MONTANA STATE PRISON
OPERATIONAL PROCEDURE

Procedure:	**MSP HS B-09.0 STAFF SAFETY**
Effective Date:	11/01/2010 Page 1 of 2
Revision Date(s):	10/01/2020; 06/30/2026
Public Safety Chief Signature:	/s/ John Schaffer, Public Safety Chief
Medical Director Signature:	/s/ Dr. Paul Rees, MD
Health Services Bureau Chief Signature:	/s/ Cynthia McGillis-Hiner, RN, MSN

I. PURPOSE

Implement processes that provide readily accessible, functional, and adequately stocked medical supplies within MSP and ensure a safe work environment.

II. DEFINITIONS (see Glossary)

III. REQUIREMENTS

A. General Requirements

1. Staff are encouraged to obtain and carry radio communication devices to facilitate communications regarding safety and security or emergent needs in accordance with *DOC 3.1.33 Radio Communication Systems.*
2. Custody staff must be available when requested by health care staff.
3. Inventories will be maintained, per shift, on items in the Infirmary tool cribs that are subject to abuse (for example, syringes, needles, scissors, and other sharp instruments).
4. Instruments will be packaged and stored in locked treatment cabinets in specified treatment areas.
5. Inventory sheets will be maintained for each treatment area.
6. Any disposable items will be discarded in the sharps container.
7. Non-disposable items will be cleaned and placed in the Infirmary laboratory to be cleaned and prepared for sterilization by the assigned Correctional Health Services Technician (CHST).
8. Non-disposable items will be transported to the dental area for sterilization and then returned to be placed back into inventory.
9. Inventories will be documented by the assigned nurse or CHST.
10. Outlying satellite clinic areas will operate under the same requirements.
11. Any discrepancies will be documented on MSP incident and missing tool reports and immediately reported to the supervisor and security staff.
12. Needle and syringes will be obtained only from medical supply storage.

13. Needles and syringes will be received by the assigned CHST from the MSP Warehouse and inventoried for verification of contents.
14. Safety barriers and personal protective equipment should be utilized for modern equipment, when used.
15. Needles and syringes will then be transferred to “blue room” storage where daily inventories will be recorded.
16. Laboratory needles will be transferred from count one time only to the locked lab storage cabinet located in the main infirmary lab room.
17. When an item is removed from the “medical storage room,” staff will initial each item on the appropriate log in descending order.
18. Staff will discard all needles and syringes only in biohazard sharps containers.
19. The biohazard sharps container will be kept in a locked storage area until removed from the facility by authorized methods.
20. Assigned dental staff will inventory and maintain written logs of all dental disposable and non-disposable items that are subject to abuse (for example, syringes, needles, scissors, and other sharp items).
21. First aid kits will be labeled and located at individual workstations and throughout the facility.
22. Each first aid kit will contain supplies necessary to handle minor emergencies.
    a. A complete inventory of each kit will be located on the outside of the kit and the kit will be sealed.
23. Maintenance of each first aid kit is the responsibility of the respective work area supervisors.
24. Blood spill kits:
    a. will be located alongside all first aid kits;
    b. if disposable and after use, will be replaced by work area supervisors contacting the warehouse; and
    c. if restocking is necessary, maintenance is the responsibility of respective work area supervisors.
25. Health staff will be vigilant for personal safety and security issues and actions that may compromise the safety of themselves, other staff, and MSP.
    a. Safety concerns and issues will be reported through written incident reports to the on-duty nursing supervisor.
26. The MSP Health Services Manager will sit on the facility safety committee to advocate for staff safety.

IV. CLOSING

Questions about this procedure should be directed to the Medical Health Services Manager.