

Developing an Emergency Response Plan

As a practice owner, you likely already have some form of an emergency response plan developed for your practice. Our desire here is to guide you in thinking about the varying risk exposures which are present in your day to day operations, so in the time of an emergency you are prepared to execute your plans without question. This is a process that could be put together as a team, or designated to a key employee who handles office risk management. Even if handled by a designated representative, good communication, training and implementation will require the entire dental office team to be involved.

There are a number of risk factors to consider addressing in both your **Safety Plan** and your **Action Plan**. Some events may require mobilization of staff to address the concern, while other events could result in a building evacuation or building lock-down. These may include:

- Medical Emergency (staff or patient)
- Detonated Bomb
- Fire or Gas Leak
- Weather Events - Earthquake, Mudslide, Flood, Tornado
- Structural Collapse
- Workplace Violence

Your office **Safety Plan** is an evaluation of all hazards and risks within your office and how to improve upon your surroundings for the best possible outcomes. Much of this involves ongoing maintenance checks, developing procedures, and training. A number of these tasks can be done on a monthly basis to make the process efficient and seamless.

What are the components of a great safety plan? OSHA advises the following are essential:

- Management commitment
- Staff and management accountability
- Employee involvement
- Hazard identification and control
- Accident investigation
- Employee training (ongoing)
- Plan evaluation

A basic office safety plan will review a number of components both inside and outside the building to assure your action plan will be successful. In developing this plan, be sure to address some of these most common concerns related to medical office hazards.

- Tripping hazards
- Maintenance and building updates
- Clean up of spills
- Clear fire exits free from obstacles
- Exit stairs and doors equipped with signage
- Housekeeping
- Test and replace batteries in fire alarms 2x yearly
- Check emergency kit for replacement supplies, expired meds (on a regular schedule)
- Floor plan diagrams and evacuation route (posted in multiple locations)
- Emergency contact numbers (posted in multiple locations)
- Annual inspection/tagging of fire extinguisher(s)

- Inspection of emergency lighting and exit lighting monthly (to include batteries)
- Repairs of damaged or malfunctioning equipment, plumbing, carpets, tiles, etc. as soon as noticed
- Avoid overload of electrical outlets

Emergency lighting (battery-powered or direct-wired into an emergency power supply) should be provided for the illumination of all paths of egress (including stairways). All emergency lighting fixtures should be inspected and tested at least monthly to verify that they are operable and that the beams are properly aimed.

Exit signage is critical in moving those persons unfamiliar with the building out quickly and safely. While many of these items are available in a local hardware store, internet shopping has made purchasing tools for your office simple and affordable.

LED/Battery Backup of Exit Signage		Prices start at \$20.00 Basic Battery Operated \$30.00 Includes Dual LFI Lights \$56.00 Pack of 2 Signs \$139.00 Pack of 4 Signs
Flat Exit Signage for Doors		\$5.99 Pack of 3 Signs

Fire extinguishers which are easily accessible and in good working order are critical to contain a small fire, or keep a fire at bay while everyone is evacuated from the building. Commercial grade fire extinguishers vary in pricing from \$60.00 to \$150.00 depending on the size and features. There are many types of extinguishers and a professional fire suppression company can guide you in the right direction for the one that is best for the potential exposures in your location and the sensitive equipment you have in your office. Clean agent extinguishers (such as CLEAN GUARD FE09 or FE36, rated at least 2A) are preferable for sensitive equipment and electronic devices – such extinguishers use agents that are non-conductive, non-corrosive, and leave behind no residue.

The number you should have is dependent on placement and the size of your building. It is recommended by NFPA they be no more than 75-100 feet travel distance and easily accessible. These extinguishers should be professionally inspected annually and tagged, although monthly inspection by a designated staff person is recommended to assure hoses are in place and there are no visual concerns. The pressure gauge on the extinguisher should always indicate that the extinguisher is charged (the needle will be in the green area of the gauge).

