

## Loading Dock

The loading dock is located off Pranklin Street on Level 3. Interior access is adjacent to the service elevators.

# Supply Chain Overview

Supply Chain staff will monitor supply levels, and the automated supply system will generate refill requisitions to order inventory.

Supply Chain will receive delivery from our primary distributor at 8pm Monday through Friday.

Supply Chain will remove corrugated cardboard at the loading dock as per infection control policies and deliver supplies to the Pyxis and supply cart areas throughout the hospital.

Nurse Server carts are department specific and are non-standard storage options some departments use. Supply Chain does not manage or replenish supplies on these carts.

## Supply Chain

The Central Distribution area is located on the 2nd floor, Room 2200, adjacent to the services elevators. Staff, supplies and receiving will be staged here to support a Low Unit of Measure (LUM) Just in Time (JT) distribution model.

Supply Chain will utilize two points of entry for supplies and deliveries: The Loading Dock, and a Receiving Office-Room 1400. located on Level Pt. The receiving area on Level Pt will be for Ped-Ex, UPS, florist, Lab carriers, Blood Bank, Pharmaceuticals, etc.

Central Distribution will operate 7 days/week on 3 shifts: 7:00a-3;30p, 3:00p-11:30p, and 1:00a-9;30p. For supplies needed between 11:30p-1:00a, contact the Nursing Supervisor who has access to the Central Distribution area, Room 2200.

Par Levels for supplies on the units will be calculated for four days of inventory on hand. Supply Chain staff will manage the restocking and storage of Gode Blue/Broselow resuscitation and isolation

Supply Chain Intranet requests: http://apps.insidecpmc.org/ CPMC\_SRO/servlet/LoginServlet?cpmc\_role\_id=180\_ The Code Blue Cart quick reference guide can be found here:

A Broselow quick reference guide can be found here: tinyurl.com/GuideCrashCart

## Medical Gas Area

ED 3317 Acm 4227 The Supply Chain Team is responsible for replenishment of medical gases, housed in the Medical Gas Storage room on Level 3, precessed directly off the loading dock in Room 3214.

Durable Medical Equipment (DMZ)

### areas in the ED (Recentages), OR/Bre Units (Rooms 4394-3334 and 9334), Di our DME partner Pacific Medical.

The DME process will be the same as

Pharmacy (335 / 6135)
The Pyais supply management system will be used in a combination

of locked and unlocked cabinets.

Pharmacy staff will make twice daily medication deliveries to inpatient units, and once daily deliveries to ancillary departments, including new Pyxis Anesthesia carts.

Controlled substances are mostly filled in Pyxis, but may be picked up at the Pharmacy by Nursing for one-time medications. Pharmacy staff will make daily rounds to remove discharged orders.

# Supply Chain Stat Requests

Par Levels for supplies on the units will be calcul. Act for four days of inventory at hand. Supply Chain staff will pringe the restocking and storage of Orde Blue/ Broselow resusping an and isolation carts.

Supply Chain staff will be en-site of enween he hours of yam and 43-gopn, Modd. Frield, Fror supply needs during evening and, eed, dis, foll current process and copeact the N M g greynstow who has access to the or mution strong area.

Loading Dock Supply Ghain Overnew Supply Chain & Medicial Gas Area Supply Chain Stat Requests

storage area.
Central Discribution, normal business h

415-641-5626
Receiving, normal business hours:

Asset Management Equipment Cleaning

Staff Duress
DME
Linen
How to Order
Stationery, Forms &
Brochures

Brochures

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# Conference Room Reservations

There are conference rooms on the 1st, 2nd and 3rd floors, available for hospital and public use:

3130 3180

To reserve a conference room, go to the on-line room scheduling

portal at http://dcpwdbs4og/virtualems/.

Each room is equipped with large monitors and teleconferencing. Rooms will be locked after hours, by Security, and reopened by Security. There will be video displays outside of these rooms that will provide meeting schedules.

## Conference Rooms

Conference rooms are available on the patient care floors for patient care team use. Floor conference rooms are dedicated to the floor. Oversight and scheduling of these rooms lie with the Nurse Manager. In general, these can be used for small classes, in-services and department meetings.

