



**COMMUNITY
MENTAL HEALTH**
OTTAWA COUNTY

HEALTH AND SAFETY PLAN

January – December 2021 Performance
January – December 2022 Plan

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Quick Summary

Review of 2021

Plan for 2022

2021 Accomplishments	2022 Needs
<ul style="list-style-type: none"> ➤ Tested all emergency procedures across all program sites during evenings & daytime hours. <ul style="list-style-type: none"> ○ Fire ○ Power Failure ○ Medical Emergency ○ Bomb Threat ○ Violent/Threatening Situation ○ Natural Disaster (Apr-Oct) Tornado/Severe Rain/Flood ○ Natural Disaster (Nov-Mar) Blizzard/Snow Storm/Ice Storm ➤ All sites reviewed monthly by building designees and annually by Health & Safety Coordinator ➤ All sites were reviewed by two separate external reviewers: <ul style="list-style-type: none"> ○ Mike Schaner, LBR, Muskegon CMH ○ Certified Act 154 Fire Safety companies ➤ Accessibility Plan was updated. ➤ Staff scheduled to complete annual Health & Safety Training ➤ Health & Safety Plan and policies were reviewed and updated. ➤ Maintained fleet of vehicles for all CMH locations. ➤ Participation in Region 6 Health Care Coalition to address effective Mental Health Disaster Planning within Region 6. ➤ CPTED (Citizen Response to Active Shooter Events & Situational Awareness) Training offered to all staff at all CMH Locations in March and October 2021. Provided by the Ottawa County Sheriff's Department. ➤ Ongoing training on Infection Control and information to staff on COVID and COVID Protocol 	<ul style="list-style-type: none"> ➤ Participate in review and revision of Accessibility Plan ➤ Assure annual updated Health & Safety training is provided ➤ Review and revise where necessary Health & Safety Policies and/or procedures annually. ➤ Health & Safety Coordinator to assure required "tests" of emergency procedures at all CMH locations are completed. ➤ Health & Safety Committee to meet on an ongoing basis. ➤ Ongoing monitoring of Little Green Button emergency alert system in all locations. ➤ Explore use of new phone system capabilities to replace the Little Green Button emergency alert system. ➤ Participate and plan with County Homeland Security Regional Planner and Public Health Preparedness Coordinator for county wide collaboration for emergency response. ➤ Participate in Region 6 Health Care Coalition to address effective Mental Health Disaster Planning within Region 6 and complete an updated Disaster Behavioral Health Plan. ➤ Additional training for new CMHOC staff on CPTED (Civilian Response to Active Shooter Events & Situational Awareness) with Ottawa County Sheriff's Department. ➤ Complete Business Continuity Plan for all services. ➤ Ongoing Training on Infection Control and providing up to date information on COVID and COVID protocols ➤ Maintain supply of PPE for CMHOC staff and providers as needed

➤ Acquired supply of PPE and ongoing inventory to meet the needs of CMHOC staff and providers

➤ Maintain a supply of COVID tests for CMHOC staff and providers

HEALTH AND SAFETY: Review of Plan Performance

Review of 2021

Plan for 2022

Health and Safety Plan			
	Plan to Meet Intent of Standard	2021 Performance	2022 Recommended Improvements
❖ Persons Served		Comments	
<ul style="list-style-type: none"> ✓ Reduce identified physical risks ✓ Assure accessibility to services 	Consumer Handbook Person Centered Plans Site Safety reviews Accessibility Plan Policies	<ul style="list-style-type: none"> • Lakeshore Region Guide to Services educates individuals served on risks, health & safety practices, and person centered planning. Given at orientation to all new CMH employees • Accessibility Plan was reviewed and revised in 2021 • Health & Safety policies were reviewed and updated. • Review of all provider Site Reviews completed by Beacon Healthcare Options; addressing health and safety issues as needed. • Ongoing maintenance of CMH buildings and vehicles to prevent cases of COVID; following county guidelines and requirements as a 	<ol style="list-style-type: none"> 1. Continue to disseminate comprehensive Lakeshore Region Guide to Services at orientation. 2. Continue to monitor CMH sites regularly for safety and address any issues in a timely fashion and follow up with providers on all site review findings related to health and safety 3. Accessibility Plan reviewed by Consumer Advisory Committee on an ongoing basis. 4. Assessment of accessibility issues should include input of persons served and direct

