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ROCKINGHAM NURSING HOME

DOCKETED
USNRC

POLICIES,
STANDARDS, RULES AND REGULATIONS

'88 FEB -2 A9:27

12. FIRE, SAFETY AND DISASTER PROGRAM

OFFICE OF SECRETARY
DOCKETING & SERVICE
HOBBS BRANCH

Since there is no Security Department at Rockingham Nursing Home, a procedure must be set up and followed for turning the outside night lights on and off and locking and unlocking the outside doors. The Maintenance Department will be responsible for turning the lights on and locking the doors in the evening or at dusk. The Housekeeping Department will be responsible for turning the lights off and unlocking the doors in the morning no later than 6 a.m.

The following is a list of the lights and doors that are to be checked:

Blaisdell Bldg.:	B16:	lights turned on and off - doors checked
	B17:	" " " " " " " "
	B14:	" " " " " " " "
	B12:	" " " " " " " "
	B24:	" " " " " " " "
	B4:	" " " " " " " "
	B2:	" " " " " " " "
Mitchell Bldg.:	M4:	lights turned on and off - doors locked and unlocked
	M7:	" " " " " " " "
Underhill Bldg.:	U9:	lights turned on and off - doors checked
	U13:	" " " " " " " "
Fernald Bldg.:	F11:	lights turned on and off - doors checked
Dishroom:		" " " " " " " "

The Nursing Department will be responsible for locking and unlocking the door in the Fernald Sunporch (C-103). Also the doors in the Underhill Bldg. U103, U109, U112, U114 should be locked at all times as well as the door to the entrance way in the Mitchell Bldg.

The night switchboard operator will be responsible for locking the doors in the Main Lobby at 11:30 p.m. and unlocking them at 5:30 a.m. Should there be a need to open them during these hours, the Nursing Supervisor should be paged to unlock them.

The keys to the doors and lights will be kept at the switchboard.

The flags are the responsibility of the Housekeeping Department. There are two sets of flags. One set is in front of the Blaisdell Bldg. and the other is in the Courtyard. They are to be put out each morning at 7 a.m. and taken down at 4:30 p.m. and kept at the switchboard.

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PDR ADOCK 05000443
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ROCKINGHAM NURSING HOME
POLICIES,
STANDARDS, RULES AND REGULATIONS

12. FIRE, SAFETY AND DISASTER PROGRAM:

A written program of fire, safety and disaster for the entire complex is kept current with local state and federal laws applicable. A copy of the program is attached.

Regular meetings of the Safety Committee are held under a Director, appointed by the Administrator.

A copy of the Incident or Accident Report form currently in use at the Rockingham Nursing Home is attached.

ROCKINGHAM COUNTY NURSING HOME
EMPLOYEE INCIDENT REPORT

EMPLOYEES NAME: _____ TELEPHONE NO. _____

DEPARTMENT: _____ JOB TITLE: _____

DATE OF INCIDENT: _____ TIME: _____ A.M or PM

EXACT LOCATION OF INCIDENT: _____

DESCRIBE EXACTLY WHAT HAPPENED INCLUDING NAMES OF ALL PERSONS INVOLVED:

LIST ALL EQUIPMENT INVOLVED: _____

STATE THE PART OF BODY INJURED: _____

LIST FULL NAMES OF WITNESSES: _____

DATE: _____ SIGNATURE OF EMPLOYEE: _____

DATE: _____ IMMEDIATE SUPERVISOR : _____

TO BE FILLED IN BY SUPERVISOR

WAS FIRST AID GIVEN? YES NO By: _____

TYPE OF FIRST AID GIVEN: _____

EMPLOYEE REFERRED TO PHYSICIAN? YES NO (If YES complete 1,2,3)

1. DATE SEEN: _____ WHERE: _____

2. PHYSICIAN'S NAME: _____ ADDRESS: _____

3. PHYSICIAN'S FINDINGS: _____

ADDITIONAL COMMENTS INCLUDING RECOMMENDATIONS FOR PREVENTION OF SIMILAR

OCCURRENCES: _____

SUPERVISORS SIGNATURE: _____ DATE: _____

12. ORIENTATION POLICY - NEW EMPLOYEES - SECURITY DEPARTMENT

It is the policy of the Security Department of the Rockingham Nursing Home to orient new employees to their position, to acquaint them with the new environment, to introduce them to key personnel and to specify the responsibilities of their position. This orientation shall include a presentation and discussion of the Rules & Regulations of the Rockingham Nursing Home.

1. All employees of the Security Department shall be made aware of the following:
 - a. Time clock and time card
 - b. Parking regulations
 - c. Fire regulations
 - d. Dining room regulations and hours for meals
 - e. Smoking rules
 - f. Personnel Policies
 - g. Detex clock - for punch stations

In addition to the above, there will be the following:

- a. Eight-hour tour of duty with senior security man
4-15 shift preferred
- b. Physical by M.D.
- c. If physically fit will join the next Scott Air Pak Class

ROCKINGHAM NURSING HOME

POLICY STATEMENT

Nursing Homes, because of their very nature, are expected to be places of safety and it is our intent that Rockingham Nursing Home live up to this reputation. The first step is to comply with applicable laws on fire, accident prevention, health, and working conditions. These laws define minimum requirements, which we shall exceed whenever practical.

The second step is incident prevention. Incidents involving our employees prevent efficient use of our resources and disrupt service to patients. Incidents involving patients or visitors lead to complaints and loss of goodwill. Our policy will be to take all practical steps possible to safeguard our employees, patients and visitors from accidents.

ANNEX A

1. In the event of an emergency situation, immediate notifications of local emergency services (Fire, Police, Rescue and Civil Defense) is essential.

- A) Fire 642-5452
- B) Police 679-2225
- C) Ambulance 772-5912
- D) Civil Defense 778-8158 - work

2. Notify Administrator, Medical Director, Director of Nurses.

- A) Administrator [REDACTED], Home - [REDACTED]
- B) Medical Director [REDACTED] - Home - [REDACTED] - Office
- C) Director of [REDACTED]
Nurses

3. To recall off-duty personnel, notify local radio and television stations and repeat the following message:

"Due to the emergency that exists, all personnel of the Rockingham County Nursing Home are requested to report to the facility as soon as possible."

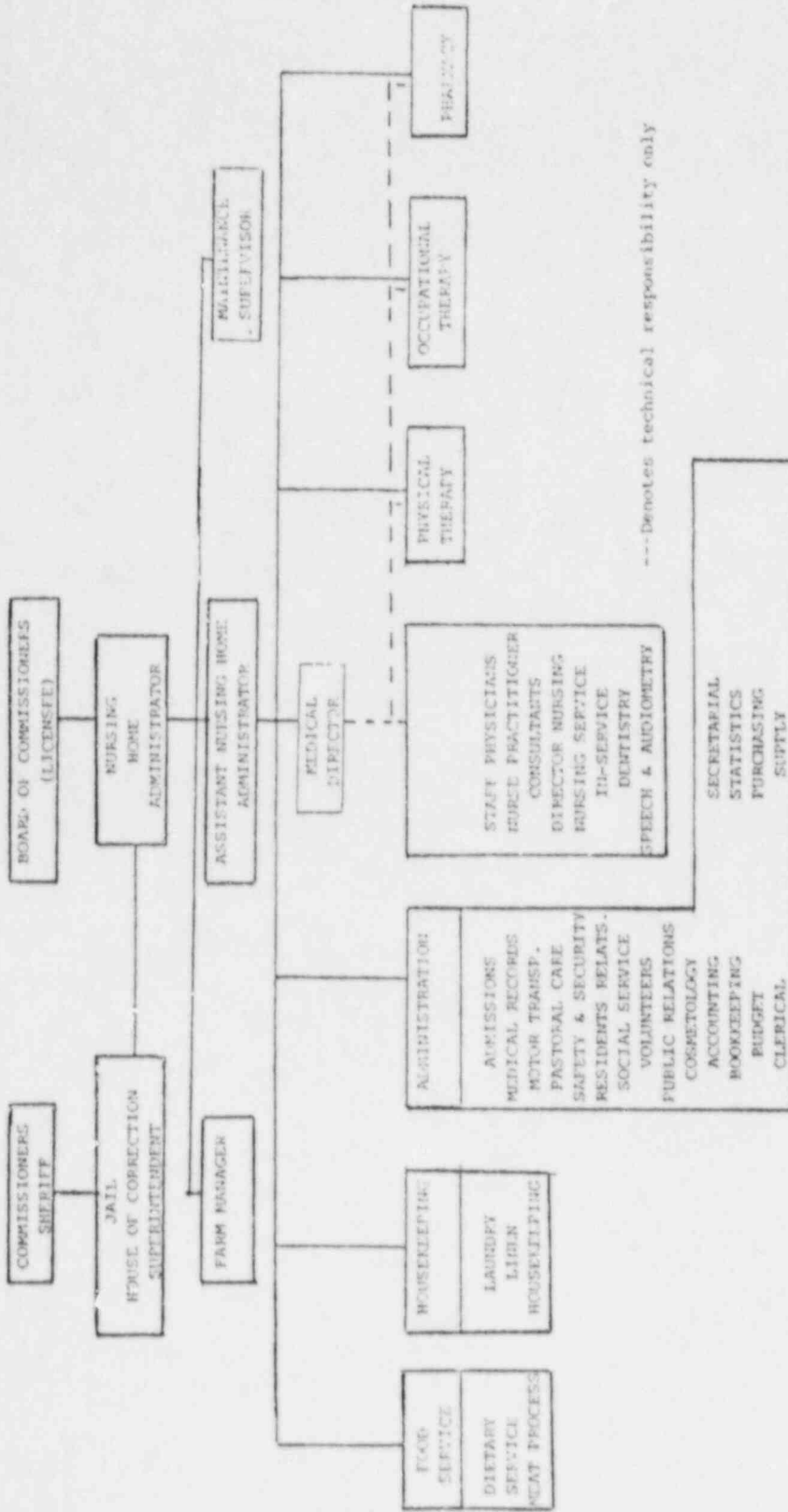
<u>Radio Stations</u>	<u>Phone</u>	<u>Television Stations</u>	<u>Phone</u>
WERZ, Exeter	(603) 772-4757	WBZ, Boston	(617) 787-7000
WOKQ, Rye Beach	(603) 964-6598	WCVB, Boston	(617) 449-0400
WHEB, Portsmouth	(603) 436-7300	WNEV, Boston	(617) 725-0770
WBZ, Boston	(617) 787-7000	WMUR, Manchester	(603) 623-8060
WHDH, Boston	(617) 267-1313		

If the Emergency Broadcast Systems has been activated by local government official, notify Civil Defense and repeat the above message.

4. Off-duty personnel will refrain from contacting the facility during an emergency. These phones will be in use in the emergency and should not be tied up. If in doubt, report to the facility directly. Your assistance will be needed.
5. The facility has access to a radio to receive up-to-date Civil Defense information and instructions on the Emergency Broadcast System.

4/24/63

DEKALB COUNTY
REFUNDING OPERATIONS
ORGANIZATIONAL CHART



---Denotes technical responsibility only

ROCKINGHAM COUNTY NURSING HOME

12.

FIRE, SAFETY, DISASTER PROGRAMADMINISTRATION

Miss Phyllis Rogers

██████████
Ext. ██████████Grandparents
Office

Miss Mary Jane Toth

██████████
Ext. ██████████Home
Office

Mrs. Elaine Twombly

██████████
Ext. ██████████Home
Office

Mr. Perley Twombly

██████████
OperatorHome
Office

Mrs. Janet Jenks

██████████
OperatorHome
OfficeCHAPLAIN

Rev. Dennis Marasco

██████████
Ext. ██████████Home
OfficeFARM

Robert Bartlett

██████████
Ext. ██████████Home
Office██████████
Ext. ██████████FOOD SERVICE

Mrs. Linda Andrzejewski

██████████
Ext. ██████████Home
Office

Mr. Charles Studrance

██████████
Ext. ██████████Home
Office

Mr. Brian Cheney

██████████
Ext. ██████████Home
Office

Brain Estelle

██████████
Ext. ██████████Home
OfficeHOUSEKEEPING

Mrs. Louise Haley

██████████
Ext. ██████████Home
Office

Mrs. Jean Sweeney

██████████
Ext. ██████████Home
Office

ROCKINGHAM COUNTY NURSING HOME

12.

FIRE, SAFETY, DISASTER PROGRAMNURSINGDirector of Nursing:Mrs. Norma Dodge, R.N.
[REDACTED][REDACTED]
Ext. [REDACTED]Home
OfficeAssistant Director of Nursing:Mrs. Marilyn Winget, R.N.
[REDACTED][REDACTED]
Ext. [REDACTED]Home
OfficeSupervisor 7-3:Mrs. Patricia Rouillard, R.N. 2nd Floor
[REDACTED][REDACTED]
Ext. [REDACTED]Home
OfficeMrs. Joan Skinner, R.N. 1st Floor
[REDACTED][REDACTED]
Ext. [REDACTED]

Office

Mrs. Janet Schur, R.M. In-Service
[REDACTED][REDACTED]
Ext. [REDACTED]Home
OfficeMrs. Sandra Brown, R.N.
[REDACTED][REDACTED]
Ext. [REDACTED]Home
OfficeSupervisor 3-11:Mrs. Irene Crosby, R.N.
[REDACTED][REDACTED]
Ext. [REDACTED]Home
OfficeMrs. Holly Gilbert, R.N.
[REDACTED][REDACTED]
Ext. [REDACTED]Home
OfficeMrs. Virginia McKinley
[REDACTED][REDACTED]
Ext. [REDACTED]Home
OfficeSupervisor 11-7:Mrs. Margaret Byrne, R.N.
[REDACTED][REDACTED]
Ext. [REDACTED]Home
OfficeMrs. Marita Lowell, R.N.
[REDACTED][REDACTED]
Ext. [REDACTED]Home
Office

ROCKINGHAM COUNTY NURSING HOME

12.

FIRE, SAFETY, DISASTER PROGRAM

OT

Mrs. Wendy Lombardo

[REDACTED]

[REDACTED]

Ext. [REDACTED]

Home Office

Miss Laura Clark

[REDACTED]

[REDACTED]

Ext. [REDACTED]

Home Office

PT

Miss Marlene Skorupski

[REDACTED]

[REDACTED]

Ext. [REDACTED]

Home Office

Mrs. Debbie Doucette

[REDACTED]

[REDACTED]

Ext. [REDACTED]

Home Office

PHARMACY

Mr. Gilbert Hoss

[REDACTED]

[REDACTED]

Ext. [REDACTED]

Home Office

Mrs. Sandra Shute

[REDACTED]

[REDACTED]

Ext. [REDACTED]

Home Office

SOCIAL SERVICE

Miss Lorraine Carter

[REDACTED]

[REDACTED]

Ext. [REDACTED]

Home Office

Miss Cindy Hurlburt

[REDACTED]

[REDACTED]

Ext. [REDACTED]

Home Office

ADULT MEDICAL DAY CARE

Greg Ginchereau

[REDACTED]

[REDACTED]

Ext. [REDACTED]

Home Office

Kathleen Costello

[REDACTED]

[REDACTED]

Ext. [REDACTED]

Home Office

ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM

Policies, Standards, Rules and Regulations

12. DISASTER PLAN

I. THIS PLAN TO BE INITIATED IN TIME OF A DISASTER

1. All staff subject to call in an emergency.
2. Switchboard Operator to notify staff as ordered by Administrator in charge.
3. Employees report to the head of their Department or Charge person.
4. Administrator and Director of Nursing should be notified immediately if not on duty.

II. CHAIN OF COMMAND

1. Administrator
2. Director of Nursing
3. Assistant Director
4. Supervisor 7-3, 3-11, 11-7

Person on duty at time of disaster will be relieved of charge when next higher person in the chain of command arrives on the scene.

III. ADMINISTRATIVE DETAIL

1. Ascertain type of emergency
 - a. Decide scope
 - b. Amount of staff needed- MD's - Nurses - Aides- Orderlies - Volunteers - Maintenance - Housekeeping - Dietary.

IV. NOTIFY THE MEDICAL DIRECTOR

1. Call rest of Staff Doctors as needed.

V. TRIAGE TEAM

1. (1) Nurse Practitioner (Adult) - Maintenance - (2) Aides - Clerk - stationed at the ambulance entrance - casualties will be screened and sent to respective area for treatment.
2. First Aid will be given immediately to prevent loss of life then sent to an active hospital.
3. Field type O.R. - X-Ray and similar posts could be set up in O.T. and P.T. areas.
4. Cots set up in Auditorium - post surgery.

VI. EVACUATION

1. Medical Director decision
Discharge or transfer of patients. Extra beds could be placed in certain areas.
2. Ambulatory patients could be sent home for a time or to other Nursing Homes.

ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM

Policies, Standards, Rules and Regulations

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ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM12. EXTINGUISHER LOCATIONS

BUILDING	FLOOR	ROOM	QUANTITY	EXTINGUISHER TYPE
FERNALD	BASEMENT	CORRIDOR	2	ABC
FERNALD	BASEMENT	CORRIDOR	1	FIRE BLANKET
FERNALD	BASEMENT	KITCHEN	4	CO ₂
FERNALD	BASEMENT	KITCHEN	2	PRESSURIZED WATER
FERNALD	BASEMENT	KITCHEN	3	ABC
FERNALD	BASEMENT	MECHANICAL RM.	2	ABC
FERNALD	FIRST	CORRIDOR	5	PRESSURIZED WATER
FERNALD	FIRST	CORRIDOR	1	FIRE BLANKET
FERNALD	FIRST	KITCHEN	1	ABC
FERNALD	SECOND	CORRIDOR	4	PRESSURIZED WATER
FERNALD	SECOND	CORRIDOR	1	FIRE BLANKET
FERNALD	SECOND	KITCHEN	1	ABC
FERNALD	SECOND	LOBBY	1	PRESSURIZED WATER
FERNALD	SECOND	LOBBY	1	FIRE BLANKET
BLAISDELL	BASEMENT	E. CORRIDOR	1	PRESSURIZED WATER
BLAISDELL	BASEMENT	LOBBY	1	ABC
BLAISDELL	BASEMENT	W. CORRIDOR	2	PRESSURIZED WATER
BLAISDELL	BASEMENT	W. CORRIDOR	1	FIRE BLANKET
BLAISDELL	BASEMENT	AUDITORIUM	1	PRESSURIZED WATER
BLAISDELL	BASEMENT	O. T.	1	ABC
BLAISDELL	BASEMENT	O. T.	1	CO ₂
BLAISDELL	BASEMENT	P. T.	1	ABC
BLAISDELL	BASEMENT	P. T.	1	FIRE BLANKET
BLAISDELL	BASEMENT	BKKPG.	1	ABC
BLAISDELL	FIRST	E. CORRIDOR	2	PRESSURIZED WATER
BLAISDELL	FIRST	E. CORRIDOR	1	FIRE BLANKET
BLAISDELL	FIRST	KITCHEN	1	ABC
BLAISDELL	FIRST	W. CORRIDOR	1	PRESSURIZED WATER
BLAISDELL	SECOND	E. CORRIDOR	2	PRESSURIZED WATER
BLAISDELL	SECOND	E. CORRIDOR	1	FIRE BLANKET
BLAISDELL	SECOND	KITCHEN	1	ABC
BLAISDELL	SECOND	W. CORRIDOR	1	PRESSURIZED WATER

FERNALD 1 & 2 AND BLAISDELL 1 & 2 - (2) SCOTT AIR PACS EACH.

ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM12. EXTINGUISHER LOCATIONS

BUILDING	FLOOR	ROOM	QUANTITY	EXTINGUISHER TYPE
FERNALD	BASEMENT	CORRIDOR	2	ABC
FERNALD	BASEMENT	CORRIDOR	1	FIRE BLANKET
FERNALD	BASEMENT	KITCHEN	4	CO ₂
FERNALD	BASEMENT	KITCHEN	2	PRESSURIZED WATER
FERNALD	BASEMENT	KITCHEN	3	ABC
FERNALD	BASEMENT	MECHANICAL RM.	2	ABC
FERNALD	FIRST	CORRIDOR	5	PRESSURIZED WATER
FERNALD	FIRST	CORRIDOR	1	FIRE BLANKET
FERNALD	FIRST	KITCHEN	1	ABC
FERNALD	SECOND	CORRIDOR	4	PRESSURIZED WATER
FERNALD	SECOND	CORRIDOR	1	FIRE BLANKET
FERNALD	SECOND	KITCHEN	1	ABC
FERNALD	SECOND	LOBBY	1	PRESSURIZED WATER
FERNALD	SECOND	LOBBY	1	FIRE BLANKET
BLAISDELL	BASEMENT	E. CORRIDOR	1	PRESSURIZED WATER
BLAISDELL	BASEMENT	LOBBY	1	ABC
BLAISPELL	BASEMENT	W. CORRIDOR	2	PRESSURIZED WATER
BLAISDELL	BASEMENT	W. CORRIDOR	1	FIRE BLANKET
BLAISDELL	BASEMENT	AUDITORIUM	1	PRESSURIZED WATER
BLAISDELL	BASEMENT	O. T.	1	ABC
BLAISDELL	BASEMENT	O. T.	1	CO ₂
BLAISDELL	BASEMENT	P. T.	1	ABC
BLAISDELL	BASEMENT	P. T.	1	FIRE BLANKET
BLAISDELL	BASEMENT	BKKPG.	1	ABC
BLAISDELL	FIRST	E. CORRIDOR	2	PRESSURIZED WATER
BLAISDELL	FIRST	E. CORRIDOR	1	FIRE BLANKET
BLAISDELL	FIRST	KITCHEN	1	ABC
BLAISDELL	FIRST	W. CORRIDOR	1	PRESSURIZED WATER
BLAISDELL	SECOND	E. CORRIDOR	2	PRESSURIZED WATER
BLAISDELL	SECOND	E. CORRIDOR	1	FIRE BLANKET
BLAISDELL	SECOND	KITCHEN	1	ABC
BLAISDELL	SECOND	W. CORRIDOR	1	PRESSURIZED WATER

FERNALD 1 & 2 AND BLAISDELL 1 & 2 - (2) SCOTT AIR PACS EACH.

ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM12. EXTINGUISHER LOCATIONS

BUILDING	FLOOR	ROOM	QUANTITY	EXTINGUISHER TYPE
MITCHELL	BASEMENT	CORRIDOR	1	PRESSURIZED WATER
MITCHELL	"	PRINT RM.	1	PRESSURIZED WATER
MITCHELL	FIRST	RM. 4	1	ABC
MITCHELL	FIRST	CORRIDOR	2	PRESSURIZED WATER
MITCHELL	FIRST	CORRIDOR	1	FIRE BLANKET
MITCHELL	FIRST	KITCHEN	1	ABC
MITCHELL	FIRST	STAIRWELL	2	PRESSURIZED WATER
MITCHELL	SECOND	RM. 26	1	ABC
MITCHELL	SECOND	CORRIDOR	2	PRESSURIZED WATER
MITCHELL	SECOND	CORRIDOR	1	FIRE BLANKET
MITCHELL	SECOND	KITCHEN	1	ABC
MITCHELL	SECOND	STAIRWELL	2	PRESSURIZED WATER
UNDERHILL	BASEMENT	CORRIDOR	2	PRESSURIZED WATER
UNDERHILL	BASEMENT	CORRIDOR	1	ABC
UNDERHILL	BASEMENT	STORE RM.	1	PRESSURIZED WATER
UNDERHILL	FIRST	CORRIDOR	7	PRESSURIZED WATER
UNDERHILL	FIRST	PORCH	1	PRESSURIZED WATER
UNDERHILL	FIRST	PORCH	1	ABC
UNDERHILL	FIRST	BY PORCH	1	FIRE BLANKET
UNDERHILL	FIRST	KITCHEN	1	ABC
UNDERHILL	SECOND	CORRIDOR	7	PRESSURIZED WATER
UNDERHILL	SECOND	PORCH	1	PRESSURIZED WATER
UNDERHILL	SECOND	PORCH	1	ABC
UNDERHILL	SECOND	BY PORCH	1	FIRE BLANKET
UNDERHILL	SECOND	KITCHEN	1	ABC

ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM12. DISASTER RESPONSIBILITIES:

NURSING:

1. Charge Nurse - (2) Aides remain at their station, all other personnel will take lounge chairs and wheel chairs and go down to ambulance entrance. Fernald and Blaisdell elevators will be down, Mitchell elevator up.
2. Central Supply Aide - Maintain supplies in emergency room and First Aide Station & Cast Room - Supply Room that has running water. In the event of Field Station Hospital - RN and LPN in charge.
3. Operating Room - Scrub Nurse - RN or LPN with surgical training plus RN or LPN - Floor Nurse, Anesthetist - MD or RN
CAST - RN or LPN with 1 - 2 Aides.
4. Emergency - All other staff will be assigned to areas to carry out assigned duties. Help transport patients after triage officer sees them. Help inspect - bandage - or give solace to patients.

ADMISSION:

1. Office Manager will be in charge, or senior staff member on duty.
2. Switchboard to be manned at all times.
3. To place emergency tags correctly on admissions.
4. Recording of transfer or discharge of patients to where and when.
5. Liaisons between home and relatives.

HOUSEKEEPING:

1. Keep linen supply available.
2. Clean areas when necessary.
3. All staff will report to Housekeeping Office to be sent where needed.
4. Laundry - work to keep linens available.

PHARMACY:

1. Send supplies to area requesting them.
2. Order supplies from outside source to prevent shortage.

DIETARY:

1. Provide emergency food supply.
2. Utilize staff for 24 hour coverage.

MAINTENANCE:

1. Transfer and set up of equipment.
2. Repair of equipment.
3. Keep traffic lanes open.
4. Utilize staff for 24 hour coverage.

P.T.: will assist Nursing in transporting.

O.T.: will receive patients into Auditorium - keep calm.

ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM

12. NURSING:

Supervisor to disaster area.

Head Nurses

1. See that ward is being secured- windows, doors closed.
2. Kardex - bed check as required.
3. Calm and attend patients.
4. Telephone to be manned - await orders to evacuate.
5. Assign staff to detail.
6. When ordered by senior staff member on duty - Send Scott Air Pac trained personnel to don equipment.

Non-Disaster Building:

Divide staff into Group I & II using coffee break.

Group I - 1st. coffee

Remain on floor, closing doors and windows. Help to calm patients.
Await orders to evacuate.

Group II - 2nd coffee

Secure your duty area until instructed to do otherwise.

1. Report to disaster area.
 2. Help move patients from immediate disaster area using horizontal and vertical evacuation.
 3. Walking patients - wrap in blanket.
 4. Bed patients - wrap in blanket, drag by head of blanket.
- Await Orders To Evacuate.

7-3 Special Detail

EMERGENCY ROOM - Manned by: Supply room - Supervisor of supplies
Drug room - Pharmacist.

ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM

12.

OCCUPATIONAL THERAPY:

FIRE PROCEDURES

1. CLOSE WINDOWS AND DOORS.
2. SHUT OFF ALL ELECTRICAL EQUIPMENT.
3. HOLD ALL PATIENTS IN THE AREA - LIST ALL PATIENTS.
4. IF ON ELEVATOR, BRING TO GROUND FLOOR. LIST ALL PATIENTS.
5. ORDERS WILL BE ANNOUNCED OVER P.A. SYSTEM IF WORKING, IF NOT THERE WILL BE A MESSENGER.
6. TO EVACUATE BUILDING WILL COME AS A DIRECT ORDER.
7. REPORT TO AUDITORIUM WHEN ORDER IS GIVEN.

PHYSICAL THERAPY:

FIRE PROCEDURES

1. CLOSE WINDOWS AND DOORS.
2. SHUT OFF ALL ELECTRICAL EQUIPMENT.
3. HOLD ALL PATIENTS IN THE AREA - LIST ALL PATIENTS.
4. IF ON ELEVATOR, BRING TO GROUND FLOOR. LOCK. LIST ALL PATIENTS.
5. ORDERS WILL BE ANNOUNCED OVER P.A. SYSTEM IF WORKING, IF NOT THERE WILL BE A MESSENGER.
6. TO EVACUATE BUILDING WILL COME AS A DIRECT ORDER.
7. PHYSICAL THERAPY AIDES WILL BE USED FOR TRANSPORTATION IN ANY DISASTER.

HAIRDRESSER:

FIRE PROCEDURES

1. KEEP PATIENTS IN YOUR ROOM, LIST ALL PATIENTS.
2. TRANSPORTING, MOVE PATIENTS INTO A SAFETY OR HOLDING AREA.

PATIENTS IN SMOKING AREA SHOULD MOVE INTO MITCHELL BUILDING OR HAIRDRESSING ROOM.

ADMINISTRATION:

FIRE PROCEDURES

1. CLOSE WINDOWS AND DOORS.
2. SHUT OFF ALL ELECTRICAL EQUIPMENT.
3. STAFF REMAINS IN THE AREA.
 - a. Assist telephone operator.
 - b. Act as messengers.
 - c. Act as clerks; information center.

ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM

12. MAINTENANCE

1. In the event of a fire in the Nursing Home or the Brentwood complex, the Maintenance Department will be responsible for the following:
 - A. Transfer and set-up of equipment as required.
 - B. Maintain and repair of essential equipment facilities and utilities.
 - C. Insure that the traffic lanes are open.
2. All personnel (except as designated) will report to the Maintenance control point. Maintenance control will insure:
 - A) That the fire pump station is manned and in operating condition. This station will be transferred to the control of the Fire Chief or his representative upon their arrival.
 - B) That all electrical systems and plants are operable, disconnect as required.
 - C) That the boiler and sewer plant is manned and all unessential equipment be shut down.
 - D) Insure that the water supply system is manned and in operating condition.
 - E) Insure that all trucks, tractors, and heavy equipment is readily available and pooled.
4. The Maintenance Supervisor, foreman, and fire alarm system technician will respond to the fire scene. Determination will be made at that time of requirements for additional manpower and/or equipment.
5. All the Maintenance personnel will always assume total responsibility to insure that the fire plan is followed and coordinate the activities until relieved by the fire chief or fire marshall.
6. Only after the fire chief or fire marshall has declared the emergency over, will Maintenance operations be returned to normal.

ROCKINGHAM NURSING HOME
FIRE, SAFETY, DISASTER PROGRAM

12. EVACUATION ROUTE

UNDERHILL 1

1. When alarm sounds, residents should be kept calm, doors and windows are to be shut.
2. Residents should be moved horizontally away from fire scene, provide a blanket.
3. Vertical evacuation, when ordered, shall be out t following exits;

Exit 1 - West Rooms
Exit 2 - South Rooms
Exit 3 - North Rooms
Exit 3 - Wheelchairs if possible.

DO NOT MOVE BEDS IN CORRIDOR.

UNDERHILL 2

1. When alarm sounds, residents should be kept calm, doors and windows are to be shut.
2. Residents should be moved horizontally away from fire scene, provide a blanket.
3. Vertical evacuation, when ordered, shall be down the fire escape.

DO NOT MOVE BEDS IN CORRIDOR.

ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM

12. EVACUATION ROUTE

FERNALD 1 & 2

1. When alarm sounds, residents should be kept calm, doors and windows are to be shut.
2. Residents should be moved horizontally, away from fire scene, beyond fire doors. Provide a blanket.
3. Vertical evacuation, when ordered, shall be down stairwell designated by senior staff member.

DO NOT MOVE BEDS IN CORRIDOR.

MITCHELL 1 & 2

1. When alarm sounds, residents should be kept calm, doors and windows are to be shut.
2. Residents should be moved horizontally, away from fire scene, beyond fire doors. Provide a blanket.
3. Vertical evacuation, when ordered, shall be down fire escape off sunporch.

DO NOT MOVE BEDS IN CORRIDOR.

ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM

12. EVACUATION ROUTE

BLAISDELL 1

1. When alarm sounds, residents should be kept calm, doors and windows are to be shut.
2. Residents should be moved horizontally, away from fire scene, beyond fire doors. Provide a blanket.
3. Vertical evacuation when ordered, shall be out the following exits:

B1-A - East Stairs
B1-B - West Stairs

DO NOT MOVE BEDS IN CORRIDOR.

BLAISDELL 2

1. When alarm sounds, residents should be kept calm, doors and windows are to be shut.
2. Residents should be moved horizontally, away from fire scene, beyond fire doors. Provide a blanket.
3. Vertical evacuation, when ordered, shall be out the following exits:

B2-A - East Stairs
B2-B - West Stairs

DO NOT MOVE BEDS IN CORRIDOR.

GROUND FLOORS

1. Move residents horizontally away from fire scene.
2. If evacuation is ordered, residents should be moved out nearest exit.

ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM

12.

STAIRWELLS EMERGENCY USE

Upstairs Traffic:

FERNALD - South Stairs
MITCHELL - West Stairs
UNDERHILL - East Stairs
BLAISDELL - Center Stairs



Downstairs Traffic:

FERNALD - North Stairs
MITCHELL - Fire Escape
UNDERHILL - Fire Escape
BLAISDELL - East Stairs
BLAISDELL - West Stairs



Nursing staff shall remain in or return to their duty area until ordered to do otherwise.

Ground level emergencies shall be handled by the following personnel:

Fernald, Mitchell, Underhill Basements - Dietary, Housekeeping, & Storeroom employees.

Blaisdell Basement - Administration, Physical Therapy, & Occupational Therapy employees.

Evacuation of ward or building shall be ordered by senior staff member on duty.

ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM

12. DIETARY SERVICES

Table of chlorine solution for disinfecting water from "Basic Course in Emergency Feeding":

<u>Quantity of Water</u>	<u>Clear Water</u>	<u>Cloudy Water</u>
1 gallon	10 drops	20 drops
5 gallons	1/2 teaspoon	1 teaspoon
1,500 gallons	1 quart	2 quarts

Dose the water with chlorine solution, stir and let stand for 30 minutes. If the smell of chlorine in the water has disappeared after 30 minutes, the water should be considered still unsafe to use. More chlorine solution should be added to the water and stirred. Wait 30 more minutes. The water may taste of chlorine, but it is not harmful.

Radioactive fallout cannot be removed by any of these disinfection methods. Special methods are required for treating such water. Food or water exposed to radioactivity must not be used until it has been declared safe by radiological personnel or qualified civil defense officials.

NO SAFE WATERNO REFRIGERATION

NO COOKING OR SERVING FACILITIES - In the event that there is no safe water, refrigeration or cooking or serving facilities, the following steps should be followed:

1. Rely on canned and package foods, eaten cold, directly from the container or paper plates. Save tin cans for possible future use as eating utensils.
2. Use juices from canned fruits and vegetables as substitutes for water. Gingerales, soft drinks, or fruit juices may be used as substitutes for water.
3. Serve foods that can be held in the hand.
4. Check the disaster plan menu that is attached to this plan for meals.

SAFE WATERIMPROVISED COOKING FACILITIES

SAFE RECEPTACLES FOR FOOD AND BEVERAGE SUCH AS TIN CANS, OR PAPER CUPS AND DISHES - In the event that the above situation exists, the following steps should be followed:

1. Serve a simple hot soup, stew, bread, or crackers, and a hot beverage.
2. If water for cooking is rationed, use vegetable juices and canned soups as liquids for cooking.
3. Use ration water for coffee and tea as well as for plain drinking water.
4. Follow the disaster plan menu that is attached to this plan for meals.

ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM

12. DIETARY SERVICES (cont'd)

SOME WATER

NO UTILITIES ELECTRIC

LP GAS AVAILABLE - In the event that the above situation exists, the following steps should be followed:

1. Move the tray line operation to the staff dining room, making use of the dining room serving line which is operated with gas.
2. Serve sandwiches with fillings not subject to quick spoilage and easily handled beverage.
3. Follow the disaster plan menu that is attached to this plan for meals.

ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM

12. DIETARY SERVICES

DISASTER PLAN MENU1st Day

<u>BREAKFAST</u>		<u>Calories</u>	
4 oz.	Orange Juice	40	
1 cup	Dry Cereal	80	
4 oz.	Evaporated Milk	173	
2 pkg.	Sugar	40	
8 oz.	Instant Coffee		
		<hr/>	333

<u>LUNCH</u>			
6 oz.	Cream Celery Soup	60	
2 oz.	Cheese Sandwich	146	
2 slice	(on bread)	136	
1 pat	Oleo	45	
5 - 6	Carrot Sticks	40	
4 oz.	Canned Pear & Juice	80	
4 ea.	Crackers	68	
8 oz.	Milk (made from non-fat dry milk)	80	
8 oz.	Coffee or Tea		
1 pkg.	Sugar	20	
		<hr/>	675

<u>SUPPER</u>			
6 oz.	Chicken Rice Soup	85	
2 oz.	Peanut Butter Sandwich	146	
2 slice	(on bread)	136	
4 ea.	Crackers	68	
4 oz.	Fruit Mix & Juice	80	
8 oz.	Milk (made from non-fat dry milk)	80	
8 oz.	Coffee or Tea		
1 pkg.	Sugar	20	
		<hr/>	615

TOTAL FOR DAY 1,623

ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM

12. DIETARY SERVICES

DISASTER PLAN MENU2nd Day

<u>BREAKFAST</u>		<u>Calories</u>
4 oz.	Orange Juice	40
1 cup	Dry Cereal	80
4 oz.	Evaporated Milk	173
2 pkg.	Sugar	40
8 oz.	Instant Coffee	_____
		333
 <u>LUNCH</u>		
2 ea.	Franks	210
1/2 cup	Baked Beans (canned)	140
	Relish	20
4 oz.	Peaches	80
2 slice	Bread	136
2 pat	Oleo	90
1 pkg.	Sugar	20
8 oz.	Milk (made from non-fat dry milk)	80
8 oz.	Coffee or Tea	_____
		776
 <u>SUPPER</u>		
1 cup	Tuna Salad	250
4 ea.	Crackers	68
1 pat	Oleo	45
2 slice	Bread	136
2 ea.	Cookies	100
4 oz.	Sliced Pineapple	80
8 oz.	Milk (made from non-fat dry milk)	80
1 pkg.	Sugar	20
8 oz.	Coffee or Tea	_____
		779
 TOTAL FOR DAY		1,888

ROCKINGHAM NURSING HOME

FIRE, SAFETY, DISASTER PROGRAM

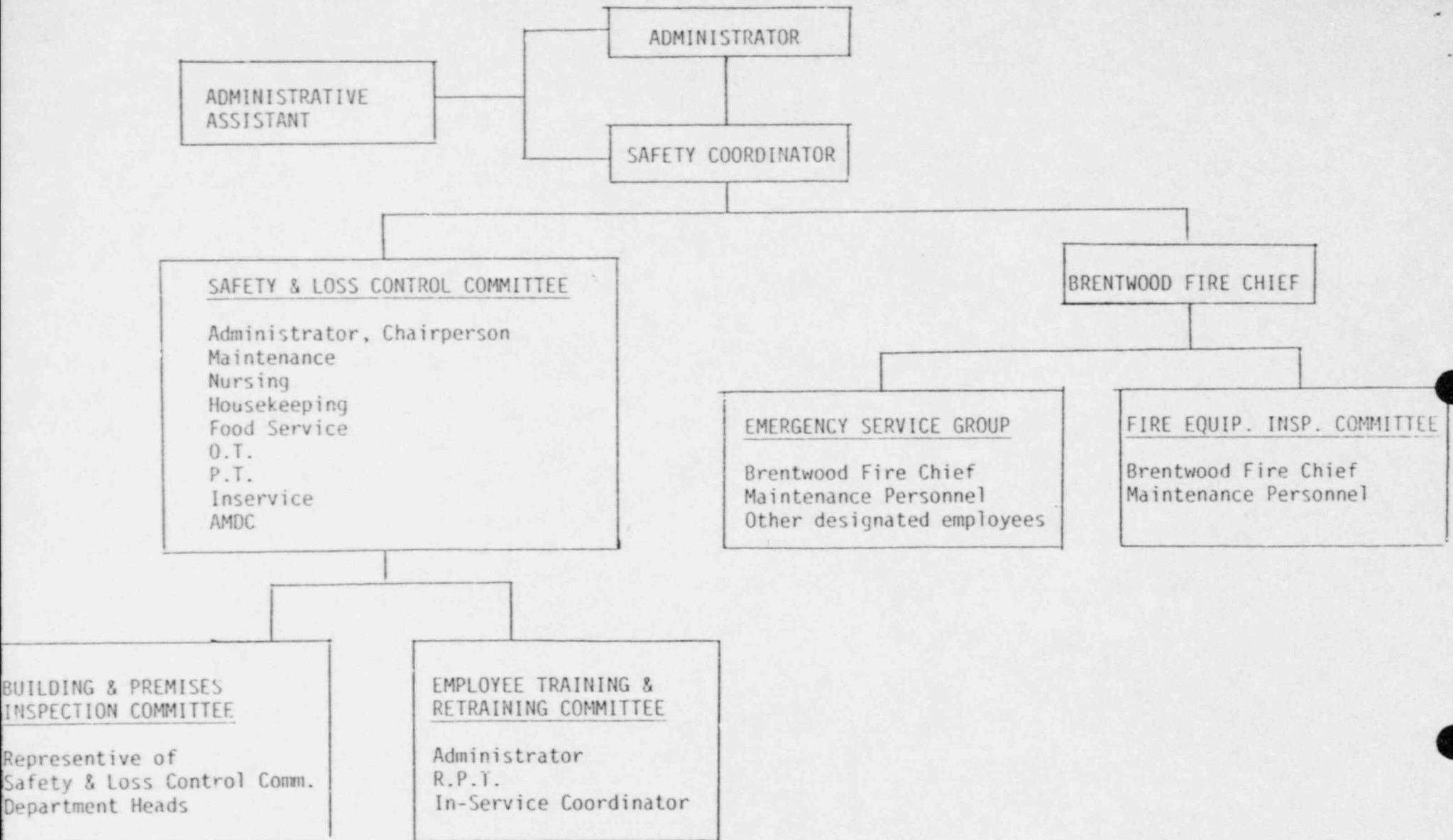
12. DIETARY SERVICES

DISASTER PLAN MENU3rd Day

<u>BREAKFAST</u>		<u>Calories</u>	
4 oz.	Orange Juice	40	
1 cup	Dry Cereal	80	
4 oz.	Evaporated Milk	173	
2 pkg.	Sugar	40	
8 oz.	Instant Coffee	—	333
<u>LUNCH</u>			
6 oz.	Vegetable Beef Soup	85	
4 ea.	Crackers	68	
4 oz.	Cranberry Juice	80	
2 slice	Bread	136	
2 pat	Oleo	90	
4 oz.	Apricots	80	
8 oz.	Milk (made from non-fat dry milk)	80	
8 oz.	Coffee or Tea		
1 pkg.	Sugar	<u>20</u>	639
<u>SUPPER</u>			
6 oz.	Chicken Vegetable Soup	85	
4 ea.	Crackers	68	
2 slice	Bread	136	
2 pat	Oleo	90	
2 ea.	Cookies	100	
4 oz.	Applesauce	80	
8 oz.	Milk (made from non-fat dry milk)	80	
1 pkg.	Sugar	20	
8 oz.	Coffee or Tea	—	<u>659</u>
TOTAL FOR DAY			1,631

SAFETY AND LOSS CONTROL PROGRAM

ROCKINGHAM COUNTY NURSING HOME



ROCKINGHAM COUNTY NURSING HOME

SAFETY AND LOSS CONTROL COMMITTEEORGANIZATION

The safety and Loss Control Committee has the responsibility and authority as delegated by the Administrator to organize, direct, and control the Safety and Loss Control Program for all Nursing Home operations and activities involving the safety and welfare of residents, clients, members of the public, employees, and professional staff.

Its basic activities are as follows:

1. Review the incident analyses as prepared by the Representative Insurance Agency to determine the effectiveness of the Safety and Loss Control Program.
2. Review and investigate all incidents particularly those in which time loss or injury has resulted. Make recommendations for corrective action when required.
3. Review Inspections Reports and check the action taken to remove or control the hazardous conditions or practices reported.
4. Plan Safety and Loss Control Training Programs (including fire) for all personnel.
5. Institute a program for handling patients and members of the public under emergency conditions.
6. Develop and assist in the use of educational materials, including visual aids, which should be a part of the Nursing Home's personnel training programs.
7. Develop Safety and Loss Control educational material, which includes Off-The-Job safety, for posting within departments and for general distribution to all employees.

MEMBERSHIP

Each Department Head is responsible for representation of at least one member to serve on the Safety and Loss Control Committee. Each appointment will be reviewed at least annually by the Department Head and the Safety and Loss Control Committee.

MEETINGS

The committee meets every 2nd & 4th Tuesday of each month at 1:45 pm. Special meetings may be called by the Chairperson. Members must designate an alternate to attend meetings in their absence.

ROCKINGHAM COUNTY NURSING HOME

SAFETY AND LOSS CONTROL COMMITTEE

The Safety and Loss Control Committee reports directly to the Administrator on all matters pertaining to the Safety and Loss Control Program, and has the responsibility to:

1. Assist the Department Heads and Supervisors in carrying out their responsibilities in accident prevention and fire protection.
2. Keep records of all incidents involving injury or time loss. From the incident reports, prepare analyses for management and for Committee personnel showing types, trends, causes, problem areas, etc.
3. Conduct quarterly safety inspections with the Department Heads as outlined under "Building and Premises Inspection Committee", and follow up the recommendations until satisfactorily completed.
4. Follow up with the Fire Chief until the recommendations of the Fire Equipment Inspection Committee are successfully completed.
5. Administer the Safety Training Programs developed by the Employee Training and Retraining Committee for all personnel.
6. Supervise the posting and distribution of Safety and Loss Control Educational material.
7. Integrate Nursing Home Safety and Loss Control Activities with the latest developments in accident prevention.
8. Transmit to the Administrator any Safety and Loss Control recommendations that require approval by the Administrator or the Board for Commissioners before such recommendations may be put into effect.
9. Devise and recommend forms to be used in all the phases of Safety and Loss Control activities to promote adequate documentation.
10. Submit written reports to the Administrator on the progress of the Safety and Loss Control activities.
11. Conduct and monitor regular fire drills.
12. Assist in training all Nursing Home personnel in sounding the alarm and using emergency fire-fighting equipment.
13. Develop in cooperation with the local public fire department a fire emergency and evacuation program.
14. See that periodic inspections by the Fire Equipment Inspection Committee are made of all fire-protection and fire-fighting equipment. Assure that remedial action is taken to correct unsatisfactory findings and that reports are submitted promptly to the Safety and Loss Control Committee.

ROCKINGHAM COUNTY NURSING HOME

ADMINISTRATOR

The Administrator will serve as Chairperson to review the Safety and Loss Control program and initiate necessary changes to keep the program effective and current.

The Administrator shall take proper action to motivate all Department Heads in developing a proper attitude toward Safety and Loss Control.

DEPARTMENT HEADS, SUPERVISORS AND ANY PERSON IN LEADERSHIP ROLE

Responsibilities are to:

1. Enforce the safety rules and regulations of the Nursing Home and promptly report any violations to the Safety and Loss Committee.
2. Make quarterly inspections of their departments and initiate the corrective actions needed. Submit a written inspection report to the Safety and Loss Control Committee.
3. Require that all incidents in each department be reported immediately. Submit a copy of the incident report to an officer of the Safety and Loss Committee within 72 hours.
4. Require that all employees in each department be trained in safe work practices, especially body mechanics and fire safety.
5. Require that all employees in each department be familiar with the emergency evacuation program and actively participate in fire drills.
6. Be constantly on the alert to detect unsafe conditions and practices, and take steps to eliminate them.
7. Require that all new employees read the Safety Booklet upon employment and annually thereafter during Fire Safety Week (October). Employees are to submit to their Department Head a signed form stating that he/she has read the booklet. This is to be filed in their personnel record.
8. Keep accurate records of attendance at Safety training programs of employees in each department.

EMPLOYEE TRAINING COMMITTEE

The Employee Training and Retraining Committee is composed of the Administrator, Director of P.T., and the In-Service Coordinator.

The Committee has the responsibility for planning, organizing, and evaluating training programs:

1. In the use of first aid and fire equipment.

ROCKINGHAM COUNTY NURSING HOME

EMPLOYEE TRAINING COMMITTEE (Con't)

2. In the use of good body mechanics and the safe movement of residents.
3. In the techniques used to investigate the causes of incidents.
4. In safe work practices and environments.

BUILDING AND PREMISES INSPECTION COMMITTEE

ORGANIZATION

The Committee is composed of a representative from the Safety and Loss Control Committee and a representative of Maintenance personnel. While an area or department is being inspected, the Department Head or Supervisor becomes a temporary member of the Inspection Committee.

The Committee performs the following duties:

Inspection of all departments and work and storage areas quarterly or more frequently if considered necessary. There will be an immediate inspection of any area where new hazards or incidents are reported.

Findings and recommendations of the Committee are reported on the inspection forms provided. A copy of each inspection report is given to the department head or supervisor concerned, so that any necessary corrective action within the supervisor's area of responsibility may be started immediately. A second copy is retained by the secretary of the Safety and Loss Control Committee for followup purposes. A third is forwarded to the Administrator.

FIRE EQUIPMENT INSPECTION COMMITTEE

ORGANIZATION

The Committee is composed of a representative from the Safety and Loss Control Committee, Brentwood Fire Chief, and two members of the Maintenance Department.

The duties of the Committee are to make periodic inspections of all fire - protection and fire-fighting equipment on a frequency determined by the Fire Chief.

Findings and recommendations of the Committee are reported on inspection forms provided. A copy of each inspection report is retained by the Secretary from the Safety and Loss Control Committee for discussion at the Safety and Loss Control Committee meetings and for followup purposes. A copy of each inspection report is also forwarded to the Administrator.

ROCKINGHAM COUNTY NURSING HOME

EMERGENCY SERVICE GROUP

ORGANIZATION

The Emergency Service Group is composed of the Fire Chief, Maintenance Personnel, and designated employees of various departments and consists of enough members to provide an immediate response of at least four members to any emergency. There should be a Group for all three shifts. The activities of the Group should be supervised by the Fire Chief and monitored by the Safety and Loss Control Committee as needed.

The Emergency Service Group responds immediately to any emergency.

MEMBERS

The members are selected by the Fire Chief and the Safety and Loss Control Committee with consideration given to the following qualifications:

1. Physical condition and interest in the fire emergency and evacuation program.
2. Availability to answer alarms and attend training sessions.
3. Specific abilities related to the needs of the Group (electrician, plumber, truck driver, etc.)

ROCKINGHAM COUNTY NURSING HOME
SAFETY AND LOSS CONTROL PROGRAM

MOTOR VEHICLE CONTROL

The purpose of this program is to establish requirements for the safe operation of motor vehicles owned and leased by the Rockingham County Nursing Home.

1. All individuals selected to operate motor vehicles must possess a valid current driver's license from the State of New Hampshire. Selection to operate will be made by the individual supervisor and submitted in writing to the appropriate department head. Both physical and mental conditions must be considered by the supervisor before recommending a person.
2. The Rockingham County Maintenance Department will maintain a current listing of all individuals authorized to operate motor vehicles (name, address, license number) for the purpose of insurance information.
3. Pre-operation Inspection of Vehicles:
 - a. Check for physical damage prior to start
 - b. Check oil, water, tires
 - c. Check and adjust mirrors (side and rear view)
 - d. Check and adjust safety belts

Note all damage or questionable areas and report them to the Maintenance Department as soon as possible. DO NOT OPERATE A VEHICLE IF AN UNSAFE CONDITION EXISTS.

4. During operation of the vehicle the operator should be aware of all the safety and warning devices within the vehicle (low oil, low water and generator warning lights). Operator must always observe all posted driving speeds and drive in a safe and prudent manner. Driving the vehicles of the Nursing Home complex requires that All Drivers Be Alert For Elderly Residents who may be walking around the area.
5. Post Operation Requirements of Vehicles:
 - a. Insure that parked vehicles are properly braked (hand brake on). If the vehicle has automatic transmission, insure that it is placed in the "PARK" position. If the vehicle is standard transmission, place the transmission in gear (first or reverse)
 - b. Check vehicle for damages.
 - c. Refuel the vehicle after every use.
6. Maintenance and Repairs:
 - a. Preventive maintenance and repairs will normally be performed by the Maintenance Department. All work will be attempted to be accomplished on a scheduled basis.
 - b. Repairs or emergency service that may occur on the road are to be accomplished as required after consultation with the Maintenance Department.

ROCKINGHAM COUNTY NURSING HOME

SAFETY AND LOSS CONTROL PROGRAM

MOTOR VEHICLE CONTROL (con't)

8. Accidents Should you become involved in a motor vehicle accident, the following must be done:
- a. Do Not leave the scene of an accident.
 - b. If you have passengers on board, check to see if any are injured. Perform first aid as required, and call for help.
 - c. If you are involved with another vehicle, get all the information of that vehicle and driver:
 - 1. Name & Address (driver and witnesses)
 - 2. Vehicle type and number
 - 3. Insurance company of other driver
 - 4. Notify police
 - 5. Fill out accident report
 - d. All accidents are to be reported to your supervisor and the Maintenance Department is to be notified. Accident report must be filed with the insurance company and the State of New Hampshire with 5 days.-

ROCKINGHAM COUNTY NURSING HOME

INCIDENTS INVESTIGATIONS

It is the policy of Rockingham County Nursing Home to perform incident investigations as a means to prevent similar or more serious incidents. The Safety and Loss Control Committee will investigate and review as needed, any and all incidents particularly those involving:

- a. the use of improper body mechanics and/or lifting techniques, the improper use of equipment, and any incident resulting in time loss or a medical claim.

Investigations shall be conducted by designated members of the Safety and Loss Control Committee including the supervisor or Department Head of the area where the incident occurred.

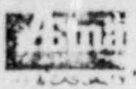
PROCEDURE:

1. Source of referrals for investigation will include incident reports, resident complaints, employee concern for potential injury or time loss, and general trends and individual incident patterns as evidenced by HIL report or records of the Safety and Loss Control Committee.
2. An investigation of an incident will be initiated within 72 hours and a preliminary report submitted to the Safety and Loss Control Committee within 2 weeks.
3. The investigation report shall include a description of the incident, names of employees and/or witnesses related to the incident, identified causes, statements from individuals involved in the incident including the witnesses, action taken to prevent recurrence, the date of the report, and the signatures of investigators.
4. The Safety and Loss Control Committee shall review all investigation reports at regularly scheduled or special meetings and make recommendations regarding need for any further action to be taken, including disciplinary measures.
5. Any employee involved in an incident investigation shall be notified of the review date scheduled with the Safety and Loss Control Committee. The employee may exercise the option of being present at the review session to provide input to the committee.
6. The Safety and Loss Control Committee will meet in a closed session to make decisions and vote on recommendations regarding each investigation reviewed.
7. Recommendations of each investigation reviewed will be submitted to the Administrator within one week of review date, including written documentation for disciplinary action.

ROCKINGHAM COUNTY NURSING HOME

INCIDENT INVESTIGATIONS (con't)

8. It shall be the responsibility of the department head to present to the employee any written documentation for disciplinary action upon approval of the Administrator.
9. All reports and documentation will be kept on file by the Secretary of the Safety and Loss Control Committee. Copies will be placed in an involved employee's personnel folder.



HOSPITAL INSPECTION REPORT
GENERAL PREMISES

FOR INSURED'S USE ONLY

INSURER	DATE
---------	------

"CHECK EACH ITEM BELOW "SATISFACTORY" OR "NOT SATISFACTORY". FOR EACH ITEM CHECKED "NOT SATISFACTORY", SUBMIT RECOMMENDATIONS TO CORRECT CONDITION OR UNSAFE PRACTICE. DESCRIBE ALL UNSATISFACTORY CONDITIONS OR UNSAFE PRACTICES WITH RESPECT TO ITEMS NOT PRINTED ON THIS FORM UNDER "RECOMMENDATIONS AND OR EXPLANATION OF UNSATISFACTORY ITEMS."

1. BUSINESS OFFICE

	SATISFACTORY	NOT SATISFACTORY	
A.	=	=	Floors
B.	=	=	Supply Storage
C.	=	=	Electrical Equipment - Grounded
D.	=	=	Furniture (File Cabinets, Desks, Chairs)

2. VISITORS LOUNGE

	SATISFACTORY	NOT SATISFACTORY	
A.	=	=	Floors
B.	=	=	Abil. Trays
C.	=	=	Entrances
D.	=	=	Furniture (Chairs, Tables, Lamps)

3. PUBLIC AREAS

	SATISFACTORY	NOT SATISFACTORY	
A.	=	=	Parking Lots
B.	=	=	Sidewalks
C.	=	=	Elevators
D.	=	=	Gift Shop
E.	=	=	Main Entrances
F.	=	=	Stairs, Handrails
G.	=	=	Ambulance Entrances
H.	=	=	General Housekeeping
I.	=	=	Warning Signs Used When Floor Maintenance Is Being Conducted

RECOMMENDATIONS AND OR EXPLANATION OF UNSATISFACTORY ITEMS:

ACTION TAKEN TO CORRECT UNSATISFACTORY CONDITIONS:

INSPECTOR	DATE	REVISOR	DATE
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HOSPITAL INSPECTION REPORT
LABORATORY

FOR INSURED'S USE ONLY

INSPECTION MADE BY _____ DATE _____

NOTE: CHECK EACH ITEM BELOW "SATISFACTORY" OR "NOT SATISFACTORY". FOR EACH ITEM CHECKED "NOT SATISFACTORY", SUBMIT RECOMMENDATION TO CORRECT CONDITION OR UNSAFE PRACTICE. DESCRIBE ALL UNSATISFACTORY CONDITIONS OR UNSAFE PRACTICES WITH RESPECT TO ITEMS NOT PRINTED ON THIS FORM UNDER "RECOMMENDATIONS AND OR EXPLANATION OF UNSATISFACTORY ITEMS".

