



|                                    |                                   |                      |            |
|------------------------------------|-----------------------------------|----------------------|------------|
| <b>Section</b>                     | Psychiatric Health Facility (PHF) | <b>Effective:</b>    | DRAFT      |
| <b>Sub-section</b>                 | Crisis and Emergency Response     | <b>Version:</b>      | 1.0        |
| <b>Policy</b>                      | Emergency Subsistence Management  | <b>Last Revised:</b> | New policy |
| <b>Director's Approval</b>         | _____                             | <b>Date</b>          | _____      |
|                                    | Alice Gleghorn, PhD               |                      |            |
| <b>Medical Director's Approval</b> | _____                             | <b>Date</b>          | _____      |
|                                    | Ole Behrendtsen, MD               |                      |            |
| <b>Supersedes:</b>                 | New policy                        | <b>Audit Date:</b>   | DRAFT      |

## 1. PURPOSE/SCOPE

- 1.1. To ensure compliance with the Centers of Medicare & Medicaid Services (CMS) Emergency Preparedness Final Rule (42 CFR 482.15), emergency preparedness and response health care industry standards set forth by the California Hospital Association, and all other applicable federal, state and local laws.

## 2. DEFINITIONS

The following terms are limited to the purposes of this policy:

- 2.1. **Emergency** – a hazard or other critical incident that causes adverse physical, social, psychological, economic or political effects that challenges the facility's ability to respond rapidly and effectively to an interruption in normal facility functioning. Emergencies can affect the facility internally as well as the overall target population, the community at large or a geographic area.

1. For purposes of this policy, "Emergency" refers to a facility-level hazard situation, not an individual patient medical emergency. For patient-related medical emergencies, please refer to the "Emergency Medical Condition"

## 3. POLICY

- 3.1. The Santa Barbara County Psychiatric Health Facility (hereafter "PHF") shall ensure the provision of emergency subsistence supplies for patients, staff, visitors and other personnel in the event of an emergency requiring evacuation or sheltering on the unit. Subsistence measures shall include:

1. Food, water, medical, and pharmaceutical supplies; and
2. Alternate sources of energy to maintain temperatures to protect patient health and safety and for the safe and sanitary storage of provisions; emergency lighting; fire detection, extinguishing, and alarm systems; and sewage and waste disposal.

#### **4. SUBSISTENCE STORAGE**

- 4.1. Emergency food, potable water, medical and pharmaceutical supplies shall be stored at least six (6) inches off the ground to protect from environmental hazards such as flooding. The PHF is situated on the second floor of a building built on a hill, making substantial or dangerous flooding within the unit unlikely.

#### **5. FOOD AND POTABLE WATER SUPPLIES**

- 5.1. In the event of an emergency, the PHF shall utilize stored, nonperishable food and potable water supplies that provide up to seven (7) days of nutrition and hydration for a maximum of 50 patients, staff, visitors and other personnel on the unit. Supplies shall be provided by an emergency preparedness food vendor with menus created and approved by registered dietitians.
- 5.2. Each food and potable water item shall be clearly dated. Potable water items approaching expiration shall be rotated out and used in daily operations to make room for fresh stock.
- 5.3. Equipment and supplies for the preparation and distribution of emergency food and potable water will be stored onsite.
- 5.4. All emergency food and potable water supplies shall be stored onsite in an enclosed emergency supply shed located on the PHF patio.
- 5.5. For procedures and further details on emergency food and potable water supplies, please refer to the PHF's "Disaster and Emergency Supplies for Dietary Services" policy.

