

UAB School of Medicine Business Continuity Plan

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Introduction

An emergency or "disaster" is any event that seriously disrupts the normal functions of the UAB Campus, regardless of the cause. Special detailed plans are included which address scenarios such as fire, bomb threat, loss of electrical power, infectious disease outbreak, radiation/chemical spill, dangerous person or active shooter, severe weather, and medical emergencies.

Administrative Notification

In the event of any disaster, contact UAB Police by dialing "911" from any UAB phone or by dialing (205) 934-3535 from a mobile phone or public phone.

Establishing a Command Center

The command center represents key leadership (Dean, Executive Vice Dean, Senior Vice Dean, Senior Associate Deans, representatives from Communications, IT, and facilities/space) within the SOM for our mission areas (patient care, research, and education). The command center will be responsible for interfacing with central administration, UAB Health System, UAB hospital, Children's of Alabama, and Birmingham VA Medical Center, creating SOM specific processes and guidelines and messaging. The structure for the Command Center is provided in **Appendix A**.

Important Numbers

- UAB Police Emergency – (205) 934-3535, (205) 934-4434 or 911 from UAB phone
- Building Administrators – Amanda Hanninen (205) 882-1377, Robert Witherspoon (205) 612-7024, Marcus Gains (205) 864-4954, and Kevin Bell (205) 410-6199
- UAB Maintenance – (205) 934-9675
- UAB Campus Safety – (205) 934-2487
- UAB Telecommunications – (205) 934-7777
- Environmental Health & Safety (205) 934-2487
- UAB Emergency Operation Center (EOC) – (205) 975-1000
- UAB Facilities/Building Services 24/7 Dispatch – (205) 934-9675

Communications

In order to ensure the most effective communications during a crisis, the SOM needs to communicate consistent messaging frequently and as transparently as possible. Our goal is to be a trusted resource for all of our audiences, and to reach them using the most relevant channels with accurate and timely information.

Although this plan is focused primarily on reaching internal audiences, we should assume that information distributed internally would be shared externally as well.

NOTE: All SOM crisis communications will be closely aligned with University Relations and Health System Marketing as part of an institutional crisis plan.

SOM Audiences—ensure that we have up to date and accessible contact lists for the below:

- Faculty
- UAB Deans & President’s Cabinet
- UABHSF Board
- Staff
- Student Assistants and Work Study Students
- Medical students (current and, where applicable, prospective)
- Coordinate with GBS (graduate students)
- Post Docs—Coordinate with GBS
- Fellows & Residents
- Alumni
- Board of Visitors
- Board of Trustees
 - State and federal leaders and influencers
- Governor and their Chief of Staff, Five County Commissioners
- Donors—in collaboration with SOM Advancement
- News media—outreach lead by University Relations
- General Public—outreach lead by University Relations
- Patients – outreach lead by Health System Marketing

Communications Process

- As an overall Command Center is developed, we will need to ensure that a communications representative(s) from the SOM is included who can disseminate timely information to the rest of the communications team and others for distribution.
- Determine an approval line of command – The Dean may be too busy to approve all communications; work with the Dean to determine which communications they MUST approve.
 - Recommend Executive Vice Dean and Senior Vice Dean act as proxy; other leaders to be tapped based on specific communication topic
- Determine most appropriate spokesperson(s)
 - For most school-wide messaging, our spokesperson would typically be the SOM Dean; however, in a medical crisis such as COVID-19, there were others such as Dr. Jeanne Marrazzo, Division Director of Infectious Diseases, serving in that role as well due to their specialty expertise.
 - There may be situations and specific messaging that should be delivered to internal audiences at a more local level—department chairs, division directors, and managers.
 - For medical students, consider messaging from the Senior Associate Dean for Medical Education or Associate Dean for Students, who are leaders who students trust, expect to hear from, and would direct specific questions on a situation and its potential impact to their medical education.
 - For prospective medical students, relevant messages would likely flow from the Associate Dean for Admissions and Enrollment Management.

- Create a communications advisory board to cover all mission areas
 - Include Executive Vice Dean, Senior Vice Dean as well as subject matter experts – two Executive Administrators (1 from JHS department and from clinical department); two Department Chairs (1 from JHS department and from clinical department); medical education representatives (one from UME and one from GME); legal counsel, Human Resources, University Relations, and content experts from SOM communications
- Ensure that communication’s representative (Executive Director) participates in ongoing discussions regarding the current situation to both advise and proactively vet information that needs to be distributed
- Develop consistent mechanisms to engage with our audiences; timing and frequency will depend on the specific crisis, and examples include:
 - Emails 3-5 times/week from the Dean with updates in each mission area
 - Include video communication for personal connection during a crisis
 - Emails are from the Dean himself with easily digestible news that links to other details when needed
 - Ongoing and consistent town halls – to be conducted virtually, if required
 - Daily email update to external leaders in the State, including the Governor and their Chief of Staff, County Commissioners, and key UAB stakeholders
 - Opportunities for audiences to ask questions, in order to facilitate two-way dialogue and not just pushing information out (‘Ask the Dean’, submitting questions in advance of town halls, etc.)
 - Use of existing platforms/meetings such as Grand Rounds, as times are already committed on schedules
 - Other tools available include:
 - Twitter
 - Facebook
 - Zoom
 - Website
 - Teams
 - Slack
 - Skype
 - Jabber
 - Dashboard with status updates
 - ONE
 - Outlook email
 - Marketing Cloud for mass distribution of emails; ability to track open rates
- Utilize department-level communications staff to share messages and ensure consistency of messaging
 - Gather content from them as well

Communications Protocols

- Work with University Relations to determine approvals needed for any crisis-related communications (provost office, etc.); communicate and enforce that across the SOM

- Develop **social media guidelines and best practices** to be shared across the SOM
 - Focus most social media content on helpful information concerning the situation and re-purposing of existing content, so we can ensure presenting a consistent message across UAB and UAB Medicine
 - Employees will want to share, and they can be viewed as spokespeople
 - Offer them information to push out on their social media accounts
 - Remind them not to share confidential information or anything that could be considered expert knowledge of a situation
 - Avoid sharing overly celebratory news, etc. during a crisis situation so as not to appear insensitive to the situation; positive news can and should be shared but evaluated on a case-by-case basis
 - Post and share often, both from UABSOM accounts and the Dean's social accounts
 - Limit creation of new social media accounts by Departments and Units in the School of Medicine, such as Facebook and Twitter, especially for those who do not have a dedicated communicator
- Develop **newsletter guidelines** to be shared across the SOM
 - Similar to the above, focus most newsletter content on helpful information concerning the situation and re-purposing of existing content so we are presenting a consistent message across UAB and UAB Medicine
 - Still produce newsletters on a regular basis if possible to project some sense of normalcy and control
 - Be cognizant that anything in an internal newsletter will likely be shared externally

Collaboration

Proactively collaborate with the below groups on messaging that will potentially overlap

- Office of the Vice President for Research
- Graduate Biomedical Sciences

Alternative Communications Strategies

As all employees receive information differently, we will need to employ a wide variety of communications tools to ensure that our message is delivered accurately. During a crisis, we will utilize these mechanisms on a consistent and frequent basis so we are protecting the safety of all SOM employees as well as keeping them informed of vital information. These tools include the below:

For issues involving on campus facilities:

- SOM Facilities alerts
- Pager/Vocera messages
- Emails
- B-alerts

For sharing information broadly in a crisis situation:

