Environment of Care

2017 Team Member Essentials Training

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# Table of Contents

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<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Safety</td>
<td>1</td>
</tr>
<tr>
<td>Security Management</td>
<td>5</td>
</tr>
<tr>
<td>Workplace Violence</td>
<td>9</td>
</tr>
<tr>
<td>Emergency Codes</td>
<td>13</td>
</tr>
<tr>
<td>Emergency Management</td>
<td>15</td>
</tr>
<tr>
<td>Life Safety (Fire)</td>
<td>20</td>
</tr>
<tr>
<td>Hurricanes</td>
<td>26</td>
</tr>
<tr>
<td>Bomb Threat</td>
<td>29</td>
</tr>
<tr>
<td>Medical Equipment Management</td>
<td>30</td>
</tr>
<tr>
<td>Utilities Management</td>
<td>35</td>
</tr>
<tr>
<td>Hazardous Materials</td>
<td>39</td>
</tr>
<tr>
<td>Radioactive Materials</td>
<td>42</td>
</tr>
</tbody>
</table>
Lesson: General Safety

Introduction

Lesson Objectives

BayCare is committed to providing a safe environment for its customers as well as team members. You play an active role in keeping BayCare safe.

After you complete this lesson, you should be able to:

• Recognize team member actions to prevent accidents
• Identify physical obstacles which block access in case of emergency

Prevent Slips and Falls

Causes of Slips and Falls

In health care facilities, many opportunities exist for individuals to slip, trip or fall.

Often, falls are directly associated with spills, for example water, body fluids or cleaning chemicals. However, slips or falls may occur because a team member was not paying attention or was working in an unsafe manner, such as too many people in a small work area, leaving file drawers open, or leaving a cart or wheelchair in a hallway.

Spills: Your Role

Ensure spills are cleaned up immediately using appropriate Personal Protective Equipment (PPE).

For a small spill:

• Block area off
• Wipe up the fluid yourself (if you can do so safely)
• Contact Environmental Services/housekeeping (if applicable)
• Direct everyone away from the spill until it is safely wiped up

For a large spill:

If the spill is too large for you to manage:

• Block area off
• Call your facility’s contact (refer to the chart below)
• Direct everyone away from the spill until the appropriate responders arrive
If you see a large spill, call your facility’s contact. Refer to the chart, below.

<table>
<thead>
<tr>
<th>Facility</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Divisions</td>
<td>Environmental Services</td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>Environmental Services</td>
</tr>
<tr>
<td>John Knox Tampa Bay</td>
<td>Environmental Services</td>
</tr>
<tr>
<td>Morton Plant Rehabilitation</td>
<td>Environmental Services</td>
</tr>
<tr>
<td>Home Care</td>
<td>Your supervisor/manager</td>
</tr>
<tr>
<td>BayCare Medical Group/Physician Office</td>
<td>Manager/supervisor</td>
</tr>
<tr>
<td>For all others</td>
<td>Refer to your department’s procedures</td>
</tr>
</tbody>
</table>

**Personal Protective Equipment**

**Use Personal Protective Equipment (PPE)**

Team members are required to use PPE in the performance of their respective jobs (e.g., working with hazardous chemicals, tools and equipment).

Possible consequences of NOT using PPE include:

- Contraction of a disease
- Loss of sight from chemical exposures/splashes
- Loss of limb(s) from machinery accidents
- Loss of hearing from prolonged exposure to loud noises
- Respiratory diseases from exposure to chemicals or other contaminants

For more information, contact your manager/supervisor.

**Maintaining a Safe Environment**

**Remove Obstacles in Case of Emergency**

It is everyone’s responsibility to ensure a safe environment for our customers and team members.

Team members should:

- Assure that fire extinguishers, pull stations, corridors and fire doors are not blocked
- Assure that the building is in good repair
- Store carts, wheelchairs and other mobile equipment properly when not in use
- Avoid crowding in small work areas
Facility Repair

If you see an item needing repair, call your facility's contact. Refer to the chart, below.

<table>
<thead>
<tr>
<th>Facility</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Divisions</td>
<td>Facilities Department/Plant Services</td>
</tr>
<tr>
<td>Home Care</td>
<td>Supervisor/manager</td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>Facilities Department/Plant Services</td>
</tr>
<tr>
<td>John Knox Tampa Bay</td>
<td>Facilities Services</td>
</tr>
<tr>
<td>Morton Plant Rehab</td>
<td>Facilities Services</td>
</tr>
<tr>
<td>Primary Care/Physician Office</td>
<td>Supervisor/manager</td>
</tr>
<tr>
<td>For all others</td>
<td>Refer to your department's procedures</td>
</tr>
</tbody>
</table>

Driving Safety (JKTB only)

Company Vehicles

Team members who drive company vehicles should follow these guidelines:
- Wear a safety seat belt while operating any vehicle
- Ensure that all passengers and equipment are secured prior to transport
- Lock the vehicle when unattended
- Maintain the appropriate licensure necessary for the specific vehicle assigned
- Obey designated speed limits
- Direct questions regarding team member fitness for duty, including use of medications, to the Employee Health department

Accident Reporting

Team members who are involved in an accident with a company vehicle should follow these steps listed on this page.

Team members who are involved in an accident with a company vehicle should follow these steps:
1. Report any accident immediately to your supervisor, manager on duty, and/or the facility's director
2. Upon notification of the accident, your immediate supervisor, manager on duty, and/or the facility's director will immediately report the occurrence to Employee Health, as well as the Risk Management department
3. Complete the Related Injury Report (regardless of injury or damage); these are available in Employee Health
4. Notify the police department to report the accident; documentation must include the time of the call and who took the call at the police department; a copy of the police report (the Vehicular Accident Report) should be forwarded to the Employee Health office
Driver Training

Each team member who operates a company-owned vehicle and has daily driving responsibilities must complete a driver training program. Team members cannot be given a driving assignment until initial training is complete and documented.

The training program must include the following:

- Use of seat belts and other safety devices
- Driver safety awareness and defensive driving
- Hazards of alcohol consumption or drug use and driving
- Contents of the Safe Driving Policy
- Department-specific vehicle safety guidelines
- Procedures to follow when involved in a vehicular accident
Lesson: Security Management

Introduction

Lesson Objectives

The easiest way to prevent a security problem is to be aware of your surroundings at all times.

After you complete this lesson, you should be able to:
• Recognize safety guidelines to reduce security risk while on a facility campus or within a building

Security Management Outside of the Facility

Personal Safety Tips

Whenever possible, walk in groups. An assailant is looking for someone who is timid, alone, acts in a careless manner and is not paying attention.

If you have to walk alone, stay alert to your surroundings, keep your head up, walk with confidence, and make quick eye contact with the people around you.

Parking Assignments (Hospital Division, JKV, MPR, WHH only)

Team members are responsible to follow their facility’s guidelines for parking. Some facilities have designated parking areas for team members.

If applicable, follow these guidelines for parking assignments:
• Know your parking assignment; parking assignments are provided at the start of employment
• Always park in your assigned location

The Security Department monitors parking lots to ensure everyone parks in the assigned areas. Offenders are subject to disciplinary action (which may include dismissal).

Vehicle Safety Tips

The Security Department helps to ensure a safe environment of care. However, all team members are responsible for their facility’s security and safety. To ensure your safety, and the safety of your vehicle and belongings, follow these safety tips.

When leaving your vehicle:
• Always lock the vehicle doors and
• Place all loose items, electronic devices (such as GPS) or packages in the trunk or out of sight

When returning to your vehicle:
• Always have your keys in hand to allow quick entry
• When approaching your vehicle, look underneath and around for anything suspicious
• Inspect the inside and backseat before entering and
• Once inside, lock your doors immediately
Security Escort (Hospital Division, HC, MPR, JKT, BMG, WHH only)

For a Security escort, call your facility’s contact. Refer to the chart, below.