# Departments and Divisions by Floor

center with an emergency department and supporting services, including imaging services, and laboratory. The building is thoughtfully designed to enhance patient comfort, be environmentally The Van Ness Hospital is a 13-story, 274-bed, full-service medical conscience, be seismically safe, and support current and future technologies. The department phone directory is on page 2.

Nursing Admin	EEG Workroom	PT/OT/SP	١	\		Antepartum Testing	ACU (39)	Physician Lounge	Meditation	Discharge
Nursin	EEG W	PII	نہ (40)	Child Life	On-Call Rooms	Antepart			Cafeteria	Morgue
Ambassador Suite	Therapy Gym	TICU (9)	Well Baby Nursery (40)			NICU (3S)	Non-Invasive Cardiology (3) PACE (2)	Conference Rooms	Patient Relations/ nterpreter Services	Nurse Staffing
Ambass						NIC			Patient Interpret	Media Services
Medical Staff Services	10 East (28) Med/Surg Cardiovascular	Med/Surg/ slogy		PICU (8)	Therapy / Punction	tum (6)	Non-Invasive Cardiology (	Loading Dock	Patient Access Services	Security Services
Graduate Medical Education	10 East (28) Med/S Cardiovascular	9 East (23): Med/Surg/ Oncology		7 East (12): Pediatrics	Respiratory Therapy / Pulmonary Function	Ante-Partum (6)	GI / IES (7) CCL/EP/IR (6)	Imaging [MRI(2), CT(3), XRay(2), Fluoro(2), US(5), Nuc Med(3)]	Retail	Kitchen
Graduat Educ	d/Surg lex GI	/Surg	Post-Partum (44)	7 East (12)		C Section (3)	GI / IES (7)	Imaging [M] XRay(2), Fluc Nuc M	Conference Rooms	Dialysis Workroom
Executive Administration	10 West (32) Med/Surg Transplant/Complex GI	9 West (28) Med/Surg	Post-	7 West (13): Pediatrics	ICU (36)	LDR (20)	OR (13)	ED (32, 4 holding)	SPD	Lab/ Pathology
									Support Services	Floor 1 Pharmacy
Floor 11	Floor 10	Floor 9	Floor 8	Floor 7	Floor 6	Floor 5	Floor 4	Floor 3	Floor 2	Floor 1

ADD FLOOR PLANS

Telephone Numbers Hours & Entrances Elevators Lockers Shared Spaces Conference Rooms Depts, & Divs. LEED Reminders

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## Security Awareness

- · Be aware of your surroundings.
- If you see something, say something.
- · For emergency situations (other than Code Blue) dial 4-4444.
- Keep your personal property, especially purses, briefcases and bags, locked and secure.
- Pay attention to person(s) who look suspi-
- Make sure vendors have a vendor badge. cious or look like they don't belong.
  - Wear your hospital badge.
- Be alert when you are in areas or around people that are unfamiliar to you.

For general security concerns or for an escort to your vehicle, contact Security Dispatch at 415-600-0837.

### **Crash Carts**

Crash carts are strategically located throughout the Van Ness Hospital in the event of a medical emergency for patients, visitors or staff.







Emergency Management EOP land Hygiene Crash Carts

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Security Desks are located on 2nd floor (Main Lobby) and 3rd floor (Emergency Room). Security enhancements include

- · A metal detector at the ED entrance
- · Panic alarms located in identified high-risk areas; when activated, a silent alarm is sent to Security Dispatch
  - including the ED, loading dock, and drive through · Security stations located at key main entrances
- Staff Duress buttons on Aeroscout RFID tags worn by staff
  - · HUGS Infant Security & Adult patient elopement

# Door Alarms and Stairwell Access

fire, all persons in the building must be able to exit by the emergency stainwells. Therefore, we cannot lock interior doors, but we Alarms Will Sound" are posted on doors that alarm when entered. To prevent the alarm from sounding, hold your employee badge Hospital Staff Only, Alarm Will Sound" and "Emergency Exit Only, The new hospital has public and staff only areas. In the event of a can alarm doors to notify Security when a person has entered an authorized hospital staff only area. Signs reading "Authorized up to a card reader located near the door.

