

Cedric Dean Holdings, Inc.

Peer Support NC Program
Worksite Analysis for Blindspots Policy

1. Policy Title

Worksite Blindspot Identification, Analysis, and Mitigation Policy

2. Effective Date

Effective: January 21, 2026

Review Cycle: Annual and after any safety incident, facility change, or regulatory update

3. Policy Statement

Cedric Dean Holdings, Inc. (CDH) is committed to maintaining a **safe, trauma-informed, and risk-aware work environment**. This policy establishes a formal process for identifying, assessing, and mitigating **physical, operational, environmental, and procedural blindspots** that may create safety, security, compliance, or service delivery risks within Peer Support NC Program operations.

4. Scope

This policy applies to:

- All CDH facilities, offices, and community service locations
- Mobile and off-site service environments
- Staff, contractors, volunteers, participants, and visitors
- Physical, digital, and operational workspaces

5. Regulatory Alignment

This policy aligns with:

- **OSHA General Duty Clause (29 U.S.C. § 654)**
- **NC DHHS Facility Safety & Behavioral Health Risk Standards**
- **CMS/Medicaid Managed Care Compliance Requirements**
- **HIPAA Privacy & Security (Environmental Safeguards)**
- **NIST Risk Management Framework (Operational Awareness)**

6. Definitions

Blindspot:

Any area, condition, process, or practice that is not easily observed, monitored, or controlled and may pose a **safety, security, compliance, or service quality risk**.

Worksite Analysis:

A structured review of physical spaces, workflows, staffing patterns, communication systems, and environmental conditions to identify hazards or vulnerabilities.

7. Types of Blindspots

7.1 Physical Blindspots

- Unmonitored hallways, stairwells, or entry points
- Poorly lit areas (parking lots, exterior walkways, storage areas)
- Obstructed lines of sight (furniture placement, partitions, blind corners)
- Unsecured doors, windows, or access points

7.2 Operational Blindspots

- Staff working alone or in isolated environments
- Gaps in shift handoffs or documentation
- Inconsistent supervision or check-in protocols
- Delayed incident reporting

7.3 Behavioral and Programmatic Blindspots

- Escalation warning signs not recognized or documented
- Participant safety risks not reflected in service plans
- Cultural or communication barriers affecting disclosure
- Staff fatigue, burnout, or stress indicators

7.4 Technology and Information Blindspots

- Unsecured workstations or devices
- Inadequate cybersecurity awareness
- Lack of monitoring for electronic access to records
- Poor password or access control practices

8. Blindsight Identification Process

8.1 Routine Walkthroughs

Supervisors and designated safety leads conduct:

- Monthly physical walkthroughs
- Quarterly full operational reviews
- Annual comprehensive safety audits

8.2 Staff Input and Reporting

CDH encourages staff to report blindsights through:

- Safety suggestion forms
- Team meetings
- Anonymous reporting channels (when available)

8.3 Incident-Driven Analysis

Following any safety incident, threat, or near-miss, CDH will:

- Identify contributing blindsights
- Conduct root cause analysis
- Update mitigation strategies

9. Risk Assessment Criteria

Each identified blindsight is evaluated using:

- **Likelihood of Occurrence** (Low / Medium / High)
- **Severity of Impact** (Minor / Moderate / Severe / Critical)
- **Population Affected** (Staff, Participants, Public, Systems)
- **Regulatory Risk** (HIPAA, Medicaid, NC DHHS, OSHA exposure)

10. Mitigation Strategies

10.1 Environmental Controls

- Improved lighting and visibility
- Repositioning furniture or barriers
- Secure access systems
- Emergency call or alert systems

10.2 Administrative Controls

- Policy updates and protocols
- Staff scheduling adjustments
- Mandatory check-in/check-out procedures
- Enhanced supervision models

10.3 Training Controls

- Situational awareness training
- Trauma-informed de-escalation
- Cyber hygiene and data protection
- Incident documentation and reporting

11. Documentation and Tracking

CDH maintains:

- Blindspot Assessment Logs
- Corrective Action Plans
- Follow-up Review Records
- Training Completion Records

All documentation is retained per CDH Records Management and Compliance Policy.

12. Roles and Responsibilities

Chief Executive Officer

- Ensures organizational support and compliance oversight
- Approves major risk mitigation initiatives

Program Director / Supervisor

- Leads worksite assessments
- Assigns corrective actions
- Ensures staff participation

Compliance Officer

- Maintains records and audit readiness
- Reviews trends and regulatory exposure

Workforce Members

- Report hazards and blindspots promptly
- Follow mitigation procedures and safety protocols

13. Confidentiality

Reports related to blindspots, safety concerns, or incidents are handled in accordance with **HIPAA, personnel privacy standards, and CDH confidentiality policies**.

14. Continuous Improvement

CDH uses blindspot data to:

- Improve program design
- Enhance staff safety and confidence
- Strengthen participant protection
- Support regulatory compliance and accreditation efforts

15. Enforcement

Failure to comply with this policy may result in:

- Retraining requirements

- Corrective action
- Disciplinary measures up to termination
- Contract termination or legal referral if warranted

16. Policy Review

This policy is reviewed:

- Annually
- After major incidents
- Following regulatory or operational changes

17. Approval and Authorization

Approved By:

Cedric Dean, Chief Executive Officer
Cedric Dean Holdings, Inc.

Signature: _____

Date: January 21, 2026

18. Organizational Commitment

Cedric Dean Holdings, Inc. affirms its commitment to **proactive safety leadership, transparency, and continuous improvement** in all worksite environments.