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GENERAL STATEMENT

It is the policy of the Idaho State Veterans Home – Pocatello (ISVH-P)) to comply with all federal, state and local laws and regulations regarding safety standards.

The Home meets safety standards as defined in the <u>Life Safety Code</u>. The Home is regularly inspected by state and federal agencies.

Fire protection equipment is installed throughout the building and is properly maintained. Sprinkler systems are inspected and maintained on a regular basis. Building fire alarm systems are installed, tested and maintained. Portable fire extinguishers are located throughout the building and regularly tested and recharged as necessary in compliance with regulations.

Exits are clearly marked and comply with Life Safety Code.

A fire/emergency procedure has been written and published for use by all staff. The procedure can be found in red fire procedure folders located at each nurses station and in the Business Office. Discipline team leaders will be responsible for maintaining the procedure manual in a place readily accessible to all employees. Specific instructions are given for action to be taken in case of fire or other emergency by both staff and residents.

All new employees are properly instructed in the use of fire equipment within their first month of employment. Fire classes which include the use of fire extinguishers, methods of emergency removal of residents and fire prevention are held at least once every three (3) months and it is mandatory that all employees attend annually. Fire drills are conducted, announced and unannounced, at required intervals. Written records are maintained on all fire classes and drills.

GENERAL EMERGENCY INFORMATION

1. It will be the responsibility of the Charge RN to call the 9-1-1 emergency number.

If an emergency occurs between the hours of 5 p.m. and 8 a.m., the Charge RN will initiate the TELEPHONE CALL LIST (printed on blue paper and located at the back of this book).

- A. The Bannock County emergency number is 9-1-1. Their dispatcher will communicate all the information provided to the appropriate agencies (i.e., fire department, emergency, ambulance service, police department).
 - For fire, follow procedures set forth in fire emergency directive.
- **B.** The evacuation center for this facility is the Portneuf Medical Center (Telephone 239-1000). Portneuf Medical Center will assist the Idaho State Veterans Home by:
 - a. Helping to evacuate residents from the building, if requested (and where feasible, see Patient Transfer Agreement dated 5/109).
 - **b.** Providing transportation if necessary; and
 - **c.** Opening their facility and providing beds if possible.
- 2. The Police/Sheriff Department will assist by providing security and traffic control; setting up mobile communication unit if necessary; and if the emergency is related to a bomb threat or the discovery of a suspected bomb, one or two officers will be at the facility command post to help identify the object, oversee the removal of the object and assist the person in charge in decisions concerning the residents' safety.

3. The Fire Department will assist in fire control and evacuation of residents in case of fire. If the emergency relates to a bomb threat, one or two officers will be at the Business Office to coordinate the bomb search and assist in decision concerning residents' safety.

Red Cross can be contacted to provide volunteer nurses to help in the evacuation center, or to serve refreshments or meals to residents if the emergency calls for such action. (Dial (208)233-1823 or 1-800-733-2767 and choose EMERGENCY SERVICES)

FIRE (Code Red)

FIRE PROCEDURE

Reference: LIFE SAFETY CODE HANDBOOK, Sec. 31-4 Health Care Occupancies; DHW Health Care Facilities.

- **1.** First five (5) steps if a fire discovered:
 - **A.** Immediately pull the fire alarm near the fire.
 - **B.** Remove residents in immediate danger, calling aloud repeatedly the code phrase "CODE RED IN (Location)".
 - **C.** Ensure all room doors in <u>FIRE AREA</u> are closed. <u>FIRE AREA</u> means (in order of severity).
 - 1. The room in which the fire is located.
 - 2. All doors on the same side as the fire.
 - **3.** The floor section confined by the fire doors.
 - **D.** Report fire to charge nurse, who in turn will call the Fire Department to verify that the Fire Department is on the way.
 - **E.** Return to fire area and attempt to extinguish the fire if you can do so safely.
 - 1. Obtain fire extinguisher. Kitchen personnel should pull hood extinguisher if needed.
 - 2. Turn off electrical equipment and oxygen in fire area with approval of charge nurse. <u>LEAVE LIGHTS ON.</u> Remove residents needing oxygen to an area furthest from fire. Kitchen personnel should turn off electrical equipment. Leave hood fan on.
 - **3.** Fight fire. Keep near door or avenue of escape. Aim at base of fire. Stay low. If fire gets out of control, get out of room and close door.
 - 2. Any employee who discovers or suspects a fire is expected to give the Code Red alert and pull the fire alarm. **KEEP CALM...DO NOT SHOUT "FIRE."**
 - **3.** Chain of command during a fire or fire drill:

Veterans Home personnel are responsible for fire related activities until arrival of Fire Department.

- A. The Charge RN present is responsible for directing activities until relieved of this responsibility by the Administrator, Director of Nursing Services or other senior employee. In the event that a fire or emergency evacuation occurs after normal working hours or on weekends, the charge RN on duty will assume the leadership role.
- **B.** Fire Department will direct all fire-related activities upon their arrival.

FIRE ALARM (FIRE) PROCEDURES FOR ALL PERSONNEL

IN THE EVENT OF A FIRE ALARM, IMMEDIATELY DETERMINE LOCATION OF FIRE FROM THE "FIRE PANEL" (located at nurses' station):

- 1. Determine if there is indeed a fire before announcing evacuation of the area.
- 2. If there is a fire, pull the fire alarm, announce to all areas over the P. A. system "CODE RED IN (Location)."
- 3. Immediately call 9-1-1 to verify that the Fire Department is on the way and give exact location of fire. (Reference Idaho State Veterans Home Pocatello Fire Procedure, page 1.)

If the fire occurs between the hours of 5 p.m. and 8 a.m., initiate the EMERGENCY TELEPHONE TREE (printed on blue paper and located in the back of this manual)

- 4. If fire is in any area which presents a hazard to residents or staff and evacuation is ordered by the senior staff person on-site, immediately announce to all areas over the P.A. system, "THIS IS NOT A DRILL- PLEASE BEGIN EVACUATION OF (AREA) IMMEDIATELY." The charge nurse will make any decisions regarding evacuation of individual residents.
- 5. In the event of FIRE, <u>all</u> personnel notified by the telephone coordinator are to consider themselves on duty and report to the nurses' station.
 - **A.** The first off-duty person to report to the nurses' station will help coordinate evacuation of the affected area.
 - **B.** All other off-duty persons will report to the command post area for directions in assisting nursing unit evacuation.
 - C. As directed by the command post, extra personnel will go to the fire area, to assist in evacuation and fighting the fire if they can do so safely.

IN CASE OF A FALSE ALARM:

Reset the alarm box (Maintenance assistance may be required) and senior employee in charge call Fire Services at 1-800-662-2512 (Account # 897019, Password: veterans) to verify all clear. Announce "FALSE ALARM" to all areas over P.A. system.

