Emergency Management

Corporate Safety

This self-directed learning module contains information you are expected to know to protect yourself, our patients, and our guests.

Target Audience: All Employees

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Emergency Management

Instructions:

This module introduces important general information for emergency management. After completing this module, contact your Supervisor to obtain additional information specific to your department.

- Read this module.
- If you have any questions about the material, ask your Supervisor.
- Complete the Post-Test at the end of this module and give it to your Supervisor.
- The Job Aid on page 18 may be customized to fit your department and then used as a quick reference guide.
- Record the date you completed the module on your Employee Annual Continuing Education Record.

Learning Objectives:

When you finish this module, you will be able to:

- Recognize the CHS Emergency Code and Conference symbols and describe each.
- Define the terms internal and external disasters and provide examples of each.
- Identify where you can find more information about your facility and department specific polices and procedures.
- Understand the “Priorities” applied to the emergency codes and/or conferences.
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Introduction

Carolinas HealthCare System (CHS) uses a uniform system of “Codes” and “Conferences” to alert staff to emergency situations in their facility. This module contains important general information concerning Emergency Codes and Conferences used at CHS facilities. These codes allow communication of emergencies via overhead/voice paging systems (where available) without alarming patients and/or visitors, thus making it easier for employees to respond quickly, in a smooth and orderly manner.

CHS facilities follow the facility Emergency Operations Plan or Corporate Emergency Operations Plan (EOP). Some departments may have event specific response plans. This module is general in nature and does not contain all facility and departmental procedures. Detailed information may be obtained from facility and department specific policies and procedures.

Emergency Management

*Emergency Management is the ability of an organization to prepare for, respond to, mitigate against, and recover from an emergency or disaster outside the facility, in the community, or inside the facility.*

The community expects CHS facilities to provide healthcare services to the Charlotte Metro region and surrounding areas with minimal disruption in the event of an emergency or disaster.

All CHS employees must know their assigned roles and perform them efficiently. A carefully planned and fully implemented Emergency Operations Plan is the key to saving lives.

Emergency Operations Plan

The Emergency Management Plan (EMP) is a document designed to guide the facility activities through all phases of emergency management: mitigation, preparedness, response, and recovery. It contains operational details to guide the response to an incident.

Section 10 of the CHS Safety Management Program Manual (SMPM) is the EOP and is available on-line via Synapse. The on-line manual contains the CHS Corporate (system-wide) plan and the major acute care facility-level plans (when available). **Facility level plans should be used as the first resource during the response.** Facility and departmental plans may also be available for the acute care facilities. Ask your Supervisor which plans you should be using within your specific department.
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Hospital Incident Command System (HICS)

Incident Command: An organized process of command and control for managing the hospital during an emergency event. Incident command does not change the policies or procedures we use during an emergency response.

CHS Perspective: CHS facilities use HICS, the Hospital Incident Command System. This is a standard system used in hospitals nationwide. Incident command will be used to manage every emergency, but in smaller events it may not be visible to most staff members. In larger scale emergencies, Incident Command will be established and managed in the Hospital Command Center (HCC) at each facility. The HCC is a large meeting room with communications equipment, computers, and other resources. Designated individuals will be based in the HCC.

Each hospital has an organizational chart that designates positions to be filled, as necessary, for the management of the particular event. Certain individuals are designated, or may be asked, to fill a role on that chart. These people will be given a “Job Action Sheet,” which is essentially a checklist of responsibilities, to complete. These roles fit into a specific reporting structure on the chart. Key individuals will wear a vest identifying their position.

Most hospital staff members will not be asked to fill one of these designated roles. They will continue to perform their regular (or alternate) duties as designated by their Supervisor. They may be asked to report to a Labor Pool for alternate assignment to assist with the emergency.

Events that involve more than one CHS hospital facility may include activation of the CHS Corporate Command Center (CCC) to coordinate the system response with respect to policies & strategies, communications, resource management, and information management. The CCC provides corporate oversight to all of the HCCs, but does not replace them.

