

Republic of Botswana

## 5. Risk Management

These forms are designed to be used by both hospital personnel and external surveyors. The following information must be provided after each survey, before submitting the completed survey forms.

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1.NAME OF HOSPITAL/CLINIC/FACILITY:	
2. BASELINE/INTERNAL SURVEY INFORMATION:	
Title and name of person who completed this docume	
Post and position held:	
Date of survey:	
3. EXTERNAL SURVEY INFORMATION:	
Name of external surveyor:	
Date of external survey:	
GUIDE TO COMP	LETION OF FORM
N.B. Hospital staff are please to use BLACK ink at	all times. The external surveyors are requested to
use RED ink at all times.	
Please circle the rated compliance with the criterior (Partially compliant), C (Compliant).	n, e.g. NA (Not applicable), NC (Non-compliant), PC
The default category affected is designated on the	form for
each criterion as follows:	
patient and staff safety	
2. legality	
3. patient care	
4. efficiency	
5. structure	
<ul><li>6. basic management</li><li>7. basic process</li></ul>	
8. evaluation	
The seriousness of the default is designated on the	•
form for each criterion as follows:	
1. mild 2. moderate	
3. serious	
4. very serious	
•	
	Documents Checked
	0.0000000000000000000000000000000000000
	Surveyor:
	Surveyor:

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### 5.1 Risk Management

#### 5.1.1 Standard

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Managers and leaders work collaboratively to develop, implement and maintain effective risk management systems in the organisation.

**Standard Intent:** To plan effectively, the organisation must be aware of all relevant risks. The goal is to prevent accidents and injuries, maintain safe and secure conditions for patients, families, personnel, volunteers and visitors, and reduce and control hazards and risks.

Risk management includes:

- comprehensive risk assessment of the organisation and/or facility
- planning all aspects of the risk management plan (financial, physical, environmental, medico-legal, operational, etc)
- implementation of the programme
- staff education
- testing and monitoring the programme, and
- periodic review and revision of the programme.

Monitoring of all aspects of the programme provides valuable data to make improvements in the programme and further reduce risks within the organisation.

	Criterion	Comments
		Recommendations
Criterion 5.1.1.1	There are documented risk management processes for	
Catg: Basic Management + Pat & Staff Safety	identifying all risks (physical, environmental, medico-legal, operational, etc) relating to	
Compliance  NA NC PC C	organisational processes and systems, personnel, patients, visitors and physical facilities.	
Default Severity for NC or PC = 4 Very Serious	, , , , , , , , , , , , , , , , , , , ,	
Criterion 5.1.1.2	Managers and leaders ensure	
Critical:	the development and implementation of written	
Catg: Basic Management + Pat & Staff Safety	policies and procedures for risk management processes	
Compliance	and activities.	
NA NC PC C	ľ	
Default Severity for NC or PC = 3 Serious		
Criterion 5.1.1.3	On-going in-service training	
Critical:	of all personnel in these policies, procedures and risk	
Catg: Basic Process + Pat & Staff Safety	management principles, including reporting of adverse	
Compliance	events, is documented.	
NA NC PC C		
Default Severity for NC or PC = 3 Serious		

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Criterion 5.1.1.4  Critical:  Catg: Basic Process + Pat & Staff Safety  Compliance  NA NC PC C  Default Severity for NC or PC = 4 Very Serious	One or more qualified and/or skilled and/or experienced individuals supervise the implementation of the risk management system.	
Criterion 5.1.1.5  Critical: O  Catg: Basic Process + Pat & Staff Safety	There is a system for monitoring negative incidents/near misses/adverse (sentinel) events and it includes the documentation	
Compliance  NA NC PC C  Default Severity for NC or PC = 4  Very Serious	of interventions and responses to recorded incidents.	
Criterion 5.1.1.6  Critical:  Catg: Evaluation + Pat & Staff Safety  Compliance  NA NC PC C  Default Severity for NC or PC = 4 Very Serious	Risk management systems are reviewed whenever there are changes in organisational systems and processes, or physical facilities.	

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## 5.2 Occupational Health and Safety

### 5.2.1 Standard

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Management makes provision for occupational health services in accordance with a documented policy framework.

Standard Intent: The provision of health and safety services, emergency planning and other aspects of providing a safe environment all require staff members to have the necessary knowledge and skills for their implementation.

To plan effectively, the organisation must be aware of all the risks present in the facility and to develop a proactive plan to reduce those risks, e.g. TB screening, manual handling and needle stick injuries.

Simple first aid materials should be available for staff members to treat cuts and other minor injuries.

