



Policy:	24-03
Subject:	Emergency Procedures at BHRS Facilities for Utility/Environmental Disruptions
Authority:	National Security Presidential Directive 51 (NSPD-51) Homeland Security Presidential Directive 20 (HSPD-20) Federal Continuity Directive 1 (FCD-1) California Executive Order S-04-06 MHP/DMC-ODS Contract with Department of Health Care Services
Original Policy Date:	August 2, 2024
Amended:	N/A
Supersedes:	N/A
Attachments:	<ol style="list-style-type: none"> 1. Facility Emergency Incident Decision Tree 2. Standard Operating Procedure – Power Outage 3. Standard Operating Procedure – Network Outage 4. Standard Operating Procedure – Wildfire Smoke 5. Standard Operating Procedure – Loss of Heating / Cooling / Heatwave / Freeze 6. Standard Operating Procedure – Excessive Noise, Noxious Odors or Fumes 7. Standard Operating Procedure – Water Supply 8. Standard Operating Procedure – Staffing Shortage
Related Policies:	90-08 : Management of Threatening or Violent Behavior 93-11 : Critical Incident Reporting 95-05 : Weapons Management 00-02 : Safety/Risk Management Committee 01-03 : Assaults on Clients: Suspected or Reported 05-08 : Adverse Event Reporting 10-03 : Managing Client Risk on High Temperature Days

PURPOSE:

The purpose of this policy is to provide general guidance to BHRS facilities for emergencies contained to a specific facility related to environmental and utility work disruptions. It establishes leadership communication and responsibilities during the incident in order to manage the incident in a safe and expedient manner.

SCOPE:

This policy covers incidents that may occur at a BHRS facility that are contained to the specific facility and may not warrant mobilization of BHRS Disaster Response capabilities. These are conditions that interrupt business operations at a specific location and may pose safety concerns for clients and staff requiring immediate and appropriate response. Examples of such incidents include power outages, noxious odors or fumes, excessive noise due to temporary



conditions, and failure of equipment such as air conditioning, door locks, information systems, or communications equipment.

DEFINITIONS:

Localized Emergency – Conditions and circumstances can vary, but a localized emergency is an incident that is contained to a specific facility and threatens ongoing operations and the ability of the facility to either serve the public or maintain operations. This is differentiated from an emergency or disaster because there is no imminent or existing threat to health, life, or property on a community-wide scale.

Emergency or Disaster - Conditions and circumstances can vary, but typically an emergency exists when there is an imminent danger or there exists a threat to health, life, property, or environment, that if not abated through urgent intervention would result in a worsening of the situation, and in some instances, too great to mitigate to the extent that only palliative care can be provided in the aftermath. These types of emergencies exceed the scope of this policy and require a community-wide coordinated response involving disaster response plans and agencies.

Emergency Action Plan – This is an action plan that is maintained by each BHRS facility that covers what to do if there is fire or smoke in the building, bomb threat, hazardous materials incident, earthquake, medical emergency, violence, crisis or confrontation incidents, and evacuations. Some of these situations exceed the scope of this policy and the Emergency Action Plans for each facility should be referenced and considered in such situations. Plans can be found [here](#).

Site Leader – The ranking person on site, in order of progression based on availability, the Unit Chief, then the Program Manager, then the Supervising Psychiatrist* (“Med Chief”), then the program specialist, and then any other supervisor on site that take immediate responsibility in addressing the situation at the site and facilitating communication.

Site Safety Committee – A committee of site employees that identify and address site safety issues ongoing and meets at least twice per year.

* - For Supervising Psychiatrists, reporting is through the Medical Director, not Deputy Director.

RELATIONSHIP TO EMERGENCY ACTION PLANS

Each BHRS facility has available to them an Emergency Action Plan. These plans are site specific and cover these emergencies: Fire or Smoke, Bomb Threats, Hazard Materials, Earthquake, Individual Medical Emergencies, Violence, Tips for Crisis Prevention, How to Handle Confrontation, Utility Disruption, as well as Evacuations. This policy goes more in depth for utility disruptions than the Emergency Action Plans, but for other emergency types listed in the previous sentence, refer



to the Emergency Action Plan and use in conjunction with the standard operating procedures set forth in this policy. Site Emergency Action Plans can be found [here](#).

RESPONSIBILITY AND AUTHORITY:

Site Leader – In this order of progression: Unit Chief, if unavailable, Program Manager, if unavailable, then Supervising Psychiatrist* (“Med Chief”), or in the absence of any of these three, the Program Specialist or Supervisor, at the site has the responsibility to:

1. Assess the conditions that impede the ability of the staff at the facility to serve the public or maintain operations.
2. Initiate actions that protect the safety of the public and staff, and to maintain operations at the facility to the extent this can be done safely. Examples of such authority are determining the cause and extent of the incident to determine the potential impact on the ability of the site to serve the public or maintain operations, to evacuate the facility if warranted, and to take actions appropriate to the circumstances that allow business continuity at the site if safe to do so.
3. Notify the chain of command of the incident and details. The only person with the authority to close a facility is the County Executive.

Management – The manager over the site leader has the responsibility to:

1. Communicate with the site to monitor the incident, collect details and information that can be communicated to the executive leadership to inform any necessary decisions that may need to be made.
2. Contact entities that provide services to the facilities, such as the Department of Public Works, P.G. & E., ISD, Health IT, or the water company to coordinate their response and to assure their follow through on the response, including determining the time it will take for the entity to correct the circumstances that are causing the incident. The only person with the authority to close a facility is the County Executive.

* - For Supervising Psychiatrists, reporting is through the Medical Director, not Deputy Director.

Executive Leadership – The executive over the manager has the responsibility to:

1. Communicate with the manager in order to keep other executives up to date about the incident and to support decisions that may have to be made.
2. Check in with the manager frequently to collect details and assure action is being taken to correct the situation so that the facility can remain open to the public and maintain operations.



