UC DAVIS HEALTH Environment of Care

# Annual Evaluation of Effectiveness of Safety Management Plan

**FY 2025/2026** Updated: August 2025

## Overall Evaluation of Effectiveness Statement

The safety management plan (SMP) is effective. Overall objectives are being met or have a plan of action to be implemented, ensuring they are met.

## Evaluation of Scope and Responsibilities

The scope of the plan is appropriate. The plan covers all relevant Joint Commission elements of performance (EPs) as well as the required elements of a Cal/OSHA injury and illness prevention plan (IIPP). The setting is also appropriate. The plan applies to the hospital, hospital-based clinics, and Primary Care Network.

## Evaluation of Objectives

The plan objectives are appropriate. These are aligned with The Joint Commission (TJC) EPs as well as with required elements of a Cal/OSHA IIPP.

Overall objectives were met. Safety management benefits from an active Safety Committee (SC), strong support from administration, and the professionalism and expertise of the Environmental Health & Safety (EH&S) staff. EH&S has an effective partnership with Risk Management/Workers' Compensation, Clinical Engineering, Plant Operations and Maintenance (PO&M), Facilities Planning and Development, Infection Prevention, Licensure & Accreditation, and Occupational and Employee Health Clinic (OEHC).

### Objective 1: Ensure compliance with applicable Health System, Joint Commission, local, state, and federal laws, regulations, and standards related to health and safety and the environment of care.

Status: This objective was met. In FY25/26 all regulatory deliverables were met on time. In addition, Environment of Care (EoC) rounds had an 91% closure rate of all findings, which will continue to rise as findings continue to be resolved after fiscal year close.

### Objective 2: Reduce the risk of injuries for patients, visitors, and staff.

Status: This objective was met. Reporting of incidents occurs through the RL Datix management system, which is a robust tracking system that includes the incident in addition to follow up measures; the EH&S Associate Director is the category manager for EoC and has final responsibility for ensuring resolution of incidents in a timely manner. Additionally, Loss Prevention, OEHC, and Workers' Compensation are partners who work closely with EH&S to reduce risk. In FY 25/26, EH&S had a partnership with PO&M to find and repair sidewalk gaps/irregularities that could lead to trip/falls for visitors, patients, or staff.

### Objective 3: Provide for safety training.

Status: This objective was met. Trainings are provided throughout the year in various formats. There are trainings that occur during the Safety Committee meetings, at huddles with partners/stakeholders, and when departments request specific information for staff. Additionally, there are trainings provided for Safety/Building Coordinators during quarterly meetings and monthly training for new Safety/Building Coordinators. EH&S provides quarterly trainings to the environmental rounding team on topics such as survey readiness and Environment of Care inspections.

### Objective 4: Ensure enforcement of safety requirements.

Status: This objective was met. Safety requirements are built into policies within UCD Health's Ellucid Policy Management System. Additionally, safety requirements are outlined through communication of various topics during Safety Committee meetings.

### Objective 5: Ensure timely investigation of incidents and action to prevent recurrence.

Status: This objective was met. All EoC-related Incident reports in RL solutions were closed with an appropriate time frame. In addition, all other incidents were investigated promptly by each subject matter expert.

### Objective 6: Provide for regular monitoring and continuous improvement of the safety program.

Status: This objective was met. The SC met every other month addressing topics such as TJC survey preparation, respiratory protection, post-hoc incident summaries, etc.

## Evaluation of Performance: Key Performance Measures FY 25/26

| Safety KPI Measures | Performance | Goal | Status |
|---|---|---|---|
| Outdoor walkway assessment of slip/trip hazards focused on deviations in the pathways. Divide Sacramento campus into 4 quadrants and assess one each quarter. | Assessment and correction. | 1 quadrant per quarter | This project was paused for over one quarter while EH&S and PO&M aligned on correction process. The goal was 60% completed with FY 25/26 |
| Fully transition to managing Pre-construction Infection Control Risk Assessment (PICRA)/ICRA with ATG software | Use ATG software to for PICRA/IRA | 100 % | This goal was met. PO&M was full transition to using ATG. EH&S has decided to pursue a superior technological platform and this goal will be continued through FY 26/27. |
| Use Environment of Care TJC triennial survey findings to drive eyewash improvement initiative. | Improvement of process to assess whether an eyewash is needed. | Policy update, new risk assess-ment, better document sharing, new webpage. | Goal met. New assessment process created. Policy revised. 9 eyewash assessments conducted and documented. New webpage created. |