		<p>“Medical” facility that all staff wear masks.</p>	<p>staff through satisfaction surveys and Consumer Advisory Members in development of new Accessibility Plan.</p> <ol style="list-style-type: none"> 5. Create tracking system to log health and safety issues identified during annual site reviews. 6. Ongoing maintenance of CMH buildings and vehicles to prevent cases of COVID; following county guidelines and requirements as a “Medical” facility that all staff wear masks. 7. Complete Inventory for COVID testing supplies and spreadsheet to document usage/distribution.
	<p>Plan to Meet Intent of Standard</p>	<p>2021 Performance</p>	<p>2022 Recommended Improvements</p>
<p>❖ Personnel</p>		<p>Comments</p>	

<p>✓ Health & Safety Practices</p>	<p>Annual Staff training</p> <p>Site Reviews (CMH & contract)</p> <p>Ref. Guide</p> <p>Policies</p>	<ul style="list-style-type: none"> • Site Reviews completed in CMH sites by internal and external reviewers. • Site Reviews in Contract residential sites completed annually by LRE Site Review Team and reviewed by CMH staff. • Orientation of new CMHOC employees, Contractual employees, and interns. • Health & Safety Checklists were completed monthly at all CMH sites • Training on Infection Control and information on COVID • Ongoing maintenance of CMH buildings and vehicles to prevent cases of COVID; following county guidelines and requirements as a “Medical” facility that all staff wear masks. • Front desk plastic screens installed at all CMHOC locations; furniture arranged for social distancing; signage installed requiring the wearing of masks in all CMHOC location; CMHOC fleet of cars supplied with cleaning supplies to use upon usage. • Report Infection Control to Leadership monthly and through Health & Safety Committee Reporting. 	<ol style="list-style-type: none"> 1. Provide annual training on Health & Safety issues and additional training on issues as they occur. 2. Review and revise Health & Safety policies 3. Continue monthly Health & Safety checklists at CMH sites. 4. H&S Coordinator to assure all drills are completed annually at all CMH sites. 5. Ongoing Training on Infection Control and providing up to date information on COVID and COVID protocols. 6. Ongoing maintenance of CMH buildings and vehicles to prevent cases of COVID; following county guidelines and requirements as a “Medical” facility that all staff wear masks. 7. Continue ensuring that COVID guidelines are addressed and followed by staff. 8. Report Infection Control to Leadership monthly and through Health & Safety Committee Reporting.
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<p>✓ Identification of unsafe environmental factors.</p>	<p>Annual staff training Site Reviews Reference Guide</p>	<ul style="list-style-type: none"> • Health and safety Site reviews completed at all CMH sites monthly by CMHOC staff and annually by qualified external reviewers. • Review of all safety issues at contract residential sites as identified by LRE Site Review staff and follow-up with sites as needed. • Continue Bloodborne Pathogen training annually which include Infection Control 	<ol style="list-style-type: none"> 1. Continue monthly health and safety review of CMH sites. 2. Provide annual review of sites by internal and external reviewers. 3. Continue review and follow-up of LRE Site Review Health & Safety findings in contractual sites as needed. 4. Continue annual health and safety training for all staff 5. Continue Bloodborne Pathogen training annually which include Infection Control
	<p>Plan to Meet Intent of Standard</p>	<p>2021 Performance</p>	<p>2022 Recommended Improvements</p>
<p>❖ Personnel</p>		<p>Comments</p>	
<p>✓ Emergency procedures</p>	<p>Emergency “tests” and annual training Periodic e-mail updates and guides</p>	<ul style="list-style-type: none"> • Completed during tests • Tests/Drills completed in 3 sites with satisfactory results • CPTED training (Civilian Response to Active Shooter Events & Situational Awareness) completed by Ottawa County Sheriff’s Department as a virtual training. • All new staff and Building Managers and Building Designees completed 	<ul style="list-style-type: none"> ➤ Continue tests as scheduled ➤ Assign training through MyLearningPointe Training Module. ➤ Periodic e-mail updates ➤ Provide Reference Guides to new employees ➤ Staff to complete and participate in an emergency simulation with county partners.

