

## Volunteers Needed for Upcoming Regional Hospital Drill

Each year the King County Healthcare Coalition hosts a county-wide exercise to test our regional capabilities. This year, the exercise is focused on testing the Regional Medical Evacuation and Patient Tracking Mutual Aid Plan for the hospitals.

We need your help to test the current process used to relocate patients from an evacuating hospital to other local hospitals. Volunteers will role-play as a hospital patient at the University of Washington Medical Center, and be moved via EMS to other hospitals in the area. At the end of the exercise, a courier van will be en route to pick up volunteers and bring them back to the UW Medical Center.

This exercise is scheduled from 9:30am to 2:00pm on May 18. If you are interested in participating in this event, please register by responding to the Public Health Reserve Corps email: [phrc@kingcounty.gov](mailto:phrc@kingcounty.gov).

## PHRC Focus: Alternate Care Facility Purpose & Overview

The Alternate Care Facility, or ACF, is part of the comprehensive healthcare disaster response strategy for the King County healthcare system. When the medical community becomes overwhelmed, the ACF supports specific crucial functions such as: 1) sheltering for general population with medical needs, 2) increasing medical surge capacity for emergencies, 3) establishing collection points for medical patients awaiting regional evacuation, 4) performing population screening, or 5) distributing disease antidotes and vaccinations during severe infectious disease or chemical exposure. The ACF will be established based on the anticipated or actual need for a surge medical facility within King County, Washington. It will be an active component of the King County Healthcare Coalition of healthcare facilities and, as such, will be monitored by "Hospital Control" of King County.

We will rely on dedicated volunteers to help us operate the ACF. To ensure we provide the most efficient and effective response possible, we are committed to training and preparing our volunteers to work in the ACF. This includes familiarizing our medical volunteers with the equipment they will be using in the ACF, as well as planning an ACF drill which will occur later this year.

## Save the Date!

### PHRC New Volunteer Orientation

May 3, 2010

If you are a volunteer who has not attended an in-person orientation, see page 3 for information on the next scheduled orientation.

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# Critical Emergency Codes Used in the ACF



Washington State Hospital Association

## Emergency Code Calls

**CODE BLUE**

Heart or Respiration Stops



An adult, child, or infant's heart has stopped or they are not breathing

**CODE RED**

Fire



1. Seeing smoke or fire
2. Smelling smoke or other burning material
3. Feeling unusual heat on wall, door or other surface
4. Told by someone of a fire

**CODE ORANGE**

Hazardous Spill



1. A hazardous material spill or release
2. Unsafe exposure to spill

**CODE SILVER**

Weapon or Hostage Situation



1. At risk or confronted by person with weapon
  2. Hostage situation
- (A weapon is anything that can cause bodily harm or injury)*

**INTERNAL TRIAGE**

Internal Emergency



Internal emergency in multiple departments, including:

- Bomb or bomb threat
- Computer network down
- Major plumbing problems
- Power or telephone outage

**EXTERNAL TRIAGE**

External Disaster



External emergencies impacting hospital, including:

- Mass casualties
- Severe weather
- Massive power outages
- Nuclear, biological, and chemical accidents

**CODE GRAY**

Combative Person



Combative or abusive behavior by patients, families, visitors, staff or physicians

*(If a weapon is involved "CODE SILVER" should be called)*

**AMBER ALERT**

Infant/Child Abduction



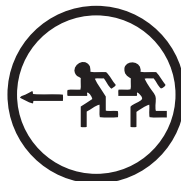
An infant or child is missing or abducted

**CODE CLEAR**

Announced when emergency is over

**RAPID RESPONSE TEAM**

Medical Team Needed at Bedside



A patient's medical condition is declining and needs an emergency medical team at the bedside

*(Prior to heart or respiration stopping)*

Code calls used in Washington Hospitals [www.wsha.org](http://www.wsha.org)

01/09

If you would like to take part in the Alternate Care Facility Drill planned for the summer of 2010 or would like to volunteer in an ACF, should one need to be established, we ask that you become familiar with the Washington State Hospital Association Emergency Code Calls now. Pictures and detailed descriptions of the emergency code calls are contained in the poster to the left. Please retain this page for future reference. All volunteers who participate in the ACF drill will be expected to know these code calls. By familiarizing yourself with these standardized emergency code calls, we can promote safety and reduce harm in the ACF. These emergency code calls will allow us to communicate an emergency quickly and to mobilize the appropriate expert assistance. We thank you in advance for taking the time to learn these emergency codes. Preparation will greatly increase our ability to respond to and recover from any unforeseen adverse event in the ACF.

