San Diego Parks and Recreation Department EMERGENCY PROCEDURES TAILGATE



Revised March 2021 DISTRIBUTE AND/OR POST RELATED HANDOUT MATERIAL

•Emergency Procedures Tailgate

- •Emergency Management Procedures Memo from the Director
- •Security and Emergency Procedures/Guidelines for Supervisors
- •Reporting Forms Summary Chart for Accidents/Injuries/Illnesses
- •Site Specific Emergency Evacuation Plan/Policy

SUPERVISORY RESPONSIBILITIES REGARDING EMERGENCY PROCEDURES

☑ Ensure appropriate staff have completed trainings in:

(a) First Aid/CPR/AED

Department Standard: <u>Every</u> employee in the Department is strongly encouraged to be trained in First Aid/CPR/AED.

Minimum Requirements Per Worksite:

- 1) Two trained staff onsite and available during all operating hours if at all possible; and
- 2) All staff working with children or performing labor-related functions are required by law to be certified.
- (b) **Office Safety** (all staff who work in buildings)
- (c) Hazardous Materials Training (all staff handling chemicals)
- (d) Appropriate Storm Water BMPs (all staff)
- (e) **Other site specific training:**
- Ensure all staff participate in an evacuation drill and in a building walk-through which needs to include the location of fire extinguishers, AED's, and utility shut off valves. (For a complete list of AED locations in the Parks and Recreation Department, contact the Department Training Office.)
- ☑ Inventory and maintain first aid kits/emergency supplies/spill kits in all City vehicles and at every worksite.
- ☑ Ensure Public Works Dispatch Center (PWDC) (AKA) Station 38 has <u>current</u> phone numbers for supervisors in your chain of command.
- ☑ Conduct emergency procedures training <u>annually</u> with every employee you supervise.
- ☑ Review all accident/injury/illness reporting procedures (list attached).

▶ REVIEW DEPARTMENT ROLE AND DIVISION PROCEDURES

EXPLAIN FIRST RESPONSE IF INCIDENT OCCURS WHILE AT WORK

- Determine seriousness of incident and:
 - (a) Provide first aid assistance **or**
 - (b) Call 911 (for emergency or life-threatening situations) or
 - (c) Call PWDC at 619/52-77660 (for vehicle accidents or if you need a City repair service to respond).
- Get additional help, if necessary, from staff, family members of the victim (if they are present), or onlookers.
- Notify supervisor immediately (if not available, begin calling up the chain of command until you reach someone; get assistance from PWDC at 619/52-77660 if you cannot locate a supervisor or if you do not have a current phone list at the worksite).
- Get names, addresses, and phone numbers of witnesses.
- Secure area/close facility, and/or manage cleanup.
- Complete and submit appropriate forms.

EXPLAIN ROLE AS CITY EMPLOYEE IF MAJOR INCIDENT OCCURS: <u>WHILE OFF DUTY -</u>

- Determine if your family/home situation is stable.
- Listen to radio/television for callback; or a supervisor may contact you by phone with instructions.
- If called back, you are considered emergency personnel and may be required to perform a variety of job duties unrelated to your current assignment; you may also be taking orders from emergency personnel.
- Be certain to have your City I.D. (or City uniform) when you report to the worksite in case access to the area is restricted.
- If unable to get to your normal worksite, you may be requested to report to the park or recreation facility closest to your home.
- Once you arrive at the worksite, the site supervisor will determine when you will be dismissed.
- If callback efforts are severely hampered and a supervisor is unable to reach you, it may be appropriate to walk to the nearest location providing emergency services (e.g., park, recreation center, etc.), identify yourself as a City employee, and offer assistance to on-duty emergency workers.
- Keep track of your work hours each day you are not reporting to your regular supervisor.