FIRE AND SAFETY PLAN FOR FOOD SERVICE

- 1. <u>Senior Cook</u> Immediately check at the Business Office to get proper instructions of drill or evacuation. If it is NOT a drill, turn off equipment at electrical panel. Assure that all doors are closed and all lights are on. Direct Food Service personnel to Dining Room to assist Nursing staff with removal of residents from the Dining Room area. If there are no residents in the area, Food Service staff will check the restrooms in the east and west corridor for persons, then proceed to safety outside the facility and wait for further instructions.
- **2.** <u>Food Service Personnel</u> Close the doors in their area. Turn off equipment and proceed to the Dining Room to assist in evacuating residents or to a designated area.

FIRE SAFETY PLAN FOR NURSING CARE UNIT

DAY SHIFT

1. Charge RN - Occupies desk/station, directs firefighting or evacuation efforts.

2. Medication/Treatment Nurses

- **a.** Responsible for Medication Administration Record (MAR) and Treatment Administration Record (TAR)—This record is electronic and can be removed by removing the laptop labeled "eMAR" to an identified safe area. Do not risk your safety to retrieve such data and stay with residents once they are relocated to safe area.
- **b.** Account for and communicate with all staff via the facility 2-way radio network to ensure timely communication regardless of circumstances.
- c. Assist where assigned by Charge RN.
- 3. <u>Nurses' Aides</u> Make certain that residents in assigned zone are behind fire doors and in room with door closed, unless ordered to evacuate.
- **4.** <u>Janitor and/or Volunteer</u> Check restrooms, utility rooms, living rooms, PT and activity areas for residents who need to be moved to a safe area. Notify Charge Nurse if resident needs to be moved.

P.M. SHIFT:

1. <u>Charge RN</u> – Directs activities form nurses' station. Decides on fire fighting and/or evacuation until Fire Department arrives. Assumes responsibility for eMAR laptop.

2. Medication/Treatment Nurses –

- **a.** Responsible for Medication Administration Record (MAR) and Treatment Administration Record (TAR) This record is electronic and can be removed by removing the laptop labeled "eMAR" to an identified safe area. Do not risk your safety to retrieve such data and stay with residents once they are relocated to safe area.
- **b.** Account for and communicate with all staff via the facility 2-way radio network to ensure timely communication regardless of circumstances.
- c. Assist where assigned by Charge RN.
- 3. <u>Nurses' Aides</u> Make certain that residents in assigned zone are behind fire doors and in room with door closed, unless ordered to evacuate.
- **4.** <u>Janitorial Personnel</u> Check restrooms, utility rooms, living rooms, PT and activity areas for residents who need to be moved to a safe area. Notify Charge Nurse if resident needs to be moved.

NIGHT SHIFT:

1. Charge RN

- **a.** Directs activities from nurses' station, but must also be available to shut room doors and check to see residents are in bed and accounted for.
- **b.** Responsible for Medication Administration Record (MAR) and Treatment Administration Record (TAR)—This record is electronic and can be removed by

- removing the laptop labeled "eMAR" to an identified safe area. Do not risk your safety to retrieve such data and stay with residents once they are relocated to safe area.
- **c.** Account for and communicate with all staff via the facility 2-way radio network to ensure timely communication regardless of circumstances.
- 2. <u>Nurses' Aides</u> Are responsible for shutting resident doors, accounting for residents (make sure they are in the room and in bed, await order to evacuate).
- 3. In the event that fire occurs while residents are in the dining room, an alternate plan must be initiated.

DINING ROOM--ALTERNATE FIRE/SAFETY PLAN (USE 2-WAY RADIOS)

DAY SHIFT:

- **1.** <u>Charge Nurse</u> Directs firefighting and/or evacuation activities from nurses' station. Calls 9-1-1. Assumes responsibility for medication cart.
- **2.** <u>Medication/Treatment Nurse</u> Directs evacuation of residents from dining room, if directed to do so, through either of two exits:
 - **A.** Take residents out of patio door to safety.
 - **B.** Out through the front door, congregate at assigned area with Senior Aide or designee in charge.
- 3. <u>Nurses' Aides</u> Make certain that residents in assigned zones are evacuated to area assigned by medication/treatment nurse.
- **4.** <u>Janitorial and/or Volunteer</u> Check nearest restroom for residents, assist in evacuating residents through assigned exits.

P.M. SHIFT:

- <u>Charge Nurse</u> Occupies desk/station, calls 9-1-1, retains any residents left on nursing unit behind fire doors. Sends other available staff to assist in evacuation of Dining Room. Assumes responsibility for eMAR laptop.
- **2.** <u>Medication Nurse</u> Directs evacuation of residents (if necessary) from dining area through either of two exits.
 - **A.** Take residents out of patio door to safety.
 - **B.** Out through the front door, congregate at assigned area with Senior Aide or designate in charge.
- 3. <u>Nurses' Aides</u> Make certain that residents in assigned zones are evacuated to area assigned by Med/Treatment Nurse.

NIGHT SHIFT:

Not applicable:

Note: Food Service employees will assist direct care staff in removing residents from Dining Room to assigned areas.

ADMINISTRATIVE STAFF DUTIES IN EVENT OF FIRE/EMERGENCY EVACUATION

- **1.** RN Charge will:
 - A. Set up a command post at the nurses' station (or other area if not safe) until the Pocatello Fire Department arrives and assumes control.
 - **B.** Direct activities of unassigned personnel.
 - **C.** Establish communication with the senior fireman when the fire department arrives on the scene.
- **2.** Assigned Business Office staff person present will:
 - **A.** Obtain resident rosters from the business office or the nurses' station.
 - **B.** Take roll call of residents, if evacuation occurs, (try to determine whereabouts of residents not present).
- 3. All other administrative personnel ensure all doors in their vicinity are closed, then report to command center for instructions.
- 4. If an evacuation is necessary, the closest gathering point will be on the north side of the building near the garage doors. In the event that this is not a safe spot, staff are to communicate their location over the 2-way radios.

TOTAL EVACUATION OF THE FACILITY

Total evacuation will be initiated if, in the opinion of the Administrator and/or Charge Nurse and local emergency personnel, it is necessary in order to protect the health, life and safety of residents. The closest gathering point will be on the north side of the building near the garage doors. In the event that this is not a safe spot, staff are to communicate their location over the 2-way radios.

- 1. Initiate "Evacuation Center Receiving Plan" as outlined below.
- 2. Nursing care residents will be identified with eMAR (photo available on eMAR to identify resident) and their special needs are also listed in the eMAR (i.e.: diabetes, oxygen use, allergies, etc.).
- 3. Nursing care residents are to remain in their rooms until time for their evacuation. All residents will be taken to a safe place depending on their needs (Portneuf Medical Center and Safe Haven both have agreements to assist).
- **4.** Visitors are to remain in the room with the resident or report to the Charge RN to assist where feasible.

