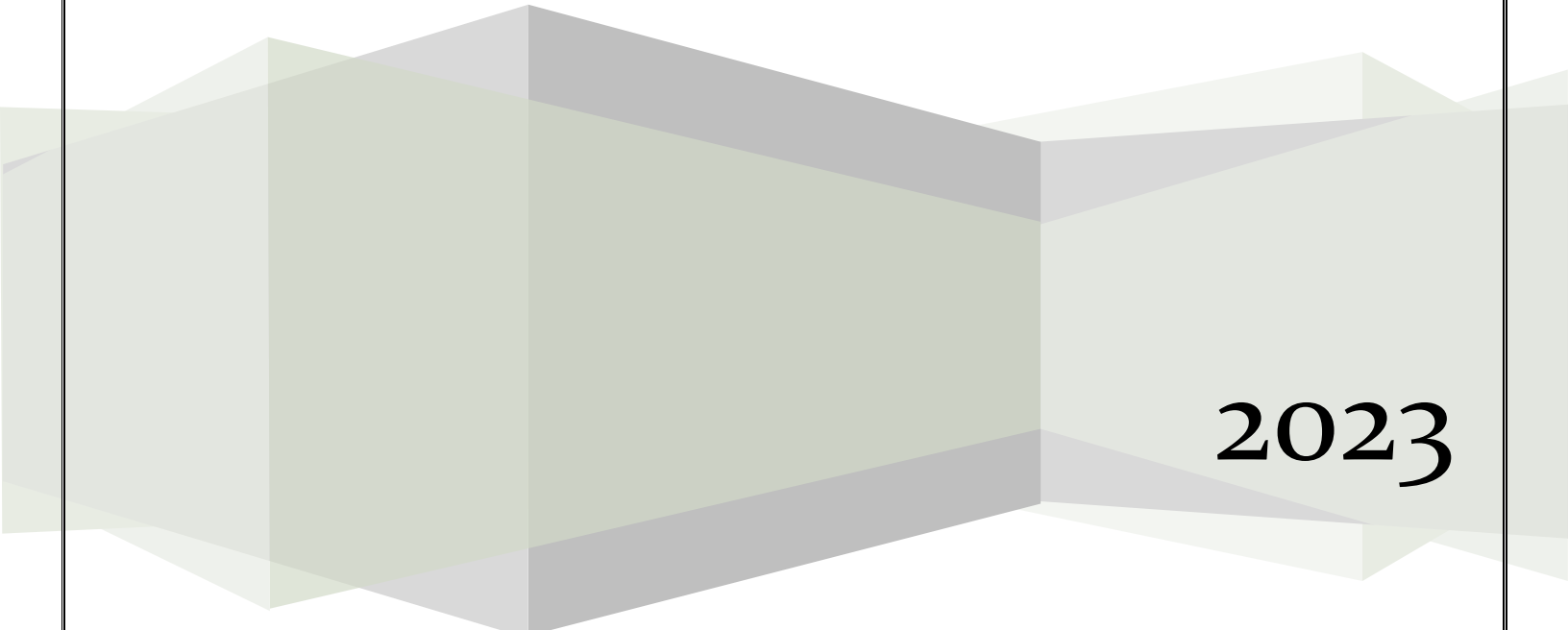


South Central Louisiana Human Services Authority

Risk Management General Safety Plan

2023



SOUTH CENTRAL LOUISIANA HUMAN SERVICES AUTHORITY (SCLHSA)
Risk Management and General Safety Plan

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1. SAFETY POLICY STATEMENT

It is the intent of the South Central Louisiana Human Services Authority (SCLHSA), as a public agency and provider of services to the local community, to provide a safe environment for its personnel, all contractors, clients and visitors of SCLHSA sites.

An effective safety and loss prevention program is vital to the success of this agency. Therefore, it is incumbent upon the SCLHSA Executive Director and Senior Management Staff to establish, maintain, and monitor the implementation of a comprehensive safety plan consistent with federal, state and local safety codes, and to establish and maintain safe and healthy conditions, to reduce risk in all SCLHSA offices, property, facilities and grounds. The established safety program and policies are applicable to all personnel and all sites in the SCLHSA organization.

The basic responsibility for health and safety rests with each individual. All personnel are held responsible for helping us to reach our loss prevention goals by preventing personal injury and loss of property resulting from carelessness, inattention, theft and accidents. Therefore, personnel are instructed to devote daily attention to making his or her activities and/or operations as safe and accident free as possible by complying with this policy and the Authority's Risk Management and General Safety/loss prevention program.

The SCLHSA Board of Directors, in its intent to provide safe and efficient services, authorizes the Executive Director to take action whenever necessary to correct, remove or respond, as appropriate, to any condition that poses an immediate threat to health, life or property. The Executive Director shall enlist the Executive Staff, Safety Coordinator and Safety Officers at each SCLHSA site to assist with the provision of safety education, inspection and corrective actions to ensure health, life and property are maintained.

**STATE OF LOUISIANA
LOSS PREVENTION POLICY STATEMENT**


As Governor of the State of Louisiana, I am committed to providing a safe and healthful environment for state employees, protecting the public, and preserving the state's assets and property. To accomplish these objectives, all state agencies, boards, and commissions are directed to participate in the Loss Prevention Program administered by the Office of Risk Management. That program shall assist agencies in controlling hazards and risks in an effort to minimize employee and customer injuries and damage or destruction of state property.

The head of each department, agency, board or commission shall be accountable for compliance with the Loss Prevention Program, including the following:

- One employee shall be appointed to serve as safety coordinator to direct each organization's safety program and act as liaison to the Office of Risk Management;
- Every reasonable effort shall be made to comply with all government regulations pertaining to safety and health issues;
- Employee exposure to all known or suspected occupational health and safety risks shall be reduced as quickly as governmental regulations, technology and economic feasibility allow;
- Controlling and eliminating undesirable risks and hazards shall be given priority when budgeting and financial planning take place;

The State of Louisiana is sincerely interested in each employee's safety. As part of the Loss Prevention Program, all employees of the state shall be made aware of safety rules and how they directly affect their positions and job duties. It is the employee's responsibility to follow the rules of safety as established for their protection and the protection of others.

If everyone works toward these objectives, injuries and costs can be reduced, for the benefit of state employees, their families and co-workers, and the State of Louisiana as a whole.



John Bel Edwards, Governor
State of Louisiana

6/14/2016
Date

2. ASSIGNMENT OF SAFETY RESPONSIBILITY

Deputy Director

The Deputy Director under the direction of the Executive Director has full responsibility for the administration of the Safety Program of the Authority which includes:

- ▶ Authorizing necessary expenditures associated with providing a safe work environment,
- ▶ Approving safety policies and procedures formulated by the Safety Coordinator and/or Safety Committee, and
- ▶ Participating in the safety program and taking necessary administrative action required to execute the Safety Plan (reviewing safety audits, investigative reports, tour facilities, etc.)

Safety Coordinator

The Safety Coordinator is responsible for the development, implementation and monitoring of the Safety Program. Safety Coordinator provides direction and support to the facility Safety Officers in the development of their individual programs and policies, and carrying out their duties and responsibilities. Additional duties include:

- ▶ Collaborates with Human Resources Department to insure all new personnel are oriented to the safety program upon hire,
- ▶ Coordinating activities and conducting quarterly meetings of the Safety Committee,
- ▶ Maintaining, analyzing and reporting accident reports and investigations, and advising Deputy Director of such,
- ▶ Directing quarterly safety inspections, checking for compliance with safety laws,
- ▶ Reviewing all safety related reports received from the work units and addressing problems with the appropriate individual(s) to resolve problems or determine the appropriate corrective action,
- ▶ Issuing and disseminating regular reports showing safety performance and accident trends,
- ▶ Conducting or directing educational activities or training to encourage participation in the safety program among personnel and new safety officers.
- ▶ Maintaining policies, protocols and plans in order to meet the requirements of regulatory bodies.

Risk Manager:

The Risk Manager is responsible for oversight of the risk management program for the agency, identifying risks that could impede the reputation, safety, security, or financial success of the organization. Additional duties include:

- ▶ Conducting quarterly risk exposure reporting and biannual property exposure reporting to the Office of Risk Management.
- ▶ Serving on the Transitional Return to Work Team.

