

## DIALYSIS CENTER (DC) AT QUENTIN MEASE GOVERNING BODY

Tuesday, August 13, 2024

1:30 P.M.

(or immediately following the Quality Committee)

BOARD ROOM

4800 Fournace Place, Bellaire, Texas 77401

The meeting may be viewed online at: <http://harrishealthtx.swagit.com/live>

*Notice: Members of the Governing Body may participate by videoconference.*

### Mission

Harris Health is a community-focused academic healthcare system dedicated to improving the health of those most in need in Harris County through quality care delivery, coordination of care, and education.

## AGENDA

- |   |               |        |
|---|---------------|--------|
| I. <b>Call to Order and Record of Attendance</b>  | Dr. Cody Pyke | 2 min  |
| II. <b><u>Approval of the Minutes of Previous Meeting</u></b>   | Dr. Cody Pyke | 5 min  |
| <ul style="list-style-type: none"> <li>• <u>DC at Quentin Mease Governing Body Meeting – June 11, 2024</u></li> </ul>   |               |        |
| III. <b>Executive Session</b>   | Dr. Cody Pyke | 15 min |
| <p>A. Report by the Executive Vice President, Chief Compliance and Risk Officer, Regarding Compliance with Medicare, Medicaid, HIPAA and Other Federal and State Healthcare Program Requirements and a Status of Fraud and Abuse Investigations, Pursuant to Tex. Health &amp; Safety Code Ann. §161.032, Including Possible Action Regarding this Matter Upon Return to Open Session – <b><i>Ms. Carolynn Jones</i></b></p> <p style="text-align: right;">(5 min)</p>  |               |        |
| <p>B. <u>Report Regarding Quality of Medical and Healthcare, Pursuant to Tex. Health &amp; Safety Code Ann. §161.032 and Tex. Occ. Code Ann. §160.007 to Receive Peer Review and/or Medical Committee Report in Connection with the Evaluation of the Quality of Medical and Healthcare Services, Including DC Governing Body Quality Scorecard Report, Quality Review Committee Report and Medical Executive Committee Report, Including Possible Action Upon Return to Open Session – <b><i>Dr. Matasha Russell, Dr. Kevin Erickson and Dr. Lori Timmons</i></b></u></p> <p style="text-align: right;">(10 min)</p> |               |        |
| IV. <b>Reconvene</b>  | Dr. Cody Pyke | 2 min  |

|  |                      |               |
|--|----------------------|---------------|
| <b>V. General Action Item(s)</b>   | <b>Dr. Cody Pyke</b> | <b>20 min</b> |
| <b>A. General Action Item(s) Related to Policies and Procedures</b>  |                      |               |
| 1. <a href="#"><u>Consideration of Approval of Reviewed and Amended Policy and Procedure for the DC at Quentin Mease – Dr. Kevin Erickson and Dr. Lori Timmons</u></a>   |                      | (10 min)      |
| • <a href="#"><u>Policy QMD-HR 6.00 Human Resource Manual</u></a>  |                      |               |
| 2. <a href="#"><u>Consideration of Approval of New Policy and Procedure for the DC at Quentin Mease – Dr. Kevin Erickson and Dr. Lori Timmons</u></a>  |                      | (10 min)      |
| • <a href="#"><u>Workplace Safety and Violence Reduction Plan</u></a>  |                      |               |
| <b>VI. DC at Quentin Mease Governing Body Operations Report</b>  | <b>Dr. Cody Pyke</b> | <b>10 min</b> |
| <b>A. Report Regarding Medical Staff Operations, Clinical Operations, Statistical Analysis of Services Performed and Operational Opportunities at the Dialysis Center, Including Questions and Answers – Dr. Kevin Erickson and Dr. Lori Timmons</b> |                      |               |
| • Strategic Pillar 1: Quality and Patient Safety   |                      |               |
| ○ Dialysis Services – System Support During Hurricane Beryl  |                      |               |
| <b>VII. Adjournment</b>  | <b>Dr. Cody Pyke</b> | <b>1 min</b>  |

