

BORDER REGION MHMR COMMUNITY CENTER Disaster Plan

Border Region MHMR Community Center has a comprehensive disaster plan that clearly delineates the procedure that will be followed in the event of a disaster that will assure the maximum safety and protection of clients, staff and visitors; the full protection of essential records, property; and the proper training of staff to respond to disaster.

Procedure:

1. The Director of the Center has the authority to declare a disaster and to specify the kind of disaster that exists. When a disaster occurs, the center's Director, with the assistance of the Executive Council and Safety Officer, shall oversee the implementation of the Center's Disaster Plan.
2. Administrative Council is responsible to the Director for the preparation, updating and providing an effective training program for employees responding to a disaster; and for the coordination of their employee's activities in emergencies.
3. All Supervisors are responsible to Division Heads for providing Disaster training to their staff, and for implementing disaster plans within their departments.
4. Each employee is responsible to his or her own supervisor for being totally knowledgeable about the Disaster Plan, and for carrying it out appropriately, when necessary.
5. Disasters are classified accordingly:
 - a. Internal Minor - Any unusual situation within the bounds of the Facility, that is beyond the control of the personnel on duty at the Location where it occurs. When an internal minor disaster occurs, the personnel on duty should summon aid from other facility personnel and departments.

- Illustrations:
1. Minor fire
 2. Minor windstorm
 3. Minor explosion
 4. Minor flood, earthquake, etc.

- b. Internal Major – A situation of a disaster nature within the bounds

of the facility, that is beyond control of all personnel at the time and will require aid from outside sources. The type and extent of the Disaster will dictate the type and amount of aid required.

- Illustrations:
1. Major fire or explosion
 2. Tornado or Major windstorm
 3. Major earthquake
 4. Fallen aircraft
 5. Major building collapse
 6. Bomb threat

c. External Major – Any unusual situation beyond the property bounds of the facility where lives or property are in danger and the services of facility personnel or equipment can be of assistance.

- Illustrations:
1. A fire outside facility property where aid is requested.
 2. Floods, windstorm, etc. where aid is requested from the facility when adjacent property or lives threat.
 3. Any unusual situation where the services of the facility are summoned for aid to assist an adjacent community.

Note: This type of disaster should not include a general alarm at the Facility, but rather instructions and directions should be given directly To the person(s) who will respond to the request for aid.

d. External Major – Any disaster situation beyond the bounds of the facility and beyond control by the community in which it occurred.

- Illustrations:
1. Major fire, explosion, tornado, hurricane, etc., involving adjacent communities.
 2. Major floods
 3. A disaster where emergency services of the community are not adequate to cope with the situation.

Note: Unless lives or property within the bounds of the facility are endangered, this type of disaster should not include a general alarm for the facility.

6. Employees must recognize that any combination of the above disaster

classifications may occur making it difficult to determine how to classify the disaster. In this event, the Director, or designee will determine the most appropriate course of action to cope with the situation. However, the disaster plan, as herein provided, will be followed as closely as possible. Where responsibility is questioned, nothing in this writing should prevent the use of reasonable, sensible, alternative methods for solutions to situations that are not spelled out, which constitute immediate hazards to life and/or self-preservation.

7. When a general alarm is in order, all staff on duty shall be notified discontinue all routine business, and telephone trafficking. The facility reverts to emergency operations.

SPECIFIC PROCEDURES

1. Initial response to Hazardous Conditions:

- a. Any employee becoming aware of a hazardous condition shall notify his/her supervisor, and begin action necessary to assure safety of persons.
- b. Any supervisor notified by his/her employee(s) of a hazardous condition will coordinate activities necessary to assure of persons, and to control/eliminate the hazardous condition. The supervisor will determine whether the safety of persons can be assured and hazardous condition controlled/eliminated by his/her employees on duty, and if not, will notify the Department or Division head to whom he/she reports and call in additional personnel either present at the facility or off duty to assist.
- c. When action to assure safety of persons is effectively underway, action to assure protection of essential records and property should be taken as soon as personnel are available, without endangering the safety of persons.
- d. The Department or Division head, or employee acting in their place, will notify the Director immediately, the Safety Officer and all Division Heads that a hazardous condition exists at the facility which requires assistance from persons not available at the scene. Telephone number of these employees are available at the Receptionists desk so that they can be contacted when off duty.
- e. The Director and Division Heads, if off duty, will report to the

facility and will call in their Department Heads and other employees as needed.

