Safety in the medical workplace

Safety is a "must have," not a "nice to have"

October 25, 2011 By Fawn J. Winkelman DO, Janee D. Steinberg MD FAAD, Jay A. Shorr CMBM CAC

Safety in the setting of the medical workplace often is not discussed or even considered until it's too late, yet it is imperative for the protection of staff, physicians, and patients to have a well-defined safety protocol in place.

	This article comes from our personal passion and dedication of commitment to safety in the workplace. Safety culture comes from the top down, never from the bottom up. We all take safety for granted because we believe it is something that is supposed to be there when we come to work. Nobody ever questions the safety record of a medical practice when they are applying for a job there.	tom up. osed to
Jay Shorr	In interviews with hundreds of potential applicants over the past 10 years for several medical practices, safety has never been brought up in the process unless we solicited the dialogue. Most people don't even know how to respond because they really never	

have given it much thought.

That's scary, because if they don't have safety in the forefront of their minds, how will they know how to be preventive rather than reactive when potential occurrences appear imminent? As employers, we all must make safety a culture in the workplace, Janee Steinberg	
because it's not only the law, but it's the right thing to do. Make safety a part of your mission statement and follow through with it. First and foremost, let's define safety ar safety culture.	d

DEFINING SAFETY AND SAFETY CULTURE

Fawn Winkelman

Safety can be defined as the control of recognized hazards to achieve an acceptable level of risk. This can take the form of being protected from the event or from exposure to something that causes health or economic losses. It can include protection of people or of possessions.

Safety is the condition of a "steady state" of an organization or place doing what it is supposed to do. It's costly to have a safety program, but it's more expensive not to have one.

Practicing safety in a medical office begins with defining safety as it relates to the work environment. Medical offices should consider potential risks and threats so that safety management protocols can be developed to minimize and eliminate those potential risks. The Occupational Safety and Health Administration (OSHA) states that people have the right to a safe work environment, and employers must take the proper precautions to maintain safety in the workplace.¹

The safety culture of an organization is the product of individual and group values, attitudes, perceptions, competencies, and patterns of behavior that determine the commitment to, and the style and proficiency of, an organization's health and safety management. Organizations with a positive safety culture are characterized by communications founded on mutual trust, by shared perceptions of the importance of safety, and by confidence in the efficacy of preventive measures.²

As practice administrators for a multispecialty cosmetic surgical practice, our top two priorities are the safety of our employees and patients and the protection of our practitioners' licenses (including physicians, nurses, aestheticians, etc.)

Once you establish and maintain the integrity of providing a safe workplace for everyone, you immediately will see how the staff will adopt the same culture that you represent. In fact, you will see others looking out for potential hazards as well. These cultures are not "here-today-gone-tomorrow" temporary programs. They should and must be permanent. Anything less is totally unacceptable.

In the beginning of your attempts to make safety a permanent culture, you may see employees and even managers roll their eyes. We all know what that means when we see it: They are either unaware, uneducated, or initially unwilling to possibly adopt change or increase the awareness of their current unenforced safety program.

Why? Because anything that requires change without an initial economic reward often is thought of as either a waste of time or less than a priority. When someone (employee or patient) becomes sick or injured due to our negligence or proper use of safety protocols, you will see how fast attitudes change. Always remember that the next injury or illness can be pointed directly toward you.

ARE THERE LIMITATIONS TO SAFETY?

Safety can be limited in relation to some guarantee or a standard of insurance to the quality and not harmful functioning of an object or organization. It is used to ensure that the object or organization will do only what it is meant to do.

It is important to realize that safety is relative. Eliminating all risk, if even possible, would be extremely difficult and very expensive. A safe situation is one in which risks of injury or property damage are low and manageable.³ Risk is the potential that a chosen action or activity (including the choice of inaction) will lead to a loss (an undesirable outcome). The notion implies that a choice having an influence on the outcome exists (or existed). Potential losses themselves may also be called "risks." Almost any human endeavor carries some risk, but some are much riskier than others.

COMMITMENT TO BE SAFE

We all must understand that safety doesn't just happen. As we mentioned before, safety starts from the top down. As physicians, licensed allied health professionals, managers, employees, support staff, and vendors, we must all adhere to the professional standards that we all stand for. No one ever wakes up in the morning thinking, "How I can get sick or injured at work today," right? But does anyone ever wake up thinking, "How can I make sure that we consistently maintain a safer workplace?" My answer is, probably not. That's where a safety culture plays such an important role in the process.

Not having an awareness of safety in your office can also prove to be financially detrimental. When one of your employees gets hurt and needs to be out for a while, it places an added burden on the rest of your staff. This burden now makes all of them subject to additional injuries because they have to work harder to do more work with less assistance. This situation can allow for riskier shortcuts and possible injury.

Patients deserve to be treated with the highest level of safety that we have the ability to provide. Look at the practices out there that really don't have a safety culture or protocol. We often read about them and say, "How could they let that happen?" The next time you feel that way, look in the mirror, be honest with yourself, and ask, "Could that have happened to me?" Without definitive safety measures in place, you bet it could have.

Your staff members also deserve the same respect. If you don't have a safety officer in your practice, ask for volunteers. Appointing someone who really doesn't want the responsibility will only make matters worse. The staff members won't respect him or her because they know that this person really doesn't care.

Maintain a safety checklist, and make sure that you have a routine and timely reporting system. Give the safety officer time to actually go through the facility and note any deficiencies that need immediate and future correction. Let him or her feel good about making your practice a safer environment for all concerned.

There is no room for error when it comes to safety. When you hear someone say that they almost got hurt, you need to listen carefully and consider that a near miss. The next thing you should be thinking is, "How can I prevent that from possibly happening again?"

Are you aware that most workers' compensation programs offer discounts for safety plans and drug and alcohol plans? That's a great bonus just for doing the right thing.

We can't possibly cover every aspect of safety in our practices or eliminate every chance for possibly injuries, but making awareness a part of our daily lives certainly will minimize the potential risk in the future.

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Types of safety risks and situations in the workplace

Some of the factors that influence what types of safety risks could be present in your practice:

Environmental: Air quality, personal attitude, weather conditions, etc.

Equipment: Sharps, red bag, frayed plugs, personal protective equipment, safety shields, gloves, safety needles, cords, and slippery objects on the floor, etc.

Medical records: Health Insurance Portability and Accountability Act issues, surgical time-out, wrong patient entries, wrong site surgeries, patients with the same names, lack of proper consents, inconsistent or improper recordkeeping, etc.

Hazardous materials: Material safety data sheet (MSDS) and Right to Know (chemicals) Biomedical Hazardous Waste, etc.

Some of the specific steps you can take to proactively make your workplace a safe environment for everyone:

- Ensure a drug- and alcohol-free workplace. Is it part of your policy and procedures manual and a condition of employment? If not, why not?
- Prevent medical errors via time-out in the operating room and positive identification of patients and procedures.
- Formulate a safety plan. Do you have a written safety plan and protocols to follow if an accident happens?
- Undertake proper staff training in Occupational Safety and Health Administration rules, laser safety and use, workplace violence, HIV/hepatitis, MSDS and Right to Know, and drug and alcohol abuse prevention.

n Insist on employee commitment. Do you have your employees' commitment?