		<p>CPTED Training or will do so at next training offered in Spring 2022.</p> <ul style="list-style-type: none"> • Emails sent out to staff on Emergency Procedures. 	<ul style="list-style-type: none"> ➤ All CMH staff participation in CPTED (Civilian Response to Active Shooter Events & Awareness Training) with Ottawa County Sheriff's Department. ➤ Update County Site Emergency Plan for all CMH locations (A Bldg, B Bldg, and Fulton) ➤ Complete Business Continuity Plan for all services
<p>✓ Evacuation procedures</p>	<p>Policies</p> <p>Tests</p> <p>Annual staff training</p> <p>LRE site reviews</p>	<ul style="list-style-type: none"> • 8 evacuation tests completed at CMH sites. • Evacuation plans reviewed by Health & Safety Committee 	<ol style="list-style-type: none"> 1. Continue tests as scheduled 2. Assign annual training on MyLearningPointe Training Module. 3. Continue periodic e-mail updates following trends in tests. 4. Provide Reference guides for new employees through New Employee Orientation materials. 5. Staff to complete and participate in an emergency simulation with county partners. 6. All CMH staff ongoing participation in CPTED (Civilian Response to Active Shooter Events & Awareness) training.

			7. Update County Site Emergency Plan for all CMH locations (A Bldg, B Bldg, and Fulton)
✓ Identification & reporting of critical incidents.	Policies Staff Training	<ul style="list-style-type: none"> • Policies 1.3 – 1.9, 4.39, 11.1. HR Report of Injury, HR-7 	<ol style="list-style-type: none"> 1. Review and revise policies as needed 2. Assign Recipient Rights Training on MyLearningPointe for all employees.
✓ Medication Management	Staff training Pharmacy & Therapeutics/Medication Committee Policy 4.23 Medication Committee and manual	<ul style="list-style-type: none"> • Staff training offered via Med Luncheons. • Medication Committee reviews prescribing patterns, trends, and documentation. • RN Staff complete monthly reviews of Medication Closet and report findings to Medication Committee monthly. • RN Staff routinely dispose of outdated medication. 	<ol style="list-style-type: none"> 1. Assign Medication Training on MyLearningPointe for new clinical staff. 2. Update Medication Manual as needed. 3. Review and revise Pharmacy & Therapeutics/Medication Committee Policy 4.23 annually
	Plan to Meet Intent of Standard	2021 Performance	2022 Recommended Improvements
❖ Personnel		Comments	

<p>✓ Reduce physical risks in community settings.</p>	<p>Annual staff training Reference Guide Assessment of Risk</p>	<ul style="list-style-type: none"> • Assessment of Risk completed in clinical records. • Annual staff training curriculum • Employee Reference Guide 	<ol style="list-style-type: none"> 1. Supervisors to continue to review Assessment of Risk with their staff. 2. Assign annual trainings 3. Provide Reference Guides 4. Encourage supervisors to utilize Avatar reports to ensure documentation.
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EMERGENCY PROCEDURES

	Plan	2021 Performance Comments	2022 Improvements
<ul style="list-style-type: none"> ➤ Fires ➤ Bomb Threats ➤ Natural Disasters ➤ Utility Failures ➤ Medical Emergencies ➤ Violent or threatening situations 	<ul style="list-style-type: none"> ○ Policies: <ul style="list-style-type: none"> 8.10 – Fire 8.23 – Emergency Preparedness ○ Site specific emergency procedures ○ Test results ○ Employee Reference Guide (Health & Safety) 	<p>Policies are in place. No problematic trends.</p>	<p>Update County Site Emergency Plan for CMH locations.</p> <p>Review of emergency procedures at Health and Safety meetings. Update as needed.</p> <p>Participate and plan with County Homeland Security Regional Planner and Public Health Preparedness Coordinator for county wide collaboration for emergency response; Continued participation in COVID response.</p>

			<p>Staff to complete and participate in an emergency simulation with county partners.</p> <p>All CMH staff participation in ongoing CPTED (Citizen Response to Active Shooter Events & Situational Awareness) Training.</p> <p>Evaluate use of updated phone system to replace current Little Green Button emergency response procedures.</p>
Access to:			
<ul style="list-style-type: none"> ➤ First aid expertise 	<ul style="list-style-type: none"> ○ Policy 8.2 – Health and Safety of Agency Sites ○ Facility reviews 	<p>Policies in place and first aid competence</p>	<p>Continue plan with no changes.</p>
<ul style="list-style-type: none"> ➤ First aid equipment and supplies. 	<ul style="list-style-type: none"> ○ Policy 8.2 – Health and Safety of Agency Sites ○ Facility reviews 	<p>Policies in place. First aid kit verified at each site and vehicle monthly.</p> <p>Maintenance of a supply of PPE as response to COVID for CMHOC staff and providers as needed.</p>	<p>Continue to monitor First Aid kit supplies at each site during monthly Building Inspections.</p> <p>Maintenance of a supply of PPE and COVID tests as response to COVID for</p>

