

COMMUNITY HEALTH CENTRE, SAINKUL

HOSPITAL ADMINISTRATION MANUAL

Hospital Security & Safety Management

STANDARD OPERATING PROCEDURE
HAM.05

STANDARD OPERATING PROCEDURES

FOR



HOSPITAL SECURITY & SAFETY MANAGEMENT

COMMUNITY HEALTH CENTRE, SAINKUL

758043

ODISHA

*Superintendent
CHC Sainkul, Keonjhar*

1.0 Purpose:

To implement the Physical and Infrastructure Security activities

2.0 Scope:

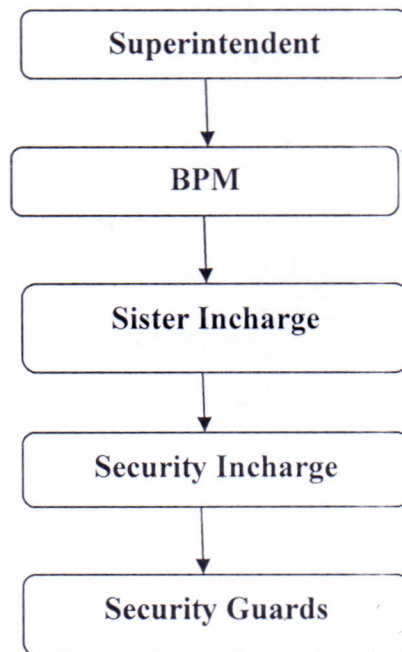
This covers all infrastructure and services provided by hospitals such as:

- Infrastructure & hospital property
- Control & flow of visitors
- Safety of Patients (in as well as out patient)
- Safety from all infiltrators.

3.0 Reference:

Quality Management System Manual, MNL: QSM: 01, Section 7.1

4.0 flow chart:



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5.0 Standard Procedures

S. No.	Activity	Responsibility	Related Document
5.1	Security Management		
5.1.0	Security service is to be out sourced in CHC, Ghatgaon		
5.1.1	Duty hours of the Security Guards are eight hours and guards are on duty for three shifts. <ul style="list-style-type: none"> • Morning Shift: 8 AM to 2 PM • Afternoon Shift: 2 PM to 6 AM • Night Shift: 6 PM to 8 AM. 	Security Incharge	Attendance register of Security Guards
5.1.2	The areas to be covered by the security guards posted in each post are under. <ul style="list-style-type: none"> • OPD and Emergency Area. • Main Gates • Administrative Block • Labour ward • Wards 		
5.1.3	Security guards are authorized to restrict unauthorized entry of patients and relatives in the restricted areas hospital.	Security guards	
5.1.4	All Security breach Incidents are reported by the security guards to MOIC. The BPM/ Security In charge files a Security Incidents Report . Each such report is analyzed and counter signed by the MO I/C	Security gaurds/ BPM/ MO I/C	Security Incident Report
5.2	Fire Safety and Its controls:		
5.2.1	Training for fire safety and prevention is given to all staffs.	BPM	
5.2.2	Fire extinguishers are placed at different marked points throughout the hospital.		
5.2.3	Checking and testing of Fire extinguishers refilling is maintained.	Security Incharge	

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<p>5.3</p>	<p>Biological Hazards:</p> <p>The hospital has identified primary causes for biological hazards which are:</p> <ul style="list-style-type: none">• Infectious sharp objects• Blood and body fluid spills• Bio medical waste• Hospital Acquired Infection <p>Biological hazards are managed and prevented as per standard procedures for Hospital Infection Controls</p>	<p>Hospital Infection Control Committee</p>	<p>SOP for Hospital Infection Control</p>
<p>5.4</p>	<p>Radiation Hazards:</p> <p>The hospital identifies the importance of prevention of radiation hazard for its employees and patients. All the staff exposed to radiation is provided with TLD badges and the same are forwarded to BARC authorities for monitoring every quarter. The imaging equipments are monitored and calibrated on a regular basis to ensure prevention of excessive emission.</p>	<p>Radiology Staff</p>	

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6.0 Records:

S. NO	Record Number	Record Name	Type	Retention Period
1	RG/SS/01	Attendance register of security guard	Register	

Appendix

1. Security Attendance Register

Community Health Centre, Ghatgaon
Security Attendance Register


Shift Type				Date	
Sl.	Name	Time (..... To.....)	Location	Sign	Remarks
1					
2					
3					
4					
5					

7.0 Process Efficiency Criteria:

Sl. No.	Activity	Efficiency Criteria
1	Checking of Fire Extinguisher	Fire Extinguishers installed in the hospital shall be checked/ refilled on periodical basis (quarterly/ yearly) or as specified by the refilling agency.
2	Safety Inspection	Hospital Safety Inspection by hospital safety committee shall be carried out on yearly basis
3	No. of Sentinel Events reported.	Targeted Reduction in Sentinel events
4	No. of Pilferage incidents reported	Targeted reduction in pilferage incidents.

8.0 Reference Documents:

- ISO 16069 – Safety Way Guidance System
- WHO Patients Safety Guidelines
- Hospital Disaster Management Plan


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