3. If the situation persists and the facility cannot serve the public or maintain operations, the executive over the manager shall confer with the Director, or in the absence of the Director, the Assistant Director, to determine the appropriate actions to pursue.

Site Safety Committee – The members of the Site Safety Committee have the responsibility to:

1. Assist the site leader during incidents as necessary.
2. Meet on a regular basis, but no less than twice a year, to discuss facility safety issues, identify responses, and implement solutions, and practice.
3. Maintain and exercise the site Emergency Action Plan.
4. Practice, maintain, and inform changes and updates to policies applicable to the facility related to safety and emergencies on at least an annual basis.

NOTIFICATIONS AND COMMUNICATIONS:

Once the safety of staff and the public is established, the Site Leader will communicate with both employees and management about the immediate details of the situation in order to keep everyone apprised of the matter. Management will communicate and notify the entities at the county level that support the facility and have the capacity to address and rectify the situation, as well as keep their immediate executive apprised of the matter. Executives will notify other county departments as necessary to communicate the details of the situation and to support the efforts of those other county departments to rectify the situation, including soliciting support from the County Executive Office and Risk Management to close the facility, if necessary.

PROCEDURE:

Standard Operating Procedures (SOP) have been established for each type of facility incident and are attached to this policy. The SOPs are to be utilized for each incident type. These procedures are as follows:

SOP-PO – Power Outages

SOP-NO – Network Outages

SOP-WS – Wildfire Smoke

SOP-HW – Loss of Heating/Cooling/Heat Wave/Freeze

SOP-NOX – Excessive Noise, Noxious Odors or Fumes, and Construction

SOP-H2O – Water Supply

SOP-SS – Staffing Shortage



Actions Involving Facility Closure

If the course of action in response to the scenarios described in this policy result in a facility being unstaffed at any time between the hours of 8:00AM and 5:00PM, such an action will not be undertaken until the County Executive Office (CEO) and Risk Management have been consulted. Such an action should be initiated upon notification of the Health Chief by the BHRS Director. The Health Chief may inform the CEO or defer to the Director to inform the CEO.

When action is taken that results in a facility closure, all scheduled appointments, events, and meetings at the location shall be rescheduled to other locations and clients that receive services at the facility shall be notified and those with an appointment shall be notified by phone. Additionally, the Site Leader shall ensure that a sign is posted at each public entrance notifying the public of the closure and shall include a phone number to call for any emergencies. Situations involving contract staff or non-BHRS staff co-located at a BHRS facility shall seek advice from their respective chain of command.

Actions Involving the Relocation of Staff

When circumstances result in the need to relocate staff, those staff that will be providing services to the public should be relocated to the closest BHRS facility that is equipped to accommodate the delivery of the specific services provided by that staff to a client. If such capacity is not available, service appointments will be evaluated on whether or not they can be provided via telehealth. For those staff that are not public facing or cannot be accommodated at operating BHRS facilities, they shall be allowed to telework for the duration of the incident and until such time that they can be accommodated or to return to the facility that was closed. This could also include allowing non-public facing staff that were not part of the closed facility to be allowed to telework if it would accommodate public-facing relocated staff. Situations involving contract staff or non-BHRS staff co-located at a BHRS facility shall seek advice from their respective chain of command.

Incidents Not Described in this Policy

If an incident occurs that is not immediately addressed by this policy, then the Site Leader shall confer with their Manager to determine the immediate course of action. The Manager shall then request that their Deputy Director pull together the necessary staff to determine an appropriate plan of action to address the situation.

Communication and Training

It is the responsibility of the Compliance Officer and the Deputy Director for Administration and Finance to communicate this policy to all BHRS staff and to provide training opportunities that exercise and inform updates to the policy on an annual basis. These two executives will also ensure that facility Site Safety Committees are meeting on a regular basis, exercising this policy and other related policies, as well as exercising the site Emergency Action Plan, and informing any updates to the policies or Emergency Action Plans.



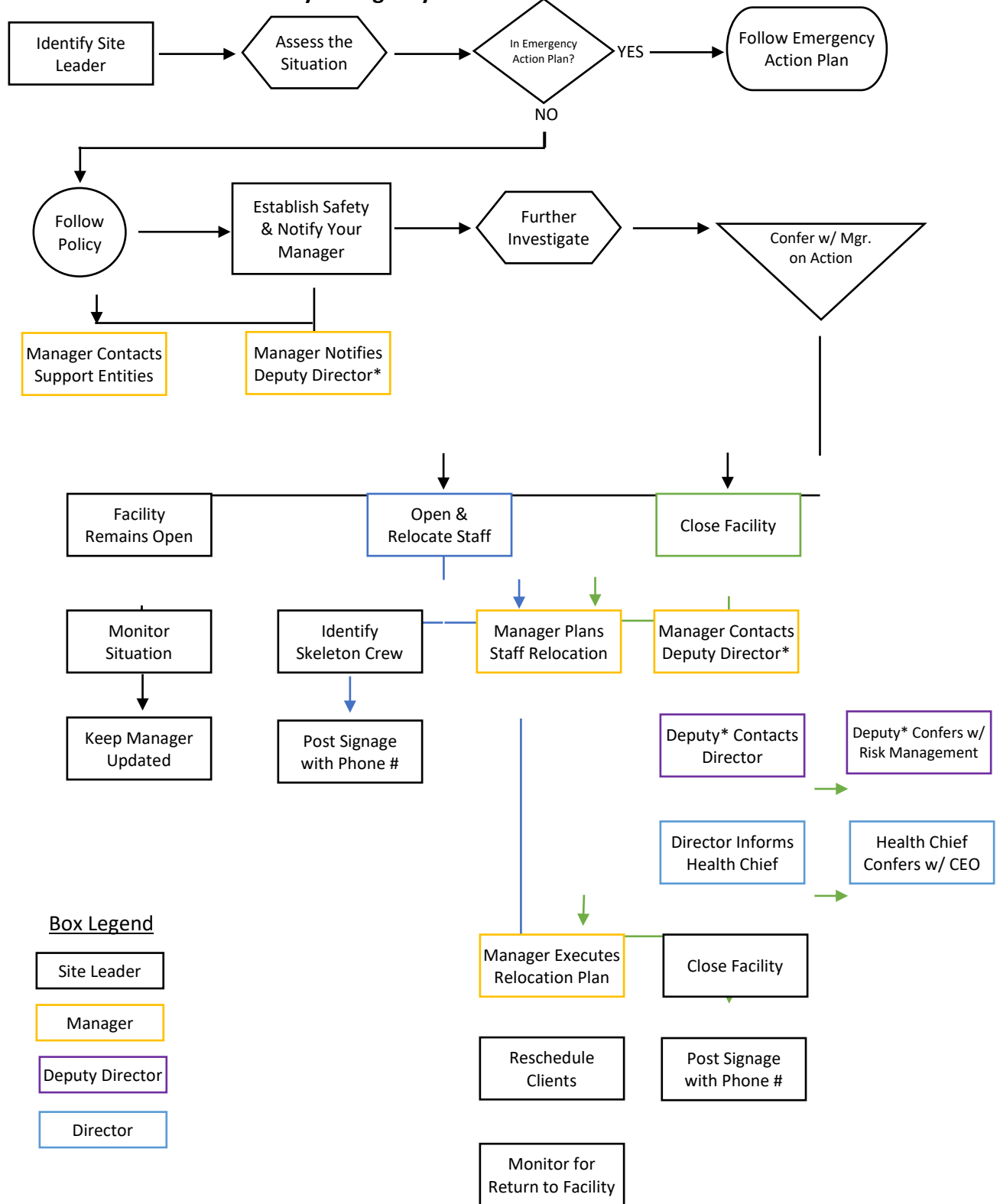
Approved: Signature on File
 Scott Gruendl, MPA
 Assistant Director
 Compliance Officer

