

# Crisis Response Guidelines

**Denver Surgery Center**

**1830 Franklin St. Suite 200 Denver, CO**

Guidelines created: 03/30/2018

**Call 911 for Law Enforcement**

**Call 911 for Fire or Medical Emergency**

Cut on dotted line. Layer pages consecutively and bind at top.

Become familiar now with the procedures and guidelines contained in this booklet. When most disasters occur, there is no time to read instructions. The actions taken by building occupants will vary depending on the type of emergency identified. Some emergencies will require staff to take shelter within the building, while others will require staff to evacuate the premises. Please review the "Emergency Meeting Locations" tab at the end of these guidelines.

**Denver Surgery Center**

1830 Franklin St. Suite 200

Denver, CO 80218

720-996-4500

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### **Chain of Command**

The center Administrator is responsible for both the immediate and long-term response to an emergency at Foothills Surgery Center. If the center Administrator is absent, Clinical Director is responsible for emergency decision making.

**Chain of Command:** Administrator→ Clinical Director→Quality/Risk Manager→ Medical Director

### **Evacuation Assistance**

Facility Administrator is responsible for initiating emergency evacuations. Clinical Director is responsible for assisting the Administrator with emergency evacuations. Employees should always consider patient and visitor safety. Patients and visitors should be notified of the need to evacuate and escorted to the appropriate area. Front desk personnel should notify anyone in waiting areas of the need to evacuate and direct them to the safest exit.

### **Crisis Communications**

The emergency communications contact (front desk staff/reception) serves primarily to assist the scene manager in making notifications and announcements.

# **STAFFING RESPONSIBILITIES**

Cut on dotted line. Layer pages consecutively and bind at top.

**Police.....911**  
**Fire (Hazmat) and Medical (Code Blue) Emergencies.....911**  
Denver County Emergency Management.....720-865-7600  
Colorado Office of Homeland Security ..... 720-852-6600  
Denver Police Department (District 6) (*non-emergency*).....720-913-2800  
Colorado Poison Control Hotline ..... 1-800-222-1222  
St. Joseph's Hospital ..... 303-812-2000  
Security.....720-777-6698

**Key Telephone Numbers for Denver Surgery Center**

Main Office.....720-996-4500  
Jebby Mathew (Administrator)..... 832-472-2028  
Lisa Fagan (Clinical Director).....415-470-1224  
Amanda Eddleman (Business Office)..... 330-316-7668

# EMERGENCY TELEPHONE LIST

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**If a spill occurs outside the Denver Surgery Center and time permits:**

- If directed by law enforcement personnel, evacuate the building uphill and upwind. Do not go to your designated emergency meeting place unless directed, because those areas may be impacted by the spill.
- Stay tuned to local AM/FM radio for emergency information.

**If a spill occurs outside the Denver Surgery Center and time does not permit:**

- Shelter in place in the Surgical Center. Move to interior rooms and assist patients and visitors to do the same.
- Close and lock all exterior windows and doors. Close all window shades, blinds and curtains.
- Turn off all fans, heating and air conditioning systems in your area.
- Listen to local AM/FM radio/television for updated information and further instructions, including whether to evacuate and go outdoors.

**If the spill occurs inside the Denver Surgery Center:**

- Call **911 immediately (Fire/Hazmat)**.
- Provide a concise location about where the incident occurred and if possible, identify the material that has spilled.
- Do not attempt to clean up the spill. Denver Fire will contact appropriate personnel to assist in cleanup.
- If instructed to do so, evacuate the affected areas of the building. Move people outside, uphill and upwind.
- Shut down ventilation services in your area. Contact the Administrator at 832-472-2028 for HVAC or custodial needs.

# HAZARDOUS MATERIAL SPILL

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**Potential disturbances:**

- A gunman, hostage situation, bomber, strange person or suspicious or violent behavior by an individual or group.
- If you believe that someone is acting suspiciously, or is in an unauthorized area, don't hesitate to contact SECURITY.
- Notify the Administrator only after Security has been contacted to investigate.
- All staff should be aware of disturbances by patients or visitors. Particular attention should be paid to: disruptive, loud, or angry individuals.
- Take notice of boxes or packages left unattended or left behind, or that were not in the area when you left.

**If a disturbance appears to threaten the safety of building occupants:**

- Call **911 immediately**.
- Give detailed information to emergency personnel about:
  - Number of persons involved.
  - Description of hostage taker.
  - Weapons displayed.
  - Threats made.
- Lock doors, if possible and appropriate, to isolate the disturbance.
- Take steps to protect your own safety and the safety of others.
- Do not attempt to negotiate or argue with the individual.
- Remain calm.