<table>
<thead>
<tr>
<th>Facility</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>John Knox Tampa Bay</td>
<td>Dial 0 (zero) and the front desk will radio for a security officer</td>
</tr>
<tr>
<td>Mease Dunedin Hospital</td>
<td>Extn. 46670</td>
</tr>
<tr>
<td>Mease Countryside Hospital</td>
<td>Extn. 56053</td>
</tr>
<tr>
<td>Morton Plant Hospital</td>
<td>Extn. 27095</td>
</tr>
<tr>
<td>MP North Bay Hospital</td>
<td>Extn. 78333</td>
</tr>
<tr>
<td>Morton Plant Rehabilitation</td>
<td>Dial 0 (zero) and the operator will connect you to MPH Security</td>
</tr>
<tr>
<td>South Florida Baptist Hospital</td>
<td>Contact the Operator</td>
</tr>
<tr>
<td>St. Joseph’s Hospital</td>
<td>Extn. 74357 (7HELP)</td>
</tr>
<tr>
<td>St. Joseph’s Children’s Hospital</td>
<td>Extn. 74357 (7HELP)</td>
</tr>
<tr>
<td>St. Joseph’s Women’s Hospital</td>
<td>Extn. 54357 (5HELP)</td>
</tr>
<tr>
<td>St. Joseph’s Hospital North</td>
<td>Extn. 864357 (86HELP)</td>
</tr>
<tr>
<td>St. Joseph’s Hospital South</td>
<td>Extn. 848565</td>
</tr>
<tr>
<td>St. Anthony’s Hospital</td>
<td>Extn. 51099</td>
</tr>
<tr>
<td>For all others</td>
<td>Refer to your department’s procedures</td>
</tr>
</tbody>
</table>

Security Management within the Facility

Identification Badges

BayCare policy requires all team members, physicians, contractors, vendors, students, and volunteers to display identification badges.

You are responsible for:
- Checking identification of individuals, such as contractors, who enter your area unannounced or without advance notice
- Checking identification of anyone in a restricted area

If an individual does not respond appropriately and cannot produce proper identification, call your facility’s contact. Refer to the chart, below.

<table>
<thead>
<tr>
<th>Facility</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Divisions</td>
<td>Your manager or Security</td>
</tr>
<tr>
<td>Home Care</td>
<td>Your Supervisor/Manager</td>
</tr>
<tr>
<td>BayCare Medical Group/Physician Office</td>
<td>Your immediate supervisor, manager on duty and/or Facility’s director</td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>Your Supervisor/Manager</td>
</tr>
<tr>
<td>John Knox Tampa Bay</td>
<td>Nursing Supervisor, Director of Patient Services, and/or Director/Administrator of MPR</td>
</tr>
<tr>
<td>Morton Plant Rehabilitation</td>
<td>Refer to your department’s procedures</td>
</tr>
<tr>
<td>For all others</td>
<td>Refer to your department’s procedures</td>
</tr>
</tbody>
</table>
Visitor Passes and Visiting Hours (Hospital Division, BH, JKTB, MPR, WHH only)

Each facility sets its own visitor policy, and a number of pass systems are in place within the BayCare Health System.

You are responsible to:
- Know the visitor pass policy for your facility
- Assist in visitor monitoring

Contact your Manager, Supervisor, or AOD for more information.

Personal Work Area

Most small thefts are crimes of opportunity. To ensure the security of your personal work area:
- Keep purses, wallets, loose change, cash or other valuables locked up or with you at all times and electronics
- Never leave keys or phones unattended in an open area

Elevator Safety

Elevators can create a potentially serious security and safety risk. When using elevators, follow these security tips:
- Look in the elevator before entering to make sure no one is hiding
- Do not enter or remain in the elevator if another individual makes you nervous
- Once inside the elevator familiarize yourself with emergency buttons in the elevator and
- Stand near the controls
- If you are attacked, hit the alarm and as many floor buttons as possible. This response will increase your chances of receiving help.

Contact/Security Phone Numbers

Security services are available at the hospitals 24 hours per day, 7 days per week. You are expected to assist the Security Department by identifying and reporting any instances of disruptive behavior, suspicious individuals, criminal activity, safety problems or concerns and emergency situations. Security welcomes constructive suggestions and will address any situation needing attention.
For immediate Security assistance team members located within the hospital should push the EMERGENCY button on their telephone or dial the emergency number for their facility. Refer to the chart, below.

| Facility                        | Contact                                                        |
|---------------------------------|                                                               |
| Morton Plant Mease Hospitals    | Press the RED Emergency button on the phone or dial “66”     |
| South Florida Baptist Hospital  | Press the RED Emergency button on the phone or dial “66”     |
| St. Anthony’s Hospital          | Press the RED Emergency button on the phone or dial “66”     |
| St Joseph’s Hospitals           | Dial “66”                                                     |
| St. Joseph’s Hospital North     | Dial “866”                                                    |
| St. Joseph’s Hospital South     | Dial “66”                                                     |
| Winter Haven Hospital           | Dial “66”                                                     |
| Non-hospital Facilities         | Dial “911”                                                    |
| Home Care                       | Dial “911”                                                    |
| Behavioral Health               | Dial “911”                                                    |
| John Knox Tampa Bay             | Dial 9 to get an outside line, then “911”                     |
| Morton Plant Rehabilitation     | Press the RED Emergency button on the phone or dial “66”     |
| BayCare Medical Group/ Physician Office | Dial “911”                                 |
| All Others                      | Refer to your department’s procedures                         |
Lesson: Workplace Violence

Introduction

Lesson Objectives

BayCare maintains a zero-tolerance policy on workplace violence and is committed to providing a safe environment for everyone in its facilities by implementing an effective intervention and response program.

After you complete this lesson, you should be able to recognize:

• Appropriate team member behavior(s) should team members, visitors, vendors, guests and patients exhibit prohibited behaviors
• Consequences for team members who exhibit prohibited behavior
• Whom to contact if a team member is involved in an incident

Prohibited Behaviors

What are Prohibited Behaviors?

Prohibited behaviors by anyone at BayCare facilities include:

• Conduct which is intimidating, hostile, threatening or causes actual physical harm to any other person
• Destruction of property or
• Possession of weapons or explosives on company property, including the parking lots (Excludes provisions under Florida Statutes, section 790-251.)
• Prohibited behaviors also include Disruptive behavior such as:
  - Aggressive behavior
  - Threats to self, others or property
  - Expression of suicidal or homicidal intent or thoughts
  - Unusual agitation or excitement, possibly accompanied by incoherent verbal behavior or severe withdrawal from interaction with others

Process for Reporting Prohibited Behaviors

If you observe disruptive behavior, destruction of property, threats of violence or are aware of a team member or any person in possession of a deadly weapon on company property, report the findings to your immediate supervisor, the Administrator on Duty (AOD), Team Resources or the security department. If you are located on non-hospital property, call 911.

Report findings to:

• Immediate supervisor
• AOD
• Team Resources or Security Department
• If on non-hospital property, call 911

Consequences for Team Members

Any team member found to have engaged in conduct prohibited by this policy will receive disciplinary action which can involve counseling up to and including termination of employment and may be referred to the Employee Assistance Program.
Team members found to have brought a deadly weapon on company property are subject to immediate termination. (Excludes provisions under Florida Statutes, section 790-251)

Disruptive behavior by team members will be investigated by Team Resources and/or Security. Appropriate employment action will be taken to safeguard other team members, patients, vendors and visitors. Local police may be asked to assist.

**Prohibited Behaviors of Licensed Independent Practitioners (LIP)**

**Signs and Symptoms of Illness and Impaired Behavior**

A Physician (LIP) or Allied Health Practitioner (Physician Assistant, Advanced Registered Nurse Practitioner, Certified Registered Nurse Anesthetist, Certified Nurse Midwife, Psychologist) who has lost the ability to practice medicine with reasonable skill and safety due to physical or mental illness, or dependency on chemicals such as drugs and alcohol can be unsafe to perform the privileges he or she has been granted.

To support the health and safety of our customers, early recognition and response to the signs and symptoms of illness or impaired behaviors is the responsibility of the staff.

Signs and symptoms of illness and impaired behavior include, but are not limited to:

- Deterioration of hygiene or physical appearance
- Frequent accidents
- Personality or behavior change
- Loss of reliability
- Depression
- Indecision
- Social distancing

**Team Member Responsibility: Responding to Concerns**

Team members who observe illness or impaired behavior(s) of a Physician (LIP), Physician Assistant, Advanced Registered Nurse Practitioner, Certified Registered Nurse Anesthetist, Certified Nurse Midwife or Psychologist, should contact their Manager/Supervisor, Director or Administrator on Duty (AOD) immediately. Also notify the Medical Affairs/Medical Staffing office.

All referrals or concerns are kept in strict confidence.

**Abusive Conduct**

**Abusive Patients (Hospital Divisions, BH, BMG, HC, JKTB, MPR only)**

Examples of abusive behavior include: loud aggressive speech; obscene, vulgar, coarse language; actual physical touching with force.

Health care workers who routinely work with volatile patients (for example Behavioral Health or Security) receive aggressive management training. Other team members who are involved in hands-on patient care (for example Emergency Room team members) may receive training in the handling of abusive behavior by patients.
If a patient becomes abusive, health care workers should follow established protocols. Team members should call the appropriate code for dealing with an aggressive patient. Request Security if there is an immediate threat of danger.

**Abusive Patients (HC only)**

Examples of abusive behavior include: loud aggressive speech; obscene, vulgar, coarse language; actual physical touching with force.

