

**FACILITY MANAGEMENT PLAN**



**2017 – 2018**

Date of Publication: August 1, 2017

<b>DATE</b>	<b>Volume</b>	<b>CHANGE</b>	<b>OWNER</b>
March 2014	1.0	Initial Document	Liz Williams
April 2015	2.0	Change name of school. Updated completed improvements and plans for 2015-2016.	Liz Williams
September 2016	3	Change publication to roll out with all academic year publications. Updated logo. Changed EMT-B to EMS to reflect the addition of paramedic.	Liz Williams
September 2017	2017-2018	Changed volume to academic year. Add Appendix G and Appendix H – including references in document	Mike Caldaro

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# The Coral Springs Regional Institute of Public Safety

## **Facility Management Team**

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## **Campus Planning and Facility Management**

Campus Planning & Facility Management is dedicated to providing services for creation of facilities and infrastructure that meet the Coral Springs Regional Institute of Public Safety's (CSRIPS) evolving needs at a competitive level with our comparable institutions. Our aim is to be an asset to recruit and retain quality students, faculty, and staff.

Improvement planning for the facility falls under two directions; emergency and planned. All emergency purchases for CSRIPS fall under the standard operating procedure (SOP) guidelines. Emergency purchases are those that are not part of the capital improvement plan but must be completed. Please see Appendix C SOP CSRIPS-23 Purchasing Procedures for emergency purchasing procedures. All planned purchases are listed in the City of Coral Springs Capital Improvement Program Budget under Fire Fund. Such items include but not limited to computer replacement, upgrades to Wi-Fi, overhead projector and screen replacements.

Maintenance for the facility is also broken down in to sections. Students operate under standard operating procedure CSRIPS-06 Facility Maintenance (Appendix A) which is an outline for maintenance of the facility and training equipment.

The protection of the health and safety of students, faculty, administrative staff, and visitors are conducted annually by the Coral Springs Fire Department Division of Community Risk Reduction (CRR). This inspection ensures that all requirements for this building are operational and the facility is code compliant.

In addition to the annual inspection by CRR a private contractor is utilized for the inspection and maintenance for the elevator. Other maintenance and needs are coordinated throughout the year with the City of Coral Springs Facilities & Utility Division.

## Facility Improvements

Currently, CSRIPS has contracts with approved vendors for service for the following entities: electric, air conditioning and fleet services through the City of Coral Springs Fleet Services. The facility falls under the general facilities maintenance and repair for the City of Coral Springs. There are line items within the budget for repair to general building items, office furniture and equipment. The budget also allocates funding to handle issues with fire apparatus, radio communications and all information technology issues are handled by the information technology department with the City of Coral Springs.

Technology used by the students is evaluated on a constant basis both by student provided input from their course evaluations and from instructor input. The Chief of Training in coordination with the City of Coral Springs I.T. department are responsible to review and manage the hardware i.e. Computers, printers and programs utilized. In addition the internet and Wi-Fi are maintained and serviced through regularly scheduled updates weekly, monthly and quarterly.

Maintenance and future purchases are all included in the City of Coral Springs Capital Improvement Program Budget. This document is created and maintained by the City of Coral Springs Finance and Budget Department with input and direction from the Chief of Training. All improvements for CSRIPS that are planned and scheduled fall under the Fire Fund section of the Capital Improvement Program Budget.

2016-2017, future repair/projects for CSRIPS include:

- Updates to A/V equipment in all the classrooms (done)
- Replace all desktops per City of Coral Springs IT Department (done)
- Move and update rehab facility (postponed due to future renovation)
- Complete Structure Burn prop updates (done)
- Complete Student Services Room (done)
- Engine maintenance scheduled monthly for all apparatus (done)
- Updates to A/V equipment in all the classrooms (done)

2017-2018, future repair/projects for CSRIPS include:

- Replace/Update EMS & Fire learning materials as necessary (continuous)
- Due to the acquisition and renovation of 4150 NW 120<sup>th</sup> Avenue, major changes have been put on hold. Repairs will be addressed as needed and any renovations will be addressed with the facility expansion planning.

2018-2019, restructure and renovation of the building and campus ground with the addition of 4150 NW 120<sup>th</sup> Avenue

## **The Facility**

### **Classrooms**

The Coral Springs Regional Institute of Public Safety has a total of 7 classrooms with multiple set-ups. There are classrooms that are specifically set up for EMS and also for Firefighter I & II. Each class that is in session is assigned to a specific room for the duration of that class.

### **Program Classrooms**

EMS and Firefighter I & II have specific classrooms in the facility. These rooms are designed and set up specifically for the program. For example, the EMS classrooms have trauma rooms located adjacent to the classroom. These trauma rooms are set up with equipment that would mimic that found in a trauma room set up in a hospital. Trauma room and Airway Medical Room inventory sheets are listed in Appendix D and E respectively. In addition, each classroom is equipped with televisions, projectors, WI FI capability and other necessary educational props to conduct the training.

### **Fire Grounds**

The Coral Springs Regional Institute of Public Safety has 4 acres of usable training ground which is utilized to facilitate the Firefighter I & II program along with in-service training for the Coral Springs Fire Department and other local agencies. The ground boast a multi-story multi-functional tower, a survival house, and 3000 sq. ft. Class “A” 2 story live fire burn prop. The grounds maintain all required equipment and props designated by the State of Florida which include the extrication, vehicle fire area and gas field. Our fleet is comprised of three (3) engines and one (1) aerial which all classes have access to utilize to benefit their education.

Please see Appendix F for an example. EMS classes use the grounds to enhance their skills utilizing the confined space and structural collapse props. The access to these real props allow the student to practice as they would in the real world.

### **General Use Classrooms**

Currently the Coral Springs Regional Institute of Public Safety does not necessarily have general use classrooms. When the need arises to host continuing education classes, these classes will be held in the EMS or Firefighter I & II classrooms on scheduled ‘off’ days or days that classes may be solely taking place on the outside fire grounds.



## **Staff Offices**

Currently there are two locations for the staff offices. The first floor houses the lobby and also the reception office. There is a single reception desk equipped with the main line phone numbers, computer, and network printer.

The second floor hosts additional administrative offices for the Operations Manager and all of the admissions/class manager personnel. The administrative desks all supplied with phones connected to the main line, computers, and two shared printers (one of them high speed with color).

The second floor also is occupied by the Chief of Training, the Assistant Chief of Training, Accreditation Coordinator, and the Administrative Lead. Each of these offices is supplied with phone lines, computers, and access to printers.

## **Break room**

At the facility, we have two break rooms. The student break room is located on the first floor of the facility and is supplied with an adequate number of tables and chairs that can be configured in multiple set ups depending on what the break room may be used for at the time. The break room can be used for breakfast, lunch, or dinner as well as study groups, meetings, and graduations. This break room is supplied with two full sized refrigerators, microwaves, vending machines, and full sink.

The staff break room is located on the second floor. The staff has access to a full size refrigerator, microwave, toaster oven, 5 gallon water bottle dispenser, full sink with hot water, and television.

Each break room is cleaned daily by the students under the guidance of the instructors as well as the maintenance person who ensure all health and safety issues are complied with.

### **Locker rooms**

On the first floor of Coral Springs Regional Institute of Public Safety, there are designated locker rooms available for use by the students. Each locker room has an abundant amount of lockers that can be used with a lock, private toilet area, sinks, and private showers with hot water. The locker rooms are under constant review and scrutiny from the staff for cleanliness. The locker rooms are also checked regularly for replacement of the shower curtains to maintain a hygienic environment.

### **Staff restrooms**

Staff restrooms are located on the second floor of the facility. The restrooms are not to be used by the students. Each restroom is clearly marked: **FOR STAFF ONLY**. The restrooms are cleaned daily by the students and/or the maintenance person to ensure no issues need attention.

### **Daily Facility Maintenance**

Classrooms, labs, offices, restrooms, locker rooms, break rooms, and meeting rooms are available at our facility. They are maintained by our maintenance person and our students under the guidance of the instructors. Each student, instructor and staff is aware of the facility's operational rules, maintenance policies, safety procedures, as well as health hazards that may present.

The common core values that the students adhere to for the duration of the class follow them throughout their career in the fire department.