Approved: Signature on File
 Dr. Jei Africa, PsyD, FACHE
 BHRS Director

ANNUAL REVIEW OF COMPLIANCE POLICY			
Next Review Due:	August 2025		
Last Reviewed by:	Scott Gruendl, Compliance Officer	Date:	8/3/24



**Attachment 1
 Facility Emergency Incident Decision Tree**





* - For Supervising Psychiatrists, reporting is through the Medical Director, not Deputy Director.

Policy 24-03: Emergency Procedures at BHRS Facilities Attachment 2

STANDARD OPERATING PROCEDURE: POWER OUTAGE (SOP-PO)

Power Outage Characteristics

Power outages are somewhat common and can be expected to affect BHRS facilities several times each year on average. Power outages may be planned as in the event of a Public Safety Power Shutdown (PSPS) or unplanned. Generally, power outages are unpredictable although they are more likely to occur during periods of inclement weather. Power outages may affect only a single facility, part of a facility, or be extensive, region-wide events affecting multiple BHRS facilities.

Impacts to Operations

Many power outages are brief, and power is restored with minimal disruption to operations. Occasionally, a power outage may extend for days, or even weeks long events. The expected impact of business operations can vary widely depending on the scope and duration of the event. Other factors including weather conditions, time of day, and time of year may also be factors affecting the range of response options.

Decision-Making

Flexibility based on operational and client needs is a critical component of this guidance. Deputy Directors and Managers will make decisions depending on the circumstance and on input from onsite staff.

The primary management considerations during a power outage are:

1. Life safety and health of staff, visitors, and clients
2. Protection of property
3. Continuity of operations

INITIAL ACTIONS

- Power outage occurs, after 15 minutes the chain of command must be informed.
- Staff will report the outage to their manager or supervisor.
- Managers and supervisors should report outage to their Deputy Director.
- Deputy Directors shall inform the Executive Team.
- Site Leader for each affected facility is established.



- Facilities with multiple programs will establish a Site Leader that will report to all involved Managers at the site.

SITE SAFETY COMMITTEE

- The Site Safety Committee will ensure each site will appropriate supplies such as battery-operated flashlights.
- The Site Safety Committee will provide an end of the year documentation of all power outages to Executive Team for review.
- The Site Safety Committee will coordinate and conduct regularly scheduled committee meetings.

LEVEL 1: LIMITED OUTAGE

<i>Applicable when outage anticipated is less than 2 hours or two or fewer BHRS sites affected.</i>	
Managers	<ul style="list-style-type: none"> • Work with appropriate parties to gather information about scope and extent of the problem. • Take appropriate actions to ensure timely restoration of services. • Communicate information regarding incident as necessary. • Utilize resources to assist with the incident as identified here.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Address any immediate threats to safety or security. • Report issues of concern. • Notify Manager(s). • In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness.

LEVEL 2: EXTENDED OUTAGE

<i>Applicable when outage anticipated is more than 2-hour duration and two or fewer BHRS sites affected.</i>	
Level 1 actions + additional actions to be considered:	
Managers	<ul style="list-style-type: none"> • Take appropriate actions to monitor and maintain generators. • Communicate information/status as appropriate.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Address any immediate threats to safety or security. • Report issues of concern.



	<ul style="list-style-type: none"> • Notify Manager(s). • In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness. • Affected Deputy Directors may consider relocating staff. • Affected Deputy Directors may consider releasing staff.

LEVEL 3: DEPARTMENT OPERATIONS CENTER (DOC) ACTIVATION

<i>Applicable when outage is expected to last more than 1 business day and/or impact more than two BHRS sites.</i>	
	Level 1 and Level 2 actions + additional actions to be considered:
Managers	<ul style="list-style-type: none"> • Notify BHRS Director or their designee if DOC activation is expected.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Address any immediate threats to safety or security. • Report issues of concern. • Notify Manager(s). • In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness. • Provide input to Continuity Team as necessary.
DOC Team	<ul style="list-style-type: none"> • Review situation and assess for appropriate response. • Determine agency priorities. • Recommend appropriate actions.