EVACUATION CENTER RECEIVING PLAN

1. If total evacuation is deemed necessary by the Administrator, Charge Nurse and/or local emergency personnel, the evacuation center will be organized using the following:

- **A.** Evacuation will be to Portneuf Medical Center or Safe Haven Hospital and Care Center (agreements attached at the back of this book).
- **B.** Assigned members of the nursing staff will go to the evacuation center to receive residents.
- **C.** A facility-employee nurse is to be in charge of each tour of duty while residents are at the evacuation center.
- 2. There shall be two designated resident areas. Residents will be assigned by a nurse to one of these areas upon arrival from the Veterans Home.
 - **A.** One area for residents requiring <u>minimal</u> care.
 - **B.** One area for residents requiring <u>maximum</u> care.
- 3. A nurses' station will be set up adjacent to both areas. A demographic sheet with diagnosis and current list of Medications and Treatments will be available to both areas.
- **4.** Courier communication, mobile communicators or telephone service should be available for communication between the evacuation center and the Veterans Home.

To ensure the safety of all ISVH-P residents and staff against fire hazard, the following shall apply.

- 1. Smoking is not allowed in any area where flammable liquids, combustible gases or oxygen are used or stored, or in any other hazardous locations. Such areas shall be posted with "NO SMOKING" signs.
- 2. SMOKING IS ALLOWED ONLY IN A DESIGNATED SMOKING AREA. Smoking anywhere else is strictly prohibited.
- 3. Disregarding this policy endangers the lives of residents, guests, employees and emergency personnel. Residents who choose to not follow this protocol will be subject to disciplinary action up to and including discharge.
- 4. At the time of admission or at any later time, a member of the health care team may feel that a person is not capable of handling his/her own smoking materials. This should be communicated to the charge nurse who will make the determination and make appropriate notation in the resident's chart. If a resident is determined to be incapable of handling his/her own smoking materials, they must be kept at the nurses' station.
- 5. Metal containers with self-closing cover devices shall be provided in all interior areas where smoking is permitted. On all exterior smoking areas, trash cans with fire control lids are available. Ashtrays of noncombustible material and safe design shall be provided in areas where smoking is permitted. Ashtrays should never be emptied into wastebaskets.
- **6.** All staff has the responsibility of ensuring that these procedures are enforced at all times.

FIRE DRILLS

It is our policy for the safety of residents and staff to conduct regular fire drills so each employee has the opportunity to participate in such drills. The Idaho State Veterans Home – Pocatello will provide one fire drill per month, rotating shifts so each shift may participate.

- 1. The fire drill will be coordinated by the Building Facility Foreman/designee.
- 2. The Building Facility Foreman/designee should notify the Fire Department and Fire Services at 1-800-662-2512 (Account # 897019, Password: veterans) <u>PRIOR</u> to the fire drill and again upon completion of the drill.
- **3.** Building Facility Foreman/designee will plug in a red light in a room or other likely location to simulate a fire.
- **4.** The drill procedure is exactly the same as that for a real fire. See "ISVH-Pocatello Fire/Emergency Procedure" above. The following is a summary of the procedure:
 - **A.** Staff find the red light.
 - **B.** That staff member will pull the closest alarm and report their action and location over the 2-way radio
 - C. The RN Charge/designee will announce the detail over the intercom system and call 9-1-1 (or simulate the call for a drill)
 - **D.** Staff will respond by bringing extinguishers to the fire area, closing all doors inside that fire door area and clearing all residents from that area (any residents still out and about must be behind the fire door or in a room with a closed door.
- 5. The Building Facility Foreman/designee will complete a Fire Drill Evaluation form at the conclusion of each fire drill. Each participant will be required to sign off that they participated in the drill. This form will be kept as part of the Home's permanent records.

FIRE SAFETY INSTRUCTION - NEW EMPLOYEES

- 1. The Initial Employee Orientation given by Human Resources before work can begin will contain a briefing based on safety, showing examples of manual fire alarm pull stations; maps indicating building exits, fire extinguishers, and brief instructions on how to use them. The topics to be completed at initial orientation are:
 - **A.** Smoking policy and disposal of smoking materials.
 - **B.** The locations of manual fire pull stations.
 - **C.** Location of fire extinguishers and how to use extinguishers.
 - **D.** To use the Extinguisher, Keep your back to an unobstructed exit and stand six to eight feet away from the fire and follow the four step P.A.S.S.
 - a. P Pull
 - **b.** A Aim
 - c. Squeeze
 - **d.** Sweep
 - **E.** Location of escape route plan.
 - **F.** In case of fire remember the R.A.C.E. system
 - a. R Rescue
 - **b.** A Alert
 - c. C Contain
 - **d.** E Evacuate
- **2** First five (5) steps after locating fire:

- A. Remove residents in immediate danger, calling aloud repeatedly the code phrase "CODE RED IN (Location)".* If the fire is in a resident room, evacuate that room and the rooms on either side of that room.
- **B.** Immediately pull the fire alarm nearest the fire.
- **C.** Ensure all room doors in FIRE AREA are closed.
- **D.** Report fire to charge nurse via 2-way radio, RN will call the Fire Department to verify that the Fire Department is on the way.
- **E.** Return to fire area and attempt to extinguish fire if you can do so safely (Test the door knob/handle before opening a door if it's hot **DO NOT OPEN THE DOOR**.
 - **a.** Individual employee's duties if they hear an alarm (assist residents, close off area, evacuate, etc.).
 - **b.** Inform employee of mandatory attendance at in-service on fire safety and fire drills.
- 3. Completion of fire safety instruction will be recorded and a copy placed in employee's personnel file.

*Note:

The use of the code phrase "**CODE RED IN** (**Location**)" provides for both the immediate aid of any endangered person and the transmission of an alarm. Any person in the area, upon hearing the code called aloud, shall transmit the interior alarm using the alarm station near the fire.

Reference: Life Safety Code Handbook - 31-3.2, Procedure in Case of Fire.

WATER AND NATURAL GAS SHUTOFF

- 1. Some emergency situations may require the water and natural gas to be shut off from the building. The Administrator, Building Facility Foreman, Senior Craftsman, or acting administrator will determine if these utilities need to be shut off. In their absence the charge nurse will determine if they need to be shut off and direct staff to shut them off. A key to that door is at the Nurses Station.
- 2. The natural gas shut off valve is located on the gas meter, to the south of the main entrance of the building, by the stairs leading to the basement utility room. A wrench is located at the meter to turn off the valve. When the Administrator, Building Facility Foreman, Senior Craftsman, or acting administrator is in the facility they will shut off the gas. In their absence the charge nurse will direct staff to shut off the gas valve.
- 3. The valve to shut off the water to the building is located in the utility room in the basement. The entrance to the basement is outside south of the main entrance to the building. A key to the door of that room is located in the lock box at the nurse's station. When the Administrator, Building Facility Foreman, Senior Craftsman, or acting administrator is in the facility they will gain access to the utility room and shut off the water. In their absence the charge nurse will obtain the key to the basement utility room in the lock box at the nurses station and direct staff to shut off the water valve.

FIRE AND SAFETY COMMITTEE

The Fire and Safety Committee shall meet quarterly to review policies and procedures, records of fire drills held, training of new employees, incident/accident reports, and other pertinent matters.

