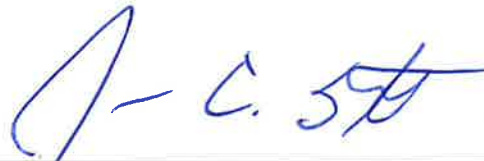


ASHLEY COUNTY MEDICAL CENTER
ASHLEY HEALTH SERVICES
ACMC FAMILY HOME HEALTH
EMERGENCY PREPAREDNESS MANUAL

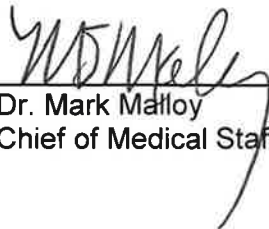
April 2017



Jimmy Stell
Safety Officer



Phillip Gilmore
Chief Executive Officer



Dr. Mark Malloy
Chief of Medical Staff

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

NIMS Compliance

FILING NUMBER

0.10

EFFECTIVE DATE:

February 2010

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

Disasters affecting the community will be managed at Ashley County Medical Center in accordance with Incident Command System (ICS) organizational structures, doctrines and procedures. Emergency policies will be National Incident Management System (NIMS) compliant, and employees will be trained according to these guidelines. In the event of a disaster, the Command Center will be located in the Board Room in Administration and will be set up according to NIMS guidelines. ACMC will have written Memorandums of Agreement with other hospitals and organizations that have agreed to provide assistance to ACMC in the event of a disaster.

Communications with County offices, law enforcement, and other hospitals in the Region during a disaster situation may be by AWINS radios, or Tandberg, in addition to telephone. Communications on AWINS radios will be by common language, not radio codes.

All designated employees will receive training in ICS courses.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Emergency Codes

FILING NUMBER:
EMG 0.20

EFFECTIVE DATE:
December 2014

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

Emergency Color Code designations for alerting personnel to a situation and minimize anxiety for patients and visitors will be assigned as follows:

CODE BLACK	If Evacuation is necessary
CODE ORANGE	Bomb Threat
CODE RED	Fire or Fire Drill
CODE BLUE	Cardiac Arrest
CODE GREEN	Mass Casualty
CODE PINK	Kidnapping
CODE PURPLE	Combative Patient/Visitor in any area of the Hospital
CODE YELLOW	Generations Escape
CODE WHITE	Tornado Warning
CODE SILVER	Active Shooter
CODE C	Ebola patient

**ASHLEY COUNTY MEDICAL CENTER and ASHLEY HEALTH
SERVICES
EMERGENCY PREPAREDNESS MANUAL
TABLE OF CONTENTS**

CASCADE CALL

- 1.00 Hospital-Wide Cascade Call System
- 1.50 Emergency Phone Numbers

MEDIA COVERAGE

- 2.00 Media Coverage in Emergency Situations

EVACUATION PLAN

- 3.00 Evacuation Plan

FIRE ZONES & PLANS

- 4.00 Fire Zone Locations & Evacuation Exits
- 4.01 Fire Zone Map
- 4.02 Location of Fire Extinguishers
- 4.03 Oxygen Shut-Off Locations
- 4.10 Employee Discovering a Fire, or Sign of Fire
- 4.20 Special Assignments for Managing Fire/Suspected Fire
- 4.30 General Employee Duties in a Fire
- 4.35 Cancellation of Fire Alarms

Department Specific Responsibilities in a Fire/Evacuation

- 4.40 Administrative Office
- 4.41 Admitting/Financial Counseling
- 4.42 Accounting Office
- 4.43 Dietary
- 4.44 Engineering
- 4.45 Health Information
- 4.46 Ashley IOP
- 4.47 Housekeeping
- 4.48 Information Management Services
- 4.49 Laboratory
- 4.50 Materials Management
- 4.52 Nursing
- 4.55 Pharmacy
- 4.56 Physical Therapy

EMERGENCY PREPAREDNESS MANUAL
TABLE OF CONTENTS- Continued

- 4.57 Radiology
- 4.58 Respiratory Therapy
- 4.59 Social Services
- 4.60 Switchboard
- 4.61 Utilization Review
- 4.62 Home Health

INTERRUPTION OF VITAL SERVICES

- 5.00 Electricity
- 5.10 Water
- 5.20 Telephone

INTERNAL DISASTER

- 6.00 Internal Disaster
- 6.10 Kidnapping
- 6.15 Code Purple
- 6.18 Active Shooter
- 6.20 Riot Control
- 6.30 Bomb Threat
- 6.40 Code Yellow

NUCLEAR/CHEMICAL ACCIDENT

- 7.00 Nuclear/Chemical Accident
- 7.50 Bioterrorism Plan
- 7.60 Point of Distribution (POD) Plan
- 7.70 Code C – care of Ebola patient

TORNADO/WINDSTORM DISASTER

- 8.00 Tornado/Windstorm Disaster
- 8.10 Code White Critique Form

MASS CASUALTY

- 9.00 Mass Casualty Plan
- 9.01 Mass Fatality Plan
- 9.05 Attachment “A”
- 10.00 Alternate Care Site Plan

**ASHLEY COUNTY MEDICAL CENTER
CASCADE CALL LIST
May-17**

In the event of an internal or external emergency, the Nursing Supervisor on duty will direct the PBX Operator to notify the administrative person on call and the supervisor at the head of each column who needs to be called. The supervisor will then notify those under his/her authority as needed, and designate others to be called as needed.

<u>Chief Executive Officer</u> Phillip Gilmore 870-304-9296 home 501-454-8576 cell	<u>Ancillary Services</u> Ronnie Dillion 853-5176 500-3104	<u>Patient Services</u> Emily Bendinelli 870-831-9785	<u>Business Office Manager</u> Vonda Russell 870-460-5208	<u>Physicians:</u> Dr. Jim Brown 910-282-7980 Dr. L. Garcia 853-4152 Dr. Gresham 364-4781 Dr. Malloy 364-3133 Dr. Felicia Brown 618-541-9238 Dr. Richards 415-8341 Dr. Thompson 364-9217 Dr. Ben Walsh 364-2671 Dr. Brad Walsh 500-8302 Dr. Wilson 364-4013 Dr. Skip MacDonald 870-814-6060 Dr. Ira Murphy 870-364-3800
ENGINEERING Jimmy Stell 853-5263 cell 500-1091	RADIOLOGY Ronnie Dillion 853-5176 500-3104	ER Manager Ramona Hill 870-222-8941	EMERGENCY DEPT ADMISSIONS Nicole Jeffers 870-723-7391 870-723-5087	
SAFETY OFFICER Jimmy Stell cell 500-1091	LABORATORY Brenda Perritt 500-5118	INFECTION CONTROL Julie Keeth 364-2637 cell 500-5048	HEALTH INFORMATION Kayla Hill 318-823-4242 cell: 870-304-6688	
CHIEF OF STAFF Dr. Mark Malloy 364-9111 cell: 501-912-3924	PHARMACY Dawn Burchfield 870-500-1814	SOCIAL SERVICES Jamie Ables 318-512-9323	MATERIALS MANAGEMENT Sharon Burnett 415-7812 500-1171	Clinics Pam Stell 870-853-6589
HUMAN RESOURCES Shirley White 853-5298 cell: 870-853-6906	PHYSICAL THERAPY Kathy Launius 364-6226	GENERATIONS Ginger Stewart cell: 500-4366	HOUSEKEEPING Paul Zander cell 304-7776	ANESTHESIA Greg Rabalais home: 304-2543 cell: 500-3400
MARKETING Caitlin Martin 870-831-9010	RESPIRATORY THERAPY Jennifer Hines 870-866-8816	Ashley IOP Ginger Stewart cell: 500-4366		
RISK MANAGER Donna White 364-8531	DIETARY Jennifer Curry 870-723-5546	HOME HEALTH Tammy Carter cell: 500-0761	IT Travis Meeks 870-500-8662	Warren Gouner cell 870-500-3808

GOVERNING BOARD

Medical Staff

CEO Phillip Gilmore

Exec. Asst
Deanna Foster

CEO
Phillip Gilmore

Anesthesia
Rabalais/Gouner

Purchasing
Sharon Burnett

Generations / IOP
Ginger Stewart

Generations Manager
Sandra Dorman

HOME HEALTH/
PERSONAL CARE
Tammy Carter

Engineering
Jimmy Stell

Maintenance

Security

Grounds

Safety Officer
Jimmy Stell

Housekeeping
Paul Zander

Bio Med
Justin Burt

Human Resources
Shirley White

Accounting

Payroll
Donna McKenzie

Dietitian
Donna Sasser

Dietary
Jennifer Curry

Wellness Center
Macy Gibson

Accts. Payable
Kelly Melanson

Accounting Asst
Linda Hatch

BUS OFF / REV CYCLE
Vonda Russell

Medical Rec.
Privacy Officer
Kayla Hill

Financial Counseling
And Admissions
Nicole Jeffers

BUSINESS OFFICE
Insurance
Denial Management

PRE-REG COORD
Carol Murphy

Phy. Clinics
Pam Stell

Ashley Health
Services

Ashley Specialty
& OP Clinics

Ashley Specialty
Dr. Wilson's Office
Dr. Macdonald-Ortho

Hamburg Clinic

Ancillary Services
Ronnie Dillon

Radiology
Ronnie Dillon

Laboratory
Brenda Perritt

Pharmacy
Dawn Burchfield

Physical Therapy
Kathy Launus

Occup. Therapy
Cathy Smith

Resp. Therapy
Jennifer Hines

Inf. Mgmt. Service
Security Officer
Travis Meeks

Speech Therapy
Monica Richards

Patient Services
Emily Bendinelli

Surgery
Greg Ballard

MED SURG 2nd floor
Julie Keeth

Inf. Control
Julie Keeth

Education/Marketing
Shawna Hawkins

Utili. Rev
Ashley Whitaker

ER CCU/ICU
Ramona Hill

Obstetrics
Laurie Kilcrease

NURSERY
Amanda Autenreath

Social Services
Jamie Ables

Compliance/Q/IRM
Donna White

Marketing
Caitlyn Mart

Phillip K. Gilmore

Phillip K. Gilmore
Chief Executive Officer

2-7-17

DATE

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Emergency Phone Numbers

FILING NUMBER:
EMG 1.50

EFFECTIVE DATE:
March 2013

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

Phone Numbers Possibly Needed in an Emergency Situation:

Crossett Police Department 364-4131
Crossett Fire Department 364-2121
Crossett Ambulance Service..... 364-2121
South Ark Ambulance Service..... (870)-853-8033
Medical Center of South Arkansas..... (870)-864-3200
St. Francis Medical Center (Monroe, LA)..... (318)-327-4196
Morehouse General Hospital (Bastrop, LA) (318)-283-3609
Bradley County Hospital (870)-226-3731
Drew Memorial Hospital..... (870)-367-2411
Chicot Memorial Hospital..... (870)-256-5351
Arkansas Children’s Hospital, Little Rock, AR..... (501)-370-1100

Air Evac..... 800-247-3822
Pafford Air One..... 800-435-7663
Angel Flight 800-372-3637
Baptist Med Flight..... 800-227-1000
or 800-632-5433

Ashley County OEM (Office of Emergency Management)....day (870)-853-2004
(501)-661-2136

Ashley County Emergency Coordinator (Tawana Miller)..... 870-940-0342

National Guard 364-2023
Sheriff’s office..... (870)-853-2040
Ashley County Judge..... (870)-853-2000
FBI Field office..... (501)-221-9100
Arkansas Department of Emergency Management..... (870)-853-2070
Local Red Cross Coordinator.....(870)-863-8196
..... Or Sandy Matheney, Chapter Director (cell) (870)-866-5243
North Crossett Gas and Water..... 364-2188

Ashley County Health Department..... 364-2115
(870)-500-2630

Arkansas State Health Department..... (501)-661-2417
CDC Hospital Infections Program (404)-639-6413
Arkansas Bioterrorism Response Line (501)-280-4817
After hours and weekends 800-554-5738
Bioterrorism Emergency Number..... (770)-488-7100
Arkansas Hospital Association..... (501)-224-7878

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Media Coverage in Emergency Situations

FILING NUMBER:
EMG 2.00-1

EFFECTIVE DATE:
October 2003

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

NO INFORMATION concerning patients or the hospital shall be released during any emergency situations without permission of the hospital CEO or his designee.

- During disasters, general information will be released when possible to help reduce undue anxiety. (e.g., the number of patients by age group or gender who have been brought to the facility.)
- Before information about a specific patient is released to the media, the patient's wishes regarding listing in the hospital's directory will be verified with the Health Information Department, or Nursing.
- If the patient has been unable to state his preference as to listing in the directory due to his medical condition, he/she will not be listed and no personally identifiable information will be released to individuals or the media. Family members may not consent to this, except that a parent may consent for a minor. Personally identifiable patient information will not be released to the media in disaster situations before next of kin is notified.
- If the patient has not requested that information be withheld, the patient's location and one-word condition may be released. No information will be released that might embarrass or endanger the patient.
- Inquiries from the media must contain the patient's name, but inquiries from clergy need not contain the patient's name.

Definition of Patient Conditions:

- **Undetermined:** patient awaiting physician assessment
- **Good:** Vital signs are stable and within normal limits. Patient is conscious and comfortable. Indicators are excellent.
- **Fair:** Vital signs are stable and within normal limits. Patient is conscious, but may be uncomfortable. Indicators are favorable.
- **Serious:** Vital signs may be unstable and not within normal limits. Patient is acutely ill. Indicators are questionable.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Media Coverage in Emergency Situations

FILING NUMBER:
2.00-2

EFFECTIVE DATE:
October 2003

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

- **Critical:** Vital signs are unstable and not within normal limits. Patient may be unconscious. Indicators are unfavorable.
- The term “**stable**” should not be used in reporting a patient’s condition to the media.
- The following media activities require written authorization from the patient:
 - ❖ Drafting a detailed statement for approval by the patient or the patient’s legal representative.
 - ❖ Taking photographs of patients.
 - ❖ Interviewing patients
- A representative of the Ashley County Medical Center will accompany the media at all times while they are in the hospital. Access to any area of ACMC may be denied to the media if the need arises.
- No information will be released regarding a patient who is being treated for a psychiatric problem, alcohol or substance abuse.
- In matters of public record, news media calls will be directed to the appropriate public authority.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Evacuation Plan

FILING NUMBER:

3.00

EFFECTIVE DATE:

October 2010

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

In the event that evacuation of part of the building or all of the building is ordered or necessary, follow the evacuation procedures listed below.

1. The decision to evacuate the Hospital will be given from one of the following persons:

ACMC Administrator
Director of Nursing
Maintenance Engineer
Crossett Fire Department
Shift Charge Nurse
2. Switchboard Operator will announce "**Code Black**" 4 times over the PA System.
3. First choice of evacuation will be to Ashley Health Services. If that location is not safe or not possible, evacuation will be to First Baptist Multi-Ministry Center, or other location.
4. Switchboard will notify Ashley Health Services office staff or First Baptist of the evacuation.

Ext. 500 (Ashley Health Services)
(870)-364-4167 (First Baptist)
(870)-304-3182 (First Baptist after hours and weekends)
(870)-364-4166 (First Baptist Multi-Ministry Center)
5. Persons evacuated will be transferred to Ashley Health Services or to First Baptist for assembly and evaluation, until transfer arrangements can be made.

***In the event of the hospital being evacuated, the Communication Center will then be located at Ashley Health Services or First Baptist.

***Evacuation exits according to Zone # are included within this Emergency Preparedness Manual.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

FILING NUMBER:

Fire Zone Locations and Evacuation Exits

4.00-1

EFFECTIVE DATE:

March 2011

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

ZONE 1

Administration
Admissions
Financial Counseling
Dr. Wilson's Office
Gift Shop
Laboratory
Out-Patient Clinic
Physical Therapy
Respiratory Therapy
Payroll

ZONE 1 WILL EXIT THROUGH THE MAIN ENTRANCE

ZONE 2

Anesthesia
Office outside ER
Emergency Department
Endoscopy
Operating Rooms
Pharmacy
Radiology
Recovery Room
Sterile Central Supply

Anesthesia, Operating Rooms and Recovery Room:

WILL EXIT THROUGH THE AMBULATORY SURGERY DEPARTMENT DOOR, EAST STAFF ENTRANCE, OR ER AMBULATORY ENTRANCE.

