



Rancho Los Amigos National Rehabilitation Center PHYSICAL THERAPY DEPARTMENT POLICY AND PROCEDURE

EMERGENCY PROCEDURES

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PURPOSE: To summarize key points from the Disaster Planning and Operations policy and procedure for RLANRC. For more specific details, please refer to the following additional resources: 1) Rancho Los Amigos National Rehabilitation Center Disaster (Fire, Disaster and Safety) Manual, 2) Emergency Response and Preparedness on the DHS intranet Quality and Safety tab and the 3) Patient Safety tab on the Rancho intranet website.

In case of an emergency, such as a fire, earthquake or disaster, the following procedures will be followed.

PROCEDURE:

- I. FIRE Use the acronym RACE for **Rescue - Alarm - Contain – Evacuate**
 - A. **Rescue** anyone in immediate danger of the fire. Non-ambulatory patients can be moved out of danger by using equipment with wheels, such as wheelchairs, gurneys, and lifts or carried as necessary. Patients with unstable spines can be moved directly in their beds out of danger.
 - B. **Activate an alarm.** Locate the nearest fire alarm, pull that first and then call 522 to activate the "Code Red" response unless you are closer to a telephone than to the alarm. If so, call 522 and then pull the fire alarm. *It is important to activate the fire alarm and call the operator even though the fire alarm panel is fully functional in order to fully activate the response system.*
 - C. **Contain** - Keep the fire small and isolated. Close doors around the fire. If the fire is small and can easily be extinguished, use a fire extinguisher. When in doubt, isolate the fire by closing doors and wait for the fire fighters to arrive.
 - D. **Evacuate** - Refers to physically removing patients, visitors and staff from the area of the fire. Use all available wheelchairs, gurneys, lifts, to move patients. If there is no other reasonable, time saving alternative, use the "fire drag" technique with sheets and blankets to evacuate a patient from

a bed. If evacuation is necessary, use employees from other departments, other patient, and visitors to help. Move patients and visitors on the other side of corridor fire doors (horizontal evacuation). *Do not evacuate to the outside nor down the stairs unless ordered to do so by the fire department.*

The priorities for moving patients are:

First - those closest to danger

Second - ambulatory or persons using a wheelchair who may only need minimal assistance

Third - ambulatory or persons using a wheelchair who need close supervision or the devoted assistance of one person

Fourth - persons who require the assistance of more than one person e.g. those needing to be moved in bed, those needing manual rescue breathing and transportation assistance

- E. Have patient and staff restrooms checked adjacent to the area where the fire is located.
- F. Stay with patients until safe to return to P.T. treatment area or until they are relocated to another safe area. Further evacuation orders will come from the supervisor or the Fire Department upon their arrival.
- G. Report fire as soon as possible to the supervisor if supervisor is not available.
- H. Report all empty fire extinguishers to the Building Facilities Maintenance Department. If you have used an extinguisher, lay it down on its side; do not return it to the holder
- I. Refer to fire manual for more detailed instructions, location of fire alarm boxes and extinguisher and how to conduct fire drills.

II. EARTHQUAKE

- A. If you are inside:
 - 1. Move patients to the center of the room, away from glass or other objects that may fall.
 - 2. Place patients under beds, desks or tables, if feasible. Cover patients as able with sheets or blankets to protect them from falling debris.
 - 3. Seek shelter for yourself under a bed, desk or table.

4. Do not go outside until you are told to do so.
- B. If you are outside, move patients and yourself away from potential falling objects.
- III. **DISASTER AND MASS CASUALTY** Refer to the "Disaster and Mass Casualty Plan" manual for additional information.
- A. Activation of the Disaster Plan
1. In a sudden major-casualty incident (explosion, earthquake, aircraft crash, etc.), the telephone operator will be informed immediately.
 2. The Building Emergency Coordinator (BEC) Disaster Plan (Attachment A) will be activated by the BEC for his/her designated building area in the case of a major disaster requiring immediate attention, or if requested to do so by the Disaster Reporting Area.
 3. Building Emergency Coordinator (BEC) - each building in the medical center has a building emergency coordinator. For inpatient areas, the nurse manager or assistant nurse manager for the unit is this person. For non-patient areas other persons have been designated. You should know who this person is for your area. The BEC is responsible to collect data and report data to the Disaster Reporting Area; manage personnel within that building to insure adequate patient and staff safety; implement the plan for containing and managing the disaster.
- B. Immediate Action
1. If patients are endangered, tend to their safety.
 2. Even if not in your designated work area during the disaster, stay in your present location and perform all the assignments requested by the BEC. (BEC's are designated for all sections of the buildings and will have on BEC identification.)
 3. Report any special needs of patients, visitors or other staff to the BEC.
- C. Subsequent Action
1. Do not leave the area unless requested to do so by the BEC.
 2. Report back to your assigned work area when cleared to do so by the BEC.

- D. Refer to the "Disaster and Mass Casualty Plan" manual for additional information.

IV. REPORTING FOR DUTY

Unless directed otherwise by your department all employees off duty at the time of a disaster shall:

1. Refrain from calling into the facility. Remember, the priority is to keep incoming calls to a minimum.
2. Use the Los Angeles County Department of Health Services Com Line at **(323) 890-7750** to obtain updated information regarding the status of facilities and what you are expected to do.
3. Report for your regularly scheduled shifts unless notified otherwise by the Medical Center, radio or television communications, or the Com Line.
4. If unable to report due to road conditions, etc., notify the Medical Center through the Hospital Command Center as soon as possible.


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