

Emergency Alerts



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Introduction

Purpose of Training

Samaritan Health Services has created the following training to meet CMS 482.15(d) and OSHA 3088 requirements for education related to emergency alert response.

Assignment of this training has been approved by SHS Regulatory and Accreditation.

Course Requirements

To pass the training, you must answer ALL quiz questions correctly

You must view all of the content prior to taking the quiz

Questions/Concerns?

- Reason for assignment, course content, or quiz questions/answers, contact Corrie Phillips at corriep@samhealth.org.
- Technical issues, including courses not progressing or grading correctly, contact eLearning at elearning@samhealth.org.

CONTINUE

Outcomes

By the end of this module, the learner will be able to:

- Identify the standardized emergency alerts used within SHS facilities.
- Describe when and how to use plain language to activate emergency response teams in SHS facilities.
- Describe the appropriate activation responses to various emergencies in SHS facilities.

[CONTINUE](#)

Emergency Alert Standardization

Color Codes

For decades, health care organizations have used a variety of color or numbers to announce emergent situations. Examples include:

Code Green

Mass Casualty or Aggressive Behavior.

Code Orange

Bomb Threat or Hazmat Incident.

Code Pink

Infant/Pediatric Abduction or
Pediatric Cardiac Arrest.

Responses to these events are different, using like colors for different events created confusion among health care workers.

Color-coded emergency notifications were intended to provide clear, safe, and standard communication for employees, patients, and visitors across

U.S. healthcare systems.

However, there is no national standard for codes using colors or numbers. This lack of standardization creates confusion and increases the possibility for errors to occur.

Plain Language Implementation

Since the early 2000's, plain language emergency alerts have been adopted in health care organizations throughout the U.S. Adopting plain language emergency alerts is recommended by several key agencies including:

- The Joint Commission
- American Hospital Association
- Emergency Nurses Association
- Institute of Medicine
- U.S. Department of Health and Human Services
- The National Incident Management System
- Centers for Medicare and Medicaid Services

Plain language alerts provide standardization and align with industry best practices. Plain language alerts send a clear message to employees, providers, patients, members, and visitors; empowering each to respond quickly and safely during emergent situations.

SHS transitioned to plain language emergency alerts in 2023 with the goal of achieving zero events of preventable harm, injuries, and failures.



[CONTINUE](#)

SHS Plain Language Standardized Emergency Alerts

Medical Alert + Plain Language Code + Location —

- Cardiac Arrest
- Rapid Response Team
- Pediatric Emergency
- Stroke
- Full/Modified Trauma
- Malignant Hyperthermia
- Massive Transfusion
- **Emergent C-Section
- **OB Emergency
- **OB Hemorrhage

** Not all OB related alerts will be used at all sites. Please refer to your site-specific information.

Facility Alert + Plain Language Code + Location —

- Fire
- Hazardous Materials
- Decontamination
- Command Center Activation

Security Alert + Plain Language Code + Location —

- Aggressive Behavior
- Armed Intruder

- Infant/Child Abduction

Calling an Emergency Alert Using Plain Language in the Hospital Setting

When an emergency occurs:

1. Dial *88 (refer to Emergency Quick Reference Guide for other specific ways to announce alert at your site)

2. State the emergency using this script:

A. Type of Alert (Facility, Security, Medical)

B. Type of Emergency (e.g., Fire, Aggressive Behavior, Stroke)

C. Detailed Location

D. As needed, specific directions, such as 'time until arrival' or 'intruder description'

Medical Alert + Cardiac Arrest Example



Please sign in to view this file.

Sign in

Facility Alert + Fire Example



Please sign in to view this file.

Sign in

Security Alert + Aggressive Behavior Example



Please sign in to view this file.

Sign in

Calling an Emergency Alert Using Plain Language in the Clinic, Corporate, and Non-Hospital Setting

When an emergency occurs:

1. Dial 9-1-1 and follow the Emergency Quick Reference Guide (Non-Hospital Guide)

- Medical alerts- e.g., adult/pediatric life-threatening emergency such as cardiopulmonary arrest, stroke, etc.
- Security alerts- e.g., aggressive behavior, armed intruder, infant/child abduction
- Facility alerts- e.g., fire, emergency spills (spills that cannot be cleaned by an employee and may pose a significant safety hazard)

- Follow the Non-Hospital Emergency Quick Reference Guide and alert the appropriate leaders for events that do not require calling 9-1-1

2. State the emergency using this script

- Type of Emergency (e.g., Fire, Aggressive Behavior, Stroke)
- Detailed Location
- As needed, specific directions, such as 'time until arrival' or 'intruder description'

In lieu of overhead paging systems, clinics and non-hospital buildings may rely upon the Avaya phone system for paging. Please work with IS and Security to ensure phones are set up so that announcements such as Armed Intruder alerts and others can be shared throughout the building.