CONSIDERATIONS FOR GENERATOR OPERATIONS

- What building systems are working or impacted?
- Do staff know if the building is on generator power?
- Is approximate run time known?
- What conservation measures are in place?
- What needs to be communicated?
- Do fuel levels need to be monitored?
- Impact on medications stored in the Medication Room?

CONSIDERATIONS FOR RELOCATING STAFF TO ANOTHER SPACE/SITE OR RELEASING STAFF TO GO HOME



- Anticipated duration of outage/incident
- Business impacts vs. business/compliance requirements
- Potential impacts to other BHRS work units
- Is telework a possibility? For whom?
- Equity-related issues
- Is backup power available if power is out? For how long?
- Is plumbing functional?
- Outdoor temperatures, HVAC? Building temperatures? OSHA recommends that businesses maintain an operating temperature between 68- and 76-degrees F. (Temperatures above 85F may require special accommodations).
- Can the work be done at an alternate site? Costs and time to relocate vs. anticipated outage duration
- Status of alarm and entry systems (Cardkey), PHI protection requirements
- Status of other building systems such as elevators and emergency lighting and impacts to staff safety and morale
- Time of day/Indoor lighting conditions
- Human Resources, Payroll Policies, Employee Relations, Labor MOUs
- If decision is made to relocate or release staff, who should be informed? Are all entrances posted with signage indicating closure with a phone number to call for emergencies?

Policy 24-03: Emergency Procedures at BHRS Facilities Attachment 3

STANDARD OPERATING PROCEDURE: NETWORK OUTAGE (SOP-NO)

Power Outage Characteristics

Network outages are somewhat rare and can be expected to affect BHRS facilities several times each year on average. Network outages may be planned as in an ISD project upgrade or unplanned. Generally, network outages are unpredictable although they are more likely to occur during periods of inclement weather. Network outages may affect only a single facility, part of a facility, or be extensive, region-wide events affecting multiple BHRS facilities.

Impacts to Operations

Network outages are brief, and the network is restored with minimal disruption to operations. Occasionally, a network outage may extend for days, or even weeks long events. The expected impact of business operations can vary widely depending on the scope and duration of the event. Other factors including weather conditions, time of day, and time of year may also be factors affecting the range of response options.

Decision-Making

Flexibility based on operational and client needs is a critical component of this guidance. Deputy Directors and Managers make decisions depending on the circumstance and input from onsite staff.



The primary management considerations during a network outage are:

1. Continuity of operations

INITIAL ACTIONS

- Network outage lasts longer than 15 minutes the chain of command must be informed.
- Staff will report the outage to their manager or supervisor.
- Managers and supervisors should report outage to their Deputy Director.
- Deputy Directors shall inform the Executive Team.
- Site Leader for each affected facility is established and Site Leader opens ticket with ISD.
- Facilities with multiple programs will establish a Site Leader that will report to all involved Managers at the site.

LEVEL 1: LIMITED OUTAGE

<i>Applicable when outage anticipated is less than 2 hours or two or fewer BHRS sites affected.</i>	
Managers	<ul style="list-style-type: none"> • Work with appropriate parties to gather information about scope and extent of the problem. • Take appropriate actions to ensure timely restoration of services. • Communicate information regarding incident as necessary.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Address any immediate threats to business operations. • Report issues of concern and open ticket with ISD. • Notify Manager(s).
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness.

LEVEL 2: EXTENDED OUTAGE

<i>Applicable when outage anticipated is more than 2-hour duration and two or fewer BHRS sites affected.</i>	
	Level 1 actions + additional actions to be considered:
Managers	<ul style="list-style-type: none"> • Communicate information/status as appropriate.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Address any immediate threats to business operations. • Report issues of concern. • Notify Manager(s).
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness.



	<ul style="list-style-type: none"> • Affected Deputy Directors may consider relocating staff. • Affected Deputy Directors may consider releasing staff.
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LEVEL 3: DEPARTMENT OPERATIONS CENTER (DOC) ACTIVATION

<i>Applicable when outage is expected to last more than 1 business day and/or impact more than two BHRS sites.</i>	
	Level 1 and Level 2 actions + additional actions to be considered:
Managers	<ul style="list-style-type: none"> • Notify BHRS Director or their designee if DOC activation is expected.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Address any immediate threats to business operations. • Report issues of concern. • Notify Manager(s).
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness. • Provide input to DOC Team as necessary.
DOC Team	<ul style="list-style-type: none"> • Review situation and assess for appropriate response. • Determine agency priorities. • Recommend appropriate actions.

CONSIDERATIONS FOR RELOCATING STAFF TO ANOTHER SPACE/SITE OR RELEASING STAFF TO GO HOME

- Anticipated duration of outage/incident.
 - Business impacts vs. business/compliance requirements.
 - Potential impacts to other BHRS work units.
 - Is telework a possibility? For whom?
 - Equity-related issues.
 - Can the work be done at an alternate site? Costs and time to relocate vs. anticipated outage duration
 - Status of alarm and entry systems (Cardkey), PHI protection requirements
 - Human Resources, Payroll Policies, Employee Relations, Labor MOUs
 - If decision is made to relocate or release staff, who should be informed? Are all entrances posted with signage indicating that the facility is closed with a phone number for emergencies?
- Policy 24-03: Emergency Procedures at BHRS Facilities Attachment 4

STANDARD OPERATING PROCEDURE: WILDFIRE SMOKE (SOP-WS)

**Wildfire Smoke Characteristics**

California continues to experience significant and numerous wildfires that produce smoke that can impact areas for miles. Wildfire smoke is somewhat common and can be expected to affect BHRS facilities several times each year on average. Generally, wildfire smoke is unpredictable although it is more likely to start during periods of inclement weather. Wildfire smoke may affect only a single facility, part of a facility, or be extensive, region-wide events affecting multiple BHRS facilities.

Impacts to Operations

Wildfire smoke can be lingering and lasting with minimal disruption to operations and mostly impacting field-based teams. Wildfire smoke can last for days, or even weeks long events. The expected impact of business operations can vary widely depending on the scope and duration of the event. Other factors including weather conditions, time of day, and time of year may also be factors affecting the range of response options.