- ▶ Verifying annual Official Driving Record for all personnel and compiling the authorized driver list.
- ▶ Coordinating communication with the Office of Risk Management and the Third Party Administrator in regard to claims involving property, malpractice, worker compensation, automobiles and general liability.

Safety Committee

The Safety and Risk Management Committee will be comprised of the Safety Coordinator and a Safety Officer from each facility/office, and maintenance departments as well as other SCLHSA personnel as assigned by the Deputy Director to meet the goals of the Safety Program. Primary responsibilities of the Safety Committee include:

- ▶ Developing policies, procedures, rules and practices necessary to ensure a safe physical environment for personnel, clients and visitors to all SCLHSA offices/facilities.
- ▶ Meeting on a quarterly basis to review safety reports, including, but not limited to peer review incident/accident forms, theft and security concerns, reported hazards and building inspection reports. The committee will evaluate safety procedures and/or programs to assess effectiveness, and make revisions if necessary.
- ▶ Address and plan authority-wide safety training needs.
- ▶ Perform an annual audit and evaluation of the SCLHSA Safety Program.
- ▶ Communicates and implements new processes coming from the committee upon the approval of the Executive Director to the SCLHSA sites.

Facility Managers/Clinic Directors

All Facility Managers/Clinic Directors are responsible for maintaining and ensuring safe working conditions for all personnel. In addition, the Facility Manager/Clinic Director shall be responsible for:

- ▶ Appointing personnel to serve as Safety Officer for the facility/office,
- ▶ Ensuring the Safety Officer participates in the quarterly Safety Committee meetings and effectively implements the Safety Program in the facility/office,
- ▶ Ensuring quarterly safety inspections are conducted and the appropriate reports are completed,
- ▶ Assuring that all personnel in attendance and absent from the safety meetings receive the information given within the designated quarter.
- ▶ Reviewing Hazard Control Logs and Incident Report forms and taking necessary corrective action when possible, or conferring with the Safety Coordinator or Deputy Director to determine the appropriate corrective action.
- ▶ Assists with investigating any incidents at the domicile site.

Safety Officer

The Safety Officer is responsible for the implementation of the Safety Program at the domicile site. Responsibilities include:

- ▶ Attending formal Loss Prevention training, upon designation as Safety Officer,

- ▶ Ensuring adherence to safety policies and procedures as established for the Authority,
- ▶ Developing and ensuring adherence to safety policies and procedures that are specific to the domicile site,
- ▶ Conducting regular safety meetings on a quarterly basis,
- ▶ Serving on the SCLHSA Safety Committee,
- ▶ Conducting quarterly safety inspections at the domicile site, to identify and correct existing and potential unsafe conditions,
- ▶ Conducting or directing educational activities or training at their domicile site to encourage interest in safety among personnel,
- ▶ Communicating with the SCLHSA Safety Coordinator and providing safety related reports and information, as required and requested.
- ▶ Assuring incident reports are completed fully and timely, reviewing reports for accuracy, collaborating with site manager for corrective action and submit for quality review.

Supervisors

All Supervisors are responsible for maintaining and ensuring safe working conditions for their personnel. In addition the Supervisor shall be responsible for:

- ▶ Supervisors will be trained in the Accident Investigation Process to assist as situations occur.
- ▶ Training personnel to perform their duties in a safe manner, and discussing safety with them.
- ▶ Making regular housekeeping inspections and reporting equipment requiring maintenance to maintenance staff or the appropriate individual, to ensure safe operations,
- ▶ Pro-actively correcting unsafe conditions and unsafe acts,
- ▶ Obtaining first aid for the injured,
- ▶ Reporting and investigating accidents and working with the Safety Officer to determine the cause and correct the problem,
- ▶ Completing training in Accident Investigation,
- ▶ Reviewing reports for accuracy and timely reporting following any incident,
- ▶ Assuring that debriefing activities are conducted following incidents of significance and according to criteria in Critical Incident policy.
- ▶ Assuring that personnel complete annual safety education.

Personnel (Employees and Contractors)

Basic safety is the responsibility of all personnel and therefore everyone has the responsibility to:

- ▶ Perform all duties in a safe manner,
- ▶ Know, observe and follow all safety rules, policies and procedures,
- ▶ Make regular housekeeping inspections to their immediate work area to ensure a safe and secure work environment,

- ▶ Report all unsafe conditions and practices, and make safety suggestions, ask for assistance when needed.
- ▶ Attending safety meetings, understanding safety rules and processes and completing all required safety education.

If personnel have a change in position and responsibilities, the new safety responsibilities shall be reviewed with the personnel by the appropriate staff member. SCLHSA personnel who do not comply with their assigned safety responsibilities will be subject to disciplinary action.

Environmental Services Department

The Environmental Services Supervisor shall participate as a member of the Safety Committee and has direct responsibility for key elements of the safety program, and is primarily responsible for the Equipment Management program, vehicle maintenance, building maintenance in state owned buildings and has oversight responsibilities of work done on leased buildings.

3. INSPECTION PROGRAM

La. R.S. 39:1543 requires regular work site inspections be conducted to identify and correct existing and potential hazards, and to take corrective action to ensure a safe work environment. The work site Manager/Director shall be responsible to ensure that inspections are conducted quarterly and that the appropriate reports are completed. (Refer to the SCLHSA Safety Inspection Policy)

Effective July 1 of each Fiscal Year, the Office of Risk Management classifies each audited state agency as either Class A or Class B based on the results of the agency's most recent audit or compliance review. This classification determines how often, monthly or quarterly, the agency is required to conduct safety meetings and building inspections.

Class A Agency – An audited agency which receives a Non-Compliant score on the audit or compliance review will be required to conduct safety meetings and building inspections on a monthly basis effective July 1 of the upcoming Fiscal Year.

Class B Agency – An audited agency which receives a Compliant score on the audit or compliance review will be required to conduct safety meetings and building inspections with evidence by documented, signed, and dated inspections on a quarterly basis effective July 1 of the upcoming Fiscal Year. Class B agencies shall conduct on a quarterly basis.

The Safety Officer shall be responsible to conduct the quarterly inspections of their work-site, using a site specific Safety Inspection Checklist (sample attached) to identify existing and potential unsafe conditions. Interior and exterior inspections of all buildings whether in use or not must be inspected at least quarterly. Inspections must address Building Safety, Electrical Safety, Emergency Equipment, Fire Safety, Office Safety and Storage Methods. Items should be added to the inspection report as deemed appropriate for each individual work-site. All identified problems and corrective actions shall be documented on the Safety Inspection Checklist, which shall be maintained for three (3) years. The original shall be retained at the work site.

Should a problem/deficiency exist that is not immediately corrected, refer to Section 4 “Hazard Control Program”.

Annual State Fire Marshall Inspections are required by law at any building housing state employees. A copy of the inspection and any corrective action for deficiencies identified must be kept according to record retention policies.

Each year the Office of Risk Management, through its third party administrator (TPA) conducts an inspection of each SCLHSA location to identify existing or potential at risk situations. A report of findings is generated and any deficiency is corrected within 30 days. The findings report and correction plan is retained at the work site and a copy is forwarded to the SCLHSA Safety Coordinator. Annually, the Office of Risk Management conducts a compliance audit on policies and documentation with random items selected for review. A full audit is conducted on all required items every three years. A report of findings noting deficiencies is generated and remediation is expected within 30 days of the report. All reports from the Office of Risk Management are maintained for three (3) years.

4. HAZARD CONTROL PROGRAM

All personnel are responsible for continuously noting and correcting safety concerns at the work site upon observation or noting of such a safety concern. Personnel are educated on recognizing work site hazards. Each site has equipment and processes for the temporary or permanent mitigation of any hazard. Each work site shall be formally inspected on a quarterly basis to identify potential hazards to prevent injury of staff, clients, visitors and property. The Facility Manager/Clinic Director is responsible for ensuring the safety inspection is conducted timely. The work site safety inspection shall be made by the Safety Officer and other staff as requested.