Important Takeaways When Activating Emergency Alerts

- Key words: “Alert” + “What is happening”
- What if I forget to say “Medical, Security, Facility”... ?
 - a. Use clear, plain language that is easy to understand.
 - b. When possible, repeat page with correct language.
 - c. When possible, discuss during debriefs.
- What about other codes/alerts that are not on this standardized list?
 - a. Use the same language and follow the same processes currently in place.

What is the correct language to use when calling for a Rapid Response Team (RRT)?

- Security Alert + RRT + Location
- Medical Alert + Rapid Response Team + Location
- Medical Alert + Cardiac Arrest + Location

SUBMIT

SHS uses plain language for emergency alerts to decrease confusion in how we respond to emergent situations and we are committed to preventing harm, injuries, and failures.

- True
- False

SUBMIT

CONTINUE

Emergency Alert Response

Each department is provided a list of standardized emergency alerts and the employee's appropriate response. Emergency alert information is provided on a badge buddy for all employees.

Emergency response plans may vary depending on location and type of work performed.

For more details refer to the Emergency Quick Reference Guide for site-specific processes.

Accessing the Emergency Quick Reference Guides

Access the SHS 'Emergency Quick Reference' guides from the SHS INSIDER.



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Sign in

Medical Alert Rapid Response Team-Hospital Setting

SHS hospitals have teams of clinical staff who can be called to provide early intervention and stabilization of patients prior to the event of respiratory arrest, cardiac arrest, or other adverse health events.

The team is activated based upon the patient's physical symptoms, as well as staff, patient's and/or family concerns.

The Rapid Response Team (RRT) follows protocols that allow them to troubleshoot clinical situations and to respond quickly to patient care needs.

- Refer to your site protocols for when to initiate a Rapid Response Team



Medical Alert Cardiac Arrest-Hospital Setting

In addition to the Rapid Response Team (RRT), each hospital has a team of clinical staff who respond to 'Medical Alert Cardiac Arrest' overhead pages for patient emergencies such as respiratory and/or cardiac arrest.

Clinical areas have emergency equipment within their departments, including defibrillator's, to respond.

Automated External Defibrillator (AEDs) are located in non-direct patient care areas within SHS hospitals and outbuildings.