# INTRUDER OR DISTURBANCE

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### Tornado watches and warnings:

- A tornado *watch* means that weather conditions are favorable for the formation of a tornado. A tornado *warning* is issued when a tornado has actually been sighted in the surrounding area.
- Emergency broadcast system is activated when there is a tornado warning. If you hear the EBS warning, take cover inside and tune into your local radio or television stations for further instructions.
- Emergency siren does not sound for the entire Denver area. Do not assume that the danger has passed due to the lack of siren sounding. Wait for an “all clear” message from agency personnel or your local media.

### If a tornado warning has been issued and you are INSIDE:

- Stay inside. Stay away from outside walls, windows, mirrors, glass, overhead fixtures, and unsecured objects such as filing cabinets or bookcases.
- If possible, interior corridor, or room or office without windows and crouch low with your hands covering the back of your head and neck.
- Emergency meeting location in case of a tornado warning will be in the corridor/hallway.
- If requested, assist patients and visitors to the safest area.
- Do not leave the shelter area until after the storm is over. Continue to monitor the weather via radio or television until the tornado watch has been lifted for your area.

### If a tornado warning has been issued and you are OUTSIDE:

- Look for a nearby safe structure in which to take shelter.
- If you are in your car, get out of it. Never try to outrun a tornado.
- If there is no shelter, lie down flat in a low area (such as a ditch) away from trees, with your hands covering the back of your head and neck.

# TORNADO/SEVERE THUNDERSTORM

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**If you are inside during an earthquake:**

- Immediately take cover** under a table or desk or stand in a doorway. Do not travel long distances to take cover.
- Hold on to the desk or table and be prepared to move with it during the shaking.
- In areas where cover is not available, kneel at the base of an interior wall, facing the wall with your head down. Cover your head with your arms.
- Stay clear of windows and mirrors. Stay away from overhead fixtures, filing cabinets, bookcases, and electrical equipment. Be alert for falling objects.

**If you are in an automobile during an earthquake:**

- Stop your vehicle in the nearest open area.
- Stay in the vehicle until the shaking stops.

**If you are outside during an earthquake:**

- Move to an open area away from buildings, trees, and power lines.
- If unable to move to an open area, watch for falling objects.

**After an earthquake:**

- Be aware of the possibility of aftershocks.
- If possible, and it is safe to do so, evacuate the building as soon as the shaking has ceased and proceed to the primary evacuation location.
- Do not re-enter the building for any reason until you have been advised it is safe to return.
- Do not move injured persons unless they are in obvious immediate danger (from fire, building collapse etc.).
- Open doors carefully. Watch for falling objects.
- Do not light candles, matches or lighters. These may ignite an explosion if there is a gas leak.
- Limit use of telephone to calls for emergency services.

# EARTHQUAKE

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**If severe weather occurs prior to coming to work:**

- If you wake up to severe weather, listen to television and radio reports. If county offices are closed, Denver Surgery Center will also be closed. Your supervisor will contact you if the facility is closed.
- Pay attention to radio reports, because the closure may last only until Noon.
- Information related to delayed start times and/or rescheduling will be disseminated via phone from the facility administrator or delegate.

**If severe weather occurs while you are at work:**

- If the local authorities elected to close schools and government offices early due to severe weather, the Administrator or Clinical Director will advise staff regarding early closure.
- Front office staff will monitor local media regarding weather advisories and road closures. Pertinent information will be directed to the Administrator or Clinical Director.
- Front office staff will notify patients of early closure and assist with rescheduling of cases
- Focus should be placed on preventing unnecessary travel for staff, patients and visitors.

# WINTER WEATHER AND BLIZZARDS

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**If you receive a telephone bomb threat:**

- A bomb threat exists when a suspected bomb or explosive device has been reported, but not located.
- Listen carefully to the caller. Be polite and show interest. Do not hang up on the caller for any reason.
- Try to keep the caller talking, so that you can gather more information about the device, the validity of the threat, or the identity of the caller.
- If possible, use the **Bomb Threat Checklist** on the next page to question the caller in a polite and non-threatening manner.
- Note the phone number of the caller if your telephone has a display (Caller ID)
- Gather as much information as possible. Listen carefully for background noises.
- Upon completion of call dial **911 immediately** and remain available to answer questions.
- Complete the Bomb Threat Checklist while the call is still fresh in your memory.
- If the threat was received by another individual and he/she is relaying information to you, use the Bomb Threat Checklist to gather as much information as possible.
- Do **NOT** evacuate the building unless instructed by law enforcement personnel. (In many cases, people are likely to be more secure in their offices than in hallways that have not been searched or outdoors where an actual threat may be even more likely to exist.)
- If a search of the building is conducted, you and other staff may be asked to accompany officials since you are more likely to notice something out of the ordinary in your own area.