**MINUTES OF THE HARRIS HEALTH SYSTEM**  
**DIALYSIS CENTER AT QUENTIN MEASE GOVERNING BODY MEETING**  
**Tuesday, June 11, 2024 | 1:30 PM**

| AGENDA ITEM                                      | DISCUSSION  | ACTION/RECOMMENDATIONS  |
|--|---|---|
| <b>I. Call to Order and Record of Attendance</b> | The meeting was called to order at 1:31 p.m. by Dr. Cody Pyke, Presiding Officer. It was noted that a quorum was present and the attendance was recorded. The meeting may be viewed online via the Harris Health website: <a href="http://harrishealthtx.swagit.com/live">http://harrishealthtx.swagit.com/live</a> .   | <b>A copy of the attendance is appended to the archived minutes.</b>  |
| <b>II. Introductions</b>                         | Dr. Pyke requested that all members of the Dialysis Center at Quentin Mease governing body introduce themselves. She stated that Harris Health System Dialysis Center at Quentin Mease Health Center (“HHDC”) is an end stage renal disease facility. HHDC is owned and operated by the Harris County Hospital District d/b/a Harris Health System and is a distinct facility that operates exclusively for the purpose of providing outpatient chronic dialysis services to patients with end state renal disease. Dr. Pyke noted that the HHDC Governing Body shall consist of five (5) members, which includes the following members: <ol style="list-style-type: none"> <li>1. Dr. Cody Pyke, Harris Health Board Member</li> <li>2. Ms. Sima Ladjevardian, Harris Health Board Member</li> <li>3. Mr. Matthew Reeder, Administrator</li> <li>4. Dr. Kevin Erickson, Medical Director</li> <li>5. Dr. Lori Timmons, Nursing Director</li> </ol>   | <b>As Presented.</b>  |
| <b>III. Election of Officers</b>                 | <p><b>A.</b> Discussion and Appropriate Action to Elect Officers of the Dialysis Center (DC) at Quentin Mease Governing Body in Accordance with Article V, Section 1 of Governing Body Bylaws of the DC at Quentin Mease</p> <p>Dr. Pyke stated per Article V, Section 1, of the Governing Body Bylaws of the Dialysis Center at Quentin Mease, the Governing Body must elect a Chair and may include a Vice Chair, a Secretary and other officers; therefore, the Governing Body must conduct an election for the Office of Chair for the remainder of the 2024 Calendar Year. Dr. Pyke initiated nominations for the Office of Chair of the HHDC Governing Body. However, no other prior nominations were provided. Dr. Pyke then opened the floor for any additional nominees for the Office of HHDC Chair and after three (3) requests declared that nominations for HHDC Chair closed without objections. Dr. Pyke turned the meeting over to Mr. Matthew Reeder to conduct the election. Mr. Reeder requested a vote for appointment of Dr. Cody Pyke to the office of Chair of the HHDC Governing Body, and the votes to elect Dr. Cody Pyke as the Chair of the HHDC Governing Body were cast as follows:</p> | <p><b><u>Motion No. 24.06 - 01</u></b></p> <p><b>Votes cast unanimously to elect Dr. Cody Pyke as the Chair of the DC at QM Governing Body. Motion carried.</b></p> |

