


CHAPTER: 8	SECTION: 2	SUBJECT: Environment of Care
TITLE: Health and Safety of Agency Sites		
EFFECTIVE DATE: 12-15-95	REVISED/REVIEWED DATE: 1/13/99, 3/25/02, 3/15/05, 3/7/06, 2/20/08, 7/28/08, 2/14/11, 1/26/12, 3/25/13, 3/17/14, 3/17/15, 4/21/16, 4/7/17, 7/13/18, 9/9/19; 10/01/2020; 05/01/2021, 01/03/2023, 11/14/2023	
ISSUED AND APPROVED BY:  <p style="text-align: center;">EXECUTIVE DIRECTOR</p>		

I. PURPOSE:

To establish policy and procedure for the assurance that Community Mental Health of Ottawa County (CMHOC) facilities promote the health and safety of consumers, visitors, and staff and reduce, to the extent possible, risk of injury and illness.

II. APPLICATION:

To all CMHOC operated programs.

III. DEFINITIONS:

Building Designee(s): Persons who work primarily in one particular building who are appointed by the Health and Safety Coordinator (in collaboration with the administrative supervisor) to perform one or more select activities described hereunder. The responsibilities of this position are coordinated by the Building Designee but may, depending on the building, be completed by that individual and/or his/her designee(s).

Building Manager: The supervisor assigned to “oversee” the health and safety of a particular building. This individual is responsible for assisting the Building Designee in correcting noted deficits, accessing agency funds, and reporting findings.

Health and Safety Coordinator: Person appointed by the Executive Director based on his/her expertise and experience in order to oversee all aspects of Health and Safety. The Executive Director is free to appoint any employee with the appropriate experience and/or credentials.

Health and Safety Committee: The Health & Safety Coordinator may convene a committee as needed to oversee systems designed to protect those who receive services, providers (within CMHOC and its contractual network), and visitors as necessary. This committee should represent a cross section of such areas as: those receiving services, contractual providers, county facilities & maintenance, building designees, building managers,

Facility Disruption: A condition that requires services no longer be provided from a particular site or location. Facilities may be temporarily or permanently disrupted for any number of potential reasons including (but not limited to) health, safety, financial, contractual, or other concerns.

IV. POLICY:

It is the policy of Community Mental Health of Ottawa County (CMHOC) to provide service locations that are healthy and safe for consumers, visitors, and providers.

V. PROCEDURE:

1. The Building Designee will complete monthly inspections of the facility assigned to them to assure safety features remain operational and healthy practices are in place. The reports will be forwarded to the Health and Safety Coordinator. Any problems noted by the Building Designee will be corrected, and/or reported to the Building Manager, and/or reported to the Health and Safety Coordinator. Problems which cannot be corrected immediately are reviewed by the Health and Safety Coordinator for an assessment of risk; corrective action will be commensurate with the degree of assessed risk to the health and safety of those using the facility.
2. At least annually, the Health and Safety Coordinator will inspect each and every CMHOC facility to determine any concerns with health and safety practices/ resources. The results of these inspections will be forwarded to the Building Manager and/or Leadership Group for correction.
3. At least annually, each and every CMHOC facility will be inspected by external authorities as follows:
 - a. Certified ACT 154 Fire Safety Company: will review and report on fire safety features
 - b. An independent review of facilities completed by a trained professional outside of CMHOC (e.g., MIOSHA representative, facilities and maintenance staff from Ottawa County, facilities staff from the Lakeshore Regional Entity, Insurance Authority Representative)
4. Services may only be provided at locations that are deemed safe and healthy when a current lease is in place with fiscally sound parties. If this is not the case, services will immediately be suspended at that location. Recipients of services will be notified as soon as practicable that the location is unavailable and when (if known) the location is expected to reopen, or an alternative location will be selected.
 - a. TEMPORARY facility disruptions (e.g., during power outages over 1 hour in inclement weather, security concerns, flooded conditions, etc.) will be orchestrated by the Building Manager in consultation with the Health & Safety Coordinator, Program Supervisor, and Executive Director. In general, the goal will be as follows:
 - i. Outpatient services will suspend services for up to 5 days.
 - ii. Emergency and ACT services will continue out of an alternate outpatient facility.
 - b. LONG TERM facility disruptions (e.g., when the damage will take in excess of the temporary conditions to remedy) will be orchestrated by the Program Supervisor in consultation with the Health & Safety Coordinator using the general guidelines below:

- i. Residential Services: AFC licensing rules must be upheld after 48 hours after the disruption. Therefore, each resident will require an updated assessment and person-centered plan within those 48 hours to determine their residential needs and to meet those needs in an alternative setting.
 - ii. Outpatient services can be provided in an alternate setting. Transportation arrangements will be coordinated by the Program Supervisor.
 - iii. Emergency and ACT services will continue uninterrupted from alternative site(s) as appropriate and designed by the service supervisor.
 - iv. NOTE: When services are still being provided out of a temporary location after 30 days, a plan must be implemented to assure that consumers are being treated “as if” the situation is permanent with all the safety, health, and financial mechanisms in place for all permanent locations. Consumers and guardians must be informed that the services are now being provided at this location and assured that modifications have been made to assure health and safety standards are being met as well as any other therapeutic concerns have been addressed.
 - v. Changes to the lease agreement will be coordinated by CMHOC’s contract manager.
- c. PERMENANT facility disruptions will be remedied by locating another healthy and safe site within fiscal guidelines. The search for an appropriate site will be coordinated by the program supervisor in cooperation with the County of Ottawa’s facilities & maintenance staff as well as CMHOC’s contract manager. Until such a site has been located, the “long term” guidelines will be in place.

VI. ATTACHMENT:

08(02)a – Building Designee Review Form
08(02)b – External Building Review Form

VII. REFERENCE:

CARF Behavioral Health Standards Manual
Life Safety Code published by the National Fire Protection Association
CMHOC Business Continuity Plans