**Looking for suspicious objects and vehicles:**

- All staff should be aware of visitors at Denver Surgical Center. Take notice of bags or packages left unattended or left behind.
- Note any vehicles left unattended for extended periods or parked in an irregular manner.

**If you find a suspicious object:**

- Do not touch the object. Move people away from the object. Move away from the immediate area of the object.
- Do not use cell phones** within 100 feet of the suspicious object.
- Do not pull the fire alarm.**
- Call **911 immediately** and follow their instructions precisely.
- Do NOT evacuate the building unless instructed by law enforcement personnel.

# **BOMB THREAT/SUSPICIOUS OBJECTS**

Cut on dotted line. Layer pages consecutively and bind at top.

Exact wording of threat: \_\_\_\_\_

**Questions to ask caller:**

When is the bomb going to explode? \_\_\_\_\_ Where is the bomb right now? \_\_\_\_\_ What does the bomb look like? \_\_\_\_\_  
What kind of bomb is it? \_\_\_\_\_ What will cause it to explode? \_\_\_\_\_ Did you place the bomb?  Yes  No  
Why? \_\_\_\_\_ What is your name? \_\_\_\_\_ What is your address? \_\_\_\_\_

**Details of the call:**

Caller ID (if available on phone): \_\_\_\_\_ Sex of caller:  Male  Female Time of call: \_\_\_\_\_ Race of caller: \_\_\_\_\_  
Length of call: \_\_\_\_\_ Age of caller: \_\_\_\_\_

**Caller's voice (check all that apply):**

<input type="checkbox"/> Calm	<input type="checkbox"/> Loud	<input type="checkbox"/> Disguised	<input type="checkbox"/> Lisp
<input type="checkbox"/> Angry	<input type="checkbox"/> Laughter	<input type="checkbox"/> Accent	<input type="checkbox"/> Raspy
<input type="checkbox"/> Excited	<input type="checkbox"/> Crying	<input type="checkbox"/> Familiar	<input type="checkbox"/> Ragged
<input type="checkbox"/> Slow	<input type="checkbox"/> Normal	<input type="checkbox"/> Deep	<input type="checkbox"/> Clearing throat
<input type="checkbox"/> Rapid	<input type="checkbox"/> Slurred	<input type="checkbox"/> Nasal	<input type="checkbox"/> Deep breathing
<input type="checkbox"/> Soft	<input type="checkbox"/> Distinct	<input type="checkbox"/> Stutter	<input type="checkbox"/> Cracking voice

**Background sounds (check all that apply):**

<input type="checkbox"/> Street noises	<input type="checkbox"/> Animal noises
<input type="checkbox"/> House noises	<input type="checkbox"/> Voices
<input type="checkbox"/> PA system	<input type="checkbox"/> Static
<input type="checkbox"/> Music	<input type="checkbox"/> Phone booth
<input type="checkbox"/> Office machinery	<input type="checkbox"/> Local call
<input type="checkbox"/> Factory machinery	<input type="checkbox"/> Long distance

If the voice is familiar, who did it sound like? \_\_\_\_\_

**Threat language (check all that apply):**

<input type="checkbox"/> Well spoken	<input type="checkbox"/> Foul	<input type="checkbox"/> Incoherent	<input type="checkbox"/> Message read
<input type="checkbox"/> Educated	<input type="checkbox"/> Irrational	<input type="checkbox"/> Taped	<input type="checkbox"/> _____

# BOMB THREAT CHECKLIST

Cut on dotted line. Layer pages consecutively and bind at top.

## If you identify a fire or suspect a fire (smoke, burning odor or flames):

### Use the R-A-C-E-E Principle.

#### Rescue

- move patients, visitors or co-workers away from immediate danger of fire or smoke
- Put at least one closed door between you and the fire

#### Alarm

- Activate pull station alarm
- Report fire location, if known The greatest danger in a fire is panic. Never shout “fire”, remain calm and know what your duties are.
- Never assume that a fire is too small to report
  - Business office staff:
    - Call 911
    - Report exact location of fire
    - Direct Fire Department, upon arrival, to the fire.