|                                   |  |  |
|-----------------------------------|--|--|
|                                   | <ul style="list-style-type: none"> <li>• Dr. Cody Pyke – Yes</li> <li>• Ms. Sima Ladjevardian – Absent</li> <li>• Mr. Matthew Reeder – Yes</li> <li>• Dr. Kevin Erickson – Yes</li> <li>• Dr. Lori Timmons – Yes</li> </ul>  |  |
| <b>IV. Executive Session</b>      | At 1:37 p.m., Dr. Cody Pyke stated that the HHDC would enter into Executive Session for Items ‘A and B’ as permitted by law under Tex. Health & Safety Code Ann. §161.032 and Tex. Occ. Code Ann. §160.007.  |  |
|                                   | <b>A.</b> Report by the Executive Vice President, Chief Compliance and Risk Officer, Regarding Compliance with Medicare, Medicaid, HIPAA and Other Federal and State Healthcare Program Requirements and a Status of Fraud and Abuse Investigations, Pursuant to Tex. Health & Safety Code Ann. §161.032, Including Possible Action Regarding this Matter Upon Return to Open Session  | <b>No Action Taken.</b>  |
|                                   | <b>B.</b> Report Regarding Quality of Medical and Healthcare, Pursuant to Tex. Health & Safety Code Ann. §161.032 and Tex. Occ. Code Ann. §160.007 to Receive Peer Review and/or Medical Committee Report in Connection with the Evaluation of the Quality of Medical and Healthcare Services, Including DC Governing Body Quality Scorecard Report, Quality Review Committee Report and Medical Executive Committee Report, Including Possible Action Upon Return to Open Session   | <b>No Action Taken.</b>  |
| <b>V. Reconvene</b>               | At 1:46 p.m., Dr. Cody Pyke reconvened the meeting in open session; she noted that a quorum was present and that no action was taken in Executive Session.   |  |
| <b>VI. General Action Item(s)</b> | <b>A.</b> General Action Item(s) Related to Policies and Procedures  |  |
|                                   | <p>1. Approval of Reviewed and Amended Policies and Procedures for the DC at Quentin Mease</p> <p>Dr. Lori Timmons, Nursing Director, HHDC, presented the amended policies and procedures for the HHDC. In accordance with regulatory requirements for the HHDC, the Governing Body must annually review and approve policies. Dr. Timmons mentioned that all policies have been revised to include the new facility name, updated information about the current dialysis machine model, and policy numbers by removing "RDC" from each one. A copy of the amended policies are available in the permanent record.</p> | <p><b><u>Motion No. 24.06 – 02</u></b></p> <p><b>Moved by Dr. Kevin Erickson Paret, seconded by Dr. Lori Timmons, and unanimously passed that the Governing Body approve VI.A.1. Motion carried.</b></p> |

|  |   |                             |
|--|---|-----------------------------|
| <p><b>VII. Dialysis Center at Quentin Mease Governing Body Medical Director and Administrator Reports</b></p> <ul style="list-style-type: none"> <li>• Strategic Pillar 1: Quality and Patient Safety <ul style="list-style-type: none"> <li>○ Hemodialysis/Peritoneal Dialysis Overview</li> <li>○ Nephrology Provider Collaboration</li> <li>○ 5 Diamond Patient Safety Program</li> </ul> </li> </ul> | <p><b>A.</b> Report Regarding Medical Staff Operations, Clinical Operations, Statistical Analysis of Services Performed and Operational Opportunities at the Dialysis Center, Including Questions and Answers</p> <p>Dr. Kevin Erickson, Medical Director, HHDC, provided an operational overview covering Hemodialysis and Peritoneal Dialysis, collaboration with Nephrology providers, and its 5-Diamond Patient Safety Program. Dr. Erickson shared that Hemodialysis involves regular blood cleansing (typically 3 times per week) at the dialysis center, using access typically located in your arm. In contrast, Peritoneal dialysis is daily and involves the removal of waste from the blood by rinsing the abdominal cavity (peritoneal cavity), which can be performed at home. Dr. Jennifer Small, Executive Vice President and Administrator, Ambulatory Care Services, announced that Dr. Lori Timmons received recognition from a Det Norske Veritas (DNV) surveyor for her exemplary practices at HHDC. Dr. Small also highlighted that Dr. Timmons was invited to speak at the 2024 DNV Healthcare symposium.</p> | <p><b>As Presented.</b></p> |
| <p><b>VIII. Adjournment</b></p>  | <p>There being no further business to come before the Governing Body, the meeting adjourned at 1:58 p.m.</p>  |                             |

I certify that the foregoing are the Minutes of the Harris Health System Dialysis Center at Quentin Mease Governing Body Meeting held on June 11, 2024.

Respectfully Submitted,

Cody Pyke, MD, JD, LLM, FCLM, HHDC Chair

Minutes transcribed by Cherry A. Pierson, MBA

**Tuesday, June 11, 2024**

**Dialysis Center (DC) at Quentin Mease Governing Body Attendance**

**Note:** For Zoom meeting attendance, if you joined as a group and would like to be counted as present, please submit an email to:

[BoardofTrustees@harrishealth.org](mailto:BoardofTrustees@harrishealth.org) before close of business the day of the meeting.