- f. The Director, Designee, or members of the Executive Council present will determine whether to declare a disaster/emergency.

2. Declaring a condition a disaster/emergency:

- a. If the disaster/emergency condition occurs on the grounds of the facility, or is in the area of the facility and presents an immediate threat to the facility, the Director if present or designee, or members of the Executive Council present will make the determination about the facility's response to the condition.
- b. If the disaster/emergency is in the community and not an immediate threat to the facility, the Director, if present, or designee or Executive Council members present will direct the switchboard operator, if applicable, to announce the GENERAL ALARM.

3. Staff actions upon disaster/emergency notification:

- a. All employees, with the exception of key personnel listed in 2 below, will report to, or standby at their regular duty station. If the regular duty station is the emergency area, employees not involved with the emergency will report to a safe area under the control of their respective department.
- b. The following sequence of events will be accomplished simultaneously in order to initiate disaster/emergency procedures:
 - 1. Upon notification of the disaster/emergency of the disaster /emergency condition, the switchboard operator, if applicable, will inform the key personnel of the GENERAL ALARM by pager or telephone and cease all routine telephone trafficking.
 - 2. The following key personnel on campus will immediately report to the scene of the emergency:
 - a. Safety Officer
 - b. The Director or Designee
 - c. Maintenance/Housekeeping Supervisor
 - d. Medical Director

e. Nursing Coordinator

3. The Executive Council will report to the Administrative Conference room for the purpose of determining the location of the disaster control center and the scheme of the operations.

4. Guide for Evacuation, if required by the Emergency

a. For Personnel:

1. Evacuate persons from the immediate area of danger;
2. Evacuate any non-ambulatory persons first;
3. Evacuate persons from the unsafe living area to another safe living area within the same building; or,
4. Evacuate persons from the unsafe living area to another safe living area in another building; or,
5. Evacuate persons from the unsafe living area to another building (Auditorium, Administration, etc.); or,
6. Evacuate persons from the unsafe inside area of one building to a safe inside area of another building; or,
7. Evacuate persons from the unsafe inside area to a safe outside area; or,
8. Evacuate persons from the unsafe area to safe shelter or motor transportation (to be used as a last resort and/or when evacuation from the facility is required).

b. For ICF-MR Group Homes

1. Evacuation, care, and housing of MR clients shall be handled by the Director of Mental Retardation Services, designee or the person in charge of residential units.
2. Emergency information to families regarding MR clients shall be handled by the Director of Mental Retardation Services.
3. Evacuate persons from the immediate area of danger;
4. Evacuate any non-ambulatory persons first;
5. Evacuate persons from the unsafe living area to another safe living area within the same building; or,
6. Evacuate persons from the unsafe living area to another safe living area in another building; or,
7. Evacuate persons from the unsafe living area to another building (Auditorium, Administration, etc.); or,
8. Evacuate persons from the unsafe inside area of one building to a safe inside area of another building; or,
9. Evacuate persons from the unsafe inside area to a safe outside area; or,

10. Evacuate persons from the unsafe area to safe shelter or motor transportation (to be used as a last resort and/or when evacuation from the facility is required).

- c. For Equipment, Records, Files, etc.
 - 1. Medical records, cash assets, inventory documents are to be evacuated first.
 - 2. Personnel records are to be evacuated second;
 - 3. Evacuate from the unsafe inside area to another safe inside area of another building
 - 4. Evacuate from the unsafe inside area to a safe outside area; or,
 - 5. Evacuate from the unsafe outside area to another safe outside area; or
 - 6. Evacuate from the unsafe area to a safe shelter or motor transportation.