#### Contain

- Close all doors and windows
- Pack sheets and towels under doors to contain smoke.

#### Extinguish (if trained to do so)

- Obtain nearest fire extinguisher
- Use **P-A-S-S** technique to extinguish the fire. *(Only attempt to extinguish the fire if it is small, you have received training and you can do so without injury.)*
  - **P**-pull the pin
  - **A**-aim low. Point the extinguisher nozzle at the base of the fire.
  - **S**-squeeze the handle. Squeezing the handle releases the extinguishing agent.
  - **S**-sweep from side to side.

#### Evacuate

- Evacuate when instructed to do so by emergency personnel, or per individuals on the Chain of Command.
- **Chain of Command:** Administrator→ Clinical Director→ Quality/Risk Manager→ Medical Director
- Follow the facility evacuation policy
- Sedated patients may be evacuated by stretchers or wheelchairs
- Account for all employees, visitors and patients.
- Close all doors
- DO NOT re-enter the building until the Fire Department advises that it is safe to do so.

# FIRE OR SUSPECTED FIRE

Cut on dotted line. Layer pages consecutively and bind at top.

### In the event of a CODE BLUE:

- When CODE BLUE is called, remain calm and **call 911 immediately**.
- Send 2 staff members to each entrance to greet EMTs upon arrival (may arrive at front or back entrance)
- Call Security to notify

### In the event of a medical emergency:

- Page "CODE BLUE in the Lobby" (this will notify Clinical Director or RN in charge to arrive at the scene with a Code Cart and start first aid/CPR)
- Remain calm and **call 911** if directed by Clinical Director or RN in charge
  - Provide detailed information on the location and condition of the ill or injured person. Identify the building name and address, and location within the building
  - Have someone at each entrance of the building to meet the emergency personnel. The Front door is the primary ambulance entrance and the dock will be used as a secondary ambulance entrance.
- Do not attempt to move a person who has fallen and appears to be in pain.
- Attempt to obtain the following information from the ill or injured person:
  - Name, if not known.
  - Description of symptoms.
  - Allergies.
  - Medications.
  - Major medical history (heart condition, asthma, diabetes, etc.)
  - Age and gender.
- An automatic external defibrillators (AED) is available for cardiac emergencies for individuals who are trained to use the equipment. The AED is located on the Crash Cart in the Pre-op/PACU area.

# MEDICAL EMERGENCIES

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### Characteristics of suspicious letter or package:

- Restricted marking such as “Personal”, “Special Delivery” or “Confidential”.
- No return address / one that cannot be verified as legitimate. A city / state that does not match the return address. Handwritten or poorly typed addresses. Misspellings of common words.
- Unusual weight based on size. Lopsided or oddly shaped, strange odors, oily stains, crystallization, protruding wires, rigid or bulky, excessive tape or string. Excessive postage.

### Denver Surgery Center mail and delivery procedures:

- The **delivery of personal packages to Denver Surgery Center is discouraged**. Unless it is essential that a personal package be delivered to you at the surgery center, please have such packages delivered to your home address.
- All individuals making deliveries to Denver Surgery Center should identify themselves to staff at the Front Desk or through the Video Security Monitor.

### If you receive a suspicious letter or package:

- If you receive suspicious mail or package(s), alert the facility Administrator.
- Do not try to open the letter or package. Isolate the letter or package. Do not remove the item from the point of discovery.
- Call the **911 immediately**.

### If you open a parcel containing suspicious material or alleged to contain suspicious material:

- Set it down where you are. Do not move the material. Do not shake or empty the contents of the item.
- Do not sniff, touch, taste, or look closely at the contents.
- If any material spills out of the letter or package, do not try to clean it up. If any material spills on you, do not brush off your clothes, because this could disperse material into the air.
- If the material is corrosive or presents an immediate danger, wash or rinse your hands.
- Close the door to the area where the suspicious parcel was opened and do not allow others to enter the area.
- Call **911 immediately**. Stay at the scene to answer questions from law enforcement and environmental health and safety personnel.
- If anyone enters the closed area where the suspicious letter or package is, that person should also stay at the scene.

# SUSPICIOUS MAIL AND DELIVERIES

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### **Determining when to leave the building or shelter-in-place:**

Some disasters, emergencies, and incidents require you to evacuate the building, while some will require you to stay indoors or in a safe area. In either situation, an **Incident Commander** will be appointed and will notify all areas how to proceed.

