

**MILLE LACS BAND OF OJIBWE
HEALTH AND HUMAN SERVICES POLICY & PROCEDURE**

Department: Behavioral Health-Four Winds Lodge

Policy Number: HHS-BH-FW 4750

Policy Title: Utility Management Plan

Attachments: Environmental Tours Checklist

Revision History:

Revised by/Date: Hannah Schiemann 4/2018

Approved by:

Date:

Lindsay Misquadace-Berg, Treatment Director (Interim)



7-23-19

Approved by:

Date:

Nicole Anderson, Commissioner of HHS



7-26-2019

POLICY STATEMENT:

The Utility Systems Management Program is designed to assure design and installation of appropriate utility systems. The program is designed to assure continual availability of a comfortable, safe, and effective client Four Winds Lodge environment through a program of planned maintenance, timely repair, and evaluation of all events that could have an adverse impact on the safety of clients or staff.

PURPOSE:

The mission of Four Winds is working with others; we provide traditional and innovative substance abuse services and assist people in improving their quality of life. Consistent with this mission, Four Winds has established, and provides ongoing support for the Utility Systems Management Program described in this plan.

The purpose of the Utility Systems Management Plan is to support a safe client Four Winds Lodge environment by managing risks associated with the operation and maintenance of utility systems. The plan includes processes for selection, operation and maintenance, and training designed to assure safe, effective performance of utility systems.

PROCEDURE:

I. FUNDAMENTALS

- a) Critical components of utility systems require preventative maintenance to minimize the potential for failures.
- b) Emergency response procedures are required to manage utility system failures or service disruptions.

II. OBJECTIVES

- a) Provide a safe and comfortable client Four Winds Lodge environment.
- b) Assure operational reliability of utility systems by performing recommended maintenance.
- c) Identify opportunities to improve utility system performance.
- d) Train employees to use utility systems appropriately, including appropriate response to failures or disruptions.

**MILLE LACS BAND OF OJIBWE
HEALTH AND HUMAN SERVICES POLICY & PROCEDURE**

III. ORGANIZATION AND RESPONSIBILITY

- a) The Safety Committee reviews reports and, as appropriate, communicates concerns about identified issues and regulatory compliance to the landlord or to the supervisors. The Safety Committee provides support to facilitate the ongoing activities of the utility systems.
- b) The Safety Committee receives regular reports of the current status of the Utility Systems Management Program. The Safety Committee reviews the reports and, as necessary, communicates concerns about key issues and regulatory compliance to leadership or other appropriate staff.
- c) Leadership collaborates with the landlord for operation and maintenance of the utility systems and management of contractors working on the utility systems.
- d) The supervisors are responsible for orienting new staff to the department and, as appropriate, to job and task specific uses of utility systems.
- e) Individual employees are responsible for learning and following job and task specific procedures for safe utility system operation, maintenance, use and reporting of problems.

IV. PROCESSES OF THE UTILITY SYSTEMS PLAN

- a) The landlord is responsible for managing the planning, design, construction, and commissioning of utility systems. The construction and commissioning programs are designed to assure compliance with codes, regulations and standards and to meet the specific needs of the occupants of every space. In addition, the design process is intended to assure performance capability in excess of current needs to help assure that changing demands on utility systems can be managed without major capital investment.
- b) The landlord is responsible for setting maintenance standards to ensure a safe and comfortable environment.
- c) The landlord, HHS Safety Program Manager and other appropriate staff and consultants collaborate to identify needs for design to minimize the potential for the spread of infections. Spaces are designed, managed, and maintained to assure a consistent level of building and utility system performance over time.
- d) Critical needs for replacement due to failure are immediately brought to the attention of Leadership for action.
- e) Inventory
 - i) All utility systems serving client sleeping or treatment areas which play a role in life support, infection control, environmental support, equipment support, or communications are automatically included in the program.
 - ii) Included utility systems are the emergency electrical system, the normal electrical system, elevator, heating, ventilation, and air conditioning system, plumbing and communications systems.
 - iii) All systems and components are tested prior to initial use. Inspection, testing and maintenance schedules and procedures are developed to ensure continued safe and efficient operation.
- f) Inspection, Testing, and Maintenance
 - i) The landlord is responsible for managing the inspection, testing, and maintenance process.
 - ii) Inspection, testing, and maintenance activities related to critical operating components of utility systems are reported to the Safety Committee quarterly.
- g) Incident Reporting and Investigation
 - i) Supervisors are responsible for managing the Utility Systems incident reporting process.
 - ii) The HHS Safety Program Manager and the supervisors are responsible for analyzing reported utility related incidents and for making reports to the Safety Committee. The analysis looks for patterns of behavior or circumstances that need to be addressed to reduce the risk of occurrence in the future. The summary information is also reported to the FOUR WINDS LODGE Leadership. Feedback from the various committees and teams is used to refine the Utility Systems program.