The Fire and Safety Committee shall be comprised of:

- a. Building Facility Foreman
- **b.** Administrator
- c. Director of Nursing Services/designee
- d. Dietary Supervisor/designee
- e. Other Staff as Requested

FLOOD (Code Brown for Severe Weather)

FLOOD PREPARATION

When weather conditions warrant, senior employee present will monitor the weather conditions. This can be done with the facility's weather radio or television. The first warning that the Weather Bureau will issue is a Flood "Watch" which means that conditions are developing that might cause a storm that could create flash flooding – somewhere. The National Weather Service website is: http://forecast.weather.gov/hazards/?wfo=pih. Based on this information, Building Facility Foreman, or the senior employee present will attempt to ascertain if the home is in the area that may be affected by this storm. If it is, they will contact the Home Administrator, either at work, or by cellular phone and relay the information.

Then the following will occur:

- 1. RN Charge/designee monitor the weather conditions and update the Home Administrator.
- 2. Just prior to or when the situation becomes a Flood "Warning" as determined by the Weather Bureau, the Home Administrator will ask that available maintenance personnel, the Director of Nursing Services, and at least one office staff (for communication) be called in, along with any other staff deemed necessary by the Home Administrator or DNS. When the Flood "Watch" is issued by the Weather Bureau, maintenance staff will initiate the following:
 - **A.** Contact city street department to pick up sand and bags at 208-234-6250.
 - **B.** Complete sandbag barricade at exterior entries.
 - **C.** In the mechanical room stairwell, place sandbags at upper ground level to keep water from going down to basement.

FLOODING

The following procedure should be followed by the Home Administrator or his designee if water is starting to enter any portion of the building or grounds.

- 1. Alert the Bannock County Sheriff's office at 9-1-1 of the problem.
- 2. Notify the Home Administrator, Director of Nursing Services, and Building Facility Foreman.
- 3. The Home Administrator or his designee will assess the situation and determine if more staff are needed. If so, the Charge Nurse will initiate the emergency telephone tree.
- **4.** If water is entering the building assemble a work party to divert the flow of water away from the building using sandbags, if possible.

5. Fill sandbags and place where water is about to enter or is entering the building. Place sandbags end to end tightly for a good seal.

AFTER FLOODING OCCURS

- 1. If the facility has been evacuated, the building maintenance staff will carefully check for structural damage before allowing the residents to return. Personnel from the Division of Public Works (telephone 236-6034) (Updated 1/2014) will assist in this check.
- 2. If there is flood water in the facility that cannot be removed with facility equipment, the Building Facility Foreman will call the Fire Department. They will have water removal pumps that can be used until other equipment can be obtained.
- **3.** Sources for rental of water removal pumps are:
 - **A.** Pro Rentals—233-4770
 - **B.** <u>Action Rentals 233-6600</u>
- 4. USE ONLY MAIN FRONT ENTRANCE for entering or leaving the facility; all other doors will be secured by Maintenance (unless another exit/entrance is designate by the RN charge/designee.

BOMB THREAT (Code Black)

BOMB THREAT PROCEDURE

- 1. Should a bomb threat be received by telephone, the person taking the call shall immediately institute the following procedures.
 - **A.** Remain calm, don't panic.
 - **B.** Keep the caller on the line as long as possible (WRITE A NOTE WITH SOME DETAIL AND GIVE TO A COWORKER TO BE TAKEN TO THE RN CHARGE).
 - **C.** Record, as near as possible, every word spoken by the person calling.
 - **D.** If the caller does not give the location of the bomb, or when it is set to detonate, ask the caller to give you this information.
 - **E.** Tell the caller that the building is occupied and serious injury or death could result if the information is not obtained.
 - **F.** Listen for any strange or unusual background noises such as music playing, motors running, traffic sound, etc., which might be helpful in providing clues to determine from where the call was made.
 - **G.** Determine whether the voice is male or female, familiar or unfamiliar, and listen for an accent, speech impairments, nervousness, etc.
 - **H.** Record as much information as you can. You may not be able to get everything, but do get all you can.
 - I. Remember, remain calm. Don't panic. Panic will cause confusion.
- **2.** Immediately after the caller hangs up, contact the Police Department (Phone 9-1-1) and relay as much information as possible.
- **3.** Once the Police Department has been notified, contact the Home Administrator, or person in charge, and relay all information received and that the Police Department was notified.

- **4.** As much information as can be ascertained from the bomb threat shall be recorded in writing.
- **5.** All information pertaining to the bomb threat shall be provided to authorities when they arrive on the scene.
- **6.** All threats should be treated as an actual bomb placement within the building. Proper procedures shall be implemented immediately.

EVACUATION PROCEDURES FOR BOMB THREAT

- 1. The Home Administrator or person in charge shall make determination whether or not to evacuate the facility when a bomb threat is received.
- 2. The decision not to evacuate the facility shall be influenced by the advice received from local law enforcement agencies having jurisdiction over such matters. Their input shall be given a great deal of consideration when the decision whether or not to evacuate becomes necessary.
- 3. When the decision has been made to evacuate, EXIT ROUTES to be USED shall first be inspected by Maintenance and declared safe. Evacuation shall be conducted in accordance with our Fire and Safety Plan.
- **4.** When evacuation has been ordered, only those EXITS declared SAFE shall be used.
- 5. During the evacuation procedures, leave all windows and doors open, this reduces damage in the event an explosion occurs BUT you must also take into consideration the outside temperature and use your best judgment.
- 6. Once everyone has assembled, NO ONE IS TO RETURN TO THE BUILDING, FOR ANY REASON, UNTIL AN "ALL CLEAR" HAS BEEN ANNOUNCED BY AUTHORITHIES CONDUCTING THE SEARCH.
- 7. Residents shall be kept as comfortable as possible. Staff shall remain with residents except as otherwise noted, throughout the entire evacuation period.

FLOOR PLANS

- 1. A floor plan has been posted at all duty areas so that all personnel may have the opportunity to occasionally review the building layout.
- 2. All personnel shall be required to familiarize themselves with the building layout in their section.

AVAILABILITY OF KEYS

- 1. The Building Facility Foreman, Home Administrator, or Director of Nursing Services will ensure keys are available to access all areas of the facility.
- 2. The Building Facility Foreman/Designee shall assist search personnel upon request to help expedite the search.

LAW ENFORCEMENT & SEARCH TEAMS

- 1. The local law enforcement agency having jurisdiction over such matters shall be responsible for the orderly search of the building and investigation of any bomb threats received.
- 2. The search commander shall assign or designate persons of this facility to assist in the search when deemed necessary.
- 3. This facility shall authorize the use of its employees to assist the search commander. However, employees shall have the right to refrain from assisting in the search if they so choose.
- **4.** Employees designated to assist in the search shall answer fully any questions posed by the search commander and provide any information requested.
- **5.** Each search team shall have a law enforcement official designated as the team leader and all instructions issued by the team leader shall be followed completely.
- 6. During the search, particular attention shall be given to all accessible areas to the general public, i.e., window ledges, behind shrubbery, platforms, lobbies, waste cans, rest rooms, stairways, telephone booths, ceiling lights, vents, corridors, closet areas, etc.
- 7. Should a suspicious object be located, DO NOT MOVE, JAR, OR TOUCH THE OBJECT OR ANYTHING ATTACHED TO IT. LEAVE IT EXACTLY THE WAY YOU FOUND IT. AND REPORT IT IMMEDITATELY TO THE FACILITY ADMINISTRATOR AND LAW ENFORCEMENT.
- **8.** Once the search commander or team leader has arrived at your location, the decision shall be made whether or not to continue searching for other objects.
- 9. If the decision is to continue searching, the area in which the object is located shall be roped off (if the object has not been removed) and only law enforcement officials shall remain or have access to the area. Searchers shall have with them flashlights, ropes, knives, two-way radios, and other equipment that may be requested by the team leader.
- **10.** Remember; follow the instructions of the search commander or team leader. Do not attempt to do anything else.

