aches, headache, dizziness, disturbed sleep, numbness of the feet or hands, cold like symptoms, or rash.
 - b. Hypersensitivity reactions can occur. Immediate hypersensitive symptoms might include
 - i. Hives, swelling, or itching.
1. According to a report of the most recent recommendations of the U.S. Immunization Practices Advisory Committee, Hepatitis B vaccines overall have been shown to be safe.

CONTRAINDICATIONS

1. People allergic to yeast or any component of the vaccine should not receive this form of the vaccine (Recomb Ivax HB). Heptavax B is available for yeast-sensitive persons.
2. It is not known whether Recomb Ivax HB can cause fetal harm when administered to a pregnant woman, thus it should be given to a pregnant woman only if clearly needed.
3. It is not known whether Recomb Ivax HB is excreted in human milk, thus caution should be exercised before administering the vaccine to a nursing woman.

REFERENCE

Hepatitis B virus: A comprehensive strategy for eliminating transmission in the United States through Universal Childhood Vaccination (ACIP). 40:1-14.

FIRST- AID and CPR

Jones Wellness Center has always at least one individual on site who is certified in basic First Aid and CPR. All Jones Wellness Center staff members are trained to ensure a safe work environment.

POLICY

1. All employees with direct client contact are trained in First Aid and CPR.
2. Employees who accompany the clients on community outings include staff members who have certification in first aid and basic cardiac life support.

Location of First aid kits:

1. There is a First Aid kit in the administrative office.

FIRST AID TRAINING, KITS, IDENTIFICATION SITES

To afford the employee immediate and effective attention should an injury result to a staff member, client or visitor, Jones Wellness Center ensures that all staff are trained so that a certified first aider(s) is always available on site.

1. To meet the above objectives, the following procedures will be followed:
 - a. All employees who have contact with clients are trained in First Aid and CPR.
 - b. Valid First Aid certificates are recognized as ones which are less than three years old.
 - c. All Jones Wellness Center employees will be trained in Cardiopulmonary Resuscitation (CPR).
2. Jones Wellness Center Founder is responsible for ensuring that the First Aid kit(s) are:
 - a. Properly maintained and stocked
 - b. First Aid materials can be located:
 - i. There is a First Aid kit in the administrative office.
3. Emergency numbers are located in the Staff Cabinet to:
 - a. Assist in emergency response for either a staff or client experiencing an emergency.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.01.01.01, EP 7
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: FIRE SAFETY PLAN

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimize risks in the environment of care.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

1. It is the policy of Jones Wellness Center to have a Fire Safety Plan:
 - a. An annual review will take place by the county or municipal fire marshals to ensure safety at the office.
 - i. The report is maintained by the Founder in the Risk Management and Safety Manual.
 - b. Fire drills are conducted at the office.
 - i. The time/shift will not be the same and drills are conducted by an assigned staff member of Jones Wellness Center.
 - ii. Response times for evacuation are documented on the report forms and submitted to the Founder.
 - c. Quality assurance addresses the status of all Health and Safety issues and staff members are informed via scheduled meetings.
 - d. Fire evacuation plans are posted in the office.
 - e. Fire extinguishers are in the building and training takes place with both staff and clients to address the use of the fire extinguishers.
 - i. The acronyms P.A.S.S. are identified (Pull, Aim, Squeeze and Spray) as a reminder in the use of a fire extinguisher.
 - ii. This acronym is located next to the fire extinguisher.
 - f. Activities related to fire protection are part of the training.
 - g. A monthly maintenance report is completed by the Founder which checks:
 - i. Smoke detectors
 - ii. Emergency Lights
 - iii. Pull Stations/Fire Alarm System or Sprinkler System
 - iv. Fire extinguishers
 - v. Facility Walkthroughs conducted to check safety factors (external debris, uneven walkways, lighting, extension cords, working lights, air conditioners etc.)

PROCEDURE

1. **Fire Plan**
 - a. In the event of a fire emergency, staff will be able to function in such a manner to protect the clients and to summon help from the local 911 emergency fire department.
2. **When notified of a fire: Fire alarm going off or the smell of smoke**
 - a. Call fire rescue 911 immediately to report the location of the emergency.
 - b. Remove all clients from the area and notify all staff. Remain calm. Do not panic.
 - c. Contact the Founder/Safety Officer.
 - d. Close all doors and relocate all clients to the designated safe area.
 - e. If the fire is small and can be extinguished, use one of the fire extinguishers in the area, which are in working order and checked annually.
 - f. If there is no fire, inform the emergency staff that there could be the possibility of a carbon monoxide emergency due to the alarm sounding.

3. Fire Safety Information

a. Fire Extinguishers

- i. In case of fire, Jones Wellness Center has fire extinguishers located throughout the office. The Found and Property Manager is responsible for maintenance of fire equipment to prevent and control ignitions or fires.
- ii. Fire extinguishers are monitored at least monthly, and documentation of the inspection is maintained.
- iii. Jones Wellness Center will conduct emergency evacuation drills on a scheduled basis.

4. Flammable Waste:

- a. Jones Wellness Center shall control accumulations of flammable and combustible materials so that they do not contribute to a fire emergency.

5. Sprinkler Systems:

- a. Jones Wellness Center has interconnected smoke detectors.
- b. The systems are inspected routinely, and documentation of the results is maintained.

6. Emergency Exit Lights:

- a. Jones Wellness Center has lit exit lights throughout the facilities.
- b. The exit lights are equipped with battery back-up power sources.
- c. The exit lights are routinely monitored, and the date and time of the monitoring is recorded.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.01.01.01, EP9
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Utility Systems

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimize risks in the environment of care.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

1. The Property Manager performs and coordinates preventive maintenance on the inventoried utility equipment.
2. The Property Manager maintains a written inventory of all operating components of the utility systems.
3. The type of equipment to be included in the inventory is included in the table below.
4. Systems and equipment requiring a program of preventive maintenance are listed as part of a maintenance inventory.
5. The list includes operational components of utility systems maintained by staff as well as equipment maintained by vendors.
6. Each type of equipment has a defined scope of preventive maintenance tasks that are assigned to the type, and the task detail is based on the frequency.
7. The minimum frequency for each type of equipment is shown in the table below:

Utility Equipment Preventive Maintenance Suggested Guideline for Behavioral Facilities	
Equipment Type	Minimum Inspection Frequency
Air Conditioning Units	Semi -Annual
Air Filters	Use manufacturer standard-Monthly

8. The Property Manager shall determine the months for which the equipment is to be scheduled for preventive maintenance. This is based on the knowledge of the equipment's performance history and the manufacturer's recommendations.
9. The Property Manager will determine whether the required preventive maintenance work tasks can be performed by staff or outside service vendors.
10. Based on the equipment preventive schedule and who is assigned to perform the task, the Founder either writes a work order for staff to do the work or contact the Property Manager to arrange for the work to be done.
11. Work orders shall be marked completed once the work is satisfactorily completed, by the person assigned to do the work. The same applies to outside vendors – who have completed a service ticket/work order.
12. Completed documentation is returned to the Founder for filing.
13. Any deficiencies found and repaired during the work shall be documented on the work order/service ticket. When deficiencies cannot be completed at the time of the task, the Founder and/or Property Manager shall generate a follow-up work order and arrange for the repairs to be made as soon as possible.
14. Documentation of repairs made is kept by the Founder and/or Property Manager.
15. Work history is reported to the Safety Committee along with any observed trends and incidents of utility failures.

PROCEDURE

1. Jones Wellness Center will maintain written emergency procedures for the following utility systems:

- a. Air Conditioner
- b. Incoming Potable Water Supply
- c. Sanitary Sewer
- d. Elevator(s)
- e. Incoming Electricity
- f. Fire Alarm
- g. Fire Suppression System(s)

2. The procedures will include:

- a. The operations staff will be available on call twenty-four hours a day, seven days a week for emergency response to all utility failures.
- b. In the event of a failure, client safety is the highest priority.
- c. In the event that an operating component causes or has the potential to cause injury or death, the component will be removed from service immediately.
- d. In the event that an operating component causes or has the potential to cause injury or death, the component will be removed from service immediately.
- e. Jones Wellness Center maintains a list of preferred and available vendors for emergency response.
- f. In the event of a major utility failure, Jones Wellness Center will implement an emergency operations plan and determine if facility closure is necessary. (See Utility Failure Plan in Emergency Management Plan.)

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC 02.01.01
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Management of Safety and Security

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimizes risks in the environment of care.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

1. Jones Wellness Center has identified safety and security risks associated with the environment of care that could affect individuals served, staff, and other people coming to Jones Wellness Center's facilities.
2. Jones Wellness Center takes action to minimize identified safety and security risks associated with the physical environment.
3. Jones Wellness Center maintains all grounds and equipment.
4. Jones Wellness Center controls access to and from areas it identifies as security sensitive.
5. Jones Wellness Center acts in accordance with product notices and recalls.

PROCEDURE

1. The Founder is responsible to ensure for a safe and secure physical environment:
 - a. Jones Wellness Center has a systematic approach to monitor the physical environment which includes the following:
 - i. Monthly inspection of grounds and buildings
 - ii. Monthly cleaning inspection
 - iii. Fire drills and protective equipment
 - iv. Safe storage of hazardous chemical: SDS sheets
 - v. Emergency power supplies, etc.
 - b. Inspections are completed at least monthly, and the documentation recorded in the facility binder for inclusion in the Safety Committee.

Management of Physical Environment

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

It is the policy of Jones Wellness Center to ensure management of safety and security of the physical environment.