The following are types of plans for addressing emergency situations:

1. External disaster plan,
2. Internal disaster plans, and
3. Department-specific disaster plans.

Types of Events

Events can be described as external and/or internal, depending on their origin and impact on the community and/or directly on CHS operations or facilities.

External
External disasters are events outside of the hospital which cause serious injury to multiple persons at one time or which cause a serious impact on hospital operations. Examples include:

- Earthquake
- Flood
- Severe weather or other natural disasters
- Multiple car accident
- Large-scale power outage
- Train collision or derailment
- Off-site hazardous chemical spill resulting in mass casualties
- Chemical, Biological, Radiological, Nuclear, or Explosive (CBRNE) incidents arising as acts of terror

These events may have devastating effects on the community, as well as on the ability of healthcare facilities responding to them. CHS has emergency management programs to manage the consequences of naturally-occurring disasters or other external emergencies which could potentially disrupt the facility’s delivery of patient care services.

**Internal**

Internal events are classified as a planned or spontaneous emergency, disaster, catastrophic, or crisis event that, originates or occurs, within CHS. Examples may include:

- Internal utility failure: loss of electricity, natural gas, water, etc.
- Internal communication outage: computer, telephone, or paging system failure
- Bomb threat
- Mass Casualty Incident (MCI) resulting in Patient Surge within CHS
- Facility fire
- Workplace violence: Co-worker, family member, patient, or visitor

Both **internal** and **external** events may have devastating effects on the community (**external**), as well as on the resources and capabilities of healthcare facilities responding to them (**internal**). CHS maintains emergency plans to manage the consequences of man-made and naturally-occurring emergencies or other emergencies (**external**) which could potentially disrupt the facility’s services (**internal**), as well as respond to and recover from events that originate or occur from within CHS (**internal**).
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Emergency Codes and Conferences

CHS adopted the following codes and conferences for emergency planning:

**Code Black** – Utility outage (power, water, natural gas, steam, etc.)

**Code Brown** – Medical gas failure (Oxygen, vacuum, air)

**Code Red** – Fire, odor of smoke, visible smoke

**Code Orange** – Chemical / hazardous material spills or releases which exceed the capabilities of staff in the area

**Code Yellow** – Suspicious object / package – bomb threat

**Code Green** – Severe weather or natural disaster

**Code Pink** – Infant and/or child abduction

**Code Gray** – Workplace violence

**Code Blue / Pediatric Code Blue** – Medical emergency – adult / pediatric

**Code Triage** – External mass casualty event – multiple victims/ influx of patients
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Emergency Codes (continued)

Telephone Conference – Telephone service has been disrupted

Paging Conference – Numeric and/or alpha-numeric paging system is disrupted

Computer Conference – Internal computer network or system has been disrupted

Nurses Conference – Patient is missing

Code Priorities

Outside agencies (Fire, Police, MEDIC, Emergency Management, etc.) maintain multi-county response plans describing events by a Priority. The priorities allow employees to speak in the same terms as emergency responders in the community. As the Priority number decreases, the potential impact of the emergency event intensifies. Codes and Conferences are assigned a Priority according to suspected patient care impact. There are four Priority levels, ranging from Alert to Level 1 (the highest Priority).

• **Alert**
  Facilities maintain a heightened state of readiness and initially prepare for an event. Activate intra-facility communication to enhance readiness and outreach to the community, as needed.

• **Priority 3**
  Minor disruption of normal operations with no effect on patient care.

• **Priority 2**
  Some disruption of patient care. The appropriate code or conference may be paged accordingly. The Administrator On Call (AOC), referenced in the incident command structure, is contacted to assess resource needs, in anticipation of Hospital Command Center activation.

• **Priority 1**
  Major event scenario with significant disruption in services and/or patient care. HCC is activated.
Overhead Paging

Paging operator (communications) announces voice pages on the overhead paging system. The operator repeats three (3) times to assure they are heard and understood. The operator also announces the “All Clear” page that should follow once the event ends.