| DC at QM GB MEMBERS PRESENT  | DC at QM GB MEMBERS ABSENT | OTHER BOARD MEMBERS PRESENT |
|------------------------------|----------------------------|-----------------------------|
| Dr. Cody Pyke <i>(Chair)</i> | Sima Ladjevardian          |                             |
| Dr. Kevin Erickson           |                            |                             |
| Dr. Lori Timmons             |                            |                             |
| Matthew Reeder               |                            |                             |

| HARRIS HEALTH EXECUTIVE LEADERSHIP, STAFF & SPECIAL INVITED GUESTS                    |   |
|---|---|
| Carolynn Jones  | Jerry Summers   |
| Cherry Pierson  | John Matcek   |
| Daniel Smith  | Lindsey (Katie) Rutherford <i>(Harris County Attorney's Office)</i> |
| Ebon Swofford <i>(Harris County Attorney's Office)</i>                                | Louis Smith   |
| Elizabeth Hanshaw Winn <i>(Harris County Attorney's Office)</i>                       | Dr. Matasha Russell   |
| Dr. Esmail Porsa, <i>Harris Health System President &amp; Chief Executive Officer</i> | Matthew Schlueter   |
| Dr. Hemant Roy  | Maureen Padilla   |
| Dr. Jackie Brock  | Nicholas J. Bell  |
| Dr. Jennifer Small  | Olga Rodriguez  |
| Jennifer Zarate   | Shawn DeCosta   |

Tuesday, August 13, 2024

Executive Session

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Report Regarding Quality of Medical and Healthcare, Pursuant to Tex. Health & Safety Code Ann. §161.032 and Tex. Occ. Code Ann. §160.007 to Receive Peer Review and/or Medical Committee Report in Connection with the Evaluation of the Quality of Medical and Healthcare Services, Including DC Governing Body Quality Scorecard Report, Quality Review Committee Report and Medical Executive Committee Report, Including Possible Action Upon Return to Open Session.

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Tuesday, August 13, 2024

Consideration of Approval of Reviewed and Amended Policy and Procedure for the  
Harris Health Dialysis Center at Quentin Mease

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As part of the regulatory requirements of the Harris Health Dialysis Center at Quentin Mease Health Center (HHDC), the Governing Body is to review and approve policies annually. The policies listed below will reflect a change in references. Please find a summary of the policies and their changes.

All policies were updated to reflect the name of the new facility and the policy numbers were updated by removing "RDC" from each one. All additional updates are listed below and on the attached executive summary:

- **Policy QMD-HR-6.00** (updated facility name, policy number)



**DIALYSIS CENTER AT QUENTIN MEASE  
CENTER**

**DEPARTMENTAL GUIDELINES AND  
PROCEDURES**

Dept. Guideline No: HR – 6.00CP

Page Number: 1 of 3

Effective Date: 8/22/2008, 6/2024

Last Review Date:

Due for Review:

**TITLE: HUMAN RESOURCE MANUAL**

**PURPOSE:** To provide a list of the personnel policies and procedures that together will constitute a Human Resources manual for the Harris Health Dialysis Center at Quentin Mease Health Center (HHDC). The policies and procedures represent the rules that the Harris Health Dialysis Center at Quentin Mease Health Center (HHDC) will follow when handling a human resources or personnel-related situation. .

**I. GENERALLY:**

Pursuant to the Letter of Agreement between Harris Health System (“Harris Health”) and the Harris Health Dialysis Center at Quentin Mease Health Center (HHDC). HHDC will adopt, follow, and rely on Harris Health’s Human Resources policies and procedures as its own human resources policies and procedures.

**II. POLICIES:**

The below Harris Health human resources policies and procedures are adopted, followed, and relied on by the HHDC. The HHDC will adopt additional Harris Health human resources policies and procedures, as appropriate.

1. Harris Health System’s Code of Conduct
2. Harris Health policy 3.02: *Employee Solicitation*
3. Harris Health policy 3.55.01: *Employee Health Scope of Services*
4. Harris Health policy 3.55.02: *Pre-Placement Screening*
5. Harris Health policy 3.55.05: *Color Vision Testing*
6. Harris Health policy 3.55.06: *Respirator Fit Testing for Healthcare Workers*
7. Harris Health policy 3.55.10: *Tuberculosis Screening of Healthcare Workers*
8. Harris Health policy 3.61: *Gifts*
9. Harris Health policy 3.66: *Weapons*
10. Harris Health policy 6.01: *Permanent Reduction in the Workforce due to Business Necessity*
11. Harris Health policy 6.03: *Paid Time Off (PTO)*

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**DIALYSIS CENTER AT QUENTIN MEASE  
CENTER**