PROCEDURE

1. The Founder is responsible to ensure for a safe and secure physical environment:
 - a. Jones Wellness Center has a systematic approach to monitor the physical environment which includes the following:
 - i. Monthly inspection of grounds and buildings
 - ii. Monthly cleaning inspection
 - iii. Fire drills and protective equipment
 - iv. Safe storage of hazardous chemical: SDS sheets
 - v. Emergency power supplies, etc.
 - b. Inspections are completed at least monthly, and the documentation recorded in the facility binder for inclusion in the Safety Committee.

Grounds and Equipment

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

It is the policy of Jones Wellness Center to ensure all equipment and grounds are maintained to provide a safe environment.

PROCEDURE

1. The Founder is in charge of ensuring the grounds and equipment are maintained.
2. Jones Wellness Center has a systematic approach to ensure all equipment is monitored and maintained in good working order.
3. Jones Wellness Center has checklist to monitor the following:
 - a. Emergency fire protection system
 - b. Power sources, i.e. batteries, etc.
 - c. Blood pressure equipment
 - d. Appliances

Facility Access

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

Jones Wellness Center identifies all individuals entering its facility. This includes clients, visitors, employees, licensed independent practitioners, and vendors.

PROCEDURE

Employees and Licensed Independent Practitioners

1. All employees are required to wear an official identification badge while on facility property.
 - a. This is to provide a means of identification, thereby facilitating the client's right to know who is treating them.
 - b. From a security standpoint, name badges provide a means for our personnel to quickly identify people who are not employees and to control persons entering unauthorized areas.
2. The badge should be worn above the waist where it can be readily identified, while at work on facility property.
 - a. Employees who are actively at work, but not on facility property, should maintain the identification badge in their possession.
 - b. However, in order to protect the confidentiality status of a client, when the employee is off facility property with client(s) the badge should not be visually displayed.

Visitors and Vendors

1. Visitors and vendors are required to sign in upon entrance to the facility and obtain a temporary identification badge.
 - a. This badge must be worn while they are in the facility.
 - b. Upon leaving the facility, they are required to sign out and return or discard the temporary identification badge.

Clients

1. Clients are identified in compliance with the national patient safety goals by a two-identification system.
 - a. Clients are provided with an identification badge upon admission:
 - i. The client's identification will be obtained and a copy placed in their file; which can be utilized to verify name and date of birth.

- b. The EMR provides a picture ID.

Products Notices and Recalls

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

It is the policy of Jones Wellness Center to ensure all product notices and recalls are responded to in accordance with the manufacturer's instructions.

PROCEDURE

1. It is the Founder's responsibility to respond to all product notices and recalls from the manufacturers.
2. The items/product are to be immediately collected and destroyed or returned to the manufacturer as instructed.
3. A log is to be maintained pertaining to the items in which Jones Wellness Center receives a safety notice or recall.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.02.01.03
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: SMOKING POLICY

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimizes risks in the environment of care.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

1. Consistent with state laws, Jones Wellness Center abides by the law of no smoking in any Jones Wellness Center building. In addition, no smoking is allowed in any van that transports clients of Jones Wellness Center.
2. There is also no smoking or use of any type of tobacco products (including smokeless) allowed inside any Jones Wellness Center building. Tobacco products of any kind will not be sold on Jones Wellness Center's premises.
 - a. Tobacco products may include but are not limited to:
 - i. Cigarettes
 - ii. Cigars
 - iii. Chewing Tobacco
 - iv. Snuff
 - v. Electronic Cigarettes
 - b. Smoking areas have been designated on the outside area of the facility for those staff, clients or visitors who desire to smoke.
 - i. All designated areas are at least 20 feet from the building.
 - c. Any type of smoking product or smokeless tobacco product cannot be used during any scheduled inside or outdoor group.

PROCEDURE

1. Staff are responsible for monitoring the adherence to the smoking protocol.
2. Staff who violate the protocol are subject to disciplinary action.
3. Clients who violate the safety protocol for smoking will be reviewed for competency and may be transferred or discharged.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.02.02.01
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Hazardous Material

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimizes risks in the environment of care.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

Jones Wellness Center will maintain an inventory of hazardous materials, including biological waste and chemicals. In addition, an up-to-date file of material Safety Data Sheets will be kept for all applicable products and made available to all employees. Jones Wellness Center does not handle, use or store any chemicals that are addressed by law or regulation.

PROCEDURE

1. Founder is responsible for providing information on the hazardous materials and waste used, stored, or generated.
2. The Founder is responsible for updating the inventory on an annual basis.
3. Chemicals will be listed by product name and areas where they are used and/or stored. There is one SDS Binder.
4. The master hazardous materials inventory list will be kept on file in the employee cabinet.
5. The master list of material Safety Data Sheets will be maintained and available to employees at all times.

DEFINITION:

OSHA- <http://www.osha.gov/dsg/hazcom/oshacomplianceassistance.html>

Definition

Hazardous: As defined by OSHA Standard 1910.1200 (the OSHA Haz-com standard), a hazardous chemical is one which is a physical hazard or a health hazard.

Health Hazard

1. Health hazard means a chemical for which there is statistically significant evidence based on at least one study conducted in accordance with established scientific principles that acute or chronic health effects may occur in exposed employees.
2. The term "health hazard" includes chemicals which are carcinogens, toxic or highly toxic agents, reproductive toxins, irritants, corrosives, sensitizers, hepatotoxins, nephrotoxins, neurotoxins, agents which act on the hematopoietic system and agents which damage the lungs, skin, eyes, or mucous membranes.
3. Appendix A describes the criteria to be used to determine whether or not a chemical is to be considered hazardous for purposes of this standard.
4. Appendix A contains a listing of toxic and reactive highly hazardous chemicals that present a potential for a catastrophic event at or above the threshold quantity.

EPA

1. **Hazardous Chemical:**
 - a. An EPA designation for any hazardous material requiring an SDS under OSHA's Hazard Communication Standard.
 - b. Such substances can produce fires and explosions or adverse health effects like cancer and dermatitis.
 - c. Hazardous chemicals are distinct from hazardous waste. (See: [Hazardous Waste](#).)
2. **Hazardous Substance:**
 - a. Any material that poses a threat to human health and/or the environment.
 - b. Typical hazardous substances are toxic, corrosive, ignitable, explosive, or chemically reactive.

- c. Any substance designated by EPA to be reported if a designated quantity of the substance is spilled in the waters of the United States or is otherwise released into the environment.

3. **Hazardous Waste:**

- a. By-products of society that can pose a substantial or potential hazard to human health or the environment when improperly managed.
- b. Possesses at least one of four characteristics (ignitability, corrosivity, reactivity, or toxicity), or appears on special EPA lists.

4. **What is a Resource Conservation and Recovery Act (RCRA) hazardous waste?**

- a. Waste that exhibits certain characteristics may be regulated by RCRA.
- b. A waste may be considered hazardous if it is ignitable (i.e., burns readily), corrosive, or reactive (e.g., explosive).
- c. A waste may also be considered hazardous if it contains certain amounts of toxic chemicals.
- d. In addition to these characteristic wastes, EPA has also developed a list of over 500 specific hazardous wastes.
- e. Hazardous waste takes many physical forms and may be solid, semi-solid, or even liquid.

PROCEDURE

1. A material Safety Data Sheet shall be obtained and kept for all hazardous chemicals, which are either a physical hazard or a health hazard, including items that are household products.
2. The SDS shall be kept in place for easy access for employees for use in the case of an emergency.
3. The Safety Officer is responsible for ensuring that a list of all hazard chemicals is kept current with a copy of the SDS sheet.
4. The SDS will list the following information if applicable to the product:
 - a. Product name
 - b. Chemical name
 - c. Formula trade name
 - d. Appearance/odor
 - e. Hazardous ingredients
 - f. Physical and chemical characteristics (fire and explosion data)
 - g. Physical hazards
 - h. Health hazards (including acute and chronic health effects and other related information)
 - i. Exposure limits
 - j. If OSHA, NTP and/or IARC considers the chemical carcinogen
 - k. Emergency and first aid procedure
 - l. Special protection information
 - m. Special precaution and spill/leak procedures
 - n. Preparation date of SDS and responsible party for SDS

HAZARDOUS SPILLS

DEFINITIONS:

Hazardous Material & Waste (HAZMAT) Spill: Incidents involving hazardous materials or wastes. A general term used to define any activity related to hazardous material and waste.

Incidental Release: An incidental release is a release of a hazardous substance which does not pose a significant safety or health hazard to employees in the immediate vicinity or to the worker cleaning it up, nor does it have the potential to become an emergency. For example, a small amount of a substance considered low in toxicity and released from a valve during a maintenance operation would be considered an incidental release, not an emergency. OSHA does not define the phrase "incidental release" in terms of the levels of Personal Protective Equipment (PPE) used by employees. Incidental releases are defined in terms of the lack of danger or safety and health risks that the release poses to workers. Workers who are exposed to or who clean up incidental spills must have the proper PPE, equipment and training in accordance with OSHA standards.

Major Spill: Spills that are beyond the training and PPE available to the staff or pose a significant safety or health hazard

to employees. These spills may represent an immediate danger to personnel in the area because of physical or health effects (e. g., large quantities of diesel fuel, paint thinner). In most cases, this is a decision made by the Safety Officer or Leader On-Call at the point of the incident or by the department manager based on knowledge of the hazards of the material. Spills on soft surfaces such as rugs are treated as major spills or a spill that exceeds the limits of the personal protection available and staff training.