Procedures at the Corporate and Facility levels address each of the Codes and Conferences listed on the following pages.

Please note not all events will be voice paged. Voice paging takes place to notify employees to implement departmental procedures in response to the event.

If there is no overhead paging system for your facility, check with your manager to find out how emergency alerts will be made. If you have trouble hearing the overhead page (i.e. it is not loud enough, the sound is muffled, speaker is not working, etc) report this immediately to the Support Center at 704-446-6161 or 866-446-6161.

Training events will end with “Code ________ Drill all clear”

Code Black – Utility Outage

Failure or disruption of utilities such as electrical service, water, natural gas, steam, etc. could have a very significant impact on departmental operations and the health and safety of patients, visitors and/or staff.

Employees should discuss with their managers their departmental role in the event of a utility failure or disruption.

Code Black Protocol (There may also be departmental protocols to support the facility response to utility failures.)

- Learn your facility procedures for reporting utility failures.
- Notify your Supervisor and co-workers of the utility failure.
- Contact the CHS System Support Center at 704-446-6161 or 866-446-6161.
- Ensure patients on critical life support equipment are being safely cared for (equipment plugged into red outlets, etc.).
Code Brown - Medical Gas Failure

**Code Brown Protocol:** (There may be both facility and departmental protocols to be followed in the event of a medical gas failure)

- Familiarize yourself with measures for mitigation, preparedness, response, and recovery for the loss of medical gases in your facility.
- Learn and follow your facility procedure to report a medical gas failure.
- Understand your specific response procedures.  
  → Contact the emergency operator for your respective facility.
- Ask your supervisor if you have any questions.

Code Red – Fire

**Code Red and Fire Safety** are discussed in more detail in the Mandatory Module – *Fire Safety in a HealthCare Facility.*

The response to a Code Red condition will depend upon the work setting. In hospital and ambulatory surgery settings, upon hearing a Code Red page or fire alarm employees should stay in place until the “all clear” code is paged and follow departmental and facility procedures to safeguard patients and/or visitors.

In clinics and office settings, employees should follow the facility’s building emergency action plan and evacuation procedures. To report a fire or smoke conditions:

1) Use the pull station if present.
2) Follow your facility’s procedures to report the fire

**Code Red Protocol:** (There may also be facility and departmental protocols to support code red response.)

- CHS uses **RACE** to outline the response to a fire:
  1.  **R**escue patients and personnel from the immediate fire area.
  2.  **A**larm: activate the fire alarm and notify others in the affected area to obtain assistance.
  3.  **C**ontain the fire and smoke by closing all doors.
  4.  **E**xtinguish the fire if it is safe to do so.
     a.  Fire extinguishing methods / techniques  
        **Note:** the acronym **PASS**
        •  **P**ull the pin;
        •  **A**im the extinguisher;
        •  **S**queeze the handle;
        •  **S**weep the extinguisher’s nozzle back and forth across the base of the fire.
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- **Code Red Response**
  → In the area specified by the code, employees should follow the departmental specific fire plan. The fire alarm may continue to sound until it is determined that it is safe to return to the area. Note: Some fire alarms will not sound continuously; however, strobe lights will flash until the building is safe, as announced by “Code Red All Clear” on the overhead page. Check your facility’s Fire Safety Plan for more details.

- **All Clear**
Never enter a building if the fire alarm is sounding or the strobe lights are flashing. It is safe to enter the building ONLY after the termination of all audible and visual alarm signals or notification from a designated hospital representative. The only exception to this rule is staff members performing duties critical to patient care.

**Code Orange - Chemical Spill/Release**

Read and understand your department spill clean up procedures BEFORE an emergency occurs!

There is always the possibility of accidentally spilling a hazardous material. If a spill occurs, the material must be cleaned up properly to ensure no harm occurs to the environment, humans, or property. One source of information for spill cleanup procedures is the MSDS. It will also provide telephone numbers to call, if additional assistance is needed. If you work with a chemical, make sure you know where your departmental MSDSs are located (usually located in the Safety Management Program Manual (SMPM) or in a specific notebook in your department).