# Safety Management Plan

**Fiscal Year 2026/2027**

**Updated: August 2026**

## Introduction and Mission Statement

This Safety Management Plan (SMP) serves as a framework for ensuring management of hazards in the healthcare environment and to reduce the risk of injury to patients, visitors, and staff. It establishes the parameters within which a safe EoC is developed, maintained, and improved. It also addresses specific responsibilities for safety. This SMP is executed by a variety of disciplines, working groups, and sub-committees, with the goal of providing superior patient care.
The overall objectives of the SMP are as follows:

- Ensure compliance with applicable UCDH, TJC, local, state, and federal laws, regulations, and standards related to health and safety and the EoC/Physical Environment (hereafter known as EoC).
- Reduce the risk of injuries for patients, visitors, and staff.
- Provide for safety training.
- Ensure enforcement of safety requirements.
- Ensure timely investigation of incidents and action to prevent recurrence.
- Provide for regular monitoring and continuous improvement of the safety program.

## Plan Scope and Responsibilities

The SMP establishes the parameters within which a safe EoC is established, maintained, and improved for UCDH. The SMP addresses specific responsibilities and general safety and employee education programs. These and other elements of the SMP are all directed toward managing the activities of the employees to reduce the risk of injuries to patients, visitors, and employees and to help employees respond appropriately in emergencies.

The Chief Executive Officer at UCDH appoints a SC, SC Chair, and Health & Safety Officer to develop, implement, and monitor the SMP (P&P 1602 and SC Annual Charge).

The SC members include representatives from administration, clinical areas, support services, and executive leadership. Annually, the SC assigns ultimate responsibility for the EoC to an Executive Director, reporting to the CEO. The EoC program goals are developed and reviewed as part of the annual evaluation.

The Safety Officer is appointed and responsible for directing the safety program and for directing an ongoing, organization-wide process to collect information about deficiencies and opportunities for improvement in the EoC management programs.

Each manager and supervisor retain primary responsibility for implementing the plan for employees under their control. Directors and managers are provided with appropriate safety program guidelines and are directed to maintain a current awareness of the safety program and to ensure its effective implementation within their department.

Each employee is responsible for attending safety education programs and for understanding how the material relates to his or her specific job requirements. Employees are responsible for following

the safety guidelines set forth in the safety plan. Employee attendance is monitored, and a list of non-attendance is provided to managers and/or directors for follow-up.

The UCDH SC will evaluate the information submitted to the committee, develop policies and procedures, understand applicable safety regulations, and evaluate the effectiveness of the safety program and its components on an annual basis. Responsibilities of the SC include reporting significant findings and recommending actions to the governing body, medical staff, hospital administration, and all departments when deemed necessary.

The SMP applies to UCDH and clinics, including the Primary Care Network. Other UCDH organizations, including the School of Medicine, and School of Nursing are governed by the UC Davis Safety Program (UC Davis P&P 290-15) and overseen by both UCDH and campus EH&S.

### List of Objectives 26/27

- Ensure compliance with applicable UCDH, TJC, local, state, and federal laws, regulations and standards related to health and safety and the environment of care.
- Reduce the risk of injuries for patients, visitors, and staff.
- Provide for safety training.
- Ensure enforcement of safety requirements.
- Ensure timely investigation of incidents and action to prevent recurrence.
- Provide for regular monitoring and continuous improvement of the safety program.

## Key Program/Performance Measures

### FY 2026/2027 Safety KPIs, reported quarterly

*Safety Committee Safety Goals*

| Description of KPI Measure | Goal | Comments |
|---|---|---|
| Outdoor walkway assessment of slip/trip hazards focused on significant deviations in pathways. Divide Sacramento campus into four quadrants and assess one each quarter. Coordinate with Plant Operations and Maintenance and others to assess/correct findings. | Complete project from last year after pause | Addressing frequent source of injury (slip/trip) |
| Finalize RSS permitting software and transition FP&D and PO&M to utilize RSS for ICRA/PCRA permits (and ILSM but that is FMO). Utilize RSS to run inspections on the permits as well. | Full management of PICRAs/ICRAs/ with RSS | Will dramatically increase TJC compliance and safe management of construction areas |

| Description of KPI Measure | Goal | Comments |
|---|---|---|
| Using WC data, partner with EVS leadership to strengthen safety culture and reduce workplace injuries. Foster a proactive safety culture that reduces workplace injuries through engagement, education, hazard mitigation, and leadership accountability. Review WC data with EVS leadership to identify injury trends and determine interventions for the highest-risk categories. | Mine data, schedule collaborative meetings. | No comment provided |