Emergency Department:

WILL EXIT THROUGH THE AMBULATORY EMERGENCY ENTRANCE OR THE AMBULANCE ENTRANCE

Endoscopy:

WILL EXIT THROUGH THE AMBULATORY EMERGENCY ENTRANCE OR THE RADIOLOGY DEPARTMENT DOOR.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Fire Zone Locations and Evacuation Exits

FILING NUMBER:
4.00-2

EFFECTIVE DATE:
March 2011

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

Pharmacy:

WILL EXIT THROUGH THE AMBULATORY SURGERY DEPARTMENT DOOR OR
THE EAST STAFF ENTRANCE.

Sterile Central Supply:

WILL EXIT THROUGH THE AMBULATORY EMERGENCY ENTRANCE.

Radiology:

WILL EXIT THROUGH THE RADIOLOGY DEPARTMENT DOOR.

ZONE 3

Chapel
SCU
SCU Waiting Area
Social Services

ZONE 3 WILL EXIT THROUGH THE STAFF ENTRANCE DOOR NEAR SCU.

ZONE 4

Dietary
Dining Room
Conference Room
Generations
Health Information
Restrooms (Men and Women)
Vending Area

ZONE 4 WILL EXIT THROUGH THE WEST DOOR. DINING ROOM AND CONFERENCE
ROOM WILL EXIT CONFERENCE ROOM DOOR TO OUTSIDE.

ZONE 5

Labor and Delivery Rooms
Nursery
Patient Rooms #208 -225

ZONE 5 WILL EXIT DOWN THE EAST STAIRWELL.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Fire Zone Locations and Evacuation Exits

FILING NUMBER:
4.00-3

EFFECTIVE DATE:
March 2011

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

ZONE 6 Classroom
Mechanical/Electrical Room
Infection Control
Nurse Manager
Patient Rooms #201 – 207
Staffing Coordinator
Utilization Review

ZONE 6 WILL EXIT DOWN THE WEST STAIRWELL.

ZONE 7 East Penthouse
ZONE 8 West Penthouse
ZONES 7 AND 8 WILL EXIT DOWN THE WEST STAIRWELL

ZONE 9 Engineering
Orthopaedics
Housekeeping
Materials Management
Information Management Systems
EACH DEPARTMENT IN ZONE 9 WILL EXIT THROUGH THEIR OWN DEPARTMENTAL DOORS.

ASHLEY HEALTH SERVICES HAS 4 EXITS, AND EMPLOYEES AND PATIENTS WILL EVACUATE THROUGH THE NEAREST EXIT AND ASSEMBLE OUTSIDE IN FRONT OF THE BUILDING.

ACMC FAMILY HOME HEALTH HAS 2 EXITS, AND EMPLOYEES AND VISITORS WILL EVACUATE THROUGH THE NEAREST EXIT AND ASSEMBLE OUTSIDE IN FRONT OF THE BUILDING.

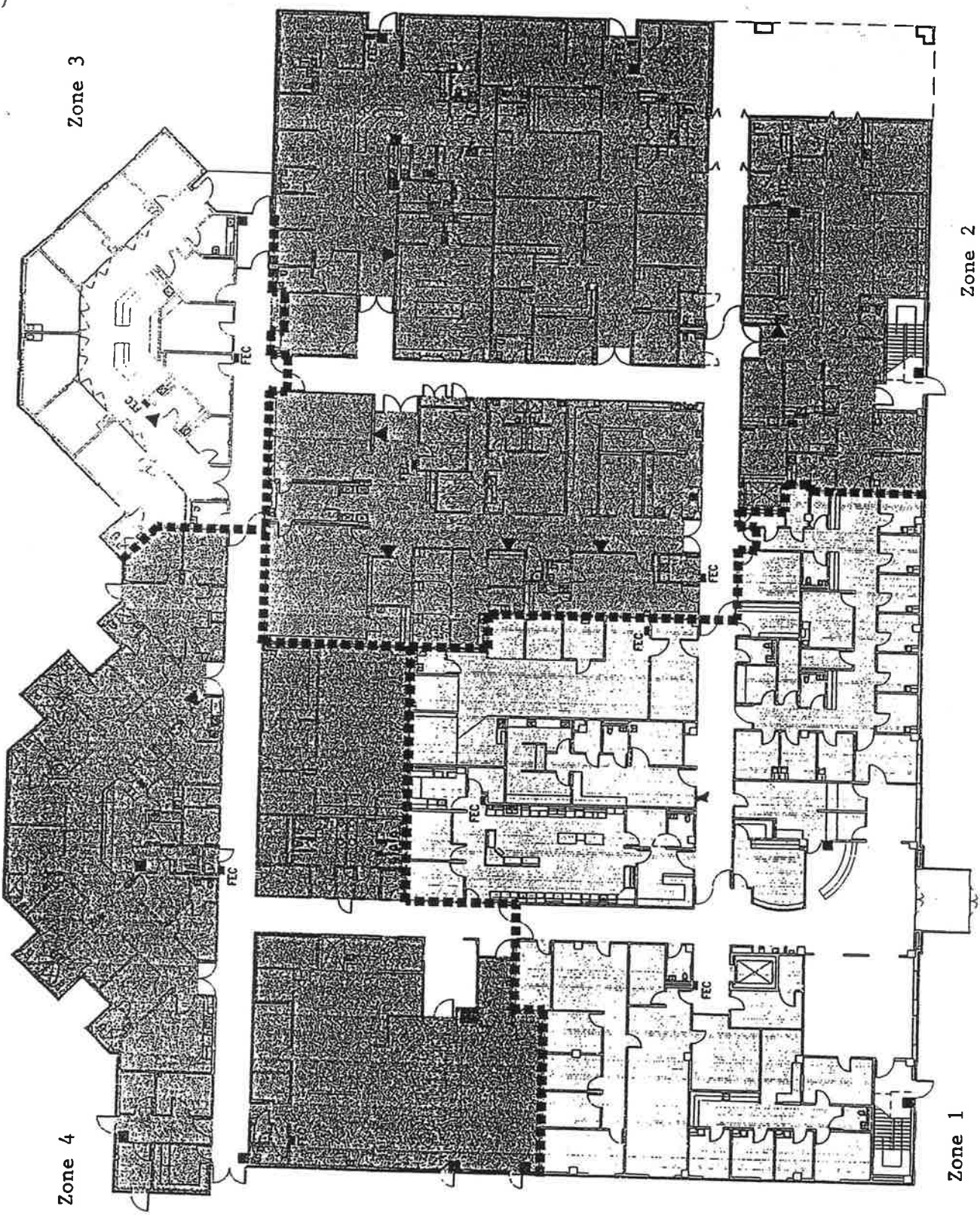
THE ACCOUNTING DEPARTMENT HAS 2 EXITS, AND EMPLOYEES AND VISITORS WILL EVACUATE THROUGH THE NEAREST EXIT AND ASSEMBLE OUTSIDE IN FRONT OF THE BUILDING.

Zone 3

Zone 4

Zone 2

Zone 1

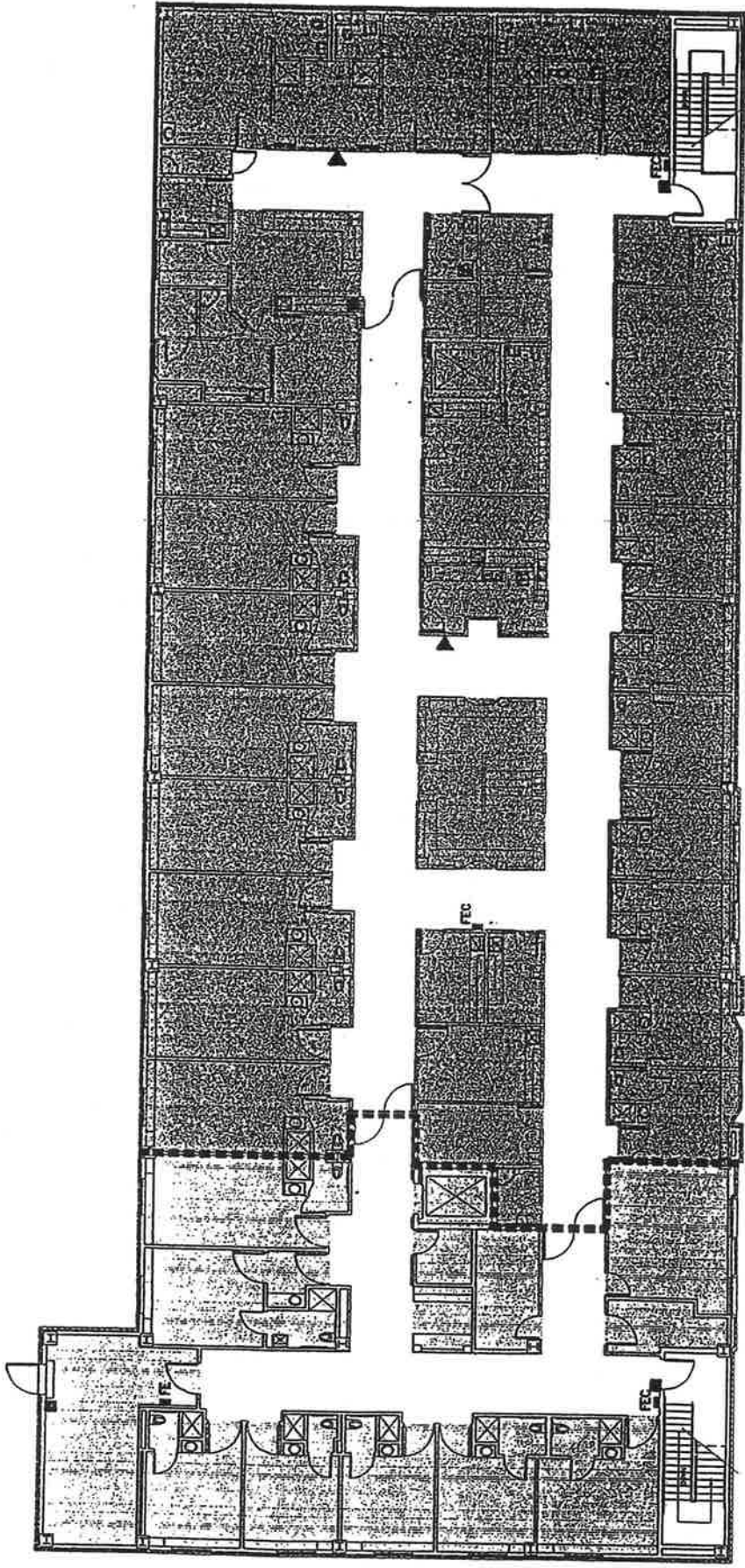


■ FIRE EXTINGUISHER

■ PULL STATION

◀ O, SHUT OFF

FIRST FLOOR PLAN



Zone 6

Zone 5

■ FIRE EXTINGUISHER

■ PULL STATION

SECOND FLOOR PLAN

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Locations of Fire Extinguishers

FILING NUMBER:
4.02-1

EFFECTIVE DATE:
January 2017

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

<u>NUMBER</u>	<u>LOCATION</u>	<u>ZONE</u>
1	Across from Elevator #1	1
2	Lab, South Wall by Microbiology	
3	South Wall of Physical Therapy Gym	
4	North Wall by Endoscopy	2
5	South Wall of O.R. by East Entrance	
6	O.P. Surgery, East Wall by Exit Door	
7	Radiology, East Wall by Exit Door	
8	Emergency Department, West Wall by the East Entrance	
9	Outside Chapel	3
10	Intensive Care	
11	Kitchen, North Wall	4
12	Beside the West Exit, South Wall	
13	North Wall near West entrance to Generations	
14	Generations	
15	West Wall across from Nursing Station	5
16	Inside Electrical Room	
17	Beside East Stairwell	
18	Beside West Stairwell	6
19	Inside Mechanical Room	
20	East Penthouse, inside the Entrance	7
21	West Penthouse, inside the Entrance	8
22	IMS Office Storage Room East Wall by Entrance	9
23	Central Supply, East Wall by Entrance	
24	Engineering Shop, West Wall by Entrance	
25	Engineering Office	
26	Boiler Room, East Wall Main Entrance	
27	Orthopaedics	9

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Locations of Fire Extinguishers

FILING NUMBER:
4.02-2

EFFECTIVE DATE:
January 2017

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

- 28 Ground Storage
- 29 Ground Storage
- 30 Ashley Health Services, near Dr. Brown's office, south end of west hall.
- 31 Ashley Health Services, near Dr. Richards' office, south end of the hall.
- 32 Ashley IOP, in rear of building outside Director's office

There is 1 fire extinguisher located at 313 North Alabama
Wellness Center has 4 fire extinguishers.

ACMC Family Home Health has 1 fire extinguisher located outside the storeroom.
IOP/Accounting building on Ray Lochala Road has fire extinguishers.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Oxygen Shut-Off Locations

FILING NUMBER:
4.03

EFFECTIVE DATE:
July 2005

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

MAIN

Engineering Department

2nd Floor

East Wall across from the Nursing Station

SUBS

North Wall by Respiratory Therapy
East Wall by West Entrance to Emergency Department
West Wall by the Endoscopy Door
West Wall by the Recovery Room Door
West Wall by Operating Room #1
North Wall by Operating Room #2
South Wall of Out-patient Surgery
South Wall of ICU by Utilization Review Office
South Wall of Generations by the East Exit
East Wall between the L&D Suites

2nd Floor

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Employee Discovering a Fire or Sign of Fire

FILING NUMBER:

4.10

EFFECTIVE DATE:

July 2005

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

***ALL FIRE DRILLS WILL BE REGARDED AS ACTUAL FIRES.**

- Remove patients, visitors from immediate danger.
- Close all doors to confine fire to immediate area.
- Activate nearest fire alarm. (Pull lever down on nearest fire alarm box.)
- Notify Switchboard of **CODE RED**, give zone, type of fire and approximate size.
- If you determine size of fire controllable, and you have a way of escape, reenter area with fire extinguisher, pull pin to activate, point at base of fire while standing 8-10 feet away and attempt to extinguish fire.
- If you determine fire not controllable, remain in safe area and wait for Fire Department assistance.
- When fire alarm is activated, the elevator will automatically go to the opposite floor that the fire is located, if it is that zone. Otherwise it will go to the bottom floor.
- If the fire alarm goes off, the elevator can only be activated by a key. The Fire Department, Engineering, and Security have a key.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Special Assignments for Managing Fire or Suspected Fire

FILING NUMBER:
4.20

EFFECTIVE DATE:
July 2005

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

STATEMENT OF PURPOSE: To establish special assignments in case of fire or suspected fire.

A. Fire Marshall

The Fire Marshall is the Engineering Department Supervisor or Nursing Supervisor on duty.

Duties of the Fire Marshall:

- Goes to the fire site at once and takes charge of all activities there.
- Assigns a person to meet Fire Department personnel and directs them to fire site.
- Transfers duties to Fire Chief when appropriate. Remains at site to assist Fire Chief as necessary concerning building safety.
- In consultation with Fire Chief, may activate Evacuation. May authorize evacuation of hospital areas.
- Reports to switchboard when fire has been extinguished.
- Requests page all clear after conferring with Engineering personnel.
- Conducts the required fire drills monthly.

B. Nursing Supervisor

Duties of Nursing Supervisor:

- Goes to alarm site at once.
- Assess effect of fire emergency on patient safety. Takes appropriate actions to assure patient safety, including shutoff of gases.
- When the Fire Chief and Fire Director determine it is necessary, the Nursing Supervisor may authorize evacuation of hospital areas.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

General Employee Duties in a Fire

FILING NUMBER:

4.30-1

EFFECTIVE DATE:

July 2005

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

Besides flames and heat, fire creates two other dangers: Smoke and Panic. It is important for every hospital employee to know exactly what to do in case of fire. There must be no panic. Your actions in the first few minutes can make the difference between a minor disturbance and a major tragedy. All actions must be orderly. This will protect patients, visitors, and fellow staff members.

YOU MUST KNOW

- 1) This fire plan.
- 2) Where a complete copy of this Fire Plan is kept in your work area. (In the Red Emergency Procedure Manual in each department.
- 3) Location of smoke detectors or remote alarm lamps in your working area and the location of all Fire Pull Boxes and fire equipment in your working area. Know how to use this equipment.
- 4) Location of any combustible materials in your area.
- 5) Location of all exits from your work area.
- 6) The hospital code for fire is CODE RED. Never say "fire". This causes panic. Always use CODE RED even if you have to call for help. Call "CODE RED."