- Mass emails from the Dean, sent through marketing cloud platform, with links to other details and sources as needed; marketing cloud has the ability to track open rates and see exactly who has opened emails, if that is ever required
- Specific emails to medical students segmented by class; from the most relevant leader
- Ongoing and consistent town halls for all audiences – virtually if required
 - Record and post for those unable to join
- Opportunities for audiences to ask questions to facilitate two-way dialogue and not just pushing information out (Ask the Dean, submitting questions in advance of town halls, etc.)
- Other tools available include:
 - Social media
 - Twitter, Facebook
 - SOM communications staff manage and monitor these pages and can push information out and ask others to share including UAB Medicine, UAB and individual super users
 - Zoom
 - For town halls, team meetings, etc.
 - Website
 - Information can be posted prominently on the homepage as needed
 - Teams
 - Outlook tool that can also be used for town halls as well as individual team communications
 - Slack
 - Group slack channels exist primarily among teams and can be a useful way to communicate when working remotely due to a crisis
 - Video messages
 - Distributed via email or newsletter; from leadership to be able to explain a situation or be a calming presence
 - Digital newsletters
 - Use these resources as they already have a built in audience; can convert most content to be issues related
 - Skype
 - Only available on the Health System platform
 - Dashboard with status updates
 - Sent out to a specific audience with approved statistics and updates
 - ONE
 - Available to post information that needs to be password protected; we can include a link in any communications
 - Outlook email
- Research (see also Appendix B for Continuity Planning & Recovery Guide)

Essential Functions and Operations (Research)

Departmental Essential Functions for Continuity of Research Operations

- Crisis and recovery plan development, implementation, and updates
- Emergency contact information
- Order of Succession
- Communication plan
- Prioritization of essential functions related to research operations

- Impacted programs and consequences caused by disruption of essential services
- Assign task and responsibilities for maintaining departmental functions related to research operations
- Financial
- Effort and Payroll
- Grant submission and reporting
- Building and infrastructure maintenance
- Managing anxiety and wellbeing

Research Laboratories

Laboratory Profile

- PI
- Location
- Lab manager/supervisor
- Emergency Contact
- Staff
- Trainees
- Emergency response team
- Emergency response plan established and revision date
- Continuity plan and revision date

Establish Emergency Contacts (on and off hours if possible)

- Safety (police, fire, OH&S...)
- Departmental
- Administrative
- IT
- University
- Laboratory
- Facilities and building manager
- Lab Floor
- Finance
- Health
- Funding

Determine Potential Risk and Threats to Research Operations

This would be related to the information being identified above and having a plan for each of these (power, loss of heating or cooling, loss of ventilation, weather, flood, pathogen in animal colony, pandemic, terrorism, equipment loss, facility and infrastructure damage....)

Determine Essential Equipment, Resources, and Supplies Related to Research Operations

- Identify specialized research equipment
 - List of essential laboratory equipment, purchase information, detailed

- o specs, where it is located, and who is trained to use the equipment
 - o Computer and IT needs
 - o Other location for similar equipment for backup usage
 - o Special operational requirements for essential equipment
 - o Extended service agreements
 - o Emergency backup or alternative power sources (UPS?) and how long can it go without power
 - o Warning sensors and systems
- Essential and unique resources related to research
 - o Identify important/difficult to regenerate resources related to research operations
 - o Establish preservation plan (Cryo-preservation program - animal, cells, and important samples) along with tracking of resources
 - o Identify key personnel to maintain resources during crisis mode
 - o Establish preservation redundancy
 - o Identify labs with similar resources
 - o Establish a recovery and verification program
 - o Annual test of recovery program
- Essential supplies and vendors
 - o Identify key supplies needed for research continuity
 - o Vendors/backup vendors and contact information

Education

UAB must ensure that its graduates meet their educational program objectives (EPOs), course and clerkship learning objectives, and required clinical experiences even during the most challenging of times. The goal of accreditation is to assure all stakeholders (i.e., the public, medical students, medical schools, graduate medical education programs, health systems, licensing bodies, and Department of Education) of educational program quality.

Please note guidance for graduate students (GBS), postdoctoral trainees, and undergraduate students are included in continuity plans of these respective areas.

- UAB SOM faculty has **defined educational program objectives (EPOs), graduation requirements, and the assessments used to ensure that those objectives and requirements are met.** In the event that UAB SOM must change the mechanisms through which medical student learning occurs (e.g., online content delivery and/or interactive work) and is assessed (e.g., paper cases, simulation exercises when onsite clinical interactions might be limited), the LCME Secretariat can consult and provide guidance; however, the LCME does not have to be notified of these adjustments in instructional and assessment methods.
- **Interruption, postponement, and reorganization of clerkships or required clinical experiences:** Should interruption or postponement of clerkships or other required clinical experiences because of the real and important pressures and stresses of the clinical environment, elective weeks are available to adjust students' clinical

training schedules without having to delay completion of these required experiences before graduation. LCME understands the need to repurpose elective time to achieve the required clinical experiences, but also **recommends that all changes in the required clerkships pass through the curriculum governance committee** (i.e., Medical Education Committee and Student Academic Standing Committee) prior to implementation.

- o Example 1: Some required fourth year clerkships (typically, emergency medicine, critical care, and neurology) may be delayed or cancelled and/or there can be a block of time when the school has cancelled in-person clinical activities in general. The options for fourth year students depend when and if these experiences become available. If they do become available, schools may eliminate one or more electives so that these required experiences can be accommodated. If these clerkships will not be available at all for fourth year students, LCME suggests that the school examine the clerkship objectives and required clinical experiences to determine whether they have been addressed in other experiences earlier in the curriculum. In this way, **the curriculum committee and the student promotions committee can attest that the required objectives have been addressed at some point in a student's curriculum and that the student has met graduation requirements.**

- o Example 2: A similar situation may exist in the third year clerkships, as the teaching time in the third year is being diminished by the cancellation of clinical activities at schools for two or more weeks. Using the same principle that the end point is ensuring that **the students meet the required learning objectives and the schools' educational program objectives – not the time over which they do so - schools may shorten clerkship length while preserving the expected objectives, content, and assessments.** Again, there are opportunities to identify other segments of the curriculum where some clerkship objectives have been addressed. Also, some objectives in the clinical curriculum, like those in the pre-clerkship curriculum, may be addressed virtually.

- o Given the nature of the required clinical experiences and skills, **the LCME standards do not support a complete clerkship being taught online and the standards do require that all required clinical encounters be satisfied by alternate means.** However, some content may be suited to an online/virtual format. The LCME has not set a limit on online/virtual clerkship time, so it is advised that the Secretariat be contacted to discuss plans as they are prepared and developed for review and approval by the curriculum committee (i.e., Medical Education Committee and Student Academic Standing Committee).

- **Reorganization of clerkship placement and length:** Necessary reorganization may impact the transition from the pre-clerkship to the clerkship phase of the curriculum and/or the move from the third to the fourth year of the curriculum. If there is an overlap between classes, UAB SOM should determine if there are adequate resources (faculty, patients, and space) to support the students in the overlap period.
 - **Comparability of new clerkship assessments:** Challenges to utilizing typical methods of assessment in the clerkships (e.g., subject examinations and standardized patients) may require creating alternative approaches. Comparability would require that the new methods also systematically and comprehensively assess the clerkship objectives. This may affect the ability to use the same grading rubric that was applied to students who took the clerkship earlier in the year. For example, there may be a move to a pass-fail system for students in this part of the year. The LCME does not have an expectation that a new grading rubric be applied retrospectively; there should be consistency for students across clerkships from a time certain. The MSPE should reflect this adjustment to the clinical grading scheme.
- If **significant changes in the structure** (e.g., major shift in clinical training sites from the inpatient to outpatient setting), **timing** (e.g., delay in student progression to graduation), duration (e.g., below the 130-week expectation), or **location** are being considered, consult the LCME Secretariat (lcme@aamc.org). A (confidential) conversation about the particular situation under consideration should take place before notifying the LCME of major curriculum changes being anticipated/made.
- **Early graduation considerations:** UAB SOM should review educational program objectives (EPOs), the learning objectives of required courses and clerkships, and required clinical experiences and skills. **If students have met these requirements and been assessed on these required learning objectives, they may be eligible for early graduation.** UAB SOM should confirm the eligibility of each student with the Medical Education Committee and Student Academic Standing Committee.
 - Electives, by definition, do not have required learning objectives; therefore, UAB SOM can choose to waive, after review and approval by the Medical Education Committee and Student Academic Standing Committee, graduation requirements based upon a requisite number of elective weeks.