## Safety Management Activity Detail

### Risk assessment and management

1. Supervisors and managers have primary responsibility to assess and manage hazards. Supervisors and managers are responsible for communicating with administration and seeking assistance when significant hazards are encountered (UC Davis P&P 290-15).
2. All staff have the responsibility to report hazards that may impact patients, visitors, or staff. Staff are encouraged to report hazards directly to supervisors or to Safety Coordinators. Hazards may also be reported through other means including:
   A. Via the electronic incident reporting system (UCDH P&P 1466).
   B. By calling EH&S, using a Hazard Report Form (UCDH P&P 1605) or e-mailing safety@health.ucdavis.edu.
3. EH&S has the primary responsibility to provide consultation, support, interpretation of requirements, liaison with regulatory agencies and overall direction to minimize and eliminate safety risks (UC Davis P&P 290-15).
4. A variety of means are used to ensure all relevant information is collected and analyzed and that there is collaboration and consultation in the process of risk assessment and management:
   A. The SC includes representatives from major divisions throughout UCDH and is empowered to discuss, investigate, and act on all safety hazards. The Health and Safety Officer is a member of the SC and plays a role in ensuring committee processes are effective (UCDH P&P 1602, 1617).
   B. The SC has seven designated sub-committees for FY 25/26:
      - Life Safety
      - Security
      - Loss Prevention
      - Workplace Violence
      - Smoke and Tobacco-Free Oversight
      - USP 800 Compliance
      - Clinical Lab Safety

C. The Health and Safety Officer or a designee is a member of other committees and groups that review products, projects and procedures that affect the risk of injury to patients, visitors, and staff. This includes:
   - Infection Control Committee
   - Patient Care Product Standards
   - Emergency Preparedness Committee
   - Regulatory Accreditation Committee

5. Collaboration, communication, and innovation to address risk assessment and management are encouraged and rewarded at all levels. Safety performance is an element of job performance review for staff. Safety improvements are eligible for individual and group awards through employee recognition programs.

### Hazard surveillance

Several processes are used to ensure regular inspection of the hospital and clinics for hazards.

1. In the Environmental Rounds process a multidisciplinary team inspects all patient care areas for environmental deficiencies, hazards, and unsafe practices. The SC and Health and Safety Officer review inspection reports and the overall effectiveness of the program.
2. Safety Coordinators are responsible for periodic inspection of their work areas and resolution of problems (UCDH P&P 1620). Safety Coordinators and EH&S ensure all non-patient care areas are inspected at least annually.
3. The Health and Safety Officer and staff of EH&S have broad authority to inspect all areas of the hospital and clinics.
4. PO&M and UCD Police regularly inspect hospital grounds for hazards.

### Reporting and investigating incidents of property damage or injury to patients, visitors, or staff

There are several methods for submitting incident reports, and procedures to ensure reports are investigated.

1. Incidents involving patients and visitors are reported using the electronic incident reporting system, which is designed to ensure that reports are routed for review and follow up action (UCDH P&P 1466). Significant events or trends related to the environment of care are reported to the SC by the Health and Safety Officer. Risk Management (RM) reviews all incident reports and informs the SC of important events or trends.
2. Incidents related to a vehicle accident, property loss or damage are reported to RM and investigated by that office (UC Davis P&P 370-25). RM informs the SC of important events or trends.
3. Other significant events related to disruption of critical utilities or hazardous materials are investigated by PO&M, IT, and EH&S and are reported to SC (UCDH P&P 1607).
4. Injuries to staff are reported to the Workers' Compensation Unit. Supervisors have primary responsibility for investigation and follow up. Departments and divisions are also responsible for review, analysis and follow up of injuries within their units. Additional investigation is performed, as needed by Workers' Compensation and EH&S. Information

is analyzed by the Workers' Compensation Unit and EH&S. Significant trends and events are reported to the SC (UCDH P&P 2942).

5. Workplace violence reports and bloodborne pathogen exposure reports are also collected through on-line reporting systems and are reviewed and followed up as appropriate by UCD Police, the Workplace Violence Committee and Occupational and Employee Health Clinic.