### **Security**

The Coral Springs Regional Institute of Public Safety facility is currently under a badge access security system. All employees, students, and visitors are required to hold and carry badges. Employees have access to all classrooms and most other rooms in the facility. The only rooms that are not available are that which is operated by Fire Admin and the IT server room. Students have access to the classrooms only during their specific class times. During 'off' hours, their badges will not grant them access to the building. Visitors must check in at the reception desk on the first floor. Each visitor is required to sign in and acquire a badge. All visitors will be escorted by an employee to their work location in the building.

The outside fire grounds are also on the access badge security system. The only individuals that have access to the fire grounds through the locked gates are the instructors, administrative staff, and the students (only during their specific class times – 30 minutes before and 30 minutes after).

Student records, both application and academic, are hosted on 3<sup>rd</sup> party vendor servers. The student records are hosted by Orbund, the Firefighter I & II academic records are hosted by ResourceOne and the EMT-Basic and EMT-Paramedic records are hosted by MyBRADYLab. These companies have a daily back up schedule and retrieval process should there be a system error. All of these systems are hosted on a secure site and require a username and password to access records.

### **Parking**


The Coral Springs Regional Institute of Public Safety parking lot is adjacent to the structure. The designated area can be used for up to 70 vehicles which comply with the standard code enforcement regulations. An overflow area is located right across the street if necessary. All parking areas are well lit and cameras are installed to ensure personnel safety.

### **Injuries and Safety**

The Coral Springs Regional Institute of Public Safety maintains a clean, healthy and safe environment for all personnel who step foot on our property. Between the lawn maintenance service and the facility maintenance, we strive to keep clean working conditions. However even after all precautions are taken, accidents can and will happen. In the event that a person is injured while on the property, the person who is notified first of the accident will need to report it to an Instructor/staff member, the information will be sent to the Assistant Training Chief through the Injury Report form in the Orbund system. You can find the details in Appendix B SOP CSRIPS-09 Safety. Additional notification must be made to the Lead instructor and Chief of Training via phone by call or text.

For actions that involve Fire, Severe Weather, Haz-Mat, Active Killer, Armed/Violent/Security Threat, and Bomb Threats, you can find details in Appendix G CSRIPS-38 Academy Emergency Procedures. For incidents involving communicable disease exposure, details can be found in Appendix H CSRIPS-29 Infection Control Program.

**Appendix A – SOP CSRIPS-06 Facility Maintenance**

	<h1>Standard Operating Procedure</h1>		
	<b>NUMBER:</b> CSRIPS - 06	<b>EFFECTIVE DATE:</b> June 1, 2005	<b>REVISED DATE:</b> 10-30-2017
	<b>SUBJECT:</b> Facility Maintenance		
	<b>APPROVED BY:</b>	<b>Frank Babinec, Fire Chief</b>	

**PURPOSE**

To establish procedures to oversee and maintain the operational readiness of the Coral Springs Regional Institute of Public Safety (CSRIPS), upholding our “Commitment to Excellence”.

**SCOPE**

This Standard Operating Procedure (SOP) shall apply to all staff employed at the CSRIPS. Students shall follow the scheduled assignments posted on the daily cleaning assignments or be given different tasks from staff.

**FACILITY PROCEDURES**

Every instructor will ensure and address the following areas

1. Building –Inspected Daily
  - Classroom(s) including Breakout rooms
    - a. Equipment – accounted for and put away appropriately
    - b. Floors
    - c. Tables/ chairs
    - d. Dry erase board
    - e. Walls
    - f. Trash cans
    - g. Microwaves
  
2. Bay Area - Inspected Daily
  - a. Floors
  - b. Coolers
  - c. Lockers
  - d. Garbage cans

3. Bathrooms-Men's/Women's - Inspected Daily
  - a. Floors
  - b. Toilets
  - c. Sinks
  - d. Paper supplies
  - e. Shower
  
4. Tower – Inspected Daily
  - Ground Floor
    - All floors
    - All windows and doors (shall be locked at the end of class)
    - Tools and equipment
    - Props stored inside the Tower
    - Storage Under Stairwell
      - a) Gas cans
      - b) Extinguishers
      - c) Cones
      - d) Hose rolls for triple
  
5. SCBA Room
  - Air packs – Topped Off daily
    - a. Pass devices – Checked before & After use
  - Instructor packs
  - Bottle rack – Filled after each use
  - Cascade system topped off after each class session
  - Compressor
  - 10-7 bucket
  - Red tags
  
6. Storage room – Inspected when utilized
  - Appliances
  - Nozzles
  - Hose
  - Other associated equipment used for fire ground training
  
7. Kitchen – Inspected Daily
  - Refrigerators
  - Microwave
  - Toasters
  - Tables and Chairs
  - Floors (cleaned and mopped)
  - Garbage and recycle cans
  - Sinks

8. Instructors Office

Maintain organization and inventory of:


- Desk, drawers, supplies, stopwatches, forms
- Books
- Radios/batteries/straps
- Thermal Imagers and batteries
- Copy machine-paper, toner, staples
- Trash cans
- Flashlights

9. Facility Grounds – Cleaned Daily

- Front, side, rear
- LP Gas tanks
- Flashover burn prop
- Structure burn prop
- Car Fire burn prop
- Extrication area

**Please Note: If any item is broke, misplaced or missing, item(s) should be correctly documented and documented in Orbund with a follow-up email sent to the lead instructors, Battalion Chief of training for repair or replacement.**

**Appendix B – SOP CSRIPS-09 Safety**

	<b>Standard Operating Procedure</b>		
	<b>NUMBER:</b> CSRIPS-09	<b>EFFECTIVE DATE:</b> June 1, 2005	<b>REVISED DATE:</b> February 7, 2015
	<b>SUBJECT:</b> Safety		
	<b>APPROVED BY:</b>	<b>Frank Babinec, Fire Chief</b>	

**PURPOSE**

To establish safety procedures for the use at the Coral Springs Regional Institute of Public Safety (CSRIPS), upholding our “Commitment to Excellence”.

**SCOPE**

This Standard Operating Procedure (SOP) shall apply to all instructors of the Coral Springs Regional Institute of Public Safety

**PROCEDURE**

- I. SAFETY:** All efforts shall be directed to making all training as safe as possible. **SAFETY IS THE RESPONSIBILITY OF ALL INSTRUCTORS.**
  - A. While students are practicing skills that have a potential for injury, an instructor shall be immediately present to ensure safety.
  - B. When in a vehicle in motion, all personnel shall:
    - 1. Wear personal protective equipment.
    - 2. Ride only in designated seats with seat belts on and secure.
  - C. Horseplay will not be tolerated.
    - 1. This includes the misuse of hose lines on the drill ground.
    - 2. Observed horseplay will subject participants to discipline counseling or dismissal.
  - D. During field exercises, each person shall be dressed properly to meet the level of protection for the activities being performed. This includes, but is not limited to:


1. Head protection while working near overhead obstructions or outside above grade (i.e. roof of tower, or working from upper windows)

## **II. Reporting Accidents/Injuries**

- A. Any and all accidents and/or injuries **shall be reported immediately** to the Chief of Training and the Lead Instructor.
  1. In the case of minor injuries not requiring additional medical attention, notification of the Chief of Training is not necessary.
- B. Any and all injuries shall be noted on the daily report AND a corresponding institute injury report completed.
- C. The Academy's Injury Report shall be completed by the instructor present at the time of incident and reviewed by the Lead Instructor prior to forwarding to the Chief of Training.



**Appendix C – SOP CSRIPS-23 Purchasing Procedures**

	<h1>Standard Operating Procedure</h1>		
	<b>NUMBER:</b> CSRIPS-23	<b>EFFECTIVE DATE:</b> July 01, 2002	<b>REVISED DATE:</b> January 31, 2016
	<b>SUBJECT:</b> Purchasing Procedures		
	<b>APPROVED BY:</b> <span style="float: right; border-bottom: 1px solid black; padding: 0 50px;">                     Frank Babinec, Fire Chief                 </span>		

**PURPOSE**

To outline purchasing procedures, in accordance with the City of Coral Springs Purchasing Procedures.