5. Response to Declaration of Disaster/Emergency

In its comprehensive disaster plan, the Border Region MHMR Community Center clearly delineates the procedures that will be followed in the event of a disaster that will assure the maximum safety and protection of clients, staff, and visitors; the full protection of essential records, and property; and the proper training of staff to respond to disaster. It further clearly states that each employee is responsible for being totally knowledgeable about the facility (and departmental) disaster plans, and for carrying out appropriately, when necessary, all departments will work in a coordinated effort, and the established lines of authority will be followed in implementing safety procedures from Director to Business Manager/Dietitian, to Food Service personnel.

The following definitions and examples of disasters describe the different types of unusual situations which could occur:

Internal Minor: Disasters are beyond control of the personnel on duty at the locations where they occur. Example: minor fire in the kitchen, requiring help of others at the facility or the fire department.

Internal Major: Disasters are beyond control of all personnel at the time, and will require aid from outside sources. Example: fallen aircraft on administration building.

External Major: Disasters are beyond the property bounds of the facility, but The Laredo Housing Development Agency can be of assistance. The fire, windstorm, etc. has occurred on an adjacent property or adjacent community.

External Major: Disaster also occurs beyond the facility and is beyond the control by the community in which it occurred. In this situation the facilities of DADS and DSHS are made available. Example: major hurricane in the valley – BRMHMR provides lodging and food for Rio Grande Community Center Clients.

Combinations of these situations may also occur.

When the Director or representative calls a general alarm through the switchboard operator, routine business and telephone calls cease, and the facility reverts to emergency operations.

An emergency may occur in the kitchen making it unsuitable for food preparation procedures of any type to be conducted. In this case, the clients may be sent home or transported to an alternate facility deemed suitable by the Director or representative, until such time as the kitchen becomes operational. The kitchen may also be temporarily relocated to another building on the campus, or may be housed out of one of the campus units.

6. Purposes of Emergency Feeding Plan

To ensure maintenance of the current nutritional status among the mentally retarded residents of the Border Region MHMR Community Center in a disaster or emergency situation, through provision of nutritionally adequate and well balanced meals, for a minimum period of three days. Primary consideration will be given to those individuals (i.e., diabetics) whose adherence to a prescribed diet regime is essential at all times.

To coordinate with other departments and outside health care facilities, for an integrated feeding of Border Region MHMR residential clients during major disasters.

To train food service staff of the Center and others to the extent that these persons can implement the plan even in the absence of the Manager/Dietician.

Formal training in emergency feeding will be given in June of each year to Food Service Staff and others who are interested.

Through cooperation with the Staff Development Department, the training will be tape recorded for replay to others who work at different units, etc. at more convenient times.

A current copy of the plan will be distributed to Food Service employees for posting at a convenient area at home, for off-hour emergencies.

Attached to this will be the names and telephone numbers of other Food Service employees.

Those who live nearest the facility will be called on first so they can get things started while the others are arriving.

7. Notification of Health Authorities

The Texas Department of Health “Rules on Food Service Sanitation” state:

In the event of an occurrence, such as a fire, flood, power outage, or similar event, which might result in the contamination of food, or which might prevent potentially hazardous food from being held at required temperatures, the person in charge shall immediately contact the regulatory authority (Webb County Health Inspector). Upon receiving notice of this occurrence, the regulatory authority shall take what ever action that it deems necessary to protect the public health.

(Food and Drug Division, 301.73 p.6, para. 1)

It is the responsibility of the Food Service Manager/Dietitian to notify the local health authorities, for the protection and welfare of the client, and that of the facility.

8. Primary Elements of Emergency Feeding

1. Menu Planning.
2. Storage of selected foods and supplies.
3. Development of good working arrangements.
4. Selection, assignment and training of personnel.
5. Proper waste disposal.
6. Evaluation and assessment after disaster.
7. Replenishment of fresh supplies.
8. Education of staff regarding new policies and procedures resulting from self assessment.
9. Implementation of new procedures development from such self assessment.