Your office **Action Plan** is specific to the type of incident at hand and provides a step by step the process in addressing the emergency and who is assigned to each task. If you have a property management company or security company onsite, they may need to be involved in planning and execution.

Developing Your Emergency Action Plan

According to OSHA laws, offices with over 10 employees must have both a written and oral emergency action plan, which must be kept in the workplace and available for employees to view. Offices with less than 10 employees may communicate action plans orally to employees.

Minimum Elements of an Emergency Action Plan (OSHA)

1. Procedure for reporting a fire or other emergency
2. Procedure for emergency evacuation and exit route assignments
3. Procedures to account for all employees and patients after evacuation
4. Procedures to be followed by all employees performing rescue or medical duties
5. Name and job title of every employee and an explanation of their duties under the emergency plan
6. Designate a lead employee who coordinates, regularly trains and reviews the action plan for updates when employees change or equipment is moved

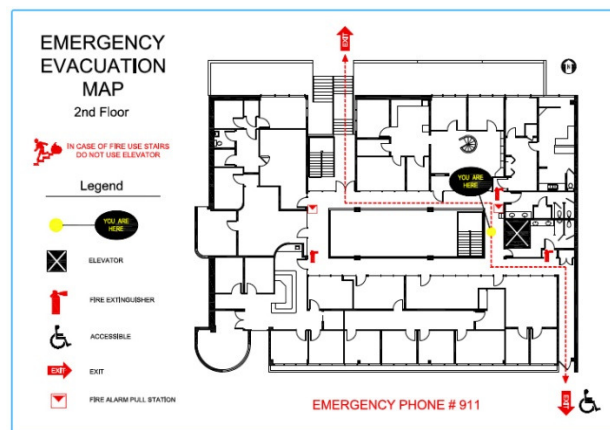
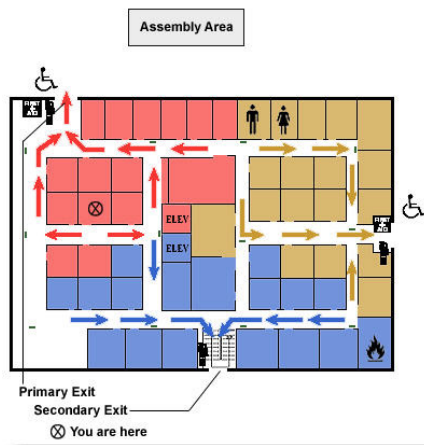
Likely you have already developed a procedure in case of a **Medical Emergency**. Review this procedure regularly to ensure it is up to date with current staff and any building changes/improvements. Know and train on the following:

- First aid and CPR (who is certified?)
- First aid kit location
- Oxygen location
- Who calls for medical assistance?
- Who handles rescheduling of appointments?

Are you prepared for a **Building Emergency**? As mentioned above, this could require evacuation or lock down. OSHA contains a wealth of information online to explain the varying exposures. At minimum the following should be addressed, posted and trained upon:

- Where are the fire extinguisher(s) located?
- Where are emergency exits?
- Who contacts emergency support (fire, ambulance, police, etc.)?
- Who handles roll call once outside?
- Who will check patient rooms to confirm all have exited the building?
- How are patients with special needs to be addressed?
- Has a safe room been established for lock-down or workplace violence events?