SATISFACTORY	NOT SATISFACTORY		SATISFACTORY	NOT SATISFACTORY	
<input type="checkbox"/>	<input type="checkbox"/>	Chemical Storage & Labeling	11. <input type="checkbox"/>	<input type="checkbox"/>	Housekeeping
<input type="checkbox"/>	<input type="checkbox"/>	Culture Handling	12. <input type="checkbox"/>	<input type="checkbox"/>	Bunsen Burners Adjusted and Safely Placed
<input type="checkbox"/>	<input type="checkbox"/>	Contamination Disposal Procedures Being Followed	13. <input type="checkbox"/>	<input type="checkbox"/>	Centrifuges Covered
<input type="checkbox"/>	<input type="checkbox"/>	Disposable "sharps" in Proper Container	14. <input type="checkbox"/>	<input type="checkbox"/>	Proper Specimen & Medication Identification
<input type="checkbox"/>	<input type="checkbox"/>	Condition of Glassware	15. <input type="checkbox"/>	<input type="checkbox"/>	Smoking Rules Enforced
<input type="checkbox"/>	<input type="checkbox"/>	Personal Protective Equipment Being Used	16. <input type="checkbox"/>	<input type="checkbox"/>	All Personnel Know Emergency Plan
<input type="checkbox"/>	<input type="checkbox"/>	Flammables in Approved Containers	17. <input type="checkbox"/>	<input type="checkbox"/>	Department Safety Meetings Being Held
<input type="checkbox"/>	<input type="checkbox"/>	Condition of Lab Fixtures & Equipment	18. <input type="checkbox"/>	<input type="checkbox"/>	Incidents Properly Investigated and Proper Follow-up
<input type="checkbox"/>	<input type="checkbox"/>	Ventilation Adequate	19. <input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	Fire Extinguishers	20. <input type="checkbox"/>	<input type="checkbox"/>	

RECOMMENDATIONS AND OR EXPLANATION OF UNSATISFACTORY ITEMS:

ACTION TAKEN TO CORRECT UNSATISFACTORY CONDITION:

DEPARTMENT SUPERVISOR _____ DATE _____ REVIEWED BY _____ DATE _____

INSURER: _____ HOSPITAL NAME: _____ DATE: _____

NOTE: CHECK EACH ITEM BELOW SATISFACTORY OR NOT SATISFACTORY. FOR EACH ITEM CHECKED NOT SATISFACTORY, SUBMIT RECOMMENDATION TO CORRECT CONDITION OR UNSAFE PRACTICE. DESCRIBE ALL UNSATISFACTORY CONDITIONS OR UNSAFE PRACTICES WITH RESPECT TO ITEMS NOT PRINTED ON THIS FORM UNDER "RECOMMENDATIONS AND/OR EXPLANATION OF UNSATISFACTORY ITEMS."

SATISFACTORY		NOT SATISFACTORY		SATISFACTORY		NOT SATISFACTORY	
1.	<input type="checkbox"/>	<input type="checkbox"/>	Machine Guarding & Interlocks	10.	<input type="checkbox"/>	<input type="checkbox"/>	Adequate Light & Ventilation
2.	<input type="checkbox"/>	<input type="checkbox"/>	Hoisting & Handling Equipment	11.	<input type="checkbox"/>	<input type="checkbox"/>	Fire Drills Kept Clear
3.	<input type="checkbox"/>	<input type="checkbox"/>	Laundry Carts	12.	<input type="checkbox"/>	<input type="checkbox"/>	Fire Extinguishers
4.	<input type="checkbox"/>	<input type="checkbox"/>	Hand Irons, Pilot Lights, Cords	13.	<input type="checkbox"/>	<input type="checkbox"/>	Housekeeping, Lint Free, etc.
5.	<input type="checkbox"/>	<input type="checkbox"/>	Floors, Floor Drains				Electric Motors Kept Free of Lint
6.	<input type="checkbox"/>	<input type="checkbox"/>	Chute Doors Kept Closed	14.	<input type="checkbox"/>	<input type="checkbox"/>	Smoking Rules Enforced
7.	<input type="checkbox"/>	<input type="checkbox"/>	Handling and Storage of Bleaches, Acids, Etc.	15.	<input type="checkbox"/>	<input type="checkbox"/>	All Personnel Know Emergency Plan
8.	<input type="checkbox"/>	<input type="checkbox"/>	Personal Protective Equipment	16.	<input type="checkbox"/>	<input type="checkbox"/>	Department Safety Meetings Being Held
	<input type="checkbox"/>	<input type="checkbox"/>	Solvent Storage & Handling	17.	<input type="checkbox"/>	<input type="checkbox"/>	Incidents Promptly Investigated and Action Taken to Prevent Recurrence
	<input type="checkbox"/>	<input type="checkbox"/>		18.	<input type="checkbox"/>	<input type="checkbox"/>	

RECOMMENDATIONS AND/OR EXPLANATION OF UNSATISFACTORY ITEMS

ACTION TAKEN TO CORRECT UNSATISFACTORY CONDITIONS

HOSPITAL SUPERVISOR: _____ DATE: _____ REVIEWER: _____ DATE: _____

NOTE: Check each item below "SATISFACTORY" (S) or "NOT SATISFACTORY" (NS). Each item checked Not Satisfactory submit recommendation to correct condition or unsafe practice.

1. PATIENT ROOMS, WARDS Room No.(s) _____

- A. S NS Floors
- B. S NS Call Buttons, Cords
- C. S NS Beds, Cranks, Side Rails, Cushions
- D. S NS Furniture, Including Foot Stools
- E. S NS Bath, Call Light, Tub Handles, Safety Strips on Tubs and Showers
- F. S NS Oxygen Tent (Warning Sign) Electric Battery or Cord Removed From Area Where Oxygen Is Being Used

2. CORRIDORS, STAIRWAYS Location _____

- A. S NS Exit Signs
- B. S NS Elevator Entrances
- C. S NS Corridor & Smoke Doors - Closed
- D. S NS Storage of Portable Equipment
- E. S NS Floors, warning Signs In Place During Floor Maintenance
- F. S NS Fire Doors Closed and Clear of Obstructions
- G. S NS Chute Doors Closed (Laundry, Trash)
- H. S NS Stairways, Treads, Handrails, Adequate Light
- J. S NS Bath & Shower Rooms, Tub Handles, Safety Strips On Tubs & Showers, Call Lights Working

3. NURSES STATIONS

- A. S NS Call Board
- B. S NS Chart Desk & Racks
- C. S NS Furniture & Equipment

3. NURSES STATIONS (cont'd)

- D. S NS Electrical Cords, Desk Lights
- E. S NS General Housekeeping
- F. S NS Placement of Used Needles
- G. S NS Proper Specimen and Medication Identification
- H. S NS Medication Administration Procedures Observed
- J. S NS Cabinets, Storage - Narcotics Locked, Neat and Orderly Storage

4. UTILITY ROOMS

- A. S NS Floors
- B. S NS Housekeeping
- C. S NS Portable Ladders
- D. S NS Flammable Storage
- E. S NS Maintenance Equip. & Storage
- F. S NS IV Solutions Separated From External Solutions

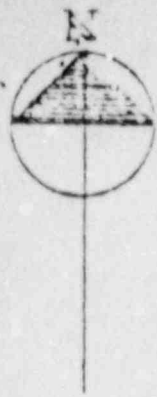
5. GENERAL

- A. S NS Smoking Rules Enforced
- B. S NS Personnel Know Emergency Plan
- C. S NS Fire Extinguishers In Proper Place and Checked
- D. S NS Departmental Safety Meetings Being Held
- E. S NS Warning Sign In Place During Floor Maintenance
- F. S NS Incidents Properly Investigated and Proper Follow-Up

RECOMMENDATIONS AND/OR EXPLANATION OF N. S. ITEMS

ACTION TAKEN TO CORRECT UNSATISFACTORY CONDITION

DEPARTMENT SUPERVISOR _____	DATE _____	REVIEWED BY _____	DATE _____
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PROPANE TANKS

1000

1000

500

INCINERATOR ROOM

transformer
HYDRANT & SPRINKLER PUMPS

FERNALD
BLDG.

10,000 gal.
no. 2 oil

15,000 gal.
no. 6 oil

transformer
340 gals diesel
inside w/ aux. power
elevator entrance

BLAISELL BLDG

UNDERHILL
BLDG.

TO FIRE ALARM
PANELS & MAIN
LOBBY

MITCHELL
BLDG.

blaisdell - fernald

STAGING
FOR FIRE
TRUCKS

FROM RT 125

north road

MAINT.
SHOP &
STORAGE

ADM
RES.

COW & HAY BARN

court record stor.

ROCKINGHAM COUNTY HOME

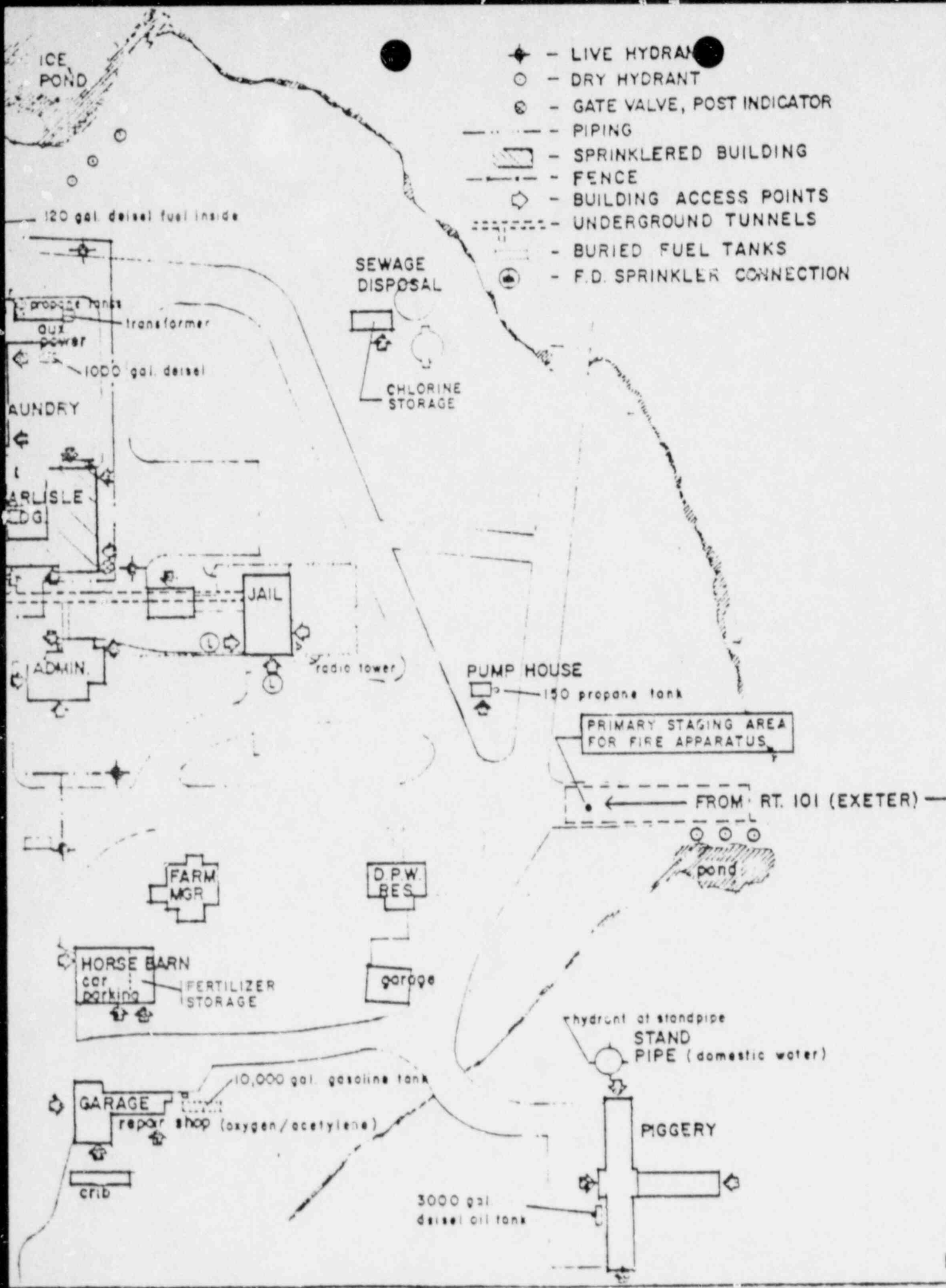
GREENTWOOD

N.H.

STRAW
BARN

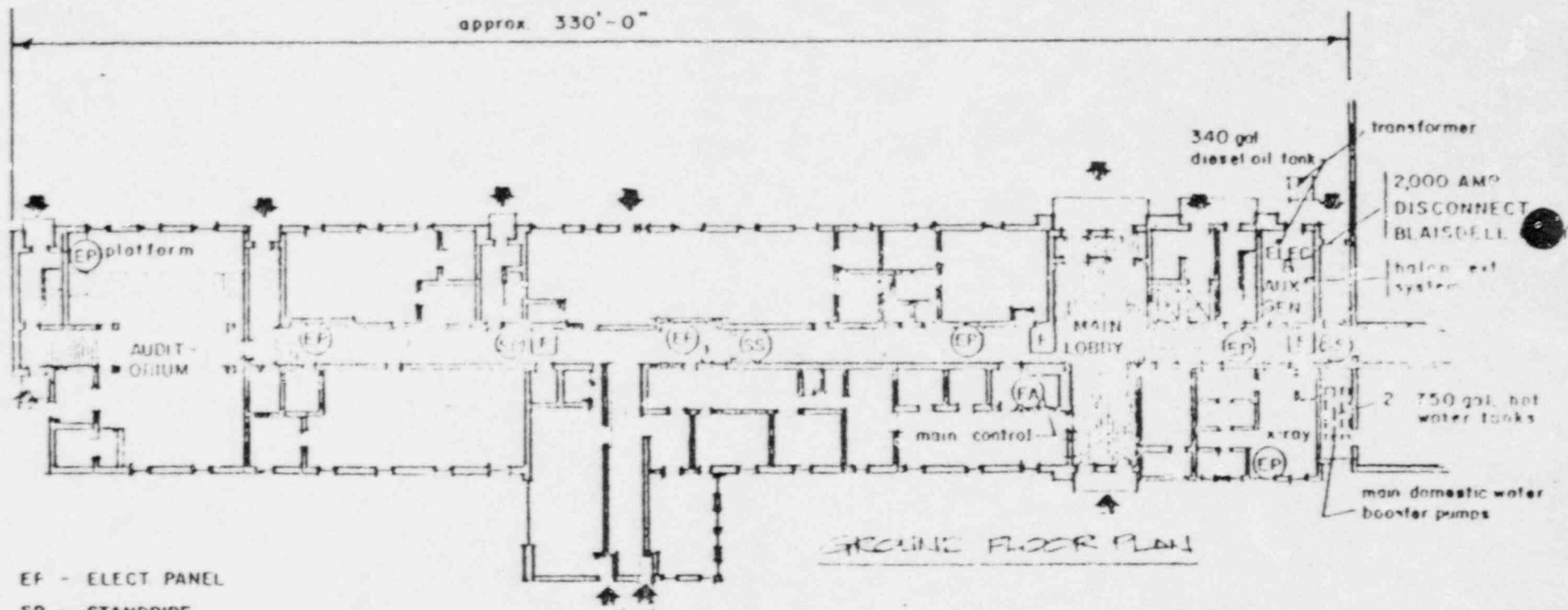
600 g diesel fuel
STORAGE
garage

CALF BARN





approx. 330'-0"