## PHRC and the Medical Examiner's Office: Surge Team Update

The Public Health Reserve Corps recently established a team of volunteers to help the King County Medical Examiner's Office (KCMEO) in the event of an emergency or mass fatality. The KCMEO surge team is the first of its kind in our area. Many of our PHRC volunteers on this team have background experience related to the field of death investigation and will certainly be a valuable asset to the community, should this team be called upon.

This specific team is the first of its kind in the area. We hope that the PHRC will provide the framework for other local department surge teams of this kind.



## PHRC Orientation and Registration Opportunities

### PHRC New Volunteer Orientation

May 3, 2010, 10:30 a.m.-12:30 p.m.

Location: 401 Fifth Ave, Seattle, Chinook Building, Training Room 121

**You must sign up by e-mailing [phrc@kingcounty.gov](mailto:phrc@kingcounty.gov). A confirmation will be sent to you 1-2 weeks prior to training.**

### Registration Workshops

Occurs every second and fourth Thursday of every month

Location: 401 Fifth Ave, Seattle, Chinook Building

Please visit our website at [www.kingcounty.gov/health/phrc](http://www.kingcounty.gov/health/phrc) for dates of the Registration Workshops. Refer your friends!

\*Unfortunately, due to King County budget constraints, providing food or beverages for events or reimbursement for parking is no longer allowed by Public Health. Volunteers are, however, welcome to bring in their own food and beverages.

## Required Training!

### National Incident Management System (NIMS) Training

PHRC volunteers are required to fulfill two specific NIMS online training courses upon registration:

1. IS-100.HC Introduction to the Incident Command System for Healthcare/Hospitals:  
<https://training.fema.gov/EMIWWeb/IS/is100HC.asp>

2. IS-700 Introduction to the National Incident Management System:  
<http://training.fema.gov/EMIWWeb/IS/is700.asp>

Volunteers should email copies of completion certificates to [phrc@kingcounty.gov](mailto:phrc@kingcounty.gov).

### PHRC Continues to Grow!

Year-to-date, we have welcomed 41 new volunteers to our team! Like all of you, they have decided to contribute their time and skills to helping others.

Our goal is to have a large pool of trained and skilled volunteers to call on in the event of an emergency, so please spread the word. The best recruiters are those who know the institution and believe in the mission of the PHRC.

Thank you all for making the Public Health Reserve Corps strong!

## PHRC Focus

Beginning in February, the PHRC officially transitioned in to the oversight of Janine Weihe, Chief of Finance and Administration in the Emergency Preparedness section of Public Health - Seattle & King County. We look forward to working together to develop the PHRC in 2010!

### A Job Well Done!

Rosalind Monteros has been the PHRC acting program manager for the past seven months. Rosalind provided excellent leadership to our team, guiding the program through a period of positive transformation and development.

Rosalind's contributions to the program played a key role in the success and growth of the Public Health Reserve Corps over the past year. We are fortunate that she will continue to be a critical part of our team. Rosalind will be focusing on increasing community outreach and recruitment for the PHRC in the next few months.

A huge thank you to Rosalind for all that she has done for the program!

## Public Health Reserve Corps Welcomes a New Program Manager

This month, we will welcome our new Public Health Reserve Corps program manager, Dave Nichols to our team. Most recently, Mr. Nichols' fulfilled the role of Assistant Director of Emergency Services for the American Red Cross of King and Kitsap counties. He served in the US Army for twenty years before entering into the emergency operations field. Project leadership and volunteer management are just two of the many skills Mr. Nichols will bring to the Public Health Reserve Corps. Please feel free to introduce yourself to Dave at the next Public Health Reserve Corps event. He is eager to meet and work with you all!

## Fostering New Partnerships with other Local Leaders

The Public Health Reserve Corps team is currently working on a new project to sponsor quarterly networking meetings with Medical Reserve Corps (MRC) sister units from neighboring cities and counties. Our goal is to establish an ongoing collaborative effort to share resources and ideas. We hosted the first meeting for this group in March. Leaders from local MRC units and other Office of Emergency Management divisions met with our group to discuss potential partnerships with the PHRC. The Washington State Medical Reserve Coordinator from the Department of Health, Scott Carlson, also joined us.

PHRC is confident that these meetings will be a successful way to learn about community events, such as training opportunities. We plan to share this information with our volunteers in our new "PHRC Express" news briefs. These are short publications we plan to release between newsletters to keep you updated on these new community partnerships and the resources that we learn about.

