

*This is a sample only and does not need to replace the Emergency Operation Plan your company may have already developed.*

Draft

Provider logo

**[Provider name]**

**Contains information specific to the  
[Provider name] Office located at:  
[locations]**

[date]

# [Provider name] EMERGENCY OPERATIONS PLAN

## [Provider name] Emergency Operations Plan (EOP) Training and Implementation Plan

### EOP Program Overview

Each [Provider name] location will designate specific staff who will serve as members of the office Safety Response Team (SRT). The SRT will receive comprehensive training as outlined in the Training Materials section of the [Provider name] Health and Safety Plan binder.

The Safety Response Team in each office will consist of the following assignments:

- **Safety Officer:** Coordinates and executes all necessary emergency response actions, required staff training and office drills. The Safety Officer will also be responsible for completing and submitting all required drill assessment reports and drill and training attendance logs to HR (Office Admin. staff will be trained to serve as Safety Officer)
- **Safety Monitor:** Directs/coordinates employees and visitors to appropriate exit locations during actual emergencies and drills, assures emergency responders have clear paths to access buildings and checks that exits are accessible and will make sure no one attempts to re-enter the building after evacuation. (all office management staff will be trained to serve as Safety Monitors)
- **Safety Attendant:** Helps those requiring assistance due to mobility issues to exit the building safely during any emergency situation or drill. (all office management staff will be trained to serve as Safety Attendants)

[Date]

## **Training and Implementation Plan**

1. The [Provider name] Safety Committee will work with each office to identify the specific staff who will serve as members of the Safety Response Team (SRT).
2. A member of the [Provider name] Safety Committee will provide detailed EOP training to the SRT in each office.
3. The SRT in each office will then be responsible for providing EOP training to all staff who resides within their specific office locations.
4. One time per year, during a predetermined all staff meeting, the EOP “refresher” training will be conducted for all employees and the Safety Officer will be responsible for submitting the required Emergency Operations Plan Training Log showing completion of this training to HR for file retention.
5. To ensure all [Provider name] staff are competent with their roles and responsibilities during emergency situations, all offices are required to perform specific, emergency drills outlined below and to document and submit proof of staff participation.

### **One Full Evacuation Drill per year**

- Fire and Evacuation

### **Four Simulated Tabletop Drills per year:**

- Bomb Threat
- Agitated/Threatening Behavior
- Utility Failure/Natural Disaster
- Medical emergency

6. Upon completion of each drill, the drill attendance log and drill evaluation report will be completed by the Safety Officer and submitted to HR for file retention.
7. All new hires will receive the official EOP training no later than 3 days after reporting to their home office. The Safety Officer will be responsible for conducting this training and submitting the required Emergency Operations Plan Training Log showing completion of this training to HR for file and retention.

## **Table of Contents**

**Title**

**Page**

[Date]

Easterseals Bay Area Emergency Operations Plan Policy	1
Emergency Phone Numbers	2
Emergency Operations Plan training for new/current employees, including EOP Training Log Form	3
Fire	4
Fire Extinguisher Overview	5
Natural Disaster	6
Utility Failure	7
Bomb Threat/Explosion	8
Violent Threatening Situation	9
Medical Emergency including Client Incident Report	10
Evacuation Procedures	11
Employee, Client and Visitor accountability after building evacuation	12
Workplace Injury, including Employee Incident Report	13
Infection Prevention including Hand Wash/Hand Rub instructions	14
Respiratory Protection – Tuberculosis (TB) Exposure	15
Standard Precautions	16
CA Proposition 65 Potentially Hazardous Materials	17
Hazardous materials clean up	18
Office Emergency Drill procedure	19
References	20
Safety Data Sheets	21
ESBA Safety Equipment	

[Date]

# [Provider name]

## Emergency Operations Plan (EOP) Policy

Safety is an integral part of daily operations within the [Provider name] organization. The objective is to provide an effective Emergency Operations Plan (EOP) that will outline clear and concise information to maintain the highest possible safety standards for employees, clients and visitors. Our Emergency Operations Plan includes information to assure that we will:

- ) All offices have a designated Safety Response Team to direct and assist employees, clients and visitors in the event of an emergency. There are 3 key roles in the ESBA Safety Response Team:
  - **Safety Officer:** Coordinates and executes all necessary emergency response actions, required staff training and office drills. The Safety Officer will also be responsible for completing and submitting all required drill assessment reports and drill and training attendance logs to HR
  - **Safety Monitor:** Directs/coordinates employees and visitors to appropriate exit locations during actual emergencies and drills, assures emergency responders have clear paths to access buildings and checks that exits are accessible and will make sure no one attempts to re-enter the building after evacuation.
  - **Safety Attendant:** Helps those requiring assistance due to mobility issues to exit the building safely during any emergency situation or drill.