The Safety Officer shall record any deficiencies found during the safety inspection on the Hazard Control Log (Attached). Immediate action shall be taken to eliminate or temporarily control the hazard, prioritizing the preservation of life and wellness to any injured person until corrective measures can be taken. The hazard shall be reported to the Site Manager or Program Director should the hazard elimination or control be beyond the ability of the Safety Officer.

The Hazard Control Log must be submitted to the SCLHSA Safety Coordinator should a potential hazard require more than 30 days to correct. The SCLHSA Safety Coordinator will forward a copy of the log to the Office of Risk Management. Routine inspections without significant variance are kept at the site location. Hazard Control Logs shall be reviewed on a regular basis, signed/initialed, and dated. Maintain the Hazard Control Logs for the entire audit year with Safety Officer’s documentation.

5. JOB SAFETY ANALYSIS

Job Safety analysis is a procedure to review work methods and uncover hazards that could result in accidents. It is one of the first steps in accident prevention because a hazard must be identified before it can be eliminated. The job safety analysis serves as:

- ▶ A systematic way to evaluate jobs and work methods, and eliminate potential or existing hazards;
- ▶ A tool to assist in teaching safe work methods/procedures;
- ▶ Provide important data for conducting accident investigations.

A Job Safety Analysis Work Sheet (Attached) shall be used to document the proper method of performing a job. The worksheet breaks the job down into basic steps, gives concrete instructions on how to perform each step, and identifies the potential safety hazard associated with each step. The Job Safety Analysis Work Sheet shall be posted at the site of the potentially hazardous location/tool.

A job safety analysis shall be performed on all jobs that have resulted in incident/accident trend, death, or a change in a job procedure or equipment. Each facility/office Safety Officer shall be responsible to see that job safety analyses are posted in their facilities/offices and staff is trained. When there are no trends in incidents, there are no required Job Safety Analysis processes.

6. INCIDENT/ACCIDENT INVESTIGATION PROGRAM

La. R.S. 39:1543 requires the SCLHSA to implement a program to thoroughly investigate and identify, as soon as possible, the actual causes and contributing factors of losses, in an attempt to prevent recurrences.

An accident is defined as “an event or series of unintentional events that caused personal injury or property damage.” An incident is defined as “an event or series of unintentional events that could have caused personal injury or property damage.” All accidents/incidents, including those occurring to non-personnel at a work site, that result in injury, shall be investigated by the supervisor, or other designated personnel responsible for the area in which the accident occurred. The Safety Officer, Safety Coordinator, Deputy Director, or Safety Committee may need to be involved depending on the nature and severity of the accident.

AFTER ACQUIRING NECESSARY MEDICAL AID FOR THE INJURED PERSON(S) the following steps should be followed by the supervisor and Safety Officer in investigating the accident:

1. If possible, ask the person or persons involved to describe in writing what happened. Use SCLHSA witness statements to document those descriptions.
2. Survey the accident scene for detailed information. Document the scene with photographs prior to cleaning up spills, removing equipment or otherwise changing the scene.
3. Determine if there are witnesses. If so, obtain their accounts of the incident. It is beneficial to collect these accounts separately, and in writing.

4. Take necessary steps to prevent reoccurrences until the condition can be permanently corrected.
5. Complete the appropriate Accident Investigation Form (DA 2000-direct employees only-attached; DA 3000- contractors, visitors and clients only-attached) and SCLHSA Internal Incident Form. The DA forms are available online in the Loss Prevention section of the ORM website at <https://www.doa.la.gov/dao/orm/forms>. They appear under the section called "Forms Available." The Root Cause Analysis section of the DA 2000 form must be completed for all visitor and client incidents. The SCLHSA Internal Incident Report is intended to be completed immediately so that SCLHSA administration can be alerted to significant events before a full report is done. Incident reports are kept for a minimum of 10 calendar years.
6. When any personnel is injured, a Workman's Compensation First Report of Injury form shall be completed and sent to the Safety Coordinator in the event further reporting is needed. Personnel must comply with the Drug Free Work Place and Transitional Return to Work Policies regarding drug testing and modification of work tasks, if necessary, immediately following a work related accident and before returning to work. When an injury occurs to personnel under contract with SCLHSA, the Return to Work Committee will coordinate those activities with the Human Resources department of the contract agency.

In the event of loss of life, limb or near-miss, a thorough and credible root cause analysis will be conducted as a separate process. The Executive Director is responsible for determining notification to other outside entities.

Refer to SCLHSA Incident/Accident Investigation and Critical Incident policies for more information. The Employee First Report of Injury form is located on the SCLHSA internal data system and is also attached to this plan.

7. RETURN TO WORK PROGRAM

The Safety Coordinator will enter all claim information into the Claim Capture system so that a proper claim account is established immediately. The Office of Risk Management, its claim adjuster agency and the Return to Work Team will be responsible for the management of Worker's Compensation cases and coordinating return to work.

8. SAFETY MEETINGS

Safety Meetings shall be conducted quarterly at each site or as determined by ORM Classification. Safety meeting topics may vary from formal presentations (guest speakers, viewing electronic presentations, etc.) to informal discussions of safety problems (reviewing problem area discovered through accident reporting, hazard control log, etc.) A list of required training topics and lesson plans has been developed and assigned to be completed at designated times during the year. Personnel participation and suggestions are recommended. Safety Meetings may be incorporated with regular in-service or staff meetings.

A record must be kept of topics discussed, original signatures of employees on attendance sheets, or initials next to typed names on attendance sheets or verification of "received and read" by emails, instructor's name, teaching aids used, date of training, personnel suggestions or follow-up and total percentage of staff who either were present at the meeting or who received the material presented within the quarter. The minimum allowable attendance is 75%, however 100% attendance by assuring personnel receives the information is expected for all locations.

To demonstrate support for workplace safety and health as well as the loss prevention program, Facility Managers/Clinic Directors, or his/her management designee, shall attend all in-person safety meetings.

A makeup meeting should be provided and documented for any absent employee. The makeup meetings must occur in the same month or quarter (depending on Agency classification). Any exceptions must be submitted to the ORM Loss Prevention Manager for approval.

The SCLHSA Safety Meeting Report (attached) shall be used to document safety meetings.

The SCLHSA Safety Committee shall also meet on a quarterly basis. The committee is a forum in which pertinent safety and health issues are discussed, such as:

- Incident/accident forms
- Theft and security
- Reported hazards
- Building inspection reports
- Anonymous reports
- Safety inspections
- Development of new safety education topics
- Training of safety personnel in new or changing requirements for Loss Prevention and Risk Management programs governed by regulatory bodies.

9. GENERAL SAFETY RULES AND PRACTICES

The South Central Louisiana Human Services Authority is committed to providing personnel with a safe work environment by making every effort to comply with federal and state laws. A copy of the Safety Rules and Practices are given to each person at orientation and provided to new employees during building orientation, including site specific safety rules, and a signed copy of the orientation checklist is kept in the individual's personnel file. Documentation shall include either employees' signatures (for written copy) or read receipt (for electronic copy) acknowledging receipt of either the rules and/or how to electronically access the rules. The Safety Rules and Practices are reviewed annually at a safety meeting, where the Safety Officer will document on the sign in sheet for the meeting that "employees have received a copy of the Safety Rules and Practices and instructed on how to access these rules electronically". Safety Rules and Practices will be posted for all employees to view at each facility/clinic site. It is the obligation of all personnel to observe all safety rules and to use safe practices at all time. The following are general Safety Rules that apply to all personnel:

1. Horseplay, throwing objects, fighting, and other activities inappropriate to the work setting will not be tolerated.
2. Possession of firearms, other weapons, alcoholic beverages, illegal drugs and usage of unauthorized/non-physician prescribed drugs will not be tolerated on work premises. Prescribed medications and Over-the-Counter products, including vitamins and supplements, must be secured from common view so as to protect others from accidental use or theft.
3. Maintain an orderly environment and work procedure at all times. Supplies, tools and equipment shall be stored in a designated place. Scrap and waste material shall be placed in appropriate waste containers.
4. Before beginning work, personnel shall notify the supervisor of any permanent or temporary impairment that may reduce their ability to perform in a safe manner. This includes medication required to be taken during work hours and any pre-existing injury that could be exacerbated during the course of routine work assignment. The Second Injury Board data, which addresses work related injuries after a pre-existing condition, is coordinated by the Human Resources Department.
5. Operate equipment only when properly trained and authorized. Safety guards on equipment shall be kept in place and in working order.
6. Proper techniques shall be used in lifting and carrying materials and in sitting to maintain healthy posture and reduce opportunities for positional strain.
7. No object should be used for climbing which is not specifically designed for that purpose.
8. Do not leave desk and filing cabinet drawers open. Do not block hallways with objects.
9. PPE is available and staff are educated on the use and disposal of it. Proper cleaning techniques are reviewed for blood borne pathogens.
10. Inspect the assigned work area for potential hazards and immediately report any unsafe condition or act to the supervisor. Before leaving any hazardous area or condition unattended, care should be taken to correct the hazard or tag the area to identify the hazard.
11. If there is any doubt of the safety of work or work methods, ask the supervisor for assistance.
12. Immediately report all accidents or property damage to a supervisor, regardless of how minor the accidents may initially appear. If an accident involves private property of others, make every effort to notify the owner.