Decision-Making

Flexibility based on operational and client needs is a critical component of this guidance. Deputy Directors and Managers will make decisions depending on the circumstance and on input from onsite staff.

The primary management considerations for wildfire smoke are:

1. Life safety and health of staff, visitors, and clients
2. Protection of property
3. Continuity of operations

INITIAL ACTIONS

- Wildfire smoke occurs. The chain of command must be informed immediately.
- Staff will report the incident to their manager or supervisor.
- Managers and supervisors should report incident to their Deputy Director.
- Deputy Directors shall inform the Executive Team.
- Site Leader for each affected facility is established.
- Facilities with multiple programs will establish a Site Leader that will report to all involved Managers at the site.

SITE SAFETY COMMITTEE

- The Site Safety Committee will ensure each site will appropriate supplies such as masks and respirators.
- The Site Safety Committee will encourage staff to be fit tested annually and assist staff that are not fit tested with voluntary respirator use.



- The Site Safety Committee will coordinate and conduct regularly scheduled committee meetings.

LEVEL 1: LIMITED WILDFIRE SMOKE

<i>Applicable when wildfire smoke lasts less than a day or two or fewer BHRS sites affected.</i>	
Managers	<ul style="list-style-type: none"> • Follow the established wildfire smoke procedures in the Wildfire Smoke Protection Plan. • Work with appropriate parties to gather information about scope and extent of the smoke and associated impacts. • Take appropriate actions to ensure ongoing services. • Determine status of HVAC fresh air mix to limit entry of smoke into the system. • Communicate information regarding incident as necessary.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Identify and address needs of field-based staff. • Address any immediate threats to safety or security. • Report issues of concern. • Notify Manager(s). • In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness.

LEVEL 2: EXTENDED WILDFIRE SMOKE

<i>Applicable when wildfire smoke lasts a couple of days and two or fewer BHRS sites affected.</i>	
<i>Level 1 actions + additional actions to be considered:</i>	
Managers	<ul style="list-style-type: none"> • Take appropriate actions to monitor HVAC systems. • Communicate information/status as appropriate.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Address any immediate threats to safety or security. • Report issues of concern. • Notify Manager(s). • In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness.



	<ul style="list-style-type: none"> • Affected Deputy Directors may consider relocating staff. • Affected Deputy Directors may consider releasing staff.
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LEVEL 3: DEPARTMENT OPERATIONS CENTER (DOC) ACTIVATION

<i>Applicable when wildfire smoke lasts a week or more and/or impact more than two BHRS sites.</i>	
Level 1 and Level 2 actions + additional actions to be considered:	
Managers	<ul style="list-style-type: none"> • Notify BHRS Director or their designee if DOC activation is expected.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Address any immediate threats to safety or security. • Report issues of concern. • Notify Manager(s). • In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness. • Provide input to DOC Team as necessary.
DOC Team	<ul style="list-style-type: none"> • Review situation and assess for appropriate response. • Determine agency priorities. • Recommend appropriate actions.

CONSIDERATIONS FOR WILDFIRE SMOKE

- What building systems are working or impacted?
- Is the status of the fresh air mix for the HVAC units known?
- What needs to be communicated?

CONSIDERATIONS FOR RELOCATING STAFF TO ANOTHER SPACE/SITE OR RELEASING STAFF TO GO HOME

- Anticipated duration of smoke
- Applicability of the use of respirators? Number of staff able to use respirators?
- Business impacts vs. business/compliance requirements
- Potential impacts to other BHRS work units
- Is telework a possibility? For whom?
- Equity-related issues
- Outdoor temperatures, HVAC? Building temperatures? OSHA recommends that businesses maintain an operating temperature between 68- and 76-degrees F. (Temperatures above 85F may



require special accommodations).

- Can the work be done at an alternate site? Costs and time to relocate vs. anticipated duration.
- Time of day/Indoor lighting conditions
- Human Resources, Payroll Policies, Employee Relations, Labor MOUs
- If decision is made to relocate or release staff, who should be informed? Are all entrances posted with signage indicating the facility is closed with a phone number for emergencies?

Policy 24-03: Emergency Procedures at BHRS Facilities Attachment 5

STANDARD OPERATING PROCEDURE: LOSS OF HEATING OR COOLING/HEATWAVE OR FREEZE (SOP-HW)

Loss of Heating/Cooling/Heatwave/Freeze Characteristics

BHRS facilities can experience loss of HVAC systems that directly impact the heating and cooling of the workplace. In recent years, extreme temperatures have been experienced that impact the ability of staff to conduct their work. Less likely, infrequent occurrences of freezes could impact workplaces. These events have a tendency to be short in duration, but can impact multiple facilities.

Impacts to Operations

HVAC system failures impact just portions of a facility and are limited in their work interruption. Heat waves can impact all facilities at once, can tax HVAC systems causing them to underperform, and are often associated with power outages. Heatwaves and freezes cause similar impacts with the latter likely to cause damage to properties and facilities. Heatwaves and freezes have a tendency to last from a day to as much as a week and several events can occur back to back. The expected impact of business operations can vary widely depending on the scope and duration of the event. Other factors including weather conditions, time of day, and time of year may also be factors affecting the range of response options.

Decision-Making

Flexibility based on operational and client needs is a critical component of this guidance. Deputy Directors and Managers make decisions depending on the circumstance and input from onsite staff.

The primary management considerations for loss of heating or cooling/heatwave or freeze are:

1. Life safety and health of staff, visitors, and clients
2. Protection of property
3. Continuity of operations



INITIAL ACTIONS

- HVAC failure, heatwave, or freeze is forecasted or occurs. The chain of command must be informed immediately.
- Staff will report the incident to their manager or supervisor.
- Managers and supervisors should report the incident to their Deputy Director.
- Deputy Directors shall inform the Executive Team.
- Site Leader for each affected facility is established.
- Facilities with multiple programs will establish a Site Leader that will report to all involved Managers at the site.