MILLE LACS BAND OF OJIBWE
HEALTH AND HUMAN SERVICES POLICY & PROCEDURE

- h) Orientation and Education Program
 - i) Each new employee participates in a General Orientation program which includes information related to the Utility Systems program.
 - ii) Staff Development is responsible for conducting the general orientation program. When possible, new employees are scheduled to attend the General Orientation program on their first day of work, however new staff members can complete the program anytime within the first thirty days of employment. The Staff Development Department records attendance for each new staff member who completes the General Orientation program. Attendance records are maintained in the Staff Development Department.
 - iii) New employees also receive a department-specific orientation. The supervisors are responsible for providing new employees with a department-specific orientation to the Utility Systems program. The goal of the department orientation program is to provide new staff members with current information regarding area-specific utility system issues, specific job-related hazards, protective measures to avoid injury or illness, and hazards specific to specialized utilities used by the department. New staff members must complete their department-specific orientation within thirty days of employment.
- i) Emergency Procedures
 - i) The supervisors are responsible for coordinating the development of emergency procedures for Utility Systems.
 - ii) The emergency response procedures provide clear, specific instructions for staff responding to an emergency.
- j) Annual Evaluation
 - i) The Safety Program Manager is responsible for coordinating the annual evaluation of the plans associated with Management of the Environment of Four Winds Lodge.
 - ii) The annual evaluation uses a variety of information sources including the reports from internal policy and procedure review, incident report summaries, Safety Committee reports, and summaries of other activities. In addition, findings by outside agencies such as accrediting or licensing bodies, or qualified consultants are used. The annual review examines the objectives, scope, performance, and effectiveness of the Utility Systems program. The report provides a balanced summary of the Utility Systems program performance over the preceding 12 months. Strengths are noted and deficiencies are evaluated to set goals for the next year or longer term future.
 - iii) The Safety Committee reviews and approves the annual report. The deliberations, actions and recommendations of the committee are documented in the minutes. The annual evaluation is also distributed to Leadership. Once the review is finalized, the Safety Administrator is responsible for implementing the recommendations in the report as part of the performance improvement process.

V. INSPECTION, TESTING, AND MAINTENANCE OF EMERGENCY POWER SYSTEMS

- a) The landlord is responsible for managing a program of inspection, maintenance, and testing of the essential electrical system. Each system motor/generator set is tested under connected load conditions monthly. Appropriate notice of each test run is forwarded to departments throughout the site. Appropriate testing parameters are recorded and evaluated. Any deficiency is immediately evaluated to determine the source of the problem and rectified.
- b) All automatic transfer switches are tested as part of the monthly generator load test.
- c) A program of regular inspection, maintenance, and testing of batteries, fuel stored on site, controls, and supervisory devices are managed by the landlord. All repair, calibration, and replacement needs are acted on immediately to assure system reliability.
- d) In addition to the regularly scheduled inspection, testing, and maintenance activities, the landlord is responsible for assuring evaluation of the impact of adding new loads to the system during construction or at the request of departments throughout the existing site. Any addition of a load that would result in

**MILLE LACS BAND OF OJIBWE
HEALTH AND HUMAN SERVICES POLICY & PROCEDURE**

an overloaded or poorly balanced system that could result in a safety shutdown will not be permitted until a suitable configuration can be designed or upgraded equipment is installed.