ALL CLEAR

- 1. After the search has been completed, and/or the suspicious object removed, an "ALL CLEAR" shall be announced by the search commander.
- 2. No person shall be allowed to re-enter the facility, for any reason until an "ALL CLEAR" signal has been issued.
- **3.** Only the Home Administrator/designee, shall answer questions concerning this matter, and only to those persons with a need to know.
- 4. Should this facility be damaged by an explosion, a determination by the facility staff and local authorities involved will be made regarding safe occupancy of the building.

EARTHQUAKE (Code Brown for Severe Weather)

EARTHQUAKE PROCEDURE

The primary purpose of this earthquake operational plan is to provide a course of action to follow should an earthquake strike the area. Since earthquakes are virtually impossible to predict, this plan covers procedures to be followed during and after the earthquake.

DURING THE SHAKING

- **1. DO NOT PANIC.** The motion and violent shaking is. frightening; however, unless one is struck with falling debris, it is usually harmless
- **2.** If inside, remain inside. Do not run outside.
- **3.** Instruct residents, personnel, and visitors to move to the hallways.
- 4. Instruct all persons to take cover under beds, tables, desks or against inside walls, etc.
- **5.** Stay away from windows.
- **6.** Do not use any open flame devices (candles, matches, etc.). Put out all cigarettes and fires during and after the tremor.
- 7. Do not run through or near the buildings. The greatest danger from falling debris is just outside the doorway and near the outer walls.
- **8.** If outside, move away from the building and utility wires. Once in the open, stay there until the shaking stops.
- 9. If you are in a moving vehicle, stop as quickly and safely as possible. Remain in the vehicle.

AFTER THE SHAKING

- **1.** Check for injuries.
- **2.** Follow treatment procedures as instructed by RN in charge.
- 3. Do not use any open flame devices until the building has been inspected for broken gas lines and declared safe by the Building Facility Foreman, DPW personnel or the Fire Department.
- **4.** Maintenance, and other staff as assigned, will check the building for broken water lines, gas lines, fallen wires, etc.
- 5. If gas is detected, open windows and make sure the gas main is shut off. (Located in the outside stairwell in front of the facility that leads down to the electrical/maintenance room in the basement.
- **6.** Evacuate the building as instructed or as may become necessary.

- 7. Do not use telephone except for emergencies.
- **8.** Turn on portable radios to get the latest emergency bulletins (one is available in the nurse report room, administrative offices or in the activity room).
- 9. If the building or any portion thereof has been damaged, do not let anyone enter or re-enter until the "ALL CLEAR" has been issued by Home Administrator or person in charge.
- **10.** Follow all instructions issued by the Home Administrator or person in charge.

EVACUATION

Should evacuation become necessary, procedures must be followed as outlined in the TOTAL EVACUATION PLAN listed above.

DAMAGE TO THE FACILITY

- 1. Should the facility be damaged, the Building Facility Foreman along with personnel from DPW shall be responsible for inspection of the building for gas, oxygen, and water leaks, structural damage and falling wires, etc., as soon as possible after the disaster occurs. They will issue a determination as to whether the building is safe.
- **2.** Personnel assigned this duty shall report all findings to the Home Administrator.
- 3. Only battery powered lights shall be used during the inspection, or until an "ALL CLEAR" has been given (Flashlights are available in the nurse report room).

FIRES

- 1. Fires caused by earthquakes can be more dangerous than the earthquake itself because fire system equipment and water lines may be destroyed or damaged.
- **2.** During and after an earthquake be especially watchful for fires or leaking gas lines. Report findings immediately to the Home Administrator/designee.
- 3. Should a fire occur, the Fire Emergency Policy contained herein shall be followed.

COMMUNICATION

Should the facility be damaged or require emergency assistance, established communication procedures must be implemented per the Fire Emergency Policy. Communication amongst staff in the building can be accommodated with the facility 2-Way radio system.

EQUIPMENT & SUPPLIES

1. Should heating, cooking or other equipment fail to function during/after an earthquake, Maintenance should take immediate action to get it repaired or replaced upon approval of the Home Administrator/designee.

- 2. A list of support agencies shall be maintained and kept current as part of this manual (see attachment 1 (P) at the end of this section).
- 3. Should equipment fail, the Building Facility Foreman/designee, shall immediately contact appropriate agencies and inform them of the Home's needs.

RESIDENT TRANSFERS

- 1. <u>Within the facility:</u> Should the facility be damaged, or it becomes necessary to relocate residents, the following procedures shall be implemented.
 - **A.** Move all residents to a central area.
 - **B.** Issue extra blankets to all residents.
 - **C.** Close all drapes in the central area.
 - **D.** Close all doors to the central area including the Fire and Smoke Barrier doors.
 - **E.** Do not use any open flame devices.
 - **F.** Make sure flashlights are operable and extra batteries are available.
 - **G.** Make sure residents are kept as comfortable as possible.
 - **H.** Reassure residents that all is well.
- **Transfer to other Facilities:** Should transfer of residents to other facilities be necessary, implement the following procedures as determined by the Home Administrator/Designee:
 - **A.** If possible, notify receiving institutions in advance that transfers are being made. Portneuf Medical Center and Safe Haven have been identified as our emergency evacuation centers.
 - **B.** Keep residents in central area until transfer is made.
 - **C.** Keep residents as comfortable as possible.
 - **D.** Follow the <u>TOTAL EVACUATION OF THE FACILITY</u> procedures as outlined on page 10 in our Fire Emergency Policy.
 - **E.** Make sure all residents and personnel are accounted for as outlined in the Fire Emergency Policy. (Use resident and employee rosters.)

3. STAYING AT THE FACILITY:

- **A.** Should conditions warrant, the Home Administrator may allow personnel to remain at the facility until conditions are safe.
- **B.** Personnel staying at the facility will have work schedules arranged so that all staff receive proper rest and eating breaks.

EMERGENCY FOOD SERVICE

1. Should the facility become isolated, emergency food rations shall be provided to the best of our ability.

USE OF VOLUNTEERS

- 1. Volunteer assistance will be accepted when feasible.
- 2. Volunteers shall be required to follow instructions issued by the person in charge.

TORONADO/HIGH WINDS (Code Brown for Severe Weather)

TORNADO/HIGH WINDS PROCEDURE

A tornado/high winds "warning" means that a tornado has been sighted in the immediate area, or that high winds are rapidly approaching the area. A warning alert will require immediate implementation of this plan.