WHILE ON DUTY -

- Follow first-response procedures (see above) until emergency personnel arrive; specifically: ensure proper authorities (call 911 and supervisors) are notified; and provide immediate assistance to injured persons as you are able.
- Once emergency personnel arrive, follow their directions regarding what to do to assist and when to leave the scene.
- EXPLAIN SPECIFIC TASKS FOR JOB CLASSES WITH IDENTIFIED ROLES UNDER YOUR SUPERVISION (e.g., facility managers regarding sheltering procedures, large equipment operators, park forestry unit, etc.)
- CONDUCT A BUILDING WALK-THROUGH AND EVACUATION DRILL review your building Emergency Evacuation Plan/Policy and the location of all fire extinguishers, AEDs, and utility shut off valves.

► REVIEW RELEVANT ACCIDENT/INJURY/IILLNESS REPORTING FORMS

San Diego Parks and Recreation Department SECURITY AND EMERGENCY PROCEDURES

Follow these procedures for incidents or other emergencies that could be potentially dangerous to patrons and/or staff:

A. Prior to Any Incident:

- Employees who have not received site-specific emergency procedures should contact their supervisors for training.
- If in doubt about how to proceed before, during, or after any incident, contact your supervisor. DO NOT TAKE UNNECESSARY RISKS. IN ANY EMERGENCY PROCEDURE, CONSIDER YOUR SAFETY FIRST, YOUR PATRONS SECOND, THEN YOUR FACILITY/PARK.

B. Immediate Action – Shootings, Life-Threatening Situations:

If there is an active shooter in your building you have three options:

- 1. RUN
 - Have an escape route and plan in mind
 - Leave your belongings behind
 - Evacuate regardless of whether others agree to follow
 - Help others escape, if possible
 - Do not attempt to move the wounded
 - Prevent others from entering an area where the shooter may be
 - Keep your hands visible
 - Call 911 when you are safe

2. HIDE

- Hide in an area out of the shooter's view
- Lock door or block entry to your hiding place
- Silence your cell phone (including vibrate mode) and remain quiet

3. FIGHT

- Attempt to incapacitate the shooter
- Act with as much physical aggression as possible
- Improvise weapons or throw items at the shooter
- Commit to your actions.....your life depends on it

• If there is an active shooter outside your building you should:

- Immediately secure the building (close and lock all doors). Do not let anyone in or out of the building.
- Be familiar with the physical layout of your building, especially where the exit doors are located.
- **Call 911 and report the incident to the police**. Be very exact and specific when describing what has happened.
- Stay on the phone with the police dispatcher until the police arrive. Let the police dispatcher hang up first (make sure they have all the information they need).
- Cooperate fully with the police until the incident is over.
- You should always inform the dispatcher if people are injured and in need of immediate help.
- If your safety is endangered, do not go into an unsafe area to administer first aid. You should wait until the police secure the area to administer first aid.

C. Injuries/Accidents that Require Police or Medical Assistance:

If an injury or incident occurs that is not life threatening, and there is no potential danger to either patrons or staff, the following steps should be taken:

- Immediately investigate the incident thoroughly. Find out what assistance will be needed and contact the appropriate agency (police, fire, paramedics, ambulance, parents, family members, friend, etc.
- Try to keep the victim calm until help arrives. Do not move the injured person unless it is absolutely necessary.

D. Reporting Procedures:

- After the situation has been controlled, try to gather as much information regarding the incident as you can.
- Fill out a complete incident and/or accident report before you leave work and leave it for your supervisor.
- Immediately contact your supervisor or someone in your chain of command (District Manager, Deputy Director, or the Director) if you can't reach your supervisor.
- You will have to decide if the building should be closed for the remainder of the day/evening. Ask the police officers if they feel it is necessary to close. You can also ask any supervisor that you are able to contact. Factors to consider are the number of people involved in the incident and the potential for any further violence to occur.