If a patient becomes abusive, health care workers should follow established protocols.

In a BayCare facility, the team should call the appropriate code for dealing with an aggressive patient. Request Security if there is an immediate threat of danger. In dealing with an aggressive patient outside a BayCare facility, team members should call their Supervisor or Manager.

**Victims of Abuse by a Patient**

Team members who are victims of abuse by a patient should immediately notify the contacts listed in the chart on this page. Additional resources available include Employee Health, Workers’ Compensation and the Employee Assistance Program (EAP).

<table>
<thead>
<tr>
<th>Facility</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Divisions</td>
<td>Immediate supervisor, Security</td>
</tr>
<tr>
<td>Home Care</td>
<td>Security, your supervisor</td>
</tr>
<tr>
<td>BayCare Ambulatory Services</td>
<td>Supervisor and Risk Management</td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>Your supervisor</td>
</tr>
<tr>
<td>John Knox Tampa Bay</td>
<td>Security, immediate supervisor, manager on duty or your facility’s director</td>
</tr>
<tr>
<td>Morton Plant Rehabilitation</td>
<td>Immediate supervisor, Security</td>
</tr>
<tr>
<td>Primary Care/Physician Office</td>
<td>Security, your supervisor</td>
</tr>
</tbody>
</table>

**Abusive Visitors, Vendors or Guests**

Audio script: Problem resolution and negotiation should always be attempted to reduce threats of violence or abusive behavior. If a visitor, vendor or guest is abusive, notify your immediate supervisor. If there is an immediate threat of danger, notify Security. Security and/or Team Resources will investigate abusive conduct by a vendor or visitor toward a team member. Security and/or Risk Management will address incidents involving patients.

Problem resolution and negotiation should always be attempted.
If a visitor, vendor or guest is abusive, notify your immediate supervisor.

* If immediate threat of danger, notify Security (if available in your location).

<table>
<thead>
<tr>
<th>Involves:</th>
<th>Notify:</th>
<th>Investigated by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vendor/Visitor</td>
<td>Your supervisor</td>
<td>Security</td>
</tr>
<tr>
<td>toward team member</td>
<td>Security*</td>
<td>Team Resources</td>
</tr>
<tr>
<td>Patients</td>
<td>Your supervisor</td>
<td>Security and/or Risk Management</td>
</tr>
<tr>
<td></td>
<td>Security*</td>
<td></td>
</tr>
</tbody>
</table>

**Workplace Violence Incidents Involving Team Members**

Team members are responsible for reporting any situation involving workplace violence to their supervisor.

Any team member who wishes to pursue legal action against a disruptive individual must immediately advise his/her supervisor, who will assist the team member with Team Resources.

If a patient, vendor or visitor alleges an injury (physical, emotional or criminal) at the hands of a team member during the course of the team member performing his/her duties, the accused team member must immediately contact his/her supervisor for assistance in responding to the allegations.
Lesson: Emergency Codes (Hospital Divisions, JKTB, MPR, BH)

Introduction

Lesson Objectives

If an emergency code is called at your facility, would you know how to respond? In an emergency, your response may be based on job duties. However, all team members must be prepared and follow procedures should an emergency arise.

After you complete this lesson, you should be able to identify the:
• Emergency codes and
• Expected responses to an emergency

Emergency Codes

BayCare has created one set of Emergency Codes for all of the BayCare hospitals, Morton Plant Rehab, John Knox Tampa Bay and non-hospital based Behavioral Health, based on FHA recommendations.

<table>
<thead>
<tr>
<th>Emergency Code</th>
<th>Alerts Team Members of:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Code Red</td>
<td>Fire</td>
</tr>
<tr>
<td>Code Blue</td>
<td>Cardiac Arrest</td>
</tr>
<tr>
<td>Code Pink</td>
<td>Infant/Child Abduction</td>
</tr>
<tr>
<td>Code Green</td>
<td>Activation of Emergency Operations/</td>
</tr>
<tr>
<td></td>
<td>Disaster Plan</td>
</tr>
<tr>
<td>Code Orange</td>
<td>Activation of Hazmat or Bioterrorism</td>
</tr>
<tr>
<td></td>
<td>plan</td>
</tr>
<tr>
<td>Code Black</td>
<td>Bomb Threat</td>
</tr>
<tr>
<td>Code Yellow</td>
<td>Facility Lockdown</td>
</tr>
<tr>
<td>Code White</td>
<td>Hostage Situation</td>
</tr>
<tr>
<td>Code Grey</td>
<td>Disruptive/Aggressive Person</td>
</tr>
<tr>
<td>Code Silver</td>
<td>Active Shooter</td>
</tr>
</tbody>
</table>
Emergency Codes

Code Pink (Hospital Divisions, BH, JKTB, MPR only)

A Code Pink is the emergency code used to alert team members that an infant or child patient has been abducted.

If an infant/pediatric patient is suspected to be missing, the person making the discovery will dial "66" and report a Code Pink. The caller should be prepared to give a description of the patient, abductor and direction of travel, if known, as well as the location of the abduction.

How to Respond Upon Announcement of a Code Pink

Upon announcement of a Code Pink:

• Security will initiate a facility lockdown
• Secure or monitor all exits. Step into the hallway and secure any exit to the outside of the building and to the stairways. Some departments are assigned specific areas to cover on the Ground and First Floor levels.
• Do not let anyone leave until the ALL CLEAR is announced.
• Provide support to family members; if possible isolate them from the search area and activities.
• Do NOT disturb the surroundings except as needed to search effectively. This area is a potential crime scene.
• Do NOT release information to anyone.
• Follow law enforcement directions. Once the police arrive, they will be in charge. They will secure the crime scene and conduct an extended search. Do not move or remove any items from the scene until the senior law enforcement officer has released the area.

If you see a suspicious individual:

• Notify Security and police of any suspicious individuals or problems.
• If you cannot detain a suspicious individual, get a description, vehicle tag number, and notify Security and police immediately.

Emergency Response in a Non-Hospital BayCare Facility

If you are located in a non-hospital BayCare facility, follow these emergency guidelines:

• In all emergencies, call 911
• If your facility is served by hospital Security, notify Security as well as 911 in an emergency
• In case of fire, the RACE protocol still applies: Rescue, Activate (pull fire alarm, call 911), Contain the fire, and Extinguish the fire or Evacuate
• Evacuation in non-hospital facilities generally means exiting the building
Lesson: Emergency Management (Hospital Divisions, JKTB only)

Introduction

Lesson Objectives:

An emergency or disaster could suddenly and significantly affect the need for our services and our ability to provide those services. Therefore, each facility has an Emergency Management Program in place which contains the management plan and related policies.

After you complete this lesson, you should be able to:
- Identify intent of Hospital Incident Command System (HICS)
- Recognize roles and responsibilities in HICS

HICS

What is HICS?

Each facility has adopted the Hospital Incident Command System (HICS).

HICS is an organizational tool that allows for a unified, structural response to any type of emergency situation.

HICS is versatile enough to be initiated by the highest ranking person on campus (i.e. administrator on duty).

HICS Organizational Structure

The basic HICS organization structure is illustrated on this page.
The incident commander is in charge of an emergency/disaster response and is the only HICS position that must be staffed. The incident commander will decide if other HICS job positions will be staffed.

The liaison, safety, and public information officers assist the incident commander and are responsible for working with local, state and federal level agencies for assistance, communicating with the public, and maintaining safety throughout the emergency/disaster respectively.

The operations section chief, finance section chief, logistics section chief and planning section chief are responsible for specific duties related to response and recovery.

Location of Incident Command Center

Each facility has designated a location for Incident Command Center setup. In the event the emergency/disaster does not allow for the primary location to be utilized, an alternate location has also been designated.

Roles and Responsibilities

Your Role and Responsibilities in an Emergency

Know your responsibility in the organization in the event of emergency/disaster.

As a team member, you have the following responsibilities in an emergency:

• Serve. Regardless of the type of emergency/disaster, every team member within BayCare has a "duty to serve" during times of crisis. As healthcare workers, your help will be needed to serve the needs of the people in our community.

• Contact your department manager/supervisor. If you are a team member without a specific role during an emergency/disaster, check with your department manager/supervisor prior to the event to assure you understand what your response should be.

• Participate in disaster drills. Several times a year, each facility conducts "disaster" drills. It is important to participate in these drills to assure you know what to do if a real event occurs.

• Know emergency codes/phrases. Each facility has adopted codes/phrases to provide team members with emergency notifications. You should review those codes/phrases to assure you are familiar with them.

• Wear BayCare identification badge during a disaster/emergency event

You may be assigned a role different from your current position and/or accept assignments from someone other than your supervisor/manager.