IF YOU HEAR A CODE RED ALARM:

- 1) Close all doors to keep out smoke.
- 2) Do not transport patients. If you are transporting a patient, take the patient to the nearest supervised enclosure. If providing patient care, one employee stays with the patient; another verifies actual fire or drill.
- 3) Do not use phone except to report an emergency.
- 4) Obey supervisor's instructions.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
General Employee Duties in a Fire

FILING NUMBER:
4.30-2

EFFECTIVE DATE:
July 2005

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

FIRE ALARM BOXES

There are red fire alarm boxes in each zone throughout the hospital. They are in corridors and at exits. Know the location of alarm boxes in your area.

To operate a fire alarm box, put one or two fingers in the hole in front of the pull box, and pull lever out and down.

EXTINGUISHERS

Know the location of extinguishers in your area. Know how to use this equipment.

TRAFFIC

Do not travel through fire zone doors during a Code Red alarm without specific orders from your supervisor. A patient in transport is to be taken to the nearest supervised enclosed area.

Employees who are in another area of the hospital other than their own should follow procedure for the department they are in at the time.

EVACUATIONS

Leave the building through designated exits. Senior person in the department or switchboard paging will notify you of action to take.

END OF ALARM

The alarm is ended when this announcement is made over the address system:

CODE RED ALL CLEAR.

ONLY THE FOLLOWING PERSONNEL MAY ORDER THE CANCELLATION OF A FIRE ALARM:

Engineering Personnel
Fire Department

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities/Fire & Evac.

FILING NUMBER:

EMG 4.40

EFFECTIVE DATE:

July 2005

APPLIES TO:

Administration

APPROVED BY:

Safety Committee

1. Direct all visitors in the office to the zone 1 exit.
2. Turn off lights.
3. Close doors.
4. Report to the Zone 1 exit.
5. Obtain department census.
6. If CODE BLACK is called, assist with evacuation of patients through any exit. Report to Alternate Care Site as instructed.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities/Fire & Evac.

FILING NUMBER:

EMG 4.41

EFFECTIVE DATE:

January 2017

APPLIES TO:

Admitting/Financial Counseling

APPROVED BY:

Safety Committee

-
1. Direct all visitors in the office to the Zone 1 exit.
 2. Turn off lights.
 3. Retrieve cash box and carry with you.
 4. Close doors.
 5. Report to the Zone 1 exit.
 6. Obtain department census.
 7. If CODE BLACK is called, assist with the evacuation of patients at the outside exits.
Report to Alternate Care Site as instructed.
 8. Assist with care and treatment of evacuated patients.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities/Fire & Evac.

FILING NUMBER:

EMG 4.42

EFFECTIVE DATE:

January 2017

APPLIES TO:

Accounting Office

APPROVED BY:

Safety Committee

-
1. Direct all visitors in the office to the nearest exit.
 2. Turn off lights.
 3. Close doors.
 4. Report to the nearest exit.
 5. Obtain department census.
 6. Call Crossett Fire Department with cell phones or any available phone.
 7. Notify ACMC Switchboard of Code Red

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Department Specific Responsibilities/Fire & Evac.

FILING NUMBER:
EMG 4.43

EFFECTIVE DATE:
January 2017

APPLIES TO:
Dietary

APPROVED BY:
Safety Committee

1. Direct all visitors in the office to the Zone 4 exit.
2. Turn off lights and unplug any electrical equipment.
3. Close doors.
4. Report to the Zone 4 exit.
5. Obtain department census.
6. If CODE BLACK is called, assist with evacuation of patients through any outside exit. Report to Alternate Care Site as instructed.
7. Assist with care and treatment of evacuated patients.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities/Fire & Evac.

FILING NUMBER:

EMG 4.44

EFFECTIVE DATE:

January 2017

APPLIES TO:

Engineering

APPROVED BY:

Safety Committee

-
1. Direct all visitors in the office to the Zone 9 exit.
 2. Turn off lights.
 3. Close doors.
 4. Check fire alarm panels for exact location.
 5. Report to fire location.
 6. If the fire is in another department, the Engineering Secretary will remain in the department to maintain communication between Engineering employees and the other departments.
 7. Help in removing patients from immediate danger.
 8. Try to control fire with fire extinguisher.
 9. Work with fire department in controlling the fire.
 10. Authorize oxygen shut off, if needed.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Department Specific Responsibilities/Fire & Evac.

FILING NUMBER:
EMG 4.45

EFFECTIVE DATE:
January 2017

APPLIES TO:
Health Information

APPROVED BY:
Safety Committee

1. Direct all visitors in the office to the Zone 4 exit.
2. Obtain evacuation stationary supplies.
3. Print out patient census.
3. Turn off lights.
4. Close doors.
5. Report to the Zone 4 exit.
6. Obtain department census.
7. If CODE BLACK is called, assist with evacuation of patients through outside exits.
Report to Alternate Care Site as instructed.
8. List patients as they arrive at evacuation destination.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities/Fire & Evac.

FILING NUMBER:

EMG 4.46

EFFECTIVE DATE:

January 2017

APPLIES TO:

Ashley IOP

APPROVED BY:

Safety Committee

If there are no patients in the Ashley IOP area when the Code Red is called, staff will assemble outside the building in a safe area and listen for the call for "Code Red clear."

If Code Red is called in any area of the hospital except Zone 9, staff will continue patient care and be on the alert for further instructions from Switchboard or "Code Red clear."

If Code Red is called in Zone 9, staff will assemble patients near the exits, and follow further instructions, either "Code Red clear," or prepare to evacuate.

In the event that evacuation is necessary, this procedure will be followed:

1. Direct all visitors in the office to the Zone 9 exits.
2. Obtain patient log book and records.
3. Turn off lights.
4. Close doors.
5. Report to the Zone 9 exit.
6. Obtain department census.
7. If CODE BLACK is called, assist with evacuation of patients through any outside exit. Report to Alternate Care Site as instructed.
8. Assist with care and treatment of evacuated patients.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities/Fire & Evac.

FILING NUMBER:

EMG 4.47

EFFECTIVE DATE:

January 2017

APPLIES TO:

Housekeeping

APPROVED BY:

Safety Committee

HOUSEKEEPING MAY BE IN ANY AREA OF THE HOSPITAL. ALL PERSONNEL NEED TO KNOW FIRE ZONES AND EXITS FOR EACH AREA.

1. Direct all visitors in the office to the exit.
2. Obtain emergency linen supply.
3. Close doors.
4. Place cleaning carts in closets or areas out of main hallways.
5. Employees should report to appropriate exit for the zone that they are in, or remain on standby as appropriate for that area.
6. Obtain department census.
7. If CODE BLACK is called, assist with evacuation of patients through any outside exit. Report to Alternate Care Site as instructed.
8. Assist with care and treatment of evacuated patients.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities Fire/Evac.

FILING NUMBER:

EMG 4.48

EFFECTIVE DATE:

January 2017

APPLIES TO:

Information Management

APPROVED BY:

Safety Committee

1. Direct all visitors in the office to the Zone 9 exit.
2. Take backup disc for computer.
3. Turn off lights.
4. Close doors.
5. Report to the Zone 9 exit.
6. Obtain department census.
7. If CODE BLACK is called, assist with evacuation of patients through any outside exits. Report to Alternate Care Site as instructed.
8. Assist with care and treatment of evacuated patients.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities Fire/Evac.

FILING NUMBER:

EMG 4.49

EFFECTIVE DATE:

January 2017

APPLIES TO:

Laboratory

APPROVED BY:

Safety Committee

-
1. If alarm sounds, one employee stays in department while another verifies fire or drill.
 2. If evacuation is required, remove all patients and/or visitors from the department through Zone 1 exit.
 3. Turn off lights.
 4. Close doors.
 5. Report to Zone 1 exit.
 6. Obtain department census.
 7. If CODE BLACK is called, assist with evacuation of patients through any outside exit. Report to Alternate Care Site as instructed.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities Fire/Evac.

FILING NUMBER:

EMG 4.50

EFFECTIVE DATE:

January 2017

APPLIES TO:

Materials Management

APPROVED BY:

Safety Committee

1. Direct all visitors in the office to the Zone 9 exit.
2. Turn off lights.
3. Close doors.
4. Report to the Zone 9 exit.
5. Obtain department census.
6. If CODE BLACK is called, assist with evacuation of patients through any outside exit. Report to Alternate Care Site as instructed.
7. Assist with care and treatment of evacuated patients.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities Fire/Evac.

FILING NUMBER:

EMG 4.52-1

EFFECTIVE DATE:

January 2017

APPLIES TO:

Nursing

APPROVED BY:

Safety Committee

Charge Nurse

1. Obtain forms for paper charting and physician 24 hour summary. Check census, location and condition of patients in your assigned area.
2. Alert employees if evacuation is necessary.
3. Assist with evacuation of patients.
4. Function as Triage Officer, if patient injuries or emergency condition exists.
5. Summon Physicians and/or extra Nursing Personnel.
Activate the Nursing Service Cascade Call System
6. Arrange for transfer of patients through:
Crossett Ambulance Service (Crossett Fire Department)
FAST Ambulance Service
Private car transportation
7. If CODE BLACK is called, report to Alternate Care Site.
8. The IT Department will assist with accessing electronic record information.

Staff Registered Nurse/Licensed Practical Nurse

1. Upon order of Engineering Department, shut off oxygen valves.
2. Assist with evacuation of patients.
3. Report to Charge Nurse for further instructions.
4. Obtain count and condition of hospital Nursing employees, and report this to Charge Nurse.
5. Assist in emergency patient care.
6. If CODE BLACK is called, report to Alternate Care Site as instructed.
7. Document transfer information in patient records.

Nurse Techs/Student Nurses

1. Report to assigned area.
2. Close all doors.
3. Assist with evacuation of patients.
4. If CODE BLACK is called, report to Alternate Care Site as instructed.
5. Assist with care of assigned patients.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities Fire/Evac.

FILING NUMBER:

EMG 4.52-2

EFFECTIVE DATE:

January 2017

APPLIES TO:

Nursing

APPROVED BY:

Safety Committee

Unit Clerks

1. Report to assigned area.
 2. Monitor telephone calls and patient intercom calls.
 3. Be prepared to assist Charge Nurse.
 4. If evacuation is ordered/necessary, direct the removal of forms for paper patient charts on assigned unit.
 5. Report to Alternate Care Site as instructed.
 6. Assist with transfer documentation and be available to use the telephone for public notification and communication.
-

If CODE RED is in another zone, and evacuation is not called:

1. Close all doors.
2. Turn off electrical equipment that is not necessary for patient care.
3. Remain on standby for further instructions.
4. Do not go through smoke doors, except as is essential for patient care.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities Fire/Evac.

FILING NUMBER:

EMG 4.55

EFFECTIVE DATE:

January 2017

APPLIES TO:

Pharmacy

APPROVED BY:

Safety Committee

-
1. Direct all visitors in the office to the Zone 2 exit.
 2. Obtain Pharmacy copies of physician orders.
 3. Turn off lights.
 4. Close doors.
 5. Report to the Zone 2 exit.
 6. Obtain department census.
 7. If CODE BLACK is called, report to Alternate Care Site as instructed.
 8. Obtain necessary medications from retail pharmacies to administer to evacuated patients.

In the event that CODE RED is called in another department, one employee will stay in the Pharmacy in the event that medication records may need to be printed before total evacuation; the other employees will report to the Zone 2 exit.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities Fire/Evac.

FILING NUMBER:

EMG 4.56

EFFECTIVE DATE:

January 2017

APPLIES TO:

Physical Therapy

APPROVED BY:

Safety Committee

-
1. Remove/Direct/Assist all patients and/or visitors in the department to the Zone 1 exit.
 2. Turn off lights.
 3. Close doors.
 4. Obtain department census.
 5. If CODE BLACK is called, assist with evacuation of patients through Zone 1 exit.
Report to Alternate Care Site as instructed.
 6. Assist with care and treatment of evacuated patients.

If CODE RED is called for another Zone of the hospital, one employee will stay with patients, and another will check the hallway to verify if it is a drill or actual fire.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities Fire/Evac.

FILING NUMBER:

EMG 4.57

EFFECTIVE DATE:

January 2017

APPLIES TO:

Radiology

APPROVED BY:

Safety Committee

-
1. Remove/Direct/Assist all patients and/or visitors in the department to the Zone 2 exit.
 2. Obtain the X-ray wheelchair.
 3. Turn off lights.
 4. Close doors.
 5. Obtain department census.
 6. If CODE BLACK is called, assist with evacuation of patients through Zone 2 exit. Report to Alternate Care Site as instructed.
 7. Assist with care and treatment of evacuated patients.
-

If CODE RED is called in another zone, one employee will stay with the patient, and another employee will check the hallway to determine if it is a drill or actual fire.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities Fire/Evac.

FILING NUMBER:

EMG 4.58

EFFECTIVE DATE:

January 2017

APPLIES TO:

Respiratory Therapy

APPROVED BY:

Safety Committee

-
1. Remove/Direct/Assist all patients and/or visitors in the department to the Zone 1 exit.
 2. Obtain emergency respiratory therapy supplies.
 3. Close doors.
 4. Obtain portable oxygen tanks.
 5. Obtain department census.
 6. If CODE BLACK is called, report to Alternate Care Site as instructed.
 7. Prepare oxygen equipment for administration to patients requiring it.
 8. Assist with care and treatment of evacuated patients.
-

If CODE RED is called in another zone, one employee will stay with the patient, and another employee will check the hallway to verify if it is a drill or actual fire.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities Fire/Evac.

FILING NUMBER:

EMG 4.59

EFFECTIVE DATE:

January 2017

APPLIES TO:

Social Services

APPROVED BY:

Safety Committee

-
1. Direct all visitors in the office to the Zone 4 exit.
 2. Turn off lights.
 3. Close doors.
 4. Report to the Zone 4 exit.
 5. Obtain department census.
 6. If CODE BLACK is called, assist with evacuation of patients through any outside exit. Report to Alternate Care Site as instructed.
 7. Assist with care and treatment of evacuated patients.

If CODE RED is called for another zone, remain on standby to assist with patients as needed.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities Fire/Evac.

FILING NUMBER:

EMG 4.60

EFFECTIVE DATE:

January 2017

APPLIES TO:

Switchboard

APPROVED BY:

Safety Committee

-
1. The Switchboard will serve as the communication center for the hospital during a fire or fire drill.
 2. Personnel at the Switchboard will call the Fire Department (364-2121) and give them the following information.
 - A. **WE HAVE A CODE RED**
 - B. **ZONE _____**
 - C. **TYPE OF FIRE (EXAMPLE: CHEMICAL, PAPER, ELECTRICAL, ETC.)**
 - D. **APPROXIMATE SIZE OF FIRE**
 3. Announce **CODE RED and the Zone** four (4) times over the PA system.
 4. Notify the following persons of the above information regarding the fire:
 - A. Engineering on call.
 - B. Engineering Department Manager
 - C. Administrator
 - D. Director of Nursing
 5. Announce **CODE RED CLEAR** when instructed to do so by Engineering.
 6. If instructed to do so, announce **"EVACUATE STAT"** four (4) times over the PA system.
 7. Obtain cash box.
 8. Turn off lights.
 9. Close doors.
 10. Report to the Zone 2 exit.
 11. Report to Ashley Health Services or First Baptist Multi Ministries Center as instructed.
 12. Be prepared to serve as operator there.

ALL FIRE DRILLS WILL BE REGARDED AS ACTUAL FIRES

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities Fire/Evac.

FILING NUMBER:

EMG 4.61

EFFECTIVE DATE:

January 2017

APPLIES TO:

Utilization Review

APPROVED BY:

Safety Committee

-
1. Direct all visitors in the office to the Zone 5 exit.
 2. Turn off lights.
 3. Close doors.
 4. Report to the Zone 5 exit.
 5. Obtain department census.
 6. If CODE BLACK is called, assist with evacuation of patients through any outside exit. Report to Alternate Care Site as instructed.
 7. Assist with care and treatment of evacuated patients.

If the Utilization Review nurse is in any patient care area of the hospital, he/she will remain on standby to assist with patients in that area until further instructions are given.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Department Specific Responsibilities Fire/Evac.