**DEPARTMENTAL GUIDELINES AND  
PROCEDURES**

Dept. Guideline No: HR – 6.00CP-

Page Number: 2 of 3

Effective Date: 8/22/2008, 6/2024

Last Review Date:

Due for Review:

12. Harris Health policy 6.03a: *Selling of PTO Form*
13. Harris Health policy 6.05: *Employee Disaster Relief*
14. Harris Health policy 6.06: *Catastrophic Illness PTO Pool*
15. Harris Health policy 6.06A: *Catastrophic illness PTO Pool Donation Form*
16. Harris Health policy 6.06B: *Catastrophic illness PTO Pool Application Form*
17. Harris Health policy 6.07: *Moving Expenses*
18. Harris Health policy 6.08: *Grievance Procedure*
19. Harris Health policy 6.09: *Introductory Period*
20. Harris Health policy 6.10: *Dress and Personal Appearance*
21. Harris Health policy 6.11: *Performance Appraisals*
22. Harris Health policy 6.12: *Employment*
23. Harris Health policy 6.13: *Attendance and Absence Management*
24. Harris Health policy 6.14: *Use & Scheduled Paid Time Off*
25. Harris Health policy 6.15: *Employee Supervision and Time Records*
26. Harris Health policy 6.17: *Change of Positions*
27. Harris Health policy 6.18: *Employee Recognition Programs  
Retirement/ Condolences/ Funded Events/ Non-Patient Food*
28. Harris Health policy 6.20: *Employee Discipline*
29. Harris Health policy 6.21: *Payment of Wages*
30. Harris Health policy 6.22: *Staffing during Disasters and Emergencies*
31. Harris Health policy 6.22a: *Emergency-Disaster Response Exemption Form*
32. Harris Health policy 6.22b: *Staffing During Disasters and Emergencies Acknowledgment  
Form*
33. Harris Health policy 6.23: *Jury Duty and Other Legal Proceedings*
34. Harris Health policy 6.24: *Termination of Employment*
35. Harris Health policy 6.25: *Bereavement Leave*
36. Harris Health policy 6.26: *Military Leave*
37. Harris Health policy 6.27: *Workplace Violence*
38. Harris Health policy 6.28: *Retirement Plans*
39. Harris Health policy 6.29: *Family and Medical Leave of Absence*
40. Harris Health policy 6.30: *Severance Benefits for Positions at the Directors Level and Above*
41. Harris Health policy 6.33: *Licensure/ Certification/ Registration*
42. Harris Health policy 6.34: *Workers Compensation*
43. Harris Health policy 6.34: *Mother-Friendly Workplace Policy*
44. Harris Health policy 6.35: *Nepotism*

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**DIALYSIS CENTER AT QUENTIN MEASE  
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**DEPARTMENTAL GUIDELINES AND  
PROCEDURES**

Dept. Guideline No: ~~HR – 6.00CP~~

Page Number: 3 of 3

Effective Date: ~~8/22/2008~~ 6/2024

Last Review Date:

Due for Review:

45. Harris Health policy 6.36: *Sexual Harassment*
46. Harris Health policy 6.37: *Acceptable Use of HCHD Internet and E-mail System*
47. Harris Health policy 6.38: *Metropolitan Transit Authority Q-Card Program*
48. Harris Health policy 6.39: *Conflict Resolution in the Workplace*
49. Harris Health policy 6.40: *Employee Referral Program*
50. Harris Health policy 6.44: *Reasonable Accommodation Policy*
51. Harris Health policy 6.45: *Employment of Foreign Nationals*
52. Harris Health policy 6.46: *Professional Dues, Conferences, and Seminars*
53. Harris Health policy 6.49: *Telecommuting*
54. Harris Health policy 3.50: *Social Media*
55. Harris Health policy 3025: *Drug Free Workplace*
56. Harris Health policy 3465: *Staff Request for Non-Participation in Patient Care*

**REFERENCES/BIBLIOGRAPHY:**

~~Quad A Version 8.2~~

**DEPARTMENT OF PRIMARY RESPONSIBILITY:**

Dialysis Center at Quentin Mease Health Center

**REVISION HISTORY:**

| Effective Date | Version #<br>(If Applicable) | Review/ Revision Date<br>(Indicate Reviewed or<br>Revised) | Approved by: |
|----------------|------------------------------|--|--------------|
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Tuesday, August 13, 2024

Consideration of Approval of New Policy and Procedure for the  
Harris Health Dialysis Center at Quentin Mease

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As part of the regulatory requirements of the Harris Health Dialysis Center at Quentin Mease Health Center (HHDC), the Governing Body is to review and approve policies annually. Please find a summary of the new policy on the attached executive summary.