SITE SAFETY COMMITTEE

- The Site Safety Committee will ensure each site will appropriate supplies such as fans and water.
- The Site Safety Committee will coordinate and conduct regularly scheduled committee meetings.

LEVEL 1: HVAC SYSTEM FAILURE

<i>Applicable when incident lasts less than a day or two or fewer BHRS sites affected.</i>	
Managers	<ul style="list-style-type: none"> • Contact the Deputy Director for Administration and Finance and the Management Analyst for Facilities. • Work with appropriate parties to gather information about scope and extent of associated impacts. • Take appropriate actions to ensure ongoing services. • Determine status of HVAC system and remain in contact with DPW or property manager. • Communicate information regarding incident as necessary.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Identify and address needs of field-based staff. • Address any immediate threats to safety or security. • Report issues of concern. • Notify Manager(s). • In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness.

LEVEL 2: HEAT WAVE OR FREEZE



<i>Applicable when incident lasts a couple of days and two or fewer BHRS sites affected.</i>	
Level 1 actions + additional actions to be considered:	
Managers	<ul style="list-style-type: none"> Take appropriate actions to monitor HVAC systems and weather forecasts. Monitor staff reporting to work or reporting not coming to work. Communicate information/status as appropriate. Follow BHRS Policy 10-03: Managing Client risk on High Temperature Days. Utilize available resources found here.
Site Leader	<ul style="list-style-type: none"> Evaluate safety and security conditions at affected site. Address any immediate threats to safety or security. Report issues of concern. Notify Manager(s). In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> Maintain situational awareness. Affected Deputy Directors may consider relocating staff. Affected Deputy Directors may consider releasing staff.

LEVEL 3: DEPARTMENT OPERATIONS CENTER (DOC) ACTIVATION

<i>Applicable when incident lasts a week or more and/or impact more than two BHRS sites.</i>	
Level 1 and Level 2 actions + additional actions to be considered:	
Managers	<ul style="list-style-type: none"> Notify BHRS Director or their designee if DOC activation is expected.
Site Leader	<ul style="list-style-type: none"> Evaluate safety and security conditions at affected site. Address any immediate threats to safety or security. Report issues of concern. Notify Manager(s). In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> Maintain situational awareness. Provide input to DOC Team as necessary.
DOC Team	<ul style="list-style-type: none"> Review situation and assess for appropriate response. Determine agency priorities. Recommend appropriate actions.

CONSIDERATIONS FOR HVAC OPERATIONS



- What building systems are working or impacted?
- Is the status of the HVAC units known?
- Does the HVAC situation impact medications stored in the Medication Room?
- What needs to be communicated?

CONSIDERATIONS FOR RELOCATING STAFF TO ANOTHER SPACE/SITE OR RELEASING STAFF TO GO HOME

- Anticipated duration of incident?
- Business impacts vs. business/compliance requirements.
- Potential impacts to other BHRS work units.
- Is telework a possibility? For whom?
- Equity-related issues.
- Outdoor temperatures, HVAC? Building temperatures? OSHA recommends that businesses maintain an operating temperature between 68- and 76-degrees F. (Temperatures above 85F may require special accommodations).
- Can the work be done at an alternate site? Costs and time to relocate vs. anticipated duration.
- Time of day.
- Human Resources, Payroll Policies, Employee Relations, Labor MOUs.
- If decision is made to relocate or release staff, who should be informed? Are all entrances posted with signage indicating the facility is closed with a phone number for emergencies?

Policy 24-03: Emergency Procedures at BHRS Facilities Attachment 6

STANDARD OPERATING PROCEDURE: EXCESSIVE NOISE, NOXIOUS ODORS OR FUMES, AND CONSTRUCTION (SOP-NOX)

**Excessive Noise, Noxious Odors or Fumes, and Construction Characteristics**

BHRS facilities can be exposed to excessive noise, noxious odors or fumes, and other impacts often caused by nearby construction or repair work that is usually temporary in nature. This includes construction noise or noise related to installing a new roof, for example. Installing a new roof also results in fumes from tars and adhesives that can significantly impact the workplace. These impacts often cause concern for staff because of the disruption and the concern for health and safety. Often, these issues should be known in advance through planning by the Facilities Division of DPW, but often the people most impacted can be missed in communications. These events have a tendency to be short in duration and only impact a single facility.

Impacts to Operations

Excessive noise, noxious odors or fumes, and other impacts often caused by nearby construction or repair work can be very disruptive to the workplace and often result in the relocation of business operations. Even though these events can be short in duration, depending on the activity, they can have impacts for a week or more depending on the size of the project and the progress made on the work. Noxious fumes and odors from a new roof project for example can cause physical reactions among staff present at the site and can lead to further discomfort, especially for those with sensitivity to such exposure. Staff concerns are to be taken seriously and immediate action should be taken to further prevent the presence of fumes and odors in the facility and plans to relocate should be considered early in the incident. The expected impact of business operations can vary widely depending on the scope and duration of the event. Other factors including weather conditions, time of day, and time of year may also be factors affecting the range of response options.

Decision-Making

Flexibility based on operational and client needs is a critical component of this guidance. Deputy Directors and Managers will make decisions depending on the circumstance and on input from onsite staff.

The primary management considerations for excessive noise, noxious odors or fumes, and construction are:

1. Life safety and health of staff, visitors, and clients
2. Protection of property
3. Continuity of operations

INITIAL ACTIONS

- An event occurs. The chain of command must be informed immediately.
- Staff will report the incident to their manager or supervisor.
- Managers and supervisors should report the incident to their Deputy Director.
- Deputy Directors shall inform the Executive Team.



- Site Leader for each affected facility is established.
- Facilities with multiple programs will establish a Site Leader that will report to all involved Managers at the site.
- Action should be taken to stop further encroachment of odors and fumes by closing windows and shutting down HVAC systems until the fresh air damper can be closed.
- Some events involving fumes and odors may require staff to be evacuated outside the building away from the source and pay attention to wind direction so as not to be caught downwind from the source.