PROCEDURE

1. Regardless of the size or type of spill, staff should be aware of the different phases of a spill response:
 - a. Discovery, identification, notification, and decision-making
 - b. Response to the spill: minor, special content, and major
 - c. Clean-up operations (as relevant to their job)
 - d. Disposal

Discovery, Identification, and Decision-making

1. When a spill (a spill of hazardous or unknown chemical or infectious/potentially infectious material) is discovered, it should be classified by the amount of the spill such as a minor spill, special content spill, or major spill.
 - a. If possible, attempt to identify the hazardous material from information provided by staff involved in the spill or evidence.

Response to Spills

1. Minor Spill
 - a. A minor spill can be cleaned up by the person that discovered or caused the spill without any special equipment beyond what they normally use.
 - i. These spills should be cleaned up promptly and no further action is needed.
 1. Example: A few drops of blood or a few drops of a normally used chemical.
 - b. The personal protection required to clean up these spills is normally used for handling these materials and waste (e.g., Gloves, Apron, Eye Protection, etc.).
 - c. Spill kits may be used on specific material if the staff is properly trained in their use (e. g., such as a formaldehyde-neutralization kit).
 - d. If a spill kit is used, or if there is potential risk to clients, staff, or visitors, an incident report should be completed.
 - e. Dispose of the materials in the appropriate waste containers.

Response to a Major Spill

1. Immediately evacuate the area while closing all the doors.
 - a. This will help contain the vapors and odors.
 - b. Post staff at all doors into the area to control movement into the area.
 - c. Contact the staff to announce a Code Yellow.
2. Contact the Safety Officer or maintenance staff by cell phone to shut off the HVAC system serving the affected area.
3. Contact Founder and Risk Manager or designee, if available, to assist in securing the area.
4. During normal business hours, contact the Safety Officer and/or the Founder who will evaluate the situation and potentially notify a certified HAZMAT cleanup contractor or the fire department.
5. During off-duty hours, contact the Leader on Call or Safety Officer who is authorized to contact a certified HAZMAT cleanup contractor or the fire department.
 - a. It may be useful to contact them, explain the situation, and ask for their advice.
6. Continue to secure the area and ensure that the area has been evacuated (to the extent practical without personal protection) and that all staff, visitors, and clients are accounted for and that all entrances have been secured.
 - a. If noxious smells extend out of the area, secure a larger area.
 - b. If necessary, use the Evacuation Plan to move clients and staff to alternate sites.
7. When the HAZMAT contractor or fire department arrives, provide them with information about the spill and location.

- a. If possible, have an SDS for the chemical spilled available for their use.
 - b. Attempt to have floor plans of the area available to assist the contractor or fire department with possible entry/access points to the area involved.
8. If practical, have the person that discovered the spill available to explain the situation to contractor or fire department personnel.
 - a. If they are not available, have someone familiar with the area assist the contractor or fire department.
9. Staff must not try to clean up spills for which they have not been trained or are not equipped.
10. The contractor will be responsible for the clean-up and disposal of the product, PPE, and any materials used for clean-up.
11. If in any event someone has been contaminated, immediately transport the affected person to the Emergency Room, report the chemical or bring the bottle of the chemical with the affected person being transported.

Recovery

1. Once the affected area has been declared safe by the Safety Officer/Founder or the Leader on Duty, the staff can enter the area to clean up the remainder of the incident.
 - a. This process will generally include spent neutralizer, absorbent packaging, and other materials.
2. The area should not be reoccupied for normal use until the Safety Officer/Founder, or Leader on Call determines that there are no remaining hazards from the clean-up process.
3. All significant incidents involving hazardous materials and waste should be documented by a narrative discussion of the event, any staff, client or visitor injuries, and the process for clean-up, disposal and recovery.
4. All significant spills will be reported to the Safety Committee and evaluated to potentially make improvements in the process.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.02.03.01
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: MANAGEMENT OF FIRE RISKS

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimizes risks in the environment of care.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

1. It is the policy of Jones Wellness Center to manage fire risks.
2. To assure the safety of clients, visitors, and staff, a standard response to fire, or to the potential of fire, defined plans are required. This fire response plan describes the standard responses for all staff and licensed independent practitioners within Jones Wellness Center, to an activation of the Fire Alarm or to conditions that indicate the presence of a fire in the area. Jones Wellness Center's plan for fire response is an essential part of achieving a fire-safe environment.
3. Risk reduction includes:
 - a. Drill scenarios or actual fire situations to assess performance of staff and fire safety equipment.
 - b. Provision for the safe storage of combustion products to minimize the potential for harm from fire and smoke.
 - c. Designated smoking areas as individuals are not permitted to smoke inside the facility.
 - d. Monitoring exits to ensure they remain unobstructed.
 - e. Posted routes of escape/exit.
 - f. Smoke detectors/fire alarms.
 - g. Fire Response Plan

PROCEDURE

1. The Founder is responsible to ensure for the following:
 - a. Drill scenarios or actual fire situations to assess performance of staff and fire safety equipment: Documented.
 - b. Provision for the safe storage of combustion products to minimize the potential for harm from fire and smoke: Monitored.
 - c. Designated smoking areas as individuals are not permitted to smoke inside the facility: Labeled and maintained.
 - d. Monitoring of exits to ensure they remain unobstructed: Monthly.
 - e. Posted routes of escape/exit: Accurate and inspected routinely.
 - f. Smoke detectors/fire alarms: Operational and inspected routinely.

FIRE RESPONSE PLAN

PROCEDURE (in fire origin)

1. Response to the discovery of a fire or smoke is a team effort. No employee is expected to handle an emergency alone. Communication with other staff is essential.
2. The goal is to safely, calmly, and rapidly implement the R.A.C.E. procedures.
3. The number one priority is the safety of the clients, visitors and staff.
4. These procedures are general in nature. All staff members are expected to use good judgment in implementing the plan.
 - a. In the event of Code Red, an alarm will sound throughout the building and where the pull station was activated or where the automatic sensors have detected smoke or heat.
 - b. When you discover smoke or fire, or the alarm system is activated in your immediate area, the appropriate response will best be remembered by using the acronym R.A.C.E.

Rescue

1. The staff member discovering a fire or smoke will first rescue anyone in immediate danger of the fire or smoke by immediately removing them from the area of danger.
2. Staff should use the best judgment while performing rescue operations.
3. If other staff members are near, call them for help and have them sound the alarm.
4. All clients are to be accounted for by using the client roster.

Do not use elevators if you are in the building.

Alarm

1. Sounding the alarm is of utmost importance.
 - a. Properly sounding the alarm as soon as possible ensures timely response of fire fighters and alerting others in the facility of the problem.
2. Some of the facilities are equipped with full smoke and fire detection which includes smoke detectors, heat detectors and duct detectors.
 - a. If any of these devices detect smoke or fire, the alarm will automatically sound with the signal being sent to the fire department, doors automatically unlock, and the HVAC system automatically shuts down.
 - b. The primary means of sounding the alarm is the use of the fire alarm pull stations, located throughout the facilities.
3. Activating the pull station will sound the alarm throughout the facility and will automatically notify the fire department.
 - a. If the alarm is not monitored, call 911.
4. To activate the alarm, pull the lever in a downward motion.
 - a. If there is a fire in a pull station or the pull station is not accessible due to fire or smoke, employees are to announce to alert other staff and evacuate the area to the safety point.
5. Each employee should know the location of the pull station in his or her work area.
 - a. Locations are discussed as part of the new employee orientation.

Confine

1. Confine the fire or smoke by closing all doors and windows after moving clients and visitors to a safe area.
2. While conducting their duties and moving through the facility, all employees should be sure that all 'cross corridor doors' are closed and latched properly.
3. All available staff should check rooms in the unit to make sure that no client is left inside the room.
4. Once a room is verified to be vacant, staff should close and lock the door so that no other staff member will enter the room to re-check.
5. Bathrooms should also be checked.

Extinguish/Evacuate

Use of Fire Extinguishers:

1. All fire extinguishers are rated ABC.
2. ABC extinguishers can extinguish any type of fire (electrical, ordinary combustibles, flammable liquids, except grease fires).
3. Select the proper fire extinguisher for the fire. Position yourself as close to the fire as safely possible. Remember to leave yourself a way out.
 - a. **Use the P.A.S.S. method to extinguish the fire:**
 - i. **Pull** the pin on the extinguisher.

- ii. **Aim** the extinguisher nozzle at the base of the flames.
- iii. **Squeeze** the handle to discharge the extinguisher.
- iv. **Sweep** from side to side at the base of the fire.

4. See Fire Extinguisher Locations on Floor Plan.

Evacuation

1. Evacuate

- a. Rapid evacuation of the scene of the fire is essential. Staff members working in the area of the fire are responsible to account for all clients, visitors, and staff members; calmly moving everyone to a safe location away from the scene of the fire; controlling the clients and visitors in the evacuation location; and notifying Leadership that everyone is accounted for. Do not exit the evacuation location unless directed to do so, or if the area is in immediate danger.
- b. Staff members in areas away from the scene of the fire are responsible for accounting for all clients, visitors and staff; gathering them in an area convenient for evacuation if it is ordered; and performing other specific duties assigned in this plan.
- c. Staff, clients and visitors will remain in their assembly areas until the “All Clear” is sounded. If instructed to evacuate outside, never re-enter the building unless instructed by the fire department or Leadership.
- d. Evacuation (away from the evacuation location on grounds) will not take place until directed by the fire department. At any time, when several clients are in immediate danger, moving them to a safer area can be done without this approval.
- e. The fire department at the scene verifies that the situation has been resolved. The Safety Officer will signify the ALL Clear.
- f. If your area is away from the area of fire origin, the following procedures are:
 - i. Close all doors.
 - ii. Have clients return to their rooms or line up in the hallway.
 - iii. Visitors should be instructed by staff on procedures to follow.
 - iv. Listen for overhead pages or further direction for status of situation.
- g. Licensed Independent Practitioners are to follow the instruction of the lead staff member at the time of the incident.