9. Emergency Food Inventory:

These foods and supplies are kept in the indicated amounts (perpetual inventory) **

- a. 7-14 day supply of frozen foods on campus; 60 day supply off-campus at frozen food lockers.
- b. 2-7 day supply of milk, bread, eggs, produce, and ice cream.

- c. 1-2 months USDA goods: Dry Milk, cheese, butter, oil, shortening, cereal and grain products.
- d. 3 day supply of paper products.

** Lists of items in categories A, B, and C are on inventory forms in Food Service Department.

Bottled deionized drinking water lasting a variable amount of time, depending on use. Rotation of this water according to recommendations of the Webb County Health Department is the responsibility of the Supply Officer. Present supply is 240 gallons on reserve.

10. Emergency/Disaster Menus

Breakfast	Dinner	Supper
Orange Jc.	Ham Sandwich	Roast Bf. Sandwich
Cornflakes Bun/Toast/Jelly	Pork & Beans Tossed Salad/dressing	Pickled Beets Lettuce wedges Dressing
Milk Coffee	Fresh Fruit Milk	Milk Fruit Flavor Bev. Tea
Pineapple Jc.	Turkey Sandwich	Cold Cut Sandwich
Wheaties	Green Beans	Chick. Noodle Soup
Bu. Toast/Jelly	Tomato wedges	Carrots
Milk Coffee	Peaches Milk	Fresh fruit Milk, Tea Fruit Flavor Bev.
Apple Jc.	Hamburger/Bun	Tuna salad Sandwich
40% Bran Flakes	Lettuce/tomato/pickles	Vegetable salad
Huevos con papas Milk Coffee	Mustard/Mayo Peas Fruit Cocktail	Pear halves Milk Fruit Flavor Beverage

11. Weather Emergency

The weather may prevent employees from traveling to and from work, yet clients must still be fed. Vendors may be unable to deliver food and supplies. The facility may be required to both feed and house staff. If not scheduled on regular shift duty, employees should wait to be notified by the Personnel department that they should report to the facility, as per the facility plan, and should listen carefully for other important instructions. A list of tasks that can be performed in Food Service by untrained volunteers is being devised; copies will be forwarded to the Volunteer Services Coordinator. Preplanned emergency menus will be reviewed early in the weather emergency by the Food Service Manager/Dietician, for suitability and adaptation to the specific conditions. Staff feeding schedules will be planned around client feeding schedules. Staff food may be delivered to their work stations, depending on conditions. Meat, cheese, condiments, bread, and hot soup will be provided in the coffee-room for some staff to make their own sandwiches. It is the responsibility of the Manager/Dietician to ensure that everyone is fed in accordance with facility disaster plan provisions. Disposable dishes will be used only as necessary, unless the water supply has been affected, in order to keep trash removal and storage to a minimum.

12. Disruption of Water Supply

Water is essential to the functioning of the Food Service Department. The facility has made provisions for supplying water if the normal source of water is contaminated, reduced or eliminated. If provisions are not made for supplementation of the emergency alternate water supply, and this alternate source is exhausted, the clients of the Center will be evacuated to a facility with a safe and adequate water supply, until the conventional water supply can be reinstated. In the event of an emergency precipitating no water shortage, disposable food service items are to be used only while an acceptable system for washing and sanitizing trays and utensils is set up. This will help prevent possible problems with disposal of garbage.

13. Emergency Dish Washing Procedure

1. All food waste accumulated during an emergency will be placed in plastic trash can liners and secured.
2. The trash receptacle shall be filled to half capacity.
3. Trash bags with food waste shall be removed from the Food Service area for immediate disposal in the garbage cans on the maintenance dock, except in the condition explained below.
4. When weather emergency requires it, an area in the building will be designated for temporary storage of securely bagged garbage. Such

bags will be placed 18 inches or more above the floor on absorbent surfaces, whenever possible.