The Safety Response Team will be responsible for the following action items:

1. Train all employees within their office to understand the [Provider name] Emergency Operations Plan.
2. Perform annual, scheduled drills to ensure all employees are adequately trained in the event of an emergency. A log and evaluation report of these completed drills will be completed and submitted to HR.
3. Provide necessary Personal Protective Equipment (PPE) and instructions for proper use
4. Conduct a prompt and thorough investigation of every reported safety incident to determine the cause and correct the related issue and prevent reoccurrences

The [Provider name] Safety Committee is responsible for implementation of this EOP for [Provider name]. If you have any questions regarding this policy, please contact your immediate supervisor.

# EMERGENCY CONTACT INFORMATION

[Provider name]

**[Location]**

**[address]**

Emergency: Dial 911 from outside line on [Provider name] land line telephones

Local Police, Non-Emergency:

Nearest Hospital

Designated Occupational Health Center Location:

Poison Control Hotline: 1-800-222-1222

Corporate Compliance Hotline:

ESBA Corporate Main:

Should any member of the media contact you during an emergency, or for any other reason, please refer them to the *Natalie Margolis, Chief People officer* at 925-266-8400.

The [Provider name] emergency call list during business hours is as follows:

<b>Name</b>	<b>Title</b>	<b>Phone (Office and Cell)</b>

# **EMERGENCY OPERATIONS PLAN TRAINING FOR CURRENT AND NEW EMPLOYEES**

## **TRAINING FOR CURRENT EMPLOYEES**

All New [Provider name] employees are required to attend safety training upon hire. The first exposure to [Provider name] safety procedures will occur during New Hire Orientation in the [Provider name] corporate office. The second training will occur within 3 days of the new hire reporting to their home office and is designed to ensure they are adequately familiarized with their specific work environment and to specifically identify the safety features of their building. These safety features will include:

1. Location of all emergency exits within the building.
2. Locations of all fire safety equipment including fire extinguishers, emergency fire alarm pull boxes, smoke detectors, fire doors, flashlights first aid kits and blank incident report forms.
3. Location of the designated exterior assembly area that would be utilized in case of an emergency evacuation.

## **TRAINING FOR CURRENT EMPLOYEES**

All current [Provider name] employees are required to attend an annual safety refresher training conducted within their home office. The EOP Training Attendance Log will be completed to show participation. This annual training is provided to remind employees of the safety features within the building and will include:

1. Location of all emergency exits within the building.
2. Locations of all fire safety equipment including fire extinguishers, emergency fire alarm pull boxes, smoke detectors, fire doors, flashlights first aid kits and blank incident report forms.
3. Location of the designated exterior assembly area that would be utilized in case of an emergency evacuation.

# FIRE

## In the event of a fire:

1. Immediately activate the nearest fire alarm box and call 911 to report the location of the fire (remember to dial 9-911 from any internal landline) or use your cell phone which may have better reception.
2. Immediately evacuate the building in an orderly fashion using the stairs closest to the emergency door you are exiting from. **DO NOT USE THE ELEVATOR!** After exiting the building proceed directly to the designated exterior assembly area located at \_\_\_\_\_. Roll will be taken to account for all persons.
3. Before opening any doors, feel the door with the back of your hand to see if it's hot. If it's hot to the touch, most likely the adjacent room is on fire. Do not open the door as this could cause flames in the adjacent room to blast through the opening with tremendous force and heat.
4. Head for the nearest emergency exit by crawling close to the ground along the perimeter wall. Smoke rises to the ceiling and the air will be easier to breathe closer to the floor. Immediately proceed to the designated exterior assembly area for a head count.
5. Remain in the designated exterior assembly area until a member of the Safety Response Team or official emergency responders provides further instructions.
6. All employees should be able to locate the following safety items:
  - Fire alarm pull box(s) and fire extinguishers
  - First Aid Kits and other office safety equipment
  - Emergency exits and stairway access if applicable
  - Emergency evacuation maps