2. SPECIFIC ASSIGNED DUTIES:

a. Founder/Leader on Call:

- i. The Founder/designee has overall responsibility for directing the fire emergency response in the facility and coordination with the fire department.
- ii. The Founder/designee will direct an individual to meet the arriving fire fighters to brief them on the situation.

b. Staff/Professional Staff:

- i. Staff will follow R.A.C.E. procedures as described within this plan and be responsible for maintaining the safety and security of the clients under the direction of the nurse.

c. Safety Officer:

- i. The Safety Officer has overall responsibility for implementing emergency fire response activities in their area.
- ii. The Safety Officer will report to the scene of the fire to survey the situation.
- iii. The Safety Officer will brief the Founder and take the necessary actions to limit damage to the building.
- iv. If the phone service is not working the Safety Officer will report via cell phone.

GENERAL PROCEDURES:

Outpatient:

1. After anyone in danger has been rescued and the alarm has been sounded, staff will start the process of confining the fire and evacuation of clients and visitors.
2. If the fire is in the outpatient area, the area will be immediately evacuated.
 - a. If the fire is elsewhere in the Facility, the staff will gather all outpatient clients and visitors in an area suitable for evacuation as listed on the evacuation route map.
3. Staff members leading groups at the time of the alarm will move the group to the evacuation site.

- a. Staff members working with an individual client in the assessment office will escort the client to the assembly area or evacuation site.
- b. While moving to the site staff members will gather any client or visitor who is in the area without a staff member and escort them to the site.

4. If the fire is in the outpatient area, the area will be immediately evacuated.

- a. If the fire is elsewhere in the facility, the staff will gather all outpatient clients and visitors in an area suitable for evacuation as listed on the evacuation route map.

5. Staff members leading groups at the time of the alarm will move the group to the evacuation site.

- a. Staff members working with an individual client in the assessment office will escort the client to the assembly area or evacuation site.
- b. While moving to the site, staff members will gather any client or visitor who is in the area without a staff member and escort them to the site.

6. Assigned staff will bring the daily sign-in sheet to the evacuation site and ensure that all clients, visitors, and staff are accounted for.

7. Assigned staff will check each room in the area, including all bathrooms and offices.

- a. After checking the rooms, the doors will be closed.

8. All personnel will be responsible for the evacuation of any visitor in the main lobby.

Non-Client Care Areas:

- 1. Non-client care areas include administration, business office, general offices, medical records, and other similar areas of the facility.
- 2. After anyone in danger has been rescued and the alarm sounded, staff will start the process of confining the fire and evacuation.
- 3. If the fire is in the general area, the staff will close all doors and move to the assigned evacuation area.
 - a. Staff members are responsible for gathering any visitors or clients encountered along the way and directing them to the evacuation site.
- 4. If the fire is not in the general area, the staff will prepare for evacuation by securing all records in file cabinets and desk drawers, closing all open computer files, and directing visitors to the nearest safe exit.
 - a. Visitors will be asked to gather in the front lobby or away from fire department activity.
 - b. Staff members will perform specific duties assigned in this plan or report to the Safety Officer.

SEE SPECIFIC ASSEMBLY AREA and EVACUATION ROUTES.

ALL CLEAR/RECOVERY:

- 1. After the situation has been resolved, the fire department will clear the building to be reoccupied.
- 2. In The Event of a Fire:
 - a. No one will order "All Clear", silence the alarm, reset the fire alarm panel or re-enter the building without the authorization of the fire department.
- 3. The Founder/Designee will direct the "all clear".
 - a. The "All Clear" will be announced three times.
- 4. Staff will escort clients back to the units/program areas and ensure all clients are accounted for.
 - a. The Founder will be notified that they have resumed normal operations.
- 5. The Safety Officer will tour the facility and ensure that all fire extinguishers have been returned to the designated locations or replaced with spare extinguishers located with the Property Manager.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.02.03.03
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Fire Drills

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimize risks in the environment of care.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

1. Jones Wellness Center conducts, at minimum, one fire drill per shift per quarter throughout the facility.
 - a. One fire drill per shift per year will be conducted in business occupancies.
 - b. At least 50% of all fire drills are unannounced.
2. During times when Interim Life Safety Measures (ILSM) are active, fire drill frequency will be evaluated and increased as necessary.

PROCEDURE

1. All employees shall be trained in fire preparedness during new employee orientation and annually thereafter.
2. Fire drills require that the person in charge of the drill telephone the contracted monitoring vendor and inform them that a drill will be held at the facility.
3. The monitoring company will be notified of the following:
 - a. The time the drill is scheduled to begin.
 - b. Request monitoring company to verify that the signal was received and to document the proper operation of the signaling equipment.
 - c. The time the drill is cleared, and the system is returned to active “online status”.
4. The person in charge of the drill will also notify and alert the following:
 - a. Appropriate staff providing the exercise status remains unannounced.
 - b. As part of the drill, the building fire alarm system is activated, and employees are expected to respond per the fire response plan.
 - c. The time of day that fire drills are performed should be staggered throughout the year.
 - d. The area of fire drill initiation should be rotated throughout the year.
5. During the fire drill, the person in charge of the drill will review fire procedures (R.A.C.E., P.A.S.S.) with the respondents and provide refresher training as necessary.
6. Fire drills shall be critiqued for their effectiveness.
 - a. The person in charge of the drill will complete a Fire Drill Report and this person will submit the report to the Safety Officer.
 - b. The fire drill reports, and monitor sheets will be evaluated by the Safety Officer and scored accordingly.
 - c. Drills that score “excellent or good” will only require on-the spot corrections.
 - d. Drills that score “fair or poor” will require corrective action and/or a repeat drill.
 - e. All drills will be reported to the Safety Committee. Scores will be tabulated and added to the fire safety performance improvement initiative.
7. The fire drill reports, and monitor sheets shall be used to record the names of all respondents to the drill.
 - a. The monitor sheets shall be attached to the fire drill critique form.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC 02.03.05
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Maintenance of Fire Safety Equipment Fire Safety Building Features

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimize risks in the environment of care.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

1. It is the policy of Jones Wellness Center to maintain fire safety equipment and fire safety building features.
2. Jones Wellness Center utilizes a fire equipment inspection company to perform annual inspections and tests of all fire safety equipment.
3. The Founder is responsible for ensuring periodic monitoring is completed on facility specific fire safety equipment, i.e. exit signs, smoke detectors, exit routes, etc.

PROCEDURE

1. Monthly the Founder is responsible to inspect all facilities for fire safety issues:
 - a. Smoke Detectors: Test the backup battery
 - b. Emergency Backup Lights
 - c. Emergency Exit Lights: Push the backup battery for 30 seconds to ensure the battery is charged
 - d. Fire Extinguishers: Review the fire extinguishers to ensure they are the correct type, fully charged, tagged, accessible and ready for use
 - e. Fire Alarms
 - f. Exit Routes: Verify they are in place.
2. Quarterly: The Founder is responsible to inspect the following:
 - a. Supervisory Signal Devices in Organization's facilities where the fire alarm system is monitored.
 - b. Fire Alarm equipment for notifying off-site fire responders. If completed by staff, quarterly review at meeting and document.
 - c. Water Supply Connections
3. Annually: The Founder and/or Property Manager is responsible to:
 - a. Contract with a licensed fire inspection company to:
 - i. Ensure smoke detectors are tested.
 - ii. Tests visual and audible fire alarms, including speakers.
 - iii. Fire pumps under flow.
 - iv. Tests carbon dioxide and other gaseous automatic fire-extinguishing systems.
 - v. Tests automatic smoke-detection shutdown devices for air-handling equipment.
 - vi. Perform maintenance on portable fire extinguishers.

1.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.02.05.01
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Management of Risks of Utility Systems

PURPOSE

The purpose and objective of this plan is to offer guidelines toward providing continuous utility use to promote a safe, controlled, and comfortable environment. In addition, the plan will address means to help minimize the risk of utility failures and reduce the potential for organization-acquired illness. All utilities are identified.

SCOPE

This policy and procedure apply to all staff and facilities operated by Jones Wellness Center.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

1. It is the policy of Jones Wellness Center that all directors are responsible for the implementation of the utilities management plan within their scope of authority. Leadership is responsible for the development of departmental protocols relating to utility management in their respective areas.

GOALS AND OBJECTIVES:

1. The goals and objectives of the Utilities Management Plan include but are not limited to the following:
 - a. Support an efficient, comprehensive Utilities Management Program.
 - b. To provide and maintain an efficient program for assuring the ongoing performance and reliability of utility systems and components and to prolong equipment life.
 - c. To reduce the risk of client, employee and visitor discomfort during periods of equipment malfunction or utility disruption.
 - d. To promote interdisciplinary and interdepartmental discussions of identified issues and incident reports to stimulate quality improvement.
 - e. To familiarize both users and maintainers with utility systems and components included in the program.
 - f. To provide a functional, comfortable and safe environment for clients and other individuals served.