Potential Threats

Bomb Threat

It is the responsibility of the local police department to investigate all suspected bombs and reports

of bombs being placed on campus property and coordinate evacuation, searches, and removal of suspected explosive devices. This shall be accomplished in cooperation with staff, fire department, and other agencies, which may be called to assist.

- If you receive a bomb threat, use the bomb threat check list to gather all pertinent information. (See attached Appendix D).
- Report the bomb threat and all available information to the UAB Police by dialing “911” and your supervisor.
- Notify the Building Administrator or designee who will communicate with the police department, obtain instructions, and make an evacuation determination based on the credibility of the threat.
- Do not advise the general public. **Allow business as usual until directed otherwise.**
- If evacuation is necessary, UAB Police, the Campus Safety Coordinator, the Building Administrator or designee, and possibly other building representatives will notify each floor of the need to evacuate. If the building fire alarm system is equipped with an "all call" feature for public address, the evacuation will be announced building-wide by UAB Police. The fire alarm may also be used to expedite evacuation. Do not make a general announcement that the reason for evacuation is a bomb. Only state there is an "emergency situation" and that everyone must evacuate and go to their designated gathering point for their department.

Loss of Electrical Power

Upon loss of power, remain calm and notify Campus maintenance dispatch immediately at extension (205) 934-5353.

- Where available, the emergency generator will transfer power upon loss of electricity. It is important that all staff be trained that the switch to emergency power is not instant. There will be a brief delay. Also, not all areas have emergency power. Light switches and electrical outlets on emergency generators are red and easily identified. Critical equipment should be plugged into these red outlets.
- **Egress lighting** - All areas have egress lighting at a minimum in order to maintain enough light to navigate corridors and stairs. However, this lighting is very dim compared to normal lighting levels. It is important to keep evacuation routes and corridors clear of all clutter that could pose a hazard in dim light and slow or obstruct evacuation.
- All non-essential equipment should be turned off until power has been restored.

Loss of Communications

- If the telephone system is lost, avoid attempting to use the phone.
- Designate one individual to check the phone periodically.
- Use cellular phones to maintain essential communications.

Radiological Spill Response Procedure for Large Spills

Major spill involves one or more of the following:

- Personnel contamination
- Locations outside approved work areas
- Involves radioiodine

- Involves alpha-emitting radioactivity
- Involves powders or volatile/airborne material
- Radioactivity greater than 1.0 mCi of an isotope with >14 day $t_{1/2}$
- Unshielded non removable radiation exposure rates that exceed 2 mR/hr

CALL FOR HELP: Notify the Radiation Safety Program (RSP) and/or area point person immediately.

PEOPLE FIRST: Always attend to any injured persons first.

NOTIFY: Notify all persons in the area where the spill occurred and evacuate the area if necessary.

PREVENT THE SPREAD: Cover and/or corral the spill with absorbent paper or cloths

SHIELD THE SOURCE: Shield the spill/contaminated area. Take care to prevent spreading the contamination or significantly increasing your radiation exposure. Quickly withdraw to a safe distance when needed.

CLOSE THE ROOM: Leave the room, if necessary. Post the area and prevent unauthorized entry until unrestricted entry has been re-established by the UAB Radiation Safety Officer or designate.

VENTILATION SYSTEM: Do not allow the ventilation system to spread or transfer contamination.

SURVEY: With the appropriate survey instrument, thoroughly survey the area, hands, clothing, and shoes. Perform an extensive wipe survey using the appropriate energy windows. The wipe test must be comprehensive enough to certify that no contamination remains. The wipe test must be comprehensive enough to certify and delineate areas free of contamination versus those that are not.

PERSONNEL DECONTAMINATION: Remove contaminated clothing, flush contaminated skin with lukewarm water, and then wash with mild soap. If contamination remains, induce perspiration by covering the area with plastic. Then wash the affected area again to remove any contamination that was released by the perspiration.

RESTRICT: Monitor all personnel suspected of being contaminated. They should not be allowed to freely leave the area until they have been adequately interviewed and surveyed.

CLEAN UP: Use disposable plastic gloves and, if available, remote handling tongs to carefully clean the spill from the outside inwards. Fold the absorbent paper and pad. Insert into a plastic bag and dispose in the radioactive waste container. Include all other contaminated materials such as plastic gloves. The RSO or area point person will supervise the cleanup of the spill and will complete the Radioactive Spill Report and the Radioactive Spill Contamination Survey report forms

REPORT: Report the incident to the Radiation Safety Program and/or area point person immediately, and ensure that incident is reported as required in accordance to UAB reporting regulations.

Personnel Contamination

Implement the “Internal/External Dose Determination Protocol”

Contaminated clothing should be removed and stored for further evaluation by the RSP.

If the skin is contaminated, flush and wash thoroughly with mild soap and lukewarm water and notify the Radiation Safety Office immediately. Be advised that Radiation Safety may require bioassays for internal dose determinations.

Contaminated areas of the body need to be identified using appropriate survey methods. Do not use any decontamination methods that may spread material, increase penetration into the body, or cause spread to a wounded area. Loose particles may be removed by gently applying the adhesive side of tape to the particles attached to skin. Most contamination may be removed by running water over the contaminated area. Use soap or detergent if water by itself does not remove all the contaminants and by applying **gentle** scrubbing. Avoid harsh scrubbing which may increase skin penetration. If decontamination of personnel was not fully successful, consider inducing perspiration by covering the area with plastic. Then wash the affected area again to remove any contamination that was released by the perspiration. If contamination persists, stronger decontamination methods may be necessary. Contact the Radiation Safety Office for further instructions.

Emergency Contact Information

Should you encounter a radiological spill or a lost radioactive source, please do the following:

Normal Business Hours: (Monday – Friday: **8:00 a.m. - 5:00 p.m.**)

Contact the UAB Department of Environmental Health & Safety (EH&S) at (205) 934-2487

During Off Duty Hours (Holidays and hours outside of normal working hours)

Contact UAB Police Dispatch at (205) 934-4434 **and** Contact UAB Connect (Radio Paging) at (205) 934-3411 and ask for the Health Physicist On-Call (HPOC), at pager #7746.

If you cannot get the HPOC, then contact the UAB RSO at (205) 383-5228.

Spills – Kits and Cleanup

If you work with chemicals or biologicals:

- Be prepared to handle spills and releases.
- Know the potential hazards in your work area.
- Know what can happen if a chemical or biological is released.
- Use proper Personal Protective Equipment (PPE).
- Use techniques to avoid exposure.



Recommended Items for a Spill Kit

Commercial spill kits are available, but a basic spill kit (for most spills up to 500 ML) can be easily put together using the items listed below:

- 5 gallon bucket(s) with lid(s) – to store the kit
- 2 pairs of chemical splash goggles
- 2 pairs of gloves (nitrile)
- 2 pairs of shoe covers
- 2 disposable lab coats
- Absorbent material to contain the spill (paper towel, spill booms or pillows, vermiculite)
- Forceps/tongs to pick up contaminated debris or broken glass.
- Zipper seal type bags (1-gallon size)
- Small bottle of detergent cleaning solution
- Disinfectant
- Hazardous waste sticker
- Biohazard sticker
- Waste disposal bags

Packing a Spill Kit

Spill kits should be packaged in the order of when the materials will be needed.

Pack the following items from the bottom up.

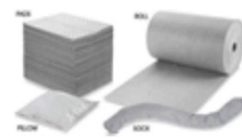
- Biowaste and/or hazardous waste labels are placed on the bottom

HAZARDOUS WASTE	
University of Alabama at Birmingham Institute for Occupational Health & Safety UAB EHS	
Chemical Name	No.

- A waste pan and broom goes on the bottom as well
- Plastic bags to hold the spill debris go on top of the pan and broom.