**SCOPE**

This Standard Operating Procedure (SOP) shall apply to all members of the Coral Springs Regional Institute of Public Safety.

**PROCEDURES**

**I. Authorization for Purchases**

- A. All purchases shall be approved in advance by the Chief of Training or Battalion Chief
- B. Purchases for CSRIPS coincide with the approved budget for the current fiscal year
- C. Purchases can be made to facilitate daily operations, contract requirements (i.e. building maintenance, vehicle maintenance, training supplies).
- D. The Chief of Training and/or his/her designee have full purchasing authority, in accordance with City policy.
- E. Purchases Limit – Purchases can be made based on the predetermined levels the City of Coral Springs has set for city issued credit cards.
  - 1. All purchasing requests shall be forwarded through the chain of command to the Chief of Training or Battalion Chief of Training

2. All invoices or receipts for purchased items shall be immediately forwarded to the CSRIPS Financial Coordinator

F. Purchases exceeding \$2,500 – Authorized purchases that exceed \$2,500 are processed through the Purchasing Agent with a requisition from the Chief of Training.

The Purchasing Agent will conduct a competitive bid processes and issue purchase orders.

**III. Emergency Purchases**

A. During declared emergencies, by the Fire Chief or City of Coral Springs, all Chief Officers will have binding contract authority and special purchase authority for emergency supplies, which will allow them to by-pass the normal purchasing procedures.

**Appendix D – Trauma Room Inventory Sheet**

**Date:** \_\_\_\_\_ **Inventory done by:** \_\_\_\_\_

**Lead Instructor for the day:** \_\_\_\_\_

**Trauma Room 120**

<b><u>Equipment Racks</u></b>	<b><u>Par</u></b>	<b><u>Before</u></b>	<b><u>After</u></b>
Helmet	4	<input type="checkbox"/>	<input type="checkbox"/>
Shoulder Pads	1	<input type="checkbox"/>	<input type="checkbox"/>
Traction Splint	3	<input type="checkbox"/>	<input type="checkbox"/>
KED	3	<input type="checkbox"/>	<input type="checkbox"/>
Pediatric Immobilizer	3	<input type="checkbox"/>	<input type="checkbox"/>
Green Tarp	1	<input type="checkbox"/>	<input type="checkbox"/>
Yellow Tarp	1	<input type="checkbox"/>	<input type="checkbox"/>
Red Tarp	1	<input type="checkbox"/>	<input type="checkbox"/>
Black Tarp	1	<input type="checkbox"/>	<input type="checkbox"/>
Triage Bag	2	<input type="checkbox"/>	<input type="checkbox"/>
MCI Kit	4	<input type="checkbox"/>	<input type="checkbox"/>
Scoop Stretcher	2	<input type="checkbox"/>	<input type="checkbox"/>
Backboard	4	<input type="checkbox"/>	<input type="checkbox"/>
Stretcher	2	<input type="checkbox"/>	<input type="checkbox"/>
Stair Chair	2	<input type="checkbox"/>	<input type="checkbox"/>
Car Seat	2	<input type="checkbox"/>	<input type="checkbox"/>

Date: \_\_\_\_\_ Inventory done by: \_\_\_\_\_

Lead Instructor for the day: \_\_\_\_\_

### Trauma Room 120

<b>Trauma Supplies</b>	<b>Par</b>	<b>Before</b>	<b>After</b>	<b>Trauma Supplies</b>	<b>Par</b>	<b>Before</b>	<b>After</b>
Combo Pads	10	<input type="checkbox"/>	<input type="checkbox"/>	6" Ace Bandages	4	<input type="checkbox"/>	<input type="checkbox"/>
Burn sheets	4	<input type="checkbox"/>	<input type="checkbox"/>	4" Ace Bandages	4	<input type="checkbox"/>	<input type="checkbox"/>
Multi Trauma	4	<input type="checkbox"/>	<input type="checkbox"/>	2" Ace Bandages	4	<input type="checkbox"/>	<input type="checkbox"/>
Yellow Blankets	5	<input type="checkbox"/>	<input type="checkbox"/>	Hydrogen Peroxide	3	<input type="checkbox"/>	<input type="checkbox"/>
Fluid Shields	3	<input type="checkbox"/>	<input type="checkbox"/>	Sodium Chloride (Normal	3	<input type="checkbox"/>	<input type="checkbox"/>
Goggles	6	<input type="checkbox"/>	<input type="checkbox"/>	Alcohol	3	<input type="checkbox"/>	<input type="checkbox"/>
Red Bags	1 roll	<input type="checkbox"/>	<input type="checkbox"/>	Sterile Water	3	<input type="checkbox"/>	<input type="checkbox"/>
Trauma Sleeves	4 pair	<input type="checkbox"/>	<input type="checkbox"/>	Non-Sterile 4x4	2	<input type="checkbox"/>	<input type="checkbox"/>
Patient Restraints	4	<input type="checkbox"/>	<input type="checkbox"/>	Sterile 4x4	3	<input type="checkbox"/>	<input type="checkbox"/>
Kling	6	<input type="checkbox"/>	<input type="checkbox"/>	Adult C-Collars	8	<input type="checkbox"/>	<input type="checkbox"/>
Blood Stopper	4	<input type="checkbox"/>	<input type="checkbox"/>	Pediatric C-Collars	8	<input type="checkbox"/>	<input type="checkbox"/>
Abdominal Pads	10	<input type="checkbox"/>	<input type="checkbox"/>	Backboard Straps	12	<input type="checkbox"/>	<input type="checkbox"/>
Long Arm Boards	6	<input type="checkbox"/>	<input type="checkbox"/>	Head Beds	4	<input type="checkbox"/>	<input type="checkbox"/>
Medium Arm Boards	6	<input type="checkbox"/>	<input type="checkbox"/>	Long Orange Splints	6	<input type="checkbox"/>	<input type="checkbox"/>
Infant Arm Boards	6	<input type="checkbox"/>	<input type="checkbox"/>	Short Orange Splints	6	<input type="checkbox"/>	<input type="checkbox"/>
Alcohol Preps	1 box	<input type="checkbox"/>	<input type="checkbox"/>				
Band-Aids	1 box	<input type="checkbox"/>	<input type="checkbox"/>				
Penlights	3	<input type="checkbox"/>	<input type="checkbox"/>				
½" Tape	2	<input type="checkbox"/>	<input type="checkbox"/>				
1" Tape	2	<input type="checkbox"/>	<input type="checkbox"/>				
2" Tape	2	<input type="checkbox"/>	<input type="checkbox"/>				
Trauma Shears	2	<input type="checkbox"/>	<input type="checkbox"/>				
Ring Cutter	2	<input type="checkbox"/>	<input type="checkbox"/>				
Triangular Bandages	5	<input type="checkbox"/>	<input type="checkbox"/>				
Vaseline Gauze	5	<input type="checkbox"/>	<input type="checkbox"/>				
Tourniquets	2	<input type="checkbox"/>	<input type="checkbox"/>				
Cold Packs	5	<input type="checkbox"/>	<input type="checkbox"/>				