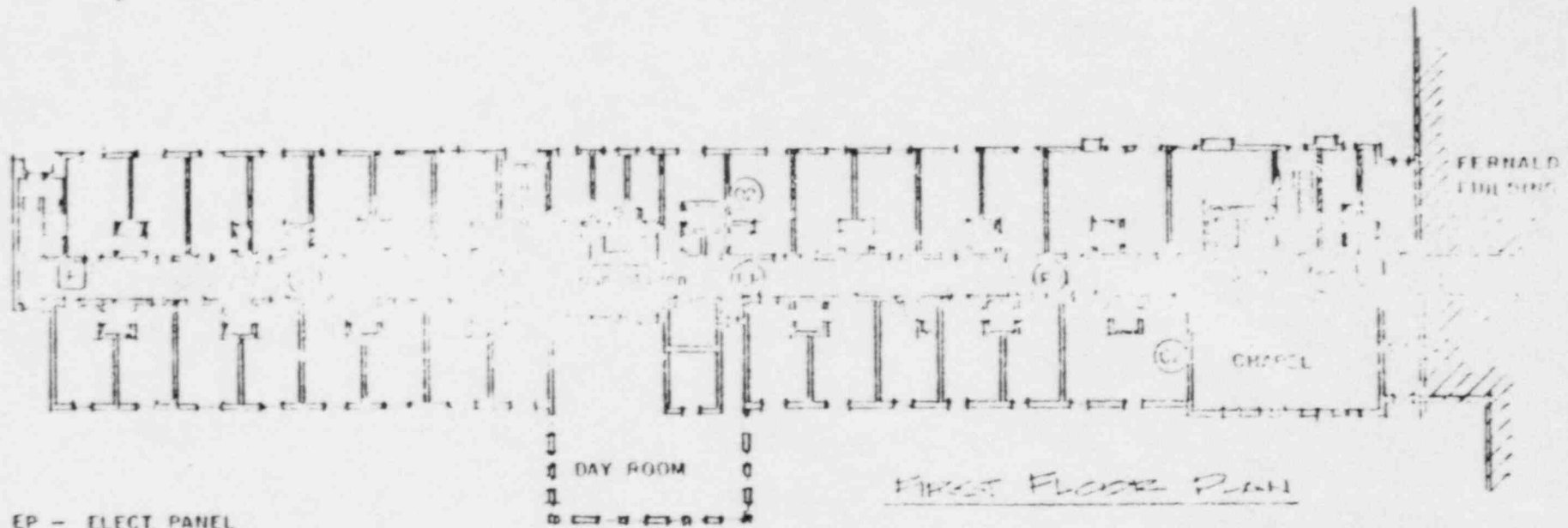


GROUND FLOOR PLAN

- EP - ELECT PANEL
- SP - STANDPIPE
- SS - SMOKE SCREEN DOORS
- FA - FIRE ALARM PANEL
- F - FIRE ALARM PULL STATION

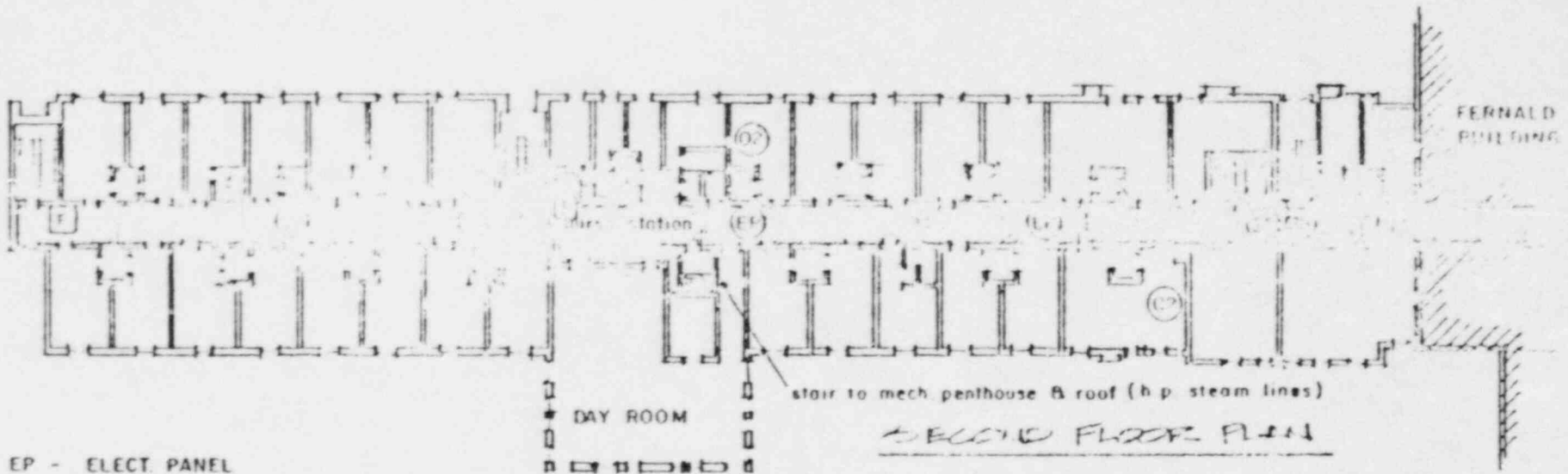
BLAISDELL BUILDING

ROCKINGHAM COUNTY HOME



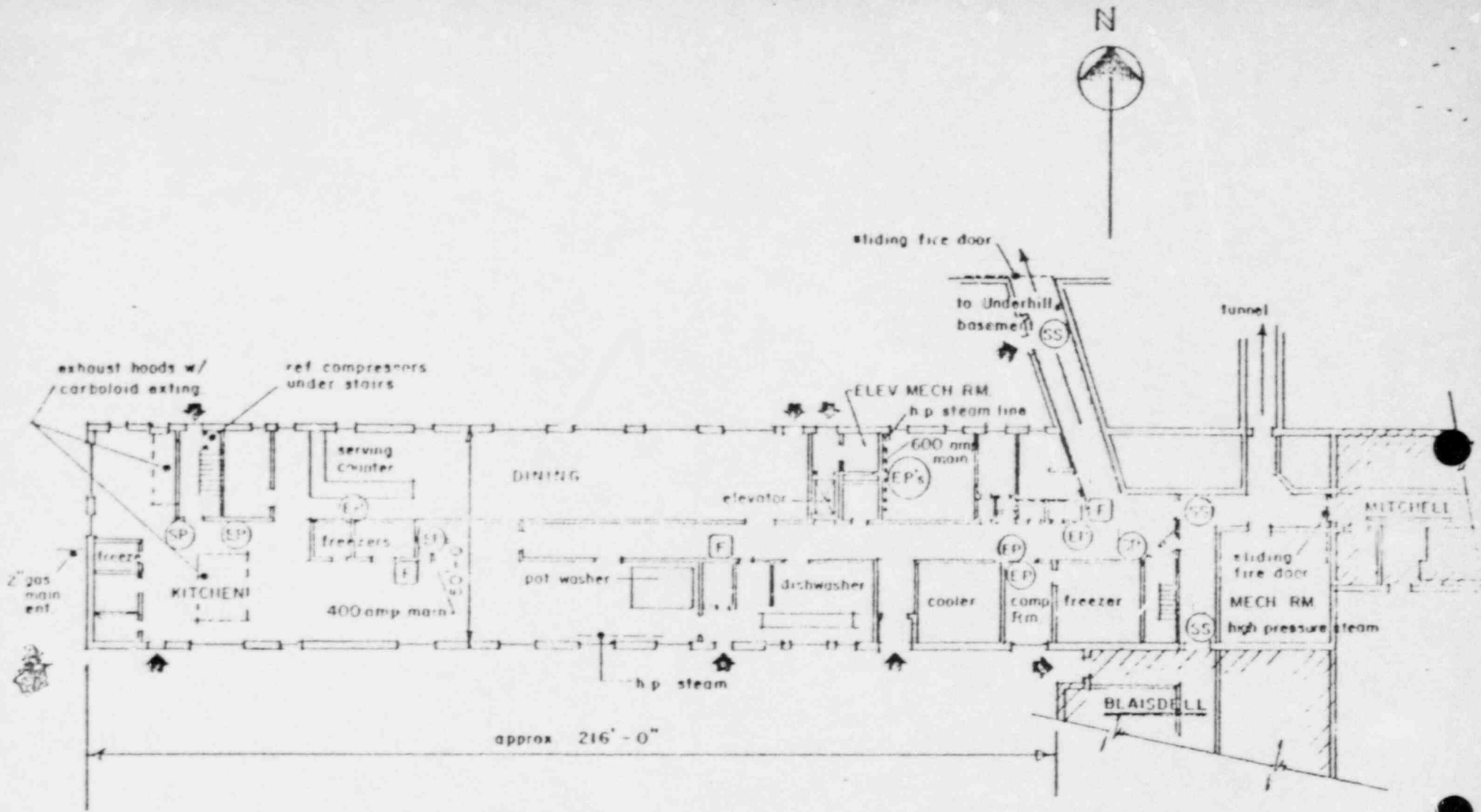
- EP - ELECT. PANEL
- SP - STANDPIPE
- SS - SMOKE SCREEN DOORS
- O2 - OXYGEN STORAGE STATION
- F - FIRE ALARM PULL STATION

BLAISDELL BUILDING
ROCKINGHAM COUNTY HOME



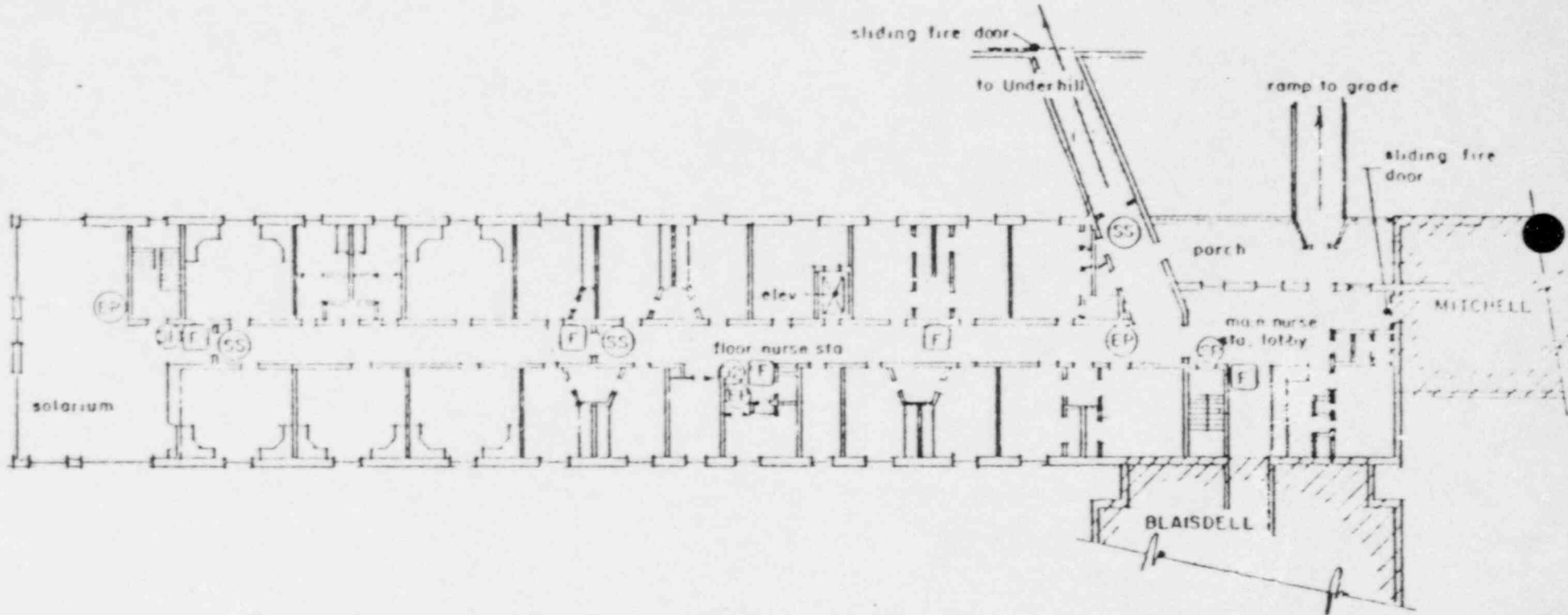
- EP - ELECT. PANEL
- SP - STANDPIPE
- SS - SMOKESCREEN DOORS
- O2 - OXYGEN STORAGE STATION
- F - FIRE ALARM PULL STATION

BLAISDELL BUILDING
ROCKINGHAM COUNTY HOME



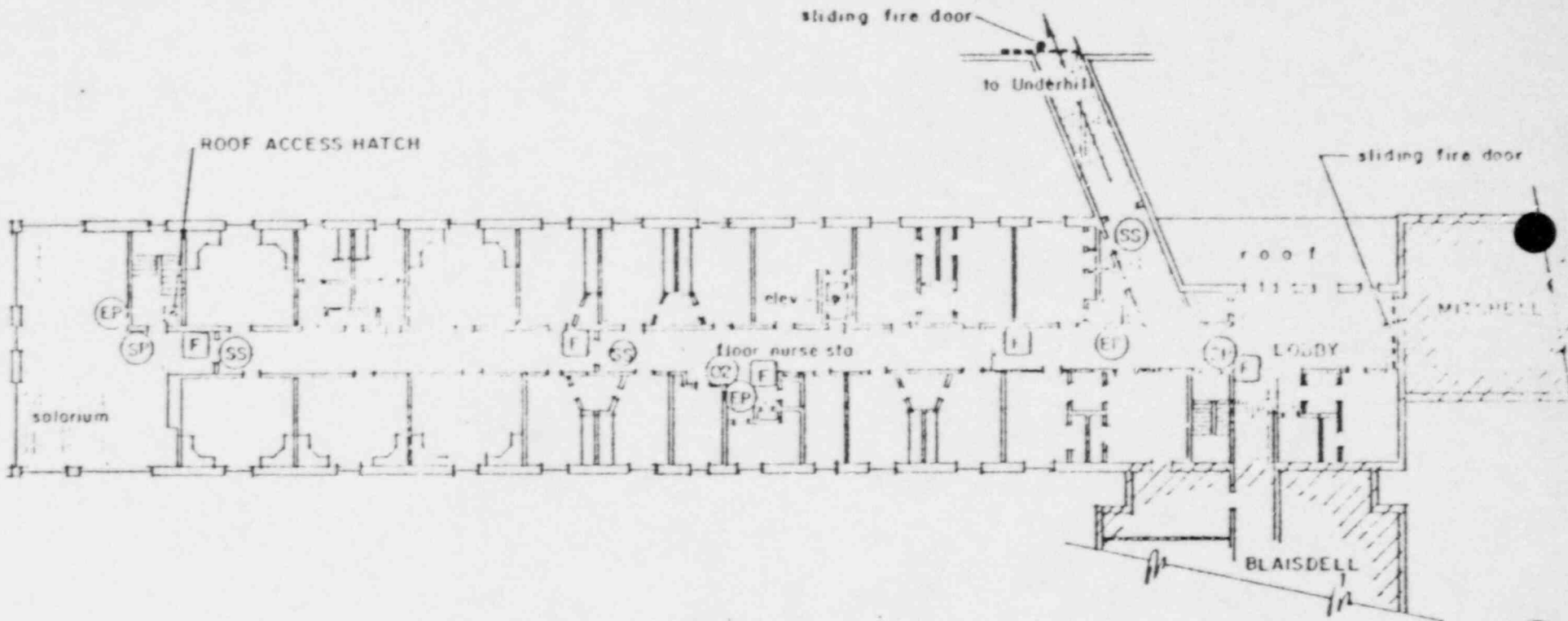
- EP - ELECT. PANEL
- SP - STANDPIPE
- SS - SMOKE SCREEN DOORS
- F - FIRE ALARM PULL STATION

GROUND FL. PLAN
FERNALD BUILDING
 ROCKINGHAM CO. HOME



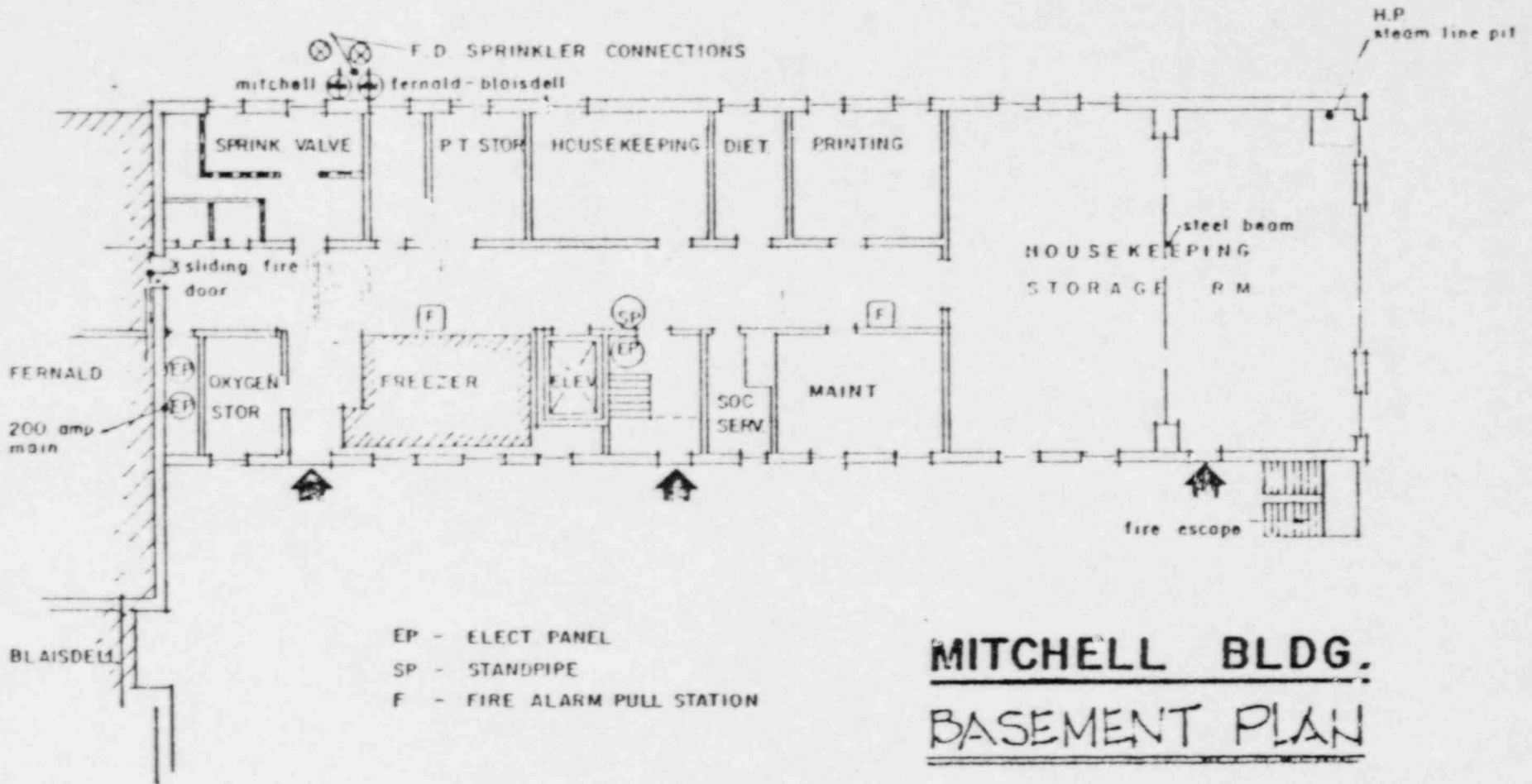
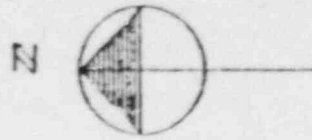
- EP - ELECT PANEL
- SP - STANDPIPE
- SS - SMOKE SCREEN DOORS
- O2 - OXYGEN STORAGE STATION
- F - FIRE ALARM PULL STATION

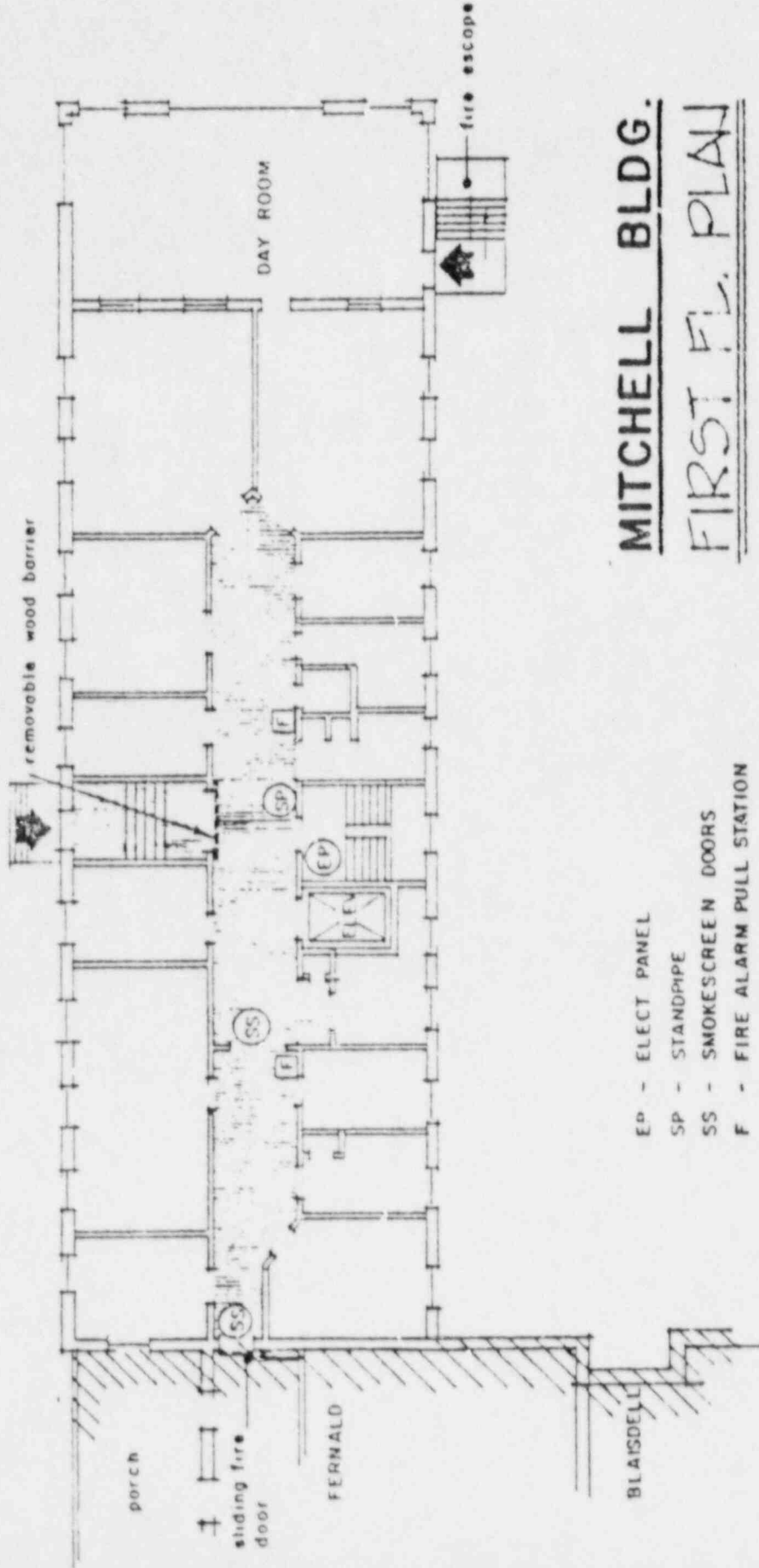
FIRST FLOOR PLAN
FERNALD BUILDING
ROCKINGHAM CO. HOME



- EP - ELECT. PANEL
- SP - STANDPIPE
- SS - SMOKESCREEN DOORS
- O2 - OXYGEN STORAGE STATION
- F - FIRE ALARM PULL STATION