14. Aftermath

After a disaster or emergency, other procedures should be followed to ensure speedy yet safe return of the operation to the pre-disaster state.

1. If fire damage to the kitchen has occurred, repairs will have to be made, and approval received from the Fire Marshal or other pertinent authority. (Cleanup may last for over a week in the kitchen if soot from a fire continues to settle on previously cleaned areas.)
2. Department of Health officials will be expected to take swabs of the food preparation area to ensure that food is being prepared under sanitary conditions.
3. Adjustments will have to be made to production and work schedules as clients are readmitted to the cottages after having been moved out of the facility for safety reasons.
4. Similarly, during an external disaster, staffing and scheduling for meal production must be adjusted if Border Region MHMR Food Service Department is asked to help feed others.
5. Evaluation and reporting procedures will be followed, as per facility policy.

15. Department Response to Emergency Disaster

A. Fiscal and Support Services: Responsibilities are as follows:

1. Food and water shall be handled by the Food Service Manager.
2. Supplies shall be handled by the Supply Officer.
3. Equipment shall be handled by the Plant Supervisor.
4. Communication shall be handled by the Switchboard Operators.
5. Evacuation and protection of records shall be handled by the Accountant.
6. Establishment of an emergency system for maintenance and preservation of center records shall be handled by the Accountant
7. Emergency vehicle control shall be handled by Motor Pool Supervisor.
8. Preparing Emergency Quarters shall be handled by Housekeeping.
9. Emergency traffic, property and building control handled by Security Personnel.
10. Emergency fire protection/prevention, and control shall be handled by the coordinator of safety and Security

B. Mental Retardation Department – Responsibilities are as follows:

-
1. Evacuation, care, and housing of MR clients shall be handled by the Coordinator of MR services or the person in charge in the cottage.
 2. Housing of employees and visitors shall be handled by the Director.
 3. Emergency information to families regarding MR clients shall be handled by the Coordinator of MR Services.

C. Mental Health Department: Responsibilities are as follows:

1. Evacuation, care, and housing of MH clients shall be handled by the Coordinator of Mental Health Services or the person in charge of the MH cottage
2. Emergency Medical Services shall be handled by the staff Physician.
3. Emergency information to families regarding MH clients shall be handled by the Coordinator of MH Services.

D. Response by Personnel: Responsibilities are as follows:

1. Off duty employee recall shall be handled by the Personnel Officer
2. Emergency information to families of employees shall be handled by personnel.
3. Emergency messages to employees (incoming) shall be handled by Personnel.

E. Coordinator of Staff Services: Responsibilities are as follows:

1. Evacuation and protection of Master Client Records shall be handled by the Medical Records Supervisor.
2. Coordination with local community agencies shall be handled by the Administrator of Staff Services.

F. The Director and Division Heads: Responsibilities are as follows:

1. Man Disaster Control Center in Conference Room and Director's outer office.
2. Coordinate all emergency activities.
3. Receive and disseminate all information concerning the emergency and its handling.
4. Make decisions as necessary.
5. Report to the Commissioner, Deputy Commissioner, or Assistant Deputy Commissioner, Board as appropriate for guidance and exchange of information.

16. Evaluation of Disaster or Emergency Response

- a. Each Division and/or Department Head will critique the performance of their personnel immediately following the return to normal condition. The critique will involve the Division's role in the disaster/emergency. Notes and reports of incidents shall be gathered.
- b. Notes and reports of incidents collected during Division/Department critiques shall be compiled, discussed and evaluated by the Director and Executive Committee. A Report of the evaluation shall be provided to all staff by the Center's Director or the Executive Committee.