# FIRE EXTINGUISHER OVERVIEW

1. All facilities are equipped with ABC rated fire extinguishers that are inspected annually and recharged as needed. Please familiarize yourself with these locations within your office.
2. In the event of a fire, the first responder must immediately activate the nearest fire alarm pull box. **If safe to do so**, attempt to extinguish small, controllable fires with the nearest fire extinguisher.
3. When confronted with a fire, remember the acronym **R.A.C.E** to help you respond safely and correctly:
  - **R**escue anyone in immediate danger
  - **A**larm – Activate the fire alarm pull box
  - **C**onfine the fire by closing doors and windows
  - **E**vacuate the area if the fire is too large to extinguish
4. When confronted with a fire, remember the acronym **P.A.S.S.** to help you remember how best to operate the fire extinguisher:
  - **P**ull the ring off the extinguisher
  - **A**im the nozzle at the base of the fire
  - **S**queeze the handle
  - **S**weep the nozzle back and forth
5. If the fire is not immediately controllable, evacuate by means of the nearest available emergency exit. **DO NOT USE THE ELEVATORS!**

# NATURAL DISASTER

## Earthquake:

1. In the event of an earthquake, remain calm and seek shelter under a sturdy support structure such as a desk or table and hang on until the shaking stops. If the ceiling collapses or objects fall from high places, you will be protected. Try to position yourself away from glass or windows.
2. After the initial tremors, everyone should immediately exit the building in a calm and orderly fashion using only the stairs. **DO NOT USE ELEVATORS!** Immediately proceed to the designated exterior assembly area for a head count. Do not re-enter any buildings until directed to do so by the proper authorities. Remember after-shocks are expected!
3. Once outside, remain in an open area away from buildings, windows and power poles. If you're in your car, stop and stay inside until the shaking stops. Avoid stopping near trees and power lines or under overpasses.
4. Stay away from any exposed electrical, gas or water lines and any open flames. Do not smoke or strike matches or lighters.
5. Give first basic aid as needed. Do not use cell or landline phones unless essential. Keep the phone lines open for extreme emergencies and emergency responders.

## Severe Storms:

1. A flood watch indicates the possibility of flooding in specific areas during times of heavy rain. Be alert of these conditions but do not evacuate unless directed to do so by emergency responders or a member of Safety Response Team or official emergency responders.
2. A flood warning means that flooding is either occurring or has a very strong probability of occurring. If your specific area is determined to be under a flood warning be prepared to respond quickly as directed.

# UTILITY FAILURE

Power outages can occur at any time due to severe weather conditions or equipment malfunctions. It is easy to become disoriented when power is lost and your environment suddenly goes dark.

## **In the event of a power outage:**

1. Remain still and do not move until your eyes become adjusted to the darkness in order to prevent injury. Do not call PG&E. A member of the Safety Response team will make that call for an outage update.
2. Locate flashlights in your adjacent areas and provide assistance to persons in your general vicinity who may require help reaching the building exits. If possible, unplug your laptop from its power source prior to leaving your work area. Do not attempt to move any equipment from the building.
3. Exit the building by using nearest the emergency exits and proceed to the designated exterior assembly area for a head count and await further instructions from a member of the Safety Response Team.
4. Downed electrical lines are sometimes the cause of a power outage. Down power lines should always be considered live and therefore, avoided.
5. If power will not be restored within a reasonable timeframe the Safety Officer will inform the office management team who will coordinate decisions regarding cancellation of services and will contact those impacted.

## **In the event you smell natural gas:**

1. Immediately report any unusual odors to the front office. Be specific as to where you detected the odor and when you first noticed it.
2. Remain inside the building until told otherwise as potential gas leaks usually originate from gas lines entering the building from outside. A shelter in place order may be announced and further instructions will be provided if necessary.

