

INTRODUCTION

Workplace hazard identification, assessment and control are an on-going process. It is often more effective and easy to eliminate hazards if risk management approaches used at the planning and design stages for process and place of work.

Risk Management is a part of decision making processes and an integral part of all organizational processes as it addresses uncertainty and facilitates continual improvement of organization. There should be proactive risk management across the organization including clinical as well as non-clinical. Risks management includes risk identification, prioritization, and risk alleviation. It shall be monitored and reviewed for continued effectiveness.

According to NABH, hospitals must ensure proactive risk management across the organization. It should include clinical and non-clinical risks .This shall have risk identification, prioritization, risk alleviation .Risk management plan shall be documented risks identification, actions taken to alleviate it should be a part of the plan. There should be a mechanism for informing staff regarding the same. Risk Management plan should be monitored and reviewed for effectiveness at-least annually.

AIM: The aim of the study was to identify the potential hazards to increase the safety levels of the healthcare staff through risk assessment in the laundry department and controls to be taken for effective management of the laundry as well as to improve the quality of the services to the healthcare staff. OBJECTIVE: - Finding/ identifying the potential hazards in Laundry. - Assessing the risks that may result from these hazards. - Quantifying the risk on the basis of likelihood and severity using a risk matrix. - Determining control measures to eliminate or minimize the level of the risks. - Monitoring and reviewing the effectiveness of control measures.	METHODOLOGY Study design:- Observational study Study duration:- 3rd April to 2nd June 2017 Location:- Laundry department in Asian Hospital, Faridabad Study Tool:- Risk Matrix Type of data collected :- Primary data collected by visiting the department and by communicating with the staff. Secondary data from the various Hospital policies, documents in various departments. Most of the information was collected through observations. Both types of observations –participative and non participative were used in learning the function and working of various departments.
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RISK ASSESSMENT AND RATING							CONSEQUENCE/ SEVERITY		LIKELIHOOD/ PROBABILITY	RISK
PROBABILITY										
SEVERITY	Catastrophic (4)	E (20)	E (16)	H (12)	M (8)	L (4)	1: NEGLIGIBLE: First Aid needed at scene, minor supportive medical treatment, minor system impairment, No man-day lost		1: Unlikely: Can assume will not occur	1-5: LOW RISK: Acceptable, no further action needed
	Critical (3)	H (15)	H (12)	M (9)	M (6)	L (3)	2: MARGINAL: Hospital treatment needed, Minor injury, lost workday accident, compensable injury or illness, minor property damage, Man-day lost (Patient/ attendant/ staff)		2: Seldom: Unlikely, but could occur at some time	6-10: MODERATE RISK: Adequate, look to improve at next review
	Marginal (2)	H (10)	M (8)	M (6)	L (4)	L (2)	3: CRITICAL: Major Injury, temporary total disability in excess of 3 Months, major system damage, significant property damage, Critical to personnel (patient/ attendant/ staff) health		3: Possible/ Occasional: Occurs sporadically	11-15: HIGH RISK: Tolerable, look to reduce risk
	Negligible (1)	M (5)	L (4)	L (3)	L (2)	L (1)	4: CATASTROPHIC: Death or Permanent disability, system loss, major property damage		4: Likely: Occurs several times	16-20: EXTREMELY HIGH RISK: Unacceptable, stop activity & make immediate improvements
									5: Very Likely/ Frequent: Occurs often, continuously experienced	

PROCESS		POTENTIAL RISK	S	P	RS	RR	CONTROLS	SUGGESTIONS
COLLECTION OF DIRTY LINEN		Improper body posture	2	4	8	M	Training given to staff for proper handling of the linen and body posture .	Provide spring loaded trolley .
		Dirty Linen Quantity not specified during collection - Pilferage	1	2	2	L		Provision in the form of Register or Form to mention the Quantity of Linen collected (linen wise) from each area shall be introducing – with sig of both Staff and Laundry staff .
WASHING OF CLOTHES		Inadequate/ Excess amount of: - washing powder - bleaching powder	2	2	4	L	Use measured amount of the washing powder and bleach using Measuring Jar .	Data should be maintained for Bleach and Washing powder used in each cycle of wash – duly signed by personnel of Laundry.
		Incorrect time and temperature	1	2	2	L	Training given to the staff to set the standard temperature and time.	1) Record the temperature and time attained in each washing cycle by a personnel of Laundry . 2) Calibration of Display (for Time and Temp) 3) Mention time on Washing machine for temp and time required (in Bilingual Language).
WATER EXTRACTOR AND DRYER		Wrong temperature and time setting lead to retention of moisture	1	2	2	L	Training given to the staff.	1) Calibration of Display (for Time and Temp). 2)Mention time on Washing machine for temp and time required (in Bilingual Language) .
		Heat Stress Burns	2	4	8	M	1) Use of PPE during washing clothes. 2) Proper exhaust system. 3) Proper job rotation	1) Adequately insulated steam and hot water pipes. 2)Worker know how to recognize the signs of heat stress 3)Cool rest area available for workers 4)Worker Encouraged
		Electric Shock	2	4	8	M	1)Close fitting of electric wire. 2)Electrical equipment in wet area suitable for that type of work. 3)All electrical switch regularly inspected and test.	1)Electrical hazard signage’s should be displayed 2)Damage electric plug, leads, sockets, Immediately removed from the service. 3)Electric wires keep away from sources of damage (e. g water , heat ,etc).
Slippery floor		Falling	4	5	20	H	Dry floor	1)Available of housekeeping staff all time for cleaning water on floor. 2) Floor should have sufficient grip or put non slippery mat on the floor. 3) Presence of Guard railing, and loading bay .
FOLDING AND PRESSING		Chances Of Getting Shock	2	5	10	M	Separate space for pressing	Presence of Mat, caution board should be there
STORAGE			1	3	3	L	Chances of getting infection or dirt layer on washed linen.	Closed cupboards should provide.
DISTRIBUTION		Uncovered fresh linen trolley	1	2	2	L		Usage of all covered trolley at time of distribution.
First Aid Kit		Absence of first aid kit	2	4	8	M		First aid kit to be placed and made available at the laundry.
		Inadequate hand hygiene area	2	4	8	M		Provide proper area for hand washing.
Health check up		Risk to health of the staff	2	4	8	M		Annual health checkups of the staff.



<u>CONCLUSION</u> Hazards risks identification in hospitals is one of the most important works that would help to increase patient safety and therefore increasing patient satisfaction. It will also help in identify, analyze and prioritize all hazards in laundry department. This case study takes into account for the vulnerabilities of a specific hazard, consequences if a hazard is realized and means to prevent those hazards. The staffs of the laundry department are getting trained for proper technique of handling and usage of the machines to avoid hazards in the department. Machines are timely calibrated to avoid failure during procedure. This study illustrated what are the types of hazards that can happen in the department and how to prevent them.	
<u>ABBREBATIONS</u> <u>S—SEVERITY</u> <u>P—PROBABILITY</u> <u>R S—RISK SCORE</u> <u>R R—RISK RATING</u>	Dr. ANKIT YADAV ROLL NO:-0385 MBA HOSPITAL MANAGEMENT