Know the Policies and Procedures (Hospital Divisions only)

Many types of emergencies/disasters can occur.

You can find your Hospital Division's manual on the BayCare Intranet.
Lesson: Emergency Management (MPR only)

Introduction

Emergency Management Plan

An emergency or disaster could suddenly and significantly affect the need for our services and our ability to provide those services. Therefore, each facility has an Emergency Management Program in place which contains the management plan and related policies.

The purpose of the plan is to minimize the effects of natural and man-made emergencies to the facility, team members and patients/residents.

During an emergency, the following team members will be in charge of operations:
- Director/Administrator of the facility
- Director of Patient Services
- Maintenance Coordinator

Components of Disaster Plan

Key Components of the Disaster Plan include:
- Overview of disaster plan
  - Purpose
  - Direction and control
  - Chain of command
- Hazard analysis
- Staffing
- Notification systems
- Facility as a shelter
- Evacuation (your role, tracking patients/residents, advising families, re-entry)

Hazard Analysis

The facility conducts a Hazard Analysis and updates the disaster plan annually.

Key points of MPR's hazard analysis include:
- Facility located less than one mile from the Inter-coastal Waterway and the Gulf of Mexico
- Facility not in a hurricane evacuation or flood zone
- Morton Plant Hospital's services available in a medical emergency or need for greater support
- Emergency generator available to power critical elements
- Facility's close proximity to railroad increases vulnerability to hazardous materials incidents

Staffing During/After Disasters

The following are staffing guidelines during and after a disaster.
- Team member lists are maintained by each department to ensure proper staffing during and after emergencies.
- Team members are advised prior to volunteering that alternative arrangements are to be made for their families.
- Each department provides for 24 hour coverage for emergencies where it is required.
• If you have been called to respond to the facility, make sure you have your team member picture ID badge.
• Team members are trained upon hire and annually, regarding their role and responsibility during a disaster.

Notification Systems

Notification of emergencies is a key component of the disaster plan. The Facility has adopted codes/phrases to provide team members with emergency notifications. Facility notification system:
• The facility uses the Emergency Broadcast System and the Pinellas County Emergency Operation Situation Report as our alert to impending threats and potential emergency conditions.
• Patients/residents will be alerted to a disaster situation by team members.
• The Social Services Department contacts all families of patients/residents in the event of the need to evacuate.

The Facility as a Shelter

The facility is in a non-evacuation zone, and will become a shelter for patients/residents and staff in the event of a hurricane.

The facility does not have agreements with other facilities to be a shelter for their patients/residents.

If the facility becomes a shelter:
• Chain of command is initiated
• Team member call down list is activated
• Facilities Services will secure all outdoor areas and start sand bagging vulnerable doors
• The Physical Therapy gym will be designated as the sleeping area for off duty team members
• Team member vehicles will be parked in the parking garage
• The director of Patient Services will obtain additional supplies of medications and oxygen
• The Environmental Service supervisor will obtain additional linen from BayCare Linen

Evacuation

In the event of an evacuation:
• The director/administrator is responsible for ordering the evacuation of the facility.
• Pinellas County Emergency Management is notified by calling 911.
• The patients/residents are evacuated to MPH along with their prescribed medications.
• Hospital security provides buses for those individuals that could be transported in this manner.
• Hospital vehicles transport water, food, and other necessities as needed.
• The roster will be checked and a final walk through the facility will be done by staff to ensure that all patients/residents have been evacuated.
• Evacuation will be completed in less than two hours.
Evacuation: Your Role

Each form of transportation will have a driver and a team member* to accompany patients/residents as they are being evacuated. To ensure team members accompany patients/residents to the receiving facility, follow this procedure:

- Stay with the patient/resident. The driver will return to the facility to transport other patients/residents.
- The driver will stay at the receiving facility to assist with residents once the evacuation has been completed.

* Every team member within BayCare has a "duty to serve" during times of crisis. As healthcare workers, your help will be needed in order for us to serve the needs of the people in our community. If you have not been assigned a specific role during an emergency/disaster, check with your department manager/supervisor to assure you understand what your response should be.

Evacuation: Tracking Patients/Residents

To keep track of patients/residents during an evacuation to the receiving facility:

- Each patient's/resident's name and receiving facility will be documented as they are placed in transport.
- Each patient/resident will take a pillow, blanket, medications, toiletries and a change of clothing.
- Name tags will be made up for each patient/resident and placed on patients/residents for identification purposes.
- A list of the patients/residents who have been evacuated to the receiving facility will be sent to the administration office of the receiving facility after the evacuation is complete.

Evacuation: Advising Families

The following is the procedure for advising families of patients/residents that have been evacuated:

- The patient/resident census will be distributed to Social Services to provide information to the team members working the phones.
- The family of the patient/resident will be given the name, address and phone number of the receiving facility.
- If phone lines are down, all family requests will need to come through the American Red Cross or the local Police Department.

Evacuation: Re-entry

The director/administrator in collaboration with the proper local authorities will be responsible for deciding on re-entry into the facility.

Patients/residents along with team members will then be transported back to the facility.

Disaster Drills

There are many types of emergencies/disasters that could occur. Those listed as high risk on the Hazard Vulnerability Analysis (HVA) (conducted annually in collaboration with the Safety/Environment of Care Committee at Morton Plant Mease) are addressed in the MPR Disaster Plan.

At least twice a year, the facility conducts "Disaster" drills. It is important for team members to participate in these drills to assure you know what to do if a real event occurs.

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Lesson: Life Safety (Fire)

Introduction

Lesson Objectives

What you do during the first two to three minutes of a fire is more important than what you do over the next two to three hours.

After you complete this lesson, you should be able to:

• Identify the appropriate behavior(s) to prevent fires
• Select the steps to respond to a small fire
• Select the steps for proper use of a fire extinguisher
• Identify the order in which to evacuate a building

Prevention

Facilities Designed to Contain Smoke and Fire

Facilities are designed to contain smoke and fire, thus preventing the need for evacuation in every instance of fire. The use of smoke and fire barriers/doors allows for this limited type of evacuation.

A smoke compartment will keep deadly smoke and fire confined long enough to make an escape or rescue possible, provided the doors remain closed.

A smoke compartment is an area protected by smoke barriers or doors, designed to prevent smoke from escaping into adjacent areas. You can recognize smoke compartments if the fire doors close automatically when the fire alarm goes off.

Team Members’ Responsibility for Fire Prevention

It is everyone’s responsibility to assure that our facilities are safe.

Do NOT block extinguishers, pull stations, fire doors and exits.

Review the following list of expected actions to help prevent and respond quickly to fires.

<table>
<thead>
<tr>
<th>Actions</th>
<th>Additional Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Keep hallways passable at all times (8 feet of clearance)</td>
<td>Assign carts to specific team members to move in case of a fire. In the event of fire in your area, always maintain a clear path of travel to the fire exits or to the next smoke compartment. Hallways should be free of obstruction.</td>
</tr>
<tr>
<td>Never store anything closer than 18 inches from a sprinkler head</td>
<td>Materials stored within 18 inches of a sprinkler head will impede or slow the flow of water and reduce the effectiveness of the sprinkler head.</td>
</tr>
<tr>
<td>Never store anything closer than 36 inches from an electrical panel</td>
<td><em>In the event of an electrical panel failure, sparks and flames can extend 36 inches from the panel; therefore, items stored too close to the panel could catch fire.</em></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Keep laundry chutes and doors to rooms with laundry chutes locked and closed*</td>
<td><em>Laundry chutes can act as chimneys in a fire, so the chute must be self-closing. Always keep chute doors locked and closed - never left open or blocked open. Seal laundry chutes no longer in use, so the door cannot open. If the door is not sealed, contact the Facilities/Plant Services Department.</em></td>
</tr>
</tbody>
</table>

**Fire Drills (Hospital Divisions, BH, HC, MPR, JKTB only)**

All team members must participate in fire drills. Refer to the chart for your facility’s fire drill requirement.