**Appendix E – Airway/Medical Room Inventory**

**Date:** \_\_\_\_\_ **Inventory done by:** \_\_\_\_\_  
**Lead Instructor for the day:** \_\_\_\_\_

**Airway/Medical Room 119**

<b>Medical Supplies</b>	<b>Par</b>	<b>Before</b>	<b>After</b>	<b>Medical Supplies</b>	<b>Par</b>	<b>Before</b>	<b>After</b>
Adult BVM	7	<input type="checkbox"/>	<input type="checkbox"/>	OPA – size 80 mm	3	<input type="checkbox"/>	<input type="checkbox"/>
Child BVM	6	<input type="checkbox"/>	<input type="checkbox"/>	OPA – size 90 mm	3	<input type="checkbox"/>	<input type="checkbox"/>
Infant BVM	6	<input type="checkbox"/>	<input type="checkbox"/>	OPA – size 100 mm	3	<input type="checkbox"/>	<input type="checkbox"/>
Adult NRBM	5	<input type="checkbox"/>	<input type="checkbox"/>	OPA – size 110 mm	3	<input type="checkbox"/>	<input type="checkbox"/>
Pedi NRBM	5	<input type="checkbox"/>	<input type="checkbox"/>	Bite Stick	5	<input type="checkbox"/>	<input type="checkbox"/>
Nebulizer Kits	2	<input type="checkbox"/>	<input type="checkbox"/>	Lubricating Jelly	10	<input type="checkbox"/>	<input type="checkbox"/>
Adult Aero Mask	2	<input type="checkbox"/>	<input type="checkbox"/>	O2 Regulators	10	<input type="checkbox"/>	<input type="checkbox"/>
Pedi Aero Mask	2	<input type="checkbox"/>	<input type="checkbox"/>	O2 Keys	3	<input type="checkbox"/>	<input type="checkbox"/>
Nasal Cannula	5	<input type="checkbox"/>	<input type="checkbox"/>	O2 Tank – E (long)	1	<input type="checkbox"/>	<input type="checkbox"/>
O2 Humidifier	1	<input type="checkbox"/>	<input type="checkbox"/>	O2 Tank – M6 (small)	1	<input type="checkbox"/>	<input type="checkbox"/>
Soft Suction Catheter –	2	<input type="checkbox"/>	<input type="checkbox"/>	O2 Tanks - D	8	<input type="checkbox"/>	<input type="checkbox"/>
Soft Suction Catheter –	2	<input type="checkbox"/>	<input type="checkbox"/>				
Soft Suction Catheter –	2	<input type="checkbox"/>	<input type="checkbox"/>	<b>Medications</b>			
Soft Suction Catheter –	2	<input type="checkbox"/>	<input type="checkbox"/>	Activated Charcoal	4	<input type="checkbox"/>	<input type="checkbox"/>
Yankauer Catheter	2	<input type="checkbox"/>	<input type="checkbox"/>	Albuterol Inhaler	4	<input type="checkbox"/>	<input type="checkbox"/>
6ft. Suction Tubing	2	<input type="checkbox"/>	<input type="checkbox"/>	Epi Pen	5	<input type="checkbox"/>	<input type="checkbox"/>
Suction Container	1	<input type="checkbox"/>	<input type="checkbox"/>	Aspirin	1	<input type="checkbox"/>	<input type="checkbox"/>
NPA – size 12 F	3	<input type="checkbox"/>	<input type="checkbox"/>	Oral Glucose	4	<input type="checkbox"/>	<input type="checkbox"/>
NPA – size 22 F	3	<input type="checkbox"/>	<input type="checkbox"/>	Nitroglycerin	4	<input type="checkbox"/>	<input type="checkbox"/>
NPA – size 26 F	3	<input type="checkbox"/>	<input type="checkbox"/>				
NPA – size 28 F	3	<input type="checkbox"/>	<input type="checkbox"/>	Adult B/P Cuff	6	<input type="checkbox"/>	<input type="checkbox"/>
NPA – size 30 F	3	<input type="checkbox"/>	<input type="checkbox"/>	Lg. Adult B/P Cuff	6	<input type="checkbox"/>	<input type="checkbox"/>
NPA – size 32 F	3	<input type="checkbox"/>	<input type="checkbox"/>	Pedi B/P Cuff	3	<input type="checkbox"/>	<input type="checkbox"/>
NPA – size 36 F	3	<input type="checkbox"/>	<input type="checkbox"/>	Baby Bunting	1	<input type="checkbox"/>	<input type="checkbox"/>
OPA – size 40 mm	3	<input type="checkbox"/>	<input type="checkbox"/>	Meconium Aspirator	1	<input type="checkbox"/>	<input type="checkbox"/>
OPA – size 50 mm	3	<input type="checkbox"/>	<input type="checkbox"/>	Bulb Syringe	1	<input type="checkbox"/>	<input type="checkbox"/>
OPA – size 60 mm	3	<input type="checkbox"/>	<input type="checkbox"/>	OB Kits	3	<input type="checkbox"/>	<input type="checkbox"/>

**Date:** \_\_\_\_\_ **Inventory done by:** \_\_\_\_\_  
**Lead Instructor for the day:** \_\_\_\_\_

### Airway/Medical Room 119

<u>Equipment Racks</u>	<u>Par</u>	<u>Before</u>	<u>After</u>
AED – Squad 1	1	<input type="checkbox"/>	<input type="checkbox"/>
AED – Squad 2	1	<input type="checkbox"/>	<input type="checkbox"/>
AED – Squad 3	1	<input type="checkbox"/>	<input type="checkbox"/>
AED – Squad 4	1	<input type="checkbox"/>	<input type="checkbox"/>
Suction Unit – Squad 1	1	<input type="checkbox"/>	<input type="checkbox"/>
Suction Unit – Squad 2	1	<input type="checkbox"/>	<input type="checkbox"/>
Suction Unit – Squad 3	1	<input type="checkbox"/>	<input type="checkbox"/>
Suction Unit – Squad 4	1	<input type="checkbox"/>	<input type="checkbox"/>
Airway Bag – Squad 1	1	<input type="checkbox"/>	<input type="checkbox"/>
Airway Bag – Squad 2	1	<input type="checkbox"/>	<input type="checkbox"/>
Airway Bag – Squad 3	1	<input type="checkbox"/>	<input type="checkbox"/>
Airway Bag – Squad 4	1	<input type="checkbox"/>	<input type="checkbox"/>
Trauma Bag – Squad 1	1	<input type="checkbox"/>	<input type="checkbox"/>
Trauma Bag – Squad 2	1	<input type="checkbox"/>	<input type="checkbox"/>
Trauma Bag – Squad 3	1	<input type="checkbox"/>	<input type="checkbox"/>
Trauma Bag – Squad 4	1	<input type="checkbox"/>	<input type="checkbox"/>
Blue Collar Bag – Squad 1	1	<input type="checkbox"/>	<input type="checkbox"/>
Blue Collar Bag – Squad 2	1	<input type="checkbox"/>	<input type="checkbox"/>
Blue Collar Bag – Squad 3	1	<input type="checkbox"/>	<input type="checkbox"/>
Green Collar Bag – Squad 4	1	<input type="checkbox"/>	<input type="checkbox"/>
Life Pak 12	2	<input type="checkbox"/>	<input type="checkbox"/>
Life Pak Batteries	6	<input type="checkbox"/>	<input type="checkbox"/>
Life Pak Battery Charger	1	<input type="checkbox"/>	<input type="checkbox"/>
Airway Heads	4	<input type="checkbox"/>	<input type="checkbox"/>
Infant Intubation Heads	2	<input type="checkbox"/>	<input type="checkbox"/>