13. Follow recommended work procedure outlined for the job including safe work methods described in the job safety analysis.
14. Report any smoke, fire or unusual smells to the Safety Officer and alert others for possible action.
15. Follow refrigerator policy on cleanliness and sanitary conditions.
16. Never attempt to catch a falling object.
17. Be sure that access to building exits and fire extinguishers are never blocked.
18. Keep to the right in halls and use special caution at intersecting doors and corridors.
19. Obey all safety instructions and signs.
20. Fasten safety restraint belts before starting any motor vehicle.
21. Comply with all traffic signs, signals, markers and persons designated to direct traffic while driving any vehicle while conducting state business.
22. Perform inspection of the state vehicle prior to driving. Forms are found in all state vehicles. Please refer to site specific rules and processes regarding vehicle use.
23. Smoking, vaping or the use of tobacco in any form is not permitted in any SCLHSA facility, vehicle or grounds by personnel or visitors. Please see policy 1102 for additional direction.
24. Substances capable of being inhaled and sharp or heavy objects capable of being used as a weapon should not be left in open access in patient care area.
25. Adhere to all rules and procedures specific to area operations.
26. Become familiar with the work site's Emergency Preparedness and Security Plans. This includes knowing:
 - a. Your role in responding to emergency situations.
 - b. The location of the fire alarms and fire extinguishers in the work location, and how to use them.
 - c. The evacuation routes for the work location.
 - d. Processes regarding first aid.
 - e. Emergency numbers for utility companies, alarm service, landlord or service personnel.
 - f. Code word for confirmation of identity of first responder rescuers.

27. Assist and cooperate with all safety investigations and inspections and assist in implementing safety procedures as defined in policies.
28. Personnel shall not use a Wireless Telecommunication Device while driving in a state owned, leased, or private vehicle that is being driven on state business. This includes writing, sending or reading a text communication and engaging in a call. Refer to policy 1107 for additional information.
29. Post-accident drug testing of all personnel is required by Executive Order of the Governor, Revised Statutes 49:1001 et seq., 23:1081 and agency policy when there is reasonable suspicion of an employee's impairment, incidents/accidents involving a fatality and in the release of hazardous waste.

10. TRAINING

Personnel/Contractor Training

Safety training is required to inform personnel on performing required tasks in a safe and efficient manner. Supervisors shall be responsible to see that personnel are trained how to perform a job safely before being left alone to perform the job. When new jobs are assigned, personnel must be trained in the correct work procedures to follow, the use of required personal safety equipment and where to get assistance as needed.

Personnel shall receive instruction in job and location specific safety training during the orientation period and documentation shall be recorded accordingly.

The Safety Officer in conjunction with Supervisor and Clinic Managers in each SCLHSA Agency will utilize a systematic method of training personnel. The Risk Management, General Safety and Compliance Training Form delineates the training and policy review that all new personnel must have within specified period of time. Quarterly Safety Meetings are often the venue for additional annual training required by regulatory bodies. A copy of this form is maintained in safety records kept by the site Safety Officer. The training topics and schedule will be prioritized and approved by the Safety Committee annually. Agencies may modify priorities based on special circumstances. A copy of this form is located in the appendix of this document.

The Safety Coordinator and Clinic/Site Safety Officers must attend the ORM Loss Prevention Program course at least once every five (5) years.

For annual audits conducted by ORM, SCLHSA shall furnish a complete list(s) of employees that includes those who were considered: new hires, active employees, and those who received a promotion/demotion to a position with new duties at any time during the audited FY. The list shall include the names of all such employees, whether they remained with the agency or left at any time during the audited FY.

Supervisory Training

Safety should be used as a position-specific performance factor when evaluating a supervisor's performance or that of personnel designated as a Safety Officer.

11. RECORD KEEPING

Good record keeping is essential to occupational safety and loss prevention. All safety records shall be kept for a minimum of two (2) years, or as defined in the Records Retention Policy of SCLHSA. These records shall be made available to the Safety Officer, Safety Coordinator, Deputy Director, Executive Director and/or the Office of Risk Management upon request, or as instructed below. All records shall be maintained for review for annual safety compliance review and for accreditation purposes.

Safety Inspection Checklist: Completed quarterly in each work area by the Safety Officer. The original form is retained in the work area it covers for three (3) years or as required by regulatory accrediting bodies.

Hazard Control Log: Completed as potential hazards in each work area are identified that cannot be corrected immediately. The original form remains in the area it covers until the hazard has been corrected. All completed forms will be kept on file until the next Loss Prevention Audit. Copies shall be sent to the Program Director and Safety Coordinator and the ORM Loss Prevention Unit, if the hazard is not corrected within 30 days (copy attached).

Job Safety Analysis: Completed by the Safety Officer and maintained in the work area for easy access by personnel. Job safety analyses shall be developed for accident/incident trends and revised as needed.

SCLHSA Personnel First Report of Injury Form: Completed for each accident requiring medical treatment and will be filed by person and year of occurrence in a central file. These records shall not be filed in the personnel file. The original shall be forwarded to the Safety Coordinator and a copy shall be retained by the Safety Officer.

Incident/Accident Investigation Reports: Forms DA 2000, 3000, General Liability Claim forms and DA 2041 (Vehicle Accident Form) and DA 2073 (Vehicle Glass Repair/Replacement) along with supporting documents and witness statements shall be completed with the original document on file at the location and a copy sent to the Safety Coordinator. These forms will be reviewed by the Safety Coordinator and brought to the Quarterly Safety Committee for review.

Safety Meeting Report: Completed quarterly at each agency following Safety Meetings, and maintained by the Safety Officer. Copies of the detailed sign in sheets shall be sent to the Safety Coordinator. In addition, minutes shall be completed for each quarterly meeting of the Safety Committee, and shall be maintained by the Safety Coordinator.

Safety Training Documentation: Completed following safety training sessions and maintained in the work unit. Copies of the meeting recording sheet shall be sent to the Safety Coordinator. Training documentation must be on the Safety Training Form and include the title of the course, date the course was conducted, name of the individual(s) providing the training, and the names of all personnel in attendance (copy attached). All personnel will provide a transcript of e-learning training completed during the fiscal year to the Safety Officer for annual audit purposes. Other required training is summarized annually into a site specific matrix. The training records shall be retained for each employee's length of employment with the agency plus one year, according to Records Retention Policy (805).

Authorization and Driving History Form: Completed by all personnel during the employment orientation process, and annually thereafter. Original forms are initiated by the SCLHSA HR Department for processing. The Safety Coordinator develops the authorized driver's list by location and keeps all supporting documentation at the Administrative Office.

ODRs, High-risk driver documentation, (e.g. re-training records, letters), vehicle inspection forms, preventive maintenance records are maintained for at least three years; Driver training (initial and refresher) documentation will be retained for at least three years and DA 2054 forms are maintained indefinitely or until form information is updated.

Confined Spaces Statement is completed annually to identify any areas defined as confined spaces and kept on file for five (5) years. The statement is available for review by external agencies. See section 15 for Confined Spaces Program.

Statement of presence or non-presence of hazardous materials is addressed annually and kept on file for five (5) years. See section 14 for the Hazardous Materials Program.