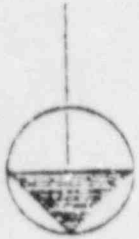
SECOND FLOOR PLAN
FERNALD BUILDING
ROCKINGHAM CO. HOME



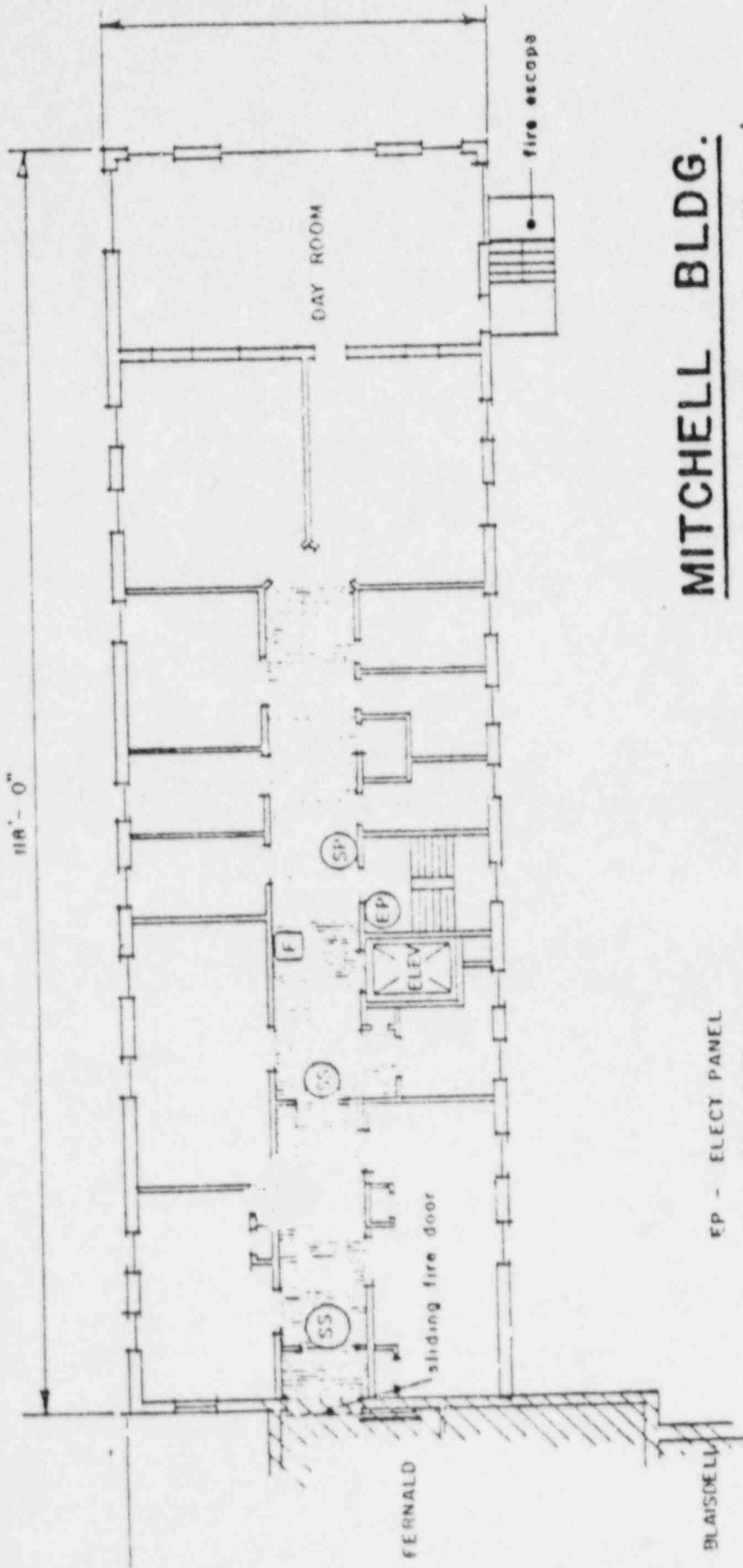


MITCHELL BLDG.
FIRST FL. PLAN

- EP - ELECT PANEL
- SP - STANDPIPE
- SS - SMOKE SCREEN DOORS
- F - FIRE ALARM PULL STATION

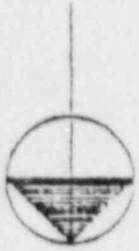


N

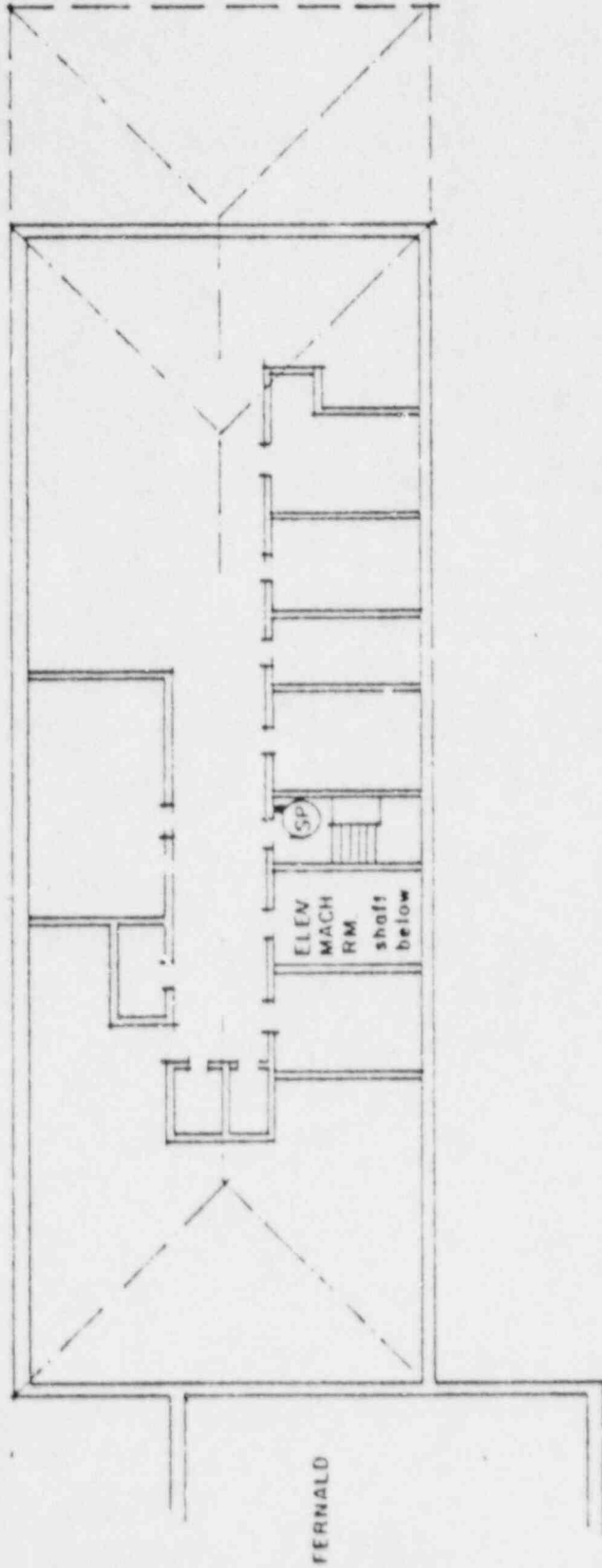


MITCHELL BLDG.
SECOND FL. PLAN

- EP - ELECT PANEL
- SP - STANDPIPE
- SS - SMOKE SCREEN DOORS
- F - FIRE ALARM PULL STATION



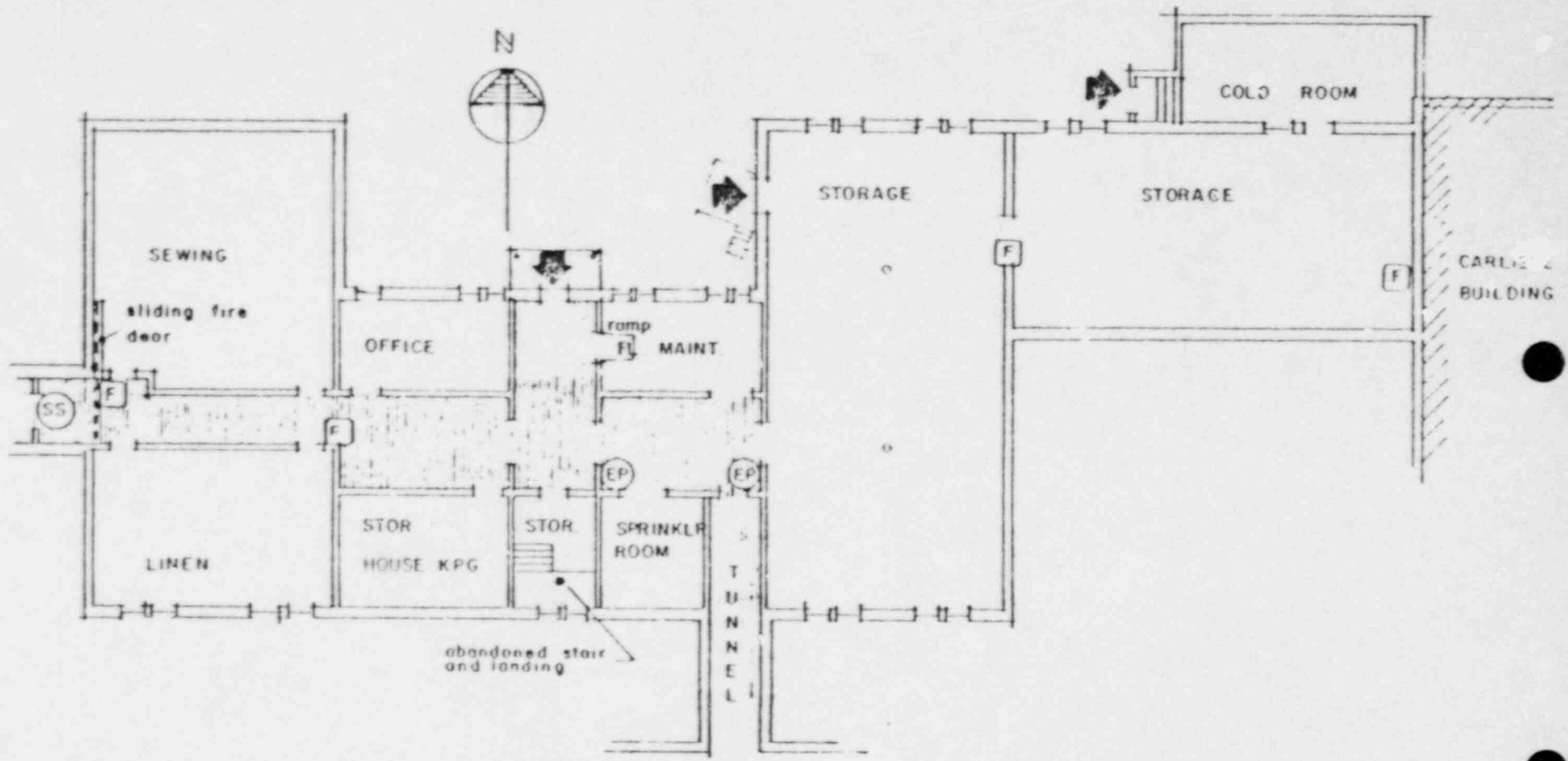
N



FERNALD

MITCHELL BLDG.
THIRD FL. PLAN

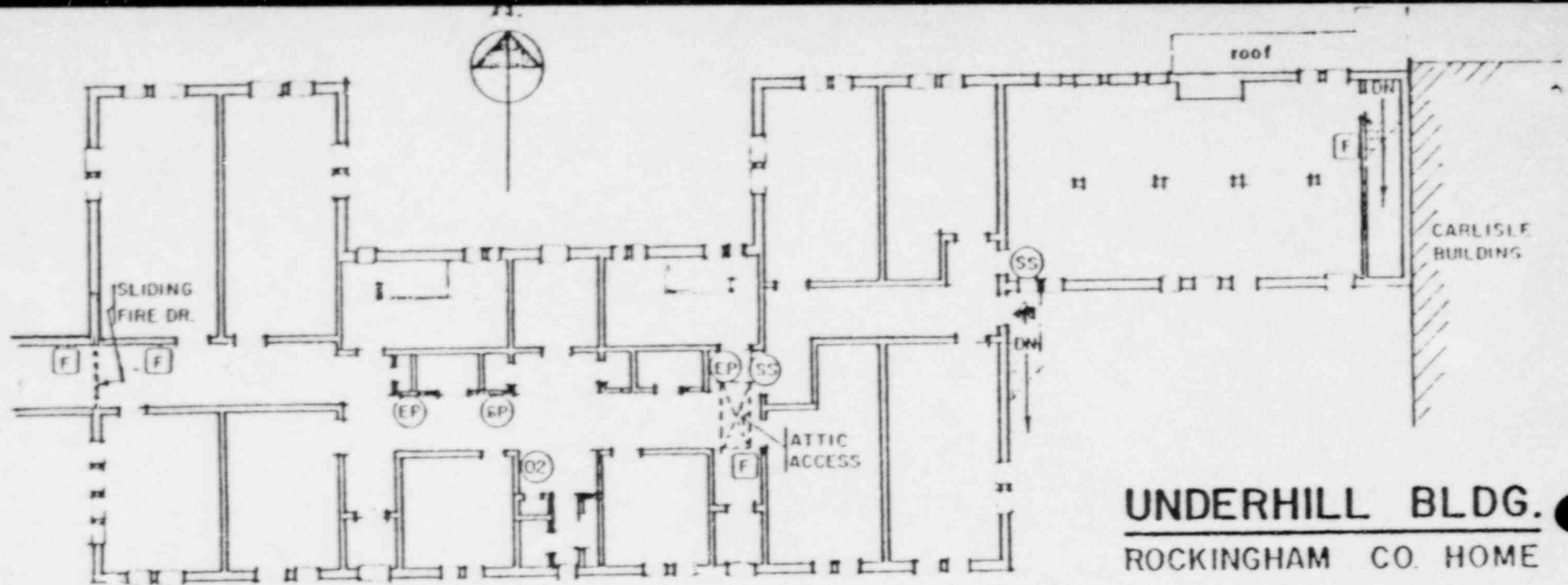
SP - STANPIPE