## PHRC Volunteer Needs

- Licensed Medical Volunteers:
  - o Lab Technicians
  - o Mental Health Providers
  - o Paramedics
  - o Pharmacists
  - o Physicians and Physician Assistants
  - o Psychiatrists
  - o Registered Nurses
  - o and many more!
- Non-Medical Volunteers:
  - o Call Center Operators
  - o General/Administrative Support
  - o Hospitality Workers
  - o Interpreters
  - o Logistics Workers
  - o Spiritual Care Workers
  - o Any adult who wants to help!

For more information about the Public Health Reserve Corps, including how to apply and volunteer job descriptions, visit: [www.kingcounty.gov/health/phrc](http://www.kingcounty.gov/health/phrc) or email [phrc@kingcounty.gov](mailto:phrc@kingcounty.gov).



# Personal Preparedness: Spring and Summer Time Safety

Here at Public Health, we are devoted to the well-being of our volunteers. As the cold and rain turns to warmer and sunnier days, we would like to remind all of you to keep safety in mind. Below are some helpful tips for you during this Spring and Summer.

## Skin Safety Tips:

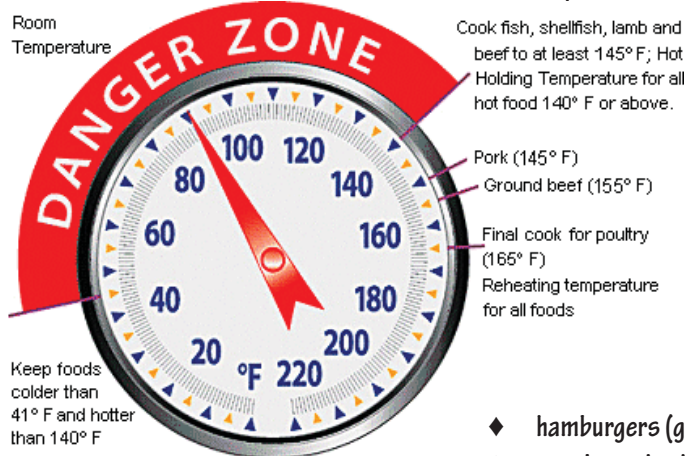
1. Apply sunscreens with at least a SPF 15, even on cloudy days when 80 percent of the sun's rays can penetrate the clouds. Don't forget about lips - try a lip balm with SPF 15.
2. Limit sun exposure, especially during the peak sun hours of 10 a.m. to 4 p.m. when the sun's rays are the most intense.
3. Wear protective clothing during prolonged periods in the sun, including a wide-brimmed hat, long-sleeved shirt and pants, and UV-protective sunglasses.

## Food Safety Guidelines

1. Wash your hands thoroughly before cooking, after touching raw meat, fish, or chicken, and especially after visiting the bathroom. Most food borne illnesses are related to improper handwashing after going to the bathroom. If handwashing facilities are not available, wet napkins or sanitizers will reduce the germs on your hands, but won't eliminate them.

2. Be mindful of temperature control:

a. Cook thoroughly. Use a food thermometer to check that meats and poultry are hot enough to kill any harmful bacteria. Minimum safe internal temperatures are:



- ◆ hamburgers (ground meats and sausages, including pork sausages): 155° F;
- ◆ steaks and other beef, veal, lamb, fish and shellfish: 145° F;
- ◆ poultry: 165° F;
- ◆ pork (except pork sausage): 145° F.

b. Keep hot foods hot. After cooking meat or chicken on the grill, keep it at 140° F or warmer until serving. If reheating fully cooked items such as baked beans or hot potato salad, heat to 165° F.

c. Do not partially cook meat or poultry and finish cooking later.

d. Keep cold food cold. If you are using a cooler, keep it out of the sun and avoid opening it too often so it stays as cool as possible inside. Keep cold foods at 41° F or colder at all times.

e. Transport cold foods in a cooler to minimize bacteria growth. Use an insulated cooler with icepacks.

3. Don't cross-contaminate: Don't cut vegetables or other ready-to-eat foods on the same cutting board as chicken or meat without thoroughly cleaning the knife and the cutting board first. Don't put cooked meat or poultry on the same platter that held the raw food.

\*\*\*Our recommendation for picnics, where proper washing facilities are not available, is to bring two separate cutting boards - one for meat, chicken, and fish, and the other for vegetables and other ready-to-eat foods.\*\*\*

4. Be careful with melons: wash the melon rind before you cut into it to minimize pushing bacteria that is often associated with melons down into the flesh. Keep cantaloupe and other melons cold 41° F or colder.

5. Leftovers: Refrigerate food as soon as possible in shallow containers. Discard any food that has been out of the refrigerator for 4 or more hours.