12. FIRST AID

Each SCLHSA site has a written protocol to address the medical and first aid needs of clients and personnel. Medical staff as well as personnel certified in CPR and First Aid are available at each location.

All personnel shall report any injury to their immediate supervisor or the Safety Officer as soon as possible, at least before the end of the shift during which the accident occurred. (Refer to SCLHSA Incident/Accident Investigation Section 6, Drug Free Work Place and Transitional Return to Work Policies.)

A first aid kit shall be maintained at each location. One person at each location shall be designated for inspecting and restocking the first aid kit on a regular basis. All personnel shall be responsible for knowing the location of the first aid kit.

An Automatic External Defibrillator (AED) shall be maintained at each location and shall be tested monthly, noting battery function and pad expiration. The AED log will be retained for a

period of three (3) years based on the CARF Accreditation Cycle. Staff are oriented to AED location and operation at the time of hire and then annually during a safety meeting.

13. BLOOD BORNE PATHOGEN PROGRAM

SCLHSA has written blood borne pathogen program that includes the following five components:

- Exposure Determination
- Medical Evaluation for Affected Personnel
- Methods of Compliance
- Work Place Controls
- Training

Due the nature of the work, all personnel are defined as high-risk positions. Personnel receive training within 90 days of hire and annually thereafter. Training records are maintained for five years. Training for personnel will be accomplished by e-learning and instructor led courses. Training is provided in a face-to-face program by a Registered Nurse or those trained in the ORM training program to all new personnel and annually thereafter during a regularly scheduled safety meeting.

Please refer to Infection Control-Blood Borne Pathogen Exposure Control Policy 124 for more information. Each location shall maintain a prepackaged spill kit in addition to cleaning agents, mops and buckets. If a spill kit is used, a replacement kit can be obtained from the safety coordinator.

14. HOUSEKEEPING

Good housekeeping is essential to maintain a safe and secure work environment. Personnel shall be responsible for inspection and general housekeeping in their individual work areas. Problems that are beyond the ability or authority of the individual to correct shall be reported to the supervisor for further handling.

15. EMERGENCY PREPAREDNESS

SCLHSA has an Emergency Preparedness Plan that is reviewed at least annually and updated as needed. All personnel receive a copy of the plan during orientation and receive annual training on it.

Personnel are also expected to receive training on the National Incident Management System and the Emergency Support Function for the State of Louisiana and provide documentation of such training. A site specific emergency operations plan is kept at each location and staff is educated at orientation and annually on the plan.

Personnel should carry, on their person, their SCLHSA ID badge and the re-entry letter issued by the Executive Director at all times in the event of a declared emergency and return to the domiciliary area is required.

Each SCLHSA site shall conduct the following emergency procedure drills on an annual basis: fire, bomb threats, natural disasters, utility failures and medical emergencies, violent or threatening situations and other specified proximity drills.

16. HAZARDOUS MATERIALS

Each SCLHSA site shall conduct a complete inspection of all facilities, grounds and vehicles that may contain hazardous materials. The hazardous materials program is not based on the quantity of certain materials but rather on the exposure potential. If the products and chemicals are used as per normal household use and per label use, those products are not considered hazardous materials. As such, the Safety Officer at each location is responsible for completing a statement of non-presence of hazardous materials on an annual basis.

If it is determined that hazardous materials are present, the agency shall review the Material Safety Data Sheet(s) (MSDS) for each material present as well as develop a hazardous materials plan. The plan shall address the following: proper handling, storage, MSDS, Personal Protective Equipment (PPE), required safety equipment and training, and proper disposal of hazardous materials.

17. CONFINED SPACES

Each SCLHSA site shall conduct a complete inspection of all facilities to determine the presence of confined spaces, which are defined as spaces that are large enough to enter into and work, have a limited means of entry/exit and are not designed for continuous periods of occupancy. If there are no confined spaces, the Safety Officer at each location is responsible for completing a statement of “no confined spaces”. If there is an identified confined space, only a qualified person, designated by the employer in writing, as capable by education, training or both of anticipating, recognizing, and evaluating personnel exposure to hazardous substances or other unsafe conditions in a confined space; AND of specifying necessary control and/or protective action to ensure personnel safety may enter or supervise the work being done in the identified confined space.

18. DRIVER SAFETY PROGRAM

The purpose of a Driver Safety Program is to provide a systematic method of screening, training, and accountability for personnel and supervisors required to assign or drive state owned vehicles (any licensed vehicle owned, leased and/or rented by the State of Louisiana), address safety, control use of vehicles, and reduce the State’s exposure to liability and financial losses.

The Authority’s cost of insurance coverage is based on 1) exposure to risk, 2) frequency and severity of claims, and 3) implementation of a driver safety program.

The Risk Manager is responsible for implementation of the Driver Safety Program and along with the Safety Officers of the location shall stress the importance of the department’s Driver Safety

Program to all personnel. Prior to authorizing personnel to drive, the following must be completed:

1. Verify that each driver has a valid and properly classed driver's license.
2. Obtain/review-official driving records (ODRs) no longer than every twelve (12) months, reviewing them no later than forty-five (45) days from the date the ODR is obtained, and ensuring that personnel meet all program requirements to be authorized to drive. The Human Resources Department completes the initial ODR upon hire.
3. Certify that all personnel have completed an ORM recognized defensive driving course (e.g., LAPOST, Loss Prevention instructor-led, National Safety Council, FLI, etc.) upon entering the program.
4. The Driving Authorization and History Form (DA 2054 or 2055) is signed and dated by the individual requesting to drive and the Executive Director signs and dates once the ODR has been verified. The DA 2054 form is used annually by using the supplemental page. The original form cannot be modified. The DA 2055 form is used in lieu of the DA 2054 for any contract personnel and the same process for the DA 2054 is followed. The Safety Coordinator performs all annual Official Driving Record checks and develops the authorized driver list.
5. Notify the appropriate supervisors which personnel have flags on a driving record that need to be corrected before placed on the authorized driver list.
6. Maintain at each audit location, a list of authorized drivers. Personnel who are hired or terminated throughout the year are not required to be added or deleted from the authorized list except on an annual basis prior to the audit. However any person that is determined in the year to be a high risk driver should be removed from the authorized driver list. The travel coordinator, vehicle assignment coordinator, fleet manager and fiscal department will be provided with the authorized driver list.
7. Ensure that policies and procedures are established and implemented.
8. Conduct and document training courses.

Supervisors:

Supervisors shall:

1. Provide time for each authorized personnel to complete the online education program "Defensive Driving in Louisiana Course".
2. Allow only authorized personnel to drive on state business.
3. See that all vehicles provided are in safe operating condition, including the use of the daily and monthly checklist.
4. Follow through that all deficiencies noted during the inspections are corrected and such actions documented.
5. Ensure that all accidents and incidents are properly reported and said records are maintained.

Personnel:

1. Personnel shall only operate those vehicles for which they are authorized.
2. Personnel who are authorized to drive state vehicles are responsible for the safe operation of those vehicles and must perform a vehicle inspection prior to departing in the vehicle.

3. Drivers shall report any unsafe condition or accident involving state or personal vehicles to their supervisor or designee. Accidents by personnel in their personal vehicles after hours should be reported to his/her supervisor if the individual is ticketed.
4. Personnel who drive a personal vehicle on state business shall be required to sign the DA 2054 form attesting that they currently carry at least the required minimum vehicle insurance.
5. Personnel shall immediately report any revocation of their driver's license or any moving violations received to their supervisor, but no later than their next scheduled workday. Said reporting applies whether on state or personal/private business and whether operating a state or personal/private vehicle or marine vehicle.
6. Personnel who request to operate a state vehicle must have a personal identification number (PIN) assigned and associated with use of agency fuel card for refueling and emergency repairs prior to confirmation of the use of the vehicle. A PIN number can be obtained through the fiscal accountant. Personnel will be instructed by the Safety Officer at each site concerning the fueling requirements for state vehicles.
7. Permission to take a state owned vehicle to a personal domicile must be granted in advance by the Executive Director when circumstances of the trip require special travel arrangements.