Internal and/or External References	CARE-Utility Management Plan 2/1/2014
Compliance - Posting Date	7/26/19
Replaces – Policy Number	
Next Review - Due Date	7/26/2020

ENVIRONMENTAL TOURS CHECKLIST
Safety Management

DATE _____

Updated:6:5.17
 Revised:6:5.17

No.	✓	Item/Room /Situation	SCORE		IAM	Corrective action taken
			POSSIBLE			
√ = Applicable item to evaluate during audit.			NA=NOT APPLICABLE 1 = NOT MET 2 = PARTIALLY MET 3 FULLY MET		Interim Abatement Measures	
Scoring Column: Enter the appropriate number (2,1 or) in the score column for each item.						
1		SAFETY				
1.1		Building Structure				
1.1.1.		Are floor surface's clean, cleanable & maintained?	3			
1.1.2.		Are walls in good repair?	3			
1.1.3.		Are ceilings intact and completely enclosed?	3			
1.1.4.		Are the doors, locks, windows functional?	3			
1.1.5.		Is facility walking surfaces free of tripping hazards (uneven, slippery, damaged, etc)	3			
1.1.6.		Other	3			

ENVIRONMENTAL TOURS CHECKLIST
Safety Management

1.2	Electrical System & Equipment				
	Are all electrical components in good operating condition? (No loose, broken or missing switches or				
1.2.1.			3		
	Are all permanent wiring systems free of exposed wires?				
1.2.2.			3		
	Are all faulty cords (damaged, frayed, cut, etc.) removed from service?				
1.2.3.			3		
	Are burned out or missing light bulbs replaced when discovered?				
1.2.4.			3		
	Are all panels and breakers labeled as to function?				
1.2.5.			3		
	Are extension cords prohibited from use as permanent wiring?				
1.2.6.			3		
	Is all electrical equipment in use "UL" approved? It must have a "UL" label.				
1.2.7.			3		
	Is biomedical equipment properly maintained?				
1.2.8.			3		

ENVIRONMENTAL TOURS CHECKLIST
Safety Management

DATE _____

Updated:6.5.17
 Revised:6.5.17

1.2.9.	No fans in patient areas.		3		
1.2.10.	Are all powered belts, pulleys, chains & sprockets completely enclosed?		3		
1.2.11.	Is the Utility Failure plan available to staff?		3		
1.2.12.	Are Light bulbs protected from damage by having covers in place?		3		
1.2.13	Other		3		
1.3	General housekeeping				
1.3.1.	Are aisles and work areas maintained in safe condition, free of cracks, holes, wires, pipes, or unauthorzied storage of equipment or supplies?		3		
1.3.2.	Are egress hallways clear of obstructions?		3		

ENVIRONMENTAL TOURS CHECKLIST
Safety Management

1.3.3	Are areas generally orderly and cleaned?		3		
1.3.4	Are the floor surfaces free of hazards?		3		
1.3.5	Storage space with everything in its place and off the floor?		3		
1.3.6	Are items off the handrails in all areas?		3		
1.3.7	Are linen carts covered?		3		
1.3.8	Are all chemicals/disinfectants stored appropriately?		3		
1.3.9	Trash containers appropriate?		3		
1.3.10	Are appliances clean?		3		

ENVIRONMENTAL TOURS CHECKLIST
Safety Management

DATE _____

Updated:6.5.17
 Revised:6.5.17

1.3.11.	Are ladders, stair steps, scaffolds and platforms in good repair?	3		
1.3.12	Is all furniture clean and in good repair?	3		
1.3.13	Other	3		
1.4	Grounds			
1.4.1	Are the facility's grounds free of slippery parking areas, sidewalks, stairs, etc?	3		
1.4.2	Are trash collection bins covered and trash collection areas clean and free of debris?	3		
1.4.3	Are outside areas well lit?	3		
1.4.4	Other	3		
2	UTILITIES			
2.1	Plumbing & Heating			
2.1.1	Are all exposed hot piping covered?	3		

ENVIRONMENTAL TOURS CHECKLIST
Safety Management

2.1.2	Are there any leaks or leaking fixtures?	3		
2.1.3	Are all drains clear?	3		
2.1.4	Other	3		
3	Security			
3.1.1	Is staff wearing their ID badge?	3		
3.1.2	Is the fence secure? Accessible?	3		
3.1.3	Do all have the ability to exit secure areas in the event of an emergency?	3		
3.1.4	Med room locked?	3		
3.1.5	Appropriate doors locked for security?	3		
3.1.6	Potential SIB/suicide risks?	3		