17. Training for Preparedness

- a. In-service training on the Disaster Plan will be provided as part of New employee Orientation during the Fire and Safety presentation. Employees who are new employees will also be trained completing the staff Development training module on Disasters.
- b. New employees will be given orientation within 30 days of employment on disaster/emergency preparedness requirements at the facility.
- c. Internal disaster/emergency drills will be conducted periodically throughout the year for the purpose of evaluating preparedness. At least one disaster/emergency drill will be conducted annually.
- d. External disaster/emergency drills will be conducted at least one time a year. This drill will, to the maximum extent possible, be conducted with the local disaster preparedness agency schedule.

18. Medical Emergency Procedures

- a. Remove sources of danger from the injured party. This may include items such as, removing aggressive consumer from the area, or altering hazardous conditions such as fire, gases, etc. it may be necessary to remove the injured party to a safe location prior to treatment, but moving the victim should always be a last resort.
- b. If the victim can not move, the injury is to be considered serious. Do not move the victim. Apply first aid to the degree possible without moving the victim. Call 911 and the Center nurse or physician. Be prepared to provide information concerning:
 - 1. type of injury
 - 2. behaviors/age/sex, etc, of the victim
 - 3. medications the victim may be taking
 - 4. location of the injured party

- c. If the victim can move, encourage the victim to remain still and apply first aid. Attempt to determine the seriousness of the injury by questioning the victim as to how he or she feels and observing for injuries.
- d. If the injuries appear to be serious, EMS (911) should be called immediately. Non-medical staff may attempt to determine the seriousness of the injury as follows.
 - 1. consumer expresses great discomfort,
 - 2. discoloration
 - 3. bleeding requires constant pressure to stop
 - 4. dislocation
 - 5. slurred speech
 - 6. impaired movement
 - 7. pupils do not react to light or react unevenly,
 - 8. cool clammy skin
 - 9. seizure activity in excess of 4 minutes
 - 10. drooling
 - 11. labored breathing
 - 12. poisoning suspected,
 - 13. eyes closed
 - 14. exposed bone
 - 15. unconsciousness
 - 16. any head injury
- e. Staff observing any of these symptoms should assume a serious injury and not move the victim. Apply first aid, call EMS (911), and Border Region MHMR medical staff.
- f. If none of the above symptoms are present and the staff member believes the injury is not serious, apply first aid if needed and allow the victim to rest. Arrange for a visit with the center nurse or physician.
- g. All units shall keep a copy of the Red Cross Manual for ready access by staff.

19. Transfer to Outside Medical Facility

- a. The physician on duty/call will determine if the consumer will be transferred to either Laredo Medical Center or Doctors Hospital. Medical emergencies requiring specialized procedures and or nursing care not available at Border Region MHMR shall be referred to either Laredo Medical Center or Doctors Hospital.

-
- b. The physician will initiate request for notification of parents or guardians and notify the clinical Director and Administrator on call.
 - c. A written record of the medical/nursing interventions which have been initiated will accompany the consumer to the receiving facility.
 - d. The family will be notified by the case worker or the case manager. In the case of serious injury, the Director or the Director's designee will inform the parent, guardian or close relative.

20. Unauthorized Departure

- a. The unauthorized departure of an inpatient or court ordered outpatient of the center, who cannot care for his/her own safety, or is considered to be a danger to themselves or to be a danger to others, is considered an "unusual incident" and shall be reported accordingly.
- b. All consumers are afforded freedom of the Border Region MHMR grounds, unless restricted by the treatment team. Employees should remain alert to the possibility that consumers may absent themselves from the grounds. Any employee noting any behavior which is suggestive of unauthorized departure should immediately notify the dormitory and, pending arrival of assistance, attempt to dissuade the consumer from leaving the Center's grounds.
- c. The police will be alerted in the event of an unauthorized departure by MR residents. They shall also be notified when a court committed individual leaves on an unauthorized departure.
- d. When a consumer who cannot care for his or her own safety, or who is considered to be a danger to himself or others, leaves the
- e. Center's grounds without proper authorization, the charge nurse who is supervising the cottage at the time, shall notify the Center's Director immediately. If the departure occurs during program activity, then the Supervisor shall notify the Center's director immediately.
- f. The Center's Director, or designee shall be responsible for notifying the consumer's family, the local police department, and such other persons as deemed necessary.

