

HARBOR-UCLA MEDICAL CENTER

SUBJECT: CODE ORANGE: HAZARDOUS MATERIAL
SPILL/RELEASE

POLICY NO. 406C

I. PURPOSE:

To provide an appropriate response to an actual or suspected hazardous material spill or release in a manner that is safe for staff, patients and visitors.

II. DEFINITIONS:

Hazardous Material Spill/Release: A spill or release of a substance that is likely to cause injury or illness and may result in exposure that exceeds federal or state limits or may harm the environment.

Incidental spill: California/OSHA defines incidental spill as a spill that does not pose a significant safety or health hazard to employees in the immediate vicinity, nor does it have the potential to become an emergency within a short time frame.

III. POLICY

- A. This is a hospital-wide policy that applies to all departments.
- B. Employees are to be familiar with the products they are using, how to use the products safely, and the steps that should be taken in the event of a spill.
- C. Each department will maintain appropriate Safety Data Sheets (SDS) (formerly Material Safety Data Sheets) in an easily accessible location for all products used within the department. The clean-up of a hazardous material spill should only be conducted by knowledgeable and experienced personnel who have received proper training. Any employee who has been trained, including Environmental Services (EVS) staff, can perform the clean-up.
- D. Each department will ensure it has adequate supplies, proper clean-up and materials, and personal protective equipment available for use in a response to a hazardous spill/release, including spill kits with instructions, absorbents, reactants and protective equipment. The department will determine the appropriate level of response to decontaminate the spill/release.

EFFECTIVE DATE: 7/15

SUPERSEDES:


REVISED: 8/17, 7/20


REVIEWED: 8/17, 7/20

REVIEWED COMMITTEE: Environment of Care Committee

APPROVED BY:


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- E. The service area will determine the appropriate level of response to abate and clean-up the spill/release.
1. **Level I Incident** – an incident involving a hazardous chemical spill that can be contained and abated using resources immediately available to the staff on the scene. Incident presents little risk to the environment and/or to staff health with containment and cleanup. The staff at the service area can handle both decontamination of contaminated staff and cleanup of the spills.
 2. **Level II Incident** – an incident involving hazardous chemical spills that are beyond the capabilities of the staff at the scene. Level II incidents might require the services of the Safety Office/HazMat personnel; Call (424) 306-7700.
 3. **Level III Incident** – An incident that requires assistance from outside resources (e.g., Fire Department Hazmat Section, County vendors, etc.) to adequately respond to the spill/release.

IV. PROCEDURE

A. Discovery of a Hazardous Material Spill/Release

1. If an employee spills or releases a product, or discovers a spilled or released product, s/he must notify the supervisor immediately. The supervisor will determine the appropriate level of response based on the identification of the hazardous material.
 - a. **Level I:** The trained staff on the scene can control and remove the product using existing spill containment supplies. This response may include contacting EVS to remove the product and transport it to the Hazardous Waste Storage Yard located at building N-32. No chemical can go to the sewer system. **Follow the following procedure:**
 - Notify immediate supervisor and the Safety Office at Ext. 67700.
 - Assess the toxicity, flammability, or other properties of material (see label & SDS). For flammables, turn off ignition sources.
 - Alert people in the immediate area of the spill and advise them to keep away.
 - Don appropriate personal protective equipment (e.g., gloves, eye protection, lab coat, etc.).
 - Confine the spill in a safe manner to minimize its spread.
 - Isolate the spill area and deny entry to untrained or non-responder personnel.

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- Per SDS, use absorbents* (e.g., “spill pillows” for solvents), or neutralizers appropriate for the material*, (e.g., sodium bicarbonate for acids, citric for bases).
 - Read the Safety Data Sheet (SDS) and label for spill precautions and cleanup procedure.
 - Working with a partner, use the spill kit to clean up the spill.
 - Call Environmental Services for waste pickup for disposal.
 - Document all clean-up activities.
- b. **Level II:** The service area needs assistance from the HAZMAT Office and the Environmental Services Department for spill control due to the volume of the product spilled, the need for a large spill kit, or because the product requires special attention due to its hazardous nature.
- Activate a Code Orange and notify the Operator at Ext. 111. The Operator will notify Administrator on Duty (AOD), the Nurse House Supervisor and the Safety Officer.
 - Conduct an internal assessment by the HAZMAT Office staff and/or another qualified individual(s).
 - Alert people to evacuate the area, if necessary, and secure the area.
 - If a person is contaminated with toxic materials, s/he should be quarantined until assessed and released by the HAZMAT Office staff or another qualified individual(s). Follow the hospital’s decontamination policies and procedures.
 - Attend to injured and/or contaminated victims. Use appropriate PPE and follow the hospital’s decontamination procedures, as applicable, and quarantine the contaminated person(s).
 - Use engineering controls (e.g., increase or decrease ventilation) as appropriate.
 - Obtain the SDS to assist with remedial actions.
 - Assist the HAZMAT Office staff as directed.
 - Document all clean-up activities.