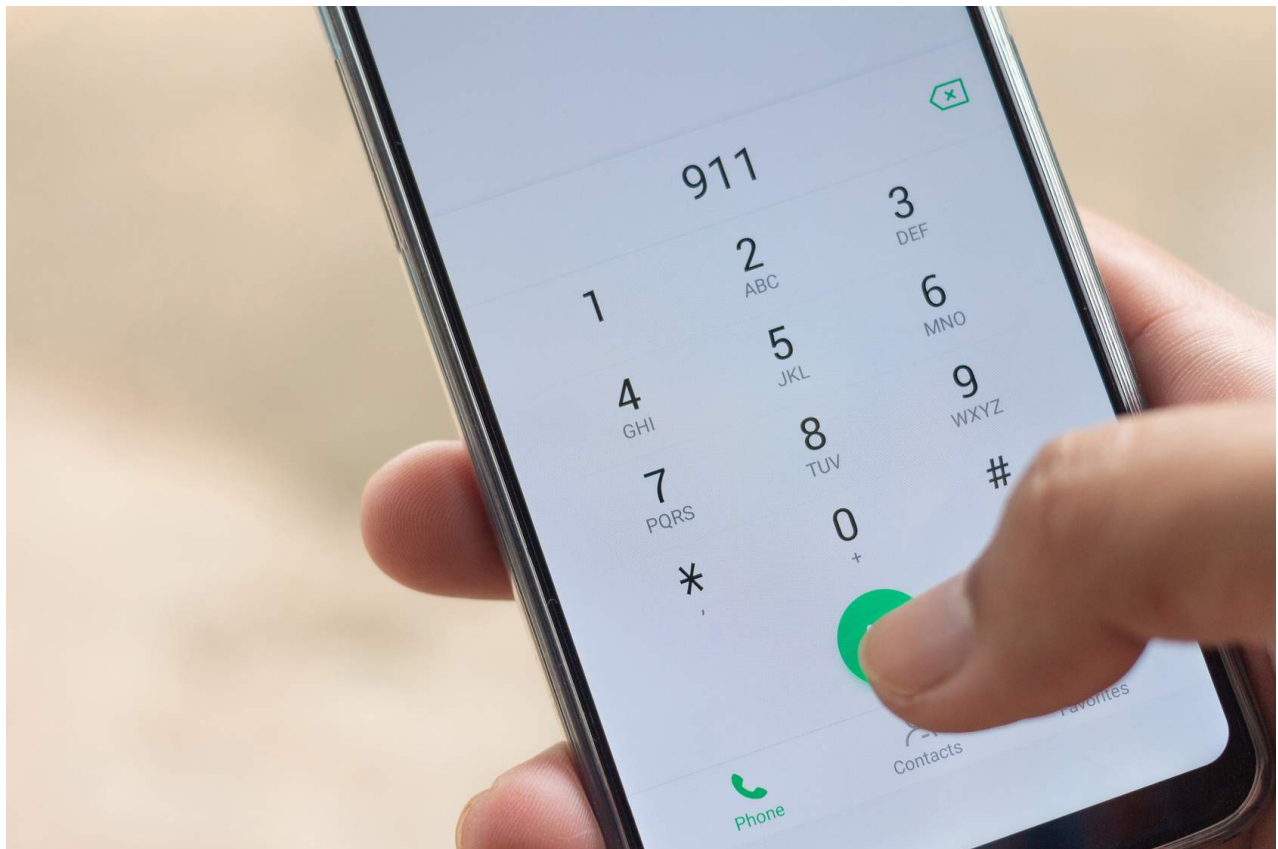
Life Threatening Medical Emergency Non-Hospital Setting

In the event of a life-threatening emergency:

The first person to the scene should dial 9-1-1 or tell a bystander to dial 9-1-1

Trained staff should activate the use of an AED if available and necessary for the unconscious person while waiting for Emergency Medical Services to arrive.

Staff Trained in CPR should start CPR when indicated.



Locations With Automated External Defibrillators (AED)

AEDs are located in:

1. SMG clinics
2. SHS Corporate buildings
3. Other non-hospital sites

Other hospital departments such as Pharmacy, Imaging/Laboratory may have an AED nearby. Staff working in areas where AEDs are located are trained in using an AED.

If you have not been trained on the AED, contact your manager or supervisor.

AEDs are checked monthly by designated staff and yearly by Clinical Engineering. Designated staff store the completed AED Operator's Checklists in the department/area that the AED is located.



Important: If you notice an AED is missing, has a flashing red 'X', or is audibly 'chirping', notify the nearest department manager or supervisor.

Infant and child abduction can and does happen.

Health care organizations have a responsibility to be diligent in prevention.

Security Alert Infant/Child Abduction' alerts the system to an incident of a missing or abducted infant or child (up to 18 years of age).

Upon discovering that an infant/child is missing, staff will verify the infant/child is:

- Not in the department
- Not in another department for tests
- Not with another family member

Upon verification of a missing infant/child:

Step 2

- Notify the Nursing Supervisor, department leadership immediately, or in the clinic/non-hospital setting, contact the closest hospital administrator or the on-call administrator.
- Within 2 minutes of incident, supervisor or designee will notify law enforcement and Security.
 - Age of infant/child
 - Sex (male, female, intersex)
 - Situation details
 - Description of suspect
 - Building address
 - Physical location within the building

On the next two slides:

Makes sure your volume is on and then push play to hear examples.

Overhead Announcement Example



0:16

1x



Initiate 'Security Alert Infant/Child Abduction' by paging overhead "Security Alert Infant/Child Abduction, Age, Sex, Location."