For a chemical spill, notify your supervisor immediately. Clean up the spill yourself, only if you have proper training and PPE.

*General* procedures can be found in the Code Orange policy. Follow department specific procedures when available.

Personnel working with the hazardous material when a spill occurs are expected to contain and clean up the spill, as long as:

- The identity of the spilled material is known;
- Staff are familiar with the substance;
- The quantity of the spilled material is manageable;
- Staff are familiar with spill management procedures for the material; and
- Appropriate PPE and spill management supplies are available.

Find *general* procedures in the Code Orange policy. Follow department specific procedures when available.
If any of the above criteria are not met (i.e. spill is too large to manage safely, spilled material is extremely dangerous, or the identity of the spilled material is unknown), the employee must contact their supervisor or designee immediately and follow the facility’s internal disaster plan for a “Code Orange.”

**Facilities do NOT have spill response teams.** CHS Corporate Safety calls an emergency spill response contractor if needed.

Do not contact the Environmental Services Department to perform initial spill cleanup. Instead, Environmental Services should be contacted, once the spill has been cleaned up, and only general housekeeping services are required to return the area to normal, working condition.

**Code Yellow - Bomb Threat / Suspicious Package**

Code Yellow Bomb Threat/Suspicious Package/Bomb Threat is discussed in more detail in the Security in the Healthcare Setting module.

- **As a reminder, if you discover a suspicious letter or package:**
  - Treat the letter or package with care. **DO NOT SHAKE OR BUMP UNNECESSARILY!**
  - **DO NOT** tear open, smell, taste, or touch the item unnecessarily.
  - Isolate the item and look for any additional signs.
  - If additional signs are present, or the package seems suspicious, treat the letter or package as suspect and immediately call for assistance.

**Code Yellow Response Protocol:**

- **If a caller makes a bomb threat:**
  1. Remain calm, and listen carefully as you write down information about the call:
     - a. Do not interrupt the caller
     - b. Notify your Supervisor or someone in your area by prearranged signal (if possible) while the caller is still on the line.
     - c. Obtain as much detail as possible (e.g. specific location on campus/in building, clues to callers identity such as male/female, adult/juvenile) etc.
  2. Notify Security and/or contact police per your facility policy.
Departmental Search Procedures

- Ensure that patients and visitors are not unduly alarmed.
- Do not broadcast that a threat has been received except to direct other employees to check their work areas. Remember that you know your area(s) better than anyone else and will be most likely to recognize a suspicious package.

Code Pink – Infant/Child Abduction

Infant/Child Abduction is discussed in more detail in the Code Pink: Infant/Child Abduction module.

It is extremely important for employees to know their specific roles in facility and departmental plans in responding to missing/abducted infants, or children (under 18 years of age).

All staff must recognize the Maternity Department and Levine Children’s Hospital are security-sensitive area and that access to the department/hospital is limited to authorized staff and visitors only. When entering and exiting the maternity department, be mindful to prevent anyone “piggybacking” or entering along with the authorized person.

Code Pink Protocol:

- Upon hearing a Code Pink, all healthcare facility personnel are to immediately stop all non-critical work.
- Cover all interior stairwell doors, elevator areas and exit doors.
- Staff members who are outside their own department area are to go to the nearest exit.
- When a second person reaches an exterior door, one of them is to exit the healthcare facility to watch for suspects leaving the facility grounds, or entering a car.
- If possible, close exits to parking lots (i.e., gate arms, doors, etc.) and record the license number of any vehicles leaving the premises.
- Where specific facility and/or departmental plans exist, learn and follow those plans.
Code Gray: Workplace Violence / Security Alert

Code Gray is discussed in more detail in the *Security in the HealthCare Setting* module.