#### **6. MEDICAL AND PHARMACEUTICAL SUPPLIES**

- 6.1. Emergency medical supplies are stored in the PHF exam room and the emergency supply shed located on the PHF patio. Sufficient medical supplies will be available to respond to basic first aid needs of patients and staff during an emergency. An inventory checklist of medical supplies will be maintained and reviewed twice monthly.
- 6.2. In the event of an emergency, the PHF's pharmaceutical vendor will work collaboratively with staff to ensure the continuity of pharmacy services. The PHF will communicate inventory levels of critical medications, prioritize patients with urgent medication needs, and submit emergency orders accordingly. Any non-emergency refills will be placed on hold.
- 6.3. For immediate needs, or if the PHF anticipates significant delays in medication delivery due to hazardous conditions, road closures, or other disruptions to service, the PHF will utilize Geriscripts with local area pharmacies. Please refer to the pharmacy vendor's most current "Provision of Pharmacy Services During an Emergency" policy for further instructions.

- 6.4. For additional pharmaceutical needs, the PHF has established contingency contracts with local area retail pharmacies and pharmacies in the vicinity of transfer locations (i.e. Vista Del Mar/Hillmont).

## 7. **ALTERNATE ENERGY SOURCES**

- 7.1. **Emergency power systems.** The PHF maintains a diesel-powered emergency generator onsite in the event that normal electrical power sources fail. The generator is located in the immediate vicinity of the PHF in accordance with location requirements found in the National Fire Protection Association's (NFPA) Health Care Facilities Code, Life Safety Code, and Standards for Emergency and Standby Power Systems, and is accessible only to the Behavioral Wellness Facilities Manager and County General Services maintenance personnel. This generator is maintained in compliance with NFPA regulations that include weekly visual inspection, bimonthly testing under load, and annual maintenance based on the manufacturer's recommendations. All generator inspection, testing and maintenance is completed by County General Services and documented by the Behavioral Wellness Facilities Manager; logs are kept onsite at the PHF.
- 7.2. **Generator fuel.** Generator fuel is stored in an outdoor fuel tank capable of generating power for up to five (5) days. During an emergency, County General Services emergency maintenance personnel will assist with refueling the generator and obtaining additional fuel to ensure emergency power systems stay operational for the duration of the emergency. Fuel may be obtained from the County-operated gas station on County Rd. (less than one mile from the PHF), local retail gas stations, or County-operated gas stations in Lompoc and Santa Maria.
- 7.3. **Temperature control.** The PHF is situated in the city of Santa Barbara and experiences mild climate with an average high of 77° in August and an average low of 42° in December. Extreme hot or cold temperatures that pose a risk to health and safety are unlikely, including during an outage of HVAC (heating, ventilation, and air conditioning) systems. In case of high temperatures or ventilation problems, portable fans and other cooling solutions can be run from generator-powered outlets (marked in red throughout the unit) to maintain safe temperatures for people sheltering during an emergency. Several portable fans can be obtained from Behavioral Wellness Facilities or County General Services. During colder periods, additional bedding and blankets will be provided to patients. For water temperature, controls are tested monthly by the Behavioral Wellness Facilities Manager. During a gas outage, a diesel-powered boiler is available for emergency needs. Emergency repairs for water temperature will be coordinated by Behavioral Wellness Facilities Manager with local area vendors.
- 7.4. **Emergency lighting.** The PHF is equipped with emergency floodlight fixtures mounted adjacent to illuminated exit signage powered by the emergency generator. Emergency floodlights automatically activate within ten seconds when power is unexpectedly lost. Exit signage is battery-operated, drawing power from the building's power grid and lighting automatically in the event of a power loss. Emergency and exit lighting will be functional for a minimum of 90 minutes following power failure. Testing of emergency

lighting is completed by County General Services with a monthly 30-second test and an annual 90-minute test. County General Services also completes preventive maintenance of exit signage. Backup battery-operated flashlights and batteries are stored onsite in offices, the nursing station, and the emergency supply shed located in the PHF patio. These are maintained in their original packaging and labeled for emergency use only.