Evacuation plans are to be posted on the inside of every patient room door and often in hallways strategically spaced. These can be elaborate or simple, as long as the information is clear to someone unfamiliar with the building. Some samples are shown below:



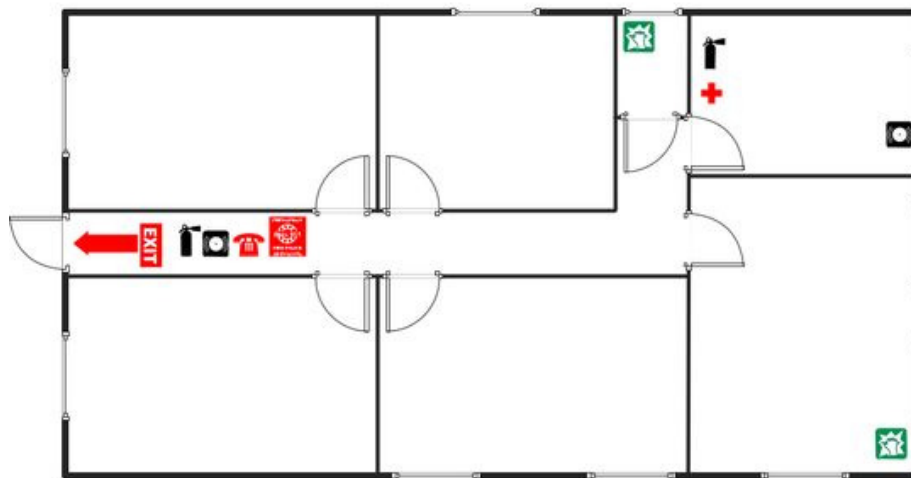
EMERGENCY EVACUATION PLAN



WILSON HALL
FOURTEENTH FLOOR WEST



- DIAL 3131 IN ANY EMERGENCY**
- EMERGENCY EXIT ROUTE
 - 🚒 FIRE ALARM PULL STATION
 - 🚑 AUTOMATIC EXTERNAL DEFIBRILLATOR (located at NE Elevator lobby on 13th & 15th floors)
 - 🧯 FIRE EXTINGUISHER
 - ★ YOU ARE HERE
- EMERGENCY SIGNALS**
- 🔥 FIRE INDICATED BY TONES, FLASHING STROBES, AND VOICE INSTRUCTIONS PLEASE GO TO THE OUTSIDE ASSEMBLY AREA
 - ☔ SEVERE WEATHER INDICATED BY VOICE INSTRUCTIONS PLEASE GO TO THE SHELTER AREA



Ideally the evacuation and emergency procedures are shared amongst staff in meetings and posted in key staff areas so they can be reviewed often and serve as a reminder when a situation arises. This is typically a formal written procedure, but may also include a simplified posted version like the samples below. If located in a multi-story building there may be a security team in place for the building which dictates this process for you. Having a team member serve on this committee is helpful in being prepared and training the remaining staff. If that is not an option, coordinating your plan with this security contact is imperative in making sure it works as you hope.

EMERGENCY PROCEDURES

In Case Of Emergency **DO THIS**

EVACUATION

On being given an Alert Signal...

1. Secure confidential and valuable items.
2. Proceed to floor/ area assembly point.
3. Follow instructions of Area Safety Marshall

On being given an Evacuation Signal...

4. Leave building via designated exit or nearest safe exit
5. Proceed to nominated assembly area.

FIRE

1. Activate nearest Fire Alarm or notify Switchboard on Ext 9
2. Assist any person in immediate danger **ONLY** if safe to do so.
3. Attack the fire **only** if **SAFE** to do so.
4. Close doors.
5. Evacuate to assembly area

Your Assembly Area is: _____

Your Area Safety Marshall is: _____

EMERGENCY TELEPHONE NUMBERS
POLICE
FIRE BRIGADE
AMBULANCE

Emergency Response Plan



Facility Name: _____

Facility Address: _____

Date Prepared: ____/____/____

Emergency Personnel Names and Phone Numbers

DESIGNATED RESPONSIBLE OFFICIAL (Highest Ranking Manager at

_____ site, such as _____, or _____):

Name: _____ Phone: (_____) _____

EMERGENCY COORDINATOR:

Name: _____ Phone: (_____) _____

AREA/FLOOR MONITORS (if applicable):