# BOMB THREAT/EXPLOSION

## If a bomb threat is received by phone:

1. Remain calm and try to obtain as much information as possible, including:
  - Where is the bomb located and when is it set to go off?
  - What type of device is it?
  - What will cause it to explode?
  - Will you tell me your name?
  - Is the caller male or female, young or old? Are any specific background noises identifiable?
  - Check to see if caller ID provides you a phone number and if so write it down.
  - If you receive a bomb threat via email, immediately contact your supervisor for further instructions.
2. **Immediately** upon receipt of a bomb threat, inform your supervisor who will call 911. Do not discuss with co-workers as this may cause needless panic.
3. If necessary, instructions will be given regarding evacuation procedures.
4. If a suspicious item is discovered **do not touch it!** Leave this to the professionals.
5. If you detect an explosion remain inside the building and shelter in place under a sturdy object such as a desk or table
6. There may be a high level of dust, debris and even smoke surrounding your immediate area and if necessary use a jacket or sweater to cover your nose and mouth.
7. Before leaving the building try to determine if any co-workers might be trapped under debris and in need of help.
8. Assess the situation if possible and provide basic first aid while attempting to contact emergency responders for help. Each office is equipped with emergency response first aid kits so please familiarize yourself with the location of the kit(s) in your office.
9. If you smell gas or a fire is evident immediately exit the building via the nearest emergency exit. Always exit buildings via stairs if applicable. Proceed to the designated exterior assembly area for a head count and further instructions from a member of the Safety Response Team or official emergency responders.

# **VIOLENT/THREATENING SITUATION**

1. If a threat is detected you should determine if it's safe to exit the building without drawing attention to yourself. Do not, under any circumstances, attempt to confront or restrain the intruder
2. If leaving the building is not an option look for a secure area to hide; a locked, darkened room is best, Use a large piece of furniture to block the door and silence your cell phone
3. Call 911 from your cell phone if possible and describe the intruder's appearance, clothing and last known location
4. Stay on the phone with the dispatcher
5. Remain calm and quiet
6. Do not leave your location until instructed to do so by Police or other official emergency responders

# MEDICAL EMERGENCY

1. If you witness a medical emergency, e.g.: heart attack, stroke, seizure you must immediately call 911 or direct a co-worker to do so. It's critical that you react quickly
2. Assess the situation and provide appropriate first aid including CPR if necessary. CPR should be provided by a trained and certified person if readily available. All clinical staff should be current with their CPR certification. If you are not current please let your supervisor know immediately.
3. Remain with the victim until emergency responders arrive. In most cases the 911 dispatcher will have you remain on the phone while attending to the victim until help arrives on site. Do not attempt to transport the victim to the hospital yourself
4. Direct a co-worker to proceed to the front of the building to guide emergency responders to the location of the victim
5. If the medical emergency involves a client/child, and the caregiver is present it is the responsibility of the caregiver onsite to make necessary medical decisions. If no caregiver is present (i.e. client has been dropped off at an [Provider name] clinic), [Provider name] staff call 911 for any medical emergency, then call the parent/caregiver.
6. If the medical emergency involves a parent/adult who is accompanied by a client/child, the situation must be assessed by a member of management who is on site
7. Anytime a non-employee is involved in a medical situation the ESBA Client Incident Report must be completed and immediately emailed to [quality@thebhpn.org](mailto:quality@thebhpn.org)

# EVACUATION PROCEDURES

Emergency evacuation maps are posted in each office and all employees shall be trained as follows:

1. All employees are to be given the official EOP training including evacuation procedures within 3 days of reporting to their home office.
2. In the event of an office evacuation, a specific outdoor location will be determined to be the official assembly area for staff to gather post evacuation. Gathering at this location will ensure a viable head count of all employees, clients and visitors.
3. Elevators are never to be used for evacuation purposes. Evacuate via stairs adjacent to emergency exits only.
4. Employee, Clients and Visitors should remain onsite until a member of Safety Response Team or official emergency responders deem it safe to leave.
5. For specific office evacuation location areas the following table lists the location for assembly in the event of an emergency:

Office Location	Assembly Location

# **EMPLOYEE, CLIENT AND VISITOR ACCOUNTABILITY AFTER BUILDING EVACUATION**

1. The Safety Officer is responsible for accounting for all building occupants, personally or through a designee, by having all such occupants report to the designated external assembly area and conducting a head count using the official [Provider name] Employee and Visitor Sign In sheets which are maintained at each office reception area.
2. Official Emergency responders who are dispatched to the site will determine the best method to locate missing occupants in each situation.
3. At no time should any person re-enter the building to search for occupants who are unaccounted for or to retrieve personal belongings unless directed to do so by the proper authorities.
4. Employee, Clients and Visitors should remain onsite until a member of The Safety Response Team or official emergency responders deem it safe to leave.