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	Criterion	Comments
		Recommendations
Criterion 5.2.1.1	The organisation provides its	
Critical:	personnel with occupational health services.	
Catg: Basic Management + Pat & Staff Safety	Thousan Golviego.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 5.2.1.2	Where applicable, legislation	
Critical:	regarding occupational health services is implemented.	
Catg: Basic Process + Pat & Staff Safety	activides is implemented.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 5.2.1.3	The organisation has access	
Critical:	to the services of a knowledgeable and	
Catg: Basic Management + Pat & Staff Safety	experienced person in the field of occupational health.	
Compliance	'	
NA NC PC C		
Default Severity for NC or PC = 2 Moderate		

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Criterion 5.2.1.4  Critical:  Catg: Basic Management + Pat & Staff Safety  Compliance  NA NC PC C	Written policies and procedures on all aspects of health and safety guide the personnel in maintaining a safe work environment.	
Default Severity for NC or PC = 3 Serious		
Criterion 5.2.1.5  Critical:  Catg: Basic Process + Pat & Staff Safety  Compliance  NA NC PC C  Default Severity for NC or PC = 3 Serious	The occupational health service provides information and training on risks specific to the healthcare workers.	
Criterion 5.2.1.6  Critical:  Catg: Basic Process + Pat & Staff Safety  Compliance  NA NC PC C  Default Severity for NC or PC = 4 Very Serious	Post exposure prophylaxis (PEP) is available to the personnel in accordance with organisational policy.	

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### 5.3 Security

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### 5.3.1 Standard

As part of risk management, the organisation makes provision for the safety and security of personnel, volunteers, patients, visitors and buildings.

**Standard Intent:** The organisation has a responsibility to ensure that personnel, volunteers, patients and visitors are safe from attacks or theft by intruders. The organisation identifies areas and groups that are vulnerable and require added security.

The health facility takes responsibility for protecting patients from physical assault by outsiders, other patients and personnel. This responsibility is particularly relevant to infants and vulnerable children, the elderly and others unable to protect themselves or signal for help. Each health facility identifies its vulnerable patient groups and establishes a process for protecting the rights of individuals in those groups. Vulnerable patient groups and the health facility's responsibility may be identified in laws, charters or regulations. Comatose patients and patients with mental or emotional disabilities are also included. Protection extends beyond preventing physical assault to other areas of safety. Verbal and other forms of abuse, negligent care, withholding health facilities and failing to provide assistance in the event of a fire or other emergency are all aspects of safety and require vigilance.

The health facility seeks to prevent assault through processes such as investigating individuals in the facility without identification, monitoring remote or isolated areas of the facility and quickly responding to those thought to be in danger of assault.

The personnel understand their responsibilities in these processes. Plans are developed and implemented to provide protection. The loss of property belonging to the organisation must be prevented.

	Criterion	Comments
		Recommendations
Criterion 5.3.1.1	Internal security for the health	
Critical:	facility is provided.	
Catg: Basic Management + Pat & Staff Safety		
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 5.3.1.2	There is effective control of	
Critical:	access to restricted areas in the facility, e.g. laboratory,	
Catg: Basic Management + Pat & Staff Safety	pharmacy, etc.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		

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Criterion 5.3.1.3	External security for the	
Critical:	facility is provided.	
Catg: Basic Management + Pat & Staff Safety		
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 5.3.1.4	The health facility has a	
Critical:	process for protecting patients and personnel from	
Catg: Basic Management + Pat & Staff Safety	assault.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		
Criterion 5.3.1.5	A mechanism, known to the	
Critical:	personnel, is available for summoning the assistance of	
Catg: Basic Management + Pat & Staff Safety	security/police/protection service in the case of an	
Compliance	emergency.	
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 5.3.1.6	Alarm systems and signals	
Critical:	are tested every month.	
Catg: Basic Process + Pat & Staff Safety		
Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		

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### 5.4 Fire Safety

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#### 5.4.1 Standard

As part of risk management, the organisation implements structured systems to ensure fire safety.

**Standard Intent:** Fire is an ever present risk in a healthcare organisation. An organisation needs to plan for:

- the prevention of fire through the reduction of risks, such as the safe storage and handling of potentially flammable materials
- safe and unobstructed means of exit in the event of fire
- clearly indicated fire escape routes
- inspection reports from the local fire departments, and
- suppression mechanisms such as water hoses, chemical suppressants or sprinkler systems.

These actions, when combined, give patients, families, personnel and visitors adequate time to exit the facility safely in the event of a fire or smoke. These actions are effective no matter what the age, size or construction of the facility.