Evacuate using the closest available marked exit, unless it is blocked. If you are away from your assigned work area, evacuate the building using the same route as the occupants in that location. Do NOT return to your work area in order to use the exit assigned to that area.

### **To be prepared for an emergency evacuation, you should:**

- Recognize the sound of the evacuation (fire) alarm. In the event of an emergency, occupants will be alerted by either the facility fire alarm system or a verbal announcement by designated staff or law enforcement personnel.
- The fire alarm system is activated by smoke and/or heat detection or the activation of a manual pull station.
- Know at least two ways out of the building from your regular workspace or office.
- Familiarize yourself with building exits, location of fire extinguishers and alarm stations (shown during orientation with Security Officer).
- Know the predetermined emergency meeting locations, which are identified under the “Emergency Meeting Locations” tab in these guidelines.
- Know how to contact your **Incident Commander** if you are unable to go to the meeting location for your group

### **When you are verbally instructed to evacuate:**

- ALL occupants must IMMEDIATELY evacuate the building through the nearest exit.**
- Assist patients and visitors and take inventory of who/how many individuals are in your area.**
- Check, as you evacuate, to make sure everyone has left the immediate area. If requested, accompany and assist persons with disabilities. See specific instructions for aiding those with disabilities listed on the next page.
- Do NOT return to your work area** to retrieve personal items.
- Shut all doors behind you as you go. Closed doors can slow the spread of fire, smoke, and water.
- Evacuate as quickly as possible, but in an orderly manner. **Do NOT run.**
- Stay out of the way of emergency responders as you are evacuating. Stay away from building entrances to avoid interfering with emergency personnel or equipment.
- Once outside, move at least 500 feet from the building and follow instructions of emergency personnel.
- Proceed to your identified emergency meeting location, listed under the “Emergency Meeting Locations” tab.

# **EVACUATION PROCEDURES**

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**Providing assistance to individuals with visual impairments:**

- Tell the person with the visual impairment the nature of the emergency and offer to guide the person to the nearest exit.
- Have the person take your elbow and escort him/her out of the building. As you walk, advise the person of any obstacles.
- When you reach safety, orient the person to where he/she is and ask if any further assistance is necessary.

**Providing assistance to individuals with hearing impairments:**

- Alert the person that there is an emergency situation by using hand gestures or by turning the light switch on and off.
- Verbalize or mouth instructions or provide the individual with a short note containing instructions.
- Offer assistance as you leave the building.

**Providing assistance to individuals with mobility impairments:**

- Persons with mobility impairments will need assistance evacuating the building.
- Individuals who can walk may be able to evacuate themselves. Walk with the person to provide assistance if necessary.
- Evacuate individuals who are not able to walk utilizing wheelchairs or carts. If there is no immediate danger, take the individual to a safe place to await emergency personnel.
- Whenever possible, someone should remain with the person, while another individual exits the building and notifies emergency personnel of the mobility impaired person's exact location.
- The person with the disability is the best authority on how he/she should be moved. Ask before you move someone.

# EVACUATING PEOPLE WITH DISABILITIES

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### Evacuating the building:

- In order to account for occupants after the building has been evacuated, it is important to identify a meeting place that all occupants will regroup in emergencies that require evacuation of the building.
- Use your own best judgment when evacuating the building. If you cannot make it to the primary or secondary meeting location identified below, leave the area immediately and contact your group leader (Lisa @ 415-470-1224) as soon as possible.
- You should remain at the emergency location until further direction is provided by your group leader to ensure that all staff, visitors and patients have been accounted for by the group leader and to provide instruction regarding further actions.

### Primary evacuation meeting location:

- Denver Surgery Center staff, visitors, and patients will meet **on Franklin Street in the open area, behind the light posts, across the street from the hospital.** (See map.)

### Secondary evacuation meeting location:

- If the primary meeting location is inaccessible because of the nature of the emergency evacuees will meet **on Gilpin St. by the stairs attached to the parking lot.** (See map.)
- St. Joseph's Hospital will be used for a temporary shelter in the event of a major crisis, if staff cannot access their vehicles to leave the immediate area and short-term shelter is needed.