			CMHOC staff and providers as needed.
Relevant Emergency Information on:			
➤ Persons served	○ Avatar information	System collects information on persons served with regular updates.	Continue plan with no changes.
➤ Personnel	○ Human Resources Department ○ Building Emergency forms	Human Resource Dept. maintains information. Staff may volunteer information to be kept at their work site.	Pilot Qualtrics Survey to capture Staff Emergency Contact Information for each site.
Transportation Services:			
➤ Assure safe travel for staff and persons served.	○ Maintain CMH fleet of vehicles (25-28 vehicles) ○ Transportation included in contract with specific providers ○ Referral agreements with taxi service	Preventative maintenance report of CMH vehicles. Contracts in place for service providers.	Continue current plan Use of Enterprise Fleet Management system for improved efficiency in maintenance and servicing of CMH fleet.

FIRST AID EQUIPMENT/ SUPPLIES:

- Each and every CMHOC site and automobile is supplied with at least one first aid kit – the contents are reviewed and monitored monthly to assure adequate supply in the event of an emergency.
- Each and every CMHOC site and automobile and biohazardous pick up pack contents are monitored monthly.
- Each and every CMHOC fleet vehicle is equipped with road warning/emergency hazard indicator.
- All emergency supplies are secured within CMHOC fleet vehicles (e.g. first aid, biohazard, and hazard indicator)
- Drivers are required to have cell phones available for communication in an emergency; they can be provided by CMHOC upon request.
- Contracted transportation agencies are also required to maintain similar training and supplies per their contract with CMHOC.
- CMHOC vehicle occupants have identification available for emergency responders.
- Each and every CMHOC site and automobile is supplied with cleaning supplies to be used to address COVID
- All CMHOC locations are supplied with PPE (masks, gloves, gowns, etc.) for use with COVID

FIRE SUPPRESSION EQUIPMENT/ SUPPLIES:

- Fire extinguishers in each facility are located near the exits and in hazardous areas.
- Fire extinguishers in the buildings are monitored monthly by CMHOC staff and Ottawa County Facilities and Maintenance Department, and annually by an Act 154 Board certified provider.

In addition, the following facility has an automatic fire suppression sprinkler system and 24 hour monitoring service:

- Grand Haven Outpatient clinic 1111 Fulton Street, Grand Haven
- The following sites are equipped with fire alarm control panels:
 - Holland Outpatient 12265 James, Holland, A Building
 - DD Services 12263 James, Holland, B Building
 - Grand Haven Outpatient clinic 1111 Fulton Street, Grand Haven
- New fire alarm panels installed in A and B Buildings in January 2017.

INSPECTIONS: HEALTH AND SAFETY:

Each CMHOC site was inspected as follows in 2018:

1. **INTERNAL** reviewers:

- a. Building designees

Monthly health & safety checklists.

- b. Health & Safety Coordinator *Annual reviews with external reviewer*
2. **EXTERNAL** reviewers:
- a. Act 154 Fire Safety Companies (FireFighter) *Annually*
(reviewed fire safety equipment such as fire extinguishers, horns, smoke detectors, panels, and sprinklers)
- b. Mike Schaner, L.B.R., Healthwest, Property Specialist *Annually*
- Due to Mike Schaner’s retirement, CMHOC is exploring use of Insurance Authority to complete ongoing annual building inspections.

HAZARDOUS MATERIALS

CMHOC has been registered as a producing facility of medical waste by the Michigan Department of Environmental Quality’s Waste and Hazardous Materials Division (#36972) since 10/11/2004.

CMHOC has a valid service agreement with Stericycle to accept and dispose of medical waste produced at CMHOC. Materials are collected on one location (12265 James, Holland) and Stericycle picks them up at that location every three months. Building designees, building managers, and nursing staff are notified in writing of the annual pick up schedule and reminded one week previous so they can assure waste is moved to 12265 James for collections. The waste is secured in a locked storage room to minimize risk of exposure to visitors and staff.

CMHOC disposes of outdated medications through the Ottawa County Health Department.

Safety Data Sheets (SDS) are located at each CMH site. The County of Ottawa Facilities and Maintenance are responsible for maintaining current and updated SDS information. Any additional information regarding products and SDS’s can be located on product websites.

