Department:	Facility Management Safety (FMS)		
Document:	Administrative Policy And Procedure		
Title:	Code Black (Bomb Threat)		
Applies To:	All MCH Staff		
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HEALTH HOLDING

HAFER ALBATIN HEALTH CLUSTER MATERNITY AND CHILDREN HOSPITAL

1. PURPOSE:

1.1 The purpose of the policy is to outline to staff how to recognize a bomb threat and what action to take if a bomb threat occurs.

2. DEFINITIONS:

2.1 **BOMB THREAT** – usually verbal or written, to detonate an explosive or incendiary device to cause property damage, death or injuries, whether or not such a device actually exists.

3. POLICY:

3.1 Hospital staff who received legit information regarding bomb threat will therefore notify his/her immediate supervisor.

3.2 **Bomb threat** (CODE BLACK) will follow the hospital standard paging system process same as the other codes. (Dial 2222, state the code and the exact location).

4. PROCEDURE:

4.1 Notification of a bomb threat can be made at any time and can be made and delivered by several means, usually anonymous, but all must be considered seriously.

4.2 **Telephone Calls:**

4.2.1 With direct dialling into a hospital, potentially any person can be on the receiving end of a bomb threat. In such circumstances staff should be mindful of the actions to be taken to help them deal with such a call:

4.2.1.1 Let the caller finish their message without interruption.

4.2.1.2 Try to keep the caller on the line as long as possible and ask the caller where the bomb is located, when the bomb is going to explode, what kind of bomb it is and what it looks like, who placed the bomb, when and why.

4.2.1.3 Ask for the name of the caller and where they are calling from and whether they intend to call back.

4.2.1.4 Make note of the caller's voice, accent, tone, foul language, etc.

4.2.1.5 Listen for background noises.

4.3 **Letter Bombs / Contaminated Letters and Packages:**

4.2.3 Devices of this sort can take many forms and are designed to maim or kill the person opening them. Possible indications of this type of device are:

4.2.3.1 Grease marks on the envelope or wrapping.

4.2.3.2 An unusual odour, such as almonds or machine oil.

4.2.3.3 An unknown powder or liquid substance is leaking from the package.

4.2.3.4 Visible wiring or tin foil, especially if the wrapping has been damaged.

4.2.3.5 The envelope or package is heavy for its size.

4.2.3.6 The distribution of weight may be uneven, a flexible envelope may have rigid contents.

4.2.3.7 The package has been excessively wrapped.

4.2.3.8 There may be poor handwriting, spelling or typing.

4.2.3.9 The name and, or address may be misspelled or incorrect. The package may come from an unexpected source.

4.2.3.10 Does the postmark agree with the sender's address if shown? Is the postmark recognized?

4.2.3.11 There may be too many stamps for the weight of the package.

4.2.3.12 The package may be hand delivered from an unknown source.

4.2.4 If a suspicious package is received the following actions should be taken (note comments on contaminated packages below):

4.2.4.1 The package or letter must immediately be placed on a flat surface. It is more likely to be an incendiary device than a bomb; i.e. it is designed to start a fire.

4.2.4.2 Do not shake it, squeeze, or open the letter or package.

4.2.4.3 Turn off all air conditioners, fans, photocopiers, printers, computers and heaters within the room where the letter/package is located.

4.2.4.4 Inform the Security Department.

4.2.4.5 Call the Police.

4.2.5 If the letter/package has been opened and appears to contain a chemical or biological contaminant (such as white powder or unexpected liquid substances, unusual musty smell), the priority is to prevent spread and manage the situation:

4.2.5.1 The package or letter must immediately be placed in isolation and away from water, sand, chemicals, heated surfaces, naked flames and gaseous substances.

4.2.5.2 Do not shake, squeeze, or handle the letter or package more than necessary;

4.2.5.3 Items of mail should be placed in a transparent, sealed plastic bag or container, if a bag or container is not available then cover it with anything to hand e.g. clothing, paper, waste bin and do not remove this cover.

4.2.5.4 Turn off all air conditioners, fans, photocopiers, printers, computers and heaters within the room where the letter/package is located.

4.2.5.5 Close all windows and evacuate the room, lock all doors and leave the keys in the lock.

4.2.5.6 Place a clearly visible warning on the door.

4.2.5.7 Inform the Security Department, or out of hours the Duty Manager, of the situation as soon as the room is vacated.

4.2.5.8 Call the Police.

4.2.5.9 Go to an isolated room and avoid other people if you can. It is vitally important that you segregate yourself and others who may have come into contact with the suspicious package.

4.2.5.10 Reassure your staff or colleagues. It is unlikely that they are contaminated and they will get medical treatment if required.