BASEMENT PLAN

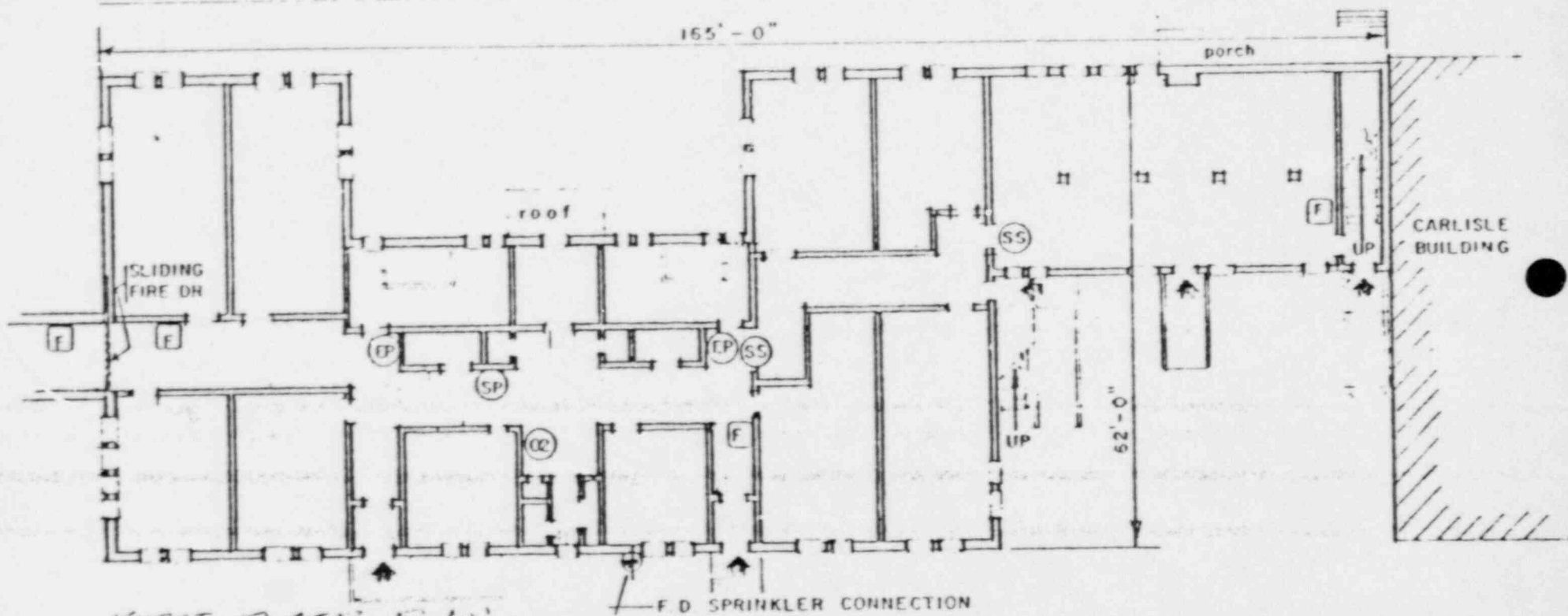
- EP - ELECT. PANEL
- SS - SMOKESCREEN
- F - FIRE ALARM PULL STATION

UNDERHILL BLDG.
ROCKINGHAM CO. HOME



UNDERHILL BLDG.
ROCKINGHAM CO. HOME

SECOND FLOOR PLAN



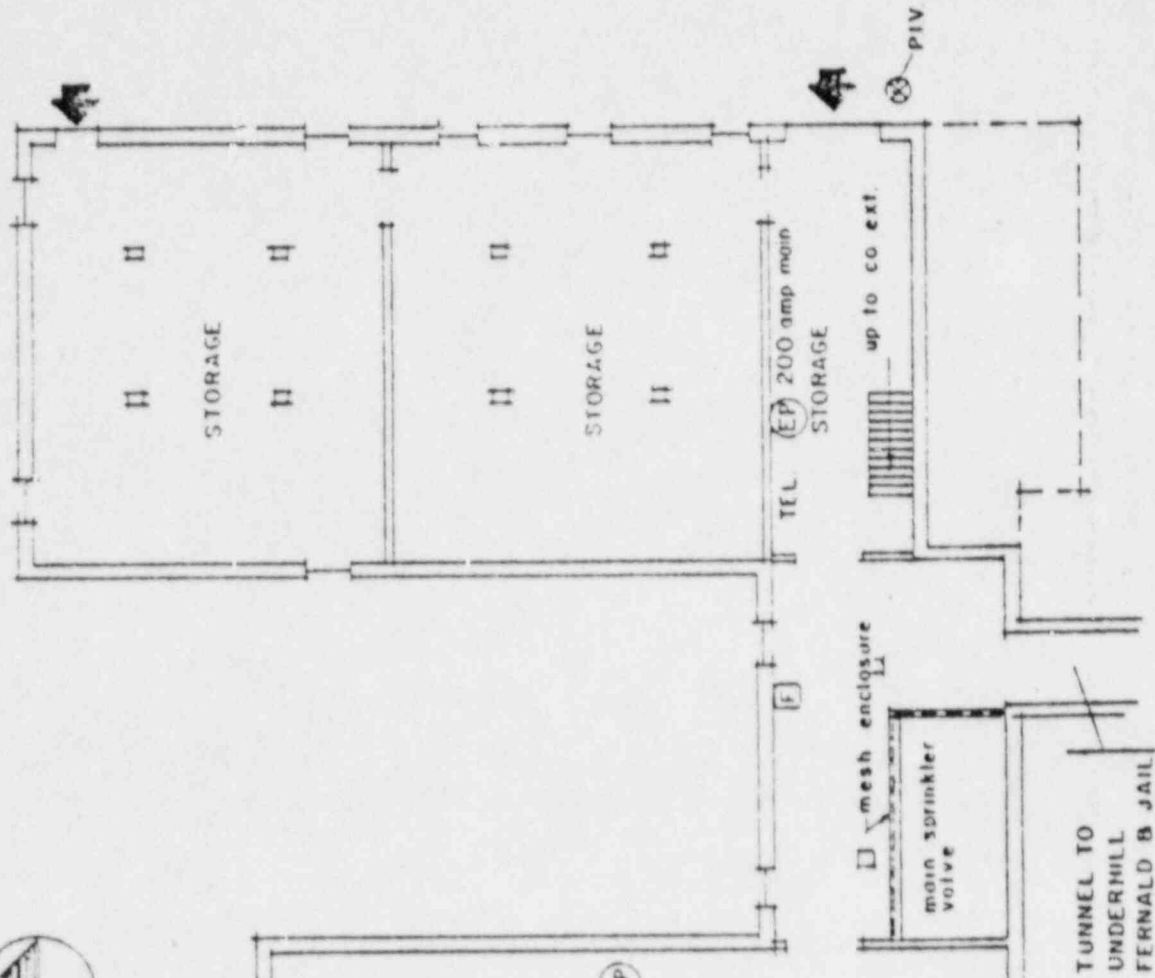
FIRST FLOOR PLAN



TUNNEL TO BOILER &
LAUNDRY BLDG

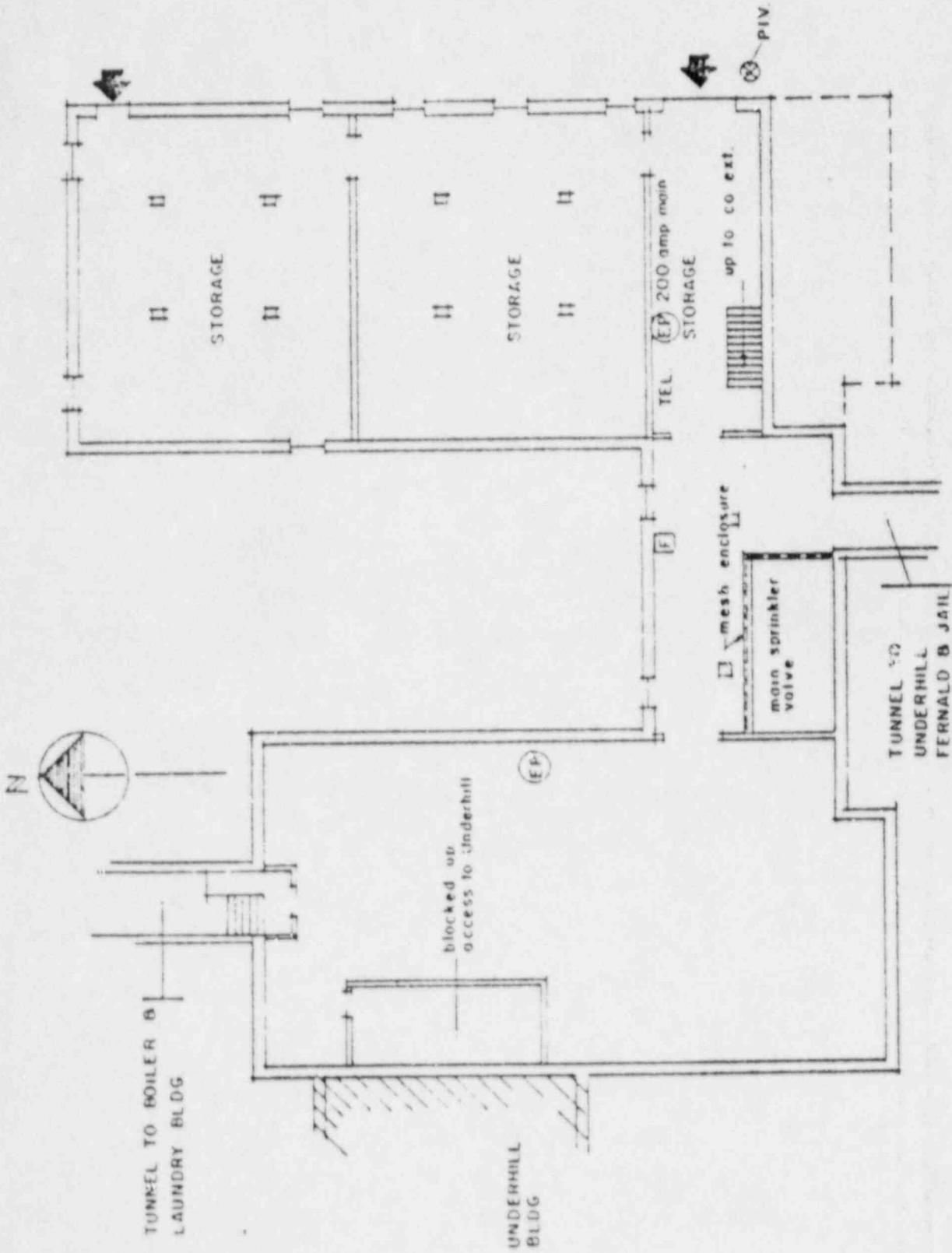
blocked up
access to Underhill

UNDERHILL
BLDG



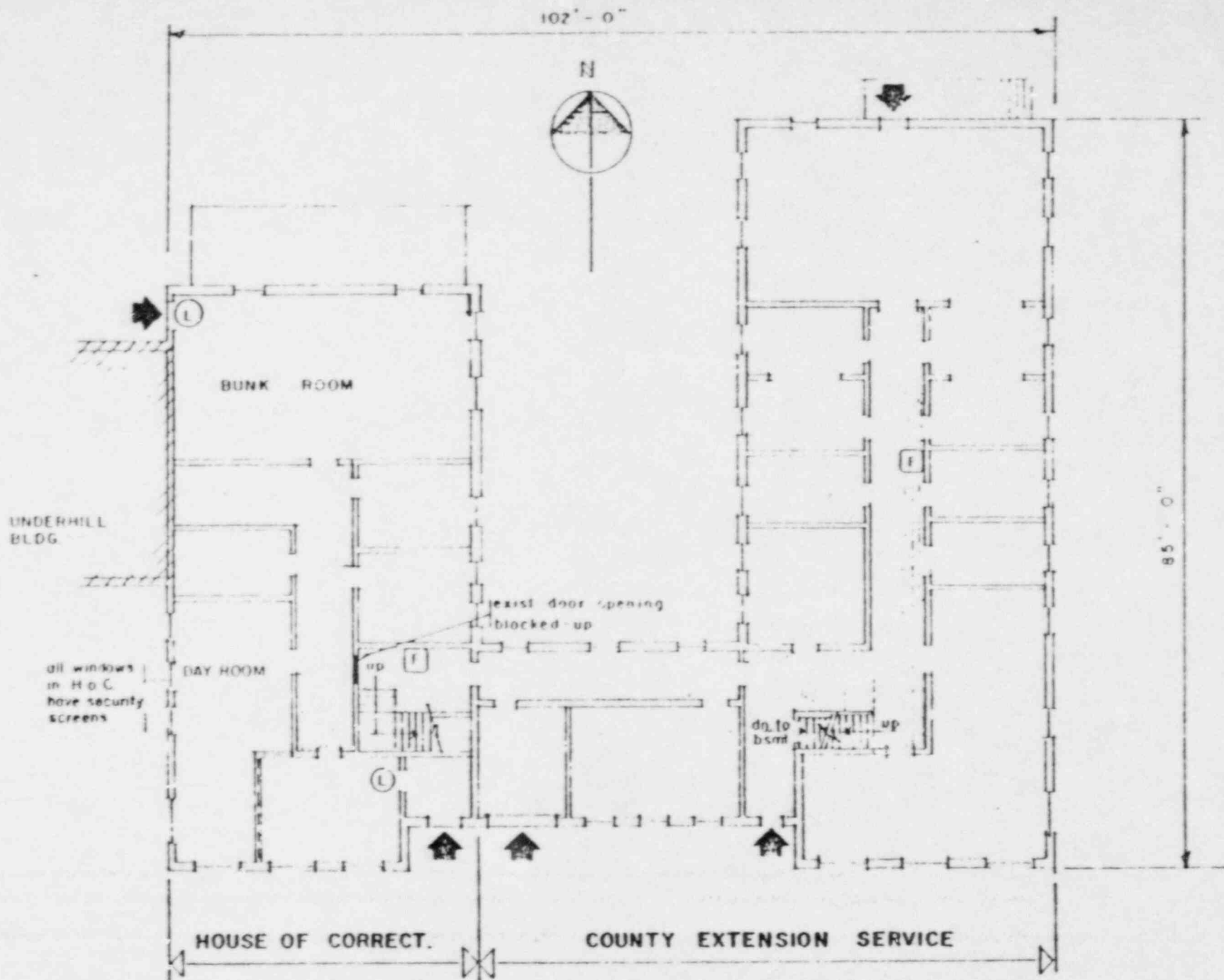
BASEMENT

CARLISLE BLDG.



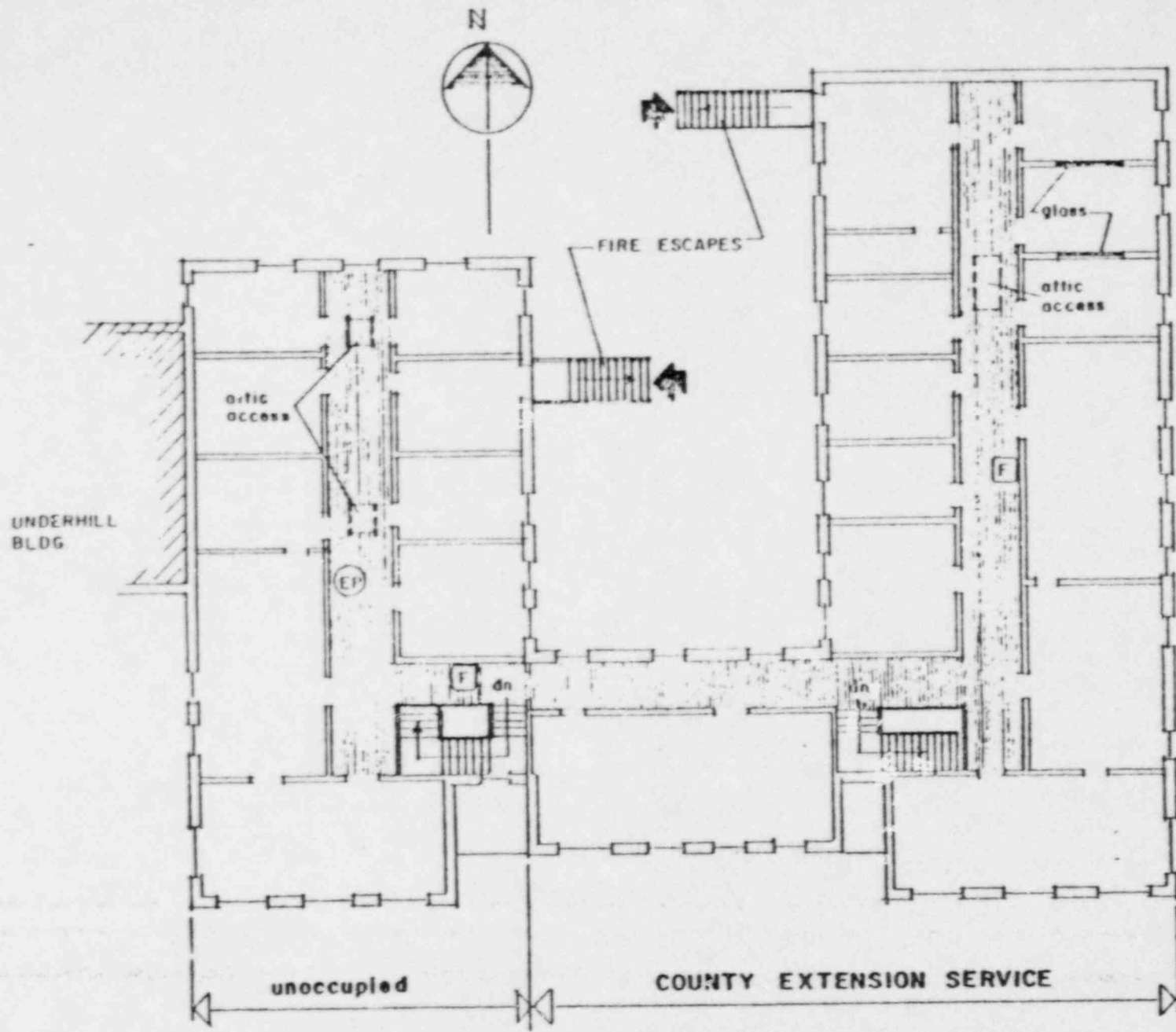
BASEMENT

CARLISLE BLDG.



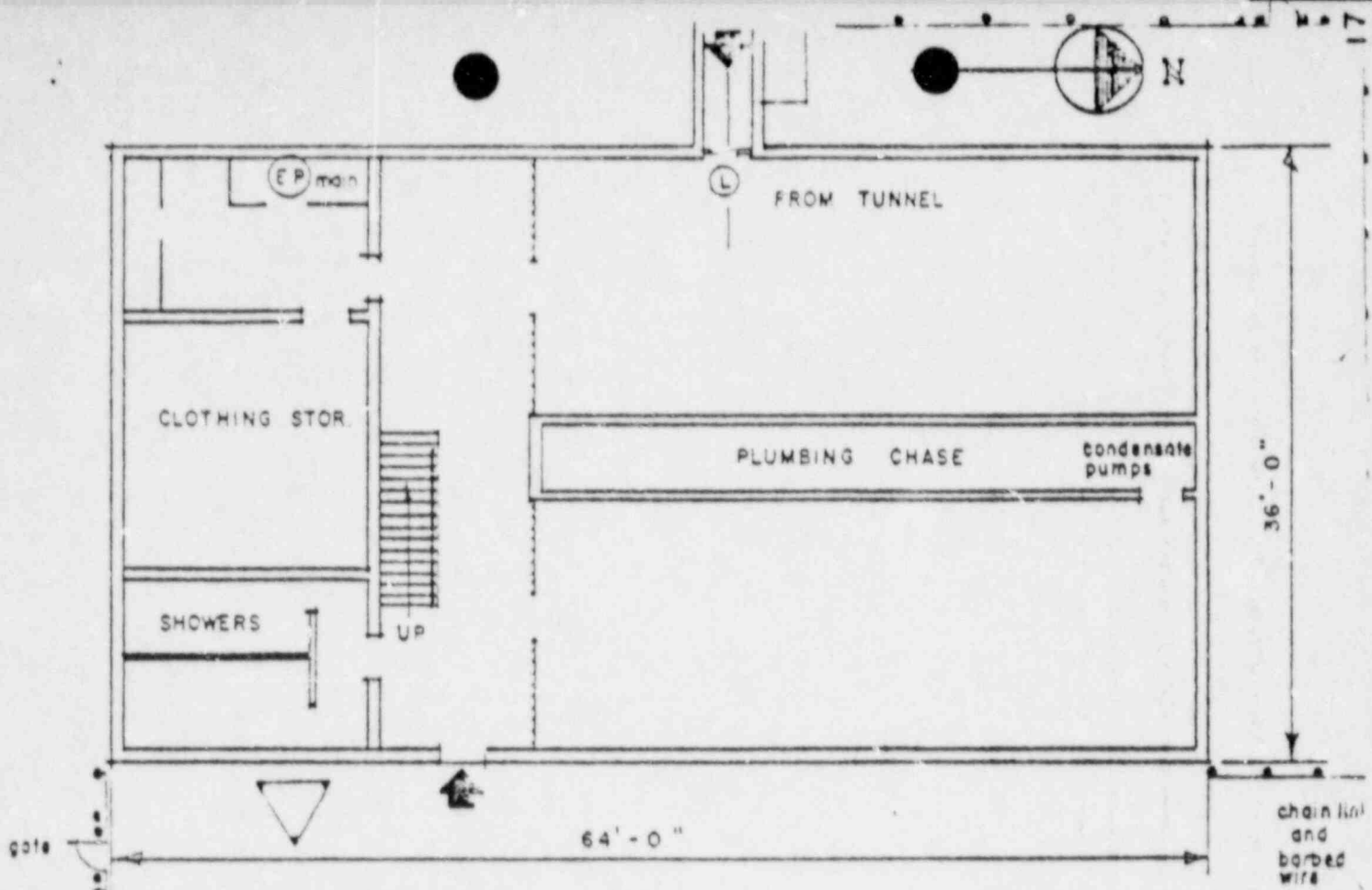
FIRST FLOOR PLAN

CARLISLE BLDG.