COMPONENTS:

The Utilities Management Plan includes, but is not limited to the following components:

1. Promoting a safe, controlled, and comfortable environment of care through the identification, maintenance, education, documentation, evaluation, and reporting problems or failures of utility systems and components.
2. Assessing and minimizing risks of utility failures through the selection of quality utility systems and/or components, safety testing, inspection and maintenance of critical operating components and the education of users.
3. Investigating utility systems management problems, failures, or user errors and reporting incidents and corrective actions through inspections and testing and staff interviews and through the submission and discussions of utility failure reports and proposed solutions or actions taken to the Founder.
4. Establishing an orientation and education program that addresses issues related to utility systems.

5. Establishing an annual evaluation of the Utility Systems Management Plan's objectives, scope, performance, and effectiveness.

PROCEDURE:

1. Utility Failure
 - a. All utility failures are to be reported immediately.
 - b. The Safety Officer and/or designee will be responsible for contacting the appropriate utility company/service to address the problem.
 - c. Staff members reporting the utility failure have to complete an incident report.
2. Electrical:
 - a. Critical components of the electrical system are the circuit breakers.
 - b. Additional information is provided below regarding the electrical system.
 - c. Preventative Maintenance
 - i. Preventative maintenance of building systems will be completed by the building owner/manager.
 - ii. Emergency backup lights are to be tested monthly and the batteries will be changed at least annually.
 - d. Flashlights will be available with a fresh supply of batteries.
 - e. For prolonged electrical utility failures (anticipated to be 3 hours or more) a determination by the Safety Officer will be made regarding the ability to continue providing service to clients until repair is made.
 - f. In the event of an electrical failure, which causes a loss of data from the computer system, the Founder will be notified.
 - i. All staff working at the time of the failure will shut down their machines at the onset of the failure and should turn machines back on only after being instructed by their supervisor.
 - g. The Safety Officer and/or designee will provide information regarding appropriate means of computer shutdown in the event of a power failure.
3. Water:
 - a. Critical areas affected by water include septic and sewage systems and drinking water.
 - b. In the event of an interruption in water, the following measures will be taken based on needs determined by the Founder:
 - i. Bottled water for drinking purposes will be obtained.
 1. The Founder will contact the building owner/manager for sewer problems.
 - c. All personnel and clients will be informed of plumbing problems.
 - i. Staff are to post notices as necessary indicating when these utilities have been disrupted.
 - d. In the event of a planned water shut off, all personnel will be advised of the time and date of the planned shutoff, and approximately how long the water will be off.
 4. Telephones/Communication:
 - a. Critical areas affected by communication equipment failures include the need for emergency outside assistance.
 - b. If there is a problem with the telephone system, the staff in charge will contact the Founder who will determine if an outside organization needs to be involved.
 - c. If the phone system is rendered inoperable, the wireless phone system should be used to contact the Founder.
 - d. All personnel will be advised of the problem.
 5. Sewer/Septic
 - a. Interruptions in provisions of adequate sewage disposal will result in notification of appropriate organization. Problems should be remedied as quickly as possible.
 - b. Signs will be posted indicating a disruption in service.

- c. As much as possible, steps should be taken to provide continual service without disruption to client care when problems have been discovered.
- 6. Employee Education:
 - a. All employees will receive departmental specific utilities management education during new hire orientation and will be reviewed.
- 7. Corrective Actions:
 - a. All department supervisors are responsible for investigating and taking immediate actions consistent with this plan when there is a disruption in utilities/service.
- 8. Evaluation/Reporting:
 - a. The Utility Management Plan will be evaluated annually to determine if the scope and objectives, performance and effectiveness of the plan are consistent with the intent of the plan.
 - i. Data gathered from surveillance rounds, questionnaires (if applicable), and review by the Leadership Team will provide the basis for evaluation.
 - ii. The annual evaluation will be forwarded to the Leadership Team.
 - b. Performance standards related to this plan are measured and assessed on an ongoing basis and reported on a minimum of a quarterly basis to the Leadership Team.

PERFORMANCE IMPROVEMENT/INFORMATION COLLECTION AND EVALUATION SYSTEM (ICES)

- 1. The Utilities Management Plan is established, supported and maintained based on measurement, assessment and improvement activities.
 - a. This includes but is not limited to the Information Collection and Evaluation Systems (ICES).
 - b. The information that is evaluated, acted upon and distributed includes reports of utility system problems and/or failures, incident reporting, training, education and employee knowledge.
- 2. The Safety Officer and/or designee collects data and actions taken because of other organization-wide measurement and assessment functions such as Infection Control and Risk Management.

PERFORMANCE STANDARDS

- 1. 100% of time the facility will be without any specific utility (i.e. phone, electricity, water) for more than 1 hour.
- 2. 100% of the time the utility issues will be resolved within one working day.
- 3. 100% of staff will be able to verbalize how to shut off the water in the case of an emergency,

Labeling Systems

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimize risks in the environment of care.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

It is the policy of Jones Wellness Center to label utility system controls so that staff are able to partially or completely shut down systems in emergencies.

PROCEDURE

- 1. It is the responsibility of the Property Manager and/or Founder to label utility system controls so that staff can partially or completely shut down systems in emergencies.

2. The facility has a Facility Operational Manual which contains information specific to the facility, i.e. trash days, utility vendors, landlord, local fire and rescue contact numbers, fire evacuation routes, etc.
 - a. Inclusive in the manual is a diagram of the facility, indicating the fire safety equipment and location for the utility controls.
3. Systems which are labeled include:
 - a. Electrical
 - b. Water
 - c. HVAC
4. The Facility Operational Manual is maintained in the facility office.
5. Each staff assigned to the facility must read and sign the Facility Operational Manual to ensure they have knowledge of the location of the utility shut off controls.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.02.05.03
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Emergency Power Source Generators/Backup Battery Power

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimize risks in the environment of care.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

1. Jones Wellness Center will identify utilities that will have an emergency electrical power source to minimize impact of safety to patients, staff and visitors in the event of utility system disruptions or failures.
2. Jones Wellness Center has a testing program for all battery powered emergency egress lighting and exit signs.
 - a. This is to maintain lighting during times when the normal lighting is unavailable due to power outages.
 - b. Emergency generators are available for extended power outages.

PROCEDURE

1. **Battery Power:**
 - a. Jones Wellness Center will supply emergency electrical and/or backup battery power to the following utility systems:
 - i. Alarm systems as required by the Life Safety Code.
 - ii. Exit route and exit sign illumination, as required by the Life Safety Code.
 - iii. Emergency lighting, as required.
 - iv. Emergency communication systems, as required by the Life Safety Code.
2. **Testing:**
 - a. Jones Wellness Center has an inventory of all battery powered egress lights and exit signs. These lights are tested as follows:
 - i. Once per month a functional test is performed;
 - ii. Once per year a functional test is performed for a duration of 1.5 hours (90 minutes). This testing will be documented.
 - b. Any lights that fail monthly or annual testing will be repaired or replaced.
 - i. The checklist will reflect a P.A.S.S./fail system and any repairs or replacements will be documented on the checklist.
 - c. The results of the testing will be maintained in the Environment of Care binder and included in Jones Wellness Center's Performance Improvement Committee.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC. 02.05.05
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Inspection, Testing, & Maintenance of the Utility Systems

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimize risks in the environment of care.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

1. It is Jones Wellness Center's policy to inspect, test and maintain utility systems components before initial use.
2. Jones Wellness Center applies and receives an Occurrence Permit (Occupancy Permit) prior to utilization of their facilities.
 - a. The completion date of the tests is documented.

PROCEDURE

1. The Property Manager is responsible for ensuring all utility systems are tested prior to use.
2. The local fire department has been contacted to inspect all fire safety equipment.
3. The local Health Department is contacted to inspect all water, sewage, and physical plan.
4. The Founder or designee is responsible for ensuring all communication devices, i.e. phones, computers, faxes are in good working order prior to opening a facility.
5. The initial inspection is documented, and information maintained as part of the Safety Committee, a sub-group of the Performance Improvement Committee.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.02.05.07
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Maintain Emergency Power Systems

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimize risks in the environment of care.

SCOPE

This policy and procedure apply to all staff and facilities operated by Jones Wellness Center.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

Jones Wellness Center does not use emergency power systems for life supporting machines. The emergency power systems are for convenience only.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.02.06.01
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Safe Functional Environment

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimize risks in the environment of care.

SCOPE

This policy and procedure apply to all staff and facilities operated by Jones Wellness Center.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

Jones Wellness Center will establish a safe, functional environment to minimize or eliminate environmental care risks.

PROCEDURE

1. Interior spaces will meet the needs of the patient population and are safe and suitable for the care, treatment, and services provided.
2. Jones Wellness Center will provide outside areas for use by individuals served, based on the individual's needs and suitable to the individual's age or other credentials.
3. Jones Wellness Center will provide storage space to meet the needs of the individuals served.
4. The reception area is adequate in size and number and staffed according to the needs of the individuals served.
5. Restrooms will be adequate in size and number for the people using the facility.
6. Lighting will be suitable for care, treatment and services.
7. Lighting is controlled by the individuals served, consistent with care, treatment or services provided.
8. Jones Wellness Center will maintain ventilation, temperature, and humidity levels suitable for the care, treatment, and services provided.
9. Areas used by patients are clean and free of offensive odors.
10. Jones Wellness Center will provide emergency access to all locked and occupied spaces.
11. Furnishings and equipment should reflect the ability and needs of the individual served.
12. Door locks and other structural restraints (such as fences) have the following characteristic:
 - a. They are consistent with Jones Wellness Center's: mission, program goals, program policy, law and regulation.
 - b. They provide the least restrictive environment.
 - c. They meet the needs of the individual served.
 - d. They provide for emergency access to locked, occupied spaces.
13. Jones Wellness Center will keep furnishings and equipment safe and in good repair.