<table>
<thead>
<tr>
<th>Facility</th>
<th>Fire Drill Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morton Plant Mease Hospitals</td>
<td>Quarterly on each shift</td>
</tr>
<tr>
<td>St. Anthony’s Hospital</td>
<td>Quarterly on each shift</td>
</tr>
<tr>
<td>St. Joseph’s Hospitals</td>
<td>- Quarterly on all three (3) shifts</td>
</tr>
<tr>
<td></td>
<td>- One (1) additional drill per shift in an area identified</td>
</tr>
<tr>
<td></td>
<td>by an Interim Life Safety Measures (ILSM) Assessment when</td>
</tr>
<tr>
<td></td>
<td>required</td>
</tr>
<tr>
<td></td>
<td>- Annually for buildings not part of the hospital with no</td>
</tr>
<tr>
<td></td>
<td>patients incapable of self rescue</td>
</tr>
<tr>
<td>South Florida Baptist Hospital</td>
<td>- One (1) per shift per quarter no more than 30 days apart</td>
</tr>
<tr>
<td></td>
<td>- Annually for buildings not part of the hospital with no</td>
</tr>
<tr>
<td></td>
<td>patients incapable of self rescue</td>
</tr>
<tr>
<td>Non-hospital facilities/ Primary Care</td>
<td>At least annually</td>
</tr>
<tr>
<td>Ambulatory Surgery Centers</td>
<td>Quarterly</td>
</tr>
<tr>
<td>Home Care</td>
<td>Only required in facilities with walk in patients: annually</td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>Depends upon type of program and length of stay</td>
</tr>
<tr>
<td></td>
<td>- Out-Patient: quarterly</td>
</tr>
<tr>
<td></td>
<td>- In-Patient: quarterly on all three (3) shifts</td>
</tr>
<tr>
<td></td>
<td>- Stabilization Units: quarterly, one (1) per shift</td>
</tr>
<tr>
<td>John Knox Tampa Bay</td>
<td>Quarterly on all three (3) shifts</td>
</tr>
<tr>
<td>Morton Plant Rehabilitation</td>
<td>Quarterly on all three (3) shifts</td>
</tr>
<tr>
<td>For all others</td>
<td>Refer to your department’s procedures</td>
</tr>
</tbody>
</table>
Response

Immediate Response

To respond rapidly and effectively to a fire, memorize the acronym RACE: Rescue, Alarm, Contain, Extinguish and/or Evacuate.

R = Rescue

When a fire is discovered, rescue people in the immediate area of the fire and move victims to the nearest adjacent smoke compartment.

If you smell smoke coming from behind a closed door, feel the door with the back of your hand before opening. If the door is too hot to touch, do not open it. If the door is touchable, open it slowly.

If you enter the room, keep low to the ground; crawl beneath the smoke. Remember, smoke and heat rise to the ceiling, and smoke and toxic gases are more deadly than the fire.

If a person's clothes are on fire, stop him/her, drop him/her to the floor and roll him/her to extinguish the flames (Stop-Drop-Roll).

If a piece of equipment catches fire, pull the plug if possible.

If a fire starts in an area where oxygen is in use, remove anyone from immediate danger. (If applicable, the Charge Nurse or designee, and/or Respiratory Care will turn off oxygen, if necessary, once the patient's needs are met.)
**A = Alarm**

Activate the fire alarm by using the manual pull station and calling your facility’s contact. Refer to the chart on this page. All BayCare personnel must know how to respond in case of an emergency. If you travel to multiple BayCare sites, learn the proper response for each location.

<table>
<thead>
<tr>
<th>Facility</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morton Plant Mease Hospitals</td>
<td>Dial 66 or press the red emergency button on your phone</td>
</tr>
<tr>
<td>St. Anthony’s Hospital</td>
<td>Dial 66 or press the red emergency button on your phone</td>
</tr>
<tr>
<td>St. Joseph’s Hospitals</td>
<td>Dial 66</td>
</tr>
<tr>
<td>South Florida Baptist</td>
<td>Dial 66 or use the red emergency button</td>
</tr>
<tr>
<td>Home Care</td>
<td>Dial 911 if there are no fire alarms at your location</td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>Dial 911</td>
</tr>
<tr>
<td>John Knox Tampa Bay</td>
<td>Dial 9 to get outside line, then 911 and 0 (zero) for front desk operator, who will request Security assistance</td>
</tr>
<tr>
<td>Morton Plant Rehabilitation</td>
<td>Dial 911, then press RED emergency button on phone or dial 66 to notify hospital operator, who will request Security assistance</td>
</tr>
<tr>
<td>Primary Care/Physician Office</td>
<td>Dial 911</td>
</tr>
<tr>
<td>All offsite facilities</td>
<td>Dial 911, using an outside line</td>
</tr>
<tr>
<td>Winter Haven Hospital</td>
<td>Dial 66</td>
</tr>
<tr>
<td>For all others</td>
<td>Refer to your department’s procedures</td>
</tr>
</tbody>
</table>

**C = Contain**

To help contain the fire within an area, close all doors and windows. Doors are barriers to smoke, heat and flames.

**E = Extinguish or Evacuate**

If the fire is small and you decide to extinguish it yourself, remember the acronym PASS:

- **P** = **Pull** the pin found on the handle of the fire extinguisher
- **A** = **Aim** at the base of the fire
- **S** = **Squeeze** the hand lever
- **S** = **Sweep** at the base of the fire, not at the flames

If the fire is too large, or you do not feel safe using the fire extinguisher, evacuate the area immediately! At no time should team members endanger themselves to extinguish a fire to protect the building.
Evacuation

Evacuating Customers

To provide customers with the best care, evacuation is a last resort. Any Public Safety worker (Police, Fire, Emergency Management) or the most senior charge person, Facility Safety Officer, or Incident Commander will make the decision to evacuate.

Evacuate customers in the following order.
1. First, as a group, move customers requiring little or no assistance from the staff
2. Next, move customers requiring one-on-one assistance
3. Finally, move customers requiring constant medical attention with equipment or with additional team member support

Where to Evacuate

In case of fire, use the following methods for safe evacuation:

1. **Room of Fire Origin.** Evacuate everyone from the actual room of the fire if it can be done safely
2. **Horizontal Evacuation.** If a fire cannot be contained and evacuation is required, move from one smoke compartment to another, but remain on the same floor; this movement is called horizontal evacuation
   
   Horizontal evacuation may involve movement to an adjacent building, which will involve passing through a fire door.
   
   Note: when evacuating horizontally, it is necessary to go beyond an operating fire or smoke barrier, not simply exit to an adjoining floor or building.
3. **Vertical Evacuation (if applicable)** - If a fire cannot be contained within its original zone, and another fire zone is not available on the same floor, evacuate to the next lower level in the same building (vertical evacuation)

   **Note:** Vertical evacuation only involves movement to the next lower level.

   Only a Public Safety worker (Police, Fire, Emergency Management) or the most senior charge person (Facility Safety Officer, or Incident Commander) can authorize vertical evacuation.

4. **Building Evacuation** - If a fire continues to spread to additional floors within a facility, evacuate to the exterior of the facility

**Evacuation Tips**

If you need to evacuate for a fire, review the following evacuation tips:

- Only use elevators under fire department supervision
- Know evacuation routes without the use of elevators and in the dark because electrical fires may knock out the electric power
- Never open a hot door! Always feel any door for heat with the back of your hand
- Move to the other side of a fire door to place a barrier between you and the fire
- Remove carts and all other items from the corridors
- Prepare to secure or move important documents and medications in the patient's pillow case, if possible, which will then be kept with the patient
Lesson: Hurricanes

Introduction

Lesson Objectives

Hurricanes, tropical storms and tropical depressions can all bring floods from heavy rains and are associated with severe weather such as tornados. Hurricane season runs from June 1 to November 30 each year.

After you complete this lesson, you should be able to:

• Recognize team members’ responsibility to prepare for and respond during a hurricane

Before the Hurricane

Prepare Your Work Area (BMG only)

To prepare your work area for a hurricane, follow these tips:
• Exit all applications as you normally would before leaving for the day
• Start and log-off the Metaframe session first
• Start and shut down your Windows desktop
• Once the computer is off, physically turn off the monitor by pressing the on/off button on the front of the monitor
• Power off the APC UPS back-up unit from the wall
• Unplug the APC UPS back-up unit from the wall
• Do not cover the computers

Prepare Your Home/Family

To prepare your home and family for a hurricane, follow these tips:
• Develop a personal safety plan for your family that includes a meeting location and common phone number to use, if separated
• Stock up on nonperishable food
• Have a battery-operated portable radio, flashlights and plenty of batteries.
• If you have a gas grill for cooking outside, keep an extra tank of fuel and top off fuel tanks.
• Keep enough prescription medications to last a week to ten days
• Keep cash on hand. ATMs may not be functional after a storm
• Keep basic first aid supplies up-to-date
• Keep enough drinking water on hand for three to five days, at least one gallon per day, per person
• Store important papers in a watertight box and
• Fill your vehicles with gas
Hurricane Facility Contacts

When notified of severe weather, team members should follow their specific department policies. For updates refer to the chart for your facility’s contact.