- 7.5. **Fire detection, extinguishing, and alarm systems.** In the event of a power failure, PHF fire detection, extinguishing (i.e. sprinkler), and alarm systems are set to continue running with emergency generator power. If the PHF were to experience a water supply failure, handheld fire extinguishers are available onsite located every 30 feet along PHF hallways. If the PHF experiences a planned or unplanned outage of fire alarm and sprinkler systems for more than 4 hours in a 24-period, the PHF activates a fire watch tour of the facility.<sup>1</sup> County General Services complete quarterly testing of the sprinkler system and inspector valve and monthly testing of the fire alarm system. The Behavioral Wellness Facilities Manager documents all testing completed and keeps logs onsite at the PHF.
- 7.6. **Sewage and waste disposal.** In the event of failure of the mainline sewer system, alternate sewage disposal solutions will be used. The PHF Team Leader will contact General Services to arrange delivery of Porta-Potties or additional water supplies. Porta-Potties may be placed in the parking lot to serve staff and in the PHF courtyard to serve patients. Alternately or in addition, General Services will provide emergency water containers or buckets for manually forced toilet flushing. The PHF is equipped with collection and disposal bins for potentially infectious waste, including soiled linens, and manages and disposes all waste in accordance with infection control guidelines. Non-sharps medical waste collection and disposal containers are stored onsite for emergency use. Waste removal during an emergency will be coordinated with contracted local area vendors and/or General Services emergency maintenance personnel as needed. If waste cannot be removed from the premises during an emergency, waste will be stored in an isolated, restricted location on or in close proximity to the unit until proper disposal arrangements can be made.

## **8. EMERGENCY REPAIRS AND ASSISTANCE FROM OUTSIDE VENDORS**

- 8.1. The PHF has agreements and contracts with local area contractors for any emergency repair needs impacting functioning of critical systems, including, but not limited to, electrical, plumbing, and HVAC systems.

## **9. GENERAL SERVICES CONTACT INFORMATION**

- 9.1. County General Services can be reached after hours for emergency repair and support needs:

805-896-2916

---

<sup>1</sup> Please refer to the PHF's "Fire Watch Program" policy for further details.

**ASSISTANCE**

Mark Lawler, LPT, PHF Team Supervisor  
Ernest Thomas, Behavioral Wellness Facilities Manager  
Alesha Silva, RN, PHF Interim Nursing Supervisor  
Marianne Barrinuevo, RN, MSN, PHF Director of Nursing

**REFERENCE**

Code of Federal Regulations – Condition of Participation: Emergency Preparedness  
*Sections 482.15(b)(1), 482.15(e)(1-3)*

National Fire Protection Association (NFPA)  
*NFPA 70 - National Electric Code*  
*NFPA 99: Health Care Facilities Code*  
*NFPA 101: Life Safety Code*  
*NFPA 110: Standard for Emergency and Standby Power Systems*

Centers for Medicare & Medicaid Services (CMS)  
*Emergency Preparedness Final Rule Interpretive Guidelines and Survey Procedures*  
*Ref: S&C 17-29-ALL, 6/2/2017*

California Hospital Association  
*Hospital Emergency Food Supply Planning Guidance and Toolkit. Retrieved from:*  
*<https://www.calhospitalprepare.org/foodplanning>*

**RELATED POLICIES/DOCUMENTS**

PHF Emergency Response Plan  
PHF Emergency Communication Plan  
Disaster and Emergency Supplies for Dietary Services  
Fire Watch Program  
Provision of Pharmacy Services During an Emergency (Hometown Pharmacy policy)  
Emergency Patient, Staff, and Visitor Tracking  
Emergency Transfer Agreements with Other Facilities  
Shelter-in-Place During Emergency

**REVISION RECORD**

| DATE | VERSION | REVISION DESCRIPTION |
|------|---------|----------------------|
|      |         |                      |

***Culturally and Linguistically Competent Policies***

*The Department of Behavioral Wellness is committed to the tenets of cultural competency and understands that culturally and linguistically appropriate services are respectful of and responsive to the health beliefs, practices and needs of diverse individuals. All policies and procedures are intended to reflect the integration of diversity and cultural literacy throughout the Department. To the fullest extent possible, information, services and treatments will be provided (in verbal and/or written form) in the individual's preferred language or mode of communication (i.e. assistive devices for blind/deaf).*