Authorized Drivers

Prior to any personnel driving on state or SCLHSA business, the personnel shall be authorized by the Executive Director. The personnel shall complete the Authorization and Driving History Form (DA 2054). The information on this form is used to acquire the Official Driving Record (ODR) from the Department of Public Safety, Office of Motor Vehicles. An ODR shall be obtained annually. If a person possesses an out-of-state license, the person shall acquire a certified copy of the ODR at his/her own expense, and may request reimbursement from the agency. The Authorization and Driving History form and the ODR are then submitted to Safety Coordinator for review and approval by the Executive Director or designee.

The authorization process shall include:

1. An annual review of the personnel's motor vehicle driving record (ODR)
2. Only individuals possessing a current and proper class driver's license shall be authorized by an agency to drive a motor vehicle on state business.
3. Completing and passing of an ORM recognized defensive driving course within 90 days of employment and a minimum of every three (3) years thereafter.
4. Developing a list of personnel authorized to drive. Such a list is kept at each audited location at all times.
5. Determining when driving responsibility shall be denied from personnel because of moving violations or revocation of license, or lack of insurance for their private vehicle.
6. If there are no changes to the driver information, then the DA 2054/2055 may be used on more than one occasion if the authorized Agency personnel date and sign the supplemental signature sheet and attach it to the DA 2054/2055.

After review of the ODR, the Executive Director or designee shall sign and date the Authorization and Driving History Form (DA2054/2055).

High-risk drivers shall not be authorized to drive vehicles on state business from the date of discovery for a minimum of twelve (12) months. High-risk drivers are those individuals having three (3) or more convictions, guilty pleas, and/or nolo contendere pleas for moving violations within the previous twelve (12) month period or having a single conviction, guilty plea, or nolo contendere plea for operating a vehicle while intoxicated, hit and run driving, vehicular negligent injury, reckless operation of a vehicle, or similar violation within the previous twelve (12) month period.

A complete list of authorized drivers will be maintained in the SCLHSA Administrative Office with the Risk Manager.

If a person is not authorized to drive, that person and his/her supervisor shall be notified in writing that the individual shall not drive on state business. The immediate supervisor, the travel coordinator and fleet control personnel shall be notified that this person shall not be given authority to drive on state business and that personnel's name shall be removed from the approved and authorized driver list.

Safe Drivers Training Course

All authorized drivers shall successfully complete an ORM recognized Defensive Driving Course within ninety (90) days of entering the program and shall complete a refresher course at least once every three (3) years unless their class of license requires other additional training or testing. Drivers who have **convictions** on their motor vehicle records shall be required to retake a recognized driving course within ninety (90) days of notification of a conviction. The specific course to be taken when a conviction occurs will be the course found in the Louisiana Employees Online system.

The SCLHSA Risk Manager or designee shall maintain documentation of the personnel's Operator Driver Record, Authorization and Driver History Form training dates, and any other information pertinent to the driver authorization record. This information shall be confidential and only accessible to supervisory personnel; with a "need to know". Each Safety Officer will have a list of approved/authorized drivers.

Vehicle Maintenance Program

State vehicles shall be properly maintained and operated to maximize safety, efficiency, and economy. All sites possessing authorized state vehicles shall be required to designate a staff member to be responsible for ensuring that preventive maintenance guidelines are followed, and for maintaining an individual vehicle file with records of vehicle usage and maintenance reports. The agency will follow the SCLHSA Quarterly Inspection Checklist for preventive maintenance.

All state vehicles will carry a public license plate. Vehicles owned by the State are exempt from compliance with the Motor Vehicle Safety Responsibility Law which requires proof of insurance be carried in the vehicle. A copy of the memo explaining this exemption should be placed in all vehicles owned, rented, leased or loaned to the State of Louisiana and used for official State business on an annual basis. This does not apply to personal vehicles used on State business.

SCLHSA locations with state vehicles will designate an individual who shall be responsible for the following:

1. Ensuring that preventative maintenance guidelines are followed on each state vehicle;
2. Maintaining compliance records which are subject to audit.
3. Maintaining an individual file on each state vehicle.
4. Assuring that all emergency equipment in vehicles is inspected and is in good working order.

Repairs

Before any repairs are done on any state vehicle, the feasibility of such repairs should be considered. The procedure for acquiring repairs will be handled first by utilizing fleet management statewide maintenance and repair contract, if available, then through an authorized dealer or competitive bid process. Repair work must be approved by the SCLHSA Fiscal Department.

Vehicle Operation

Under no circumstances shall any personnel, while in the course of state business, operate a vehicle in a reckless manner or while under the influence of intoxication or illegal substance.

The operator of a state vehicle shall be personally responsible for any fines, tow away charges, or other costs associated with his/her failure to observe federal and state motor vehicle laws or municipal ordinances.

Personnel are required to report any unsafe condition involving a state vehicle to the Maintenance Repairer Master via the online work order system or the Safety Officer. All reasonable procedures shall be followed to insure the safe and economical use of state vehicles, including:

- Conducting a pre-departure vehicle inspection and reporting findings on the log sheet ,
- Locking the vehicle when unattended,
- Removing credit cards from the vehicle when the keys must be left in the vehicle at a parking facility,
- Parking the vehicle in authorized places where reasonable security is offered and removing any State or personal property within the vehicle that is readily visible, and
- Completing the daily vehicle log sheet with date, odometer ending mileage, fuel or service costs and noting all points visited, where trip ended and purpose of the trip. The pre-operation driver checklist must also be completed.
- Refueling the vehicle when the indicator is below half full. The lowest octane fuel is required.
- Returning the keys to the vehicle assignment coordinator upon completion of travel.

Accidents and Reporting Requirements

A vehicular accident is defined as any incident in which the vehicle comes in contact with another vehicle, person, object, or animal, which results in death, personal injury, or property damage,

regardless of who was injured, what was damaged or to what extent, where it occurred or who was responsible.

All accidents shall be reported to the personnel's immediate supervisor and the SCLHSA program or clinic Driver Safety Coordinator on the day of the accident. The personnel must submit the LA Accident DA 2041 in addition to the SCLHSA Incident Report should an accident occur while an authorized driver/personnel is operating a SCLHSA vehicle or personal vehicle used for agency business. If the personnel is unable to complete the DA 2041, then the supervisor will complete the form to the best of his/her ability.

The completed LA Accident DA 2041 form shall be submitted to the Office of Risk Management by the Safety Coordinator within 48 hours and copied to the Risk Manager and Deputy Director. The personnel should also make every attempt to photograph any physical evidence related to the incident and to forward any such photographs to the Safety Coordinator along with the DA 2041 form. A copy of the police report shall accompany the DA 2041 or should be sent as soon as it is received. Do not delay the submission of the DA 2041 pending the receipt of the police report. Verification of sending the DA 2041 must be retained to prove timely completion within 48 hours to the TPA's Claim Unit. Verification can include email copies and fax transmission documents. The DA 2041 form can be downloaded from: <https://www.laorm.com> or from the internal

Note: When an accident occurs in a personal vehicle while the operator is on official business, strike through "state vehicle" and write "personal vehicle" on the accident reporting form. In ALL cases the personnel's liability insurer is the primary insurer of the accident. ORM's coverage is excess over any other collectible insurance. An incident report is still required.

Note: Any personnel involved in an accident that occurs during the course and scope of employment is required to comply with the policy on Drug-Free Workplace. In the event the person is unable to complete the forms, the personnel's supervisor shall complete the form for the individual. Instructions on how to complete the Accident Report (DA 2041) are attached to the report form. (Refer to SCLHSA Critical Incident Policy 1103).

Note: If the accident involves a Worker's Compensation claim, it must be reported to the third party administrator. The SCLHSA first report of injury form should be completed and sent to the Safety Coordinator for entering into the system.

A copy of the Accident Report Form (DA 2041) shall be maintained in the storage compartment of all SCLHSA vehicles, so that in the event of an accident all relevant information can be immediately documented.

Failure of an authorized driver to report any vehicular accident may be cause for suspension of Driver Authorization.

Corrective action following an accident may include the temporary suspension of driving privileges, special training, physical examination, drug testing or other specific actions as specified in policy.

19. BONDS, CRIMES AND PROPERTY PROGRAM

The Bonds, Crimes and Property Program provides protection to the State and the SCLHSA against financial and/or property loss resulting from any act and/or omission by any state public officials, appointees or personnel in the performance of their respective duties. (Refer to Policy 301).