<table>
<thead>
<tr>
<th>Facility</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>St. Joseph’s Hospitals</td>
<td>Call 813-870-4880</td>
</tr>
<tr>
<td>South Florida Baptist Hospital</td>
<td>Call 813-757-8000</td>
</tr>
<tr>
<td>Morton Plant Mease Hospitals</td>
<td>Call the Hurricane Hotline number (727-461-8111). For those with voice mail, call the voice mail access number (727-734-6000).</td>
</tr>
<tr>
<td>St. Anthony’s Hospital</td>
<td>Call (727) 820-7817 outside the hospital or internally at ext. 27817. The hotline will be updated regularly as storm conditions change</td>
</tr>
<tr>
<td>John Knox Tampa Bay</td>
<td>Follow instructions of your immediate supervisor, manager on duty and/or the facility’s director</td>
</tr>
<tr>
<td>Morton Plant Rehabilitation</td>
<td>Call voice mail, access email or call the hotline (727- 461- 8111)</td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>Contact your immediate Director, Manager, or Coordinator for your work schedule</td>
</tr>
<tr>
<td>HomeCare</td>
<td>Follow the hurricane preparedness plan for your department/office. Call the department/office for further instructions</td>
</tr>
<tr>
<td>For all others/</td>
<td>Refer to your department’s procedures</td>
</tr>
<tr>
<td>Primary Care/Physician Office</td>
<td></td>
</tr>
</tbody>
</table>

During a Hurricane

Report to Work During a Hurricane (Hospital Divisions, BH, HC, JKTB, MPR only)

All team members are expected to work shifts as assigned. If you are assigned to work during the storm, bring extra clothes, bedding, snacks, personal hygiene items, water for personal use and cash. ATM's may not be in working order.

Team members should follow their specific department policies.

After the Hurricane

Return to Work After the Hurricane (Hospital Divisions only)

Stay in touch with your manager for staffing updates.

Return to Work After the Hurricane (JKTB only)

Stay in touch with your immediate supervisor, manager on duty and/or the facility’s director.

Call 813-977-4950 for staffing updates. If you are scheduled to work after the storm, do not leave your home until emergency management gives the ALL CLEAR.

Return to Work After the Hurricane (BH only)

If you are scheduled to work after the storm, do not leave your home until emergency management gives the ALL CLEAR.
Return to Work After the Hurricane (HC only)

Stay in touch with your supervisor/manager for staffing updates. If you are scheduled to work after the storm, do not leave your home until emergency management gives the ALL CLEAR.

Return to Work After the Hurricane (MPR only)

Stay in touch with the nursing supervisor for staffing updates. If you are scheduled to work after the storm, do not leave your home until emergency management gives the ALL CLEAR.

Return to Work After the Hurricane (BMG only)

Stay in touch with your manager for staffing updates. If you are scheduled to work after the storm, do not leave your home until emergency management gives the ALL CLEAR.

When returning to work, make sure it is safe to use the power in your office. Review the steps to make the computers operational:
• Plug in the previously unplugged APC UPS back-up units for each computer
• Switch the APC UPS back-up units on by pressing its button from 0 to 1
• Physically turn on the monitor by pressing the on/off button on the front of the monitor
• Turn on and start up your computer as you normally do each day
Lesson: Bomb Threat

Introduction

Lesson Objectives

A bomb threat has been made at your facility. What do you do?

After you complete this lesson, you should be able to:
- Identify team members’ actions to respond to a bomb threat and
- Recognize team members’ actions to properly search after a bomb threat

Responding to a Bomb Threat

Procedures to Respond to a Bomb Threat

If you receive a bomb threat, you should:
1. Keep the person on the phone as long as possible
2. Write down the phone number (if you have a phone equipped with caller ID)
3. Get help from another team member
4. Have someone else call the hospital switchboard (using the emergency line) or 911 (if off-site) and tell them you have:
   - A bomb threat and
   - The phone number
5. Ask the person questions and write all the information down
   - For example, “Where is the bomb?”, “What does the bomb look like?” and “When will it go off?”
6. Listen for cues including:
   - Background noise (for example traffic, church bells, alarms, sirens, aircraft, trains, children, radio, television)
   - Type of voice (for example gender, accent, speech impediments, voice volume)

Searching the Area

If you are asked to search your work area for any unusual items or items that are out of place, follow these guidelines:
- Check all doors for wires or signs of tampering before opening.
- Look over the entire area before entering a room.
- Listen for any unusual sounds.
- Do NOT touch or move any items and
- Do NOT use pagers, cellular phones and two-way radios
- If you find a suspicious object, and no bomb threat has been called in, call Security or 911 and proceed with the Bomb Threat process
Lesson: Medical Equipment Management (Hospital Divisions, JKTB, MPR, HC, BMG only)

Introduction

Lesson Objectives

Medical equipment includes any device used to monitor, diagnose or treat patients.

Team members are responsible for knowing the application and safe operation of medical equipment. Would you know what to do if medical equipment malfunctions?

After you complete this lesson, you should be able to:
• Recognize guidelines for inspecting new equipment
• Identify team members’ actions to remove malfunctioning equipment and
• Recognize information needed to complete a medical equipment repair request form

New Medical Equipment

Inspection and Labeling (Hospital Divisions, JKTB, MPR only)

All medical equipment must be inspected and labeled with either a Device Evaluation or current Preventive Maintenance (PM) Inspection label prior to use.

In addition, if the medical equipment is facility-owned, it must have an inventory label/sticker. If the medical equipment is not facility-owned, it must have a safety label prior to use.

If the medical equipment does not have an inspection label, or the label is outdated:
1. Take the medical equipment out of service
2. Secure the equipment until it has been inspected and labeled appropriately to prevent further use and
3. Contact Clinical Engineering Services

![Device Evaluation and Preventive Maintenance (PM) Inspection labels](image)

![Facility-owned Inventory and Non-facility owned Safety labels](image)
**Inspection and Labeling: Primary Care/Physician Office (BMG only)**

All medical equipment must be inspected and labeled with either a Device Evaluation or current Preventive Maintenance (PM) Inspection label prior to use.

In addition, all equipment owned by BayCare must have an inventory sticker. If the medical equipment is not facility-owned, it must have a safety label prior to use.

If the medical equipment does not have an inspection label, or the label is outdated:
1. Take the equipment out of service
2. Secure the equipment until it has been inspected and labeled appropriately to prevent further use and
3. Contact your supervisor

**Inspection and Labeling: HomeCare (HC only)**

All medical equipment must be inspected and labeled prior to use.

All BayCare HomeCare medical equipment should have an identification label.

Any rental equipment with manufacturer-required maintenance must have an identification label and a Preventive Maintenance sticker.

<table>
<thead>
<tr>
<th>Label</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image1" alt="Identification Label" /></td>
<td>All rental equipment must have an identification label applied prior to use.</td>
</tr>
<tr>
<td><img src="image2" alt="P/M Tag" /></td>
<td>Any rental equipment with manufacturer required maintenance must have a Preventative Maintenance sticker and identification label. The manufacturer sets time lines when equipment needs to be inspected. The P/M tag tells when the machine is due for the next inspection.</td>
</tr>
<tr>
<td><img src="image3" alt="Concentrator Data" /></td>
<td>All oxygen concentrators will have an identification label, a PM sticker and a concentrator data label. The Concentrator Data label tells the last time the machine was inspected and what the liter flow should be set at.</td>
</tr>
</tbody>
</table>

**Malfunctioning Medical Equipment**

**Medical Equipment Failure Grid (Hospital Divisions, MPR only)**

The Medical Equipment Failure Grid identifies the key critical medical equipment located within your department and provides procedures to follow for medical equipment failures.

It is your responsibility to know where the grid is located in your department.

In the event of an equipment emergency, contact your supervisor.
Note: A copy of the Medical Equipment Failure Grid is located on the BayCare Intranet.

Working with Medical Equipment (Hospital Divisions, JKTB, MPR, BMG only)

Numerous medical devices are equipped with functional alarms to notify staff when the equipment is not working properly.

When you assume care for a patient:
- Be sure you can hear all audible alarms from where you are working, not just in the patient's room
- Verify the alarms are functioning (and not silenced.) Alarms may have been turned off or overridden during the previous shift

Procedures for Malfunctioning Medical Equipment (Hospital Divisions only)

If medical equipment malfunctions or shows signs of possible malfunction*:
- Take the equipment out of service
- Tag the equipment for repair and
- For Urgent Repair Requests:
  - Report problems to Clinical Engineering Services immediately
- For Routine Repair Requests:
  - Complete Online Routine Work Request Form located on the BayCare Intranet

* If a device is involved in an event, ensure that an Event Report is completed and sent to Risk Management immediately.

If you have questions regarding the function of any medical device, contact your manager or supervisor. If your supervisor cannot answer the questions to your satisfaction, contact Clinical Engineering Services for additional resources.