- Absorbents and other equipment goes next.



- On the top should be your PPE – easily accessible and serving as a reminder to don PPE **prior to the clean up.**



Spills – Kits and Cleanup

A Large Spill

A large spill involves:

- Unknown materials or highly toxic chemicals
- Fire or an explosion
- Larger than 500 ML
- Spill in the hallway or near a drain
- No responsible party at the scene
- Not having the correct PPE, spill kit, or training to clean up the spill



Take Action!

- Activate the fire alarm
- Evacuate the building
- Call
 - 911 from a campus phone or
 - 934-3535 from a cell phone or
 - 934-2487 EHS
- Tell the operator
 - The location
 - Types of hazardous materials involved
 - Your name and a phone number where you or a responsible party may be reached
- Wait for an all-clear signal from first responders before re-entering the building

Cleaning Up a Chemical Spill

Don the appropriate PPE!

Liquids

- Cover with the appropriate materials (vermiculite, absorbent pads, etc.) to absorb the liquid
- Dispose of the materials as chemical waste

Powders

- Carefully sweep the spilled powder into a dustpan – avoid generating respirable dust.
- Dispose of the materials as chemical waste

Cleaning Up a Biological Spill

Don the appropriate PPE!

- Carefully pour disinfectant around the edges of the spill.
- Gently pour disinfectant into the inner part of the spill without splashing
- Let the disinfectant sit for 20 minutes to absorb the spill.
- Clean the spill area with towels soaked in disinfectant
- Place all contaminated material in a plastic bag
- Autoclave
- Dispose of as medical waste.

A Small Spill

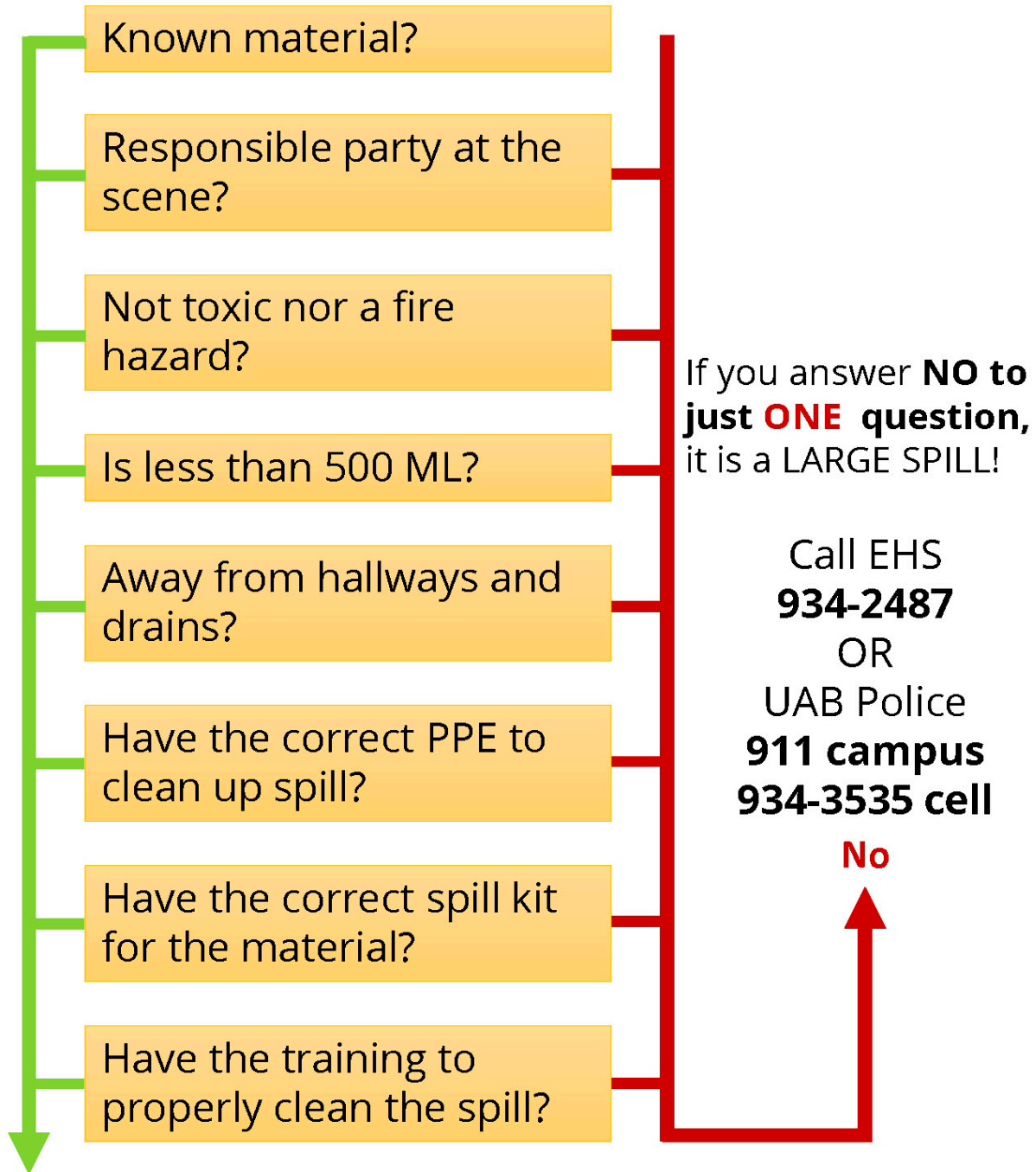
If the spill meets **none** of the criteria for a large spill above, it is ok for you to clean up. However, if it means just one of the criteria above for a large spill, you must take action immediately.

- Alert people in the immediate area and restrict access
- Get the correct spill kit
- Don the appropriate PPE – consult the SDS for special precautions (minimal PPE – clean, buttoned, long-sleeved lab coat or disposable gown, nitrile gloves if appropriate, safety goggles or a full-face shield)



Is It a Large or Small Spill?

A spill has occurred. Quickly answer the questions below.



Yes

If you answer **YES** to **all of the questions**, this is a minor spill. It's ok to clean it up.

Active Shooter

An active shooter is a person who appears to be actively engaged in killing or attempting to kill people in a populated area; in most cases, active shooters use firearm(s), and there is no pattern or method to their selection of victims. These situations are dynamic and evolve rapidly, demanding immediate deployment of law enforcement resources to stop the shooting and mitigate harm to innocent victims. This document guides faculty, staff, and students who may be caught in an active shooter situation and describes what to expect from responding police officers.

Guidance to faculty, staff, and students:

Should a shooter or a person with a weapon appear on campus, call the University Police (911 or (205) 934-3535) as soon as safely possible. The University Police Department is trained to deal with this incident and will respond immediately upon notification.

Each situation is different, so no single procedure will work in all circumstances. You will have to make the best decision based on your unique situation. Always be aware of your surroundings as you determine how best to protect yourself. The Department of Homeland Security offers the following suggestions:

Run...

If there is an accessible escape path, attempt to evacuate the premises. Be sure to:

- Have an escape route and plan in mind
- Evacuate regardless of whether others agree to follow
- Leave your belongings behind
- Help others escape, if possible
- Prevent individuals from entering an area where the active shooter may be
- Keep your hands visible
- Follow the instructions of any police officer
- Do not attempt to move wounded people
- Call 911 or (205) 934-3535 (UABPD) when you are safe

Hide...

If evacuation is not possible, find a place to hide where the active shooter is less likely to find you. Your hiding place should:

- Be out of the active shooter's view
- Provide protection if shots are fired in your direction (i.e., an office with a closed and locked door)
- Do not trap yourself or restrict your options for movement to prevent an active shooter from entering your hiding place:
 - Lock the door
 - Blockade the door with heavy furniture if the active shooter is nearby
 - Lock the door
- Silence your cell phone and/or pager
- Turn off any source of noise (i.e., radios and televisions)
- Hide behind large items (i.e., cabinets and desks)
- Remain quiet and try to control your breathing

If evacuation and hiding out are not possible:

- Remain calm
- Dial 911 or (205) 934-3535 (UABPD) if possible to alert police of the active shooter's location
- If you cannot speak, leave the line open and allow the dispatcher to listen

Fight...