21. Bomb Threat Procedure

- a. At any time a bomb threat is received, the Director or Assistant Director will be contacted immediately and will make decisions for evacuation, as to how, when and where.
- b. The Director or Assistant Director will call 911 and request their help.

-
- c. The local Fire Department will make a building search. Maintenance will supply floor plan.
 - d. All evacuees must be 300 feet from any part of the building and out of roadway.
 - e. The Director or Assistant Director will decide when to enter the building.
 - f. The Director, Assistant Director, or Public Information Officer should be the only person to give information to news media.
 - g. Any person receiving a bomb threat telephone call should assume that the threat is real. When such a call is received, get all the information possible, disregard any other calls. By all means stay calm, be a good listener and be polite. Attempt to get the following answers and data. Write down the information.
 1. Mark down exactly the time of day the call is being received. Take notes of what the caller is saying.
 2. Let someone else around you know what is going on and they will inform the director of the call.
 3. Ask questions such as where, what time, what kind, and why.
 4. Be alert for background noises on their phone. Note the caller's type of speech, stutter, accent, etc.
 5. Let the caller know that the center is occupied with consumers, children, etc. and other people that need help. A detonation of a bomb could result in death or injury to innocent people.
 6. Note if the caller indicates knowledge of center inter areas.
 7. As soon as the caller hangs up, report the above information to the following persons:
 - a. Director
 - b. Maintenance Manager (Does not discuss the call to any other employees until staff has been informed by the Director).
 - c. Write down word for word what the caller said.
 8. Stay at your work station for debriefing of call.
 9. If center is to be evacuated you will be instructed by the Director, designee, or safety Officer/Director.

22. Fire

Purpose: The primary purpose of the Fire Policy and Procedure is to provide a course of action for all personnel to follow in the event of a fire.

Procedure:

- a. **R** – Rescue and evacuate anyone in immediate danger. Evacuate 50 feet from the building and out fire lane.

-
- b. **A** – Alert all others in the building. Pull the nearest fire alarm. The person in charge shall contact the fire department by calling 911.
 - c. **C** – Contain the fire. Staff will shut all doors behind them as they exit each area of the building.
 - d. **E** – Extinguish if the fire is confined to a small area, such as a wastebasket, and is not growing; everyone has exited the building; the fire department has been called or is being called; and the room is not filled with smoke. To operate a fire extinguisher, remember the word PASS:
 - 1. **P**ull the pin. Hold the extinguisher with the nozzle pointing away from you, and release the locking mechanism.
 - 2. **A**im low. Point the extinguisher at the base of the fire.
 - 3. **S**queeze the lever slowly and evenly.
 - 4. **S**weep the nozzle from side-to-side.

23. Fire Drills

The Border Region MHMR Community Center conducts fire drills to keep staff trained in their specific duties should a fire be discovered.

Residential units are required to conduct one fire drill per shift per quarter. They are to be coordinated so that one fire drill will be conducted each month. All three shifts must have had a fire drill within a three month period.

Residents do not need to be awakened during the night shift, but only once per year. These drills need to be conducted after the first two hours of sleep or before the last two hours of sleep. The evacuations may be internal or external depending on the weather.

Non-residential units must have one drill conducted within a quarter.

Fire drills are not to be conducted during shift change. Each fire drill will be conducted by the unit safety officer, without any prior notification to staff, clients, or visitors.

Difficulties or problems encountered during the drill will be reported on section IV of the Facility Fire/Evacuation report. If follow up action is required, document the action to be taken. The fire drill must be repeated during the same month in order to correct the deficiency noted.

The following responsibilities will be divided among the staff to ensure clients, visitors and staff is evacuated.