FILING NUMBER:

EMG 4.62

EFFECTIVE DATE:

March 2011

APPLIES TO:

Home Health

APPROVED BY:

Safety Committee

-
1. Direct all visitors in the office to either exit.
 2. Obtain patient log book.
 2. Turn off lights.
 3. Close doors.
 4. Report to either exit.
 5. Obtain department census.
 6. Assemble in front of the building.
 7. Notify Crossett Fire Department (911) via cell phone or by going to a nearby business.
 8. Notify Administration.
-

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Interruption of Vital Services – Electricity

FILING NUMBER:

EMG 5.00

EFFECTIVE DATE:

November 2007

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

Services or supplies vital to the normal function of the hospital may be interrupted for a short or extended time.

Person discovering situation:

Report discovery to switchboard operator.

Switchboard Operator:

1. Notify engineering if outage occurs during normal business hours.
2. After hours notify security.
3. Security will notify engineering on call.
4. Notify Entergy (1-800-968-8243). Determine, if possible, the approximate time until service is restored.
5. Notify Administrator or Administrator on call.
6. Notify all departments when service is restored.

Engineering:

1. Make sure emergency generator plant is functioning properly.
2. Notify Entergy (1-800-968-8243), and determine length of time of outage. Have Switchboard announce to departments.
3. Director of Engineering, or in his absence, Lead Engineering Mechanic, will determine if additional fuel is needed for electrical generating plant.
4. Notify all departments when service is restored.
5. After service is restored, check proper operation of the following:
 - Ventilating systems
 - Boilers
 - Vacuum pumps, etc.
 - Pneumatic air compressors
 - Air conditioning systems

Administrator or Administrator On Call:

1. Evaluate the situation
 2. If the electricity is off for an extended time, make plans and give instructions.
-

In the event of power outage in Home Health, Accounting or Wellness Center, staff will notify Entergy at 1-800-968-8243, and also notify Administration.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Interruption of Vital Services – Water

FILING NUMBER:

EMG 5.10-1

EFFECTIVE DATE:

November 2007

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

Services or supplies vital to the normal function of the hospital may be interrupted for a short or extended time.

Person discovering situation:

Report discovery to Switchboard.

Switchboard Operator:

1. Notify maintenance if outage occurs during normal business hours.
2. After hours notify security.
3. Security will notify maintenance on call.
4. Notify Administrator or Administrator on call.
5. Notify all departments when service is restored.

Engineering:

1. If possible, make repairs.
2. Call additional maintenance personnel as needed.

Clinical Coordinator:

Notify nursing units and departments to use only what is absolutely necessary.

Engineering:

1. Evaluate the situation.
2. Arrange for repairs as necessary.
3. Notify Crossett Water Commission (364-4191), and get approximate time that water supply will be restored.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Interruption of Vital Services - Water

FILING NUMBER:
EMG 5.10-2

EFFECTIVE DATE:
November 2007

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

4. Procure bottled water from Brookshires (364-2511) and Wal Mart (364-2165). Immediate supplies of drinking water will be sterile irrigating water on Med/Surgery carts.
5. Use ACMC's emergency water pumps for flushing toilets, vacuum pump and medical air system. This water is not suitable for drinking or cleaning.
6. Check vacuum pumps, medical air and notify surgery.
7. If local suppliers cannot supply an adequate amount of drinking water, notify Borden Dairy in Monroe, Louisiana. Borden Dairy has agreed to supply water suitable for drinking.
8. Notify Switchboard when water service is restored.

Switchboard:

Announce to departments over PA system when service is restored.

In the event of water outage in Home Health, Accounting, or Wellness Center, staff will notify Crossett Water Commission at 364-4195, and also Administration.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Interruption of Vital Services – Telephone

FILING NUMBER:

EMG 5.20-1

EFFECTIVE DATE:

March 2011

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

Services vital to normal function of the hospital may be interrupted for a short or extended time.

Person discovering situation:

Report discovery to Switchboard operator.

Switchboard Operator:

1. Notify IMS Manager or IMS on call
2. Announce over PA system to use cell phones until service is restored.
3. Contact KAGH (364-2181) and QLite (364-4700) if down time will be long term.
4. Once advised by IMS Manager, announce over PA system when service is restored.

IMS Department:

1. Notify IMS Manager if not already notified.
2. Contact Windstream if needed.
3. Contact Administrator on Call if down time will be long term.
4. Contact Switchboard and Administrator on Call when service is restored.

All Departments:

1. Eight hand-held radios will be available in various departments for use in house. Each department is responsible for making sure that the battery is kept charged. These will be kept in the following areas: ER, CEO's office, Chief Nursing Officer's office, IMS Manager's office, Materials Management, and three in Engineering.
2. One satellite phone is kept in the CEO's office for making outside calls if the failure is outside the hospital. The satellite phone must be used outside the building until an antenna is obtained.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Interruption of Vital Services – Telephone

EFFECTIVE DATE:

March 2011

APPLIES TO:

All Departments

FILING NUMBER:

EMG 5.20-2

APPROVED BY:

Safety Committee

3. A HAM radio that is located in the Command Center may also be used.
4. In the event of failure of telephone service at Home Health, Accounting, or Wellness Center, staff will notify Windstream at 800-782-6206, and also notify Administration.
5. If cell phones are functioning at the time, employees' cell phones may be used for hospital business.
6. In addition to cell phones, employees' satellite phones in vehicles may be used as employees make them available.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Internal Disaster

FILING NUMBER:

EMG 6.00-1

EFFECTIVE DATE:

July 2005

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

This plan provides basic guidelines and responsibilities in preparation for action to protect persons from injury and property from damage by an internal disaster which may strike or threaten the hospital.

NOTE: The provisions contained in this section are based on the assumption that the number of casualties involved would not reach major proportions. In the event that the emergency situation is of major proportions, provisions of the Mass Casualty Plan shall apply.

ORDER OF SUCCESSION:

Administrator
Chief Nursing Officer
Duty Supervisor, Nursing Units
Director of Engineering
Safety Officer

An individual in order of succession will assume control and direction of the hospital until relieved by someone senior to them in the order listed above.

DISASTER CONTROL CENTER:

- A. The Control Center is the hub of the hospital emergency organization and will provide the leadership essential to an orderly execution of an emergency.
- B. Location: Board Room inside Administration
Alternate Location: Conference Room
- C. The senior official in the order of succession who is available will, upon notification of a disaster or an impending disaster, activate the Control Center in the appropriate location. They will direct the Hospital Activities in response to the emergency as outlined in this plan.

NOTIFICATION OF PERSONNEL:

- A. In case of failure of telephone system, employees will be used as runners.
- B. Telephone Notification:

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Internal Disaster

FILING NUMBER:

EMG 6.00-2

EFFECTIVE DATE:

July 2005

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

-
1. Notification of the disaster will be given to the telephone operator immediately by a person on site.
 2. The Operator will immediately advise the Administrator or his designee.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Kidnapping (CODE PINK)

FILING NUMBER:
EMG 6.10-1

EFFECTIVE DATE:
March 2013

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

PURPOSE:

To provide a rapid, organized and thorough response to a suspected or actual infant/child abduction.

POLICY:

An infant/child abduction will be identified by the phrase "CODE PINK." Code Pink may apply to a pediatric patient in any area of the hospital. All Ashley County Medical Center personnel and volunteers will be prepared to assist in a search and possible recovery of an abducted infant or child.

PROCEDURE:

1. All personnel/volunteers are responsible to be familiar with Ashley County Medical Center's Infant Abduction Response Plan as it applies to their area.
2. An employee/volunteer who suspects that an infant or child has been abducted or missing shall immediately dial "Feature 63" on the phone, then press "All" and page overhead, "Attention please. We are under Code Pink status. Please, no one leave the building." The employee will then immediately assist in the search for the missing infant.
3. Upon hearing that a "Code Pink" has been called, the communications Operator will announce "Code Pink" on the public address system, and repeat as above.
4. Personnel/volunteers having specific "Code Pink" assignments will respond as outlined on the following page, and all exits will be closed.
5. If the patient was abducted from the Nursery, the OB staff shall notify the mother's and baby's attending physician and/or physician on call, and the Chief Nursing Officer. If the abduction occurs on another unit, the Charge Nurse will be responsible for notification.
6. The Chief Nursing Officer will consult with the Security Department and responding law enforcement agencies, and will be responsible for direction of activity during a "Code Pink." In the absence of the Director of Nursing, the Charge Nurse will be responsible.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Kidnapping (CODE PINK)

FILING NUMBER:
EMG 6.10-2

EFFECTIVE DATE:
March 2013

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

7. Personnel/volunteers not having specific "Code Pink" assignments will report any suspicious persons or situations by calling Communications at "0". All exits will be closed during the alert.
8. All personnel/volunteers are to watch for persons carrying large bags in which an infant might be hidden, and watch for possible places in the hospital where the abductor might hide the abducted child and return to pick up the infant later.
9. All available personnel are required to assist in the search.
10. Personnel should be alert to be able to give to law enforcement officers a description of a possible abductor, the vehicle being driven, and a license number if at all possible.
11. In house Security and Engineering Department personnel, when available, will respond to exits to secure the entire hospital.
12. Security staff will assist in formal documentation with the Risk Manager
13. Staff will inform visitors of Code Pink status and prevent anyone from leaving the building at the assigned exits. The following exits are assigned to department staff as indicated:
 - Nursing staff on 2 Center will cover both elevators and the West stairway.
 - During routine business hours, Financial Counseling will secure the front lobby entrance. At night, lab will secure this area, including the exit from the stairway, going outside if necessary.
 - The Financial Counseling clerk at the front desk will be designated to immediately go outside with pen and paper to write down a license number and description of any possible fleeing vehicle.
 - ER nursing staff will secure the exit from the stairway nearest ER.
 - Physical therapy will secure the ER exit.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Kidnapping (CODE PINK)

FILING NUMBER:
EMG 6.10-3

EFFECTIVE DATE:
March 2013

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

- From 7 AM to midnight, Radiology will secure the exit near SCU. Generations will be responsible for this area after these hours.
 - Dietary will secure the exit near Dietary during the day. Generations will secure this area at night, observing entire hallway for any unusual activity.
 - Materials Management will observe the parking lot near their area for any unusual activity, taking pen and note pad to be able to write down a license number and description of any possible fleeing vehicle.
14. All personnel not having specific assignments will explain procedure to visitors and observe for any unusual behavior. Staff should be aware that most abductions occur during regular visitor hours, and should be watchful of persons carrying large bags that might conceal an infant.
 15. In areas where there is adequate staff to cover exits, some employees will search restrooms, closets, etc., where an infant might be hidden.
 16. When the search is concluded, the Director of Nursing or Charge Nurse will notify the Communications Operator to announce "Code Pink All Clear".
 17. Inservices of all personnel will be required. Newly hired personnel/volunteers will be given an overview during orientation. Department managers will be required to update personnel on an annual basis. Annual drills may be conducted within the hospital.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
CODE PURPLE

FILING NUMBER:
EMG 6.15

EFFECTIVE DATE:
March 2013

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

Code Purple maybe defined as a situation in any department where a patient, visitor, or even a staff member is combative, and staff, visitors, or a patient are in danger of actual bodily harm.

PROCEDURE:

- Any employee who realizes that a situation may be escalating may dial "Feature 63" on the phone then press "All" to access the intercom and announce "Code Purple and the location."
- Switchboard will then announce, "CODE PURPLE, _____" (name the area) three times over the intercom.
- Security and all available men on duty will immediately respond to the designated area.
- Administrator, and others will respond they are available and attempt to talk to the person(s) involved and attempt to de-escalate the situation.
- If Code Purple is called for Generations, additional staff from other areas of the hospital who respond will assemble in the hallway outside the East door of generations and will be on standby for further instructions by the RN on duty or designated staff.
- Follow same procedure as EMG 6.20 Riot Control.
- Crossett Police will be notified, if needed, to control the situation.
- The staff who notified Switchboard of Code Purple will notify Switchboard of "Code Purple Clear" as soon as the situation is under control.
- A report will be sent to the Safety Officer or Risk Manager within 24 hours.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
CODE SILVER/ACTIVE SHOOTER

FILING NUMBER:
EMG 6.18-1

EFFECTIVE DATE:
April 2017

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

PURPOSE:

The purpose of this policy is to provide guidelines in the event of an Active Shooter type situation occurring on hospital property. Every effort will be made to protect patients, visitors and staff. However, the hospital recognizes that these guidelines in no way imply or guarantee that injury or death will not occur during dynamic situations.

DEFINITION:

For the purpose of this plan, an active shooter is defined as a situation where a suspect(s) enters hospital property and commits acts of violence with a weapon.

PROCEDURE:

- As soon as it is determined that an active shooter situation exists, the Crossett Police Department, Switchboard operator (Dial 0), and the on-duty hospital supervisor will be immediately notified.
- Any employee discovering an Active Shooter situation should press Feature 63 on the phone, then press "All" to announce Code Silver and the location overhead and via phones speakers. This phone function is for extreme emergencies only.
- The Switchboard Operator will immediately activate the panic button and page "Code Silver" and the location.
- Other departments in the hospital with a panic button in their department will also activate the panic button in their department
- Any available employee will then Dial 911 and give as many details as possible with location and description of shooter and type of gun being used.
- Follow the instructions given by the police department.
- All departments will immediately lock their doors.
- Employees will then place a wedge under the door or any other object to prevent the door from being easily opened.
- The Switchboard Operator or any employee having information will provide any available information to the police when they arrive.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
CODE SILVER/ACTIVE SHOOTER

FILING NUMBER:
EMG 6.18-2

EFFECTIVE DATE:
April 2017

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

- If the shooter is in the Switchboard area, staff will evacuate as soon as it is possible for them to safely do so.
- Immediate notification will also be made to the following either by the hospital operator or on-duty supervisor or designee:
 - ❖ Engineering/Maintenance Director
 - ❖ Administrator on Call
 - ❖ CEO
 - ❖ Chief Nursing Officer
 - ❖ Emergency Preparedness Coordinator
- The following information should be obtained if possible:
 - ❖ Number of suspects
 - ❖ Location of suspects
 - ❖ Weapons involved
 - ❖ Description of suspects and identification of suspects if known
- Unless directed otherwise by the Police department or the CEO, all staff members will attempt to secure patients, visitors and other staff members in a secured area if possible, close all doors and wait for further instructions. **Staff members are advised not to unnecessarily put themselves in jeopardy while attempting to secure patients, visitors or other staff members.**
- If possible, staff members will instruct all persons to get out of the hallways and seek shelter inside the nearest room and, if possible, lock the door and turn out the lights. Attempt to keep all persons away from the door and away from any view of the hallway. Keep all persons quiet and wait for instructions.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
CODE SILVER/ACTIVE SHOOTER

FILING NUMBER:
EMG 6.18-3

EFFECTIVE DATE:
April 2017

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

- Staff on 2 Center will call the elevators to 2 Center and place an obstacle such as a chair in the doorway in order to restrict the shooter from easily coming to 2 Center.
- Turn off televisions and radios. **No use of cell phones except for texting.**
- Do not allow anyone in the hallways for any reason. **If the fire alarm is activated, remain where you are. Follow instructions given over the public address system.**
- Do not call the operator or 911 to get updates. Do not use telephone or cell phone for outside calls. Only contact the operator or 911 if you have vital information. This will include: location of the suspect, identification of the suspect or the number of persons injured at your location.
- Prepare a list of everyone present at your location.
- Remain in your location until a Uniformed Police Officer arrives at your location or until "Code Silver all clear is called.
- Incident Command will immediately be established by the senior hospital staff member on scene and command will be turned over to the Crossett Police Department as soon as possible. Key hospital staff members (Hospital Administrator, Chief Nursing Officer, Emergency Preparedness Coordinator, etc) will remain on scene and assist with unified command as directed by the Incident Commander.
- Security will attempt to keep additional persons from going into the area of the disturbance. Secure doors and elevators if possible. He/she should not put himself/herself in harm's way to secure the elevator.
- The Arkansas EM System will be updated as soon as possible to reflect that the hospital is on Full Diversion, and the Crossett Ambulance Service and FAST Ambulance Service will be immediately notified of the situation.
- Evacuation of the departments of all nonparticipating patients and staff will only be conducted when ordered by the Police Department. **No one will be allowed to remove any vehicle from the property unless directed or authorized by the Crossett Police Department.**

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
CODE SILVER/ACTIVE SHOOTER

FILING NUMBER:
EMG 6.18-4

EFFECTIVE DATE:
April 2017

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

- The Public Information Officer/designee along with the police will be the only persons releasing information to the media. An established off-site media staging area will be utilized unless directed otherwise by the Crossett Police Department.
- “Code Silver all clear” will be announced when the situation has been established as safe by the Crossett Police Department.
- Ashley County Medical Center will provide counseling services to assist with emotional/psychological support to all staff affected by the event.
- A post-situation briefing will be conducted within 24 hours of the event.
- Home Health, Ashley Health Services, or Hamburg Clinic employees finding themselves in an active shooter situation will attempt to keep themselves out of view of the shooter. The employee nearest the panic button will attempt to activate it. Employees will attempt to take cover or escape to the outside. An employee escaping to an area outside the danger area may use a cell phone or other phone to contact the police. Employees should remember to keep movement in view of the shooter at a minimum.