As a last resort, and only when your life is in imminent danger, attempt to disrupt and/or incapacitate the active shooter by:

- Acting as aggressively as possible against him/her
- Throwing items and improvising weapons
- Yelling
- Committing to your actions

When calling the police, attempt to provide the following information:

- Building/Site name and location
- Your name and phone number
- Exact location and number of shooters
- Description of shooter, type of weapon, and number of hostages, if any
- Number and location of injured persons

When the police arrive, they may not know who the shooter(s) are, yet perpetrators have been known to hide among students. Therefore, it is important to obey all law enforcement commands. Officers may order everyone to raise their hands or even place handcuffs on them. This is done for safety reasons to prevent further injury and possible escape by the perpetrator(s). Once law enforcement officers are on the scene, they will move through the area/building. Follow all directions from law enforcement officers immediately. The primary focus of UABPD will be to locate and confront the threat. Once the threat has been contained, other resources will assist you.

Severe Weather

Departments should have a way of monitoring for inclement weather, such as a weather radio, weather app for your phone, B-Alert, weather.com, etc. Department captains along with the Building Administrator or other designees will be responsible for monitoring the weather for changes that may require an upgrade in readiness. The Building Administrator is also responsible, in consultation with Campus Safety, for helping departments determine specific actions that should be taken to protect UAB employees, students, visitors and property.

Emergency Sirens

There are eight (8) emergency sirens located strategically around campus to help alert the community and those outdoors in the event of a tornado warning or sighting (see below). These are activated by the Jefferson County Emergency Management Agency in cooperation with the National Weather Service.

Heavy Rain and Flooding

Campus maintenance will be prepared to handle sewer back up and other problems associated with flooding in areas known to have problems. Environmental or Building Services is responsible for

making sure doormats and wet floor signs are deployed and to assist with any needed cleanup.

Flash Flooding

Some roads, parking areas, sidewalks, etc. at UAB are prone to flash flooding during periods of severe downpours. This can be made worse because of construction. Be aware of your surroundings.

- Never try to walk or swim through swiftly moving water.
- Never try to cross water in a vehicle, whether it is moving or not.
- If your vehicle stalls in rapidly rising water, abandon it immediately and move to higher ground.

UAB SOM Flood Response Protocol

During normal business hours or after hours please contact UAB Maintenance Dispatch at (205) 934-9675 or UAB Police to report the incident. Dispatch will contact Maintenance and Building Services personnel for the emergency water shutoff and water extraction. Maintenance/UAB Police will contact the SOM Building Administrators, Robert Witherspoon, Amanda Hanninen, Marcus Gaines, and Kevin Bell to explain the nature of the flood. The building administrators will send out a facilities alert to the building occupants with restoration updates. The building administrators will contact Risk Management to assess any damage in offices/labs and photos will be taken.

In the event there is water damage to lab equipment, the lab personnel is responsible for contacting the equipment vendor for repair or replacement estimates. All insurance claims will require documentation from the equipment vendor on their letterhead, stating detailed information recommending repair or replacement of that equipment.

The State insurance adjuster will not accept personally typed Excel or Word documents as evidence in making an insurance claims on lab equipment.

Severe Lightning/Electrical Storms

While it is unlikely that such storms will result in serious damage to the University because of electrical activity, it is advisable to curtail certain activities that may present risks, such as outdoor or rooftop activities, or the use of any equipment that could cause injury or be damaged by sudden surges or interruptions in the power supply.

Many lightning fatalities or injuries occur at the beginning or end of a thunderstorm. The following are some lightning safety rules:

- Keep an eye on the sky. Look for darkening skies, flashes of light, or increasing wind. Listen for the sound of thunder.
- If you can hear thunder, you are close enough to the storm to be struck by lightning.
- Count seconds from the time you see lightning until you hear thunder, then divide by five. This gives you the distance in miles from the lightning to you.

When a storm approaches...

- Find shelter in a building or car. Keep car windows closed and avoid convertibles
- Telephone lines and metal pipes can conduct electricity. Avoid using the telephone or any electrical appliance.

If someone is struck by lightning...

- People who have been struck by lightning carry no electrical charge and can be handled safely.
- If they have stopped breathing, perform CPR.

Storm Watches and Storm Warnings

A tornado, severe thunderstorm, flash flood, etc. **watch** means conditions are favorable for the development of that particular weather event that is capable of causing severe damage. The National Weather Service will issue the watch for a specified period of time. Specific information will be broadcast on the weather radio and on commercial radio and television. **Each department should develop a call tree or other method of notifying everyone of the potential for severe weather.** Since this is not an immediate threat and no specific action is required, e-mail notification or a group text works well for this. Make sure to include when the watch period will end. No specific action should be taken by employees during a watch except to stay alert to weather conditions and updates.

Warning

A tornado, severe thunderstorm, flash flood, etc. **warning** means a weather event has been positively identified in or near Jefferson County. **Emergency sirens will sound.** Everyone must stay alert for sudden changes in weather conditions and weather announcements and should **seek shelter immediately along the interior walls and enclosed windowless staircases, or in a basement area.** With Doppler radar and other sophisticated electronic tracking systems, we can more accurately track weather threats. It is extremely important to monitor radio, weather app, or TV for the latest information on the exact location of the storm.

Stay away from the windows as much as possible. Do not attempt to monitor conditions visually by standing at a large window.

In the event of tornado warning and when the emergency alarm system instructs us to do so:

- Go to the lower level of the building and congregate on the inside (east side) of the double doors that lead to the elevators. These doors must remain closed for the shelter to work properly.
- Open the double doors to the ventilator system near the “all gender” restroom and pull both levers to open vents.
- Go into the auditorium and activate the switch on the west wall (right hand wall of the walkway if you’re facing the podium)
- Corral all people into the auditorium and corridor area – making sure they do not shelter in stairwells.
- Emergency lighting and ventilation will be activated.

Once a warning has been issued for the Birmingham Metro area someone should be appointed to monitor current conditions by using a weather radio, weather app, or by waiting for a notification from the B-Alert system. A B-Alert will be issued when the initial warning goes out and an “immediate threat has passed” will be given when current storm has passed the campus. This does not mean that another storm system could not be following behind so continuing conditions should be monitored until all danger has passed.

Fire Safety Program-General Procedures for all Areas

If you detect FIRE or SMOKE, no matter how minor it may appear to be, STAY CALM and use common sense. Others will depend on your actions. Use the C.A.R.E. response system:

- Close the door to **CONFINE** the fire and smoke. As you leave the room where the fire is located, close the room door and fire doors located in the corridors.
- **ACTIVATE THE FIRE ALARM** by pulling the handle.
- **REPORT THE FIRE**. DIAL “911” (Local police/fire department). Identify yourself and provide the exact location of fire or smoke and what is burning, if known.
- **EVACUATE** staff and visitors immediately. Do not return to the building unless told to do so by the fire department, police, or the Safety Coordinator.

Evacuation

Evacuation of employees, students, and visitors will be carried out in a timely and orderly manner and will occur as follows:

- All building occupants should proceed to the nearest exit and move away from the building.
- Depending on which side of the building you exit, the corral points are :

Building	Emergency Corral Point
BBRB- Bevill Biomedical Research Building	Parking lot of BMR2 (9 th Ave and 19 th Street). Please do not gather in the courtyard of BBRB.
BDB- Boshell Diabetes Building	In front of Spain Auditorium (7 th Ave and 19 th Street). Please do not gather in the Patient Discharge area.
BMR 2- Biomedical Research Building 2-PBMR	Parking lot (77) directly beside the Community Health Services 19 th street building. Please do not gather in the BMR 2 parking lot.
CIRC- Civitan International Research Center	Front parking lot of Spain Rehab on 6 th Avenue.
CH-19- Community Health Services – 19 th Street	Parking lot of BMR 2 (9 th Ave and 19 th Street). Please do not gather in the parking deck of CH-19.
CH-20 Community Health Services- 20 th Street	Parking lot (77) behind CH-20.
LHFOT- Faculty Office Tower	New Proton Facility Parking lot across (5 th Ave). Please do not gather in the FOT parking deck.
KAUL- Hugh Kaul Genetics Building	In front of the School of Dentistry (7 th Ave and 20 th Street).
MCLM- McCallum Basic Health Sciences	East side occupants should gather in front of the Kaul building on 20 th street. West side occupants should gather in front of Regions Bank on 19 th Street.

