

Health and Safety Committee Meeting Minutes – 4/18/2018

Present: Catharina Lee, Kim Riopelle, Cyndy Singletary, Leroy Harcum, Katie League, Lawanda Williams, Taylor Kasky, Kevin Kearney, Eva Hendrix, Aisha Darby, Laveda Bacetti, Sean Berry, Paul Beeker, Tonii Gedin, Maria Martins-Evora, Stephanie Donelan



*March meeting cancelled due to snow

Agenda:

I. Review of Infection Control Plan Risks and Goals

- a. Risks and Goals outlined in the plan are the result of a risk assessment conducted by clinical directors and data collected from incident reports.
- b. Universal Screening – based on work by the CTR; working w/psych; medical will be an opt-out test; group brought up need to identify a system for community health workers who work with clients who do not receive services at the agency.
 - i. Need to clarify the Hep C workflow
 - ii. Need to address how Connect clients can factor into the Universal Screening
 1. Is it the Agency's responsibility to get TB info on Connect clients?
 - iii. Engage providers/clinical directors to ensure all labs are being transferred appropriately
- c. Discussed potential for an isolation room to address some infection control risks
 - i. Only TB is airborne, so the isolation room would only potentially prevent TB spread
- d. Bed Bugs/Live Insect Procedure
 - i. Drafting a procedure that remains in alignment with the Agency's commitment to ensuring access to services
 - ii. Logistics with moving clients to "safe room," off-sites; cleaning room
 - iii. Continuing to work toward best practices for staff
 - iv. Ensure PPE and other environmental controls are available and all staff are trained appropriately
 - v. Will begin training staff on identification and response; mitigating client/client identification
 - vi. Contract with a specialty service provider to clean
 - vii. One main impediment is that treating clients at the Agency does not help the client deal with BBs in their homes/belongings
 - viii. Staff expressed desire for policy to address: cleaning, home visits, Agency and vehicle
 - ix. Vehicle remediation: use seat covers at all times as per Vehicle Use Policy – suggested using covers on both passenger and drivers seats to remove stigma
 - x. **Will send around Myth Buster document for committee to review**

II. Code Silver

- a. COA working with BCPD to conduct active shooter training/drill within the coming months

- b. Code Silver will be developed in tandem with the drill – this code will be used in the event of an active shooter situation
- c. Primary issues at Fallsway are the prevalence of non-bulletproof glass windows throughout the building; limited hiding places for staff
- d. Facilities Director is working with a firm to conduct an assessment of the building in order to train staff on most effective response protocols and handling clients

III. CAP Update

- a. Create a CAP committee comprised of SC members
- b. Director of Clinic Admin handed out drafts of updated CAP for review
- c. Develop a database so all relevant staff members can remain abreast of active CAPs

MEETING FOLLOW UPS:

- 1. BB training update**
- 2. Send out myth buster document**
- 3. CAP procedure review**

Next meeting: May 16st, 2018 – 421 Fallsway