## Appendix F – Master Truck Inventory

AM	PM	FRONT BUMPER	AM	PM	DRIVER SIDE TOP MIDDLE COMPARTMENT
		(1) 20 ft. section of 5 in. hose			(1) Piercing nozzle
		(1) 20 ft. section of 4 in. hose			(1) Crowbar
		(1) 4 1/2 in. Hydrant adapter			(1) Pick Headed Axe
		(1) 20 ft. section of 2 1/2 in. hose			(1) Flat Head Axe
		(1) Rubber Mallet			(1) Halligan
		(1) Hydrant Wrench			(1) Sledge Hammer
		<b>CAB</b>			(1) Bolt Cutters
		Diesel Fuel Card			(1) Wire Cutters
		Vehicle Log Book			(1) J-Tool
		(1) Engine 2 (UNIT 731) Apparatus Checkout Sheets			<b>DRIVER SIDE TOP REAR COMPARTMENT</b>
		(1) SCBA			(1) Pressurized Water Extinguisher
		<b>BREEZEWAY</b>			(1) CO2 Extinguisher
		(2) Handlights			(1) Dry Chemical Extinguisher
		(1) Flat Headed Axe			(1) Come-along
		(1) Pick Headed Axe			<b>DRIVER SIDE BOTTOM REAR COMPARTMENT</b>
		(1) Hooligan			(1) TNT Power Unit
		(1) NY Hook			(1) TNT Spreader
		(4) SCBA's			(1) BLUE TNT Tool Hose
		<b>PUMP PANEL</b>			(1) RED TNT Tool Hose
		(1) Hydrant Wrench			<b>TAILBOARD TOP COMPARTMENT</b>
		(2) Small Spanner Wrenches			(1) TNT R-Series Hydraulic Ram
		(4) Large Diameter Spanner Wrenches			(1) TNT C-25 Hydraulic Cutter
		(1) 20 ft. 4 in. Hose			(1) Glass Master
		(1) 4 X 4 1/2 in. Hydrant adapter			<b>TAILBOARD BOTTOM COMPARTMENT</b>
		<b>DRIVER SIDE TOP FRONT COMPARTMENT</b>			(1) Vent saw w/ depth guage (chainsaw)
		(1) 5 X 4 1/2 in. Storz Adapter on 45 degree angle			(1) 14 in. Rotary saw (K-12)
		(1) 4 Storz X 2 1/2 in. Female angled adapter			(1) medium gas can
		(1) Rubber Mallet			(1) small pre-mix gas can w/ funnel
		(1) Foam Wrench			<b>TAILBOARD</b>
		(1) 1 1/2 in. adjustable combination nozzle			(4) Large Diameter Spanner Wrenches
		(1) 2 1/2 in. adjustable combination nozzle			(2) Small Spanner Wrenches
		(2) 2 1/2 in. X 1 1/2 in. Reducer			(1) Hydrant wrench
		(1) 2 1/2 in. brass double female adapter			(1) 48 in. Pry bar
		(1) 2 1/2 in. brass double male adapter			<b>TOP OF APPARATUS</b>
		(2) 2 1/2 in. composite double female			1000 ft. X 5 in. Supply Line w/ Hydrant Connection
		(2) 2 1/2 in. composite double male			600 ft. X 2 1/2 in. Hose
		(1) 2 1/2 in. X 1 1/2 in. Gated wye			(2) 10 ft. X 6 in. Hard Suction hose
		(2) 5 in. X 4 in. Storz adapter			(1) Hard Suction Barrel Strainer
		(1) 2 1/2 in. Siamese			(2) 4 in. X 4 in. X 8 ft. long cribbing (in hard suction)
		(1) K-tool			(1) Flat Head Shovel
		(3) Hose rope tool			(2) Short handle snow shovels
		(1) Foam eductor			(1) Master Stream Base
		(1) 2 1/2 in. in-line gate valve			(1) Stack Tip Smoothbore Master Stream
		(1) 1" double male adapter			(2) Crosslays 150 ft. X 1 3/4 in. (S-Load)
		(1) 1" double female adapter			(2) 1 1/2 in. Fixed combination nozzles
		<b>DRIVER SIDE BOTTOM FRONT COMPARTMENT</b>			(2) Rear pre-connects 150 ft. X 1 3/4 in. (minuteman)
		(1) Hose roller			(2) 1 1/2 in. Automatic combination nozzles
		(1) 2 1/2 in. Gated wye			(1) 24 ft. Extension ladder
		(1) assorted engineer supply kit			(1) 14 ft. Roof ladder
		(1) Hose drainer			(1) 10 ft. Attic ladder
		(1) Tool box			(1) 6 ft. Pike pole
		(1) compressed airline w/ tire chuck			(1) 10 ft. Pike pole
		(1) 2 1/2 in. Wye			
		(1) 4 in. Storz X 2 1/2 in. Siamese			
		(1) 2 1/2 in. aluminum smoothbore stack tip nozzle			
		(1) nozzle foam boot			
		(2) 2 1/2" nst X 4" storz			





## Appendix G – SOP CSRIPS-38 Academy Emergency Procedures

### PURPOSE

To establish procedures in cases of emergencies such as Fire, Bomb Threats, Weather Emergencies, Active Shooter, etc. for use at the Coral Springs Regional Institute of Public Safety (CSRIPS).

### SCOPE

This Standard Operating Procedure (SOP) shall apply to all Students, Visitors, Office and Administrative Staff and all Instructors of the Coral Springs Regional Institute of Public Safety (CSRIPS).

### PROCEDURES

- I. Emergency situations will be defined using a combination of a color code system and “Plain Language Alerts”.
  - A. The Color Code System and “Plain Language Alerts” shall be printed on the backs of any issued ID given by CSRIPS.
  - B. The Color Code System and “Plain Language Alerts” shall also be posted in every classroom and hallway of the building.
- II. Elements of the Color Code System

### EMERGENCY COLOR CODES

<b>RED</b>	<b>Full Lockdown</b>	Shelter in place and barricade in office, threat inside of building
<b>YELLOW</b>	<b>Lockdown</b>	Do not leave building, threat outside of building
<b>ORANGE</b>	<b>Evacuation</b>	
<b>BLACK</b>	<b>Bomb Threat</b>	Turn off all cell phones and evacuate building
<b>GREEN</b>	<b>All Clear</b>	

- III. Elements of Plain Language Alerts Encompass the city color alerts for threats.
  - A. Active Shooter / Remain in place, “Lock Down”

B. Armed/Violent Intruder / Remain in place, "Lock Down"

C. All Clear + Code or Alert

IV. Code Red: Full lockdown

A. This code applies to all situations that include sheltering in place, barricading in office, or threats inside of building.

B. This shall also include situations such as severe weather, acts of terrorism, outside events such as police activity.

V. Code Yellow: Weather Emergency

A. This code ONLY applies to Tornadoes and Severe Weather Warnings. During hurricane watches or warnings; sufficient notice is given to students and staff and building will be closed.

B. Upon receiving notice of impending severe weather, the front office staff shall announce Code Yellow + "type of warning" (three times) (i.e. "Code YELLOW, tornado warning")

C. All persons operating on the training ground are to seek shelter inside the building immediately.

1. All Instructors are responsible for assuring their student accountability.

a. Instructors shall use the PAR system to account for their students.

b. Any uncounted persons shall be reported immediately to the Division Chief of Training or Assistant to the Division Chief of Training.

2. If time permits and can be done safely, every effort should be made to secure any loose equipment that may become a projectile or cause additional damage.

D. All persons shall seek shelter in areas without windows (i.e. bathrooms, the EMS breakout rooms and hallways) and avoid any exterior doors

VI. Code Orange: Fire Emergency

A. At first sign of fire, the witness/staff shall immediately activate the nearest pull station and notifies front office staff of the incident and its location if it is safe to do so.

B. Front office staff shall immediately follow the below procedures:

1. Using intercom system; announces Code Orange + location (three times)

2. Dials "911" and provides the following information:

- a. Name of Business
- b. Address
- c. Type of Incident
- d. Location
- e. Any other information received

3. Staff shall notify the Division Chief of Training or Assistant Division Chief of Training

C. All building occupants shall follow the Evacuation Procedure (see page 6)

## VII. Code ORANGE: Hazardous Materials Incident

A. At first sign of Hazardous Materials (HAZMAT) Incident, the witness immediately notifies front office staff of the type of incident and its location. Examples of Haz-Mat incident includes but not limited to, chemical release inside building/fire grounds, LP release, & Natural Gas release.

B. Front office staff shall immediately follow the below procedures:

- 1. Using intercom system; announces Code ORANGE + location + special instructions (three times)
- 2. Special Instructions may include: evacuation, lock down, or an area of the building to avoid.
- 3. If needed, Dials "911" and provides the following information:
  - a. Name of Business
  - b. Address
  - c. Type of Incident
  - d. Location
  - e. Any other information received
  - f. Describe the Hazard

4. Notify the Division Chief of Training or Assistant to the Division Chief of Training.

C. All building occupants shall follow any instructions given over the intercom system.

## VIII. Code BLACK: Bomb Threat

A. At first sign of threat, the witness shall immediately notify the front office staff of the incident and its origin. (i.e., by letter, phone call, finding a suspicious object, social media)

B. Front Office Staff shall immediately follow the below procedures:

- 1. Using intercom system; announces Code BLACK (three times)
- 2. Dials "911" and provides the following information:

1. Name of Business
2. Address
3. Type of Incident
4. Location
5. Any other information received

3. Notify the Division Chief of Training or Assistant to the Division Chief of Training

C. All building occupants shall follow the Evacuation Procedure (see page 6 & 7)

## IX. Active Shooter Alert

### A. **Definition**

*PROFILE OF AN ACTIVE Killer: an Active Killer is an individual actively engaged in killing or attempting to kill people in a confined and populated area; in most cases, active Killers use firearms(s) and there is no pattern or method to their selection of victims. Active Killer situations are unpredictable and evolve quickly. Typically, the immediate deployment of law enforcement is required to stop the killing and mitigate harm to victims. Because active killer situations are often over within 10 to 15 minutes, before law enforcement arrives on the scene, individuals must be prepared both mentally and physically to deal with an active killer situation. Updated information changed terminology to Active Killer(October 2008, U.S. Department of Homeland Security)*

### B. **Evacuation**

At first sign of threat (witnessed or heard gunshot), all building occupants shall exercise EXTREME CAUTION and immediately evacuate the premises if it can be done safely. Evacuation routes are described in the Evacuation Procedure. (see page 6 & 7)

1. Any persons on the training ground shall seek safe haven as far away as possible from the reported threat
2. Evacuate regardless of whether others agree to follow
3. Leave your belongings behind
4. Help others escape, if possible
5. Prevent anyone from entering an area where the active killer may be
6. Follow the instructions of any law enforcement officer

C. As soon as possible and when it can be done safely, an Active Killer alert shall be announced using the intercom system by anyone capable of giving the announcement. Announcement shall be worded as follows: "Active Killer Alert" (three times)

D. CALL 911 WHEN IT IS SAFE TO DO SO!

### E. **Lock Down**

If evacuation is not possible, remain calm and find a place to hide where the active Killer is less likely to find you.

1. Any persons in an office or classroom shall stay there and secure the door.
2. Any persons in a hallway shall get into a room and secure the door.
3. The hiding place should be:
  - a. Out of the active shooter's view and remain quiet
  - b. Hide behind large items (i.e., cabinets, desks)
  - c. Silence your cell phone or any source of noise that may give away your location (i.e., radios, televisions)
  - d. Provide protection if shots are fired in your direction (i.e., an office with a closed and locked door)
  - e. If possible, the hiding place should not trap you or restrict your options for movement
  - f. Blockade the door with heavy furniture
4. Dial 911, if possible, to alert police to the active killer's location. If you cannot speak, leave the line open and allow the dispatcher to listen

F. **Procedure for When Law Enforcement Arrives**

1. *Remain calm*, and follow the officers' instructions
2. Put down any items in your hands (i.e., bags, jackets)
3. Immediately raise hands and spread fingers
4. Keep hands visible at all times
5. Avoid making quick movements toward officers such as holding on to them for safety
6. Avoid pointing, screaming and/or yelling
7. Do not stop to ask officers for help or direction when evacuating, just proceed in the direction from which officers directing you to leave.

X. **Armed/Violent Intruder/Security Threat**

- A. In cases where there is an intruder with a weapon of any kind the procedures for "Active Killer" shall be followed.
- B. In cases where there is an incident not involving a weapon but can be considered a security threat (i.e., fight, altercation or aggressive behavior). At first sign of a threat, the witness shall notify the front office staff of the incident and its location.
- C. Front Office Staff shall immediately follow the bellow procedures:
  1. Using intercom system; announces Security Threat + Location (three times)
  2. Dials "911" and provides the following information:
    - a. Name of Business
    - b. Address
    - c. Type of Incident
    - d. Location
    - e. Any other information received

- D. The Division Chief of Training or Assistant to the Division Chief of Training shall attempt to report to the location to assess the situation if conditions warrant without endangering the lives of themselves or staff.

#### XI. All Clear + Code or Alert

- A. When an incident is declared safe or resolved, the Division Chief of Training or his designee shall instruct any front office personnel to give the "ALL CLEAR" announcement.
- B. Using the intercom system, an All Clear + Code or Alert shall be announced. (i.e. "Code Red, All Clear") (Three times)

#### XII. Evacuation Procedure

- A. All occupants in the building shall adhere to these procedures in cases where evacuation of the building is necessary (i.e., fires, active killer, HAZMAT, etc.)
  - 1. All persons shall remain quiet/silent during the evacuation
  - 2. All persons shall not use any electronic devices (i.e., cell phones, radios)
- B. All Instructors shall assist in the orderly but rapid evacuation of the building.
  - 1. Instructors shall check the bathrooms prior to exiting the building
  - 2. Instructors shall direct any persons found in the hallway to exit the building
- C. Specific routes shall be used depending on where in the building persons are located. Below are the recommended routes to be used when evacuating the building.
  - 1. The rally point when exiting to the North side of the building will be north of the training tower
  - 2. The rally point when exiting the East side of the building will be in the grassy area across 120<sup>th</sup> Ave.
- D. Once you are in the designated areas, instructors shall account for their students using the PAR system.
  - 1. If possible, accountability should be taken for any other persons at the designated evacuation areas.
  - 2. Any uncounted persons shall be reported immediately to the Division Chief of Training or Assistant to the Division Chief of Training.
- E. Evacuation routes shall be posted in all the hallways as a reference. Below are the recommended routes to exit the building in cases of emergency.
  - 1. Front office/ Break Room /Restrooms  
All persons shall exit their areas and use the front doors as their exit.

2. First floor classrooms (121/122)  
All persons shall use the West entrance that leads to the bay and exits to the north side of the building.
  
3. Breakout rooms (119/120) and Storage rooms (116/117/118)  
All persons shall use the North entrance / middle hallway that leads to the north side of the building.
  
4. 2<sup>nd</sup> Floor Classrooms (214/ 215/ 216/ 217)/Restrooms  
All persons shall use the West stairwell to exit down the stairs towards the North side of the building.
  
5. 2<sup>nd</sup> Floor Admin/Staff/Instructor offices, Conference room/Uniform room  
  
All persons shall use the East stairwell to exit down the stairs towards the North side of the building.
  
6. Training Ground  
All persons shall rally at the North side of the tower.

## Appendix H – SOP CSRIPS-29 Infection Control Program

### PURPOSE

To provide control measures to prevent an exposure to a communicable disease during the delivery of patient care, training and to establish standards by which an exposure to a communicable disease is handled.

### SCOPE

This Standard Operating Procedure (SOP) shall apply to all members of the Coral Springs Regional Institute of Public Safety (CSRIPS). This SOP complies with the requirements of 29 CFR 1910.1030.

### PROCEDURES

#### I. Infection Control Standards

##### A. Communicable Diseases:

1. Viruses and bacteria are the organisms commonly responsible for the spread of disease. Viruses normally reside in a living host and cannot multiply outside the living cell. Bacteria, on the other hand, can multiply outside the body on surfaces of objects.
2. A **communicable** disease (or contagious disease) is one that can be transmitted from one person to another. An **infectious** disease results from the invasion of host disease-producing organisms such as bacteria, viruses, fungi or parasites.
3. A communicable disease can be spread directly or indirectly. **Direct transmission** occurs through direct contact with blood or other body substances of an infected individual. **Indirect transmission** occurs without person-to-person contact: the disease-producing organism passes from the infected individual to an inanimate object. Another person comes in contact with the contaminated object and contracts the disease.
4. A communicable disease may be **blood-borne** or **airborne**. **Blood-borne** diseases are spread by direct contact with the blood or other body substances of an infected person. Blood-borne diseases include but are not limited to the Human Immunodeficiency Virus (**HIV**), Hepatitis B (**HBV**), Hepatitis C (**HCV**) and **Syphilis**. **Airborne** diseases are spread by droplets of the disease-producing organism being expelled into the air by a productive cough or sneeze or by direct contact with infected bodily secretions. Airborne diseases include **Tuberculosis, Meningitis, Mumps, Rubella and Chickenpox**.



5. Tuberculosis or mycobacterium tuberculosis is spread by a person with undiagnosed or untreated pulmonary laryngeal disease. Droplet nuclei are generated when a person with infectious tuberculosis sneezes, coughs, spits, laughs, speaks or sings. The particles are so small (1-5 microns) that normal air currents keep them airborne and can spread them throughout a room or building. Infection occurs when a susceptible person inhales droplet nuclei containing mycobacterium tuberculosis and bacilli become established in the alveoli of the lungs and spreads throughout the lung. Two (2) to ten (10) weeks after the initial infection, the immune response usually limits further multiplication and spread of the tuberculosis bacilli. The risk of progression to active disease is markedly increased for persons with the HIV infection. **TB IS NOT A HIGHLY COMMUNICABLE DISEASE.**

**B. Training and Education:**

Annual training and education shall be provided to all Fire Academy employees. This training and education will include topics on, but not limited to: epidemiology, the use of personal protective equipment, safe practices relating to infection control, reporting potential or actual contacts and exposures, proper decontaminating and cleaning of clothing and equipment and proper methods of disposal of contaminated articles and medical waste. This training will be provided through a scheduled In-Service.