1. Everyone must evacuate the building to a distance of 50 feet away from the building.
2. A staff member should place a makeshift call to the fire department (911).
3. A staff member should take a head count of everyone who has evacuated the building to ensure that everyone is safe and accounted for.
4. If not everyone has evacuated the building, a staff member should search the building to ensure that everyone evacuates the building.
5. No one should re-enter the building until the “all clear” has been given by the person (s) conducting the drill.
6. The drill will be documented by the unit safety officer on a Facility Fire/Evacuation Drill Report. Each participating staff member will sign the form and include their title. The completed form should then be forwarded to the center’s Safety officer/Director, and a copy kept on file. Problems encountered during the drill, will be addressed by the unit safety officer.

24. Personal Injury to Consumers

All injuries incurred by consumers of this facility, regardless of severity, shall be reported on a Client Injury/Incident Report. All sections of this report shall be filled out in accordance to the directions outlined later in this document.

25. Personal Injury to Visitors & Guests

All injuries to visitors and guests will be reported on a Supervisor’s Report on the Employee’s Injury form. All pertinent information shall be filled out in the report. Injured guests and visitors may use the facility’s medical resources when injured on center property.

26. Incident Investigation

All accidents (an unplanned event that results in a work related injury or illness or medical expense) occurring throughout the facility will be investigated and reported. Injury report forms shall receive the prompt attention of those involved on the completion and evaluation of such forms.

-
- a. The immediate supervisor of the injured employee or the immediate supervisor of the program where a consumer is injured will investigate the accident, in coordination with the Safety Officer/Director when required, and complete an accident report form.
 - b. Investigations will be thorough, true causes and contributing factors will be determined, and action will be taken to prevent recurrence of similar accidents.
 - c. Accidents will be investigated immediately after their occurrence. The completed report will be promptly submitted to the Safety Officer/Director (within 24 hours or the next working day during holidays and weekends) after the accident has occurred. All sections of the reports must be completed prior to submission.
 - d. Supervisors may request assistance from the unit safety officer and agency specialists as required.
 - e. When an accident occurs, the immediate supervisor of the injured will determine (in coordination with the Division Head, if necessary) whether:
 1. The injured employee or consumer had been previously trained to recognize the specific accident cause factor, i.e., the unsafe act or practice, or the unsafe physical condition that caused the accident.
 2. The injured employee or consumer failed to comply with the instructions previously received during a safety training class.
 3. A safety rule, regulation or standard operating procedure had been violated by the employee.
 4. The employee had been instructed by anyone to disregard a specific safety rule, regulation, or S.O.P., and if so by whom.
 5. Any accidents suspected to be of possible abuse or neglect shall be reported to the Texas Department of Family and Protective Services at 1-800-647-7418. A copy of the written report shall be submitted to the Director within 2 hours of the incident.
 - f. The supervisor is responsible for taking actions to prevent reoccurrence of similar accidents. Such actions will include, but not limited to the following:
 1. Training of the individual, either initial, refresher or remedial training, as deemed appropriate.
 2. Revision of existing safety rules, regulations or S.O.P.'s if found to be inadequate.
 3. Preparation of new safety rules, regulations or S.O.P.'s as needed
 4. Enforcement of safety rules, regulations and S.O.P.'s

-
5. Appropriate Administrative or other action against the injured if a safety rule, regulation, S.O.P., or other instructions were violated.
 6. Notification of top management if someone had ordered or instructed an employee to disregard a safety rule, regulation, S.O.P., or other directive.
 7. Correction of any unsafe condition; a physical hazard that has caused the accident.
 8. Taking other positive action, as necessary, to prevent recurrence of similar accidents.

Safety Conscious Program

A Safety Awareness Program will be established throughout the facility to keep staff interested in Safety. The program will allow for input from all staff and units.

The Safety Committee will establish such a program in which Safety Awards will be awarded to units with the best overall injury statistics.

The Safety Committee will also assist in publicizing Safety Related hand-outs, and assist with other projects assigned. Suggestions shall be solicited from department heads, supervisors, and employees.

Approved:

Daniel Castillon, Executive Director

Date