Area/Floor: _____ Name: _____ Phone: (_____) _____

Area/Floor: _____ Name: _____ Phone: (_____) _____

ASSISTANTS TO PHYSICALLY CHALLENGED (if applicable):

Name: _____ Phone: (_____) _____

Name: _____ Phone: (_____) _____

Date ____/____/____

Emergency Procedures

Medical Emergency Plan

If a medical emergency is reported, dial 9-1-1 and request an ambulance. Provide the following information:

- Number and location of victim(s)
- Nature of injury or illness
- Hazards involved
- Nearest entrance (emergency access point)

Alert trained employees (members of the medical response team) to respond to the victim's location and bring a first aid kit or AED.

Personnel Trained to Administer First Aid, CPR, or use Automated External Defibrillator (AED)

Name	Location / Telephone

Locations of First Aid Kits and Automated External Defibrillator(s)

Locations of First Aid Kits and "Universal Precautions" kit (used to prevent exposure to body fluids)	
Locations of Automated External Defibrillator(s) (AEDs)	

Procedures

- Only trained responders should provide first aid assistance.
- Do not move the victim unless the victim's location is unsafe.
- Control access to the scene.
- Take "universal precautions" to prevent contact with body fluids and exposure to bloodborne pathogens.
- Meet the ambulance at the nearest entrance or emergency access point; direct them to victim(s).

Leave Building

FIRE Evacuation Alarm will sound!

Special Instructions - In the event of a fire:
 • If the fire alarm has not gone off - "Shout 'FIRE!' to alert those personnel in the vicinity. An attempt to fight the fire with a portable fire extinguisher may be made by an employee if the fire is a very early stage and if the flammable, explosive or hazardous materials are involved, and can be done without risk of personal injury.
 • If the three last loud air horn blasts have sounded, proceed to the nearest exit.
 • Proceed to your designated assembly Point. Check in and stay with your Emergency Coordinator.
DO NOT leave the property until all personnel are accounted for!

GUNMAN

Special Instructions - In the event of a gunman or attack:
 Dial 911. Be sure to specify the location from where you are calling.
 Quick thinking will be essential to your well being. If you can exit the building safely and seek shelter behind a door, lock yourself into a secured office.
 When able to do so safely attend to any injured!
 First and foremost, protect yourself!

EARTHQUAKE

Special Instructions - In the event of an earthquake:
 During the initial shock waves, movement may be difficult, if possible, exit with caution. If this is not possible, seek shelter under your desk or stand in a doorway. Protect your head. Use a book or your hands.
 After the initial shock waves have subsided, help any injured, and leave the building quickly. Proceed to the assembly area outside the front of the building. Check in and stay with your Emergency Coordinator.
DO NOT leave the property until all personnel are accounted for!
 See Emergency Action Plan for further details.



Exterior Assembly Area

Remain in Building

TORNADO

Special Instructions - In the event of a tornado warning:
 A message will be communicated over the intercom and two loud air horn blasts will be sounded.
 Seek shelter in the interior hall way noted below designated as our severe weather shelter. Your greatest risk of injury is from flying glass and debris.
 Remain in this room until an "all clear" signal has been given.

SEVERE WEATHER / HURRICANE

Special Instructions - In the event of a thunderstorm with lightning or a hurricane:
 A message will be communicated over the intercom and two loud air horn blasts will be sounded.
 Be aware of the possible occurrence of either a power failure, high winds, lightning or a tornado. If you have time back up your files and, if possible, turn off your computer. Continue working on other duties not requiring a computer until the storm is over. In the event of a hurricane, special instructions are in the Hurricane Preparedness Plan.

FLOOD

Special Instructions - In the event of a flood:
 The following instructions are for those personnel located on the first floor areas. Personnel on other floors should proceed to assist those on the first floor.
 Turn off your computer and any other electrical devices and move all objects that can be damaged by water to the top of your desk! Evacuate to 2nd floor.
 See Emergency Action Plan for further details.