**C. Personal Protective Equipment:**

1. Employee risk reduction in the workplace lies with the practice of UNIVERSAL PRECAUTIONS or BODY SUBSTANCE ISOLATION. **UNIVERSAL PRECAUTIONS** is the term used when all persons are considered to be infectious and only certain body fluids pose a risk. **BODY SUBSTANCE ISOLATION** means blood and all body fluids of all patients will be considered potentially infectious. Employees are to perform patient care under the BODY SUBSTANCE ISOLATION approach. The **Training Chief or his/her designee** shall investigate all exposure reports and determine if an actual exposure has occurred under the guidance of the CDC Rules for Universal Precautions.
2. Under the CDC Rules for Universal Precautions, **blood, semen and vaginal secretions** are considered infectious. **Other Potentially Infectious Materials (OPIM)** are cerebrospinal fluid, synovial fluid, pericardial fluid, pleural fluid, amniotic fluid and any other body fluid **visibly** contaminated with blood, and all body fluids where it is difficult or

impossible to differentiate between infectious or OPIM fluids. Fluids that DO NOT pose a risk are urine, sweat, saliva, tears, vomitus, stool, nasal secretions and sputum unless **visible** blood is noted or OPIM are suspected.

3. General use disposable Personal Protective Equipment (PPE) will be stored in an infectious control kit that will be located at CSRIPS at all times. This kit will include:
  - a) Gloves, Vinyl or Latex.
  - b) Heavy-duty rubber gloves for cleaning surfaces and equipment.
  - c) Hand washing substitutes.
  - d) Protective eyewear.
  - e) Surgical masks.
  - f) Fluid resistant gown.
  - g) N95 Particulate Respirator Mask.
  - h) Respiratory assisted Devices (Disposable Bag-Valve-Mask).

**NOTE:** Allergies to certain types of PPE will be handled on an Individual Basis.

4. **Exceptions to Use of PPE** - In the case where there is an unexpected emergency or exposure, there may not be time to use a PPE. The decision not to use PPE will be made at that time by the employee. In these cases, there will be a review of the incident by the **Chief Training Officer or his/her designee**.
5. In providing patient care, the following are safety guidelines for employees to follow:
  - a) Treat each incident as a potential exposure to a communicable disease.
  - b) Information provided regarding the patient may assist in protecting against an exposure – trauma, childbirth, bleeding, coughing or other signs and symptoms.
  - c) Limit the number of personnel involved in direct patient care to reduce the number of exposures when possible.
  - d) **Wear appropriate level of Personal Protective Equipment**

#### **D. Uniforms:**

1. The following guidelines deal with the cleaning and handling of employee uniforms: **REMEMBER: USE THE PROPER PPE WHEN COMPLETING ANY CLEANING.**
  - a) Shirts, Trousers, Etc. - Spot cleaning may be done with cold water and a germicidal soap (same as hand soap) or hydrogen peroxide. **Do Not Use Chlorine Bleach.** Should an article be saturated through, they should be placed in a red biohazard bag, taken to a station with an approved washing machine and washed with 120-

130 degree water with laundry detergent and an oxygenated bleach (i.e. CLOROX II) as per the machine and detergent instructions. Coral Springs Fire Department Station 71 shall be utilized for this procedure. In the event Station 71 is not available, another fire station will be assigned.

- b) Belts and Shoes: - Spot cleaning may be done with cold water and a germicidal soap. Should the material become saturated, they must be placed in a red biohazard bag and disposed of properly.
- c) Turnout Gear - Refer to CSRIPS Turnout Gear SOP for cleaning and handling instructions.

#### **E. Cleaning/Disinfecting Personnel:**

1. The following guidelines deal with the cleaning and disinfecting of personnel: **REMEMBER: USE THE PROPER PPE WHEN COMPLETING ANY CLEANING.**
  - a) If personnel are contaminated, uniforms should be removed, cleaned and/or disposed of as determined.
  - b) Skin surfaces that were not covered by clothing, protective clothing or infection control garments shall be washed with soap and hot water after providing patient care. If personnel do not return to the station immediately after the call, personnel shall use towelettes containing benzelconium chloride, or alcohol gel (this item requires no water or towel). Use soap and hot water as soon as possible.
  - c) Have contaminated personnel shower with soap and hot water. **Ensure personnel are decontaminated before moving them to the showers to prevent contamination of station floors/carpet.**
  - d) Hand washing is the single most important means of preventing the spread of disease. Hands should be washed before (if practical) and certainly after each patient contact. Scrub with plain soap (or an antiseptic soap available at the hospital) for at least fifteen (15) seconds, and rinse with running water. Use a towel to turn off the water since you turned it on with soiled hands. Hands shall be washed before and after using the bathroom, before and after handling food, cooking and handling food utensils and before and after handling emergency medical equipment.

#### **F. Cleaning/Disinfecting Equipment:**

1. The following guidelines deal with the cleaning and disinfecting of equipment: **REMEMBER: USE THE PROPER PPE WHEN COMPLETING ANY CLEANING.**
  - a) Cleaning and disinfecting of equipment is key in preventing the transmission of organisms to patients or health care personnel who handle the equipment. The **first** step in the decontamination of

equipment is **cleaning**. If cleaning is not done prior to the second step, **disinfection**, decontamination will not be achieved. All cleaning/disinfecting should be completed utilizing the following three (3) step process:

- (1) Remove frank contaminants (blood, vomitus, feces, etc.) while cleaning with soap and water.
- (2) Disinfect equipment with a 1:100 solution of bleach and water (2 ounces to 1 gallon of water) mixed in a spray bottle. **Note: This solution must be replaced daily.**
- (3) Allow equipment to air-dry.

2. The following guidelines deal with the cleaning/disinfecting of certain pieces of equipment:

- a) Linens and Blankets - Soiled or contaminated linens will be handled with gloves, and as little as possible. They shall be disposed of in the proper hamper at a hospital. Sheets and pillowcases on the stretcher will be replaced after each patient contact or transport. Should a blanket become soiled or contaminated, place it in a red biohazardous bag and take it to a station with an approved washing machine. Wash it with detergent and oxygenated bleach on a **gentle** wash cycle. **Do Not Use Chlorine Bleach.**
- b) Blood Pressure Cuffs - Spot clean with a germicidal soap and cold water or washed in an approved washing machine with detergent and oxygenated bleach. Air-dry or use a low temperature dryer setting. **Do Not Use Chlorine Bleach.**
- c) CID's/Straps - Spot clean with a germicidal soap and cold water or washed in an approved washing machine with detergent and oxygenated bleach. Air dry only.
- d) Splints - Spot clean with a germicidal soap and cold water and then disinfect with a 1:100 bleach/water solution and allow to air dry.
- e) Stretcher Mattress - Clean with germicidal soap and cold water and then disinfect with a 1:100 bleach/water solution and allow to air dry. If mattress cover has been breached, then replace.
- f) Laryngoscope/Blades - Clean with germicidal soap and cold water and then disinfect with a 1:100 bleach/water solution and allow to air dry. **DO NOT IMMERSSE IN WATER.**
- g) Other equipment should be cleaned/disinfected in a similar manner. If unsure as to proper procedure, contact the Chief of Training or his/her designee.

3. All Manikin's shall be cleaned immediately following each use to avoid the potential for drying of contaminants on the manikin and equipment surfaces.

- a) Instructors shall wear protective gloves when conducting manikin/equipment cleaning and decontamination.