Stairwells are "exit only" to the public. In order to re-enter a floor from the stairwell, staff must hold their employee ID badge to a card reader located on the door.

sign which reads "KEEP PUSHING. THIS DOOR WILL OPEN IN 15 SECONDS ALARM WILL SOUND". Only specific authorized staff, doors are part of our infant security system. In case of fire, push on can use their employee ID badge to deactivate these alarms. These On the Women's and Children's floor, the stairwell doors have a door and it will open.

don-patient al—for example, if a visitor Team The ED Team will respon collapses in the cafeteria

## **Emergency Operations Plan** Emergency Management /

maintain operational capability and provide care, treatment and significant threat to the ability of a health care organization to Emergencies, disasters and other catastrophic events pose a services to its community.

Operations Plan to respond to the medical needs of the community CPMC has implemented a comprehensive All-Hazards Emergency in the event of an emergency, disaster situation or mass casualty

independent practitioners, contract workers, volunteers and others tion-wide program that incorporates all services and sites of care The All-Hazards Emergency Operations Plan is an organizaunder the CPMC license. This plan applies to staff, licensed as appropriate and indicated throughout this document.

elements of the National Incident Management System (NIMS), incorporates the Hospital Incident Management System (HICS), and addresses the six critical areas mandated by Joint Commission The All-Hazards Emergency Operations Plan complies with the

 Safety and security Patient clinical and Communications

standards:

 Utilities management Staff responsibilities Resources and assets support activities

/mysutter/bay/CPMC/Resources/Safety/Pages/ The full plan is located on the CPMC Intranet at Emergency Management. aspx

# Communications in a Disaster

system enables CPMC staff to receive and respond to critical safety Sutter Health affiliates use Everbridge Mass Notification System to Everbridge has been implemented to improve the efficiency and effectiveness of communications. The system-wide notification communicate to all staff simultaneously in an emergency. and business impact information in a timely manner.

Everbridge allows CPMC to communicate with staff via multiple contact paths including home phone, email, mobile phones and other communication devices during an emergency event.

# What to do when a notification is received:

☐ Read (when received via email) or listen to the message carefully for directions.

provided in the email, or press 1 if the message is received ☐ "Confirm the Message" when asked by clicking the link via phone.

Confirming the message lets CPMC know that you have received the message.

# How to update your personal contact information:

Everbridge to work effectively and staff to receive Lawson and if information is inaccurate you may contact information is correct. Having accurate emergency information. Everbridge pulls from Intranet portal to confirm that your personal Check the Lawson e-Self Service site on the personal contact information is critical for not receive emergency notifications.

the Safety Department at 415-600-4620 or email Please direct questions regarding Everbridge to

Injury Reporting Workplace Violence Emergency Management EOP Code Team Standardized Emergency Codes Automated External Defibrillator (AED) Hospital Command Door Alarms & Stairwell Access Communications in a Disaster **MRI** Suite Safety Medical Alerts Fire Safety FD Team Crash Carts

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### and Center Hospital Comm

emergency events, and if the situation Emergency Operations Plan would be activated The hospital uses the Hospital Incident Command Structure (HICS) to mana warranted, th via Code Tr

divated; it is located on the 1st Floor in Conference Room age is initiated, the Hospital Command Center (HCC) Tool will be activated; it is located in the hospital cafeteria. additional resources are needed to manage the event, the Code 7

# Code Team

The Code Team will respond to a partent medical emergencies in the main hor aral and will respond to plinary, made up of ICU providers, nurses, respiratory therapists, security and a Nursing Supervisor. (5-5555) is called. The Code Team is multi-discinon-patient emergene

> Automated External Defibrillator (AED) Emergency Management E0P

FD Team Crash Carts

Security Station Door Alarms & Stairwell Access

# Outside of the Hospital

Communications in a Disaster

For patient and non-patient emergencies Campus, or California Carbus, call 911. in the Medical Office Building, Pacific

Code Team Standardized Emergency Codes

a 8 te - 312)

Injury Reporting Workplace Violence

MRI Suite Safety Medical Alerts Fire Safety

Hand Hygiene ADA Information Service Dogs

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# Code Blue or Other Medical Emergency

If you witness a patient, visitor or staff member who is in cardiac and/or respiratory distress, or han 28 a medical emergency, immediately seek medical-nu "g assistance by calling for help- and by dialing 5-5555 from a hospital phone.