There are various levels of workplace violence. Most levels are included in one of three categories:

- Harassment or actions designed to intimidate the intended victim. This is considered a non-lethal form of workplace violence. This is the most common form, and may be harmful to both the victim and work team morale.
- Threats or declarations of intent to inflict injury are the second most common form of workplace violence. Threats do not have to be direct, and may be as subtle as body language used to intimidate a co-worker. Threats may be veiled ("Sometimes things happen to people"), conditional ("If you…, then I will…"), or direct.
- Assaults or the use of physical force against another with the intent to inflict injury are the third and most dangerous of these three.

Code Green - Severe Weather/Natural Disaster

Where advance warnings are provided for impending weather conditions (e.g. the National Weather Service issues an Advisory, Watch, or Warning) in preparation for a potential event, a Code Green Alert may be initiated. As the weather conditions worsen, Code Green Priority 3, 2 or 1 may be declared.

**Code Green Protocol:**

- Employees are expected to make all reasonable efforts to report to work.
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**Code Blue/Pediatric Code Blue – Medical Emergency**

Code Blue is a clinical code which deals with Cardiac or Respiratory Arrest. The patient age-specific code names are as follows:

- Code Blue – Adult Cardiac or respiratory Arrest
- Pediatric Code Blue - Pediatric Cardiac or respiratory Arrest

**Code Blue:**

- If your job assignment requires you to participate and/or support Code Blue responses, you will receive specific training within your facility/department.
- If you are not directly involved in the treatment or support of Code Blue events, stay out of the way and do not interfere with emergency responders.
- If you have not been instructed to do so, do not respond or interfere with a Code Blue.

**Code Triage – Mass Casualty Event**

Employees must learn and understand departmental and job responsibilities in the event of a Code Triage involving multiple casualties.

Each department within the healthcare facility is to develop a disaster specific plan which supports the overall Emergency Operations Plan.

The various priority levels of a Code Triage serve as a general guide to identify the community’s involvement in the situation. The actual situation and direction from the CCC or HCC may require variation in the responses outlined in this module.

**Code Triage Priorities and Indications:**

- **Stand-by/ Alert**
  - Standby status.
  - Warnings of impending Chemical, Biological, Radiological, Nuclear, Explosive (CBRNE) incident or other condition called for a heightened state of readiness.
  - Continue with normal operations.
- **Priority 3**
  - Expect minor disruption of normal operations with no effect on patient care.
  - Handled through normal facility operations.
- **Priority 2**
  - Taxes multiple departments of the facility and may require the involvement of other facilities within the local area.
  - Hospital Command Center (HCC) and/or CCC may be established.
- **Priority 1**
  - Overwhelms hospital resources.
  - Requires resources from outside the local area.
  - HCC and/or CCC are established.
Each department within the facility is required to have a Departmental Emergency Disaster Response Plan. These plans shall include at least two evacuation routes, and identify the responsibilities per job title during different types of disasters, such as fire, flood, earthquake, etc. All employees are to be familiar with the evacuation routes and responses during the Code Triage. In order to provide and maintain a safe, functional and effective environment, it is essential to furnish the specific protocols necessary to prevent injuries or illnesses from occurring and/or deal appropriately with emergencies.

It is possible to identify initial actions/responses and secondary actions/responses. For example, an initial response to Code Triage would be to activate the Hospital Command Center (HCC). A secondary response would be to review current resources, manpower and materials, and complete a disaster assessment and status report. An employees role in emergency response may be significantly different than normal work assignments. Remember to remain flexible.

The Three Communication Conferences

The three communications-related conferences are:

1) Telephone Conference
2) Paging Conference
3) Computer Conference

The paging operator will announce disruptions to these communications links. Employees must follow specific facility and department communications and work plans. Departments should phone or send runners to reach or locate people rather than rely on pagers which may not be functioning. Employees should also realize the computer system and/or network may not be available and may significantly impact how the work area functions.