Procedures for Malfunctioning Medical Equipment (JKTB only)

If medical equipment is malfunctioning or is showing signs of possible malfunction:
- Take the equipment out of service
- Tag the equipment for repair and
- Immediately report the problem to Clinical Engineering Services
- Complete Online Routine Work Request Form located on the BayCare Intranet or call your Clinical Engineering Department number located on the BayCare Intranet
• After hours, for non-emergency medical equipment issues, call and leave a message for Facilities Services
• If a device is involved in an event, ensure that an Event Report is completed and sent to Risk Management immediately

If you have a question regarding the function of any medical device, contact your immediate supervisor, manager on duty and/or the facility's director. You can also contact the Facilities Department for additional resources.

**Procedures for Malfunctioning Medical Equipment (MPR only)**

If medical equipment malfunctions or shows signs of possible malfunction:
• Take the equipment out of service
• Notify nursing supervisor
• Tag broken equipment with the hot pink Clinical Engineering slip with your name and a detailed description of the problem
• Place the broken equipment outside the maintenance office or in the back hallway
• Complete the Online Routine Request Form located on the BayCare Intranet or call your Clinical Engineering Department number located on the BayCare Intranet
• If a device is involved in an event, ensure that an Event Report is completed and sent to Risk Management immediately

If you have a question regarding the function of any medical device, contact your manager or supervisor. If the supervisor cannot answer the questions to your satisfaction, team members can contact Clinical Engineering Services for additional resources.

**Procedures for Malfunctioning Medical Equipment (BMG only)**

If medical equipment malfunctions or shows signs of possible malfunction:
• Take the equipment out of service
• Tag the equipment for repair and
• Immediately report the problem to your supervisor
• If a device is involved in an event, ensure that an Event Report is completed and sent to Risk Management immediately

If you have a question regarding the function of any medical device, contact your manager/supervisor.

**Procedures for Malfunctioning Medical Equipment (HC only)**

When setting up a medical device equipped with a functional alarm, ensure the patient can hear the alarm at all times.

If medical equipment malfunctions or shows signs of possible malfunction, contact your supervisor/manager. During non-business hours, contact your Administrator on-call.
If medical equipment is involved in an event/incident:
• Call your manager/supervisor
• Complete an Event Report and
• Return the completed form to your manager/supervisor to be reviewed and forwarded to Risk Management within 24 hours
• If the device is owned by BayCare HomeCare, call the phone number on the BayCare sticker to report the event/incident

Reporting Malfunctioning Medical Equipment: Requirements (Hospital Divisions, JKTB, MPR, BMG only)

When reporting medical equipment issues, provide as much information as possible to help diagnose the problem.

To help expedite your service request, always provide the following information:
• Your facility and department
• Your name and the phone number where you can be reached (with area code and extension)
• Equipment ID number (displayed on a BayCare barcode tag)
• Description of problem (not just “broke”)
• Specific location of device

![Clinical Engineering Online Routine Work Order Request](image)

Online Routine Work Requests are intended for ROUTINE medical equipment repairs ONLY. EMERGENCY or IMMEDIATE PATIENT SAFETY medical equipment repair requests must be phoned DIRECTLY to your Clinical Engineering Department.

**Facility**: Mease Dunedin Hospital

**Problem**: Infusion pump battery is not working

**Requester**: Pat Sample

**Department**: Emergency Services

**Equipment ID**: BC22000

**Phone**: 727-111-1111

**Location**: Nurse station
Lesson: Utilities Management (Hospital Division, JKTB, MPR, BMG only)

Introduction

Lesson Objectives
If the utilities failed at your facility, would you know how to respond? Would you know whom to contact?

After you complete this lesson, you should be able to:
• Identify team member actions to prevent potential utility problems and to respond to utility failures

What are Utilities?
The following are examples of utility systems within BayCare facilities:
• Communication systems
• Electric
• Elevators
• Medical gases
• Medical vacuum
• Natural gas
• Pneumatic tube systems
• Sewer
• Steam systems
• Ventilation
• Water

How to Avoid Utility Problems

Red Electrical Outlets (Hospital Division only)
Emergency power is provided to every RED outlet. Plug all critical patient care equipment into one of the RED outlets to ensure the equipment continues to receive power in a power failure.

Please note:
• At St. Anthony's, all outlets are included on emergency power except for ICU and Surgery. In these departments, only the red plugs are on emergency power.
• At St Joseph's Hospital-North, all outlets are included on emergency power.

Red Electrical Outlets (MPR, JKTB, BMG only)
Emergency power is provided to every RED outlet. All critical patient care equipment should be plugged into one of these outlets to ensure the equipment will continue to have power if there is a power failure.

Note: Non-critical equipment should only be plugged into regular outlets.
Electrical Safety Guidelines for Patient Care Equipment

Use the following electrical safety guidelines:

• Inspect all devices before use. Look for any signs of wear or damage.
• Check all electrical outlets prior to plugging in equipment. Make sure the faceplate is not broken, missing or loose.
• Check all cords prior to use to ensure they are not frayed or cracked.
• Check for missing prongs or bent pins on the plug.
• If you discover any signs of wear or damage, report the damage and remove the item from service.
• Do not use extension cords or octopus adapters.

Refer to this chart for your facility's contact:

<table>
<thead>
<tr>
<th>Facility</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Divisions</td>
<td>Clinical Engineering Services</td>
</tr>
<tr>
<td>John Knox Tampa Bay</td>
<td>Clinical Engineering Services</td>
</tr>
<tr>
<td>Morton Plant Rehabilitation</td>
<td>Facility Services</td>
</tr>
<tr>
<td>Primary Care/Physician Office</td>
<td>Supervisor</td>
</tr>
<tr>
<td>For all others</td>
<td>Refer to your department's procedures</td>
</tr>
</tbody>
</table>

Medical Gases (Hospital Division, JKTB, MPR only)

Medical Gas Containers

Medical gases are contained in color-coded cylinders. It is imperative to connect cylinders to the correct port. Mix-ups could be disastrous, and can result in death.

Medical gas regulators are designed to work with specific gases. Never force a regulator onto a cylinder; regulators and cylinders should fit easily. Don't bypass safety systems.

Medical Gas Precautions

Remember the following tips when using medical gases:

• No Smoking! Oxygen greatly increases the capability of something catching fire
• Inspect and request repairs on damaged outlets
• Store all cylinders securely, for example, in a rack
• Do not store more than 12 E-cylinders in any smoke compartment
• Always store empty cylinders separately from those that are full or in use
• Use water soluble lubricants only with oxygen tanks, regulators or lines
• Pay attention to oxygen tank color and/or labeling because BayCare does not use a single vendor; for example, oxygen tanks may be silver with a green top and/or labeled "ALUM"
• Only use approved cylinders and valves near an MRI
• Ensure thumbscrew is present and securely screwed against the canister
Medical Gas Transport

Transport all oxygen cylinders in carriers and properly secure the locking mechanism such as the thumbscrew or latching strap. If you need assistance, refer to the chart for your facility's contact.

<table>
<thead>
<tr>
<th>Facility</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Saint Joseph's Hospitals</td>
<td>Respiratory Therapy</td>
</tr>
<tr>
<td>South Florida Baptist</td>
<td>Respiratory Therapy</td>
</tr>
<tr>
<td>Morton Plant Mease Hospitals</td>
<td>Respiratory Therapy</td>
</tr>
<tr>
<td>Saint Anthony's Hospital</td>
<td>Respiratory Therapy</td>
</tr>
<tr>
<td>John Knox Tampa Bay</td>
<td>Immediate supervisor, manager on duty, and/or facility's director</td>
</tr>
<tr>
<td>Morton Plant Rehabilitation</td>
<td>Respiratory Therapy or, if after hours, contact nursing supervisor</td>
</tr>
<tr>
<td>Winter Haven Hospital</td>
<td>Respiratory Therapy</td>
</tr>
<tr>
<td>For all others</td>
<td>Refer to your department's procedures</td>
</tr>
</tbody>
</table>

Medical Gas Shutoff

In the event of an emergency such as a fire, it may be necessary to shut off medical gas valves. If your facility has piped gas, the medical gases are installed in zones, so the gas can be shut off in specific zones instead of an entire floor. Each shutoff valve is labeled with the rooms that it controls.

Team members should know the location (zone) of the medical gas valves and who can shut off the medical gas valves in your facility.