JONES WELLNESS CENTER
MONTHLY SAFETY & SECURITY INSPECTION CHECK LIST

This checklist has been developed to serve as a guide for the Safety/Risk Management function. Although safety and security surveillance and reporting of potential safety hazards is an ongoing effort by all employees, this checklist will be completed on a minimum of a quarterly basis. Following the inspection, a copy of the Safety & Security Inspection Checklist and report is to be sent to the Performance Improvement Committee with the original copy filed in the "Environment of Care Safety Manual." Following the inspection, the Head of the Inspection Team will complete work, repair, and/or purchase order requests if deemed necessary, in-service staff, etc.

Inspection Date and Time:		Site:		
Safety Officer:		Inspection Team:		
GENERAL SAFETY:		YES	NO	DATE TO BE MET
1.	Walls are free of holes?			
2.	Hallways are clear for movement of personnel, Clients, and materials?			
3.	Are wet, mopped areas identified (by signs or barricades)?			
4.	There is no use of extension cords or any exposed wiring?			
5.	Are electric outlets of the proper type and are not broken?			
6.	Electric switches are not broken or missing?			
7.	Are broken items taken out of use?			
8.	Is there sufficient lighting throughout the building?			

GENERAL SAFETY:		YES	NO	DATE TO BE MET	COMMENTS
9.	Do all entrances and doors allow for easy maneuverability and operate properly?				
10.	Ceiling tiles are intact?				
11.	Are all items stored safely?				
12.	Proper type & number of fire extinguishers available, and inspections up to date?				
13.	Exit signs are lighted?				
14.	Back-up lighting illuminates during testing?				
15.	Exits are clear and unblocked?				
16..	Is there evidence of compliance with the smoking policy?				
17.	Through direct observation there is evidence of compliance with all toxic and poisonous chemicals as evidenced by: appropriate label, storage, and material safety data sheets (SDS) are available?				
18.	Is the poison control phone number available to employees?				
19.	Are air conditioner vents clean and dust free?				
20.	All new employees have been oriented to all aspects of the safety/risk management program?				

EXTERIOR BUILDING		YES	NO	DATE TO BE MET	COMMENTS
1. Roadways and Parking Lots:					
A.	Roadways are free from potholes and hazards.				
B.	Parking spaces, crosswalks, and handicapped spaces are marked.				
C.	Paint strips are in good repair				
II. Exterior Lighting:					
A.	All parking areas, public and employee are well lit.				
B.	All approaches to building entrances are adequately lit for employees and the public at night.				
C.	All entrances are adequately lighted for employees and public				
III. Exterior Signage:					
A.	All lighted signs are functioning and in good physical repair.				
B.	All other signs are in good repair, neat and secure.				
C.	The signage contains enough information to direct visitors to facility services.				
IV. Walks, Sidewalks, and Stairwells:					
A.	The surfaces of the walks are smooth, in good repair and relatively level to pose no hazard to pedestrians.				
B.	Shrubs, trees and plantings adjacent to walks pose no hazard to pedestrians using the walks.				

C.	No limbs overhand to snag or hit one's head or body.				
D.	No bushes project into the walkway to snag, cut, or abrade one's body or clothes.				
V. General Grounds/Lawns:		YES	NO	DATE TO BE MET	COMMENTS
	All areas of lawn have smooth contours and no holes or tripping hazards.				
	Area is free of debris, trash, noxious plants, and tall weeds.				
	Trash cans are provided and are in good repair.				
	All dead trees, dead limbs, or low overhanging limbs have been removed.				
VI. Surface Water Drainage:					
A.	All storm water drains are clear of trash and debris.				
VII. Exterior Building Features:					
A.	Antennae, mast, towers, and poles are secure.				
B.	Exterior wall surfaces are in good repair				
C.	Exterior emergency exit doors are not obstructed.				
VIII. General Safety:					
A.	Temporary hazards are marked with signs/barricades.				

FINDINGS:

RECOMMENDATIONS:

FOLLOW UP:

COMPLETED BY: _____ DATE: _____

JONES WELLNESS CENTER

MONTHLY INFECTION CONTROL SURVEILLANCE

Date: _____

PERSON(S) PERFORMING SURVEY: _____

ITEM	YES	NO	N/A	COMMENTS
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KITCHEN-PREVENTION INFECTION CONTROL SURVEILLANCE

Do all the following meet Infection Control Standards?

If being done, meets standards, and there are no problems-mark Yes

If a problem does not meet standards and is not being done or there is a problem-mark “No”.

Tables-Clean				
Sink-Clean				
Water Cooler-Clean				
Refrigerators-Clean				
Freezer-Clean				
Microwave-Clean				
Floors-Clean				
Teapot-Clean				
Garbage Cans-Clean & Covered				

BATHROOMS-PREVENTIVE INFECTION CONTROL SURVEILLANCE

Do all the following meet Infection Control Standards?

If being done, meets standards, and there are no problems-mark “Yes”

If a problem, does not meet standards, and is not being done or there is a problem-mark “No”

ITEM	YES	NO	N/A	COMMENTS
Employee Bathroom/s				
Clean				
Cleared of storage material				
Commode clean				

Soap Available				
Paper Towels				
Clean Floors				
Free of Orders				
Garbage Cans-Clean & Covered				

OFFICES-PREVENTIVE INFECTION CONTROL SURVEILLANCE

Do all the following meet Infection Control Standards?

If being done, meets standards, and there are no problems-mark “Yes”

If a problem, does not meet standards, and is not being done or there is a problem-mark “No”

ITEM	YES	NO	N/A	COMMENTS
Floors-Clean				
Free of Food				
Furniture Clean				

HALLWAYS-PREVENTIVE INFECTION CONTROL SURVEILLANCE

Do all the following meet Infection Control Standards?

If being done, meets standards, and there are no problems-mark “Yes”

If a problem, does not meet standards, and is not being done or there is a problem-mark “No”

ITEM	YES	NO	N/A	COMMENTS
Floors-Dry & Clean				

FINDINGS:

ACTIONS:

FOLLOW-UP:

Signature: _____ Date: _____

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.02.06.01-1
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Safe, Functional Environment - Client Areas

PURPOSE:

To ensure for the safety and wellbeing of the clients and staff

SCOPE:

Applies to all Jones Wellness Center's facilities.

POLICY:

1. It is the policy of Jones Wellness Center to ensure that the premises and equipment are sufficient to accommodate the services in the facility's scope of services, and the individuals served.
2. The Founder shall ensure that:
 - a. The facility has:
 - i. Room that provides privacy for a client to receive treatment.
 - b. At least one bathroom is accessible from a common area that:
 - i. May be used by clients and visitors;
 - ii. Provides privacy when in use; and
 - iii. Contains the following:
 1. At least one working sink with running water,
 2. At least one working toilet that flushes and has a seat,
 3. Toilet tissue for each toilet,
 4. Soap in a dispenser accessible from each sink,
 5. Paper towels in a dispenser or a mechanical air hand dryer,
 6. Lighting, and
 7. A window that opens or another means of ventilation.
 - c. A client bathroom provides privacy when in use and contains:
 - i. A shatter-proof mirror, unless the client's treatment plan allows for otherwise;
 - ii. A window that opens or another means of ventilation;
 - iii. Nonporous surfaces for shower enclosures and slip-resistant surfaces in tubs and showers;
 - iv. Plumbing, piping, ductwork, or other potentially hazardous elements concealed above a ceiling;
 - v. If the bathroom or shower area has a door, the door swings outward to allow for staff emergency access;
 - vi. If grab bars for the toilet or other assistance devices are identified in the patient's treatment plan, the bathroom has grab bars or the other assistive devices-all which are anti-ligature proof; and
 - vii. Tamper-proof resistant lighting fixtures and electrical outlets.
 - d. If a client's bathroom door locks from the inside, an employee has a key and access to the bathroom.
 - e. A client bathroom must have a ceiling that is secured from access or at least 9 feet in height and a ventilation grille that is secured and has perforations that are too small to use as a tie-off point or sufficient height to prevent client access.

PROCEDURE:

1. It is the responsibility of the Leadership Team to ensure all facilities are designed and operated in accordance with state regulations

2. The Founder is responsible for identifying and securing property which adheres to the physical requirements of the regulations.
3. Jones Wellness Center legal counsel is responsible for reviewing and processing the lease or purchase agreements.
4. All leases are maintained in the corporate office through the “payables” department.
5. Jones Wellness Center has a web-based monthly or as needed purchasing process.
6. Items or materials needed for compliance with the regulations are to be sent to the Leadership Team on a monthly or as needed basis.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.02.06.01-2
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Safe, Clean Environment-Housekeeping

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimize risks in the environment of care.

SCOPE

This policy and procedure apply to all staff and facilities operated by Jones Wellness Center.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

1. It is the policy of Jones Wellness Center to have a systematic approach for maintaining the facilities clean and in good repair.
2. Jones Wellness Center has developed an Operations Manual inclusive of checklists indicating the responsibility of the housekeeping staff and property manager which include but are not limited to:
 - a. Inside of buildings
 - b. Outside the building
 - c. Prevention Checklist

PROCEDURE

See Attached Section of Operational Manual.