NOTIFICATION OF ALERTS

- 1. There are several methods by which a facility may be informed of approaching severe weather. They are: police, television, radio, civil defense, weather service, fire department, etc.
- 2. When ISVH-P is notified of approaching severe weather, "warning" procedures shall be implemented as outlined in this plan.

TORNADO/HIGH WINDS "WARNING PROCEDURES":

When a "warning" has been issued the following procedures will be implemented:

- 1. Move all residents into hallways. Leave non-ambulatory residents in bed. Place beds <u>in hallway</u> against wall. Keep away from windows.
- **2.** Have ambulatory and wheelchair residents sit against hallway wall. Keep away from windows.
- 3. Close all doors to residents' rooms.
- **4.** Give each resident a blanket. This will keep them warm and protect them from any flying glass or debris.
- 5. Open all outside exit doors. Make sure exits are clear. Open all outer wall windows to equalize negative pressure and prevent implosion.
- **6.** Keep flashlights readily available (Stored in the nursing report room). Check batteries every six (6) months.
- 7. Follow all instructions issued by the person in charge.
- **8.** Remain calm. Reassure residents they will be safe. Remain with the residents.
- **9.** Remain in hallways until the person in charge has sounded an "ALL CLEAR".

EMERGENCY POWER

In the event the storm disrupts the normal power supply, the emergency generator will automatically activate the emergency lights, life support systems, call system, fire alarm system, etc.

DAMAGE TO BUILDING

- 1. Should damage occur to the building as a result of the storm, a search for injured persons should begin as soon as possible.
- 2. One person shall be assigned the task of inspecting each area and obtaining an injury count and report such information to the person in charge.

EVACUATION PROCEDURES:

- 1. Once the storm has passed and the injured have been reported, it may be necessary to evacuate the facility.
- 2. Should evacuation be ordered, procedures shall be followed as outlined in <u>TOTAL</u> <u>EVACUATION OF THE FACILITY</u> on page 10 of this manual.

"ALL CLEAR" Signal:

- 1. When a tornado/high winds warning has been canceled, an "ALL CLEAR" will be given by the person in charge.
- 2. Do not attempt to enter any portion of the building if damaged, until the "ALL CLEAR" has been sounded.
- 3. Do not return residents to their living or sleeping areas until an "ALL CLEAR" has been sounded.

SMOKING RESTRICTIONS

- 1. Smoking shall not be permitted during evacuation procedures by residents or personnel.
- **2.** After evacuation, smoking regulations shall be followed as established by facility smoking policy.

CANCELLATION OF WARNING ALERT

- 1. When the tornado/high winds "warning" alert has been canceled, return all residents to their rooms or living area, and resume routine duties.
- 2. All emergency procedures shall be canceled and the staff shall return to normal duties. Any emergency equipment shall be returned to its assigned location.

COMBUSTIBLE/FLAMMABLE MATERIALS POLICY

Residents are prohibited from storing flammable or combustible materials on Home grounds. Flammable or combustible materials include, but are not limited to, the following items:

Gasoline Brake fluid Paint thinner Butane

Acetone
Oil-based paint
Aerosol paint
Lacquer
Solvent
Turpentine

Any product where the original container warns that the contents are flammable.

Residents with questions as to whether or not a product is combustible or flammable should check with the Home's Building Facility Foreman for approval to store it. Unauthorized storage of combustible or flammable materials will result in disciplinary action, up to and including discharge from the home. (DVS Administrative Directive 95-5 dated 09-26-95) 10/25/00

EMERGENCY FIRE WATCH

An emergency fire watch is required when the building sprinkler system or fire alarm is to be shut down for more than four (4) hours within a 24-hour time period. The fire watch will be appointed and approved by the Building Facility Foreman.

BUILDING SECURITY ANALYSIS

The facility is located in Pocatello, Idaho, Bannock County, at 1957 Alvin Ricken Drive.

The nearest buildings are located along Alvin Ricken Drive. There are no buildings in close proximity to the facility. The other buildings in the general area around the facility include The RISE Complex, and the Bannock Health Department. The facility is approximately 2 miles from the Pocatello Police department headquarters, the same distance from the Bannock County Sheriff's office, and 1.5 miles from the Fire Department unit that would respond to the facility.

- 1. The lay-out of the building does not permit the parking of vehicles next to the building. The nearest parking is at the East end, approximately 50 feet from the building, and the nearest rooms are the chapel and chaplain's office.
- **2.** There are no walls, bushes or trees near or obscuring windows or entrances.
- **3.** Resident rooms and office windows in the building have adjustable blinds on them.
- **4.** Most offices and rooms have more than 1 way out (resident rooms have window emergency exits), and the common areas have clear views of the nearby areas. The office area is easily observed from other offices (no room dividers, etc) and most private offices are within easy hearing of other offices.
- 5. The building has 2 normally open doors. The front sliding doors and the TV room sliding doors leading to the back patio. All other outside doors are locked. The sliding doors are locked at night from 10:00 p.m. until 06:00 a.m. The alternate (East, West and South) exits have a key pad lock, and those outside doors equipped with a standard door lock have good locks installed with minimum distribution of keys. The need to control the key pad code cannot be over stressed. INDIVIDUALS WHO ARE NOT EMPLOYEES or qualified residents should NOT have the key pad codes. THIS INCLUDES SALESMEN AND DELIVERY PEOPLE!

- **6.** The front entrance sliding door has a security camera with intercom and buzzer that can be monitored from the front nurse desk. The camera covers only the front door area and is limited on the area covered.
- 7. The building is equipped with an overhead paging system accessible from any facility telephone. To place an overhead page; pick up the receiver and push the button labeled, "Ext Page." You will probably need to dial the volume up with one of the arrow buttons (on the lower right side of phone). When you hear the double beep, Dial 00. Speak clearly into the phone.
- **8.** The building is well lit during night hours with lights attached to the outside of the building, parking lot lights, and decorative lighting in the patio gardens. The lights are on timers, and light sensors to ensure both full lighting and minimum possible costs. The parking areas are flat and only parked vehicles would obscure sight. The loading dock in the rear has separate lighting and the parking lot lighting also provides illumination of this area. The loading dock doors each have a window to allow an exterior view prior to opening.
- **9.** The refuse area has good lighting from the shop building and a parking lot lamp pole, with nothing between the fenced dumpsters and the main building.
- **10.** The shop building and attached carport have lights on the three sides normally used, and the lights from the parking lot poles offer additional lighting. The shop area is normally open only 8:00AM to 5:00pm weekdays, and not accessible at other times.
- 11. There is no access to the building roof from the outside, and the roof is nearly flat with parapets around many sides.
- **12.** The facility is completely surrounded by grass, and there are no highly flammable plantings near the building. The open areas bordering the property are wide enough to preclude any fire danger should the open fields near the facility burn.

CONFRONTATIONS WITH NON-RESIDENTS

NON VIOLENT CONFRONTATIONS

In the event of a confrontation with a non-resident, employees, volunteers and residents of the Idaho State Veterans Home should:

- 1. Get another employee with you. During normal business hours, the Home Administrator, Building Facility Foreman, Social Services officer, or Nursing Supervisor should be notified.
- 2. Try to calm individual down, offer to set up appointment with supervisor, Director of Nursing, or Home Administrator.
- 3. Keep escape route clear. Do not let individual trap you in an area where you cannot get away (i.e., break room, shower room, etc.). Keep individual out of nurse call station area and use it for a physical barrier.