THIS POLICY OF ASHLEY COUNTY MEDICAL CENTER MAY BE OVERTURNED AT ANY TIME AT THE DISCRETION OF THE CROSSETT POLICE DEPARTMENT.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Riot Control

FILING NUMBER:

EMG 6.20

EFFECTIVE DATE:

July 2005

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

A riot may be defined as a situation of confusion, disturbance, violent disorder or public disturbance of the peace involving a number of persons (usually three or more) assembled together. Should any unusual disturbance occur, the following procedure should be followed:

Witness of any unusual disturbance:

Report discovery to switchboard operator.

Switchboard Operator:

1. Notify Engineering during normal business hours.
2. After hours, notify security.

Security/Engineering:

1. Report to scene of disturbance.
2. Assess situation.
3. Calmly try to disperse the gathering or control situation until Administration arrives.

Clinical Coordinator:

1. Report to scene of disturbance.
2. Assist Security in controlling the situation.

Administrator:

1. Report to scene of disturbance.
2. Assume command of situation.
3. Notify law enforcement agencies for help if needed
Crossett Police: 364-4131
Ashley County Sheriff's Office: (870)-853-2040

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Bomb Threat (CODE ORANGE)

FILING NUMBER:
EMG 6.30-1

EFFECTIVE DATE:
July 2005

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

PURPOSE: To establish procedures to be implemented after receipt of a bomb threat or after discovery of a suspected bomb.

POLICY: Use of these general guidelines and good judgment in critical situations will prevent panic and help ensure the safety of our patients and employees.

RESPONSIBILITY:

- Each employee (telephone operators in particular) should be aware of procedures to be used upon receipt of a bomb threat or discovery of a suspected bomb.
- The Administrator or designee shall retain complete decision authority over action to be taken in response to bomb threats.

Action to be taken by Recipient of BOMB THREAT:

The person receiving the threat will attempt to keep the caller on the line as long as possible while notifying another employee, if available, in order that the call can be traced. The following information should be noted and written down while talking to the caller (Bomb Threat Checklist should be used.):

1. The exact wording of the threat.
2. If possible, the name, address, and status (patient, employee, other) of the person making the threat.
3. Description of circumstances surrounding the threat.
4. Description of the caller's voice and manner (i.e., male or female, young or old, calm or excited, soft or loud, coherent or incoherent, profane or not, laughing or sobbing, stutter, etc.)
5. Date and time of threat.

During administrative hours, the above information will be furnished immediately to the Administrator or designee. During non-administrative hours information will be furnished to the Nursing Supervisor.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Bomb Threat (CODE ORANGE)

FILING NUMBER:
EMG 6.30-2

EFFECTIVE DATE:
July 2005

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

Control of Publicity:

Disruption of normal business and panic are normally the primary objectives of persons making bomb threats. All information released to the public will be under control of the Administrator or designee.

Activation of Plan:

By Administrator or designee (during Administrative hours)

1. Contact other key officials as required.
2. Contact Crossett Police Department.
3. Enact all actions and procedures as needed.

By Nursing Supervisor (during non-Administrative hours)

1. Contact Administrator or designee
2. Contact the Crossett Police Department
3. Contact one of the Administrative Control group listed in order:

Director of Nursing
Assistant Director of Nursing
Engineering Department Manager

The Administrator or designee will utilize the hospital's Cascade Call System for additional personnel as needed.

Search Procedures: General Procedures (bomb location unknown)

- Search will be under control of the Police Department and Administrator. Decision as to whether the building will be evacuated will be made by the Police and Administrator.
- Employees may be asked to assist in the search.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Bomb Threat (CODE ORANGE)

FILING NUMBER:
EMG 6.30-3

EFFECTIVE DATE:
July 2005

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

- During Administrative hours, the Administrator will notify the telephone operator to call Code Orange over the PA system and will make the decision as to whether immediate evacuation is necessary.
- Department heads or designee will notify staff to conduct search in assigned search areas.
- Upon completion of search, the Department Head or designee will report by telephone to the Administrator, Extension 271, state areas being searched.
- The Control Center will compile a list of rooms and areas searched.
- The telephone operators and hospital personnel will not use two-way radios or paging system during the search. Runners or telephones may be used to notify departments. Engineering will make sure the paging system is turned off.
- During non-administrative hours, the Nursing Supervisor will initiate the search procedure and remain at the 2-Center desk area until arrival of Administrative personnel.
- The Nursing Supervisor or designee will contact each nursing unit as appropriate (depending on suspected location of bomb) to carry out the search in assigned areas and report back to him/her at the 2-Center desk.
- Other personnel available to assist with the search (e.g., housekeeping, engineering) will be contacted by the Nursing Supervisor or designee to assist in the search.
- Administrator or designee will contact department heads to activate Cascade Call System for additional personnel as needed for search procedures.

Approach to Search Activities:

- Use personnel who are familiar with the area. They may readily detect an object out of place or not belonging in the area.
- Search from the outside of the area or building inward; then work from the bottom up.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Bomb Threat (CODE ORANGE)

FILING NUMBER:
EMG 6.30-4

EFFECTIVE DATE:
July 2005

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

- Work in pairs, mentally dividing each area in half, each individual searching his half.
- Room Search: starting at the doorway, select a searching height for the sweep, e.g., floor to waist high. Working back to back, search the entire room at this height only. Return to the doorway and search the next height. Continue until the entire room is completely searched.
- Mark the door frame (tape, crayon, etc.) to indicate that the room was searched and by whom.

Possible Bomb Location Indicated: (general procedures above, as well as those below, shall apply)

- Seal off suspected area
- Provide a very thorough search with Police and Fire Departments
- Alert supervisory personnel in the area to the possibility of patient evacuation. Make all preparations short of evacuation.
- Make every effort to prevent patients from becoming alarmed.
- Turn off radios, televisions, and unnecessary electrical appliances.

Discovery of Suspected Bomb:

- DO NOT TOUCH IT OR DISTURB IT IN ANY WAY. KEEP CALM. DO NOT PANIC.
- Notify the Administrator and hospital police officer in charge.
- Quietly and quickly alert all persons within the danger area to leave. If in a patient area, notify the head nurse.
- Close off the area. May leave doors open within the area to minimize effect of blast.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Bomb Threat (CODE ORANGE)

FILING NUMBER:
EMG 6.30-5

EFFECTIVE DATE:
July 2005

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

- Organize immediate evacuation of any patient in the danger area. This will be accomplished through the Director of Nursing Service.
- Designate the DANGER AREA PERIMETER AT LEAST 300 FEET from the suspected bomb; also the same area on the floor above and below the bomb.
- The Director of Nursing will organize patient evacuation as indicated by the Administrator acting on the advice of the Crossett Police Department.
- Engineering employees will shut down utilities (gas, electric, oxygen, etc.) in evacuated areas.
- After the above has been accomplished, all employees should stand by on alert status until the bomb disposal experts have issued an "ALL CLEAR."
- Immediately after the "ALL CLEAR" is announced, the key hospital personnel who handled the situation shall meet with the Administrator to review and critique the operation, and arrange to reassure all patients, employees and anxious relatives that there is no danger.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Bomb Threat Call Checklist

FILING NUMBER:
EMG 6.30-6

EFFECTIVE DATE:
July 2005

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

1. Exact wording of threat:

2. Questions to ask (record response and repeat in sequence):

- a. When will bomb explode? _____
- b. Where is the bomb? _____
- c. What building is it in? _____
- d. What floor is it on? _____
- e. Who are you? _____
- f. Can we help you? _____

3. Caller's voice and manner description: (mark all that apply.)

Calm	Loud	Nasal	Cracking
Angry	Profane	Stutter	Accent
Excited	Laughing	Lisp	Disguised
Slow	Sobbing	Incoherent	Male
Rapid	Distinct	Raspy	Female
Soft	Slurred	Deep	Familiar**

**If familiar, who did the caller sound like? _____

4. Date and time call received: Date: _____ Time: _____

5. Receiver's Name: _____

6. Time CODE ORANGE was paged overhead: _____

7. Time CODE ORANGE was called clear: _____

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
CODE YELLOW

FILING NUMBER:
EMG 6.40-1

EFFECTIVE DATE:
May 2012

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

SUMMARY:

If disoriented, wandering patients do leave the Generations Unit unescorted, be aware of the profound fear and anxiety they will experience. The following procedure will help this distress when searching for them.

PROCEDURE:

The employee discovering that a patient is missing will immediately notify the Generations charge nurse and page "Code Yellow" overhead by dialing Feature 63 on the phone, then pressing the button for "All" in order to access overhead paging.

Upon hearing Code Yellow paged overhead, the 2 Center Charge Nurse will immediately send staff from 2 Center to relieve Generations staff to go look for the patient. If 2 Center staff is not immediately available, and other nursing staff are available, any other RN may respond to relieve Generations staff.

The Switchboard operator will then repeat the page overhead.

All available staff will look throughout the hospital as soon as the elopement is discovered.

Duties of the Generations Charge Nurse in a Code Yellow:

- Immediately notify Security.
- Call the Attending Physician, who may request that the police be notified. For involuntary patients, the police are to be notified automatically.
- Notify the family of the missing patient unless the physician chooses to notify the family himself/herself.
- Notify the Program Director of the missing patient.
- Record the event in the medical record.
- Notify Switchboard when Code Yellow is clear.
- Complete an Occurrence Report and turn it in to the Risk Manager.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
CODE YELLOW

FILING NUMBER:
EMG 6.40-2

EFFECTIVE DATE:
May 2012

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

When the patient is found and returned to the Unit, a search of the patient should be conducted for contraband that may be brought on the unit. A drug screen may be done on the patient.

Upon return of the patient, the Attending Psychiatrist, Program Director, patient's family and police (if notified) will be informed of the patient's return.

If the patient has not returned within a 24 hour period, the Attending Psychiatrist must discharge the patient.

Staff will use every means possible to return an involuntary patient to the Unit if the patient is in the hospital or on hospital grounds.

The police should be summoned to assist in returning an involuntary patient who has eloped off the hospital grounds.

Force may not be used to detain a voluntary patient who has eloped off the Unit.

In the event that an informal or voluntary patient is judged by the Attending Psychiatrist to be in need of involuntary admission, steps shall be taken to seek involuntary admission for the patient.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Nuclear or Chemical Accident

FILING NUMBER:
EMG 7.00-1

EFFECTIVE DATE:
July 2005

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

Upon notification of an accident involving radiation/chemical exposure, the Emergency Room Physician will ascertain the number of victims and will recommend to the Administrator whether or not the plan needs to be expanded to include the Mass Casualty Plan. If a patient comes into the Emergency Room with contamination by an unknown substance and states he has not reported this to local police, the Switchboard operator will notify the police.

The Director of Radiology will be immediately notified, and will assume responsibility for implementing the plan, and for contacting Federal and State agencies.

RESPONSIBILITIES:

Switchboard Operator:

Will notify the following:

1. Administrator
2. Director of Nursing
3. Surgeon on call
4. Announce _____ if instructed to do so.
5. Notify Engineering if accident occurs during normal business hours.
6. After hours notify Security. Security will notify Engineering on call.
7. Police Department will provide security in the ER area, if instructed to do so.

Emergency Room Staff:

1. Remove stretchers and wheelchairs to area adjacent to ambulance entrance.
2. Stand by to receive patients from triage.
3. Treat victims transported to ER.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Nuclear or Chemical Accident

FILING NUMBER:
EMG 7.00-2

EFFECTIVE DATE:
July 2005

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

Engineering:

1. Obtain stands, roping, plastic sheets and tape.
2. Rope off areas.
3. Shut off ventilation to that area.
4. Report to outside transport team for further assignment.

Environmental Services:

1. Obtain 3 large trash or linen hampers, mark with radioactive signs if nuclear accident.
2. Place hampers inside ER ambulance entrance and outside ER rooms.
3. Report to transport team at ambulance entrance.

Director of Nursing/Clinical Coordinator:

Will assign appropriate nursing personnel to:

1. Survey team at ambulance entrance
2. Medical triage at ambulance entrance.
3. Transport team at ambulance entrance (RN to direct transport team)
4. Unit Secretary or Nursing Assistant for record keeping purposes.
5. To Emergency Room – (2) RN's
6. To ER waiting room.

Nuclear Medicine Personnel:

Collect radiation warning supplies and survey meter.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Nuclear or Chemical Accident

FILING NUMBER:
EMG 7.00-3

EFFECTIVE DATE:
July 2005

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

Outside Survey Team:

Survey all patients upon arrival at ambulance entrance. Amount of contamination will be recorded on a tag which will be attached to patient's chest. This must be done before transport.

Medical Triage Team (Surgeon to arrive will assume leadership.) Will determine transport route of all patients:

1. Life-threatening injuries to ER decontamination area. ER physician and Unit Coordinator will assign staff to first room on right for removal of clothing and draping.
2. Less seriously injured will be triaged and placed in safe areas in accordance with injuries, and/or prepared for transfer.
3. Morgue will be at Jones Funeral Home.

Outside Transport Team:

Will transport patients to morgue at direction of triage team.

Emergency Room Transition Area

Will be a clean area for persons who have been through decontamination and are:

1. To be registered.
2. Awaiting release.
3. Awaiting treatment in clean ER rooms.

Radiology:

Room #1 will be utilized for contaminated patients needing X-rays. Personnel will remain in the room until decontaminated and surveyed.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Nuclear or Chemical Accident

FILING NUMBER:

EMG 7.00-4

EFFECTIVE DATE:

July 2005

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

O.R.:

Patients needing major surgery will be routed to O.R. Personnel will remain in room until decontaminated and surveyed.

Pharmacy:

Pharmacy Director or Registered Pharmacist in charge will call in appropriate personnel. Pharmacy department will furnish and deliver medication needed to the appropriate area.

Hospital Admission:

Patients needing admission will be admitted to isolation room if determined to require isolation, or will be isolated in another room.

POINTS OF EMPHASIS:

- All personnel assigned outside must remain outside until surveyed. If decontamination is necessary, must follow process outlined for patients.
- All personnel must be surveyed before leaving assigned area.
- All rescue squad personnel and equipment must be surveyed before leaving ambulance area.
- 70% of contamination is removed by removal of clothing; therefore, this should be accomplished as soon as possible. Patient privacy should be maintained.
- All clothing, trash, and linen must be placed in hampers marked radioactive, or with appropriate warning for chemical hazard, and sealed with heavy tape, rope, etc.
- Engineering will notify Arkansas Department of Emergency Management (853-2070) to pick up contaminated items and dispose of them.

Some possible chemical agents that might be used in the event of terrorist activity:

- Nerve agents, such as GB (Sarin) or VS
- Blister agents, such as Mustard or Leivisite

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Bioterrorism Plan

FILING NUMBER:

EMG 7.50-1

EFFECTIVE DATE:

March 2011

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

In the event of a possible Bioterrorism attack, with patients coming into the emergency room, the Emergency Room physician will notify the RN on duty to activate the Bioterrorism Plan call system immediately as outlined below, and recommend to Administration whether or not the mass casualty plan needs to be activated.

RESPONSIBLE PERSON:

PERSON(S) TO BE NOTIFIED:

RN on duty

PBX Operator

PBX Operator

911
Administration (ext.271), or after hours call schedule
Nursing Administration (ext. 260, or page)
Security, for traffic control

Director of Nursing

Infection Control Nurse (ext. 254)
Social Services (ext. 297, or pager)

Infection Control Nurse

Ashley County Health Department (364-2115)
Arkansas State Health Department (501-661-2417)
CDC Hospital Infections Program (404-639-6413)
Arkansas Bioterrorism Response Line (501-280-4817)
After hours and weekends (800-554-5738)

Administration

Local law enforcement (364-4131)
FBI Field Office (501-221-9100)
Bioterrorism Emergency Number (770-488-7100)
ACMC Public Relations (ext. 409)
Arkansas Hospital Association (501-224-7878)

POTENTIAL AGENTS

These diseases have been recognized as having bioterrorism potential: anthrax, botulism, plague, smallpox, tularemia, brucellosis, Q fever, viral hemorrhagic fevers, viral encephalitis, and diseases associated with staphylococcal enterotoxin B. Bioterrorism may occur as covert events in which persons are unknowingly exposed, and an outbreak is suspected only upon recognition of unusual disease clusters or symptoms; or bioterrorism may occur as an announced event, in which persons are warned that an exposure has occurred. The possibility of bioterrorism should be ruled out with the assistance of the FBI and State Health officials. Treatment and management will be disease-specific.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Bioterrorism Plan

FILING NUMBER:

EMG 7.50-2

EFFECTIVE DATE:

March 2011

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

All precautions will be taken according to the bioterrorism agent involved. Decontamination may need to be done outside the hospital.