Building	Emergency Corral Point
SHEL- Shelby Research Building	West side occupants should gather in front of the Rust Building (on University Blvd). East side occupants gather in front of 19 th Street Parking Deck 19S.
SC- Sparks Building	Surface parking lot behind Spain Rehab, which is next door to Sparks on (7 th Ave).
THT- Tinsley Harrison Building	In front of Regions Bank (19 th Street and University Blvd.
VH- Volker Hall	SOM Tower occupants should gather in the Children's surface lot on University Blvd. Lecture Tower occupants should gather in the back loading dock of VH. Research Tower occupants should gather in the Children's surface lot on University Blvd.
ZRB- Zeigler Research Building	Occupants should gather in front of THT & MCLM on University Blvd.

It is also important that the fire department have clear and unobstructed access to the building. Do not gather in the driveway, move away from the building. Do not return to the building unless told to do so by the fire department, police, or the Campus Safety Coordinator. It is sometimes difficult to know when the all clear is given, however, UAB Police will be monitoring all exits and will blow their whistles and verbally notify groups in obvious gathering areas that it is safe to return to the building.

Provisions for Individuals with Disabilities

The landings inside of each stairwell are considered safe areas for individuals with disabilities. It is routine procedure for emergency personnel to check these areas for individuals with disabilities and/or injured persons. If the building must be evacuated, individuals with disabilities located above or below the ground floor should be escorted to the closest stairwell and a designated person should remain with them until emergency personnel arrive.

Fighting Small Fires

If you are *certain* that a small or contained fire does not pose an immediate threat to you, your co-workers, visitors, students, or the surrounding area, you may be able to put it out with the appropriate fire extinguisher. The fire extinguishers located throughout the building are ABC type dry chemical.

Fire Drills

In an actual fire, there will be excitement and confusion. The confusion may be compounded by thick smoke and toxic gases. A normally well marked exit route may appear unfamiliar and disorienting. For this reason, it is essential that fire response procedures be practiced.

The training of personnel to respond effectively to a fire emergency is a critical component of any fire safety program. Each person must know exactly what to do and must have enough practice to be able to perform quickly and efficiently. Fire drills should be conducted as follows:

- Drills should be conducted in a manner that ensures all personnel participate.
- Drills are to be conducted by the Campus Safety Coordinator and Building Administrator or designee.
- Drills are to be initiated through verbal notification of an employee or by activating a fire alarm pull station. If a pull station is used, Campus Maintenance should be on hand to reset the alarm and Birmingham Fire and Rescue must be notified of the exact time of the drill and when the system is back in service.
- The Campus Safety Coordinator, Building Administrator or designee will monitor and evaluate the fire drill response. Training will be held at that time if an employee is found to be unfamiliar with procedures.
- All clear to be called by the Campus Safety Coordinator, Building Administrator or designee.

Fire Prevention

The following guidelines have been established in order to maintain a fire safe environment for staff and visitors:

- Free access to fire cabinets, fire extinguishers, and other firefighting equipment must be maintained at all times.
- The "No Smoking" policy shall be enforced.
- All use of candles and open flames are prohibited.
- Keep all electrical equipment in good repair. Do not overload electrical circuits by

using multiple plugs or unapproved extension cords. Only those extension cords labeled as “UL Listed” and those in good condition may be used.

- Only approved space heaters may be used. Never use an extension cord in conjunction with space heaters.
- Holiday decorations must be made of non-combustible or fire-retardant materials. **Live Christmas trees are not permitted.** Do not block corridors with decorations. Fire doors shall not be covered with combustible materials, such as wrapping paper.

Fire Safety Inspections

Conducting systematic inspections to locate and eliminate fire hazards is an indispensable element of the Fire Safety Program. The Safety Coordinator will conduct periodic, unannounced fire inspections as part of the hazard surveillance process. However, departments should periodically self-inspect to help identify any potential hazards, such as space heaters too close to combustibles, frayed electrical wires, excessive combustibles (Boxes, paper, etc.), improperly stored flammables, presence of burning candles, blocked emergency equipment, or obstructed corridors.

It is the responsibility of each employee to report conditions believed to be unsafe or a fire hazard as soon after discovery as possible. Report these to the Building Administrator.

Fire Extinguishers, Fire Hoses, and Sprinkler Systems

Responsibility for periodic inspection, servicing, including recharging and minor maintenance and adjustments, removal and replacement of discharged or unserviceable units and the installation of new fire extinguishers and fire extinguishing systems or fire suppression equipment is a Campus Maintenance function. The following guidelines apply to all fire extinguishers:

- a. Except for use in fighting a fire, fire extinguishers shall not be removed or relocated by any person except assigned maintenance or safety personnel.
- b. Fire extinguisher inspection tags shall only be modified by the inspector.
- c. Fire extinguisher inspection tags shall be removed by only the fire extinguisher shop.
- d. Fire extinguisher locations must be clearly indicated according to applicable codes and must NOT be obstructed by furnishings, equipment, supplies, boxes, carts, or any other material.

Fire Extinguisher Replacement

After an extinguisher has been used, regardless of how small the discharge, or if found to be unserviceable for any reason, it should be immediately replaced. Contact Campus maintenance at extension (205) 934-5353 for this service.

Medical Emergency

It is the policy at UAB to provide faculty, staff, students, visitors and patients a means by which they may report and be assisted with medical emergencies.

To facilitate the treatment of injuries and illness in order to minimize their impact on faculty, staff, students, visitors and patients, follow these guidelines when responding to a medical emergency:

- **ASSESS** the patient’s condition by asking appropriate questions and observe response

- *Do you know where you are?*
- *What's your name?*
- *Who is the president of the United States?*
- **RESPOND** contact (911 from a UAB phone) or (205) 934-3535 UAB emergency number. If patient is unresponsive and not breathing a qualified person or persons should begin Cardio Pulmonary Resuscitation (CPR), attach an Automatic External Defibrillator (AED) if one is available.
- **CREATE** a safe space for the patient, clear onlookers, including unnecessary students, and staff
- **CARE** for, monitor, and communicate with the patient to continually observe the situation until medical responders arrive. **REPORT** details of the incident to the medical responders. Gather information to complete UAB Incident Report, and submit it to Office of Risk Management and the Building Administrator.

Remember no one can be forced to seek medical care unless they choose to do so or are unresponsive and cannot choose for themselves.

Employee Injury Reporting

An incident/accident must be reported verbally by the employee to the employee's supervisor as soon as possible but no later than two calendar days following the incident/accident or following the onset of the illness or disease. Failure to verbally report an incident/accident within two calendar days of occurrence or within two calendar days of the onset of the illness or disease may result in denial of On-the-Job Injury/Illness (OJI) benefits.

Campus employees (to include Post Doc, Graduate Student employees, visiting scholars, and visiting scientists): Employees with needle sticks and/or other exposures should be evaluated at The Workplace during the work week (Monday-Friday from 7AM to 4PM). If an incident occurs on the weekend or outside The Workplace's hours of operation (7AM-4PM), employees should go to UAB Highland's ED or University Hospital ED.