## **CLIENT CARE WHEN CAREGIVER IS NOT PRESENT DURING EMERGENCY**

1. Employees who are responsible for a client (who has been dropped off for session at an [Provider name] clinic) during an emergency should follow all procedures and instructions from The Safety Officer and keep the client in their care at all times until a caregiver can be contacted and the client released back into caregivers custody.
2. Immediately following the emergency, as soon as it is safe, the Employee must contact the clients caregiver.
  1. If the caregiver can not be reached, follow process for process for "Late Client Pick Up Procedure"
    - a. Call parent/guardian
      - i. If not reached leave message
      - ii. Call again 10 minutes after scheduled session end time
    - b. Call 1<sup>st</sup> emergency contact
      - i. If 1<sup>st</sup> emergency contact has not responded after 20 minutes (from end of session time) move to step 3.
    - c. Call 2<sup>nd</sup> emergency contact
      - i. If no contacts have responded after 45 minutes (from end of session time) move to step four.



- d. If no contact for the client can be reached, after multiple attempts to contact parent/guarding AND 1<sup>st</sup>/2<sup>nd</sup> emergency contacts AND after 45 minutes of no contact (from any client contact) call local police department and report child has not been picked up.
  - i. The client must be with a practitioner and/or manager at all times while waiting for pick up. If the practitioner who provided service is unable to stay with the client the client may wait with a manager. The manager on duty (see manager on duty procedure) is responsible for all clients at the center until they are picked up. The manager on duty and a second practitioner must wait with the client until they are picked up.
  - ii. If no clients can be reached and police are called, please call the Senior Manager immediately (and Associate Director of Senior Manager is unreachable) a Reportable Event Form must be completed.
- o
- 3. If an employee has to leave the site care of the client must be transferred to a member of [Provider name] Clinical Management.

# WORKPLACE INJURY

The following is a step-by-step guide on how to handle an on the job injury for any [Provider name] staff member.

1. Determine the severity of the injury.
2. Supervisor/Manager (in their absence the HR) will complete an Employee Incident Report and provide the necessary paperwork and direct the Employee to a medical facility to seek treatment (if applicable). The Supervisor/Manager will forward all Employee Incident Reports to People & Performance Department within 24 hours from the incident.
3. Proper PPE should always be worn when providing any level of first aid.
4. If the Employee is seeking medical treatment, the Supervisor/Manager will provide a copy of Workers Compensation Claim Form (DWC1 form) to the employee to take with them to the medical facility.
5. Call 911 if the injury is determined to be serious in nature or life threatening.
6. After the medical appointment, employees must submit an updated Work Status Report to the People & Performance Department, who can review and then advise on next steps. **The employee cannot return to work until a member of the P&P Team has provided clearance.**
7. The most updated Employee Incident Report is attached and can also be located in [location of binder] under commonly used forms.
8. All completed Employee Incident Reports must be sent to HR and a member of the HR will advise on next steps.
9. For all Client Injuries/Incidents please inform your Supervisor/Manager and complete a Client Incident Report.

# INFECTION PREVENTION

Hand washing or hand rubbing is one of the best ways to prevent the spread of infection and illness.

1. What is the right way to hand wash?
  - a. Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap
  - b. Lather your hands by rubbing them together with the soap. Be sure to lather the backs of your hands, between your fingers, and under your nails
  - c. Scrub your hands for at least 20 seconds
  - d. Rinse your hands well under clean, running water
  - e. Dry your hands using a clean towel or air dry them
  
2. What is the right way to hand rub?
  - a. Apply hand sanitizer to the palm of one hand (read the label to learn the correct amount)
  - b. Rub your hands together
  - c. Rub the product over all surfaces of your hands and fingers until your hands are dry
  
3. Approved disinfecting wipes or sprays should be utilized to clean treatment and work areas according to the manufacturer's instructions.
  
4. Cover your mouth and nose when coughing or sneezing.
  
5. Staying up-to date with immunizations can reduce the risk of contracting various diseases.

# **RESPIRATORY PROTECTION TUBERCULOSIS (TB) EXPOSURE**

Tuberculosis (TB) is caused by a bacteria. TB bacteria usually attacks the lungs, but can attack any part of the body such as the kidney, spine, and brain.

TB germs are passed through the air when a person who is sick with TB disease coughs, laughs, sings, or sneezes. Anyone nearby can breathe in these TB germs and get the TB infection.

A TB bacterium that lives in the body without making you sick is called latent TB infection. For most people their body is able to fight the bacteria and stop them from growing. People with latent TB infection do not feel sick, do not have any symptoms, are not infectious and cannot spread TB bacteria to others.