- **Workplace Safety and Violence Reduction Plan**

# HARRISHEALTH SYSTEM

## Dialysis Center at Quentin Mease Health Center

### WORKPLACE SAFETY AND VIOLENCE REDUCTION PLAN

PENDING APPROVAL: Dialysis Center at Quentin Mease Governing Body

07.24

## **I. INTRODUCTION:**

The Occupational Safety and Health Administration (OSHA) has made a determination that Healthcare workers face an increased risk of work-related assaults resulting primarily from violent behaviors of their patients. The National Institute for Occupational Safety and Health (NIOSH) lists three groups of risk factors that lead to violence in healthcare: clinical, environmental and organizational. The Workplace Safety and Violence Prevention Plan addresses these factors and describes the parameters within which a safe environment of care is established, maintained, and improved. The elements listed within the plan are directed toward managing the activities of the employees in order to reduce the risk of injuries to patients, visitors, and the workforce and to help employees respond appropriately after incidents of workplace violence.

The following workplace safety and violence prevention plan has been developed to protect health care providers and employees from violent behavior and threats of violent behavior that may occur within the facility. This Workplace Safety and Violence Prevention Plan conforms to requirements set forth in Section 331.004 of the Texas Health and Safety Code.

## **II. PURPOSE:**

- a. The purpose of the plan is to mitigate obstacles impacting the ability of the organization to provide a safe environment for Dialysis Center at Quentin Mease Health Center's patients, visitors and its workforce.
- b. This occurs through:
  - i. Annual workplace violence prevention education
  - ii. Standardized system for responding to and investigating violent or potentially violent incidents.
  - iii. Environmental Assessment
  - iv. Review and evaluation of current workplace safety processes.

## **III. WORKPLACE VIOLENCE:**

- a. The definition of Workplace Violence utilized within Dialysis Center at Quentin Mease Health Center is in alignment with Texas Health and Safety Code § 331.004 and Harris Health Policy 6.27 Workplace Violence Prevention and includes the following.
  - i. An act or threat of physical force against a health care provider or employee that results in, or is likely to result in, physical injury or psychological trauma; and an incident involving the use of a firearm or other dangerous weapon, regardless of whether a health care provider or employee is injured by the weapon;
- b. Training/Education
  - i. Workplace safety education begins with the new employee orientation program for all new employees. Employees entering areas in which they may encounter patients with behavioural issues are required to take an additional course related to workplace violence prevention techniques.
  - ii. Dialysis Center at Quentin Mease Health Center provides annual workplace violence prevention education within the annual required training or education provided to the facility's health care providers and employees who provide direct patient care. Educational opportunities are provided in the event of modification to workplace safety processes or introduction of new equipment.
  - iii. Satori Alternatives to Managing Aggression (SAMA): Training is provided to all nursing and nursing aide staff in the emergency room and inpatient units and other workforce members who are at increased risk of caring for aggressive patients.

**c. Crisis Intervention**

- i. To assist in the urgent needs of Harris Health patients experiencing agitated or aggressive behaviours the workforce can call a “Crisis Intervention.” The response team responding to this page consists of individuals with psychiatric expertise, security personnel, health center leadership and medical providers.
- ii. Workforce members can call a Crisis Intervention by calling extension 713-566-6900 or use the Lynx application (F9 & F11).
- iii. Consultation with Crisis Intervention Team (CIT) member is available for high-risk patients manifesting early signs of aggression, by calling 713-566-6900.

**d. Incident Reporting and Investigations**

- i. A workforce member who witnesses or experiences a workplace violence incident shall immediately report the incident following the guidelines set forth in Harris Health System Policy 6.27 Workplace Violence Prevention.
- ii. All incidents of workplace violence should be documented in the Harris Health Electronic Incident Reporting System (eIRS) or documented using downtime forms when the eIRS is not available.
- iii. Incidents of workplace violence should be investigated timely by the unit’s leadership, and in collaboration with Security leadership along with Risk Management.

