PROCEDURE STATEMENT

Clear, specific procedures shall be implemented to protect patients, staff, students, and visitors in the case of a tornado watch and/or tornado warning.

PURPOSE OF PROCEDURE

To provide guidelines for actions to be taken in the event of a tornado watch and/or tornado warning.

Definitions

Tornado Watch as defined by the National Weather Service – defines an area where tornadoes are possible in the next several hours. In a watch you need to be alert and be prepared to go to safe shelter if tornadoes do happen or a warning is issued.

Tornado Warning as defined by the National Weather Service – a tornado has been spotted or that Doppler radar indicates a thunderstorm circulation which can spawn a tornado. When a tornado warning is issued for your town or county take immediate safety precautions.

PROCEDURE

Switchboard

The University Police dispatcher shall monitor the CAD system and the weather alert channels located in the dispatch offices. In the case where a tornado watch/warning has been issued or verified information has been received that a tornado has been sighted, the dispatcher shall notify the following:

The switchboard operator on the Health Science Campus (HSC), who will issue a HSC campus-wide mass notification to all HSC buildings. The switchboard operators will also call all of the HSC departments or buildings listed below. On the Main Campus (MC), the University Police dispatcher shall notify the senior person in University Police, in order to prepare an announcement of a weather alert through the campus outdoor PA system. The MC dispatcher shall also notify all police officers on duty of the tornado warning.

Early Learning Center........................................419-530-6710
Early Intervention Center......................................419-381-7300
Prescribed Pediatric Extended Care .........................419-530-6726

Code Gray Watch or Warning shall be announced and cancelled based on information from the National Weather Service (via weather radio). During the emergency on the HSC, the Administrative Coordinator shall be in charge of Emergency Response Procedures until relieved by the Administrator On Call or other appropriate incident command staff.

HSC CODES

**Code Grey Watch** will be announced by the switchboard operator when a local tornado **WATCH** has been issued by the National Weather Service. The announcement of a Code Gray Watch is made to inform all personnel that a potentially serious weather emergency exists. **Normal movement of patients can still occur during a Code Grey watch.** During a watch staff may wish to close curtains. All personnel should be prepared to institute emergency procedures should a Code Gray warning be announced.
**Code Grey Warning** shall be announced by the switchboard operator when a tornado **WARNING** has been issued for the local area by the National Weather Service. The Administrative Coordinator and Administrator On Call shall be notified after hours. All persons involved in direct patient care and/or duties essential to the operation of the Hospital shall return to their unit or department for assignment. Patients who have been transported off their home floors for testing or therapies shall be sheltered in the safest location in that area. Transporters should not attempt to return to floors during a Code Grey warning. When a Code Gray warning is announced, patients will be placed in the safest possible place in accordance with their medical condition and unit. Patients are sheltered in place on their units whenever feasible. Ambulatory patients and patients in wheelchairs shall be placed in the bathrooms of their rooms if space is available. Semi-private rooms due to space restraints may require the placement of additional patients in internal hallway corridors. Doors to bathrooms may be left partially open to minimize anxiety. Bedfast patients will be placed in the flat position, as tolerated. Draw curtains and shades in patient rooms. Turn bed so headboard is between patient and any windows. Protect patient with blankets or pillows. Patients are sheltered in place on their units. For bedfast patients in fans, pull bed to hall area by bathrooms with the head of the bed facing windows. For bedfast patients in rooms off main hallway, in areas without end windows or for patients who cannot be moved, pull bed to wall with head of bed toward windows. **Employees in patient care areas should seek shelter in bathrooms or interior hallways based on space and patient needs.**

All visitors in the hospital and non-patient care personnel shall take shelter on the ground floor or in the nearest tornado safe waiting area. If time does not permit evacuation of areas with windows, seek shelter under desks or behind file cabinets. Any additional incoming visitors to the hospital shall be directed to the ground floor area by signage that will be placed at the Information Desk.

Employees should not leave designated areas until notified by Public Announcement of Code Grey Completion.

**GUIDELINES - KOBACKER**

When a Code Grey warning is announced by the switchboard operator, the following evacuation plan will be followed:

Child and Adolescent Hospital, Outpatient Treatment Wing: The primary nurse or child care worker/therapist will account for each child/adolescent in his/her group and accompany them into the Kobacker Tunnel. The Nurse/Coordinator or therapist will certify that each child is accounted for. Immediately notify the Charge Nurse of any missing child.

Senior Behavioral Health Unit: Pull all curtains and close doors. Ambulatory patients should be accompanied into the dining room. The Nurse/Coordinator or therapist will certify that each patient is accounted for. Immediately notify the Charge Nurse of any missing individual.

Staff, children, and adolescents may return to their designated areas only after an all-clear notification is announced.

**GUIDELINES - RUPPERT HEALTH CENTER/YMCA MORSE CENTER/GLENDALE MEDICAL CENTER/EDUCARE CENTER**

When a Code Gray Warning is announced by the switchboard operator, all personnel and patients will evacuate to the ground level and/or the underground tunnel. Staff may return to their designated areas only after an all clear is announced by the switchboard operator.
GUIDELINES - ALL OTHER AREAS ON THE HEALTH SCIENCE CAMPUS

CODE GREY WARNING:

All non-clinical employees and visitors should evacuate to the tornado safe waiting area of their respective building. All buildings have identified tornado safe waiting areas, clearly marked with “Tornado Safe Waiting Area” signs. For those areas without a below ground floor proceed to designated tornado safe waiting areas. If time does not permit evacuation of upper floors or areas with windows, seek shelter under desks or behind file cabinets.

GUIDELINES FOR MAIN CAMPUS

Upon notification of a tornado warning via the county emergency siren system, the UT outdoor PA system, and a UT Alert message, all students, faculty and staff should immediately cease their activities, classes should immediately be suspended, and all persons should seek shelter in the tornado safe waiting area of the closest building or the building they are in. All buildings have identified tornado safe waiting areas, clearly marked with “Tornado Safe Waiting Area” signs.

CANCELLATION OF CODE GRAY WATCH OR WARNING:

Cancellation of tornado response procedures on the HSC and MC shall be given when the weather emergency has passed based on information from the National Weather Service. Disregard should be given to news media weather emergency notification/cancellation.

On the Main Campus, authorization for cancellation of a Code Gray shall rest with the University Police supervisor on duty. He or she may consult with the appropriate HSC staff if needed.

POSSIBLE ACTIVATION OF CODE YELLOW - INTERNAL/EXTERNAL DISASTER PROCEDURE (EP-08-001):

Activation of the Code Yellow procedure may be required if there are multiple injuries in the community or among UTHSC staff, patients, students, faculty and/or visitors. UTMC administrative/medical personnel to make a joint decision concerning activation of the Code Yellow policy, and in turn the Hospital Incident Command System (HICS). For further details on HICS procedures, see procedure EP-08-001, Code Yellow – Internal/External Disaster Procedure.
EVALUATION

After each activation of this procedure, a detailed critique should be made and a report sent to the UT Safety & Health Committee as soon as is feasible. This critique should include those people who were involved in decision-making and implementation of the procedure, along with verification of all applicable telephone numbers and the contents of the policy.

Source: Safety & Health Committee

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