Step 4

9-1-1 Example



0:17

1x



Upon hearing “Security Alert Infant/Child Abduction” (paged overhead or announced), ALL staff members will:

- Initiate a facility-wide search.
- Search common areas, inside and outside, and potential infant/child sized hiding spots.
 - If the nearest exit has staff monitoring, go to the next available exit that is not monitored and monitor that exit, continue until all exits are monitored.
- Go to the nearest exits and monitor exit and entryways.
- Not discuss the event with anyone – public, media, other staff, authorities – unless directed to do so by department or administrative leadership.
- Report individuals that do not comply with security to:
 - Department Manager or House Supervisor (hospital setting).
 - Department Manager/Facility Leadership in off-site buildings.
- Continue to search until “All Clear” is announced.
 - Once “All Clear” is announced leadership will ensure a debrief is held and the event is reported in RLDatix.

CONTINUE

Security Alert Armed Intruder Response

‘Security Alert Armed Intruder’ applies to anyone who:

- Claims to have a weapon and has threatened violence or hostile intent.
- Brandishes a weapon.
- Is actively attacking others with a weapon.

ACTIVE SHOOTER RESPONSE

LEARN HOW TO SURVIVE A SHOOTING EVENT



RUN

HIDE

FIGHT

- Have an escape plan
- Evacuate
- Leave your belongings
- Help others if possible

- Do not move wounded people

RUN

HIDE

FIGHT

- Be out from shooter's view
- Lock doors and block them with furniture
- Keep your options for movement
- Silence phone
- Be quiet

RUN

HIDE

FIGHT

- Act aggressively
- Incapacitate the active shooter
- Throw objects
- Yell and call for help

Fight only as a last resort!

IF ABLE TO DO SO SAFELY:

- Announce “Security Alert Armed Intruder (location)” overhead 3 times.
- Call 9-1-1 with pertinent details of shooter, including location, number of shooters, physical description, number of potential victims at location, etc.

Law Enforcement will direct the response effort during an armed intruder event.

The Command Center Activation should be announced after the event is over to activate the Hospital Command Center (HCC).

CONTINUE

Employee Assistance Program

SHS provides an Employee Assistance Program (EAP) service for staff seeking help to cope with the effects of exposure to violence and other on-the-job stressors. The EAP is confidential and offers a limited number of free counseling sessions.

Information on the EAP is available on the SHS Insider through the Employee Portal.

Additional information may be obtained from HR, Employee Health, or your supervisor.

Care for the Caregiver

Care for the Caregiver (CFTC) is a SHS internal peer support system. It does not rely solely on affected person(s) reaching out for support. Support can take on many forms from informal to professional.

Contact CFTC by clicking [here](#).

Mental Health Resources

Oregon Wellness Program: Confidential, external counseling for healthcare professionals. 541-242-2805.

*[Oregon Counseling](#): Confidential, external counseling covered by your Samaritan health insurance.

**[Oregon Safe and Strong](#) Helpline: Emotional and mental help right now. 1-800-923-HELP (4357).

CONTINUE

Quiz

To pass the training, you must answer ALL quiz questions correctly. You will be able to retake the quiz if you don't pass.

Question

01/03

A 2-year-old female child has gone missing from the Emergency Department. What steps should be taken when activating an Infant/Child Abduction? Select all that apply.

- Notify a supervisor or manager.
- Notify the authorities (9-1-1).
- Activate a Security Alert + Infant/Child Abduction + Location + Description.
- Monitor all entrances/exits.

Question

02/03

In the event of a life-threatening emergency in non-hospital SHS facilities, the following should occur: Select all that apply.

- First person on scene should call 9-1-1.
- Staff should transport the patient to the nearest emergency department.
- Activate the use of an Automated External Defibrillator (AED) if the AED and trained staff are available.
- Staff trained in CPR should start CPR when indicated.

Question

03/03

Match the alert to the correct description.

⋮ Facility Alert + Decontamination

⋮ Medical Alert + Pediatric Emergency

⋮ Security Alert + Infant/Child Abduction

⋮ Security Alert + Armed Intruder

Life-Threatening Pediatric Medical Emergency

Armed Intruder/Active Threat

Potential Contamination

Infant/Child Abduction

Summary & References

There are many emergency alerts that you may be required to respond to in your role. Familiarize yourself with the appropriate response plans in your department.

Utilize the information located in the Emergency Quick Reference Guide found on SHS Insider and your site-specific processes to identify the emergency response plans in your department.

Act quickly in response to all emergencies by following the appropriate response plan and remaining calm.

Click this button to exit the module

EXIT

Click this button to restart the module

RESTART

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