LEVEL 1: EXCESSIVE NOISE

<i>Applicable when incident lasts less than a day or two or fewer BHRS sites affected.</i>	
Managers	<ul style="list-style-type: none"> • Contact the Deputy Director for Administration and Finance and the Management Analyst for Facilities. • Work with appropriate parties to gather information about scope and extent of associated impacts. • Take appropriate actions to ensure ongoing services. • Communicate information regarding incident as necessary.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Address any immediate threats to safety or security. • Report issues of concern. • Notify Manager(s). • In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness.

LEVEL 2: NOXIOUS ODORS OR FUMES AND/OR EXCESSIVE NOISE

<i>Applicable when incident lasts a couple of days and two or fewer BHRS sites affected.</i>	
	<i>Level 1 actions + additional actions to be considered:</i>
Managers	<ul style="list-style-type: none"> • Take appropriate actions to monitor HVAC systems to assure that odors or fumes do not continue to enter the workspace. • Monitor the need to evacuate and/or relocate staff. • Communicate information/status as appropriate.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Address any immediate threats to safety or security. • Report issues of concern.



	<ul style="list-style-type: none"> • Notify Manager(s). • In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness. • Affected Deputy Directors may consider relocating staff. • Affected Deputy Directors may consider releasing staff.

LEVEL 3: DEPARTMENT OPERATIONS CENTER (DOC) ACTIVATION

<i>Applicable when incident lasts a week or more and/or impact more than two BHRS sites.</i>	
	Level 1 and Level 2 actions + additional actions to be considered:
Managers	<ul style="list-style-type: none"> • Notify BHRS Director or their designee if DOC activation is expected.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Address any immediate threats to safety or security. • Report issues of concern. • Notify Manager(s). • In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness. • Provide input to DOC Team as necessary.
DOC Team	<ul style="list-style-type: none"> • Review situation and assess for appropriate response. • Determine agency priorities. • Recommend appropriate actions.

CONSIDERATIONS FOR NOXIOUS ODORS OR FUMES AND/OR EXCESSIVE NOISE

- What building systems are working or impacted?
- Is the status of the HVAC units known?
- What needs to be communicated?

CONSIDERATIONS FOR RELOCATING STAFF TO ANOTHER SPACE/SITE OR RELEASING STAFF TO GO HOME

- Anticipated duration of incident?
- Business impacts vs. business/compliance requirements
- Potential impacts to other BHRS work units
- Is telework a possibility? For whom?



- Equity-related issues
- Outdoor temperatures, HVAC? Building temperatures? OSHA recommends that businesses maintain an operating temperature between 68- and 76-degrees F. (Temperatures above 85F may require special accommodations).
- Can the work be done at an alternate site? Costs and time to relocate vs. anticipated duration.
- Time of day
- Human Resources, Payroll Policies, Employee Relations, Labor MOUs
- If decision is made to relocate or release staff, who should be informed? Are all entrances posted with signage indicating the facility is closed with a phone number for emergencies?
 Policy 24-03: Emergency Procedures at BHRS Facilities Attachment 7

STANDARD OPERATING PROCEDURE: WATER SUPPLY (SOP-H2O)

Water Supply Characteristics

The loss of water supply or a water supply that becomes contaminated can have significant and lasting impacts on a BHRS facility. Generally, interruptions to the water supply are unpredictable although they are more likely to occur during construction and road improvement activities or following an earthquake. Water supply interruptions may affect only a single facility, part of a facility, or be extensive, region-wide events affecting multiple BHRS facilities.

Impacts to Operations

Water supply interruptions have a tendency to not be brief, especially if the interruption is related to water contamination as the process to determine the source of the contamination can take significant periods of time. Occasionally, water supply interruptions may extend for days, weeks, or even months long events. The expected impact of business operations can vary widely depending on the scope and duration of the event. Response options are limited, require time, and significant equipment and personnel commitments that further make response times slow.

Decision-Making

Flexibility based on operational and client needs is a critical component of this guidance. Deputy Directors and Managers will make decisions depending on the circumstance and on input from onsite staff.

The primary management considerations for loss of water are:

1. Life safety and health of staff, visitors, and clients
2. Protection of property
3. Continuity of operations

INITIAL ACTIONS



- Water supply interruption occurs. The chain of command must be informed immediately.
- Staff will report the interruption to their manager or supervisor.
- Managers and supervisors should report interruption to their Deputy Director.
- Deputy Directors shall inform the Executive Team.
- Site Leader for each affected facility is established.
- Facilities with multiple programs will establish a Site Leader that will report to all involved Managers at the site.

SITE SAFETY COMMITTEE

- The Site Safety Committee will ensure each site will appropriate supplies such as bottled water or alternate water supply.
- The Site Safety Committee will coordinate and conduct regularly scheduled committee meetings.

LEVEL 1: LIMITED INTERRUPTION

<i>Applicable when interruption anticipated is less than a day or two or fewer BHRS sites affected.</i>	
Managers	<ul style="list-style-type: none"> • Contact the Deputy Director of Administration and Finance and the Management Analyst for Facilities. • Work with appropriate parties to gather information about scope and extent of the problem. • Take appropriate actions to ensure timely restoration of services. • Communicate information regarding incident as necessary.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Address any immediate threats to safety or security. • Report issues of concern. • Notify Manager(s). • In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness.

LEVEL 2: EXTENDED INTERRUPTION

Applicable when interruption anticipated is more than a day in duration and two or fewer BHRS sites affected.



	<i>Level 1 actions + additional actions to be considered:</i>
Managers	<ul style="list-style-type: none"> Identify and provide alternate water sources for the staff and clients. Communicate information/status as appropriate.
Site Leader	<ul style="list-style-type: none"> Evaluate safety and security conditions at affected site. Address any immediate threats to safety or security. Report issues of concern. Notify Manager(s). In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> Maintain situational awareness. Affected Deputy Directors may consider relocating staff. Affected Deputy Directors may consider releasing staff.