SCLSHA follows guidelines established by the Office of Statewide Reporting and Accounting Policy (OSRAP) in addition to policies and procedures developed in order to fully participate in the Bonds, Crime and Property Program. Those policies and procedures are designed to manage assets and minimize potential losses and damages via an internal fiscal control system.

The prevention of property damage and/or loss

The Executive Director of SCLHSA has mandated in the safety policy statement that all personnel have the responsibility to prevent personal injury and loss of property as part of daily operation and that care and attention to prevention is the cornerstone of agency success. This is also a core standard in the Bonds and Crimes program. Through safety and fiscal policies, prevention of loss and damage is stressed and clear procedures are taught via safety meetings and lesson plans. Risk Exposure reporting is submitted quarterly and assures that the agency is insured based upon the most current data to calculate general and bodily liability, malpractice, worker's compensation, transportation and other property exposures. The Risk Manager coordinates with all departments in the completion of the report.

Separation of duties

Separation of duties shall be such that no one individual controls all phases of an activity or transaction, thereby minimizing the possibility that errors or irregularities will go undetected. Only those individuals authorized and trained to manage cash receipt and distribution, bank deposits, reconciliation of financial statements, collection of fees, processing of payments and remittances, payroll, purchasing, petty cash, property control management, the handling of postage machines, licenses, permits, securities and other state assets may do so.

Controlling inventories, including disposal thereof and participating in required property inventory reporting projects

The Property Control Manager coordinates with the Property Control Site Coordinators an annual inventory of property at their site. The Property Control Site Coordinators shall physically inspect all items of property for damage and/or loss and shall report such immediately to their facility manager/division director and the Property Control Manager, and document said damages/loss on an internal incident report and General Liability Claim Reporting Form. These forms shall become a part of the annual property inventory along with the current year discrepancy report.

Throughout the year, any property that is discovered by an employee/contractor to be missing or damaged will be reported immediately to the Property Control Site Coordinator who will follow steps necessary for reporting and action to repair/dispose of the property. This information is maintained by the Property Control Site Coordinator and Property Control Manager to be included in the annual inventory certification as appropriate.

All Internal Incident Reports, police reports and other documentation to property damage/loss shall be maintained in a file at each facility by the Safety Officer/Property Control Site Coordinator and a master file for the SCLHSA shall be maintained by the Compliance Officer. Property Risk Exposure Report is completed twice per year. The Safety Coordinator coordinates with all departments in the completion of the report to assure that information is reported accurately.

Purchasing procedures

Purchasing procedures are outline in Policy 305 which adhere to Title 38 and all other related state statutes. When goods or services must be purchased, a requisition for those purchases must be initiated and approved by the section head, and that requisition is forwarded to the fiscal department for review and approval.

Investigating and reporting losses/damages and timely reporting of losses to the correct claims unit

Incidents involving damage to or loss of SCLHSA assets and/or property shall be reported to the Property Control Site Coordinator/Safety Coordinator, Property Control Manager as applicable, Compliance Officer and Chief Financial Officer for thorough investigation and shall be recorded on an SCLHSA Critical Incident Report and General Liability Claim Reporting Form by the personnel discovering said damage or loss. The Chief Financial Officer, and any other SCLHSA personnel assigned by the Executive Director, shall participate in this investigation.

Property damage and/or loss resulting from dishonest and/or illegal acts of state personnel and private citizens such as vandalism, burglary, robbery, or embezzlement of cash, checks, valuable papers, securities, office equipment, supplies, etc. shall be reported to Executive Director, Chief Financial Officer and Compliance Officer.

All incidents involving liability to others resulting from injuries to persons and/or damage to their property because of harmful actions of SCLHSA personnel and officials through automobile accidents, false arrest, libel, discrimination, dangerous conditions of state property, professional malpractice, bond agreements, purchase orders, easements, leases, construction contracts and service contracts shall be reported to the Office of Risk Management for handling. The SCLHSA investigative and reporting process, to the extent possible, shall be instituted.

All incidents resulting in a loss (be it a result of dishonest and/or illegal acts, natural disasters, accidental loss, etc.) shall be reported to the Office of Risk Management and the appropriate law enforcement agency, if applicable, at the time that said damage and/or loss is discovered. The Executive Director and the Compliance Officer shall determine if and to whom all other incidents

shall be reported on a case by case basis. The Executive Director will determine which incidents shall be reported to the Board of Directors.

Handling negotiable items

Checks drawn on any accounts for the SCLHSA must be presented for dual signature along with supporting documentation for the disbursement Authorized signers on the accounts held by SCLHSA are the Executive Director, Deputy Director, Chief Financial Officer, and Accountant Manager. Signature cards shall be on file in the Fiscal Office indicating official signatories for all checking accounts for SCLHSA.

Collection and distribution of all funds for the SCLHSA shall require the verification of a minimum of two (2) personnel (i.e. Petty Cash and cash collections for clinical services deposits). Cash handling shall be conducted as outlined in the Petty Cash operational process. Please refer to Policy 316.

All SCLHSA personnel are bonded at the appropriate level for the duties entrusted to them. All monies and securities are properly insured against crime/loss. This shall be accomplished through the review, correction, update and timely submittal of the semiannual Bond and Crime Exposure and quarterly Risk Exposure Reports. The Compliance Officer shall ensure that insurance is maintained to protect the SCLHSA against all possible loss.

SCLHSA personnel regularly participate in contribution to the Employee Social Affairs Committee (ESAC) via authority sponsored activities. Designated individuals collect voluntary contributions, document the contributions via a register and present both the money and the register on a daily basis to the custodian of the site safe where they are logged and locked each night. Those funds are sent for deposit on the next scheduled date.

Securing vaults and safes

During operational hours, all cash and negotiables are kept in a combination lock box and during non-operational hours, the lock boxes are secured in a safe in a locked office. At no time is cash or negotiable items left unattended in an unsecured location.

The responsible party in keeping the program and policies current

The Fiscal and Billing Department Directors are responsible for developing and implementing the internal fiscal control program that includes operating guidelines and specific duties of all employees involved in this program. In addition, they are responsible for reviewing the Bonds and Crimes Property Program regularly for efficiency and effectiveness.

Supervisors are to assure that employees are properly trained in the Bonds and Crimes Property Program and that guidelines and safeguards are followed at all times. No safeguard of any internal control plan is to be eliminated or bypassed.

The Safety Coordinator will maintain the lesson plan on Bonds and Crimes, assure that it is current by collaborating with the fiscal and billing departments and delegates the teaching and review of content to on-site Safety Officers.

All new personnel shall receive a copy of the Bonds, Crime and Property Program as included in this General Safety and Risk Management Plan and shall participate in annual training this topic. Documentation of such shall be recorded in safety training records. Employee responsibility is emphasized throughout safety. Orientation and training for general and specific duties is documented and those employees who have specific responsibilities in Bonds and Crimes receive training on function and expectations.

Please refer to SCLHSA Fiscal Policies 300 through 317 for more in depth discussion of applicable processes in this section.

SCLHSA will participate with The Office of Risk Management and its Third Party Administrator (TPA) on periodic inspections and reviews of insured state facilities and programs. Agency representatives participating in reviews and inspections respond within the specified time frame with any corrective action requested.

Key Control

Policy 801 on Personnel Authorization and Access outlines the assignment, use and return of keys/cards, information systems, property assigned for official use by personnel while conducting business on behalf of the authority.

Personnel are issued keys for office doors and buildings according to the Personnel Authorization and Access policy. Upon termination of employment, badges, keys and access to data systems will be collected or terminated according to the Personnel Authorization and Access policy.

The decision to change locks or codes, or re-key is made by the Executive Director, in consultation with all applicable parties after a risk assessment is conducted to determine exposure.

Security

All SCLHSA locations will develop a site specific Security Plan which provides guidelines for safety and security of both visitors and staff as well as securing state property and its contents. The site specific plan follows guidelines established in the comprehensive Security Policy adopted by SCLHSA. At a minimum, site specific plans will include the following:

1. All visitors to clinic settings will register in the reception area and will be escorted to the designated office. Visitors will be escorted to subsequent appointments and at the conclusion of the appointment will be escorted to the registration area for check out. Visitors to administrative offices will be escorted to a designated office.
2. Entrance and exits shall be clearly marked. Entrance and exit signs may be reflective or illuminate. Building floor plans and evacuation routes are strategically posted and at eye level.
3. Personnel shall wear SCLHSA issued name badges at all times.