**e. Post- Incident Responsibilities**

- i. It is the responsibility of the unit leadership to consider adjusting patient care assignments (to the extent possible) following an occurrence of workplace violence. This prevents a health care provider or employee of the facility from treating or providing services to the patient who has physically abused or threatened them.
- ii. Supervisors are encouraged to refer employees who exhibit job stress or anger management or who may be a victim of workplace violence to the Employee Assistance Program. Supervisors shall request assistance, when necessary, from Harris Health’s Department of Public Safety and Harris Health’s Human Resources Department when workplace violence issues arise.
- iii. Activate Code Lavender protocol.
- iv. The employee is empowered to pursue criminal charges via the responding law-enforcement agency.
- v. Patients identified as disruptive will be flagged in Epic according to Harris Health System’s Management of Disruptive Patients and Visitors Behaviour (policy 4201).

**f. Environmental Safety**

- i. Patients who are at increased risk of harming themselves or others have their environment assessed routinely for environmental hazards including ligature risks. (Refer to Harris Health System Policy 464 Suicide/Homicide Screening, Assessment and Intervention).
- ii. Supervisors are to assess their department’s workspace to ensure that safety measures and equipment are functioning appropriately.
- iii. Patients who are identified in Epic as high-risk for aggressive behaviour upon arrival, are screened by security officers.
- iv. Units that routinely have a higher risk for incidents shall be equipped with extra security measures; such as personal duress alarms, security officers, and sound intelligence cameras.



**g. Management of Disruptive Patients and Visitor Behaviour**

- i.** Dialysis Center at Quentin Mease Health Center has a zero-tolerance stance against workplace violence; including verbal and physical acts of violence. The leadership takes all threats seriously and will take action as appropriate to assure the safety of staff and patients.
- ii.** The zero-tolerance policy is indicated with signage and patient education.
- iii.** Security shall be contacted for any anticipated disruptive behaviour.

**IV. WORKPLACE SAFETY AND VIOLENCE PREVENTION COMMITTEE:**

- a.** Dialysis Center at Quentin Mease Health Center Workplace Safety and Violence Prevention Committee is comprised of security, nursing, providers, and ancillary personnel. This interdisciplinary group meets monthly and operates as a subcommittee to Harris Health System Workplace Safety and Violence Prevention Committee. The objectives of the committee are:
  - i.** Regularly assess workplace violence prevention processes and alignment with policy.
  - ii.** Assess and improve prevention strategies to decrease workplace violence by workforce members, patients, families, or visitors.
  - iii.** Establish processes to provide education and support learning from events to inform practice changes.
  - iv.** Solicit information when developing and implementing this Workplace Safety and Violence Prevention Plan.

**V. REVIEW AND APPROVAL OF THE WORKPLACE VIOLENCE PREVENTION SAFETY PLAN:**

- a.** The Workplace Safety and Violence Prevention Plan is approved by the Dialysis Center at Quentin Mease Health Center Workplace Safety and Violence Prevention Committee and by the Harris Health Workplace Safety and Violence Prevention Committee. The plan is reviewed annually and revised for significant changes as applicable. Any changes made to the plan will be approved by the aforementioned committees.

**VI. REFERENCES/BIBLIOGRAPHY:**

Harris Health System Policies and Procedures 6.27 Workplace Violence Prevention

Harris Health System Policies and Procedures 4201 Management of Disruptive Patients and Visitors Behavior

Harris Health System Policies and Procedures 3.63 Incident Reporting and Response

Harris Health System Policy 464 Suicide/Homicide Screening, Assessment and Intervention

Harris Health System Policy Code Lavender: [Program Information](#)

eIRS Downtime Reporting Form 280952: [Form](#)

Harris Health System Ben Taub Emergency Center Departmental Guidelines and Procedures Ben Taub Department Green Check Screening Procedure: [Policy](#)

Harris Health System Code of Conduct

Texas Health and Safety Code § 331.004.

**VII. REVISION HISTORY:**

| Effective Date | Version #<br>(If Applicable) | Review or Revision Date<br>(Indicate Reviewed or Revised) | Reviewed or Approved by:<br>(Directors, Committees, Managers, and Stakeholders etc.) |
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