1 PURPOSE

This procedure describes the procedures which must be followed in the event of an emergency at the off-site location for the Office of Human Research, MHS IRB and Corporate Compliance.

2 GENERAL INSTRUCTIONS AND RESPONSIBILITIES

Due to our offsite location, the general rule for emergencies has been modified to suit our location and setting.

3 SPECIFIC PROCEDURES

3.1 Fire

a) In the event of a fire in the building, all personnel on site should follow the R-A-C-E procedure (rescue, alarm, contain, extinguish/evacuate). All staff will have access to telephones and fire extinguishers.

b) Staff should notify other on-site staff (e.g. IRB, Corporate Compliance) of the fire by calling "Fire!” or "Red Alert" since there are no fire alarms to pull at this location.

c) Staff in close proximity to the fire should evacuate the area or be assisted in the evacuation by other staff.

i. There are two exits in the building and the closest available pathway away from the fire should be chosen.

ii. An evacuation map is posted in the supply area.

d) Staff should call 911 to report the fire.

e) Staff should try to contain the fire, if it is safe to do so. This can be done using the fire extinguisher and the P-A-S-S (pull the pin, aim the hose, squeeze the trigger, and sweep the fire area) technique.

f) Staff may only return to their duties after Fire/Rescue has deemed the building safe. In the event that there is damage to the property, the building manager should be notified, along with MHS Risk Management (via incident report), and the Property Manager.
Investigator Standard Operating Procedures

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g) If staff are unable to return to duties due to smoke or property damage, senior management will determine alternative work environments.

h) Senior management will designate staff to document monthly that the fire extinguisher is functional (three fire extinguishers with the yellow pin arrow pointing within the grey area on the valve).

i) If the fire extinguisher has been used, Property Management should be notified and a replacement provided.

j) Fire extinguishers will be checked yearly by Property Management using an external vendor.

k) The battery operated Exit signs (three) should be checked annually by delegated staff. Batteries are to be changed, as necessary, by Property Management through completion of an online request form.

l) Safety drills will be conducted twice a year to ensure compliance with the instructions above.

m) Staff should not bring flammable items into the work environment such as electrical heaters or items that are not Underwriters Laboratories (UL) tested – i.e. electrically certified (exemption matches).

3.2 Hurricane

a) In the event of an impending hurricane, all staff will begin pre-hurricane warning preparations once a hurricane watch has been announced by the National Weather Advisory. This will include:
   i. Securing items away from windows and doors
   ii. Covering computers with plastic wrap, and
   iii. Locking internal cabinets
   iv. Locking internal doors
   v. Removing perishable items from the refrigerator and disposing of garbage in the dumpsters provided in the event of a prolonged power outage.
   vi. Update telephone and email out of office messages with a notice to contact the operator for emergencies, or to call 911
   vii. Reschedule or cancel meetings and patient and subject visits

b) Once there is a public announcement of a hurricane warning in the area surrounding the office address, staff will begin exiting the building.
   i. Senior staff or management may recommend leaving the office earlier if extenuating circumstances arise

c) The last person exiting the building should arm the alarm, and lock the front door with a key.

d) Senior staff should maintain a current list of employees’ home numbers or alternate contact information to advise them when it is safe to return to work once the hurricane has passed and emergency management has cleared the roads for safe access to the office.

e) If electricity has been restored, information can also be retrieved from the hospital website.
   i. Staff should not remain at home waiting on a telephone call, but should actively pursue contact with the management team or office site.

f) The first returning employee should access the building using a key, and turn off the alarm (if electricity is still running).

g) Damage to the site should be reported to Property Management and the property owners.
3.2.1 Notifying Sponsors
a) OHR nurses will be responsible for contacting study sponsors to inform them of potential protocol deviations due to unforeseen circumstances. Research subjects with upcoming appointments should also be contacted with updates regarding possible changes to their schedules. All communication with the sponsor and/or subjects should be documented.
b) Research Nurses should also contact Oncology Practice Managers to organize cancelling or rescheduling of pending subject appointments for the next several days.

3.3 Life Support Issues

3.3.1 Adult – In case a potential adult victim is discovered laying unconscious:

a) Make sure the area is safe
b) Check for unresponsiveness and no breathing or no normal breathing
c) Shout for help/direct someone to call 911
d) Get the Automatic External Defibrillator (AED) – located next to the central copy machine
e) If there is no signs of circulation (coughing, moving or breathing), begin CPR When the AED arrives, first turn it on and follow the prompts if properly trained or certified
f) Return to chest compressions if advised by AED prompt
g) If you are alone when the victim is discovered, check for unresponsiveness – no breathing or no normal breathing and no signs of circulation, then call 911 from a land line/cell phone, get the AED, turn it on and follow the prompts.

3.3.2 Child/Infant – In case a child or infant is discovered laying unconscious:

a) Make sure the area is safe
b) Check for unresponsiveness and no breathing or no normal breathing
c) Shout for help/direct someone to call 911
d) Get the Automatic External Defibrillator (AED) – located next to the central copy machine
e) If there is no signs of circulation (coughing, moving or breathing), begin CPR
f) When the AED arrives, first turn it on and follow the prompts if properly trained or certified
g) Return to chest compressions if advised by AED prompt
h) If you are alone when the child/infant is discovered, check for unresponsiveness – no breathing or no normal breathing and no signs of circulation, begin CPR – starting with chest compressions and do 5 cycles (about 2 minutes) of 30 chest compressions and 2 breaths - then call 911 from a land line/cell phone
i) Use AED ONLY after 2 minutes of CPR has been done on the child/infant
j) When AED arrives, FIRST turn it ON and follow the prompts if properly trained or certified

3.3.3 Fire Rescue

a) Stay with the victim and continue basic life support.
b) When Fire/Rescue arrives, provide the rescue team with all pertinent information concerning the emergency and allow them to take over the victim’s care.
c) Staff members should document this event via an online incident report which may be found on the intranet and submit it to MHS Risk Management.

3.3.4 AED Maintenance

a) The AED pads and battery should be changed in accordance with the manufacturer
3.3.5 Other Threats

a) For other situations such as personal threats, notify Senior Management or Supervisor.
   i. If personal safety is threatened, dial 911.
   ii. Complete a report on the incidence.

b) In case of a bomb alert, shut off all wireless phones, two way radios and beepers.

c) Search the area if appropriate at Department Leaders/Supervisor’s direction.

d) Staff is to direct all calls from the media to the MHS Media Relations office for matter pertaining to emergency related events.

4 REFERENCES TO OTHER APPLICABLE SOPS

None

5 ATTACHMENTS

The OHR Emergency Contact List can be found on the S Drive

6 APPLICABLE REGULATIONS AND GUIDELINES

None