Interior Assembly Area

As Instructed

MEDICAL / PERSONAL INJURY

Special Instructions - In the event of a medical or personal injury:
 Dial 911. Be sure to specify the location from where you are calling.
 Have appointed "First Responder" dispatched to scene of incident. The Emergency Coordinator will designate someone to go to the front entrance of building. To meet and escort the emergency personnel to the victim. Care for the victim until help arrives.

BOMB THREAT

Special Instructions - In the event of a bomb threat:
 If a bomb threat call is received by an employee, immediately have a concrete call 911. **DO NOT** use cellular telephones!
DO NOT PANIC! DO NOT touch anything suspicious! **DO NOT** attempt to search for or disarm any suspicious devices. If alerted to evacuate, proceed to the nearest exit and meet by your assembly area.
 Keep the caller on the phone as long as possible so that a possible trace can be made of the call. Try to receive any background noises, sex and age of the caller, emotional condition of the caller, speech patterns or accents that the caller may have. Record the following information if possible:
 1. What time is the bomb set to explode?
 2. Where is the bomb located? Area?
 3. What kind of bomb is it?
 4. What does the bomb look like?

HAZARDOUS MATERIALS ACCIDENT

Special Instructions - In the event of a hazardous materials accident:
 You may be asked to leave the building. Avoid using the telephones and be prepared to follow instructions as directed by the Emergency Coordinator.
 See Emergency Action Plan for further details.

EMERGENCY TELEPHONE NUMBER
ALL EMERGENCIES:
 FIRE, POLICE, MEDICAL
 150 Performance Drive
 Belmont, NC 28012
911

MICHIGAN STATE UNIVERSITY		EMERGENCY GUIDELINES		S			
Fire Guidelines		Weather Warnings		Active Violence		Hazardous Materials	
1. Pull the alarm and call 9-1-1 .		If a weather warning is issued or severe or threatening weather approaches move to a safe shelter area.		1. If the incident is occurring near you, secure in place in a safe space where you are.		Exit the building if advised by Emergency Personnel and seek a safe rally site upwind of the building.	
2. Evacuate the building utilizing the nearest safe exit.		Notification is through: 1. Outdoor Warning Sirens or ConnectEd messaging.		2. If you can leave, evacuate immediately, call 9-1-1 if you have information about the incident. Otherwise:		SHELTERING IN PLACE:	
3. Meet at the building's designated rally site : Law School Building (north) Entrance.		2. Local TV or Radio.		RUN – Plan an escape route, leave belongings behind, when safe call 911.		1. Close and seal all doors and windows.	
4. Follow the instructions of Emergency Action Team Coordinators, Police, Fire/EMS personnel.		3. Inside buildings: a public address system, or the Emergency Action Teams.		HIDE – Locate an interior room – lock door, block with furniture, turn off lights, silence devices, avoid windows and doors.		2. Shut off any room air sources (vents, air conditioners, etc.).	
Persons with Disabilities: Assist in relocating the person to the nearest safe fire rated stairwell and Inform the nearest emergency responder of their location.		WEATHER SHELTERS: Indicated on evacuation maps highlighted in yellow. Seek an area away from windows, in hallways, or the basement of the building.		FIGHT – If in imminent danger - act aggressively, yell loudly, throw/use objects as weapons to incapacitate attacker.		3. Remain sheltered in place until advised by emergency personnel it is safe to exit and be prepared to move to a different safe area or evacuate if advised.	

Revised 7/22/13

FIRE EVACUATION PROCEDURE

ACTION ON DISCOVERING A FIRE*

1. SHOUT FIRE and SOUND THE ALARM by operating the nearest 'break glass' switch (one by back door, one by waiting room entrance, one by external door in community staff office).
2. REMOVE ANYONE in immediate danger
3. SHUT all rooms/doors nearby
4. DIAL 999 and ask for the fire service*. STATE CLEARLY the surgery address.
5. ATTEMPT to extinguish the fire if it is safe to do so.
6. EXIT the building – either through the front door, the back door or the upstairs fire exit in the community nurses room.