Agents of bioterrorism are generally not transmitted from person to person; re-aerosolization of these agents is unlikely. All patients at ACMC, including suspected victims of bioterrorism, should be managed using **Standard Precautions**, which are designed to reduce transmission from both recognized and unrecognized sources of infection, and are recommended for all patients receiving care, regardless of their diagnosis or presumed infection status.

Supplies for possible decontamination outside the hospital will be stored by the Engineering Department. The following procedure will be followed for patients who need to be decontaminated outside the hospital (same as for nuclear or chemical accident):

1. The ER physician will be the primary disaster physician, and will request additional physicians as needed.
2. If decontamination is needed, a nurse will be placed in the dirty decontamination area. (See "Decontamination" at the end of this policy.)
3. The PBX operator will notify Engineering, Environmental Services, and Nursing Administration. The Operator is to announce overhead, "**Code 99**," and then follow policies and procedures for further instructions.
4. Infection Control Nurse, DON, or charge nurse will check the wind direction to determine the site for decontamination. They will then call the Conference Room (ext. 414), or notify the Decontamination Officer by radio as to what site is to be used. Available sites are Alpha 1, Alpha 2, Bravo 1, and Bravo 2.
5. All in-house decontamination team members are to report to the Conference Room immediately to be briefed on the situation. They will be instructed as to which department to report for donning PPE when the decontamination site is selected by Engineering. If Alpha 1 or Alpha 2 is selected, the decon team is to report to the X-ray department for donning. If Bravo 1 or Bravo 2 is selected, the decon team is to

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Bioterrorism Plan

FILING NUMBER:

EMG 7.50-3

EFFECTIVE DATE:

March 2011

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

report to Home Health for donning. Engineering is to take all decontamination equipment to the designated area for the decon team.

6. While the decon team is waiting for the location, sign-in sheets will be completed, and weight and vital signs taken on the decon team members. Sign-in sheets, vital sign sheets and clip boards will be kept in the closet of the Conference Room, and then taken to the designated donning and doffing area.
7. The decon team will be assigned job duties by the decon officer prior to leaving the donning area. Further assignments or changes in assignments will be made by the person assigned as Time Keeper for the decon team. It is the Time Keeper's responsibility to pull out decon team members prior to allotted time if conditions warrant.
8. The triage area will be considered contaminated. Any employees working in this area will wear appropriate protective clothing. No one will enter this area without appropriate gear, and no one will leave without decontamination.
9. In the event of mass casualties, admissions personnel will report to the triage area to register patients, and will bring supplies to tag patients as to their destination after triage. This will be done in the Cold Zone.
10. Since removal of 70% of contamination is accomplished by removal of clothing, this should be done as soon as possible.
11. Engineering will obtain plastic sheeting, roping, and tape; rope off the area, and shut off any ventilation to the ER area if appropriate, as directed by the ER physician.
12. Environmental Services will be responsible for bringing the following supplies to the decontamination area, and will remain on standby for further instructions:

2 large trash containers with lids
2 linen carts
Clean towels, wash cloths

Plastic garbage bags
Clean linens
Disposable hats, booties, and gowns

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Bioterrorism Plan

FILING NUMBER:

EMG 7.50-4

EFFECTIVE DATE:

March 2011

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

13. Nursing personnel will maintain patients' privacy, and provide screening while removing patients' clothing, which will be placed in plastic bags, sealed with tape, and labeled "contaminated." ACMC staff will retain the clothing for the purpose of assisting FBI investigations.
14. Surfaces that have been exposed to a biological agent can be decontaminated with a solution of 9 parts water and 1 part bleach, or 0.5% hypochlorite solution.
15. The Infection Control Nurse will assign an area for patients who need to be cohorted together, according to infection control policies.
16. If ACMC facilities are inadequate for the number of patients requiring isolation, etc., patients will be sent to other facilities according to usual procedures.
17. In the event that more negative airflow patient rooms are needed than the isolation room can accommodate, Engineering has portable equipment available that may be set up in a regular patient room that creates a negative airflow, vented to the outside. Four of these machines are available, making a total of five possible rooms available for respiratory isolation. Engineering will be responsible for setting up this equipment.
18. Clear, consistent, understandable information should be provided to patients, visitors, and the general public. During bioterrorism-related outbreaks, visitors may be strictly limited, and Engineering/Security may lock all entries to the facility, so that entrance into all parts of the facility can be controlled.
19. Pharmacy will activate their procedures for obtaining any additional medications from local pharmacies, and CDC.
20. Respiratory Therapy will activate pre-arranged plans for obtaining additional respiratory equipment as needed.
21. Materials Management will activate pre-arranged plan for obtaining additional supplies to maintain Standard Precautions.
22. In the event that a bioterroristic threat is called in to the hospital, the employee receiving the call should use the reporting format for a bomb threat (EMG 6.30-5).

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Bioterrorism Plan

FILING NUMBER:

EMG 7.50-5

EFFECTIVE DATE:

March 2011

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

AMBULATORY DECON

Patients are to be directed to the dirty triage area away from decon site. There will be one or two employees in full PPE at this site that will triage victims according to the decon color coded triage system. The victims will be given a color coded tag that will be placed around the neck. The victims will then be directed to the color represented in the triage waiting area. This area will be marked with colored flags.

There will be first aid supplies (4x4's, ABD pads, tourniquets, and tape) at the dirty triage area in a plastic container. Plastic wrap will be available to cover open wounds prior to decontamination.

Patients will be sent to the personal belongings table (4) when called. They are not to be allowed to go without being called, this will prevent patient crowding at the table. There will be one employee in full PPE at this site. The patient will be instructed to remove all personal items such as jewelry, purses, wallets, etc. The patient will be marked with a red permanent marker on upper right arm indicating what number patient they are.

The bag containing their personal belongings will be a clear plastic zip lock bag and will be marked with the same patient number using a red permanent marker.

Patients are to take their marked personal belongings bag to table (5) when instructed to proceed. The patient may be assisted by the employee at table (4), employee at shower 1 (8), or both. This area will have a table with impervious plastic bags. The patient will be given a plastic bag and instructed to remove all clothing and place into bag. The bag will then be sealed and placed, along with bag of personal belongings, inside a second bag which will be sealed, and marked with a permanent red marker with same patient number, and placed in the bin (6).

The patient will then be directed to decon shower #1 (8). There will be an employee in full PPE at this site. The employee will instruct the patient to take sponge with soap and water (9) into shower and wash under water from head to toe using soap. They will instruct the patient to thoroughly clean hair and any body creases that may retain any contaminant. The patients are to remain in the shower for 5 minutes. While the patient is cleaning, the employee is to encourage and comfort the patient.

When the patient has completed the first shower, the employee is to monitor the patient for residual contamination, using monitoring equipment available.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Bioterrorism Plan

FILING NUMBER:

EMG 7.50-6

EFFECTIVE DATE:

March 2011

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

The patient is then directed to decon shower #2 (10). Again the patient is to be instructed to take a sponge, with soap and water (9), into shower and wash from head to toe. When second shower is completed, the patient will be assisted by another employee in full PPE. This area is to be considered the WARM ZONE. The employee will then use monitoring equipment to check the patient for any residual contamination. If any contamination is found, the patient is then directed back to the first shower to repeat the process. If no contamination is found, the patient will be given towels to dry off and a gown and shoe covers. Towels are to be discarded into bin (11) along with any dressings. Gowns and shoe covers are to be kept on cart (13).

The patient will then be directed to table (18) for clean triage. This area will have one employee (PPE not required), they will redress wounds as needed and direct patient to designated areas for treatment or evaluation based on their assessment of patient's condition.

NON-AMBULATORY DECON

Patients will be brought to the non-ambulatory decon pool (12) via stretcher or backboard when called for. Patient's personal belongings and clothing will be given to the employee at dirty decon table (4) for labeling and marking with patient number and placed into bin (6). The patient's right upper arm will be marked with the patient number using a red permanent marker.

The non-ambulatory decon pool will be manned with two employees in full PPE. They are to decontaminate the patient using soap and water for a minimum of 5 minutes. The patient is to be washed from front to back. The patient is to be log rolled so back of patient and back board can be washed properly. The underside of the back board and the patient is to be monitored using the available monitoring equipment at this time. If any residual contaminant is found, the washing process is to be repeated.

The patient is then to be moved away from non-ambulatory decon pool. The patient is then to be dried off and redressed with a gown and covered with a blanket or sheet.

The patient is then to be wheeled to the edge of the COLD ZONE and transferred to a clean stretcher, avoiding transfer of contaminant from employee PPE to clean stretcher with employee in COLD ZONE assisting with transfer.

The patient is then taken to table (18) for clean triage. This area will have one employee (PPE not required). Wounds will be redressed as needed and runners directed to take patient to areas for treatment or evaluation based on assessment of the patient's condition.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Bioterrorism Plan

FILING NUMBER:

EMG 7.50-8

EFFECTIVE DATE:

March 2011

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

ACTIVITY	LOCATION	KEY OFFICIAL	SUPPORT PERSONNEL	PERSONNEL SOURCE
Triage	Outside Entrance to Emergency Department	DON designee	1 Physician 1 RN	Nursing Service
Emergent	Emergency Department	DON designee	4 Physicians 4 RNs 4 LPNs	Nursing Service
Urgent	Emergency Department	DON designee	2 Physicians 2 RNs 2 LPNs	Nursing Service
Non-Urgent	Outpatient Department	DON designee	1 Physician 1 RN 1 LPN	Nursing Service
First Aid	Conference Room	DON designee	2 LPNs	Nursing Service
Registration	Emergency Department Registration Area	Admissions Coordinator	3 Clerks	Admissions Personnel
Surgery	Surgical Suite	Chief of Surgery	Surgery Personnel	Nursing Service
Personnel Pool	Hospital Dining Room	Director of Personnel	Housekeeping Nursing Service Administration	Same
Traffic (Outside)	Entrance to Hospital	Director of Engineering	Engineering	Engineering
Traffic (Inside)	Emergency Department	Security	Runners	Staff
Information Control	Administration	Administrator or Designee	Business Office or Personnel	Administration
Morgue	Jones Funeral Home Patient Room as available	Jones Funeral Home	Jones Funeral Home	Jones Funeral Home
Visitors	Front Lobby	Local Pastors	Pastors	Hospital Auxiliary
Critical Care PACU	SCU	DON designee	1 Physician 1 RN 2 LPNs	Nursing Service
Couriers	In House	DON designee	Available Personnel	Accounting Business Office

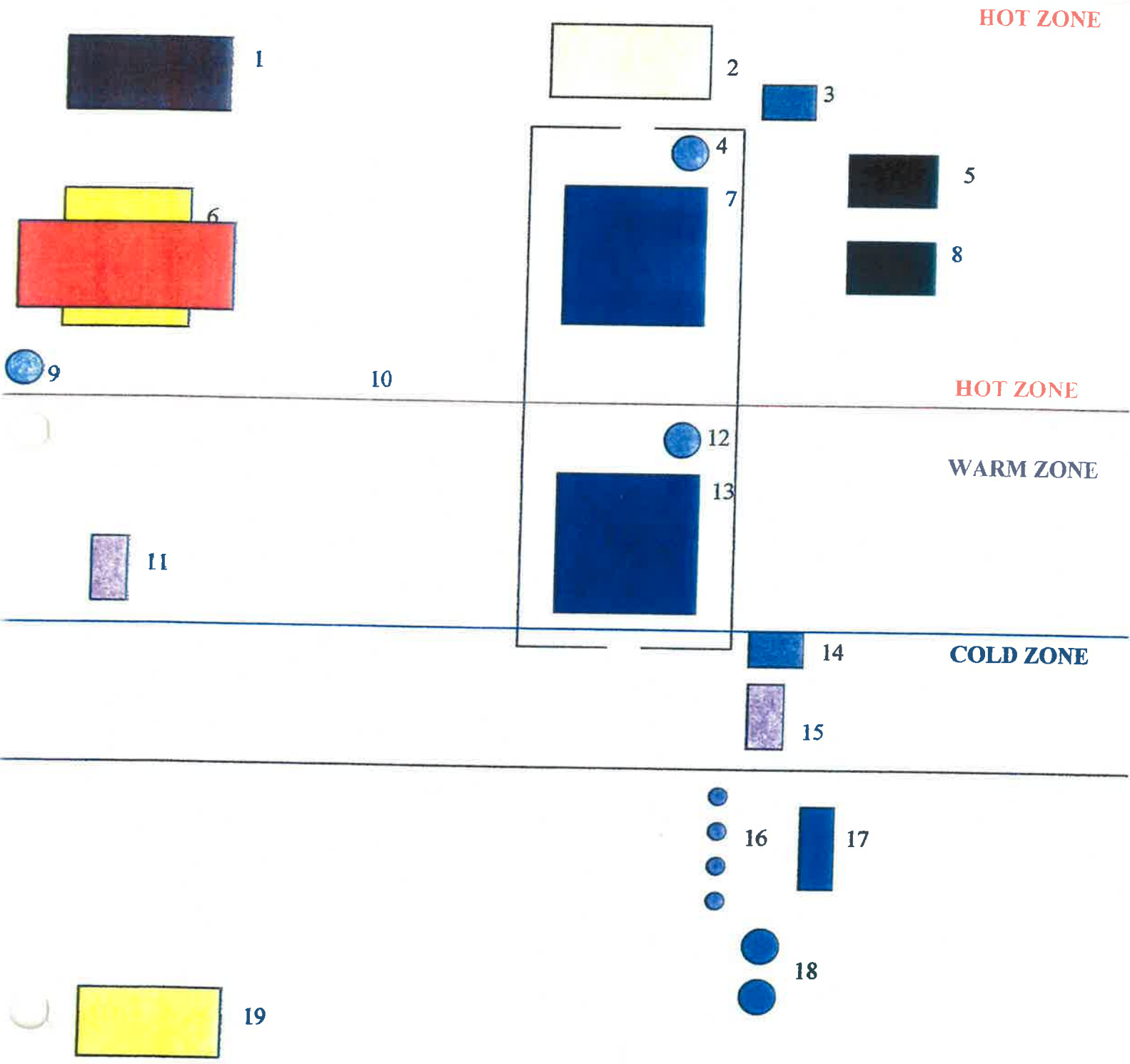


ASHLEY COUNTY MEDICAL CENTER



Dirty Triage Area

- 1. Personal Belongings Table
- 2. Clothing Table
- 3. Belongings Bin
- 4. Soap Bucket
- 5. Water reservoir
- 6. Non-ambulatory station
- 7. Shower #1
- 8. Water reservoir
- 9. Soap Bucket
- 10. Cold Zone
- 11. Linen Cart
- 12. Soap Bucket
- 13. Shower #2
- 14. Towel Bin
- 15. Linen Cart
- 16. Chairs
- 17. PAPR Table
- 18. Bins
- 19. Clean Triage Table



**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

How to Handle Suspicious Mail

FILING NUMBER:

EMG 7.50-9

EFFECTIVE DATE:

August 2006

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

How to Handle Suspicious Mail:

1. Do not shake or empty the contents of any suspicious envelope or package.
2. Lay the envelope or package on a flat surface, cover the envelope/package with anything (e.g., paper, clothing, trash container, etc.) Do not remove the cover.
3. Leave the room and close the door, or section off the area to prevent others from entering.
4. Wash your hands with soap and water.
5. Notify your supervisor, who will secure the area, post a sign indicating "Do Not Enter," and activate the calls as outlined in the bioterrorism plan.
6. Go to the Emergency Room.
7. Remove contaminated clothing as soon as possible and place in a plastic bag. Emergency personnel will assume responsibility for proper disposition of clothing.
8. Shower with soap and water as soon as possible. Do not use bleach or other disinfectants on your skin.
9. Engineering will close off ventilation to the affected area.
10. Obtaining of environmental samples and securing the suspicious envelope/package will be directed by police and FBI, and sent to the designated lab for testing.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Point of Distribution (POD) Plan

FILING NUMBER:

EMG 7.6

EFFECTIVE DATE:

March 2014

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

Ashley County Medical Center has been designated by the Arkansas Department of Health as a Point of Distribution (POD) for administration of vaccines to APMC employees and their families in the event of massive disease outbreak requiring vaccines. The Infection Control Nurse and the Nursing Department will coordinate distribution of vaccines, which will be supplied by the Arkansas Department of Health. The POD will only be activated by the Arkansas Department of Health, and will be set up in the Conference Room. This POD will only be for APMC employees and their families.