ADDITIONAL GUIDELINES FOR SUPERVISORS

RECOMMENDATIONS FROM THE POLICE DEPARTMENT:

- Each employee should receive training annually on how to handle emergency situations.
- Periodic training/practice should continue on a regular, ongoing basis.
- A specific emergency action plan should be designed to protect employees and the public, taking into consideration the type of facility and the types of emergency situations.
- A mock emergency action plan should be done to determine the level of competency among supervisors and employees (i.e., hold drills).
- An emergency action plan should include discussion of earthquake preparedness, fire, bomb threats, shootings, and large fights with weapons.

ACTION PLAN FOR SUPERVISORS:

- At least two employees should be certified in First Aid/CPR/AED at each worksite during every work shift if at all possible.
- Supervisors ensure all staff are properly trained on their chain of command.
- An emergency procedures list should be readily accessible by every phone in the Department in every facility.
- Any followup trainings regarding procedures should be held at the site and should include the development of a specific plan for that site.
- Supervisors must hold tailgate meetings to:
 - (a) review emergency procedures for their parks/facilities, and
 - (b) explain how to complete appropriate incident/accident reports.
- Facility park staff should meet with Community Resource Officers to acquire their recommendations on how best to work with them and for assistance with the development of the emergency plan for the site.
- If helpful to Community Resource Officers or to your supervisor, or if required by your division, maintain an incident log (of gang situations or other disturbances) at your facility or park to look for trends, possible signs of problems, etc., and for use in justifying increases in security measures (lighting, staffing, etc.).
- All employees must be briefed on site-specific concerns (e.g., gangs in the area, emergency procedures for the specific facility or park, required forms).



INCIDENT/ACCIDENT REPORT

Do not use this form for vehicle accidents (RM 1551/1555)

Site:	Date of Oc	currence:		Time:	am/pm
Location (gym, field, etc.):			Ph	one:	
Staff Completing Report:		C	assification:		
1. Person Involved or Injured*: Name:					
Home Address:	-1.				Zip:
Parent/Guardian (minor):				acted: □N	
Phone:	Email:			_	_
2. Was SDPD called? ye					
If so, did they respond?					
Case Number:					
 * List additional persons involved/witnesses on 3. Description of Incident, Injury or 				:le);	
4. Staff Comments and Action Taker	ı (Be specific):				
Date report is submitted:		Employee	Signature:		
5. Supervisor's Comments, Recomm	nendations, and	Follow Up	:		
Date report is received:		Supervisor	Signature:		
6. District Manager/Deputy Director	Comments, Re	commenda	tions, and Follo	w up:	
Date report is received:		Manager S	ignature:		
If additional information, attach additional pages	S.				Revision 01/2020



INCIDENT/ACCIDENT REPORT

Do not use this form for vehicle accidents (RM 1551/1555)

PERSONAL DATA-INJURED PARTY

Patron Name:	Age:				
Address:		State:			
Phone: Ema					
Phone: Ema Family Contact/Relationship:				□No □Yes	
INJURY INFORMATION					
Description Injury (include location diagram) :					
WITNESS INFORMATION					
Name:	Age:		Gender:	$\Box M \Box F$	
Phone: Ema					
Witness Statement:					
Type of Injury: Abrasion Laceration F	Fracture 🗌 Sprain	🗌 Bee Sting 🔲 E	Burn		
☐ Other (specify) Injured Body Part: ☐ Head ☐ Neck ☐ Right A	Arm 🔲 Left Arm	🗌 Right Hand 🔲 Le	eft Hand		
🗌 Left Leg 📋 Right Leg 📋 Right Foot 📋	Left Foot 🛛 Trun	k (specify)			
☐ Other (specify) Were blood/bodily fluids present? ☐ No ☐ Ye		lood/Bodily Fluid Cor	ntact Report.		
Did victim refuse medical attention by staff?	No 🗌 Yes Did staf	f provide care? 🛛 🛛 🛛	Io 🗌 Yes		
First Aid Provided: CPR Flush area Band Other (specify)	aged 🗌 Ice pack	□ Splint □ Direc	t Pressure		
	Remained in area?	No 🗌 Yes			
Was EMS called? I No Yes					
Time EMS called: am/pm Time EM Was the victim transported to an emergency facilit	$\frac{1}{N} = \frac{1}{N}$	am/pm Caller:			
If yes, where?		n return to activity?		Yes	
	·				
Patient Signature Date	Pare	ent Signature (minor)		Date	
Printed Name/Classification of Staff Reporting		Staff Signature		Date	
Supervisor Signature Date		Manager/SRS Signature		Date	

