9				
-	С	ode Black - Bomb Threat / Suspicious Object		
Identifier:		Version #:	1.7	
Folder:	IMS - CODES	Туре:	FORM	
Subfolder:		Effective on:	2024-06-18	



# **CODE BLACK**

# **Bomb Threat/Suspicious Object**

Written by: Reviewed by: Reviewed on: Renewed by: Renewed on:

Savana Admin Marino 2024-06-18 Approved by (sign.):

Approved by (name): Approved on: Revision Date:

#### INTRODUCTION

A **Code Black** (bomb threat/suspicious object) is initiated when a staff member receives any type of message indicating that an explosive device has been placed on hospital property. A **Code Black** provides a procedure for rapidly establishing full search routines.

#### **GENERAL INSTRUCTIONS TO ALL STAFF**

It is the responsibility of all staff to:

- Be familiar with the Code Black procedure.
- Report unusual packages/items to your immediate manager or designate.
- Upon hearing Code Black announcement, remain calm.
- Do not make any unnecessary/personal phone calls.
- All staff to search their department using their designated Code Black Search Checklist.
- Admin On-Call/Designate to record all staff on duty on the Emergency Code Staff Participation Record
- Participate in the debriefing session as required.

#### CODE BLACK PROCEDURE

- Staff receiving notification (phone call, email, etc.) of an explosive device will ensure that Code Black is announced immediately over the PA system.
- Notify administration on-call of the situation (do not leave a message) to initiate the Incident Management System.
- Call 911 and request the OPP.
- Incident manager or charge nurse to obtain call details and determine to search or evacuate.
- One designated individual from each department will report their findings to the Command Centre (Boardroom).
- During off-hours and weekends, the Charge Nurse will assign staff to a designated area and begin searching. Their placements will be documented using the Staff Placement Sheet.
- Debriefing session will be held following the completion of **Code Black**.

# NOTE: If threatening message is in a written format, limit handling. If received through email, leave message on screen.

#### INDIVIDUAL RESPONSIBILITIES:

#### SWITCHBOARD

When notified of a **CODE BLACK**, announce the following over the PA system **(DO NOT GIVE THE LOCATION)**:

Attention please, attention please Code Black, Code Black, Code Black

When directed, announce the following over the PA system:

Attention please, attention please Code Black all clear Code Black all clear Code Black all clear

#### Individual Receiving Call

- Remain calm.
- Keep caller talking (make written notes).
- Communicate to co-workers to initiate a Code Black by informing switchboard to make the announcement.
- Obtain as much information as possible from the caller.
- Complete a Code Black checklist (see Appendix A) and forward to the Incident Manager.

#### **INCIDENT MANAGER**

The administration on-call or designate will assume the responsibility of the **Incident Manager**.

- Ensure 911 has been called and notified of the situation.
- Assign staff to main entrance and emergency department entrance to prevent people from entering the building, unless they are seeking urgent medical attention.
- Establish a Command Centre in administration to receive reports from all areas.
- Provide pertinent information and general search instructions to searchers.
- Assign staff to search area and document on Staff Placement Sheet (Appendix B).
- In consultation with the OPP, decide if further intervention is required.
- Clear Code Black when appropriate.
- Facilitate a debriefing session to evaluate the incident.
- Complete a formal <u>Codes Evaluation Form</u> and forward to the Manager of Support Services (administration).

#### Departmental Manager or Designate:

- Ensure departmental search procedures are in place.
- Record staff on duty and forward to the Incident Manager.
- Designate appropriate personnel as searchers.

#### Searchers:

- Report to the Code Black Command Centre in administration.
- Staff will be assigned to search areas that they are familiar with.
- Search areas according to departmental procedures.
- Notify the Incident Manager of search results.

#### GENERAL SEARCH INSTRUCTIONS

- Do not rush; search carefully and steadily.
- Ensure that all locked and unlocked doors are opened and all rooms/areas are searched (including halls, stairwells, etc.).
- Enter area and do a quick visual scan prior to beginning search.
- Be aware of unusual smells and sounds.
- Search area in a clockwise fashion.
- Look at everything from ceiling to floor.
- Look under, on top, inside and behind everything, including doors.
- Search inside waste baskets, laundry carts and other containers.
- If you see any strange or unusual item, DO NOT TOUCH IT, inform the Incident Manager immediately.

## **APPENDIX A**

## **CODE BLACK CHECKLIST**

#### Information to obtain from caller:

1.	When is the explosive device set to explode:						
2.	Location:						
3.	Type of explosive device:						
4.	Description of device:						
<u>Ac</u>	ditional information:						
1.	Date and time of call:						
2.	Description of voice:	Male 🗆	Female	Youth 🗆			
3.	Approximate age:		Accent:				
4.	. Recognize voice? If so, who do you think it might be:						
5.	5. Indicate any background noises you hear:						
	Machinery D	Traffic □					
NOTES:							
			<u>.                                    </u>				
Sig	gnature:		Date:				

## APPENDIX B Staff Placement Sheet (con't)

Upper Level	Staff	Report
Nursing staff – Acute Care (2) (patient, equipment, supply, clean, dirty utility rooms, medication room and	 cart)	
<b>Clerical staff</b> (nursing station, conference room and supply room)		
<b>Nursing staff – LTC</b> (2) (resident rooms, equipment/supply, clean and dirty utility rooms, medication)	)	
<b>Recreation Staff/Nursing Administrat</b> (office, LTC dining room, copier area and spiritual room)	ive Assistant	
Housekeeping staff (all housekeeping closets, tub and show rooms, kitchenette, lobby, public washro		
Staff Ed. (office, telemedicine rooms)		
Employee Health (office)		
Finance staff (office)		
Social Worker (office)		
Pharmacy (office)		
Nurse Manager Acute (office)		