Figure G.2b SITE FLOOR PLAN FOR RAPID DISPENSING

Example for Rapid Dispensing

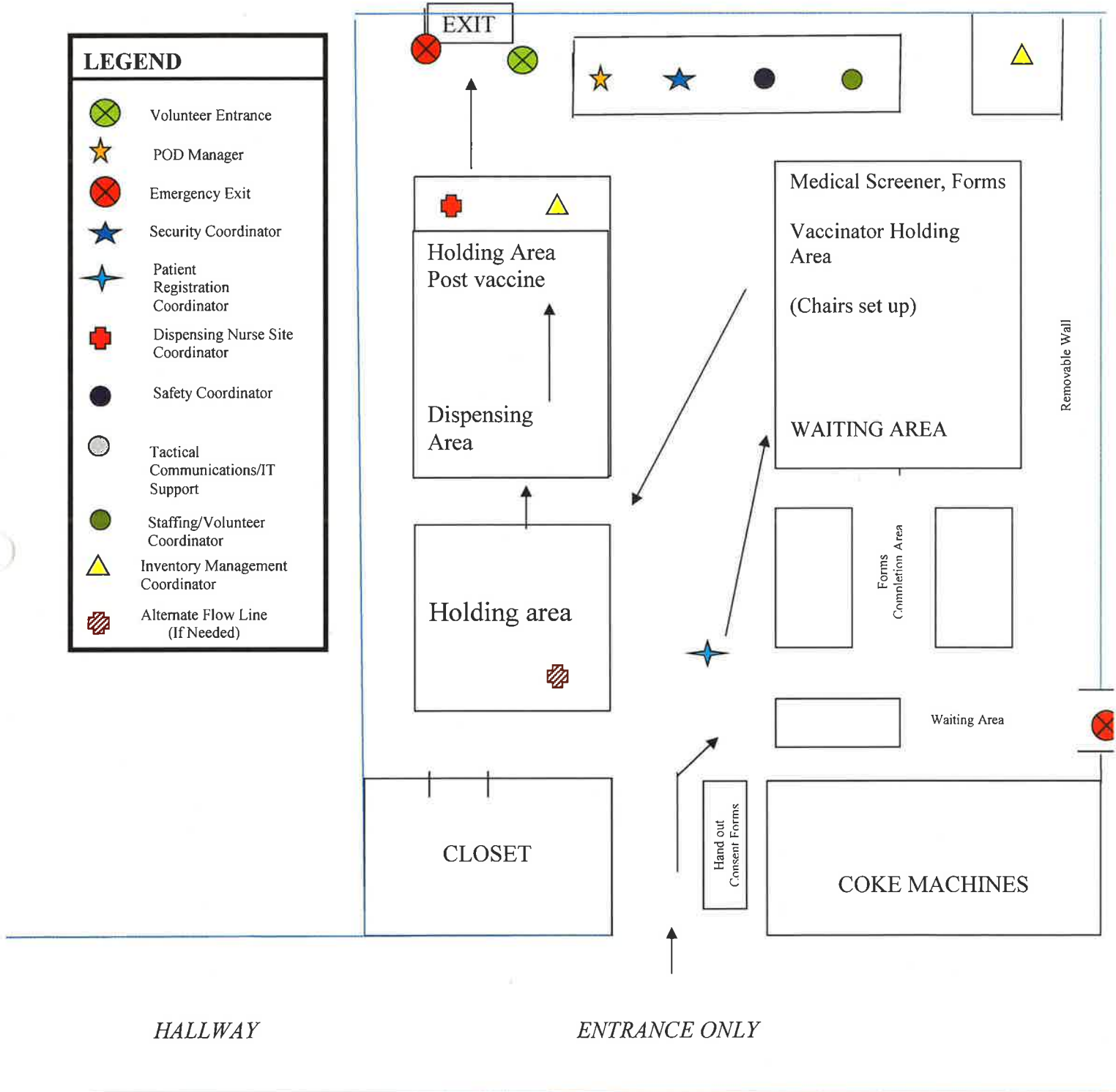
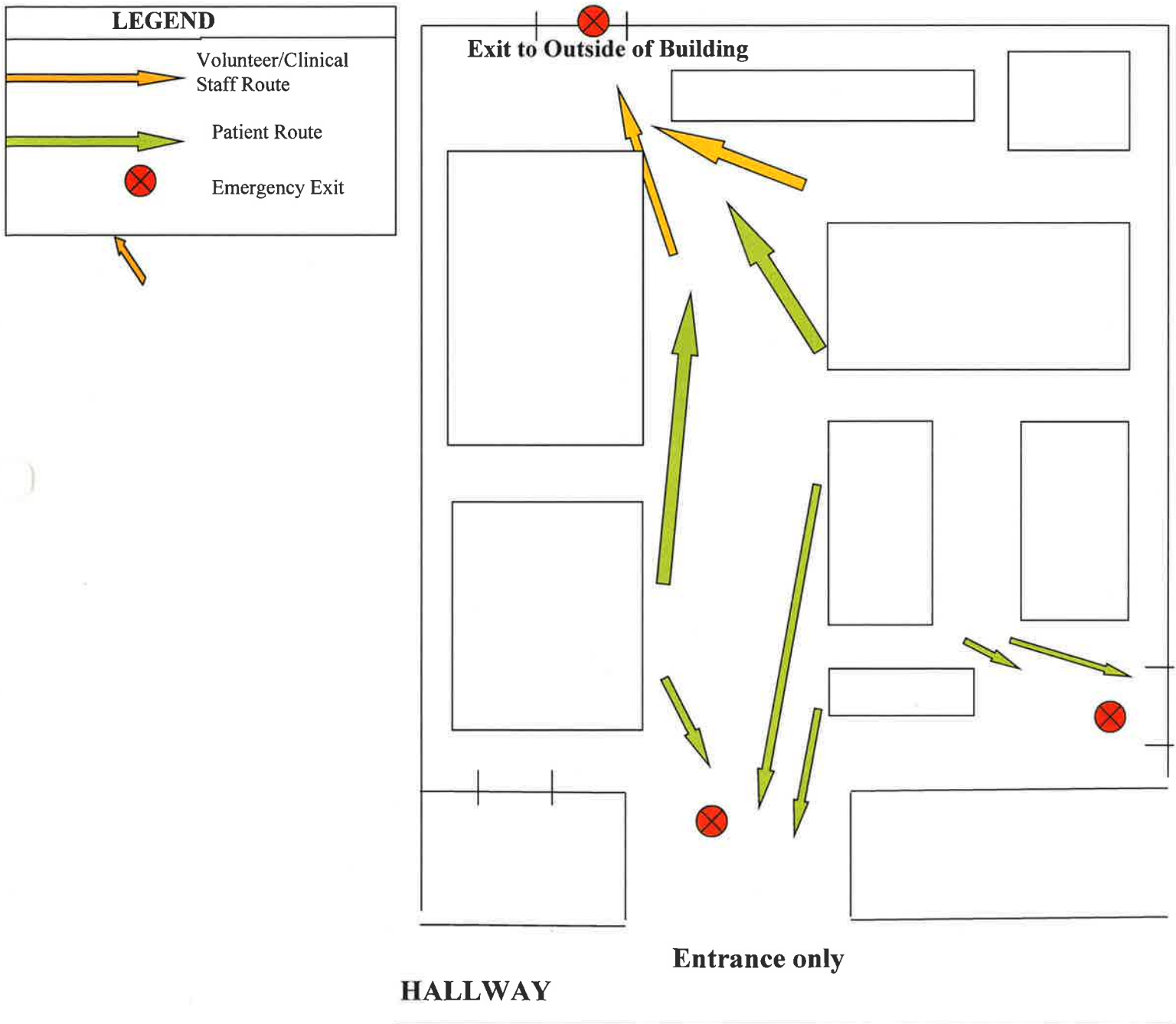


Figure 1.9 Photo of Inside Facility Evacuation Routes

Figure 1.9 provides a diagram for the evacuation routes for volunteer/clinical staff and patients for the POD location.

Example Ashley Cty (Crossett) Evacuation Routes



**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Code C – Care of Ebola Patient

FILING NUMBER:

EMG 7.70-1

EFFECTIVE DATE:

December 2014

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

If a patient comes to the ER window and is suspected to have Ebola, the following steps will be taken:

- ❖ The ER clerk will give the patient a mask and gloves to put on and ask the patient to stay at the ER window.
- ❖ The clerk will CALL the ER nurse to inform of the suspected case.
- ❖ As the patient is putting the mask and gloves on, the clerk will PAGE overhead “Code C” and ask and visitors/patients in ER waiting room to leave through the opposite door from which the suspected patient came in.
- ❖ When Security hears Code C paged overhead, the on-duty Security officer will make sure the Day Surgery outside door is open, and secure the ER waiting area so that no other patients or visitors will enter that area. Visitors/patients who were in the ER waiting room will be escorted to the front lobby.
- ❖ The ER nurse will put on the appropriate PPE, while the patient remains at the ER window or waiting room until the nurse is ready.
- ❖ The nurse will then place the same type of PPE on the patient that the nurse is dressed in and take the patient back out the ER entrance and into Day Surgery by way of the door to the outside.
- ❖ The Day Surgery area will be the quarantined area for suspected cases of Ebola.
- ❖ The ER clerk will notify Julie Keeth, Emily Bendinelli, Ramona Bitely, Donna White, surgery on-call, and Phillip Gilmore.
- ❖ Infection Control will notify OEM, (870)-940-0342, (501)-661-2136; Dr. Gresham; and Tammy Cook at Ashley County Health Department (500-2630)
- ❖ The ER entrance and waiting room area will be closed for 3 days for Terminal Cleaning.
- ❖ The patient will be cared for by the ER nurse who took him/her to Day Surgery until additional staff arrives.
- ❖ Switchboard will notify Housekeeping that the ER waiting area needs to be decontaminated.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Code C – Care of Ebola Patient

FILING NUMBER:
EMG 7.70-2

EFFECTIVE DATE:
December 2014

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

- ❖ The patient will be isolated until they are deemed in a “no risk” category by CDC.
- ❖ Interactions with the patient will be limited to 1 nurse and 1 doctor.
- ❖ Patient care will be under the direction of the Arkansas Department of Health and CDC.
- ❖ See Code C policy in Infection Control Manual for additional details.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Tornado/Wind Storm Disaster

FILING NUMBER:
EMG 8.00-1

EFFECTIVE DATE:
January 2017

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

Department Heads are responsible for planning personnel coverage, supply and equipment requirements, and the security of their areas, except as otherwise outlined, in severe weather conditions; each department will develop safety measures specific to their own departments.

PHASES OF OPERATION:

1. Tornado Watch: Severe weather conditions are expected in the area and personnel should be on the alert for actual warnings. Preliminary precautions to safeguard life and property should be taken.
2. Tornado Warning: Severe weather conditions are imminent. Complete all possible precautions immediately to safeguard life and property.
3. All Clear: Severe weather conditions no longer exist in the area.

CONTROL CENTER:

The control center for the duration of the emergency will be located in the Office of the Administrator.

CODE WHITE will be paged on the PA system when there is a TORNADO WARNING and a tornado has actually been sighted in the area.

After Code White has been paged, Switchboard will notify Ashley Health Services, the Accounting office, ACMC Family Home Health, and the Wellness Center of the Code White status.

INSTRUCTIONS FOR TORNADO WATCH PHASE:

Preliminary precautions will consist of reviewing procedures defined in the "Instructions for Warning Phases" section, should weather conditions become imminent.

INSTRUCTIONS FOR WARNING PHASES:

1. Control Center will be in operation in the office of the Administrator until the "All Clear" is announced.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Tornado/Wind Storm Disaster

FILING NUMBER:
EMG 8.00-2

EFFECTIVE DATE:
January 2017

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

2. All ICU/CCU patients will be moved to Day Surgery in order to get away from windows and possible flying glass.
3. Med/Surg Nursing Department shall move all ambulatory patients and occupied beds away from windows and into the halls as an additional precaution against hazards of broken glass.
4. The Dietary Department shall have available emergency rations, disposable plates and cups, etc., for use during the emergency.
5. Housekeeping shall have available emergency stocks of linen and other supplies.
6. Nursing staff will place patients' charts inside pillowcases until Code White is clear.
7. Any electrical equipment that is not necessary for patient care should be turned off.
8. All employees and visitors will be moved away from windows as an additional precaution against hazards of broken glass.
9. The Engineering Department shall:
 - A. Inspect, repair, and secure all exterior openings.
 - B. Have available, as deemed necessary for emergency use, the following:
Material to cover broken windows, nails, lumber, fuses, bulbs, extension cords, ladders, etc.
 - C. Ensure that adequate supplies of fuel and lubricants are on hand for emergency generator.
10. All Departments shall:
 - A. In the event of damage, prepare emergency duty rosters for essential coverage, and advise employees concerned.
 - B. Check flashlights and other emergency equipment to ensure that they are operational: procure spare batteries and lights as necessary.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Tornado/Wind Storm Disaster

FILING NUMBER:
EMG 8.00-3

EFFECTIVE DATE:
January 2017

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

- C. In the event of damage, report to the Administrator, by names, employees available for emergency duties outside assigned departments. All requests for additional employees shall be submitted to the Director of Personnel Services.
- D. When any room or area is vacated for any extended period of time, including overnight, blinds or curtains shall be closed and all electrical equipment not essential for use during storm, discontinued.
- E. Patients shall be advised that visiting hours may be restricted immediately prior to, during, or immediately after severe weather conditions.
- F. Engineering Department will issue to the department, as needed, spare batteries, flashlights and other necessary supplies and equipment.
- G. Employees should be advised that if they are required to remain on duty beyond their normal work schedule, appropriate compensation will be made.
- H. Director of Engineering will check departments during a Code White to see that proper procedures are being followed.

ACTUAL DAMAGE TO HOSPITAL:

Should the hospital sustain damage from an actual tornado or wind storm, Internal Disaster plan will be implemented.

INSTRUCTIONS FOR ALL CLEAR:

1. Notification will be from the Administrator's office by phone, messengers, or paging system, "Code White clear."
2. Switchboard will notify Ashley Health Services and ACMC Family Home Health that Code White is clear.
3. At that time, the immediate danger of severe weather will have moved on.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Tornado/Wind Storm Disaster

FILING NUMBER:
EMG 8.00-4

EFFECTIVE DATE:
January 2017

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

4. Employees having performed long, arduous hours of duty will be relieved as soon as possible.
5. Engineering Department will survey damage and prepare a report for submission to the Administrator.
6. Normal operations shall be resumed as quickly as possible.

In the event of Tornado Warning, Home Health employees who are in the office will take cover in the rear of the building near or in the restroom area until severe weather has passed. Employees who are traveling should get to a safe area until severe weather has passed. Employees should not continue to travel or try to outrun the storm.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Code White Critique Form

FILING NUMBER:
EMG 8.10

EFFECTIVE DATE:
July 2005

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

CODE WHITE CRITIQUE

Date: _____

Time switchboard was notified to call Code White: _____

Person who first learned of tornado warning: _____

Time employee learned of tornado warning: _____

Were visitors/patients in front lobby notified? Yes _____ No _____ Time: _____

Patients on 2 Center moved into hallway? Yes _____ No _____ Time: _____

CCU patients moved to Day Surgery? Yes _____ No _____ Time: _____

Non-urgent OB patients moved to desk area; infants moved to inner room of nursery?

Yes _____ No _____ Time: _____

Employees in Zone 9 moved to main building? Yes _____ No _____

Any employees in inappropriate places: _____

Power failure/switch to generator? Yes _____ No _____

Number of tornado victims brought into ER: _____

Any damage to ACMC property? _____

Time Code White called clear: _____

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Mass Casualty Plan

FILING NUMBER:

EMG 9.00-1

EFFECTIVE DATE:

February 2010

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

DEFINITION OF MASS CASUALTY:

Any situation that produces an immediate load greater than the normal (on duty) emergency department can handle. In the event of a mass casualty, the Emergency Department may use the Outpatient Clinic rooms for the patient overload.