Instructions for Completion and Submission of Report: (Do not print/submit this page)

- A This report should be completed when documenting problems encountered at pools, parks, recreation facilities, and open space (i.e. complaints, injuries/accidents (non-vehicular), confrontations or patron discipline, police contacts including 911 calls reporting highly unusual circumstances, damage or destruction of equipment and/or facilities).
- ^B Type or print report in ink completely, accurately, and immediately.
- C Immediately notify your supervisor that the report is forthcoming and submit completed report to Division Headquarters within 24 hours following the incident.
- D Descriptions must be factual and devoid of editorial comments. Use proper grammar and complete sentences.
- F Attach additional pages as necessary. The description of the incident/accident should provide a detailed description of the circumstances when the incident/accident occurred, including what the patron was doing when they were injured.
- G When completing section's 5 and 6 on page 1, please indicate if additional follow up is required and document accordingly (i.e. Get it Done, Environmental Service Requests, etc)₃

REPORTING FORM SUMMARY CHART FOR ACCIDENTS/INJURIES/ILLNESSES				
Incident Type	Form No.	Revision Date	Form Title and Description of Use	
Minor Injury	RM-1568	4-15	Report of Minor Injury: If medical help other than first aid is required, do not use this form.	
In ductorial Inform	RM-1634	12-02	<i>Medical Status Report for Occupational Injury or Illness:</i> Injured volunteer/employee must submit each time he/she sees a doctor for a work-related injury. Doctor provides this form.	
Industrial Injury	RM-1642	10-04	<i>Employee's Claim for Workers' Compensation Benefits:</i> Give as soon as possible to the injured volunteer/employee (within 24 hours of injury notification).	
Communicable Disease Exposure	None	No Date	<i>Blood/Bodily Fluids Contact Report (Bloodborne Pathogens):</i> Complete if exposed to blood or other bodily fluids. If fluid contacts any mucus membranes, such as eyes or mouth, broken skin, or if skin is punctured by contaminated sharp object, such as a hypodermic needle, obtain immediate medical attention. (Report found in "Blood and Bodily Fluids/Solids Treatment and Disposal" tailgate.)	
-	RM-1675	4-93	<i>Hepatitis B Vaccination Form:</i> Election to participate or not in Hepatitis B Vaccination Program and record of vaccination dates.	
Incident/Accident Report	None	1-20	San Diego Parks and Recreation Department Incident/Accident Report: Use this report when documenting problems encountered at pools, parks and recreation facilities (i.e. complaints, confrontations or patron discipline, police contacts including 911 call reporting highly unusual circumstances, damage or destruction of equipment and/or facilities).	
Employee Injury	None	1-20	Supervisor's Accident and Injury Investigation Report on Staff/Volunteers: Use to document supervisor's investigation of employee/volunteer injury.	

QUICK REFERENCE PHONE NUMBERS					
Injury Call-In-Center	1-800-427-7980	Supervisors Only – To Report Employee/volunteer Injuries			
City of San Diego Safety Office	1-619-23-66229	Risk Management Department, General Safety Information			
Cal/OSHA Call in Center	1-619-767-2280 1-800-321-6742	Cal/OSHA reporting within 8 hours of the injury After hours phone number			
Parks and Recreation Department Safety and Training Office	1-619-52-58245	Department Training Information			
Public Works Dispatch Center (AKA) Station 38	1-619-52-77660	Report Accidents and Incidents			
Worker's Compensation	1-619-23-66395	Worker's compensation Information			