### Shelter-in-place locations:

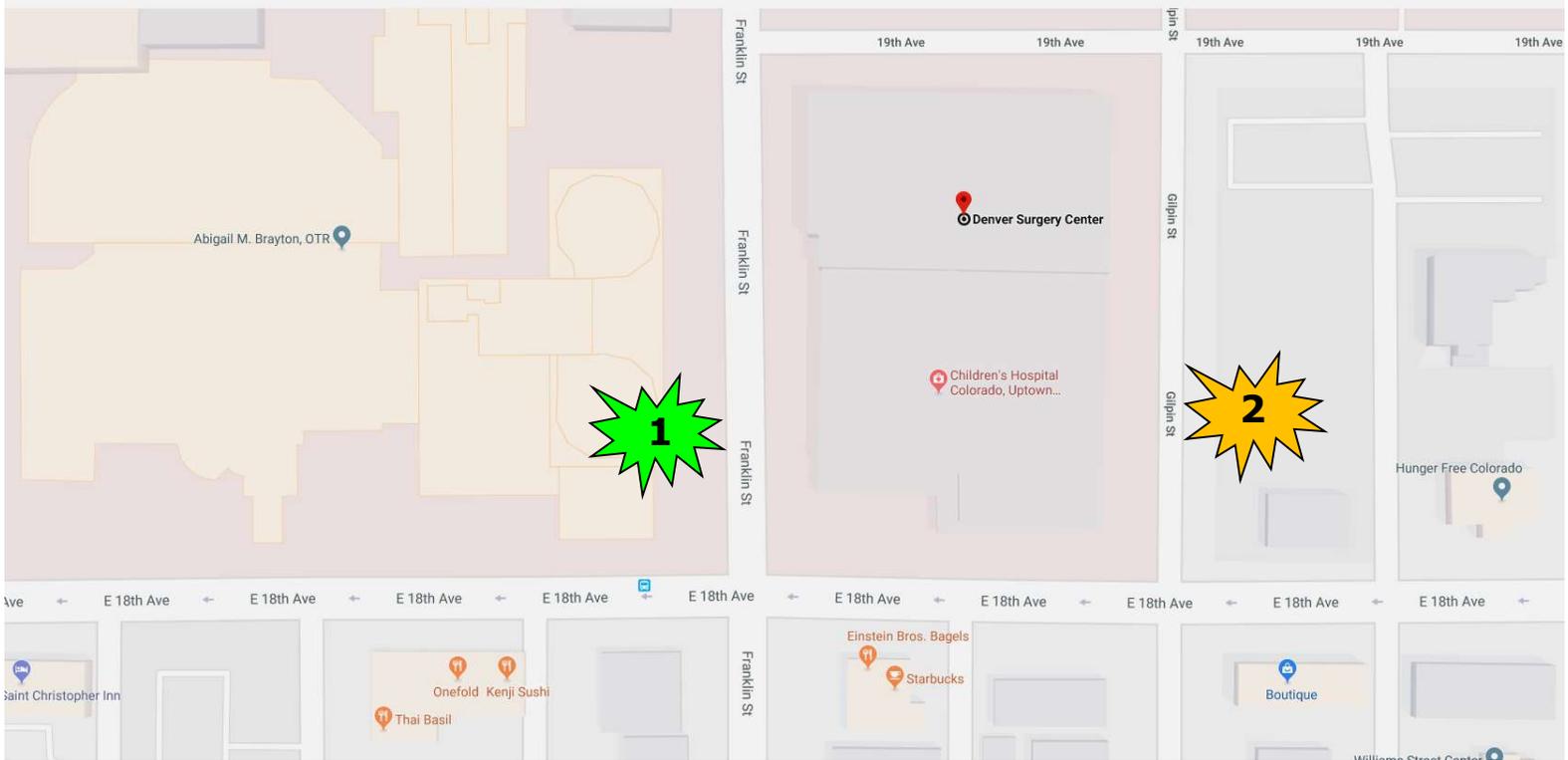
- In the event of a **tornado**, proceed to the **Procedure Room.**
- In the event of other emergencies that require sheltering in place, you will be directed by designated staff or law enforcement personnel regarding where you should go to shelter in place.
- Staying in your work area may be the best option, depending on the nature of the emergency, and you will be directed if you should stay in place in this location.

### Accounting for staff, visitors and patients:

- Once you have reached the emergency meeting location identified above, you will need to find your group leader immediately (administrator, or assistant administrator) to check your name off a list to indicate that you have been accounted for in evacuating the building.
- Report the location of anyone you know who is still stranded inside the building to the group leader.
- Group leader will check off names as they arrive at the emergency meeting location and may take a verbal roll call to ensure that designees have been accounted for at the meeting location.
- Group leaders are responsible for determining the status of those safely evacuated and accounted for, and those who may be trapped or injured.

# EMERGENCY MEETING LOCATIONS

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# EMERGENCY MEETING LOCATION MAPS

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