The fire brigade will only come if fire and/or smoke is confirmed

ON HEARING THE ALARM

1. FIRE MARSHALS SHOULD:
 - get fire marshal boards (upstairs in meeting room; downstairs in reception alcove) and follow instructions on the board
 - check for fire and/or smoke. If either is detected, call 999 and ask for the fire service
2. Doctors, nurses and other staff with patients are responsible for escorting them safely out of the building to the muster point (on the road at the rear of the surgery).
3. The reception staff are responsible for patients in the waiting areas, the reception office and the patient and staff downstairs toilets. Assist any disabled patients.
4. The practice manager and upstairs staff are responsible for all other areas, ie their own room, upstairs staff toilets and consulting rooms, community staff office, eaves rooms and, whilst safe to do so, closing all doors and windows as they check.
5. Close windows and door in the room you are in and go to muster point.
6. If your passage is blocked by smoke, leave the building by an alternative route.
7. All persons to meet at the muster point where it should be established that the surgery is empty, ie take a roll call of all staff.
8. The Fire Marshal should nominate a receptionist to stand at the front of the surgery premises to prevent any further entry into the building by visitors/patients.
9. Do not re-enter the building until told to do so by the Fire Service or Fire Marshal.
10. If any patient is uncooperative, leave them in the building but tell the Fire Brigade immediately on their arrival.

DO NOT TAKE ANY RISKS

Emergency Response Pre-Incident Plan (NFPA 1620)

Both OSHA and the ADA agree there should be a formal plan with the fire station that will respond to any emergencies at this location (not the Fire Marshall's office) that will include:

1. Identifying the location of any staff member (or possibly patients) that may be disabled or otherwise unable to safely evacuate the building without assistance;
2. Identifying the nature and extent of assistance that will be needed;
3. Identifying the location of all emergency fire detection-alerting-protection systems on the premises; and
4. Identifying the location of all boilers/water heaters, gas and electrical service entries, main breaker panels, all flammable storage areas, oxygen or anesthetic gas cylinders or tanks, hazardous waste containers (biomedical, heavy metal), wastewater filtration systems, and any wireless antennas or solar panels on the roof.

Management simply needs to contact the Fire Department station that is closest to the office and ask them to tour the facility for the purpose of developing their (the fire station's) response plan for the location. Management should inform the fire department of the four items listed above.

No discussion on emergency planning is complete without considering the risks for **Workplace Violence**. In 2010, the Bureau of Labor Statistics (BLS) data reported healthcare and social assistance workers were the victims of approximately 11,370 assaults. This is a 13% increase from the prior year. While there is no single approach to addressing this concern and each environment poses unique risks, it is universally agreed that a zero-tolerance policy should be adopted. This includes patients, employees, contractors, vendors, and anyone else who comes into contact with persons within your office. Open dialogue with staff is important in understanding if the potential for risk has changed. Having a practiced plan in place, should a situation arise, could save lives.

OSHA has the following pages available which discuss workplace violence hazards, evaluation, plans and resources.

<https://www.osha.gov/SLTC/healthcarefacilities/violence.html>
<https://www.osha.gov/SLTC/workplaceviolence/index.html>

This should get you started on your safety plan, but is by no means all encompassing. Your OSHA representative or a certified risk manager is your best option at making sure your procedures are in compliance and up to date. The ADA has also developed a comprehensive Disaster Manual specific to dental offices which is available on the PPP website or directly through the ADA.

This process of developing your plan is a valuable investment that will pay off for the life of your practice.

Sources:

United States Department of Labor, Occupational Safety and Health Administration
AK Preparedness, Locations in Seattle, New York, Houston, Chicago
Aspen Insurance – US
American Dental Association