Communication Conference Protocols:
- Contact the Support Center: for Telephone conference use a “white phone,”
  - From inside Mecklenburg County – (704) 446-6161
  - From outside Mecklenburg County – (866) 446-6161
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Nursing Conference – Missing Patient

It is extremely important for each employee to know their specific role in the facility and departmental plans to respond to a missing patient event.

General Nursing Conference Protocol:

• Upon hearing that a Nursing Conference has been called, all healthcare facility personnel are to immediately stop all non-critical work.
• Follow your department specific procedures
Where is the Safety Management Program Manual located in your department?

______________________________________

What type of information is found in this manual regarding Emergency Management?

______________________________________

What are your department’s responsibilities in the event of an emergency event?

______________________________________

What is your department’s response to the following?

Code Triage __________________________
Code Black __________________________
Code Red ____________________________
Code Green __________________________
Code Brown _________________________
Code Gray __________________________

In the event of evacuation during an emergency event, where do personnel in your department report to confirm that you are out of the building?

______________________________________

Is there a white emergency phone in your department?

Yes or No

If yes, what is the procedure for using the white emergency phone?

______________________________________
Circle the correct answer.

1. (Circle One) True or False
   Code Yellow deals with chemical spills.

2. (Circle One) True or False
   The potential impact of emergency events intensifies as the Code priority number decreases.

3. (Circle One) True or False
   When you answer your departmental telephone, the caller announces that there is a bomb in your workplace. You should end the call immediately and notify your Supervisor.

4. Where would an employee find specific policies and procedures for a Code Pink?
   a. The online CHS Safety Management Program Manual
   b. The facility specific Safety Management Program Manual
   c. The Departmental Policies and Procedures
   d. The Emergency Operations Plan

5. (Circle One) True or False
   A Patient Conference will be paged if an adult patient is not in the room to which they have been assigned.

6. During a Code Pink, you should do all of the following except:
   a. Immediately stop all non-critical work
   b. Go to the nearest exit
   c. Close exits to parking lots and record the licenses of any vehicles leaving the premises
   d. Lock all doors in the department

7. Which of the following would define a Code Brown? Failure or disruption to:
   a. Water supply or distribution system
   b. Medical gas (Oxygen)
   c. Natural gas supply or distribution
   d. Electrical power
8. Which of the following is not considered a Code Triage?
   a. Explosion
   b. Multiple vehicle collision
   c. Bomb threat
   d. Passenger train wreck/derailment

9. When a code or conference is announced on the voice paging system, how many times will the announcement be repeated?
   a. 1 time
   b. 2 times
   c. 3 times
   d. 4 times

10. (Circle One) True or False
    If an employee is at home during a severe weather emergency, it is unreasonable for the manager/supervisor to ask them to report to work on time as scheduled.

11. During a Code Red employees should follow RACE. What does RACE stand for?
    a. Run And Catch the Elevator
    b. Rescue And Call the Emergency
    c. Rescue, Alarm, Contain, Extinguish/Evacuate
    d. Respond, Aim the extinguisher, Call the code, Evacuate

12. If you find a suspicious package you should:
    a. Call Corporate Safety or the Employee Safety Line and carefully open the package while on the phone.
    b. Call Corporate Service Dispatch and gently shake the package listening to hear if it rattles or is ticking.
    c. Call Security and/or contact police per your facility policy.
    d. Open the package and take it to your supervisor.

13. What is the Hospital Incident Command System (HICS)?
    a. A new item on the list of codes and conferences.
    b. Changes our previous emergency response procedures.
    c. The system to manage the hospital in an emergency.
    d. The corporate operational plan to respond to emergencies.

14. Under incident command, most hospital employees will:
    a. Follow a job action sheet.
    b. Do their regular job as directed by their supervisor.
    c. Fill a role on the organizational chart.
    d. Wear a vest
15. **The document designed to guide the emergency response is:**
   a) The Emergency Operations Plan (EOP)
   b) The Code Orange Policy
   c) The Facility Emergency Management Plan
   d) The HICS Guidebook

Score: __________

Manager’s Initials: __________

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