LEVEL 3: LENGTHY INTERRUPTION

<i>Applicable when interruption is expected to last more than a couple of days and/or impact more than two BHRS sites.</i>	
	<i>Level 1 and Level 2 actions + additional actions to be considered:</i>
Managers	<ul style="list-style-type: none"> Notify BHRS Director or their designee of extended event. Identify permanent alternative water supplies for staff and clients. Work with DPW or Property Management to assure timely and effective response to return the water supply to normal.
Site Leader	<ul style="list-style-type: none"> Evaluate safety and security conditions at affected site. Address any immediate threats to safety or security. Report issues of concern. Notify Manager(s). In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> Maintain situational awareness. Review situation and assess for appropriate response. Determine agency priorities. Recommend appropriate actions.



CONSIDERATIONS FOR RELOCATING STAFF TO ANOTHER SPACE/SITE OR RELEASING STAFF TO GO HOME

- Anticipated duration of interruption
- Business impacts vs. business/compliance requirements
- Potential impacts to other BHRS work units
- Is telework a possibility? For whom?
- Equity-related issues
- Is an alternate water supply available? For how long? Does it meet the needs of the facility?
- Is plumbing functional?
- Can the work be done at an alternate site? Costs and time to relocate vs. anticipated interruption duration
- Impacts to staff safety and morale
- Human Resources, Payroll Policies, Employee Relations, Labor MOUs
- If decision is made to relocate or release staff, who should be informed? Are all entrances posted with signage indicating the facility is closed with a phone number for emergencies?

Policy 24-03: Emergency Procedures at BHRS Facilities Attachment 8

STANDARD OPERATING PROCEDURE: STAFFING SHORTAGE (SOP-SS)

Staffing Shortage Characteristics

Staffing shortages are somewhat rare, but do have significant operational impacts when they do occur. Staffing shortages can be anticipated and planned for in advance. Although rare historically, in recent years there have been an increase in strikes that can impact business continuity. Staffing shortages may impact a single BHRS facility, but often are more likely to impact all or most BHRS facilities at the same time.

Impacts to Operations

Staffing shortages are more commonly short duration events, although organized strikes can last for multiple days, as can widespread illnesses or infections. It is rare that such disruptions would last for more than a week, but strikes can happen multiple times or major illness can last for significant periods. The expected impact of business operations can vary widely depending on the scope and duration of the event. Response options are limited and will



most likely require remaining staff to conduct overtime and result in management covering staffing needs themselves.

Decision-Making

Flexibility based on operational and client needs is a critical component of this guidance. Deputy Directors and Managers will make decisions depending the circumstance and on input from onsite staff.

The primary management considerations during a staffing shortage are:

1. Life safety and health of staff, visitors, and clients
2. Protection of property
3. Continuity of operations

INITIAL ACTIONS

- Staffing shortage occurs. The chain of command must be informed immediately.
- Staff will report the shortage to their manager or supervisor.
- Managers and supervisors should report shortage to their Deputy Director.
- Deputy Directors shall inform the Executive Team.
- Site Leader for each affected facility is established.
- Facilities with multiple programs will establish a Site Leader that will report to all involved Managers at the site.

LEVEL 1: LIMITED SHORTAGE

<i>Applicable when shortage is anticipated is less than a day or two or fewer BHRS sites affected.</i>	
Managers	<ul style="list-style-type: none"> • Work with appropriate parties to gather information about scope and extent of the problem.



	<ul style="list-style-type: none"> • Take appropriate actions to ensure timely restoration of services. • Communicate information regarding incident as necessary. • Maintain staffing rosters of available staff and communicate regularly to these staff of additional time that may be required of them. • Manage personnel supply for facilities experiencing shortages, work with other managers to determine additional staffing that can be pulled to help where the shortage has occurred.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Address any immediate threats to safety or security. • Report issues of concern. • Notify Manager(s). • In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness.

LEVEL 2: EXTENDED SHORTAGE

<i>Applicable when shortage anticipated is more than a couple of days duration and two or fewer BHRS sites affected.</i>	
	Level 1 actions + additional actions to be considered:
Managers	<ul style="list-style-type: none"> • Take appropriate actions to monitor and maintain personnel supply and options by working with other managers to determine staff that can be pulled to cover the impacted facility. • Communicate information/status as appropriate.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Address any immediate threats to safety or security. • Report issues of concern. • Notify Manager(s). • In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness. • Work with other County departments to develop organized response.



LEVEL 3: DEPARTMENT OPERATIONS CENTER (DOC) ACTIVATION

<i>Applicable when shortage is expected to last more than a couple of business days and/or impact more than two BHRS sites.</i>	
Level 1 and Level 2 actions + additional actions to be considered:	
Managers	<ul style="list-style-type: none"> • Notify BHRS Director or their designee if DOC activation is expected.
Site Leader	<ul style="list-style-type: none"> • Evaluate safety and security conditions at affected site. • Address any immediate threats to safety or security. • Report issues of concern. • Notify Manager(s). • In facilities with medication rooms, nursing and medical staff should coordinate with pharmacy staff and medical leadership about medications stored in the room, and arrange for transportation of those items to another location if needed.
Executive Team	<ul style="list-style-type: none"> • Maintain situational awareness. • Provide input to the DOC Team as necessary.
DOC Team	<ul style="list-style-type: none"> • Review situation and assess for appropriate response. • Determine agency priorities. • Recommend appropriate actions.

CONSIDERATIONS FOR CLOSING A SITE

- County Executive Office and Risk Management must be involved.
- Anticipated duration of the shortage.
- Business impacts vs. business/compliance requirements
- Potential impacts to other BHRS work units
- Is telework a possibility? For whom?
- Equity-related issues
- Can the work be done at an alternate site? Costs and time to relocate vs. anticipated outage duration
- Human Resources, Payroll Policies, Employee Relations, Labor MOUs
- If decision is made to close a site, who should be informed? Are all entrances posted with signage indicating the facility is closed with a phone number for emergencies