If medical treatment is required (other than needle sticks) call Brentwood Services at (205) 933-0373 or 1-800-524-0604. Complete the Initial Medical Evaluation Authorization (found at www.uab.edu/humanresources) and send with the employee to The Workplace (UAB Occupational Medicine) if the injury occurs during their operating hours (M-F 7:30A – 5:00P). If outside The Workplace hours, send form with the employee to University Hospital Emergency Department (UHED), Highlands Emergency Department or UAB Urgent Care.

Injured employees may use Blazer Express for transportation to and from The Workplace for the initial visit. The Workplace is located at UAB Highlands, Suite 100. Their telephone number is (205) 933-5300. You should contact Brentwood Services Administrators at (205) 933-0373 or 1-800-524-0604 to coordinate transportation for any subsequent medical visits.

Complete an electronic Trendtracker Incident Report form as soon as possible. Refer to the Risk Management web site for instructions (www.uab.edu/riskmgt). If you do not have access to Trendtracker, you may complete a paper incident report and send to Monica Jones in AB215.

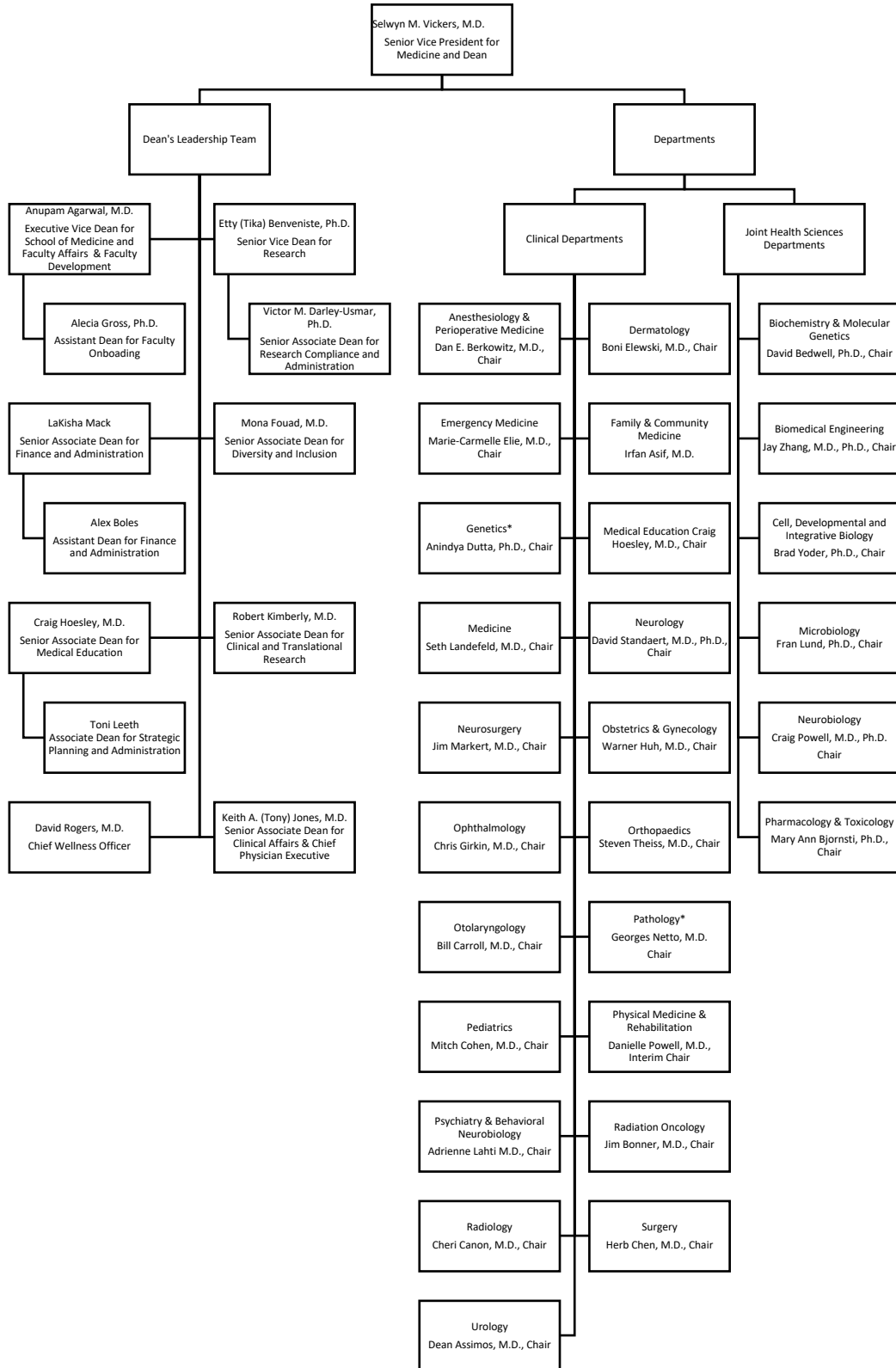
Student Injury

In the event a UAB student is injured. An immediate assessment should be made to determine the severity of injuries and proper response required.

- If student is unresponsive and not breathing contact UAB dispatch immediately at (205) 934-3535 or 911 from UAB phone. A qualified person should start Cardio Pulmonary Resuscitation (CPR), attach Automatic External Defibrillator, if one is available. If severely injured same process should be used in notifying UAB dispatch at (205) 934-3535 or 911 from UAB phone. Dispatch will then send appropriate response needed. Be sure to fill out the proper form using the link provided below for digital copy. <https://riskmgt.hs.uab.edu/pdfs/uabhsstudentvisitorauthformedeval.pdf> At no point should notification to dispatch or transport be delayed to obtain paperwork.
- If student has minor injuries and emergency response is not needed then student should be directed to Student Health and Wellness Center. It will be up to the student whether to seek medical attention or not. UAB faculty cannot force a student to seek medical attention. The form listed above should be obtained regardless of treatment

Recovery Phase (To be inserted later)

Appendix A – Organizational structure for Command Center



Leadership – Orders of Succession

This section should identify orders of succession to key positions within your college/department. Orders should be of sufficient depth to ensure the colleges/department's ability to manage and direct its essential functions and operations. Recommended practice is at least three deep. The conditions under which succession will take place, the method of notification, and any temporal, geographical, or organizational limitations of authority should also be identified in this section. The following table shows the order of succession for the UAB School of Medicine.