ESCALATING CONFRONTATIONS

1. If physical actions are feared, call police at 9-1-1. If unable to use telephone at desk, try to get someone to use a telephone at another location.

- **2.** Keep physical barrier between you (desk, nurse station cabinets, vacant resident bed, med cart) and ask them to sit down.
- 3. Use nurse call as reason to leave area, then use a resident's telephone to call police. All nursing staff should familiarize themselves with the location of resident telephones.
- **4.** As a last resort, the fire alarm system may be used to summon aid in an emergency.

RESPONDING TO AN ARMED INTRUDER

If an armed intruder comes on the property or in the building it is very important that, staff, volunteers, and visitors take self-preservation actions and actions to protect residents. The following procedures will be followed in response to an armed intruder:

- 1. Any staff member can call 9-1-1 giving the dispatcher the exact location you are calling from and a detailed description of the intruder and their location. Do not assume someone else has called, go ahead and place the call.
- 2. In case of an immediate life-threatening event, each individual should take whatever actions are necessary to protect his/her own life and the lives of residents.
- **3.** If it is possible to flee the area safely and avoid danger, do so taking any resident you can safely take with you.
- **4.** If flight is impossible, lock or barricade all doors and secure yourself and any residents in a safe area.
- **5.** Silence cell phones.
- 6. Individuals should be positioned out of site and behind items that might offer additional protection such as walls, desks, file cabinets, etc.
- 7. Responding officers will move quickly to the area where the armed intruder is located. Keep your hands visible. Responding officers must not only identify the assailant, but must determine you are not involved in the situation.
- **8.** Wait for an all clear from emergency personnel; this will usually be the police officer in charge. Be sure to verify the individual making such an announcement is in fact an officer.

FOLLOW UP ACTIONS.

- 1. Notify supervisor of confrontation.
- 2. If police or fire department were called notify Administrator/Designee as soon as possible.

WANDERING (ELOPEMENT) PROTOCOL

If a nursing care resident cannot be located the following steps will be immediately initiated:

- 1. The Charge Nurse will be notified immediately time will be documented.
- The Charge Nurse (or designee) will overhead page the resident two times, using full name, speaking slowly and distinctly, requesting the resident to come to the nurses' station.
- 3. The Charge Nurse is to call/radio all other nursing personnel on that shift describing who is missing. Then:
 - 1) Assure resident is not on an activity, at a doctor appointment or signed out.
 - 2) Send 1 caregiver from the wing where the resident is missing, to search their hallway (rooms, bathrooms, hall closets and common areas).
 - a. East include chapel, puzzle room, library, dirty linen and resident rooms, courtyard and staff lounge.
 - b. South include South Dining, Shower, Dirty Linen, Locker and Resident rooms and Nurses' Station.
 - c. West include Storage, Dirty Linen, Therapy and Activity Rooms, Resident rooms and bath and tub rooms.
 - 3) Send 1-2 caregivers to search the other 2 hallways.
 - 4) Send 1 caregiver to search the Family Room, Dining Room, Beauty Shop, Smoke Room, Canteen, laundry, and bathrooms on the north end of the building.
 - 5) Send 1 caregiver to walk around perimeter of Veterans home. If dark, a second caregiver may be sent as well. Radios (spot lights if dark) are to be utilized by anyone exiting the building to look for resident.
 - 6) After perimeter check, expand to North Alvin Ricken and South Alvin Ricken (include adjacent business) and West field toward freeway
- 4. If after 30 minutes with no success, expand patrol beyond ISVH-P grounds in a vehicle. Notify the DNS and Administrator.
- 5. If after 45 minutes and all efforts have failed, notify the police, ISU Public Safety and family
- 6. Searching for the individual will continue until information is received, or resident is located. Report in detail to law enforcement and show a photo of the resident. The search will fall under their direction.

Once resident is located, RN in charge will forward a report to the DNS, RNM, and Administrator containing the following data:

- 1) Time elopement occurred (or time first noted when resident was missing).
- 2) Steps initiated and time when completed.
- 3) Activity/Location from where elopement occurred.
- 4) A statement from all staff on shift, roommates and other residents/visitors who were present.
- 5) Initial plan of prevention indicating where safety breakdown occurred.

WANDER GUARD MONITOR PROTOCOL

The Wander Guard System has been installed on six (6) doors at the ISVH-P. These doors are:

- 1. Main Entrance
- 2. Canteen
- 3. Dining Room
- 4. Shipping
- 5. Puzzle/TV Room
- 6. Chapel

If a resident has a transistor bracelet on and approaches one of these doors the alarm will sound.

There is an annunciator panel in the facility which is Located at the nurse's station. The panel will signify which door is sounding the alarm. Staff **mus**t get a visual from a staff member via in person, by radio or phone before silence or reset. The alarm can only be reset at the nurses' station and should only be reset when it is determined who set the alarm off, time it was set off and staff member resetting the alarm. (Document on the clipboard at the nurse's station). This information will be maintained by the CQI Committee to evaluate the effectiveness of the Wander Guard Elopement Protocol.

LETTER AND PARCEL BOMB THREAT

- **1.** General letter and parcel bomb recognition points. Some, several or none of the following points may be present on a letter or parcel bomb:
 - **A.** Foreign mail, airmail or special delivery.
 - **B.** Restrictive markings, such as confidential, personal, private etc.
 - **C.** Excessive postage. (Usually stamps not meter strips).
 - **D.** Handwritten or poorly typed addresses.

- **E.** Incorrect titles.
- **F.** Titles, but no names.
- **G.** Misspellings of common words.
- **H.** Oily stains or discolorations.
- **I.** No return address.
- **J.** Excessive weight.
- **K.** Rigid envelope.
- **L.** Lopsided or uneven envelope.
- **M.** Protruding wires or aluminum foil.
- **N.** Excessive security materials, such as masking tape, string, etc.
- **O.** Visual distractions.
- **P.** Distorted handwriting, homemade labels, cut-and-paste lettering.
- **Q.** Buzzing or ticking noise, or a sloshing sound.
- **R.** Excessive labeling, such as "Fragile-Handle with Care", or "Rush-Do Not Delay".
- 2. Specific letter and parcel bomb screening points. None of the above points need to be present. A bomber's ability may vary from crude to sophisticated in both the outside appearance and the bomb itself.
- **3.** Any package that "something just isn't right" about should be checked. Some ways of checking would be:
 - **A.** Is the addressee familiar with the name and address of the sender?
 - **B.** Is the addressee expecting correspondence from the sender? If so, what is the nature of the correspondence?
 - **C.** If correspondence is expected, what would be the contents of the item and its approximate size?
 - **D.** If the sender is unknown, is the addressee expecting any other business correspondence from that city, state, or country?
 - **E.** Does the addressee have friends, relatives, business acquaintances currently in the area of origin?
 - **F.** Has the addressee purchased or ordered any merchandise, information, gifts, books, photographs, magazines, or paintings from any business concern whose parent organization might be located in the city, state or country of origin?
 - **G.** Contact the sender to check if the package is legitimate.
- **4.** If a letter or parcel is suspect, and there is no verification of the contents by the addressee or the sender:
 - **A.** Contact the Police department and inform them of the suspected item.
 - **B.** Do not open the item.
 - **C.** If possible, transport the item to a safe place (let the police do this).
 - **D.** Do not put in water or in a confined space such as a drawer or filing cabinet.
 - **E.** Open windows and doors in the area (this helps to lessen the damage if the bomb explodes.
 - **F.** Contact Postal Inspector for additional assistance.

