Badges: I acknowledge that I have been issued a badge and that I am responsible for reporting lost badges immediately to HR so that my badge can be deactivated. I understand the cost to replace a badge is $10.
Fire and Life Safety

In a Health Care occupancy, a **Defend in Place** strategy is used. This relies on building design, fire detection and suppression systems, and fire prevention procedures and planning.

Staff action is an integral part of the **Defend in Place** strategy. The proper response from staff can greatly impact the outcome of a fire.

**Hospital Fire Response**

If you discover fire or smoke or the alarm is activated in your area, the appropriate response will be the **R.A.C.E.** procedure.

- **R** - **Rescue** – Remove anyone in immediate danger to a safe area.
- **A** - **Alarm** – Dial 5555 to report the fire and activate a pull station.
- **C** – **Contain** – Close doors, separating yourself from the fire.
- **E** – **Extinguish / Evacuate** – Fight the fire using the **P.A.S.S** procedure only if you are not placing yourself in danger.

Fight the fire using the **P.A.S.S** procedure only if you are not placing yourself in danger.

- **P.A.S.S.**
  - **P** – **Pull** – Pull the pin from the top of the fire extinguisher
  - **A** – **Aim** – Aim the extinguisher hose at the base of the fire
  - **S** – **Squeeze** – Squeeze the handle to discharge the fire extinguisher
  - **S** – **Sweep** – Sweep the fire extinguisher hose back and forth across the base of the fire.

Fire extinguishers are located at exits and every 75 feet along paths of travel.

**Hospital Fire Response**

If the fire is above, below, or next to your work area:

- Have patients return to their room
- Close all doors
- Remove items from the corridors
- Prevent elevator usage
- Listen for overhead pages for status updates and further instruction
Hospital Fire Response

If the fire is not located near your work area:
- Be prepared to accept patients from areas near the fire
- Prevent elevator usage
- Listen for overhead pages for status updates and further instruction

Evacuation

Hospital Evacuation
- Evacuation will not occur until directed by the Chief Executive Officer, Administrator / Administrator on call, House Supervisor, or the Fire Department.
- At any time patients, visitors, or staff are in immediate danger, moving them to a safer area can be done without these approvals.
- Elevators are not to be used.

Evacuation

Types of Evacuation:
- Stage 1 – Horizontal
- Stage 2 – Vertical
- Stage 3 – Building

Evacuation

Stage 1 – Horizontal
Move to an adjacent smoke compartment. Each floor of the hospital is divided into smoke compartments by smoke barriers. Smoke barrier doors are identified with a reflective green dot on the top of the door frame.

Evacuation

Stage 2 – Vertical
Move one floor down using the nearest stairwell.

Evacuation

Stage 3 – Building
All staff, patients and visitors will exit the building and patients will be moved to alternate care sites. Meet at your departments assigned evacuation assembly point and wait for further instruction.
MOB Fire Response

• If the fire is located in a Business Occupancy, respond with the R.A.C.E. and P.A.S.S. procedures.
• Business Occupancies do not Defend in Place and must evacuate immediately.
• Proceed to the nearest exit and meet at your departments assigned evacuation assembly point.

Staff Responsibilities

In addition to the responsibilities mentioned in the fire response plan, staff have daily responsibilities that help to provide a fire safe environment . . .

Staff Responsibilities

Always keep exit corridors free of furniture and equipment.

Staff Responsibilities

Do not prop open or block fire or smoke doors.
Staff Responsibilities

Familiarize yourself with:
- Exit routes
- Pull station locations
- Fire extinguisher locations
- Smoke compartments, and
- Evacuation assembly points.

Do not place items in front of fire alarm pull stations, fire extinguishers, electrical panels, or medical gas valve boxes.

Familiarize yourself with the location of medical gas valves. Only Respiratory, Maintenance, or the Fire Department can shut these valves off.

Report any damage to fire safety systems immediately. For example fire, smoke, or patient room doors that do not shut or latch properly.

Do not store items within 18 inches of the bottom of a sprinkler head.
Staff Responsibilities

Only store combustibles in spaces that are rated for storage.