Housekeeping

1. Housekeeping not only plays the most significant part in keeping our surroundings clean and tidy but also in giving the property and other important areas an aesthetic appearance.
2. The artistic visual appearance tied to the clean and welcoming feeling of our properties is key to making our clients feel at home.
3. There are many other key jobs in a housekeeping department which help the hospitality industry to run the operations smoothly.
4. We have penned the most important and updated information in the field of housekeeping which would help you (the employee) know and be aware of this department.

Housekeeping General Routine

Housekeeping is responsible for reporting any maintenance issues that are noticed.

Outside of building:

1. Pick up any trash (including cigarette butts).
2. Sweep off any stairs or walkway.
3. Empty ashtrays as needed.

Inside of building:

1. Ceilings:
 - a. (To be done in all rooms and offices including bathrooms and kitchens)
 - b. Clean fans and vents.
 - c. Dust corners for cobwebs.
 - d. Dust all light fixtures.
2. Walls: (To be done in all rooms and offices including bathrooms)
 - a. Remove all dirt and or scuffs.
3. Floors: (To be done in all rooms and offices including bathrooms)
 - a. Sweep, mop, or vacuum all surfaces lifting any rugs and getting under all furniture.
4. Windows: (To be done in all rooms and offices including bathrooms)
 - a. Wash windowsills and window treatments.
 - b. Windex all windows and glass doors.
 - c. Wipe out all tracks for windows and doors.
5. Bathrooms:
 - a. Shine all stainless-steel fixtures and appliances.
 - b. Scrub, disinfect and sanitize toilets (including under and behind the toilets).
 - c. Wipe down vanities, and countertops using proper chemicals.
 - d. Make sure all toilet paper and paper towels are fully stocked.
6. All rooms:
 - a. Empty all trash cans and provide 2 extra liners per can.
 - b. Additional housekeeping tasks needing to be addressed are to be properly documented and sent to the supervisor.

Housekeeping Procedures

1. Chemical Usage

- a. Before starting to clean, read product and equipment labels and usage instructions.
- b. Wear recommended personal protective equipment (PPE), which may include rubber or surgical-type gloves, goggles, dust mask or respirator, earplugs, or other equipment.
- c. Provide directions for the proper rinsing and disposal of expended or empty chemical solution containers.
- d. Use the appropriate technology (coarse spray or squirt bottles, automatic chemical dispensers on powered equipment, etc.) for applying the chemical product to avoid aerosolizing, overuse, or waste.
- e. In case of emergency, consult SDS for further instructions.

2. Dress Code

- a. Athletic or walking shoes (all of which must be in good repair and clean).

- b. Closed-toe and closed-heel shoes are required for all staff.
- c. All staff are to arrive with their hair pulled back and a clean uniform daily.

3. Measurement and Use of Cleaning Supplies

- a. Chemicals are diluted according to each individual chemical and the task to be performed.
- b. Each chemical is used according to safety regulations stated on each chemical's container.

4. Vacuum and Carpet Care

- a. Use the crevice attachment (if you have one) on your vacuum cleaner first.
- b. Vacuum the edges in each room before you vacuum the carpet.
- c. Vacuum horizontally in each room.
- d. Vacuum vertically in each room. Go over the carpet twice, but this technique ensures that the carpet is lifted and the dirt that may be embedded is removed.
- e. Vacuum from the furthest corner away from the door and vacuum your way out of the room.

5. Cleaning or Non-Carpeted Floors

- a. Wood Floors
 - i. Use cleaners that won't leave a film or residue.
 - ii. Use a professional hardwood floor cleaner to remove occasional scuffs and heel marks (just spray some cleaner on a cloth and rub the stained area lightly).
 - iii. Minimize water exposure and clean spills immediately.
 - iv. Don't use ammonia cleaners or oil soaps on a wood floor; they'll dull the finish.
- b. Laminate Flooring
 - i. Use soap-based detergents or "mop-and-shine" products.
 - ii. Don't use abrasive cleaners, steel wool or scouring powder.
 - iii. Don't flood your floor with water or cleaner.
- c. Tile Flooring
 - i. Clean up spills as quickly as possible so your grout won't become stained.
 - ii. Don't use steel wool, scouring powders, or other abrasives that can scratch the finish of your ceramic tile.
 - iii. Don't use bleach or ammonia-based cleaners — these products can discolor your grout if used too often.

6. Furniture Cleaning and Washing

- a. Leather Furniture Cleaning
 - i. Stay away from water as much as possible, as this could stain the material.
 - ii. Apply cleaning products made with oils and waxes, like saddle soap or leather wipes.
 - 1. This cleans while also moisturizing the furniture, preventing it from drying out and cracking and protecting it from future dirt and stains.
- b. Upholstered or Microfiber Furniture Cleaning
 - i. Clean up surface stains as soon as possible.
 - ii. Vacuum your sofas and chairs at least once a week to keep dust and dirt to a minimum and prevent grime from becoming ground in with constant use.
 - iii. If any parts of the sofa or chair are removable, make sure to wash them regularly.

7. Daily Housekeeping Routine

- a. Bathrooms
 - i. Toilets disinfected inside and out.
 - ii. Chrome fixtures cleaned and shined.
 - iii. Countertops disinfected.
 - iv. Clean the front and inside of the cabinet.
 - v. Sinks scrubbed and disinfected.
 - vi. Floors vacuumed, swept, and mopped under all furniture.
 - vii. Windowsills washed/dusted.
 - viii. Dust blinds, door frames, and ledges.

- ix. Baseboards dusted.
- x. Trash emptied and replaced the can liner.
- xi. Mirrors cleaned.

b. Other Areas, including Hallways and Offices

- i. Upholstered furniture vacuumed; leather furniture wiped down with proper wipes.
- ii. Cushions and pillows fluffed and straightened.
- iii. Fingerprints were removed from all woodwork, doorframes, and switch plates.
- iv. Ceiling fans dusted.
- v. Lamps cleaned and lampshades dusted.
- vi. Picture frames dusted.
- vii. Furniture dusted.
- viii. Floors vacuumed, swept, and mopped (including under all furniture).
- ix. Dust blinds, door frames, and ledges.
- x. Windowsills washed.
- xi. Baseboards dusted/washed weekly.
- xii. Trash emptied and replaced the can liner.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.02.06.03-1
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Facilities Support Participation

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimize risks in the environment of care.

SCOPE

This policy and procedure applies to all staff and facilities operated by Jones Wellness Center.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

It is the policy of Jones Wellness Center, that no food is provided.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.02.06.05
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Demolition, Renovation or New Construction

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimize risks in the environment of care.

SCOPE

This policy and procedure apply to all staff and facilities operated by Jones Wellness Center.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

1. When planning new, altered, or renovated space, Jones Wellness Center uses one or more of the following design criteria:
 - a. State rules and regulations
 - b. American Institute of Architects: Guidelines for Design and Construction of Hospital and Healthcare Facilities 2010 edition
 - c. Other reputable standards and guidelines that provide the equivalent design criteria.
2. In addition, to ensure that as part of their contract, contractors and sub-contractors, their officials, employees, and associates visiting or conducting business on the premises of the facility in connection with contract work will conform to the requirements contained in this document.

PROCEDURE

1. If the facility is planning new, altered or renovated space, the facility shall refer to Jones Wellness Center's corporate support.
2. The minimum requirements expected of contractors prior to, during, and after construction and renovation projects is as follows:
 - a. **Contractor Obligations**
 - i. All normal safety procedures as dictated by good construction management shall be complied with as a matter of course.
 - ii. Contractor and all the contractor's employees and subcontractors will abide by Jones Wellness Center's Rules of Contractor Conduct.
 - b. **During Work**
 - i. While performing any construction or renovation project, contractors will comply with the following requirements:
 1. All applicable safety regulations of the local, state, and federal codes.
 2. Any Interim Life Safety measures, infection control measures, hot work precautions, etc. that are deemed necessary by the Founder, the authority having jurisdiction and/or the architect of record.
 - ii. Safeguard the work site and perform all operations in a manner that will ensure that their employees, facility personnel, patients, visitors, and others who may gain access to the work site are not endangered.
 1. Provide and maintain warning lights, barricades, and other required safety equipment.

- iii. Ensure that contractor employees do not enter facility buildings other than the work site and public areas.
 - 1. In general, facility services are not available to contractors on any favored basis.
- iv. Comply with emergency orders of safety/security personnel of the facility (engineering/maintenance, medical staff, and department personnel).
- v. Keep the premises free from accumulation of waste materials or rubbish caused by project operations.
- vi. Request and abide by the instructions of the department regarding the protective measures required when the work site involves hazardous conditions potentially dangerous to the contractor's personnel.

c. Upon Completion of Work

- i. Once the construction or renovation project is completed, the contractor will comply with the following requirements:
 - 1. Remove all materials and rubbish from the project away from facility property including tools, construction equipment, machinery and surplus materials.
 - 2. Leave the work area in a clean, satisfactory condition.
- ii. Under the terms of the contract, this facility will have the authority to reject work which does not conform to the contract documents.

d. **Fire Prevention**

- i. Contractors are responsible for fire prevention on the job site and will comply with the following requirements:
 - 1. Obtain, as far in advance as possible, permission from the Founder before welding, cutting, brazing, soldering, or any other work involving open flame or producing sparks on the job site.
 - a. A Hot Work Permit will be required – refer to Hot Work Permit Policy LS.01.02.01 EP2.
 - 2. Notify the department prior to the start of all procedures that may produce smoke or unusual odors.
 - 3. Provide fire extinguishers, temporary fire protection devices, and fire watch personnel as required by the Interim Life Safety Policy LS.01.02.01 EP3.
 - 4. Remove combustible waste materials daily at contractor's expense.
 - a. Accumulation and burning of rubbish and combustible waste on the work site are prohibited.
 - 5. Obtain approval from the department prior to making connections to fire hydrants, the fire warning system or any alarm system.
 - 6. Obtain approval and specific locations from the Safety Officer/Founder prior to moving facility fire protection equipment as part of contract requirements.
 - a. Request arrangements for such conferences and supervision if required.
 - b. Implement Interim Life Safety Measures as required.
 - 7. Notify and coordinate with the Founder before opening or closing valves or switching electrical loads on and off.
 - a. The uninterrupted operation of major services is a requirement for proper health care service.
 - b. Coordinate with the Founder in advance for connections involving service shutdowns.
 - 8. Obtain approval from the Founder, Property Manager and local authorities for location and utility connections before erecting construction trailers on the premises.
 - 9. Secure contractor property and material from theft and vandalism.
 - 10. Control personnel access to the work site and exclude all authorized persons from those sites.