Authority				Successor			
Name/Title	Email	Office Phone	Cell Phone	Name/Title	Email	Office Phone	Cell Phone
Selwyn M. Vickers, M.D., Senior Vice President & Dean	smv@uab.edu	(205) 934-1111 or (205) 934-5147	(612) 360-7213	(1) Anupam Agarwal, M.D., Executive Vice Dean or (2) Etty (Tika) Benveniste, Ph.D., Senior Vice Dean for Research	aagarwal@uabmc.edu tika@uab.edu	(205) 996-6670 (205) 934-7667	(205) 533-0126 (205) 249-8416
Anupam Agarwal, M.D., Executive Vice Dean	aagarwal@uabmc.edu	(205) 996-6670	(205) 533-0126	(1) Etty (Tika) Benveniste, Ph.D., Senior Vice Dean for Research and (2) Robert P. Kimberly, M.D., Senior Associate Dean-Clinical & Translational Research	tika@uab.edu rkimberly@uabmc.edu	(205) 934-7667 (205) 934-0245	(205) 249-8416 (205) 422-2980
Etty (Tika) Benveniste, Ph.D., Senior Vice Dean for Research	tika@uab.edu	(205) 934-7667	(205) 249-4816	(1) Anupam Agarwal, M.D., Executive Vice Dean and (2) Victor Darley-USmar, Ph.D., Senior Associate Dean-Research Compliance and Administration	aagarwal@uabmc.edu vdarleyusmar@uabmc.edu	(205) 996-6670 (205) 975-9561	(205) 533-0126 (205) 329-4675
LaKisha Mack, Senior Associate Dean-Administration & Finance	lmack@uab.edu	(205) 934-5614 or (205) 934-1111	(205) 531-0330	(1) Alex Boles, Assistant Dean for Admin & Finance and (2) Samone Alexander, Director of Finance	aboles@uab.edu samone@uab.edu	(205) 996-1792 (205) 996-1705	(205) 597-9424 (205) 789-2444
Mona Fouad, M.D., MPH, Senior Associate Dean-Diversity & Inclusion	mfouad@uabmc.edu	(205) 934-4307 or (205) 934-2125	(205) 410-0458	(1) Carlton Young, M.D., Assistant Dean and (2) Monica Baskin, Ph.D., Professor	cyoung@uabmc.edu mbaskin@uabmc.edu	(205) 934-1393 (205) 975-5704	
Craig Hoesley, M.D., Senior Associate Dean-Medical Education	choesley@uabmc.edu	(205) 934-3365 or (205) 934-5678	(205) 307-8314	(1) Christina Grabowki, Ph.D. Associate Dean and (2) Nick Van Wagnor, M.D., Ph.D., Associate Dean	cjgrabow@uab.edu nvanwagoner@uabmc.edu	(205) 934-2333 (205) 934-2840	
Keith (Tony) Jones, M.D., Senior Associate Dean-Clinical Affairs	keithjones@uabmc.edu	(205) 934-9296	(205) 790-2927	(1) Cheri Canon, M.D., Professor & Chair (2) Seth Landefeld, M.D., Professor & Chair	ccanon@uabmc.edu sethlandefeld@uabmc.edu	(205) 934-9577 (205) 934-7700	
Robert P. Kimberly, M.D., Senior Associate Dean-Clinical & Translational Research	rkimberly@uabmc.edu	(205) 934-0245	(205) 422-2980	(1) Orlando Gutierrez, M.D., Professor and (2) Stuart Frank, M.D., Professor	ogutierrez@uabmc.edu sfrank@uabmc.edu	(205) 996-2186 (205) 934-9856	
Anupam Agarwal, M.D., Executive Vice Dean-Faculty Affairs & Faculty Development	aagarwal@uabmc.edu	(205) 996-6670	(205) 533-0126	Alecia Gross, Ph.D., Assistant Dean for Faculty Onboarding	agross@uab.edu	(205) 975-8396	(205) 482-5701
Victor Darley-USmar, Ph.D., Senior Associate Dean-Research Compliance and Administration	vdarleyusmar@uabmc.edu	(205) 975-9686 or (205) 975-9561	(205) 329-4675	Michael Bertram, Ph.D., Associate Director of Administration-CCC	mbertram@uab.edu	(205) 975-0358	(205) 757-6493
Toni Leeth, Associate Dean for Strategic Planning & Administration	tleeth@uab.edu	(205) 975-3530	(612) 810-3536	Josh Carter, Ph.D., Executive Director for Strategic Planning & Administration	mcarter1@uab.edu	(205) 934-1853	(205) 356-3112
Alan Tita, M.D., Associate Dean for Global and Women's Health	atita@uabmc.edu	(205) 934-9616		Rubin Pillay, Ph.D., Assistant Dean of Global Health	rpillay@uabmc.edu	(205) 934-6048	

Appendix B - Continuity Planning and Recovery Guide

Insert URL linking to this manual.

This is pending completion of Dr. Pam Benoit's task force.

Appendix C – Departmental Responsibilities

Each School of Medicine Department will be responsible for maintaining an emergency plan (there are available in the SOM Dean’s office with Mr. Robert Witherspoon). Each department/floor should develop:

- A call tree or other method of notifying personnel of the potential for severe weather or another emergency.
- A list of Department Captains and alternates.
- Headcount roster.
- Department placard to hold up at assembly area.

Supervisory responsibilities Train employees on:

- Evacuation procedures.
- Designate personnel, e.g., Department Captains, etc.
- Headcount procedures.

Department	Emergency Plan Submitted
Anesthesiology & Perioperative Medicine	
Biochemistry & Molecular Genetics	
Biomedical Engineering	
Cell, Developmental & Integrative Biology	
Dermatology	
Emergency Medicine	
Family & Community Medicine	
Genetics	
Huntsville Regional Medical Campus	
Medical Education	
Medicine	
Microbiology	
Montgomery Regional Medical Campus	
Neurobiology	
Neurology	
Neurosurgery	
Obstetrics & Gynecology	
Ophthalmology	
Orthopaedic Surgery	
Otolaryngology	
Pathology	
Pediatrics	
Pharmacology & Toxicology	
Physical Medicine & Rehabilitation	
Psychiatry & Behavioral Neurobiology	
Radiation Oncology	
Radiology	
Selma Regional Medical Campus	
Surgery	

Urology	
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Appendix D - Bomb Checklist

BOMB THREAT CHECKLIST Telephone Procedures

INSTRUCTIONS: Be calm, be courteous, listen. Do not interrupt the initial message of the caller. If possible, notify your supervisor immediately by a pre-arranged signal while the caller is on the line.

Name of Operator _____ Time _____ Date _____

Caller's Identity:

Sex: Male _____ Female _____ Adult _____ Juvenile _____ Approximate age _____ in years

Origin of Call: (Check Caller ID)

Local _____ Long Distance _____ Booth _____ Internal _____ Write the number here _____

Voice Characteristics

____ Loud _____ Soft
 ____ High Pitch _____ Deep
 ____ Raspy _____ Pleasant
 ____ Intoxicated _____ Other

Speech

____ Fast _____ Slow
 ____ Distinct _____ Distorted
 ____ Stutter _____ Nasal
 ____ Slurred _____ Lisp
 _____ Other

Language

____ Excellent _____ Good
 ____ Fair _____ Poor
 ____ Foul _____ Other

Accent

____ Local _____ Not Local
 ____ Foreign _____ Region
 ____ Race _____ Other

Manner

____ Calm _____ Angry
 ____ Rational _____ Irrational
 ____ Coherent _____ Incoherent
 ____ Deliberate _____ Emotional
 ____ Righteous _____ Laughing

Background Noises

____ Mixed _____ Airplanes
 ____ Bedlam _____ Animals
 ____ Trains _____ Voices
 ____ Music _____ Quiet
 ____ Factory Machines
 ____ Street Traffic
 ____ Party Atmosphere
 ____ Office Machines

BOMB FACTS

Pretend difficulty with hearing. Keep the caller talking. If the caller seems agreeable to further conversation, ask questions like:

When will it go off? Certain hour _____ Time remaining _____

Where is it located? Building _____ Floor/Office/Area _____

What kind of bomb? _____

How do you know so much about the bomb? _____

Where are you now? _____

What is your name and address? _____

If the building is occupied, inform the caller that detonation could cause injury or death.

Write out the message in its entirety and any other comments on a separate sheet of paper and attach to this checklist.

Did the caller appear familiar with the building by his description of the bomb location? _____

ACTIONS TO TAKE IMMEDIATELY AFTER THE CALL

- NOTIFY THE UNIVERSITY POLICE, EXT 911 or 934-3535
- NOTIFY YOUR IMMEDIATE SUPERVISOR.

Talk to no one -- other than instructed by your supervisor or the Police.

3/30/2005 (abj)

COOP Submission

Thank you for completing your department's All Hazards Continuity of Operations Plan(COOP). Please submit this Plan to your Dean or Vice President for approval and identification of essential positions within your department/unit.

Dean/VP name: Selwyn Vickers, MD	Title: Dean
Dean/VP signature: Selwyn M. Vickers	Date submitted: 3/2/2020

SOM Continuity Plan Task Force

Name	Title	Role
Anupam Agarwal, M.D.	Executive Vice Dean	Chair
LaKisha Mack	Senior Associate Dean for Admin. & Finance	Chair
Alex Boles	Assistant Dean for Admin. & Finance	Task Force Member
Robert Witherspoon	Manager of SOM Facilities & Standards	Task Force Member
Paige Dorman	Executive Director-Communications	Task Force Member
Scott Austin	Executive Director-Faculty Affairs and Faculty Development	Task Force Member