Legal, Illegal, and Prescription DRUGS: CMHOC’s policy 4.39 (“Drugs, Weapons, and Medications”) prohibits the presence of illegal drugs on CMH premises and defines processes for prescription and over the counter medications for staff and visitors. The member handbook informs consumers of our policies regarding these issues.

WEAPONS:

CMHOC’s policy 4.39 (“Drugs, Weapons, and Medications”) prohibits the presence of weapons on CMH premises by staff and visitors. The Security Management Plan also states that CMH sites are “weapon free”.

The Member Handbook informs consumers of our policy regarding weapons.

SMOKING:

CMHOC adheres to a non-smoking practice on all county properties in accordance with Ottawa County’s policy.

Contract language also requires network providers to be “smoke free”.

POLICIES:

CMHOC has several policies in effect related to Health and Safety. All are to be reviewed annually. Below is a list of relevant policies;

- 1.3 Sentinel Events
- 4.39 Drugs, Weapons, and Medications
- 4.41 Tobacco Use
- 8.1 Health and Safety
- 8.2 Health and Safety of Agency sites
- 8.3 Maintenance of Buildings
- 8.4 Building Access
- 8.6 Therapeutic Environment
- 8.10 Fire Safety
- 8.12 Emergency Preparedness
- 8.13 Operation During Severe Weather
- 8.14 Transporting Consumers
- 8.21 Accounting for Staff Time when out of Office
- 8.22 Supervisory Review of In Home/ Com Services
- 8.23 Security Management Plan

EMERGENCY TEST REPORT

The following report indicates the date of each emergency test provided throughout the organization's sites during 2018 in each of the required categories:

Sites	Total Drills Expected	Total Completed	Bomb Missing	Fire Missing	Medical Missing	Natural Disaster Missing	Power Failure Missing	Violent/Threatening Missing
Fulton Street	7	7	0	0	0	0	0	0
Holland B Building	7	7	70	0	0	0	0	0
Holland A Building – OPC	7	16	0	0	0	0	0	0
TOTAL	21	30	0	0	0	0	0	0

In addition, fire evacuations continue to be reported within our contract network.

FIRST AID REPORT

CARF standards require immediate access to “first aid expertise” and supplies. CMHOC provides such access to consumers and staff members by assuring building designees, and/or additional staff members at each CMH site are appropriately trained and current in CPR/AED/First Aid. Each building designee assures that supplies in emergency kits are stocked at each CMH site and also in each of the county vehicles.

The following sites have the availability, completeness and visibility of AED and first aid equipment during the 2018 year.

FACILITY NAME	ADDRESS	PRESENT
Holland Outpatient	12265 James, Holland	✓
DD Services	12263 James, Holland	✓
Grand Haven Outpatient	1111 Fulton, Grand Haven	✓

HEALTH AND SAFETY TRAINING

Training on Health and Safety is assigned to all CMHOC staff electronically on MyLearningPointe system.

Updated training curriculum to be offered in 2022 to new and existing CMHOC employees regarding Health and Safety issues will focus on information listed below:

Training Subject	Comments
Health & Safety practices	Updated curriculum will include data and findings from tests of emergency procedures, updated policies, and critical incident data.
Identification of unsafe environments	
Emergency procedures	
Evacuation procedures	
Identification of critical incidents	
Reporting of critical incidents	
Potential Risks, Liability, & Safety for persons served as well as personnel	Only required for staff providing services out of offices. Available in Employee Reference Guide.
First Aid/CPR/AED	Building designees, complete AHA CPR/AED/First Aid every two years. There are also numerous CMH staff at each CMH site who are trained. Crisis Services staff are trained in First Aid.
Prevention of Workplace Violence	Initial and ongoing available on MyLearningPointe and in Employee Reference Guide.
FIRE SAFETY: <ul style="list-style-type: none"> ▪ fire detection ▪ warning of fire hazards ▪ suppression of fires 	Initial & annual competency based available on MyLearningPointe and in Employee Reference Guide disseminated to existing staff and thereafter to new employees. Training is also provided as appropriate to the particular program site and individuals served at the time of the “test” or drill.
Prevention & control of infections & communicable diseases	Initial & annual competency based available for staff members from Ottawa County Human Resources “Preventing Disease Transmission”. Also covered on MyLearningPointe course and in Employee Reference Guide. Consumers receive information and training via the Member Handbook at the time of orientation.
Bloodborne Pathogens/Universal Precautions	Offered via Ottawa County Human Resources Department annually for staff electronically.