11. Report any known violation of laws or regulations or the discovery of unaccountable property, either privately or facility owned to the Founder immediately.

e. Motor Vehicle and Parking Regulations

- i. All persons driving motor vehicles on the facility premises in connection with contractor business, including employees in their personal vehicles, will abide by the official facility motor vehicle and parking regulations as a condition of being permitted to enter the premises and as a part of the contract requirements.

f. Parking

- i. Employees of contractors are not permitted to park in the general parking areas of the facility except as approved by the Property Manager.
 1. Contractors will provide or arrange for parking facilities for their employees.

g. Truck Routes

- i. Contractors and subcontractors will use only designated truck routes for the delivery of material and other contract operations.
- ii. Designation of such truck routes shall be required and approved before the start of construction.
- iii. Contractors are responsible for notifying all suppliers to make deliveries by the designated routes and for posting approved signs where necessary.

h. Vehicle Debris

- i. Vehicles operated on facility property in connection with contract work will be loaded in such a manner as to minimize spillage of dirt, gravel, and other debris.
- ii. Contractors will remove inadvertent spillage of debris, construction materials, and/or scrap immediately.
- iii. Dirt and gravel spillage or accumulations will be removed as soon as the Property Manager.

i. Accidents

Any vehicular accident on the facility premises must be reported to the Safety Officer as soon as possible. The driver(s) of the vehicle(s) involved will remain on the premises until released and will furnish required reports of the accident.

Sanitation

Contractors will use special care in keeping work sites free from debris and food wrappers. Contractors will provide covered trash containers and are responsible for the sanitary collection and daily removal of the trash in these containers from the facility grounds.

Code and Organization Regulatory Requirements

All work must conform to healthcare facility codes. In cases of a code interpretation in dispute, the contractor agrees to arbitration by Jones Wellness Center.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.03.01.01
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Staff Orientation to Environment of Care

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimizes risks in the environment of care.

SCOPE

This policy and procedure apply to all staff and facilities operated by Jones Wellness Center.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

It is the policy of Jones Wellness Center for all staff to be oriented to the environment of care in which they work.

PROCEDURE

1. Upon hire, all staff are required to attend the New Employee Orientation.
2. New Employee Orientation includes but is not limited to:
 - a. Fire Drills/Disaster Drills
 - b. Infection Control
3. Location specific orientation includes:
 - a. Location of Utility Shut Off
 - b. Handling of Hazardous Materials
 - c. Each member of staff is to review and sign the Facility Operational Manual, on-site at the facility.
4. The Founder is responsible for providing each employee with the Environmental of Care Employee Quiz.
 - a. The quiz is to be maintained in the employee file.

ENVIRONMENT OF CARE ANSWER SHEET FOR 2016 MONTHLY QUIZZES

The Safety Officer is responsible for EOC quizzes and determining what the answers should be for the facility. These answers should be a part of the each of the 7 EOC Plans.

Emergency Preparedness Management Quiz

1. Staff member will be able to identify one Disaster Code

Question: What is one Disaster Code?

Answer: An Emergency Code can be any of the following:

Code Red:	Fire Emergency
Code Blue:	Medical Emergency
Code Grey:	Security/Psychiatric Emergency
Code Yellow:	Hazardous Material Spill/Leak
Code Green:	Bomb Threat
Code Purple:	Weapons on Premises
Code D:	External Emergency (Such as severe weather, Civil Disturbance, etc).

2. Staff member able to describe their role and responsibilities regarding hurricane preparedness.

Question: What is role and responsibility during hurricane preparedness?

Answer: Depending on the person's position that should be able to describe what their role and responsibility would be. This should be of the facilities Hurricane Plan.

Hazardous Material & Waste Management

1. Staff member aware of the location of the MSDS manual/s.

Question: Where is the location is the MSDS Manuals?

Answer: To be determined, as each facilities keep the MSDS manuals in a different place.

2. Staff member aware of the locations of PPE.

Question: Where is PPE (Personal Protective Equipment) kept? This would include gloves, any other equipment.

Answer: To be determined, as each facilities keep the PPE equipment in a different place.

Life Safety Management

Staff member able to describe what their role is in a CODE RED

Question: What is your role in a CODE RED?

Answer: Depending on the person's position that should be able to describe what their role and responsibility would be. This should be in the facilities Fire Plan.

Physical Environment Management

1. Staff member able to accurately describe where find information from administration

Question: Where do find information from administration?

Answer: Depending on the person's position that should be able to describe where they would find information from administration.

2. Staff member is able to verbalize the proper procedures related to the completion of work orders and/or repair requests.

Answer: You will need to find out the answer.

Security Management

1. Staff member is able to verbalize what incidents are reportable to administration.

Question: What incidents are reportable to administration?

Answer: Any unusual events, Unexpected death, suicide, fire, felonious crime, abuse or neglect that is reported to law enforcement for investigation, assault resulting in hospitalization, or bomb threats

2. Staff member is able to verbalize where Incident Report forms are kept.

Question: Where are incident reports kept?

Answer: Facility to determine what answer would be.

3. Staff member is able verbalize what to do if client confidentiality is breached.

Question: What is your role if a client's confidentiality is breached?

Answer: This will depend on the facilities policy and procedure on confidentiality.

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.04.01.03
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: EC Data Analysis

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimize risks in the environment of care.

SCOPE

This policy and procedure apply to all staff and facilities operated by Jones Wellness Center.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

PROCEDURE

1. It is the policy of Jones Wellness Center to collect and analyze information to monitor conditions in the environment.
2. Jones Wellness Center has established monitoring tools to collect data on the following:
 - a. Incident reports concerning injury, occupational illnesses, staff injury, damage to the facility or its property, security, fire safety management problems.
 - b. Maintenance of equipment, grounds, and facilities.
 - c. Inspections, both internal and external.

PROCEDURE

1. It is the responsibility of the Founder to ensure all data elements are collected monthly and submitted to the Safety Committee/ Performance Improvement Committee.
2. Monthly, the Leadership Team, which is the Performance Improvement Committee, participates in the analysis of the data collected and identifies opportunities to resolve environmental safety issues.
3. Any deficiencies will be addressed immediately.

Environment of Care

"ICES" - Information Collection and Evaluation System

PI Goal /Indicator	Target Goal Compliance	Actual Compliance 1Q, Jan, Feb, Mar	Actual Compliance 2Q, Apr, May, June	Actual Compliance 3Q, July, Aug, Sept	Actual Compliance 4Q, Oct, Nov, Dec
Safety Management					
Safety inspections are conducted quarterly	100%				
Safety training provided to new hires and annually to all employees	100%				
Life/Fire Safety Management					
Fire drills are performed per schedule	100%				
Life safety support systems are inspected and maintained per schedule	100%				
Security Management					
There will be no more than two incidents per quarter involving security issues	<3				
Employees are educated regarding Security Management during new hire orientation and annually	100%				
Emergency Preparedness Management					
Emergency drills are conducted twice per year	100%				
Employees are educated regarding Emergency Preparedness during new hire orientation and annually	100%				
Utilities Management					
Utility system problems and/or failures will be reported within 24 hours of their occurrence	100%				
Employees are educated regarding the reporting of utility system failures	100%				
Hazardous Materials & Waste Management					
Hazardous materials are labeled and stored properly	100%				
Employees are educated regarding hazardous materials & waste management during new hire orientation and annually	100%				
Physical Environment Management					
Employees demonstrate knowledge of physical environment management plan	900%				
Employees are educated regarding physical environment management during new hire and annual trainings	100%				

TITLE: ENVIRONMENT OF CARE	REFERENCE: EC.04.01.05
REVIEW AND APPROVAL: 9/10/2024	SUBJECT: Performance Improvement

PURPOSE

To assist Jones Wellness Center in planning and facilitating activities that minimize risks in the environment of care.

SCOPE

This policy and procedure apply to all staff and facilities operated by Jones Wellness Center.

RESPONSIBILITY

It is the responsibility of the Founder or designee to ensure the policy and procedure is implemented and maintained.

POLICY

All life safety code deficiencies shall be documented in a written work order or on the electronic plan for improvement (ePFI) as outlined. This policy only applies to those buildings/facilities accredited by the Joint Commission.

PROCEDURE

1. Upon identification of a life safety code deficiency, a written work order is generated and submitted to the Property Management department.
2. The Founder is responsible for facilitating a phone or email to follow up on electronic work orders and prioritize corrective action.
3. Documentation of the work orders and corrective action is maintained, reviewed monthly and reported quarterly to the Leadership Team.