POWER OUTAGE PROCEDURE

In the event of a facility power outage the facility's emergency generator will automatically activate itself and supply power to the facility. The emergency generator is propane powered and is designed to provide electricity to the facility for an extended amount of time. The following are areas of concern during a power failure:

- **A.** Heating and air conditioning. The facility's HVAC system is connected to the emergency generator and both systems are fully operational during a power outage.
- B. Communication. The facility phone system has a battery powered backup system which allows the phone system to continue to function for up to one hour during a power outage. Staff is directed to continue to use the facility phone system for as long as it is functional. Staff is directed to use cell phones and any other communication methods associated with the cell phone, such as texting, and e-mail, to communicate with outside parties during a power outage. The facility's computer server has a battery powered backup system which allows it to continue to function for up to one hour during a power outage and e-mail will continue to function during this time. The computer terminal in the front office is connected to the emergency generator along with the computer terminal at the nurses' station. Staff needs to remember once the battery backup runs out and the server ceases to function, the computer system will not be functioning, even though the terminal is working.
- **C.** Food preparation. The natural gas supply to the facility is not interrupted during a power outage. Meals can still be prepared in the kitchen during a power outage.
- **D.** Water supply. Water supplied to the facility will not be interrupted during a power outage. Staff can continue to use tubs and showers for resident use. Emergency water for consumption is in the facility and is available for residents.
- E. Lighting and Power. Approximately 50% of the lights in the facility are connected to the emergency generator. High use areas such as resident rooms, hallways, kitchen, laundry, and therapy rooms will have lighting available during a power outage. Each resident room and other areas in the facility have electrical outlets with a red cover on them. The red cover indicates which electrical outlet is connected to the emergency generator thus making electricity available during an emergency. Staff is directed to have essential medical equipment plugged into these red electrical outlets. Examples of essential medical equipment are oxygen concentrators, IV and feeding pumps, and pressure relieving beds.
- **F.** Laundry services. The washing machines and dryers in the laundry room will not function during a power outage. Staff are directed to double bag soiled linen and resident clothing and place them in the laundry room. Once power has been restored laundry staff will launder all clothing and linens.

SEVERE WINTER WEATHER CONDITIONS PLAN

A. Stranded Employees. During severe snow conditions our roads may be closed preventing employees from either reporting for duty or returning home following their shift. This may create staffing challenges and the need to lodge staff. The safety of Veterans and staff in these conditions is paramount.

Staff stranded in Pocatello should follow their chain of command to seek resolution. The Administrator, Director of Nursing, Charge Nurse and/or Plant Maintenance

Supervisor will determine the most appropriate response based on the situation. Options include:

- **1.** ISVH Pocatello staff temporary sleep rooms.
- 2. Utilization of unoccupied resident rooms.
- **3.** Utilization of local hotels/motels as needed.
- **B.** Snow. Snow storms are described by the intensity of snow and wind. The National Weather Service uses the following terms:
 - **1.** FLURRIES Light snow falling for short durations. No accumulation or light dusting is all that is expected.
 - **2.** SHOWERS Snow falling at varying intensities for brief periods of time. Some accumulation is possible.
 - **3.** BLOWING SNOW Wind-driven snow that reduces visibility and causes significant drifting. Blowing snow may be snow that is falling and/or loose snow on the ground picked up by the wind.
 - **4.** BLIZZARD Winds over 35 mph with snow and blowing snow reducing visibility to near zero.

Local conditions and forecast http://www.weather.gov/pocatello

Road conditions & traffic cam http://hb.511.idaho.gov

ATTACHMENT P

Pocatello Police Department	Emergency Non-Emergency	9-1-1 236-6100
Pocatello Fire Department	Emergency Non-Emergency	9-1-1 236-6100
Bannock County Sheriff	Main	236-7114
City of Pocatello	Sanitation Dept. Water Dept.	234-6192 234-6182
Idaho Power	Facility wide Power	800-488-6151; press1
Intermountain Gas	Facility wide Gas	800-548-3679
American Electric	Minor electrical problem	233-5009
B&G Plumbing	Plumbing emergency	232-5632
Roto-Rooter Sewer	Plugged Drain	232-2458
Lewis Mechanical	Heating/Air	237-1314

B&S Boilers Boiler Service 524-1737

Culligan Water Emergency Water Supply 232-3857

UNLIKELY SCENARIOS

HURRICANE, TIDAL WAVE, DAM INUNDATION, VOLCANO, ETC. PROCEDURE

It is highly unlikely that an occurrence of a hurricane, tidal wave, dam inundation or volcano eruption will happen in Pocatello. If any of the above named emergencies or any other scenario not mentioned specifically in this procedure manual occurs, follow the emergency procedure for Earthquakes found on PAGE 16.

WILDFIRE, DROUGHT, LANDSLIDE, TEMPERATURE EXTREMES PROCEDURE

- 1. DO NOT PANIC.
- 2. If inside, remain inside, limit exposure to elements
- 3. Instruct residents, personnel, and visitors to move to interior of building
- **4.** In case of fire, follow fire command instructions
- 5. In case of evacuation, implement emergency phone tree
- **6.** Follow the emergency procedure for Earthquakes.

GENERATOR FAILURE, STRUCTURAL DAMAGE, HVAC FAILURE, MEDICAL GAS FAILURE, HAZMAT EXPOSURE (INTERNAL), TRANSPORTATION FAILURE, INTERNAL FLOOD, SEWER FAILURE, INFORMATION SYSTEMS FAILURE, FUEL SHORTAGE, INTERNAL AND EXTERNAL SPILLS POLICY

- **1.** Charge Nurse will use Emergency phone tree to, contact Facility Administrator and Building Foreman.
- **2.** Building Foreman and Facility Administrator will take charge of situation and implement necessary actions.
- **3.** Follow the emergency procedure for Earthquakes.

BIOLOGICAL TERRORISM, MEDICAL AND INFECTIOUS MASS CASUALTY INCIDENT, EPIDEMIC, MASS AND SMALL HAZMAT INCIDENTS, CHEMICAL AND RADIOLOGIC EXPOSURE CIVIL DISTURBANCE, LABOR ACTION AND TERRORISM POLICY

- 1. Charge nurse will call 9-1-1 and notify Facility Administrator and Building Foreman
- **2.** Refer to emergency procedure for earthquakes.
- **3.** Command of the situation will be handed over to first responders