Refer to this chart for your facility’s specific information:

<table>
<thead>
<tr>
<th>Facility</th>
<th>Who Can Shut Off Medical Gas Valves?</th>
</tr>
</thead>
<tbody>
<tr>
<td>St. Joseph’s Hospitals</td>
<td>• Charge nurse&lt;br&gt;• Respiratory therapist</td>
</tr>
<tr>
<td>South Florida Baptist</td>
<td>• Charge Nurse and Senior Respiratory Therapist</td>
</tr>
<tr>
<td>Morton Plant Mease Hospitals</td>
<td>• Charge nurse&lt;br&gt;• Respiratory therapist</td>
</tr>
<tr>
<td>St. Anthony’s Hospital</td>
<td>• Charge nurse&lt;br&gt;• Respiratory therapist</td>
</tr>
<tr>
<td>John Knox Tampa Bay</td>
<td>• Charge nurse&lt;br&gt;• Respiratory therapist</td>
</tr>
<tr>
<td>Morton Plant Rehabilitation</td>
<td>• Nursing Supervisor&lt;br&gt;• Charge Nurse&lt;br&gt;• Respiratory Therapy&lt;br&gt;• Maintenance&lt;br&gt;&lt;i&gt;Oxygen is installed in 1 South. Valve is accessible at entrance of 1 South.&lt;/i&gt;</td>
</tr>
<tr>
<td>For all others</td>
<td>Refer to your department's procedures</td>
</tr>
</tbody>
</table>
Responding to a Utility Failure (Hospital Division, MPR only)

Use of a Utility Failure Grid

A Utility Systems Failure Grid:
- Provides procedures and contact information in the event of a utility failure
- Developed by each facility
- Located in your department; be sure you know where the Utilities Grid is located

<table>
<thead>
<tr>
<th>Failure of Utility Systems</th>
<th>Basic Staff Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Electrical Power Failure</td>
<td>Ensure that support systems are emergency power and sockets - verify patients by hand as necessary. Computerized surgical service uses in progress CUS. Use flashlights.</td>
</tr>
<tr>
<td>Generator Failure</td>
<td>Facilities</td>
</tr>
<tr>
<td>Elevators Out of Service</td>
<td>Facilities / Security</td>
</tr>
<tr>
<td>Hospital Alarm Sounding</td>
<td>Facilities / Security</td>
</tr>
</tbody>
</table>

Sample
Lesson: Hazardous Materials

Introduction

Lesson Objectives

Health care environments contain many hazardous materials. Do you know how to recognize hazardous materials? Would you know how to respond to a hazardous material spill?

After you complete this lesson, you should be able to:
• Recognize hazardous materials in the workplace
• Access Safety Data Sheet (SDS) using HazSoft and
• Recognize team members’ response to a hazardous material spill

What are Hazardous Materials?

Hazardous materials include products (chemicals and drugs) that present a physical or health hazard.

These materials can be divided into categories based on their characteristics:
• Corrosive (acids, bleach, lye)
• Flammable (paints, thinners, xylene, gasoline)
• Cancer causing (lead, arsenic, chemotherapeutic drugs)
• Toxic and
• Reactive (for example combinations of scouring cleansers/bleach, or formaldehyde/acids that cause fire, explosions, or give off toxic fumes)

Methods to Identify Potential Risks

How to Identify Potential Risks

Team members identify potential risks of hazardous chemicals in one of two ways:
• Safety Data Sheet (SDS)
• Container’s label must include manufacturer/importer information, precautionary statements

Container Label

Information on the container label includes the:
• Chemical name
• Warnings or symbols and
• Name and address of the chemical manufacturer or responsible party to obtain further information
Team Member Responsibility

Know the Hazardous Materials

As a team member, you are expected to:
• Know the materials you are exposed to in the workplace
• Know how to protect yourself (including the proper type and use of PPE)
• Be familiar with OSHA's Hazard Communication (HAZCOM) Standard
• Know how to access the Safety Data Sheets (SDS) and
• Know appropriate spill clean-up procedures

Safety Data Sheet (SDS) (Hospital Divisions, BH, JKTB, MPR, BMG only)

The SDS is a detailed bulletin prepared by the manufacturer to provide product information. Safety Data Sheets are available 24/7.

You can access this software on the BayCare Intranet by searching for "HazSoft." To find an SDS document, type the product or chemical name in the text field and click the Search button. Once the document is retrieved, you can print it.

The SDS includes:
• Information of product and hazards identification
• Product composition and ingredients
• Instructions to respond to accidents involving the product including first aid measures
• Proper methods for storage and handling
• Necessary Personal Protective Equipment

Safety Data Sheet (SDS) (HC only)

The SDS is a detailed SDS prepared by the manufacturer to provide product information and is available 24/7.

You can access this software on the BayCare Intranet by searching for "HazSoft." To find an SDS document, type the product or chemical name in the text field and click the Search button. Once the document is retrieved, you can print it.

The SDS includes:
• Information of product and hazards identification
• Product composition and ingredients
• Instructions to respond to accidents involving the product including first aid measures
• Proper methods for storage and handling
• Necessary Personal Protective Equipment

In addition to the BayCare Intranet, SDS sheets are located in a yellow notebook in the repair area of each DME warehouse. Field staff should keep an SDS notebook in his/her vehicle.
**Hazardous Material Spill Procedures**

Hazardous spills require specific clean-up procedures. If you work with hazardous materials, your facility's contact will review the hazards during your department specific orientation, and when you are introduced to a new chemical. For assistance, refer to this chart for your facility's contact.

<table>
<thead>
<tr>
<th>Facility</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Divisions</td>
<td>Manager</td>
</tr>
<tr>
<td>Home Care</td>
<td>Manager</td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>Manager</td>
</tr>
<tr>
<td>John Knox Tampa Bay</td>
<td>Immediate supervisor, manager on duty and/or the facility's director</td>
</tr>
<tr>
<td>Morton Plant Rehabilitation</td>
<td>Manager</td>
</tr>
<tr>
<td>Primary Care/Physician Office</td>
<td>Manager</td>
</tr>
<tr>
<td>For all others</td>
<td>Refer to your department's procedures</td>
</tr>
</tbody>
</table>

**Work Safely with Hazardous Materials**

Use the following safety tips when working with hazardous drugs and chemicals:

- Read all warning labels and Safety Data Sheets (SDS)
- Follow all drug and chemical handling procedures
- Label all secondary containers; for example, if you fill a secondary container from the original container, the secondary container must be labeled to identify the contents
- Use the appropriate Personal Protective Equipment
- Do NOT open an unlabeled container
- Do NOT handle cleaning solutions if it is not your job because cleaning solutions often contain hazardous chemicals
Lesson: Radioactive Materials (Hospital Divisions only)

Introduction

Lesson Objectives

In a health care environment, you may see the universal symbol for radiation. Do you know what that symbol represents? Do you know how to ensure your safety in areas where radioactive materials are used?

After you complete this lesson, you should be able to:

• Identify the universal symbol for radioactive materials and
• Recognize actions to ensure safety in areas where radioactive materials are used

Radioactive Materials

Sources of Radiation

Team members in the health care environment may be exposed to both ionizing and non-ionizing sources of radiation.

• Ionizing: Radiation is produced artificially by devices such as X-ray machines or naturally by the decay of radioactive material as found in radiopharmaceuticals or radioactive medical implants.
• Non-ionizing: Radiation is generated by sources such as UV lamps, lasers, ultrasound devices and microwave ovens. Our bodies even contain small amounts of non-ionizing radioactive material.

The symbol used for radioactive material is magenta, purple or black on a yellow background. The three-bladed design example is always displayed with one blade pointed downward.

Team Member Responsibility with Radioactive Materials

Basic Rules of Radiation Safety

If you see the universal symbol for radiation posted, follow these basic rules of radiation safety:

• Check with the person in charge before entering the room and/or department
• Maintain extra distance from the patient
• Minimize time spent close to the patient
• Inform your supervisor if there is any chance you might be pregnant before exposure, not after

OSHA has established a standard (1910.1096 1910.97) which addresses safe methods to work with radiation.

The ALARA concept is utilized to keep exposure to radiation “as low as reasonably achievable.”

Handling Radiopharmaceuticals

Radioactive waste requires specific handling procedures. When handling radiopharmaceuticals you must:

• Wear gloves when caring for the patient, as body fluids are radioactive
• Place contaminated items in a separate container labeled with the radioactive symbol
Radioactive Material Storage

All radioactive waste products must be stored in a proper container, which displays the universal symbol for radiation.

Radioactive materials are stored in areas designated with a "Caution, Radioactive Materials" sign.

Radioactive Material Delivery

Vendors deliver radioactive materials to the Nuclear Med Department directly. Radioactive materials delivered during the day must be received by the Nuclear Med team. If radioactive materials are delivered after hours, notify the Security Department.

Radioactive Materials Security

Keeping nuclear medical materials secure is critical.

If you see an unsecured package with the radioactive symbol, or a suspicious individual in the area, contact the Nuclear Med and/or Security Department immediately.

If you have any questions regarding radiation safety, speak with your manager or supervisor, or call your facility's radiation safety officer (RSO).