4. A site specific security plan is developed to control access before, during and after business hours. At locations where an electronic security system is in place, personnel will be assigned an individual alarm code to be used for arming and disarming the system. A call out list naming the responding personnel for after hour's security calls will be maintained.
5. Uniformed Security Guards under contract with SCLHSA will be stationed in designated clinics and assigned specific roles and responsibilities in providing a security presence in the clinic. Security Guards function at the direction of the Clinic Manager or designee. If a need for non-violent physical crisis intervention is determined, the team shall be summoned by paging or announcing "Code Brown to room ____". A minimum four member team, along with security personnel will report to the location to assess the situation and engage the person with the appropriate level of care.
6. Personnel are assigned use of SCLHSA owned equipment and are responsible for the proper use, care and security of assigned equipment. Specific equipment is tagged by the Property Control Manager. Personnel will secure office space in accordance with site specific practices.
7. Telephone numbers and contact information for the following are contained in the plan and are available to all personnel in the event of an incident involving utility companies, janitorial services, communication services, medical facilities and emergency services, law enforcement, hazardous/medical disposal service, copy, fax and postal machines and operating status of the Automatic External Defibrillators (AED).
8. Each site shall implement the use of security passwords that may be shared with law enforcement to ensure that personnel securing a building and occupants will know the identity of persons during a crisis situation.
9. Contraband consisting of drugs and weapons will not be kept on site following discovery under any circumstances. The local law enforcement agency having jurisdiction will be called immediately to take possession and make disposition of the contraband according to their protocol. SCLSHA personnel will attempt to explain to the owner, when known and when clinically appropriate, the steps to take to recover that property following the crisis event. Staff should take steps to safeguard the privacy and confidentiality of the individual and collaborate with them if clinically feasible on completing disclosure of information forms to assist with recovery of personal items. Should the law enforcement agency having jurisdiction refuse to take possession, please seek supervisory guidance and notify administration.

Cybersecurity

Access to data systems and Information Technology (IT) systems is granted as needed by supervisory personnel and through processes described in the SCLHSA Personnel Authorization and Access Policy.

Staff should report concerns, breaches or other suspicious activity, potential ransomware and phishing activities through the agency chain of command and to the IT Department.

SCLHSA performs a Security Risk Assessment annually via the Information Management Committee members, as assigned, and utilizes the downloadable Security Risk Assessment

(SRA) Tool developed by the Office of the National Coordinator for Health Information Technology (ONC), in collaboration with the HHS Office for Civil Rights (OCR). The tool is designed to help SCLHSA ensure it is compliant with HIPAA's administrative, physical, and technical safeguards. The SRA also reveals areas where protected health information (PHI) could be at risk.

Staff are cautioned about becoming complacent about the ease of "pointing and clicking" for information and embedded links for redirection to other sources. The external email caution "redline" has been added to bring attention to the potential for emails originating outside of our firewalls and to point and clicks that may be used, especially for sites that are not known by the email recipient or the agency.

Staff are in-serviced annually on cybersecurity through training during the quarterly Safety Meetings, Employee Orientation and IT updates throughout the year.

SCLHSA works within the guidelines provided by the Louisiana Cybersecurity Commission for assistance in investigating breaches that may involve State of Louisiana and SCLHSA's own information systems.

Passwords

The following are safeguards for employees related to passwords:

1. All computers will be safeguarded by password protected screen savers that are activated following 15 minutes of inactivity.
2. Must be kept confidential at all times and shared with no one.
3. Must be changed upon first use if a password has been changed by the Information Technology Department.
4. Programs may have different requirements for length, alphanumeric combinations and expiration settings.
5. Must be changed whenever it is determined PHI may have been compromised.

20. PHARMACY OPERATIONS

SCLHSA owns and operates a pharmacy whose purpose is to provide delivery of medications to designated SCLHSA Clinics for distribution. These prescriptions are delivered in a secured, labeled, tamper-evident container via an approved SCLHSA operated courier, in a temperature controlled vehicle. Medications are delivered to the authorized recipients (nurse, nurse practitioner or physician) at the designated clinic with tamper-evident locks verified as intact. The SCLHSA Medication Transfer Order form lists the responsible party signatures for all phases of the delivery process and is returned to the pharmacy for final quality check and reconciliation on a daily basis.

In the event of tampering, the Pharmacy Director will immediately begin an investigation and follow the established incident report policies of SCLHSA. Medications returned to pharmacy

follow a similar process for assuring that the container is secured and accounted for by using the Transfer Order Form and the Medication Return to Pharmacy Log.

South Central Louisiana Human Services Authority Pharmacy is located inside of the River Parish Behavioral Health Treatment Center (1809 W. Airline Hwy, LaPlace, La, 70068). All medications at this location are secured according to the Louisiana Board of Pharmacy (LAC, Title 46, Part LIII, Chapter 11, §1103), which includes requiring a separate alarm system to provide 24/7 surveillance to the pharmacy/prescription department.

Outpatient Clinics only store medications in a “medication room” which is locked at all times with restricted limited access. A list of authorized personnel with access is posted on the door of each clinics’ medication room. Only these authorized personnel have a key or entry code to the medication room. Medications are properly stored and labeled according to federal law. Nurses, nurse practitioners and physicians are the only disciplines allowed to distribute medications. Each medication room is inspected monthly according to SCLHSA policy “Clinic Inspections” by the Pharmacy Department for compliance.

21. EQUIPMENT MANAGEMENT

SCLHSA has an Equipment Management Program for all electrical and mechanical equipment housed in state owned buildings. The Equipment Management Program is intended to lower the high cost of insurance, reduce the number of unplanned outages and extending the life of the State’s mechanical and electrical equipment and increasing efficiencies in managing the scheduled equipment maintenance. This section applies only to electrical and mechanical systems that are integral to the operation of the building and/or are an affixed (hardwired and/or plumbed) part of buildings and structures. This section applies to the River Parishes and Lafourche Parish Treatment Centers, as well as Administrative Services and to any center that acquires the ability to have temporary emergency power via generators. An annual thermographic inspection is performed of electric panels at state owned locations to detect any arcing or overheating of the electric panels.

The equipment management program functions through independent service and preventive maintenance contracts for the mechanical and electrical equipment at the sites described above and through a contract to detect electrical hotspots in each building. Each location has an inventory of all mechanical and electrical equipment including the name of the equipment, location, model number and serial number, number and location of electrical panels in the building with labeling of each switch. Documentation of inspection and service is kept on site and is reported in Annual Safety Audits.

The Maintenance Repairer Master is responsible for the Equipment Management Program, the physical plant conditions to adhere to the life safety codes and monitors the timeframes and work for the preventive maintenance contracts and schedules for all hardwired and plumbed equipment owned by the state. The Maintenance Repairer Master assures that any work done is completely documented to show the specific preventive maintenance done. The Maintenance

Repairer Master is responsible for conducting monthly, quarterly and annual inspection and record keeping of all electrical and mechanical property owned by SCLHSA, but not under any contract by an independent contractor. The record keeping is accomplished by electronic work order requests. He is responsible for quality review of all work done by contractors to assure the safety and integrity of state owned property. An assessment of the need for Personal Protective Equipment has been made and determined that the Maintenance Repairer Master is not required to wear PPE but may opt to do so as he deems necessary. The Preventive Maintenance plan is an addendum to this plan.

Lock Out/Tag Out is not performed by anyone at SCLHSA but training is provided to staff so that they understand the basics of the process. The agency only contracts with knowledgeable entities and in the event of Lock Out/Tag Out, will require a copy of the entity's procedure be incorporated into the process and recording keeping.

SCLHSA buildings are inspected for confined spaces and none exist. Therefore, a statement of no confined spaces is signed and present at those sites that are state owned.

APPROVED:



Kristin Bonner, BSN, RN, Executive Director



Bryan Zeringue, Board Chairman