The organisation's fire safety plan identifies:

- the frequency of inspection, testing and maintenance of fire protection and safety systems, consistent with requirements
- the process for testing, at least twice a year, the plan for the safe evacuation of the facility in the event of a fire or smoke
- the necessary education of personnel to protect and evacuate patients effectively when an emergency occurs
- the need for each staff member to participate in at least one emergency preparedness test per year, and
- the required documentation of all inspection, testing and maintenance systems.

The organisation develops and implements a policy and plan to eliminate smoking in the organisation's facilities, or to limit smoking to designated non-patient care areas.

	Criterion	Comments
		Recommendations
Criterion 5.4.1.1	There are structured systems	
Critical:	and processes in place to ensure that all occupants of	
Catg: Basic Management + Pat & Staff Safety	the organisation's facilities are safe from fire or smoke.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 5.4.1.2	Documented certification is	
Critical: D	available from the relevant authority to show that the	
Catg: Basic Management + Pat & Staff Safety	facility complies with applicable laws and	
Compliance	regulations in relation to fire safety (e.g. fire clearance	
NA NC PC C	certificate).	
Default Severity for NC or PC = 4 Very Serious		

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Criterion 5.4.1.3  Critical:  Catg: Basic Process + Pat & Staff Safety  Compliance  NA NC PC C  Default Severity for NC or PC = 4 Very Serious	Fire fighting equipment is regularly inspected and serviced at least annually; the date of the service is recorded on the apparatus.	
Criterion 5.4.1.4  Critical:  Catg: Basic Process + Pat & Staff Safety  Compliance  NA NC PC C  Default Severity for NC or PC = 3 Serious	Flammable materials are clearly labelled and safely stored.	
Criterion 5.4.1.5  Critical:  Catg: Basic Process + Pat & Staff Safety  Compliance  NA NC PC C  Default Severity for NC or PC = 3 Serious	Easily recognised and understood signs prohibiting smoking are displayed in areas where flammable materials and combustible gases are stored.	
Criterion 5.4.1.6  Critical:  Catg: Basic Process + Pat & Staff Safety  Compliance  NA NC PC C  Default Severity for NC or PC = 3 Serious	A floor plan showing the location of fire fighting equipment, electrical distribution board, evacuation routes and emergency exits is displayed.	
Criterion 5.4.1.7  Critical:  Catg: Basic Process + Pat & Staff Safety  Compliance  NA NC PC C  Default Severity for NC or PC = 3 Serious	Annual training of personnel in fire prevention and evacuation procedures is documented.	

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## 5.5 Emergency Planning

#### 5.5.1 Standard

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As part of risk management, the organisation develops a written plan to respond to emergencies.

Standard Intent: Community emergencies, epidemics and disasters, such as damage to patient care areas as a result of an earthquake, or flu that affects the personnel, may directly involve the organisation. Organisations should also be prepared for bomb threats, fire, flooding, natural disasters, failure of water and electrical supplies, hostage taking, explosions and the consequent loss of vital services.

There may be a time when it is necessary to evacuate patients. This can only be done quickly and effectively if the personnel are trained in evacuation procedures.

To respond effectively, the organisation develops a plan and tests it. The plan provides processes for alternate care sites if a needed and an alternate source of medical supplies, communications equipment and other materials such as food and water if an inpatient unit or day care centre exists on the premises.

	Criterion	Comments
		Recommendations
Criterion 5.5.1.1	There is a written plan to deal	
Critical:	with emergencies (including bomb threats, fire, flooding,	
Catg: Basic Management + Pat & Staff Safety	natural disasters, failure of water and electrical supplies).	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 5.5.1.2	Documented evidence is	
Critical:	available to show that the personnel participate in a	
Catg: Basic Process + Pat & Staff Safety	rehearsal of the plan at least annually.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		

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### 5.6 Prevention and Control of Infections

#### 5.6.1 Standard

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As part of risk management, the organisation designs and implements a coordinated programme to reduce the risk of infections in patients and healthcare workers.

Standard Intent: For an infection prevention and control programme to be effective, it must be comprehensive, encompassing both patient care and employee health. The programme is appropriate to the size and geographic location of the organisation, the services offered by the organisation and the patients seen by the organisation.

Infections can enter the organisation via patients, their families, staff members, volunteers, visitors, other individuals and vectors. Thus, all areas of the organisation where these individuals or vectors are found must be included in the programme of infection surveillance, prevention and control.

One or more individuals, part time or full time, direct the programme. The qualifications needed depend on the activities they will carry out and the requirements may be met through education, training or experience. Coordination involves communication with all parts of the organisation to ensure that the programme is continuous and proactive.

