## VALLEYCARE OLIVE VIEW-UCLA MEDICAL CENTER/HEALTH CENTERS DEPARTMENT: FACILITIES POLICY & PROCEDURE

NUMBER: 563 VERSION: 1

SUBJECT/TITLE: POWER OUTAGE NOTIFICATION

**PURPOSE:** To state Facilities Division policy on whom the B.E.A.S. room operator is to

notify when there is a major power outage

**POLICY:** In the event of a major power outage, the B.E.A.S. room operator is to

immediately notify:

1. The Electrician Supervisor

2. The Supervisor On Duty (S.O.D.)

3. The On-Call Manager

4. The Nursing Administrator

5. The Safety Officer (x3405, or page (818) 529-0142

**PROCEDURE:** 

**DEPARTMENTS: FACILITIES** 

**DEFINITIONS:** 

References:	
Approved by: Robert Ross (Director, Facilities)	Date: 08/12/2009
Review Date: 07/12/2015	Revision Date:
Distribution: Facilities	
Original Date: 08/12/2009	