ENVIRONMENTAL TOURS CHECKLIST
Safety Management

DATE _____

Updated:6.5.17
 Revised:6.5.17

3.1.7	Other		3		
4	HAZARDOUS MATERIAL & WASTE				
4.1.	Infectious Waste				
4.1.1.	Is Infectious waste disposed of properly?		3		
4.1.2.	Are needles disposed of properly?		3		
4.1.3	Sharps container stored behind locked door?		3		
4.1.4.	Clean linen covered and stored properly?		3		
4.1.5	Dirty linen covered and stored properly?		3		
	Other		3		
4.2.	Hazardous Material & Waste				
4.2.1.	Is hazardous waste stored properly and labeled?		3		

ENVIRONMENTAL TOURS CHECKLIST
Safety Management

4.2.2.	A MSDS is available for all hazardous substances?		3		
4.3.	Personal Protective Equipment (PPE)				
4.3.1.	PPE available as indicated on MSDS?		3		
4.3.2.	Eye wash stations inspected and flushed weekly? Is this inspection documented?		3		
4.3.3	Unobstructed access to eyewash station? Signage to direct staff to location?		3		
4.3.4.	Other		3		
5	EMERGENCY PREPAREDNESS				
5.1.1	Are emergency procedures & utility outage plans (hard copies) available in the dept/unit?		3		
5.1.2	Are building evacuation routes posted?		3		

ENVIRONMENTAL TOURS CHECKLIST
Safety Management

5.1.3	Emergency supplies & equipment available?		3		
5.1.4	Are the emergency receptacles clearly marked?		3		
5.1.5	Do staff know where medical equipment is for their department/unit?		3		
5.1.6	Is a primary and secondary evacuation site identified?		3		
5.1.7	Does staff know communications, supplies and equipment is stored?		3		
5.1.8	Other		3		
6	FIRE PREVENTION/LIFE SAFETY				
6.1.1	Is staff carrying keys to fire alarms & extinguisher cabinets? Are the keys identifiable and do staff know the proper use of the keys?		3		

ENVIRONMENTAL TOURS CHECKLIST
Safety Management

6.1.2	Are fire extinguishers conveniently located and properly marked and accessible?	3		
6.1.3	Are the extinguishers ready for use, charged, pin intact?	3		
6.1.4	Are fire extinguishers tagged to show last service date (annual) and (monthly) inspection?	3		
6.1.5	Does staff know where the fire extinguishers are located?	3		
6.1.6	Do the fire extinguisher cabinets open properly?	3		
6.1.7	Are the fire sprinkler controls assessable?	3		
6.1.8	Are the fire alarm components impacted or obstructed?	3		
6.1.9	Is storage kept 18 inches below the fire sprinkler heads	3		

ENVIRONMENTAL TOURS CHECKLIST
Safety Management

6.1.10	Do fire/smoke doors maintain specific clearance between the floors and doors and between the doors and the door jams?		3		
6.1.11	Is there propping of doors?		3		
6.1.12	Do all fire doors close and latch?		3		
6.1.13	Are all egress corridor doors, which include patient rooms, hazardous rooms (linen, storage or laundry rooms etc) equipped with automatic door closures that allow the doors to close and latch closed?		3		
6.1.14	Are all the fire exits marked and exit lights functioning?		3		
6.1.15	Are all exit doors open completely and are free of ice & snow and other obstructions?		3		

ENVIRONMENTAL TOURS CHECKLIST
Safety Management

6.1.16	"Oxygen In Use" signs posted near oxygen storage areas and at patient room where oxygen is in use?	3		
6.1.17	Gas (oxygen) cylinders secured.	3		
6.1.18	Storage of combustible and/or flammable materials minimized and secure?	3		
6.1.19	Are fire lanes clearly marked?	3		
6.1.20	Are all fire hydrants accessible to Fire Department?	3		
6.1.21	Fire Department Connections	3		
7	MEDICAL EQUIPMENT			
7.1.1	Is all clinical equipment grounded, regularly inspected, and tagged to indicate use and inspection dates?	3		

ENVIRONMENTAL TOURS CHECKLIST
Safety Management

DATE _____

Updated:6.5.17
 Revised:6.5.17

7.1.2	Does the PM Inspection label indicate inspection date and the technician's initials?	3		
7.1.3	Is broken and unserviceable equipment properly labeled and removed from service?	3		
7.1.4	Other	3		
8	EMERGENCY GENERATOR			
8.1.1	Are the generator doors and access panels locked?	3		
8.1.2	Is the area around the generator free of obstructions?	3		
8.1.3	Other	3		
	TOTAL (Max Pts./ Pts. Rec'd)	0	282	
	Completed Monthly			