4.2.5.11 Do not rub your eyes; touch your face or other people.

4.2.5.12 Thoroughly wash your hands in soap and water as soon as possible.

4.2.6 Car Bombs And Other (Suspicious Packages):

4.2.6.1 A suspicious object is an item, which may contain a bomb, which is out of place and which cannot be accounted for. Any suspicious package or box found must be treated with extreme caution, and must be reported immediately.

4.2.6.2 Unidentified parcels, packages, bags and other items left unattended for some time must be considered as suspicious and reported to the most senior person on duty, if applicable the Site Security Officer, and during normal working hours the Trust's Security Advisor in the first instance. Packages of this nature must not be touched or tampered with in any way.

4.2.6.3 Attempts must be made to identify the owner of the package. Where this fails and cause for concern remains, the Police must be called upon to advise the next possible course of action.

4.2.7 Alert Process:

4.2.7.1 In all cases, the member of staff receiving the threat, or identifying the possible threat, must report it to their immediate Supervisor.

4.2.8 Receiving A Telephone Or Verbal Threat:

4.2.8.1 In usual circumstances the information regarding the bomb threat will be relayed to the Switchboard by telephone or by runner.

4.2.8.2 All staff that may receive such a call should remain calm throughout and use the checklist performance to guide them.

4.2.8.3 Keep the caller on the line as long as possible.

4.2.8.4 Ask the caller to repeat the message.

4.2.8.5 Ask the caller his/her name.

4.2.8.6 Ask the caller where the bomb is located.

4.2.8.7 Record every word spoken by the person making the call.

4.2.8.8 Record time call was received and terminated.

4.2.8.9 Inform the caller that the building is occupied and the detonation of a bomb could result in death or serious injury to many innocent people.

4.2.9 Radio Transmitter And Receiving Devices:

4.2.9.1 As soon as a specific area has been identified from the caller, or a suspect package has been located, all devices capable of picking up or sending radio signals must be excluded from use in the area, for example mobile phones, radio pagers, 'walkie-talkies'.

4.2.9.2 During the management of a bomb threat, communication will be by the telephone and person to person. Until such a time when it can be assured that a radio signal presents no risk to detonate a device, this advice must be maintained.

4.2.9.2.1 Response to the Threat:

4.2.9.2.1.1 With the information provided on the checklist, the most senior person on site or the HOSPITAL DIRECTOR/PRO will make a decision based also on advice from other members of the team, including the Police to;

4.2.9.2.1.1.1 Do nothing – decision having been reached that the call was a malicious hoax;

4.2.9.2.1.1.2 To search and evacuate if a suspicious object is found;

4.2.9.2.1.1.3 To evacuate all – except search teams and essential staff, then to carry out a search and evacuate all persons if a suspicious object is found;

4.2.9.2.1.1.4 To evacuate all immediately without searching.

4.2.10 Evacuation:

4.2.10.1 If a suspicious package/object is found, and depending on the Security Advisor or Duty Manager's decision, evacuation commences as for fire via the nearest available exits as quickly and efficiently as possible, the only difference being:

4.2.10.1.1 Rooms should be left with windows open to minimize any blast.

4.2.10.1.2 Lights should be left on and machinery shut down.

4.2.10.1.3 Staff must take their personal belongings with them, to assist eliminating suspicion over articles of property left behind after evacuation.

4.2.10.1.4 The assembly point may be different from that used in a fire.

4.2.11 Assembly Points:

4.2.11.1 Where convenient, fire assembly points can be utilized for this purpose, but only if they are located at a distance of at least 400 meters from the suspected bomb site. Safe assembly points are best situated behind a solid building at a distance away from the blast site.

4.2.11.2 Staff, patients and visitors who have been evacuated may have to remain outside for a long time before the all clear is given. In these circumstances, it is advisable if some form of shelter could be made available to cater for individual needs.

4.2.11.3 Car parks should not be designated as assembly areas.

4.2.11.4 A personnel check must be initiated to account for all evacuated and check that areas are also empty of visitors who should be recorded during evacuation. They must be

instructed by senior managers/officers/staff not to re-enter until the building is declared safe.

5. MATERIALS AND EQUIPMENT:

5.1 Telephone and pager

6. RESPONSIBILITIES:
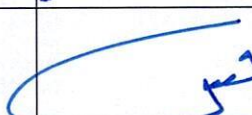
6.1 All MCH Staff

7. APPENDICES:

7.1 N/A

8. REFERENCES:

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8.2 Mass casualty management systems. Strategies and guidelines for building health sector capacity. Geneva, World Health Organization, 2007 (http://www.who.int/hac/techguidance/MCM_guidelines_inside_final.pdf, accessed 28 May 2011).

8.3 National Incident Management Resource Center [web site]. Washington, D.C., Federal Emergency Management Agency, 2011 (http://www.fema.gov/emergency/nims/Glossary.shtm#S, accessed 28 May 2011).

9. APPROVALS:

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