## Policy and procedure – distribution, enforcement, and update

1. Health and safety policies and procedures are published in the UCDH Policies and Procedures system (P&P, through Ellucid) and are updated at least every three years. Where UCDH-specific procedures are not needed, UCD policies and procedures apply. Departments may issue department specific policies and procedures and are responsible for their update and enforcement (UCDH P&P 1004).
2. Supervisors and managers are responsible for policy and procedure enforcement. Failure to follow published policies and procedures is subject to disciplinary action in accordance with UCDH staff policies and collective bargaining agreements (e.g., UCD Personnel Policies for Staff Members 62).

## Employee safety and training

1. Managers and supervisors have primary responsibility for employee safety. Unit Safety Coordinators provide assistance.
2. The core of the employee safety program is the UCDH IIPP, implemented at the division and department level as Departmental Injury Prevention Programs in accordance with UCDH P&P 1620 and UC Davis P&P 290-15. Department programs include provisions for:
   - Department-specific health and safety goals and action items
   - Department-specific health and safety policies and procedures and training
   - Periodic inspections by the unit Safety Coordinator.
3. The SC, the Health and Safety Officer and EH&S provide oversight and guidance.
4. New employees receive initial safety training, which may be in person or on-line. All employees take annual refresher safety training, which may be in person or on-line. This information is supplemented, as needed, by department-specific safety training (UCDH P&P 1620).

## Smoking policy

The smoke and tobacco-free policy is contained in UCDH P&P 1628. UCDH is smoke and tobacco-free. Smoking is not permitted anywhere on the property or in buildings.

## Recalls

Drug, hospital supply and medical equipment, food, vehicle, and other recalls are performed in accordance with UCDH P&P 2262.

## Maintenance and supervision of grounds and equipment

PO&M is responsible for maintenance and regular inspection of hospital grounds and external equipment such as liquid oxygen and liquid nitrogen storage, cooling towers. UCD Police regularly patrol hospital grounds.

### UCDH Safety Committee

The SC plays an important role in collecting and analyzing information related to health and safety problems and ensuring participation of clinical, administrative and support departments in decisions on improvements (UCDH P&P 1602, 1617). Many units are represented directly on the SC and other individuals may attend or provide advice at SC meetings, in subcommittees or in ad hoc groups that report to the SC. The SC is responsible for reviewing the status of all EoC programs. In addition, the committee is responsible for review and approval of UCDH policies and procedures that impact the environment of care. The SC takes action to improve the EoC and to evaluate the effectiveness of those improvements.

A quarterly report is provided to the Medical Staff Executive Committee and an annual report is provided to the Hospital COO. Reports include the results of performance improvement initiatives.

### UCDH Health and Safety Officer

The UCDH Health and Safety Officer oversees development and implementation of the SMP and is authorized to take action when conditions pose an immediate threat to life or health or pose a threat of damage to equipment or buildings (UCDH P&P 1602, 1617).

The Health and Safety Officer serves as Chair of the SC and is responsible to ensure effective oversight of all EoC programs. The Health and Safety Officer reports to the Associate Chief Operating Officer. Patients, visitors, and staff may report safety hazards directly to the Health and Safety Officer.

### Safety program performance monitoring and improvement and annual report

1. The Health and Safety Officer or Associate Safety Officer prepares quarterly reports to the SC on the status of the Safety Management Program. The report includes performance monitors, significant developments, and the status of annual goals for the program. Reports are included in SC minutes.
2. The Health and Safety Officer prepares an annual evaluation of the SMP. This includes a review of program objectives, scope, performance, and effectiveness. The report is submitted to the SC.

### Control of hazardous energy

1. Energy from ionizing and non-ionizing radiation sources and lasers is controlled through the Health Physics and Occupational Safety units of EH&S (Radiation Safety Manual, UCDH P&P 1727 – MRI safety, UCDH P&P 1642 – laser safety).
2. Control of hazardous electrical and mechanical energy is through the electrical safety and lock out/tag out programs (UCDH P&P 1627 – lockout/tagout).

### Control of airborne contaminants

EH&S works with PO&M, Facilities Planning & Design and Infection Prevention to ensure the ventilation system provides appropriate pressure relationships, air-exchange rates, and filtration efficiencies in areas designed to control airborne contaminants, and to ensure effective controls are in place during construction and renovation. EH&S monitors and controls exposures to hazardous gases.