DHMC INSTITUTIONAL SAFETY INFORMATION

Dial 5 5 5 5 on any in-house phone for help with ANY emergency
FIRE – BOMB THREAT – ILLNESS – INJURY – PERSONAL SAFETY - SPILLS

5 5 5 5 is the DHMC in-house emergency phone number to use for any emergency. A "house" phone is any phone which is not a pay phone. House phones are located on staff desks, in conference and activity rooms, hanging on walls along hallways, and sometimes in pay phone areas. Dial 5 5 5 5 to get help for any emergency problem.

OVERHEAD PAGING – the general alarm system is our only system where we can notify all staff, patients, and visitors that an emergency is occurring. The announcer will give the type of code (see descriptions below) and the location of the emergency by giving the building # and level #. Pay very close attention to the messages.

~ CODE RED – FIRE – Listen for the voice message to learn the location of the fire. Follow any instructions which are given. (See the R A C E procedure below.)

If the strobe light is flashing during an alarm, this indicates that the fire is in your immediate area. The fire doors in the “hot” zone will close. DO NOT re-enter a closed fire door area before hearing the "all clear" message, unless so instructed by an authorized staff person.

BE PREPARED Take time to locate the fire alarm pull boxes & extinguishers, and emergency exit(s) in any area in which you are volunteering.

In case of fire (or even just smoke), remember– R A C E rule:

* R – RESCUE person(s) from fire room. Close door to room.
* A – ACTIVATE pull alarm box & dial 5 5 5 5 to report.
* C – CONTAIN fire by closing doors to all rooms in the area.
* E – EXTINGUISH fire if small/ EVACUATE others from the surrounding area

NOTE: If there is not time to do all of these procedures and/or you are unsure about what to do, call 5 5 5 5 first.

~ CODE AMBER – ABDUCTION OF AN INFANT OR CHILD – the message will alert all staff to the age and gender of the missing child. All persons accompanying or holding a child of this description shall be stopped and not allowed to leave until questioned by authorities.

~ CODE BLACK – BOMB THREAT – Listen for the voice message to learn the location of the suspected bomb – if known. Listen for the next message and follow any instructions which are given.
CODE PURPLE – GENERAL DISASTER – this could be internal (e.g. hazardous spill), or external (e.g. a school bus rolled off the highway). Pay close attention to the instructions which will follow. Stay on duty unless instructed otherwise. You may be asked to move to another location to perform your role.

CODE SILVER – LIFE THREATENING WORKPLACE VIOLENCE – if you are in danger, do not panic, vacate if possible, call for help if possible, listen to the aggressor & use compassion. If you are NOT in the area, stay away and move patients & staff out of public areas, behind closed doors, & secure if possible.

ILLNESS OR INJURY – Call 5555 for illness or injury experienced by staff, volunteers, visitors and patients. Examples are falling, dizziness, any injury, vomiting, collapse, cardiac arrest, etc. DO NOT attempt to administer medical help (such as CPR) unless so instructed by an appropriate staff member.

SPILLS – Dial 5555 for spills of unknown origin, because the spill could contain caustic or hazardous material. If you spill your own drink, it's fine to clean it up.

• Expect to receive both department and patient specific safety training in each area in which you will be volunteering.

• Depending upon your volunteer role, you may be expected to have more comprehensive Occupational Health & Safety Administration (OSHA) training.

NOTE: Safety training is required annually for volunteers and staff. It is a requirement for Volunteer Services to have a signed copy of this form, as proof of training, for each volunteer. Please return this form (signed & dated below) to Volunteer Services. If you would like a copy, we will make one for you. Thank you.

I have read and understand the above information and am willing to comply with this and other safety training and regulations as required.

_____________________________________________________   __________________________
Signature   Date

_____________________________________________________
Printed name