- b) When possible all Manikins shall be disassembled according to the manufactures specifications, and dispose of any disposable items such as plastic lungs in a red biohazard bag.
- c)
- d) All external and internal surfaces of Manikins shall be disinfected according to manufactures recommendations.
- e) All internal surfaces of CPR Manikins should be decontaminated with the following recipe: ½ cup liquid household bleach per gallon of tap water. Wet all surfaces with the bleach solution, let sit for at least 10 minutes. Bleach solution shall be made fresh at each class and discarded after each use.
- f) If desired and appropriate (per manufactures recommendations), manikins can be completely submerged in the bleach water solution.
- g) Rinse Manikin parts with fresh water and immediately dry all external surfaces with clean paper towels.
- h) If manikins will be stored for long periods, wipe all surfaces with alcohol wipes to aid drying of internal surfaces.

**G. Biohazardous Waste:**

1. Contaminated items which have been in contact with blood or other body fluids are considered potentially hazardous. Proper PPE shall be worn when handling infectious waste. These items shall be placed in a red biohazard bag and disposed of at the hospital. Waste receptacles in the ambulances shall be kept clean with a red biohazardous bag installed at all times. These shall be emptied after each use. Linen will be disposed of at the hospital in the proper hamper.
2. Removal of medical waste at a scene will have to be coordinated with the Police Department in order to avoid disturbing a potential crime scene. This may also include a patient's clothing.
3. All sharp objects shall be considered potentially infectious and shall be handled with extraordinary care. Used needles **SHALL NOT BE RECAPPED**, bent or removed from the syringe. Used needles and syringes shall be disposed of immediately by the user, not dropped on the floor or stuck into a stretcher mattress, and not passed to another person for disposal. Used needles shall be disposed of in the Sharps Container which is stored in the medical lab room. When this container is ¾ full, seal it closed and dispose of it at the hospital.
4. The lead instructor is responsible for notification of the EMS Program Director of the need to dispose of the sharps container / biohazard bags.

**II. Infectious Exposure Procedure**

**A. CSRIPS Designated Officer (DO): EMS Program Director**

1. It is the responsibility of the CSRIPS Designated Officer (**DO**) to direct and coordinate all aspects of the CSRIPS Infection Control Program. This responsibility includes but is not limited to; working with the CSFD Designated Officer to ensure that the Post Exposure Follow-up Care is rapidly initiated and source patient testing is accomplished.

**B. Intact Skin Contact vs. Infectious Exposure Incident:**

1. The intact skin contact with blood or Other Potentially Infectious Materials (OPIM) requires no action beyond cleaning the skin surface thoroughly and documenting the contact. No exposure follow-up care is necessary.
2. The infectious exposure incident is where there is a specific eye, mouth, other mucus membrane, non-intact skin or parenteral contact with blood or Other Potentially Infectious Materials (OPIM) that results from the employees' job duties. Parenteral contact involves piercing the mucus membranes or the skin barrier through such events as a needle stick injury, human bite with blood present in the biter's mouth, and blood or OPIM in direct contact with a cut or abrasion on your skin.

**C. Incident Reporting:**

1. Any employee of CSRIPS who thinks he/she may have been occupationally exposed to blood or other potentially infectious fluids or materials **must** contact the (**DO**) **IMMEDIATELY**, even if still on an emergency scene / hospital clinical rotation. The employee will then contact the lead instructor and advise of the incident and shall initiate appropriate care in accordance with this SOP and the Centers for Disease Control (CDC) guidelines. This process must occur immediately.
2. If a specific occupational exposure has occurred, it will be the responsibility of the (**DO**) or **his/her designee** to initiate the post exposure protocol when indicated and the necessary source patient testing. Contact must then be made with the CSRIPS Designated Officer (**DO**). It will be the responsibility of the CSRIPS **DO** to make certain that Post Exposure Follow-Up Care is rapidly initiated and source patient testing is accomplished. It will be the responsibility of the (**DO**) or **his/her designee** to make certain the confidential City of Coral Springs Exposure Report and Employee First Notice of Injury Report Forms are completed and delivered to the **Chief Training Officer** within twenty-four (24) hours or the next business day (whichever comes first).
3. In the case of a specific occupational exposure, the current exposure protocol will be utilized. The CSRIPS protocol mandates that an employee exposure incident involving a blood borne or other potentially infectious material (OPIM) from a high-risk source patient or from a not

yet known source patient, will be treated as high-risk until official notification is received from a hospital or other qualified clinical facility (i.e. medical examiner) to the contrary. It normally takes 3-4 days for all source patient-testing results to be completed and available to the **DO** and the employee, and the physician treating the employee.

4. The results of these tests are required by law to be handled and communicated with the utmost confidentiality. When the source patient's testing results are known, it will be the responsibility of the **DO** to immediately contact and talk directly with the employee. Medical follow-up care will be the responsibility of the employee and the physician handling the post exposure protocol.
5. In the case of a high-risk exposure incident occurring after the occupational clinic is closed, the CSRIPS **DO** will be responsible for making arrangements to have a qualified on-call infectious disease specialist available to meet the employee, offer appropriate counseling and care under a physician directed medical protocol. Subsequent scheduled follow-up care and consultation is mandatory and may extend twelve (12) months post exposure.
6. Absence from work as a result of an occupational exposure to infectious disease will be handled in accordance with the city policies and procedures and the SOPs of the CSRIPS. All required forms and reports must be completed and processed in a timely fashion.
7. It will be the responsibility of the CSRIPS **DO** to direct and coordinate all aspects of the CSRIPS Infection Control Program and the procedures outlined in this SOP. It is the responsibility of every employee to know their responsibility to immediately contact their Lead Instructor and (**DO**) should they receive a specific occupational exposure. It is the responsibility of all CSRIPS employees to respond rapidly and efficiently to infectious disease exposures. CSRIPS maintains an On-Call **DO** 24 hours a day, 365 days a year.

### **III. On-Scene Biohazard Control Program**

#### **A. Problem Identification:**

1. Determine the type and magnitude of the hazard:
  - a) Blood on outside public property near storm drain.
  - b) Blood inside public property – wash down impossible.
  - c) Blood on private property with public access (i.e., apartment stairways, common entrances/hallways, etc.).
  - d) Blood on/in private property with no public access.

#### **B. Consider and Select Mitigation Method:**



1. Determine if blood or OPIM can be completely dissolved and neutralized with bleach/water solution and washed down into a storm drain effectively with no remaining contaminated pooling.
2. If wash down is possible, proceed with application of bleach/water solution and thoroughly wash down the material into the storm drain. **It is mandatory to notify Public Works Storm Water Management of this situation ASAP.**
3. If wash down is not possible on public property, the ranking on-scene officer will contact the on duty Battalion or Assistant Chief for instruction.
4. If an incident occurs out of the jurisdiction of the City of Coral Springs, the local emergency response authority shall be notified to mitigate these incidents.
5. If blood or OPIM is on private property, the local emergency response authority shall be notified to respond.

**C. Scene Control:**

1. It is the responsibility of CSRIPS to insure scene control and a presence on the scene until such time as the problem is mitigated, turned over the local emergency response authority.
2. CSRIPS is responsible for removing any soiled or bloodied patient care equipment or material (disposable or otherwise), which was brought to the scene by CSRIPS employees. Soiled medical supplies (sharps, dressings, bandages, gloves, etc.), blankets and/or other linens must be bagged, labeled and removed by CSRIPS employees from the scene for proper disposition (cleaning and disposal). **Under no circumstances are CSRIPS personnel to leave soiled patient care material or equipment on a scene, which was brought to the scene by a CSRIPS employee.**

**D. Contaminated Vehicles:**

It is the responsibility of the ranking on-scene employee to clearly identify any biohazard on any vehicle involved in an emergency. Identification will be both verbal and physically marking the exact part(s) of the vehicle contaminated. Marking the vehicle is best accomplished with a biohazard-warning label. Make sure that police officers, wrecker drivers, or any person who is taking control of a contaminated vehicle is advised of the potential hazard from blood or any OPIM.

**E. Documentation:**

In all cases of a biohazard incident, written documentation of the actions taken to mitigate the case will be completed. Make sure that identification is checked on those representing themselves as an owner/agent.



Documentation of names, mailing addresses, phone numbers and other pertinent information needs to be included as a minimum in the employee's report. If any difficulties, problems or unusual activities occur at the scene, these must be well documented.