If the TB bacteria become active in the body and multiply, the person will go from having latent TB infection to being sick with TB disease and can pass the TB germs to others. Treatment is available and you should immediately seek medical attention since if not treated properly TB disease can be fatal.

Two kinds of tests are used to detect TB bacteria in the body: the TB skin test (PPD) and TB blood tests. If you have a positive reaction to either of the tests, you will be given other tests to see if you have latent TB infection or TB disease.

To assure the safety of employees and clients as a condition of employment ESBA requires all clinical staff to be tested for TB.

If an ESBA employee has a possible exposure to someone with TB disease he/she should notify the People and Performance Department.

# STANDARD PRECAUTIONS FOR EXPOSURE TO BLOOD BORNE PATHOGENS OR OTHER POTENTIALLY INFECTIOUS MATERIALS

Accidental exposure to blood and bodily fluids may happen in the workplace. To ensure safety for everyone involved it is necessary to presume that all exposures are potential carriers of a communicable disease. Universal precautions are in place to prevent exposure to blood-borne pathogens as well as other potentially infectious material, (OPIM), e.g.: nose bleed, vomit, fecal matter, and urine. These precautions are outlined below:

1. Personal Protective Equipment (PPE) is provided and clearly marked with instructions for use in each clinical setting and the reception area and includes disposable gloves, masks, disinfecting agents and trash bags for secure disposal.
2. Wear disposable gloves when it is reasonably anticipated that there may be contact with blood or OPIM or when handling or touching contaminated items or surfaces.
3. Remove PPE after it becomes contaminated and before leaving the work area.
4. Used PPE may be disposed of in the small white trash bags that are included in the PPE kit.
5. Replace gloves if torn, punctured or contaminated, or if their ability to function as a barrier is compromised.
6. Never wash or decontaminate disposable gloves for reuse.
7. Remove immediately or as soon as feasible any garment contaminated by blood or OPIM.
8. Hand washing is the most effective method for control of communicable disease. Wash hands with soap and water for at least 30 seconds, especially prior to food handling and after using the restroom.
9. If at any time you suspect that you have been exposed to blood borne pathogens or OPIM you must immediately seek medical attention, fill out the appropriate incident report and contact your supervisor for direction.

# **CA Proposition 65**

## **Potentially Hazardous Materials**

ESBA adheres to all requirements of CA Proposition 65: Safe Drinking Water and Toxic Enforcement Act. This proposition requires that appropriate signage is posted disclosing any potential contaminants within a building. All ESBA sites are in compliance with this requirement.

Everyday office items such as fluorescent light tubes, batteries, electronic devices, toner and cleaning supplies may contain hazardous materials that only present a safety risk if they are not used or disposed of according to the manufacturer's instructions.

To ensure the safety and health of staff, customers and visitors ESBA is designated as a non-smoking environment.

Safety Data Sheets (SDS) help you understand the potential health and physical hazards, describe how to respond effectively to exposure situations and provide disposal considerations. Each ESBA location has been provided with SDS information which is housed within the Health and Safety Plan binder with instructions for the potentially hazardous items in your work area. Notify your immediate supervisor and the department of People and Performance of any accidental exposure and immediately complete and submit the appropriate incident report.

# HAZARDOUS MATERIALS SPILL CLEAN UP

1. Upon discovery of a hazardous materials spill or exposure immediately inform your supervisor and locate the Safety Data Sheet (SDS) located in the Health and Safety Plan Binder within your office and review the necessary steps to handle the specific occurrence.
2. Appropriate PPE must be used in all cases when cleaning up hazardous materials of any kind, including disposable gloves, masks and eye protection.
3. If you are responsible for the containment of a spill immediately locate the office Biological Spill Kit.
4. Prevent the spill from migrating by placing a barrier of paper towels in front of the spill to contain it.
5. Prepare a disinfectant solution by diluting bleach with water in a 1:10 solution.
6. Place paper towels over the spill and pour the disinfectant on the paper towels. Starting from the periphery of the spill and moving towards the center slowly pour the solution being careful to minimize aerosolization.
7. Let the disinfectant soak for at least 10 to 20 minutes.
8. While wearing correct PPE wipe the spill with paper towels starting from the periphery of the spill and moving towards the center.
9. Wipe any equipment or furniture with equipment-compatible disinfectant and rinse with water if necessary.
10. Dispose of any paper towels, gloves and masks used in the clean-up in a leak proof, sealed bag.
11. Always make sure you notify your immediate supervisor of the incident and complete and submit the Employee Incident Report to the People and Performance Department at [P@esba.org](mailto:P@esba.org).