CODE GREEN CALL:

Internal Disaster:

Common type does **not** overwhelm in house facility: mobilize and utilize on duty hospital staff. Less commonly, in house facility may be overwhelmed, and cascade call will be utilized to mobilize appropriate staff. Also, less commonly, local or county support may be necessary. Rarely, the facility may be partially or totally inoperable. This may prompt partial or complete evacuation of patients.

External Disaster:

Common type does **not** overwhelm in house facility: mobilize on duty hospital staff. Less commonly, in house facility may be overwhelmed: cascade call utilized to mobilize appropriate staff.

Mass Casualty: occurs less commonly. Utilize cascade call, as well as local, county, or state, or federal support as necessary.

MAJOR OBJECTIVES:

- Provide emergency surgical and medical care and hospital treatment for casualties without delay.
- Administer initial and continued medical care of casualties and critically ill non-casualty patients.
- Accommodate casualties to the limit of the hospital's ability to expand.
- Be as nearly self-sufficient as possible for all aspects of operation during the first 24 hours following the occurrence of disaster.
- Provide an adequate blood supply for at least 24 hours.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Mass Casualty Plan

FILING NUMBER:

EMG 9.00-2

EFFECTIVE DATE:

February 2010

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

ACTIVATION OF PLAN

When word comes to the hospital concerning a community or civil defense disaster, the call will be referred directly to the Emergency Department. As much information as possible will be obtained concerning the number, types, and severity of injured persons, location, and type of disaster, the name, telephone number and organization of the person calling. The call should then be authenticated.

If an affirmative decision is made, the Mass Casualty Plan will be activated and Code Green implemented. The Switchboard operator will immediately make an announcement on the PA system and notify the administrative person on call, and will also notify Air-Evac, Angel Flight, Med Flight, and Baptist Med Flight to be on stand by. The Command Center for the event will be located in the Board Room in Administration.

Air-Evac	800-247-3822
Angel Flight	800-372-3637
Med Flight	800-227-1000 or 800-632-5433
Baptist Med Flight	800-632-5433
Pafford Air	800-435-7663

If necessary, the administrative person on call will request the switchboard to call radio stations or local TV station and announce all off duty personnel report to work.

KAGH	870-364-2181
KHMB	870-364-4700

Immediately following the decision to activate this plan, the Administrator or designee may, at his/her discretion, notify the following:

Police Department.....	364-4131
Fire Department.....	364-2121
Medical Center of South Arkansas.....	(870)-864-3200
St. Francis Medical Center (Monroe, LA).....	(318)-327-4196
Morehouse General Hospital (Bastrop, LA).....	(318)-283-3609
Radio Station (KAGH).....	364-2181
Radio Station QLite.....	364-4700
National Guard.....	364-2023
Sheriff's Office.....	(870)-853-2040
Bradley County Hospital.....	(870)-226-3731
Drew Memorial Hospital.....	(870)-367-2411
Chicot Memorial Hospital.....	(870)-265-5351

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Mass Casualty Plan

FILING NUMBER:

EMG 9.00-3

EFFECTIVE DATE:

February 2010

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

In the event that a Civil Defense alert is broadcast in the city, all Department Heads will report immediately to the Administrator's office, whether or not they are informed by this hospital. When this alarm is heard during non-regular duty hours, all other employees will report immediately to their regular assigned duty areas. Employees not required for duty at that time will be sent home to stand by until notified to return to the hospital, or given an exact time to report for duty to relieve those employees retained on duty.

OPERATIONS:

Ambulance Reception: Reception and unloading of ambulances and other vehicles bearing wounded casualties will be done as expediently as possible to the Triage area.

Triage: The process of receiving, sorting, and classification of the injured. Staffed by a sufficient number of physicians, nurses and assistants to maintain rapid movement of casualties. Equipped with tags and skin marking pencils to designate destination of casualties.

Classification of patients:

- A. Resuscitation
- B. Emergent
- C. Urgent
- D. Less Urgent
- E. Non Urgent

In House Casualty Transport: Couriers provide a continuous flow of casualties from one casualty treatment to another.

Casualty Transport: To Definitive Care Treatment Facilities:

1. Burn Centers:
Arkansas Children's Hospital, Little Rock, AR.....(501)-370-1100
2. Pediatrics and Maternity:
Morehouse General Hospital, Bastrop, LA.....(318)-281-2431
Medical Center of South Arkansas, El Dorado, AR.....(870)-864-3200
Drew Memorial Hospital, Monticello, AR.....(870)-367-2411

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Mass Casualty Plan

FILING NUMBER:

EMG 9.00-4

EFFECTIVE DATE:

February 2010

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

RESPONSIBILITY:

It is the responsibility of key officials designated in Attachment "A" (See EMG 9.00-5) to coordinate their specific needs in regard to employees, supplies, services and equipment, with the heads of respective departments designated in the source columns. The command center will be in the Board Room in Administration, and the Administrator, or Designee will be in charge.

Medical Staff and additional Clinical Staff: Emergency credentialing of additional physicians who are not currently on staff may be necessary, and the Medical Staff Coordinator will follow procedures in Medical Staff Bylaws. Procedures for emergency credentialing of additional clinical personnel will be followed by Human Resources.

Admissions Office, Medical Records, Business Office and Accounting: will utilize that portion of their staff not assigned to "Casualty Registration: to do the following:

1. Take care of necessary medical administrative details and maintain liaison with all wards to operate a Perpetual Bed Inventory.
2. Keep the Triage Area and Recovery Room informed as to the availability of space for patients from those areas. They will also inform the Triage Area to which ward casualties for pre-operative and shock treatment should be directed after other wards become filled.
3. Act as couriers to transport casualties.

Materials Management Director: will place into effect pre-arranged plans for sources and methods of obtaining additional food and medical supplies.

Department Managers: and persons acting in that capacity are responsible to keep the Switchboard operator advised as to the local number at which they may be reached when they leave the hospital. Further, they are responsible to see that their key employees are available to them by telephone after duty hours.

Department Managers and individual employees without specific assignments in the Plan will continue to perform their normal tasks and be ready to accept special assignments or provide other services as may be required.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Mass Casualty Plan

FILING NUMBER:

EMG 9.00-5

EFFECTIVE DATE:

February 2010

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

All news media personnel will be directed to the administrative person on call.

Patients whose condition permits may be discharged to their homes to allow higher priority patients to be admitted. Such determination will be made by the physician.

Jones Funeral Home will be used as a morgue; transportation will be provided by the Funeral Home.

The Ashley County Coroner will be notified in the event of multiple deaths.

PSYCHOLOGICAL SUPPORT

Visitors can be expected to increase in number with the severity of the disaster. The majority of these will have legitimate reasons for desiring to visit the hospital, although curious onlookers may also seek entrance. Many casualties will be accompanied by friends and relatives, particularly in a large scale disaster. These visitors will be anxious and concerned, and their feelings must be respected, as the situation will permit. However, they must not be allowed to disrupt the disaster functioning of the facility. A visitor's reception area will be set up in the main lobby. The local pastors will be utilized as liaison between the visitors and Social Services to determine if particular patients have been admitted, and to utilize volunteers of the hospital in escorting visitors to beds of critically ill patients, etc. Normal visiting hours on the wards may be suspended or kept to a minimum (one or two), and visitors may be escorted to the patient by volunteer personnel.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:

Mass Fatality Plan

FILING NUMBER:

EMG 9.01

EFFECTIVE DATE:

February 2010

APPLIES TO:

All Departments

APPROVED BY:

Safety Committee

PURPOSE:

A mass fatality incident (MFI) results in a surge of deaths above what is managed by normal operations at Ashley County Medical Center. In the event of a public health emergency or major disaster, the possibility of mass fatalities exists. In such a case where there are a large number of fatalities, additional assistance can be requested by the Ashley County Office of Emergency Management.

PLAN:

In the event of a mass fatality within the hospital, Administration is to be notified. If the processing of the deceased can be managed by the local funeral homes, existing procedures for deceased patients are to be followed.

If the number of fatalities exceeds the capacity of the local funeral homes, assistance can be requested by notifying the Office of Emergency Management (day - 870-853-2070; after hours 870-473-5226; cell 870-831-0380). The Office of Emergency Management (OEM) will obtain assistance through state and federal agencies, and will notify Kenyon International for assistance if needed.

If there is a delay between the time assistance is requested and their arrival, Jones Funeral Home of Crossett, Jones-Hartshorn Funeral Home of Hamburg and Cromwell Funeral Home of Hamburg have agreed to assist in the processing and storage of the remains until the arrival of state assistance, or there is no longer a need for their assistance. ACMC has Memorandums of Agreement (MOA) from each funeral home.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Attachment A

FILING NUMBER:
EMG 9.05

EFFECTIVE DATE:
July 2005

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

ACTIVITY	LOCATION	KEY OFFICIAL	SUPPORT PERSONNEL	PERSONNEL SOURCE
Triage	Outside Entrance to Emergency Department	DON designee	1 Physician 1 RN	Nursing Service
Emergent	Emergency Department	DON designee	4 Physicians 4 RNs 4 LPNs	Nursing Service
Urgent	Emergency Department	DON designee	2 Physicians 2 RNs 2 LPNs	Nursing Service
Non-Urgent	Outpatient Department	DON designee	1 Physician 1 RN 1 LPN	Nursing Service
First Aid	Conference Room	DON designee	2 LPNs	Nursing Service
Registration	Emergency Department Registration Area	Admissions Coordinator	3 Clerks	Admissions Personnel
Surgery	Surgical Suite	Chief of Surgery	Surgery Personnel	Nursing Service
Personnel Pool	Hospital Dining Room	Director of Personnel	Housekeeping Nursing Service Administration	Same
Traffic (Outside)	Entrance to Hospital	Director of Engineering	Engineering	Engineering
Traffic (Inside)	Emergency Department	Security	Runners	Staff
Information Control	Administration	Administrator or Designee	Business Office or Personnel	Administration
Morgue	Jones Funeral Home Patient Room as available	Jones Funeral Home	Jones Funeral Home	Jones Funeral Home
Visitors	Front Lobby	Local Pastors	Pastors	Hospital Auxiliary
Critical Care PACU	SCU	DON designee	1 Physician 1 RN 2 LPNs	Nursing Service
Couriers	In House	DON designee	Available Personnel	Accounting Business Office

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Alternate Care Site Plan

FILING NUMBER:
EMG 10.00-1

EFFECTIVE DATE:
February 2010

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

In the event of the hospital becoming contaminated, structurally unsound, or filled to capacity without outside assistance from other facilities, an alternate care site will be established. The temporary site will be established at the First Baptist Multi Ministries Building on Pine Street or the National Guard Armory on N. Florida Street, or other location. The decision as to what site is to be used will be made by the CEO or the Incident Commander during an emergency or disaster event based on the availability of the sites.

All elective surgeries and outpatient services will be suspended during this time.

Supplies needed to operate the ACS will be transported by Engineering with the assistance of any personnel and any personal vehicles available.

Supplies Needed for Nursing:

Dinamap	Foley catheter
Thermometer	Bed pans
Stethoscopes (2)	Bath basins
Crash cart	Soap
Medication cart	OB pads
Gloves	Bed pads
Alcohol pads	Bedside commodes
Alcohol gel	Trash cans/Liners
2x2s	Red bags
4x4s	Lab Bio Hazard bags
Band-aids	Urine cups
Syringes with needles	Nurses' notes
Sterile Gloves	Lab order forms
Portable oxygen with tubing	Linen cart with all linens
Sharp containers	Cleaning supply cart
Tape	Dirty linen cart
IV start kits	Cots
IV jelscos	IV poles
NS flushes	IV tubing
IV Fluids	Water pitchers
Tourniquets	Oxygen tanks
Blood tubing	Oxygen tubing & various masks sizes
Progress notes	Ambu bags
Lab supplies for phlebotomy	Respiratory equipment for respiratory treatments
Yankaur tips	Medication cups
1 Wheelchair	Glucometer with supplies
Juice/milk/other patient refreshments	Partitions

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Alternate Care Site Plan

FILING NUMBER:
EMG 10.00-2

EFFECTIVE DATE:
February 2010

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

Clerical Supplies Needed :

All patients being transferred to the ACS from ACMC will be admitted prior to transfer. They are to have an arm band on with proper identification and all paperwork; including orders, are to be sent with the patient. No patients will be admitted directly to the ACS unless directed to by the Incident Commander. A daily census will be faxed to the ACS every am for proper patient tracking.

Supplies needed:

Copy Machine

Fax

Ink pens

Daily census.

ER Admissions has 100 folders set aside for disasters. Each folder includes: Steps for Registration, Patient Registration form, Patient's rights to be signed, and a sheet of pre-numbered labels with armbands attached.

Staffing Assignments:

Nursing staff will be assigned by the DON or Staffing Coordinator.

Clerical staff will be assigned by the Admissions Director.

Housekeeping will assign one or more employees to ACS for day and evening shift.

Engineering Director will assign a minimum of one Security Officer to the ACS at all times unless the local Police Department is able to assist and can post one Police Officer to the ACS.

In an emergency, an ACS may be established to accommodate an excess of patients that can not be transferred to other facilities. The patients that are to be relocated to the ACS are to be non-critical and will be determined by the Physician on call.

Patient Care:

Patient safety is to be maintained at all times during transfer to and from the ACS and while being treated at the ACS. All standing Policies and Procedures are to be followed as close as possible.

Visitors will be limited to immediate family only. Visiting hours will be followed and are subject to change under the direction of the Charge Nurse or Incident Commander.

Pharmacy

Pharmacy personnel will have medication for each patient separated and labeled per hospital Policy and Procedure before delivery to the ACS every morning and on an as needed basis. Medication will be transported to the ACS by an ACMC employees only unless brought directly from local pharmacy.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Alternate Care Site Plan

FILING NUMBER:
EMG 10.00-3

EFFECTIVE DATE:
February 2010

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

Laboratory:

All laboratory specimens will be collected per the nursing staff unless lab is able to assign an employee to the ACS. All specimens will then be labeled and placed into a bio-hazard bag and sent to APMC via a hospital employee or a volunteer. Lab results will be faxed to the ACS.

Dietary:

Individual serving size refreshments such as juice and milk and snacks will be sent to the ACS from the dietary department. Meals will be prepared at APMC and delivered to the ACS per hospital personnel or local volunteers.

Radiology:

Only necessary X-rays will be performed while the patient is being cared for at the ACS. If an X-ray must be done, the patient is to be transported to APMC Radiology Department via ambulance. The patient is then to be transported back to the ACS unless otherwise ordered by the physician.

Housekeeping:

A minimum of one employee from housekeeping will be assigned to the ACS for the 7am – 3pm shift and the 3pm – 11pm shift. A covered linen cart containing all needed linens, towels, wash clothes, blankets, and pillows will be delivered to the ACS per hospital personnel. Carts will be restocked as needed per housekeeping personnel. Cleaning supplies will be collected by housekeeping and delivered to the ACS. Current hospital Policy and Procedure will be followed with regard cleaning and disinfecting of the ACS.

Respiratory Therapy:

Respiratory therapy department will assign one employee to the ACS. All treatments and EKGs will be done per RT.

Communications:

Due to limited phone lines at the ACS, communication will be maintained through the use of fax, cell phones and radios with a designated radio frequency between the ACS and APMC.

**ASHLEY COUNTY MEDICAL CENTER AND ASHLEY HEALTH SERVICES
EMERGENCY PREPAREDNESS MANUAL**

TITLE/DESCRIPTION:
Alternate Care Site Plan

FILING NUMBER:
EMG 10.00-4

EFFECTIVE DATE:
February 2010

APPLIES TO:
All Departments

APPROVED BY:
Safety Committee

Accounts/Patient Charges:

The CFO shall establish a mechanism to account for all costs associated with the ACS and shall, after the ACS is closed, submit a complete report of such cost to the CEO.

Transportation cost to and from the ACS will be the responsibility of ACMC and will be charged to patient accounts and billed for by ACMC.

Patient charges for services provided in the ACS will be maintained in the same manner as if the services were provided at the main hospital.

Closing of the ACS:

The ACS will be maintained until directed to close by the Incident Commander. All patients are to be transferred to ACMC via ambulance. All equipment is to be cleaned prior to returning to ACMC. All patient information is to be sent to ACMC while maintaining confidentiality.