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- c. **Level III:** The HAZMAT Office staff requires assistance from an outside agency or company to assist with the hazardous materials spill.
- Activate a Code Orange and notify Hospital Administration (after-hours and on weekends, notify the House Supervisor) and the Safety Officer.
 - Conduct internal assessment by the HAZMAT Office staff and/or another qualified individual(s). Call the Fire Department or a contracted HAZMAT company.
 - Follow departmental procedures.
 - Alert people to evacuate the area, if necessary, and secure the area.
 - If a person is contaminated with toxic materials, s/he should be quarantined until assessed and released by the HAZMAT Office staff or another qualified individual(s). Follow the hospital's decontamination policies and procedures.
 - Attend to injured and/or contaminated victims. Use appropriate PPE and follow the hospital's decontamination procedures, as applicable, and quarantine the contaminated person(s).
 - Use engineering controls (e.g., increase or decrease ventilation) as appropriate.
 - Obtain the SDS to assist with remedial actions.
 - Assist the HAZMAT Office staff as directed.
 - Document all clean-up activities.
- B. Code Orange HAZMAT Office staff**
1. When the HAZMAT Office, administrative, or hospital staff receive a hazardous spill notification by telephone, personal pager or overhead page, the following will occur:
 - a. The Hospital Incident Command System (HICS) will be used as the incident's management team structure.
 - b. Once HICS is activated, the incident is managed by the Incident Commander.
 - c. The most qualified member of the HAZMAT Office will assume the role of team leader and will coordinate with a senior member of the department where the response is occurring, if applicable.

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- d. Each HAZMAT Office staff member shall be assigned specific functions by the team leader in order to support the incident's objectives.
- e. The team leader will report to the Incident Commander until and unless directed otherwise.
- f. The incident action plan may include:

Initial Incident Objectives
<input type="checkbox"/> Isolate the contaminated area(s)
<input type="checkbox"/> Identify the hazardous material(s)
<input type="checkbox"/> Triage and medically manage patients
<input type="checkbox"/> Protect patients, visitors, and staff

- 2. The HAZMAT Office staff will respond to the hazardous material spill location.
 - 3. The HAZMAT Office staff will conduct an assessment of the spill to determine whether an actual hazardous material spill has occurred or is occurring.
 - a. If no spill of hazardous material has occurred and it is deemed a "false alarm," or if a hazardous material spill has occurred, but has been cleaned up, the team leader will declare an "all clear" notification and will document this finding, as appropriate.
 - b. If an active hazardous material spill is occurring, the team leader will initiate an appropriate response, such as notifying the AOD, Safety Officer or Nursing House Supervisor.
- C. Activating Code Triage: Internal – Hazardous Spill/Release**
- 1. Incident Response
 - a. The Administrator, by policy, will initiate a "Code Triage: Internal" and will assume the role of the Incident Commander or will delegate the responsibility to the most qualified individual.
 - b. The Incident Commander will activate the Hospital Incident Command System (HICS) and appoint command and general staff positions as appropriate.
 - If the Incident Commander is to work outside of the Incident Command Post (ICP), consider appointing a deputy Incident Commander within the Hospital Incident Command Center (HICC).
 - If the Incident Commander is to work outside of the Hospital Incident Command Center (HICC), and the Fire Department is on scene; ensure that a liaison officer is posted at the Fire Department's Incident Command Post (ICP).

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- c. Consider establishing a "unified command" with the responding agencies, if applicable.
 - d. Consider the need for additional evacuation (i.e., beyond the spill/release point).
 - Evacuation and relocation of staff, patients, and/or visitors should be undertaken only at the direction of the Incident Commander.
 - Horizontal evacuation of patients and staff to surrounding smoke compartments is preferred, in most cases. Vertical evacuation of patients and staff should be considered and implemented, if necessary.
 - Ensure patient records and medications are transferred with the patient, should evacuation or transfer be required.
 - e. Considerations for the shut-off of oxygen should be made, as oxygen is found in most patient care areas and can promote the spread of fire. Ensure proper coordination with Facilities Management, Nursing, Anesthesia, and Pulmonary/Respiratory departments/services before shutting off medical gases to the affected area.
 - f. Account for all on-duty staff and recall additional staff, as needed.
 - g. Ensure the accurate tracking of patients and other impacted persons. Ensure that the appropriate notifications are made.
 - h. Consider establishing a media staging area. All communications to outside media agencies should be handled through the Public Information Officer (PIO).
2. All Clear
- a. The Incident Commander, after consultation with the Fire Department (if applicable) shall issue an "All Clear" notification to the Telephone Operator.
 - b. The Telephone Operator shall announce the termination of the response operations by repeating "Code Orange, All Clear" three (3) times via the overhead paging system.
 - c. Upon hearing the "All Clear" announcement all workforce members are to return to their normal work assignments.
3. Recovery
- a. Consider providing mental health support for staff.
 - b. Track all related incident costs and claims.

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- c. Notify all responding agencies and personnel of the termination of the response and demobilize as appropriate.
- d. Any recovery activities should be coordinated through Facilities Management and the other affected department(s).
4. Refer to the HICS planning and response guides for additional guidance.

D. Documentation and Reporting

Documentation should be reviewed and retained indicating information about all aspects of the incident. This may be completed through an event report, security report, Fire Department activation report, or other reporting method.

E. Training and Education

1. All staff who may use or otherwise come into contact with hazardous materials are to have initial/refresher training at least annually. Training should include the following safe handling procedures for hazardous materials:
 - a. Personal Protective Equipment (PPE) training.
 - b. Hazardous communication procedures.
 - c. Safety Data Sheets (SDS).
 - d. Spill clean-up procedures.
 - e. Review of all pertinent hazardous materials policies and procedures.
 - f. Review of regulatory standards.
 - g. Verbal or written test.
2. The HAZMAT Office staff and support personnel shall receive initial/refresher training specific to their response procedures, including additional training for the potential team leader(s).

V. REFERENCES

California Code of Regulations, Title 22, § 70743, §70746.

The Hospital Incident Command System (HICS) Guidebook accessible via the Internet at:
www.emsa.ca.gov/HICS