# OFFICE EMERGENCY DRILL PROCEDURES

All ESBA offices are required to conduct the emergency drills per the schedule listed below:

## **One Full Evacuation Drill per year**

- Fire and Evacuation
- **Four Simulated Tabletop Drills per year:**
  - Bomb Threat
  - Agitated/Threatening Behavior
  - Utility Failure/Natural Disaster
  - Medical emergency

1. The office Safety Officer will oversee all drills and communicate pertinent information and delegate tasks. The Safety Officer will also compile and submit all Drill Attendance Logs and the Drill Evaluation Report within 48 hours after completion of the drills to the Facilities department at [Facilities@esba.org](mailto:Facilities@esba.org).
2. The ESBA Safety Committee will review all Drill Evaluation Reports and make recommendations for performance improvement as necessary.



# REFERENCE(S)

## **Fire and Fire Extinguisher Overview – Pg. 4-5**

- ) National Fire Protection Association, [www.nfpa.org](http://www.nfpa.org)
- ) Workplace Fire Safety, [www.seattle.gov](http://www.seattle.gov)
- ) Fire Extinguisher 101, [www.fire-extinguisher101.com](http://www.fire-extinguisher101.com)
- ) Fire Extinguisher use, [www.osha.gov](http://www.osha.gov)

## **Natural Disaster – Pg. 6**

- ) Natural Disasters | Ready.gov, [www.ready.gov/natural-disasters](http://www.ready.gov/natural-disasters)
- ) Nexis Preparedness Systems, [www.nexisprep.com](http://www.nexisprep.com)
- ) Centers for Disease Control and Prevention, [www.emergency.cdc.gov/disasters/earthquakes/index.asp](http://www.emergency.cdc.gov/disasters/earthquakes/index.asp)

## **Utility Failure – Pg. 7**

- ) PG&E, [www.pge.com/safety](http://www.pge.com/safety)
- ) Red Cross, [www.redcross.org](http://www.redcross.org)
- ) Ready.gov, [www.ready.gov/power-outage](http://www.ready.gov/power-outage)

## **Bomb Threat/Explosion – Pg. 8**

- ) Diversified Risk Management, Inc., [www.diversifiedriskmanagement.com](http://www.diversifiedriskmanagement.com)

## **Medical Emergency – Pg. 10**

- ) American Heart Association, [www.heart.org](http://www.heart.org)
- ) National Institute of Health, US National Library of Medicine-MedlinePlus, Recognizing Medical Emergencies, [www.nlm.nih.gov](http://www.nlm.nih.gov)
- ) Department of Health and Human Services, Centers for Disease Control and Prevention, Emergency Action Plan, [www.cdc.gov](http://www.cdc.gov)

## **Infection Prevention – Pg. 15**

- ) Department of Health and Human Services, Centers for Disease Control and Prevention, [www.cdc.gov](http://www.cdc.gov)
- ) World Health Organization (WHO), How to Hand rub and How to Hand wash, [www.who.int](http://www.who.int)

## **Respiratory Protection - Tuberculosis Exposure - Pg. 16**

- ) Department of Health and Human Services, Centers for Disease Control and Prevention, Get the Facts about TB, [www.cdc.gov/tb](http://www.cdc.gov/tb)

## **Standard Precautions – Pg. 17**

- ) United States Department of Labor, Occupational Safety and Health Administration (OSHA), Blood borne Infectious Diseases, [www.osha.gov](http://www.osha.gov)

## **Hazardous Materials – Pg. 18**

- ) United States Department of Labor, Occupational Safety and Health Administration (OSHA), [www.osha.gov](http://www.osha.gov)
- ) Material Safety Data Sheets (MSDS), [www.msds.com](http://www.msds.com)

# SAFETY DATA SHEETS (SDS) INDEX

<b>SDS Sheet for:</b>	<b>Page(s)</b>
LG Chem Lithium-ion Battery Pack	LGCHEM 1-10
Energizer Alkaline Batteries	Energizer 1-4
Ricoh Toner	Ricoh 1-5
Gojo Purell Advanced Hand Sanitizer	Gojo 1-15
Clorox Disinfectant Cleaner with Bleach	Clorox 1
HP Laser Jet Print Cartridge	HP 1-6