Safety and Security

UP Health System – Marquette
880 W Baraga Avenue
New Facility Orientation

Safety and Security

• Anyone found using unauthorized access points will have their access privileges revoked and will be escorted out of the building during Fit Up and Day in the Life

• Propping open doors of any area of UPHS-Marquette is not permitted

Emergency Codes

EFFECTIVE April 14, 2019

• Code Red – Fire
• Code Blue – Medical Emergency
• Code Gray – Manpower/Assistance Needed
• Code Pink – Infant or Child Abduction/Missing
• Code Silver – Weapon/Assailant
• Code Orange – Hazardous Spill or Material/Decon Team
• Code Triage – Disaster
• Code Black – Bomb Threat
• Code Green – Missing Vulnerable Patient

Code Black – Bomb Threat

• If requested, walk through your immediate work area for anything that looks out of place, suspicious, or otherwise unusual.
• Consider backpacks, patient or employee personal belongings, or any unusual item that you are unsure of.
• If you SEE SOMETHING – SAY SOMETHING to your Supervisor, Hospital Supervisor, or UPHS Police.
Code Green – Missing Vulnerable Patient

- Formerly Code Brown
- If unable to locate a patient who is a possible danger to themselves or others due to their clinical or emotional state, staff should activate a Code Green by dialing "5555.
- A Code Green is used to request assistance locating a vulnerable adult patient.
- To find a more detailed description of the patient once you hear the page, you may need to log in to UPHS.Net or listen to the Hospital Emergency radios for any announcement of a more detailed description such as sex, age, general height/weight, last known clothing, or other identifying features.
- A Code Green is NOT for patients who are of no danger to themselves or others and leave voluntarily.

Code Green – Missing Vulnerable Patient

- When a Code Green is paged overhead – immediately search your work space for the patient. If located, dial "5555" using the nearest house phone or announce using your department emergency radio and try to calmly talk with the patient until help arrives.
- If patient appears agitated or in any way violent – do not approach the patient and dial "5555" from the nearest house phone or announce using your department emergency radio.
- In situations with any violence/exits your department is assigned to monitor and respond, UPHS Police Services must be notified.
- A Code Green may be cancelled internally even though UPHS Police and Marquette (the police continue to search the property). Only UPHS Police may cancel a "Be On the Lookout (BOL)/Attempt to Locate (ATL)" with Central Dispatch.
- UPHS Police Services will assist with returning the patient to the unit if located.

Code Pink – Missing Infant or Child

- If unable to locate an infant or child, activate a Code Pink. Use any hospital phone and dial "5555", or use your hospital emergency radio.
- Provide the Contact Center with a description, gender, approximate age, and clothing, or use your hospital emergency radio to announce.
- Be familiar with any entrances/exits your department is responsible for monitoring and carry your hospital emergency radios so you can hear updates.
- Stop all who are exiting the building if they are with a child, or possibly carrying/concealing an infant in a bag, backpack, jacket, etc.
- If the individual appears or becomes threatening, back down and dial "5555".
- You may be restricted from exiting the building until the Code Pink is cleared.

Code Pink – Missing Infant or Child

- Formerly called "Manpower".
- A Code Gray is requested by dialing "5555" when staff feel as though additional assistance may be needed due to a patient or visitor exhibiting behavior that may escalate and put themselves, the patient, or others in danger.
- Call a Code Gray EARLY. This gives opportunity for early verbal de-escalation or support, which is always the primary goal.
- A Code Gray should be responded to by UPHS Police Services and all available employees in the general vicinity to represent a show of force.
- Physical intervention is used only as a last resort when responding to a Code Gray, and only by those trained to do so.
- Do not hesitate to call 911 if additional assistance is necessary to de-escalate or diffuse a situation that has potential for violence.