Patient care areas should also use the Code Blue alarm system and alart the hospital operator by dialing 6-5000.

For other types of urgent medical situations (Rapid Response) and non-medical emergencies (Code Red, Code Gray, etc.), dial 4-4444 from an in-house phone and provide the nature of the emergency, and your name and location.

### Code Gray

Initiated for any event with aggressive, hostile, combative or potentially combative behavior from a patient, visitor or staff member, without the display of weapons.

## Response Procedures

At the first indication of a perceived Code Gray:

☐ Dial the emergency number 4-4444.

☐ Describe the incident to the operator, including the specific location. Security will determine when an "All Clear" will be announced.

### Post Incident

Security will conduct a post investigation debriefing. You will be interviewed to gather incident specific information.

cable, an electronic Report of Injury (eROI), Patient Safety Report (PSR) and Quality Risk Assessment. Complete the Workplace Violence Incident Report and, if appli-

Conter (Labor & Delivery, Nursery) to protect our infants and prevent infant abductions. Code Pink and Code Purple are used in the event of a missing infant or child. an Infant Security System installed in Women's and Infant Infant/Paild Security Ther

after 3(3)

### Code Purple

Initiated when a child/adult over the age of 2 is discovered missing or has been abducted.

## Staff should initiate a Code Purple when the missing child/adult:

Is a minor

May have been removed from the facility against their will

Has a central line, IV, PICC Line, catheter, etc. Is awaiting psychiatric evaluation

Poses a danger to themselves or others

as documented by physician

Is on a conservatorship

A Code Purple should also be initiated anytime a clinician has concerns with the patient leaving the facility.

Staff response to a missing or abducted child/adult:

Call the emergency number the moment a child/adult is confirmed missing or abducted.

State a child/adult is missing or abducted and provide: ☐ Your name and the location where the

child/adult was last seen

☐ The child's/adult's name and physical description (age, gender, race, etc.) ☐ Any additional details about the abduction or absence (e.g., description of the abductor)

department's pre-assigned area(s) to observe stairwell doors, elevator areas and exit doors. If outside of your department, immediately stop all non-critical work and proceed to your monitor the nearest exit. Continue monitoring until "Code if response to a Code Purple announcement: Purple—All Clear" is announced.

Identify anyone matching the description of the missing child/adult and call the emergency number. Respectfully engage anyone who is carrying a child or may be concealing a small child. Explain the situation and request to inspect small objects. Identify anyone in obvious distress (struggling, needing assistance, appearing lost/confused, etc.) and call emergency number.

follow them, taking note of their appearance, what they are wearing If the suspect flees, do not forcibly restrain them. If safe to do so, and how they exited the building.

If the suspect abductor reaches the parking lot and attempts to leave by car, take note of the vehicle's make, model, color and license plate.

Initiated when an infant or child less than 2 years of age is discovered missing or has been abducted.

was last seen

☐ The infant/child's name and physical description

☐ Any additional details about the abduction or absence (age, gender, race, etc.)

### Staff response to a Code Pink announcement:

proceed to your department's pre-assigned area(s) to observe stairwell door, elevator areas and exit Immediately stop all non-critical work and

Identify and report suspicious individual(s) to the

restrain them. If safe to do so, follow them, taking note of their appearance, what they are wearing If the suspected abductor flees, do not forcibly situation and request to inspect objects.

If the suspect abductor reaches the parking lot and

Workplace Violence

Service Dogs

MRI Suite Safety Injury Reporting

Fire Safety

# Code Pink - Infant/Child

# Staff response to missing or abducted infant/child:

Call the emergency number 4-4444 the moment an infant/child is confirmed missing or abducted. State an infant/child is missing or abducted and provide:

☐ Your name and the location where the infant/child

(e.g., description of the abductor)

doors. If outside of your department, monitor the nearest exit. Continue monitoring until "Code Pink—All Clear." emergency number 4-4444.

Automated External Defibrillator (AED) Emergency Management EOP

ED Team Crash Carts

infant or may be concealing an infant. Explain the Respectfully engage anyone who is carrying an

Hospital Command Center Code Team Standardized Emergency Codes Medical Alerts

Communications in a Disaster

and how they exit the building.

attempts to leave by car, take note of the vehicle's make, model, color and license plate.

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