

OREGON STATE HOSPITAL

POLICY

SECTION 8: Safety, Security, Emergency Management **POLICY: 8.024**

SUBJECT: Tool and Sharp Security

POINT PERSON: Facilities Director

APPROVED: Dolores Matteucci **DATE: JULY 21, 2022**
Superintendent

SELECT ONE: New policy Minor/technical revision of existing policy
 Reaffirmation of existing policy Major revision of existing policy

I. PURPOSE AND APPLICABILITY

- A. At Oregon State Hospital (OSH), patients have the right to receive care in a safe setting as directed by 42 Code of Federal Regulations (CFR) § 482.13(c)2. For the safety of staff and patients, this policy establishes a system of tool and sharp accountability at OSH.
- B. This policy applies to all staff.

II. POLICY

- A. Any instrument designed for repair, craft, personal hygiene, culinary use, or any other instrument which has a high probability of being used as a weapon against self or others or as an escape device must be closely monitored. Weapons are as defined in OSH policy 8.027, "Weapons in the Workplace."
- B. Each treatment unit and treatment area must have assigned secure areas for the storage of tools and sharps used by patients or on the unit.
 - 1. Each secure storage area must be designed with a shadow board for each tool and sharp placed in the storage area.
 - 2. The OSH Security department must provide consultation, training, and assistance for the setup and implementation of all new tool or sharp storage areas.
- C. Each tool or sharp storage area must have a process for tool and sharp accountability, which must include a "Tool/Sharp Sign-Out Log" (Attachment A).

1. Staff must use the "Tool/Sharp Sign-Out Log" when checking items in or out for patients and staff. The following must be included on the log:
 - a. Date
 - b. Patient/staff name
 - c. Description of tool/sharp
 - d. Time in/out
 - e. Staff initials
 2. Whenever a patient signs out a tool or sharp, an identification marker for that patient must be placed in the location of that tool or sharp.
- D. Each treatment unit and treatment area must complete an inventory at the end of treatment group or before the end of each shift and physically account for all issued tools and sharps.
- E. Each patient care unit must complete a tools/sharps inventory by unit staff during shift change over. At this time, lead nurses will:
1. Verify that the inventory is complete and indicate that all tools/sharps are accounted for, and
 2. If a tool or sharp is missing, the lead nurse will initiate the process for a missing tool/sharp as described in this policy.
- F. Missing tools or sharps must be immediately reported to:
1. Manager
 2. Security Department
 3. Program Director
- G. Staff must confer with their manager, OSH Security staff, and Program Director about next steps to locate missing tools or sharps, which may include, but is not limited to:
1. 15-minute unit checks
 2. Patient personal search based on reasonable suspicion, per OSH policy 8.041, "Patient Personal Searches, and OSH policy 6.061, "Transgender Gender Non-Conforming Treatment."
 3. Room or unit search, per OSH policy 8.014, "Room Unit Treatment Mall Searches."

4. Video review to search for the missing tools or sharps.
 5. Follow up with staff in treatment or patient care areas.
- H. Staff must complete an incident report per OSH policy 1.003, "Incident Reporting" for a missing tool and/or sharps item. OSH Security department staff must complete required security-related documentation for missing tools and sharps and any security-related documentation related to OSH policy 1.003.
- I. OSH Facilities department and contract staff must check in with the nurse in charge of the unit before beginning a work project on a unit.
1. Information provided to the nurse in charge must include, but is not limited to:
 - a. A clear definition of the reason for the repair or maintenance staff will be on the unit,
 - b. The types and amounts of tools on the unit, and
 - c. The estimated length of time that repair or maintenance staff will be on the unit.
 2. The nurse in charge may assign staff to monitor the work area to provide security and assist OSH Facilities department staff with general security and safety.
 3. If possible, patient access to work areas may be restricted or limited. If an area cannot be adequately secured, patients may be temporarily relocated to another designated secure area.
- J. Facilities department or contract staff must survey all project areas for security and safety before any work starts. OSH Facilities department or contract staff must secure all tools and equipment before leaving the project area unattended and before patients are allowed to return to the area.
- K. Oregon State Hospital (OSH) follows all applicable regulations, including federal and state statutes and rules; Oregon Department of Administrative Services (DAS), Shared Services, and Oregon Health Authority (OHA) policies; and relevant accreditation standards. Such regulations supersede the provisions of this policy unless this policy is more restrictive.
- L. Staff who fail to comply with this policy or related policy attachments or protocols may be subject to disciplinary action, up to and including dismissal.

III. DEFINITIONS

- A. "Secure storage area" for the purposes of this policy means a locked room or storage cabinet.

- B. "Shadow board" means a secure area that houses tools or sharps and provides visual verification via red paint, ink, cut-out, or other similar means to identify whether a tool or sharp is accounted for.
- C. "Sharps" means any sharp or pointed instrument (e.g., scissors, knives, razors, saws) that have a high probability of being used as a weapon, as defined in OSH policy 8.027, against self or others or as an escape device.
- D. "Staff" includes employees, volunteers, trainees, interns, contractors, vendors, and other state employees assigned to work at Oregon State Hospital (OSH).
- E. "Tool" means any instrument designed for repair, cleaning, handicrafts, or culinary use that has a high probability of being used as a weapon, as defined in OSH policy 8.027, against self or others or as an escape device.
- F. "Tools and sharps accountability" means a system that tracks and monitors patient use of tools and sharps. The system includes documentation of issuance and return.

IV. PROCEDURES

V. ATTACHMENTS

Attachment A Tool/Sharp Sign-Out Log

VI. RELATED OSH POLICIES AND PROTOCOLS

5.016 Inmate Work Force

8.014 Room, Unit, and Treatment Mall Searches

8.019 Staff Response to Alleged Criminal Acts and Contraband

8.027 Weapons on Campus

8.038 Code Blue Medical Emergency

8.041 Personal Searches

8.044 Contraband

VII. REFERENCES

42 CFR § 482.13c2.

Joint Commission Resources, Inc. (2019). The joint commission comprehensive accreditation manual for hospitals, EC.01.01.01 – 02.01.01. Author.