Whatever the mechanism chosen by the organisation to coordinate the infection control programme, medical and nursing personnel are represented and engaged in the activities. The individual, committee or other mechanism must also monitor those housekeeping and other support service practices which may lead to the spread of infection, e.g. cleaning, linen supply, laundry services and waste disposal.

Information is essential to an infection control programme as it supports the following activities:

- tracking risks, rates and trends in nosocomial infections
- data analysis, and
- interpreting and presenting findings.

In addition, infection control programme data and information are managed with those of the organisation's quality management and improvement programme.

Hand washing, barrier techniques and disinfecting agents are fundamental to infection prevention and control. The organisation identifies those situations in which the use of masks and gloves is required and provides training in their correct use. Soap and disinfectants are located in those areas where hand washing and disinfecting procedures are required. The personnel are educated in proper hand washing and disinfecting procedures.

	Criterion	Comments
		Recommendations
Criterion 5.6.1.1	An individual member of staff	
Critical:	is identified to be responsible for infection control in the	
Catg: Basic Management + Pat & Staff Safety	organisation.	
Compliance	1	
NA NC PC C	]	
Default Severity for NC or PC = 3 Serious		

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Criterion 5.6.1.2  Critical:   Catg: Basic Management + Pat & Staff Safety  Compliance  NA NC PC C  Default Severity for NC or PC = 4 Very Serious	All patient, staff and visitor areas of the facility are included in the documented infection control programme.	
Criterion 5.6.1.3  Critical:  Catg: Basic Management + Pat & Staff Safety  Compliance  NA NC PC C  Default Severity for NC or PC = 3 Serious	Written policies and procedures guide the personnel in the implementation of the infection control programme.	
Criterion 5.6.1.4  Critical:  Catg: Basic Process + Pat & Staff Safety  Compliance  NA NC PC C  Default Severity for NC or PC = 3 Serious	Regular in-service training is given to all personnel in the field of infection control and is documented.	
Criterion 5.6.1.5  Critical:  Catg: Basic Process + Efficiency  Compliance  NA NC PC C  Default Severity for NC or PC = 3 Serious	The infection control programme is monitored through a document audit process.	
Criterion 5.6.1.6  Critical:  Catg: Basic Process + Pat & Staff Safety  Compliance  NA NC PC C  Default Severity for NC or PC = 4 Very Serious	Hand washing and disinfecting facilities, including water, appropriate water taps, soap, paper towels or hand sanitisers are available in all relevant areas.	

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Criterion 5.6.1.7  Critical:  Catg: Basic Process + Pat & Staff Safety  Compliance  NA NC PC C  Default Severity for NC or PC = 3 Serious	Personnel are constantly reminded of the importance of effective hand washing, e.g. posters are displayed.	
Criterion 5.6.1.8  Critical:  Catg: Basic Process + Pat & Staff Safety  Compliance  NA NC PC C  Default Severity for NC or PC = 4 Very Serious	PPE&C (gloves, masks, aprons, etc.) is available and used correctly.	
Criterion 5.6.1.9  Critical:  Catg: Evaluation + Pat & Staff Safety  Compliance  NA NC PC C  Default Severity for NC or PC = 4 Very Serious	The organisation uses risk, rate and trend information to design or modify processes to reduce nosocomial infections to the lowest possible levels.	
Criterion 5.6.1.10  Critical:  Catg: Basic Process + Legality  Compliance  NA NC PC C  Default Severity for NC or PC = 4  Very Serious	The organisation reports information on nosocomial infections and notifiable diseases to appropriate external public health agencies.	

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#### 5.6.2 Standard

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The organisation has a written plan for handling, segregating, storing and disposing of waste.

Standard Intent: Household waste, hazardous wastes such as chemicals, hazardous gases and vapours, pharmaceutical and healthcare waste, are identified by the organisation and are safely controlled according to a plan. All clinical waste is regarded as hazardous or potentially hazardous. The plan is included in the organisation's risk management plan.

	Criterion	Comments
		Recommendations
Criterion 5.6.2.1	There is a waste management system, consistent with current local bylaws and regulations.	
Critical:		
Catg: Basic Management + Legality		
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 5.6.2.2	The system includes safe	
Critical: D	handling, segregation, storing and disposing of different types of waste.	
Catg: Basic Management + Pat & Staff Safety		
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 5.6.2.3	Handling, segregation, storing and disposing of healthcare waste is included in the plan.	
Critical:		
Catg: Basic Management + Pat & Staff Safety		
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 5.6.2.4	There is a colour-coding system for the bags to be used for segregating the different types of waste.	
Critical:		
Catg: Basic Management + Efficiency		
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		

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