Code Silver – Active Violence/Weapon

- If an individual enters the UPHS campus carrying a weapon (gun, knife, or other) immediately dial "5555" and call a Code Silver or dial 911 – whichever you can do safely.
- RUN – HIDE – FIGHT.
- If you only if you can leave the building safely (RUN) go out the closest exit and take cover.
- If you can’t run – HIDE – secure yourself and those in your immediate area behind a closed door.
- DO NOT open the door again unless requested by Law Enforcement.
- Remember, the assailant may knock at the door as if seeking safety to get you to open the door or may say he/she is Law Enforcement.

Code Silver – Active Violence/Weapon

- If you HIDE in a safe room – SILENCE cell phones and pagers! Block the door with anything you can.
- If there is an exterior facing window in the room, put a sign in the window identifying how many people are in the room with you, and if any are injured.
- Call UPHS Police Services by dialing "5555", or any cell phone.
- As a last resort only – FIGHT – look for anything to protect yourself.
- Law Enforcement is present to eliminate the threat, not to assist the injured.
- If you are instructed to exit the building, do so with your hands in the air to confirm to Law Enforcement that you are not the assailant.
**Code Orange – Decon/HazMat Team**

- Our in-house Decontamination Team consists of trained volunteers who have completed HazMat Operations Level training.
- Code Orange is activated to decontaminate patients or staff who have chemicals on their person that may be dangerous to themselves or caregivers. The Code Orange Team is not utilized to clean up chemical spills internally.
- Patients contaminated with chemicals are not to enter the Emergency Department waiting area, but directed through the Decontamination entrance.
- Push the alarm button near the door to notify ED staff.
- We are ALWAYS looking for non-clinical staff volunteers to join the Code Orange team! Call Risk Management if you are interested!

**Emergency Operations Plan – Code Triage**

- Formerly Code 300 “Disaster” Plan.
- A Code Command may be limited to the Admin on Call, House Supervisor, and Risk Management or may require all hands on deck response.
- Code Command team is not paged overhead. Team will assess and assign resources as appropriate.
- ‘A disaster’ or emergency declared outside of the facility that will significantly affect our operations will be activated by paging/announcing Code Triage - External.
- A ‘disaster’ or emergency declared inside of the facility will be activated by announcing Code Triage - Internal.
- Large events may constitute activation of a Code Triage and our Emergency Operations Plan.

**Emergency Operations Plan**

- When UPHS activates a Code Triage, all staff are to perform the duties identified in the Emergency Operations Plan specific to their department, or to respond to the Labor Pool for assignment.
- All patient care units should have an easily accessible census/list of patients on their unit available at all times and provide to the Emergency Operations Center (EOC) immediately on activation of a Code Triage.
- All employees should be on their department emergency call out list, which should be updated at a minimum of every six months by department managers.
- Departments are encouraged to use an electronic notification system whenever possible to easily text or call all staff using the method the employee chooses.

**Evacuation – Partial or Full Facility**

- Formerly known as Code Red.
- If the hospital, or a part of the hospital/Medical Office Building (MOB), needs to be evacuated, an overhead page will use plain language to announce the situation. Updates may be pushed through UPHSNet, hospital emergency radios, or to the UPHS employee phone app (pending).
- All available staff in the hospital or MOB should report to the general area as requested to assist with safely evacuating patients, visitors, or staff.
- Know your department-specific Assembly Point if you are required to exit the building. Evacuate with adjacent departments if not specifically named on the Assembly Point map. Remain at the Assembly Point location until you are released.
- An evacuation of the entire facility requires activation of our Emergency Operations Plan. EMS and Logistics are responsible for coordinating a full patient evacuation with the assistance of Marquette City Fire and surrounding departments. All staff are to standby in a safe location to assist.

**Safety Data Sheets (SDS)**

- Formerly known as Material Safety Data Sheets (MSDS)
- ANY chemical on the UPHS campus must have an SDS sheet in the HazSoft database – and the HazSoft icon must be on every computer desktop on the system.
- If you receive a new product and cannot find the SDS for the item, please notify Risk Management immediately.
- Be aware of the proper use, safety precautions, hazards, and PPE noted on the SDS for any item used in your work space.
- Your Supervisor can answer any questions on safe use of the products needed in your work space.