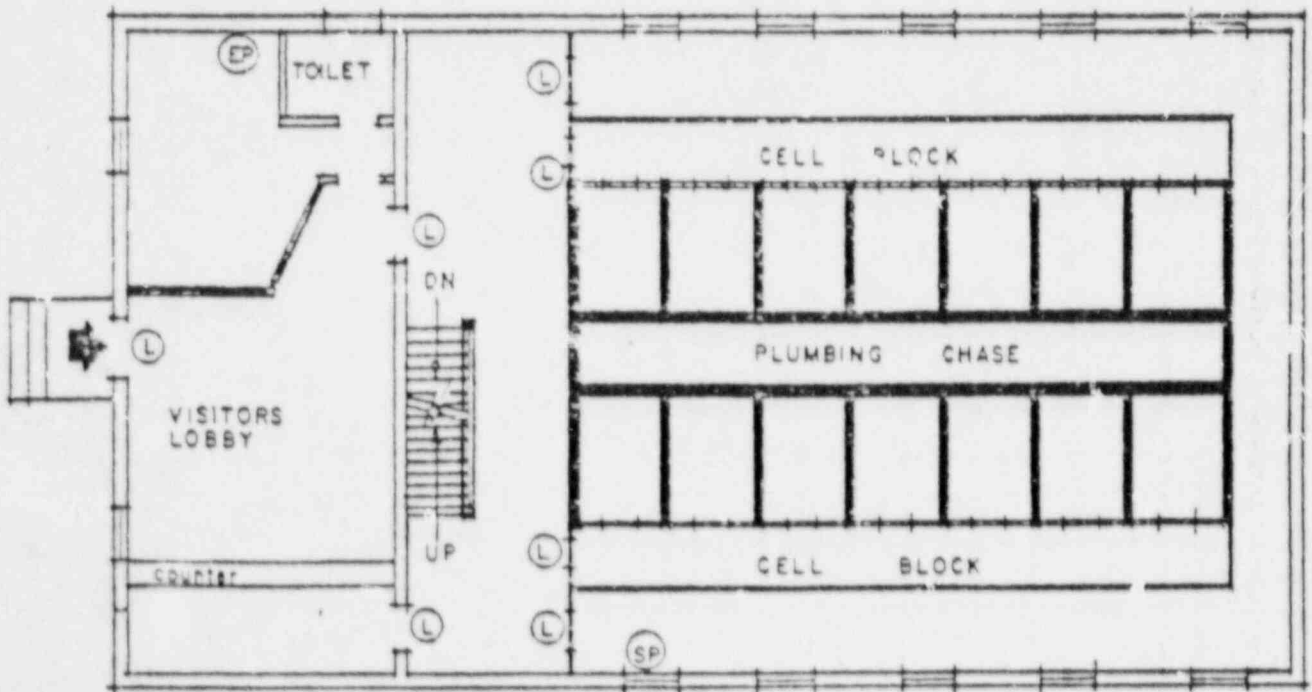
SECOND FL. PLAN

CARLISLE BLDG.



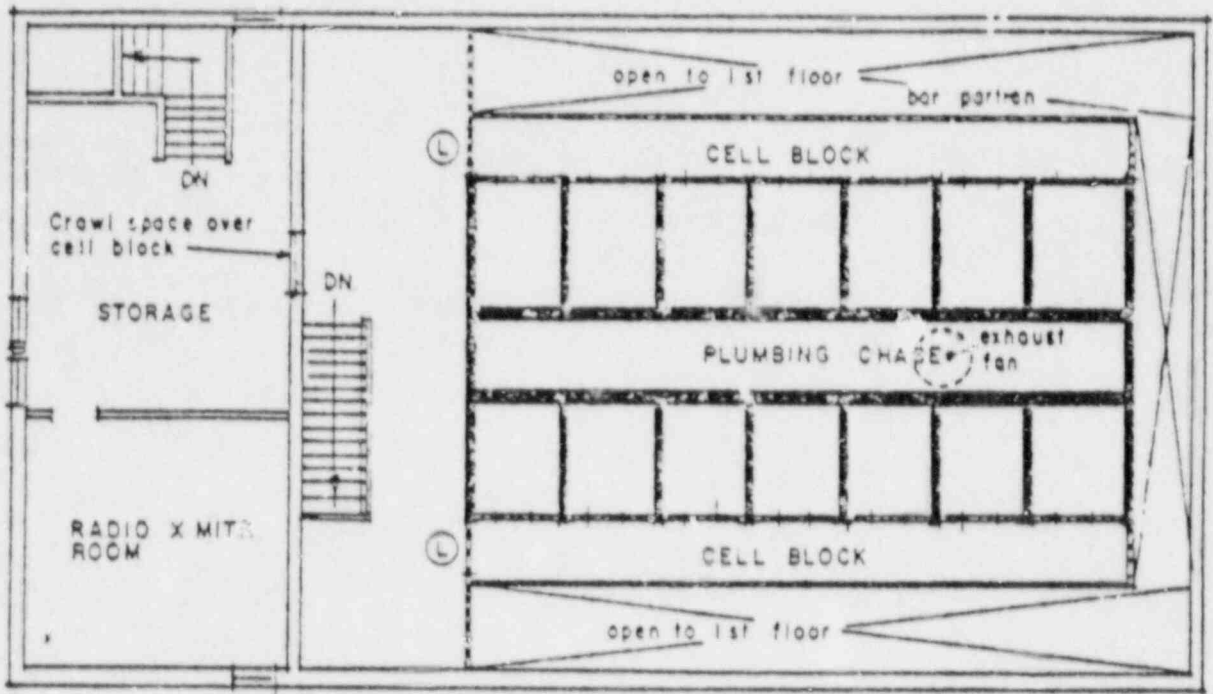
BASEMENT PLAN

ROCKINGHAM COUNTY JAIL



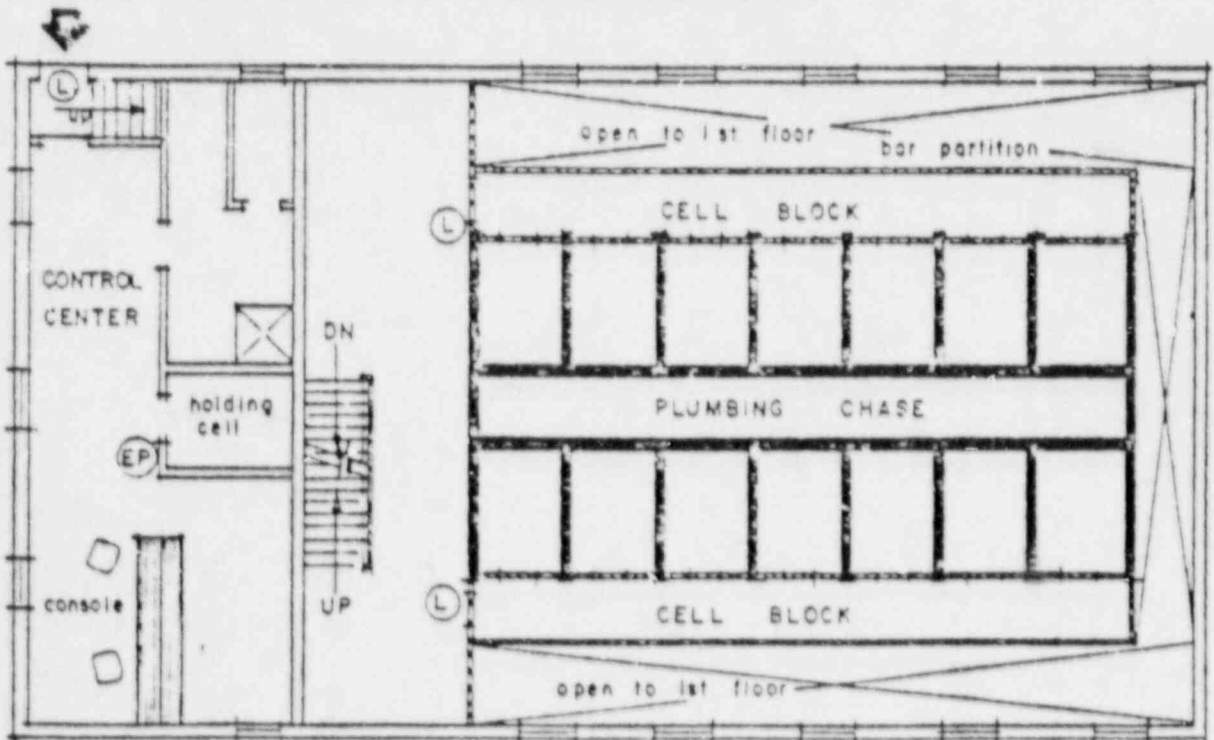
FIRST FLOOR PLAN

(L) - indicates electronic door locks



THIRD FLOOR PLAN

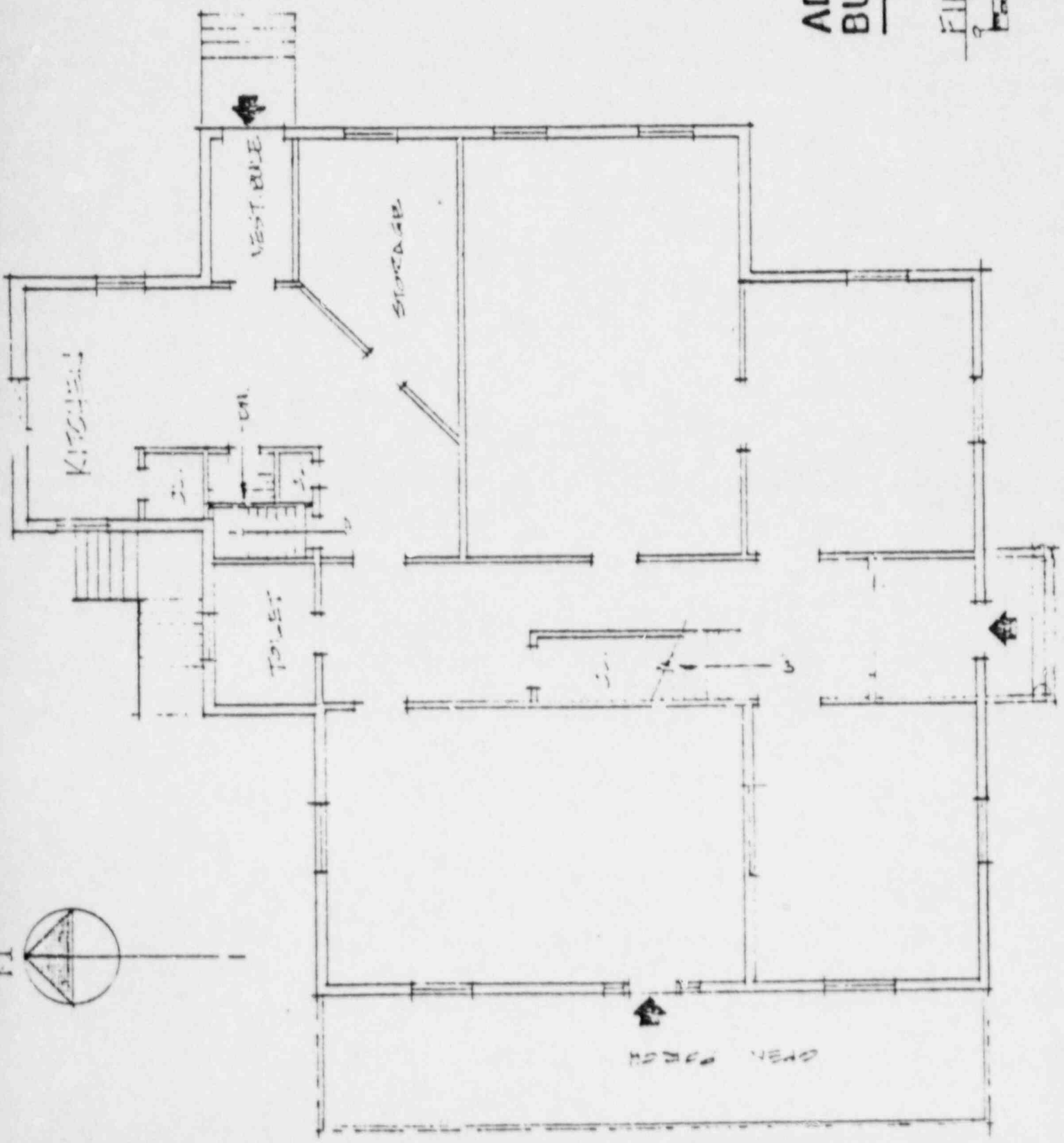
ROCKINGHAM COUNTY JAIL

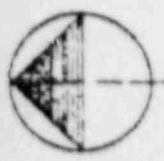


SECOND FLOOR PLAN

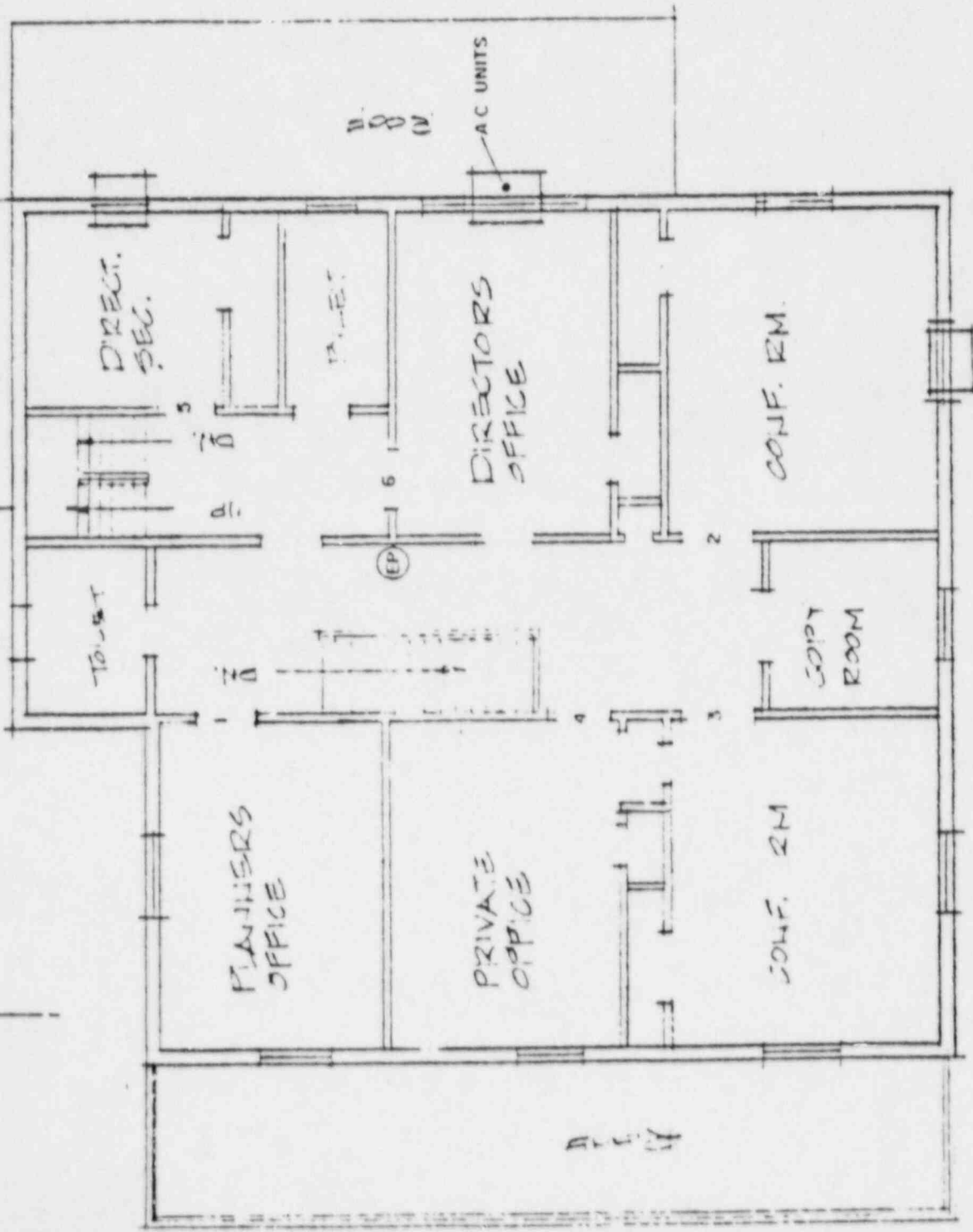
ADMINISTRATION
BUILDING

FIRST FLOOR
0 5 10



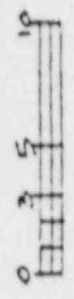


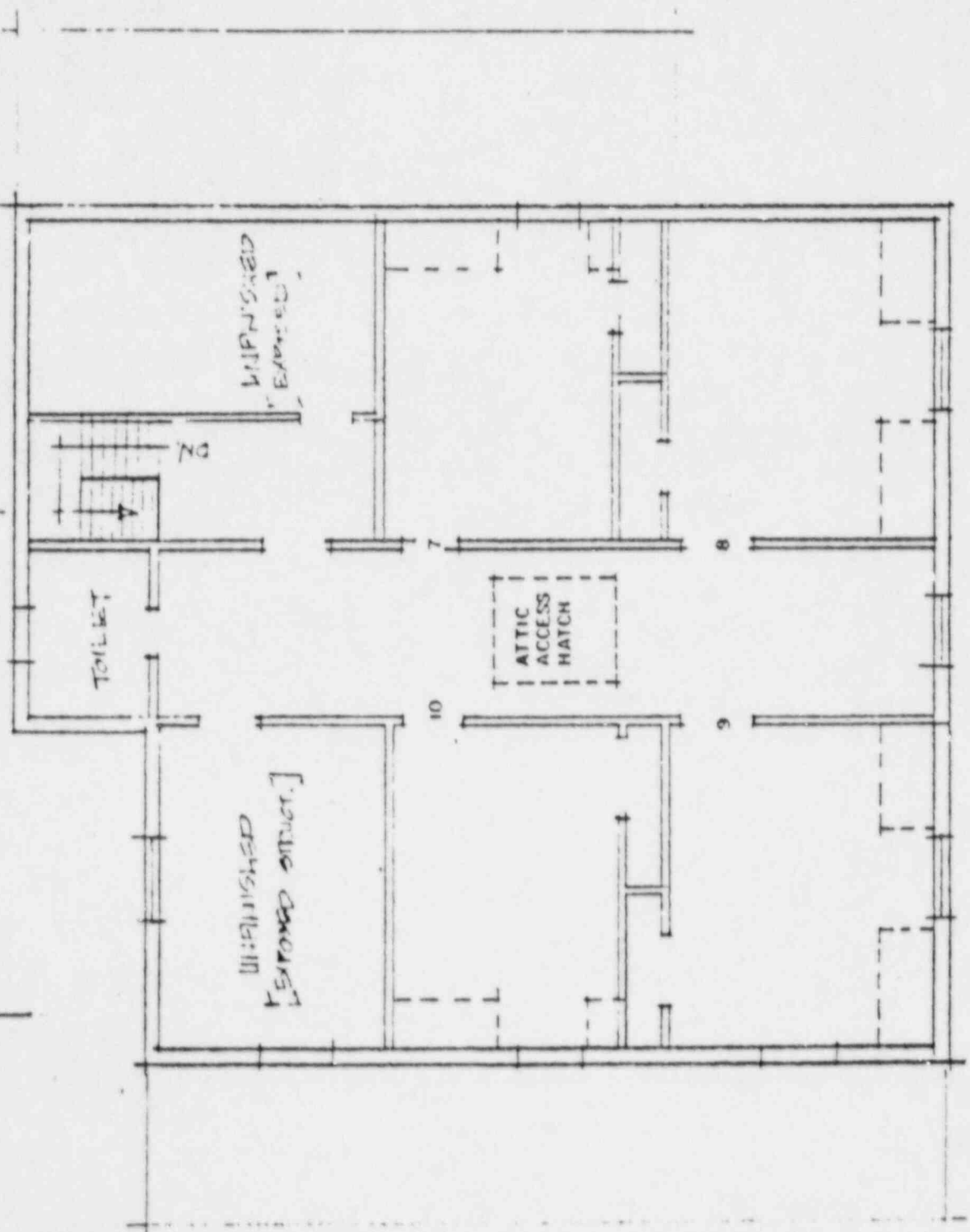
LOBBY



ADMINISTRATION BUILDING

SECOND FL.

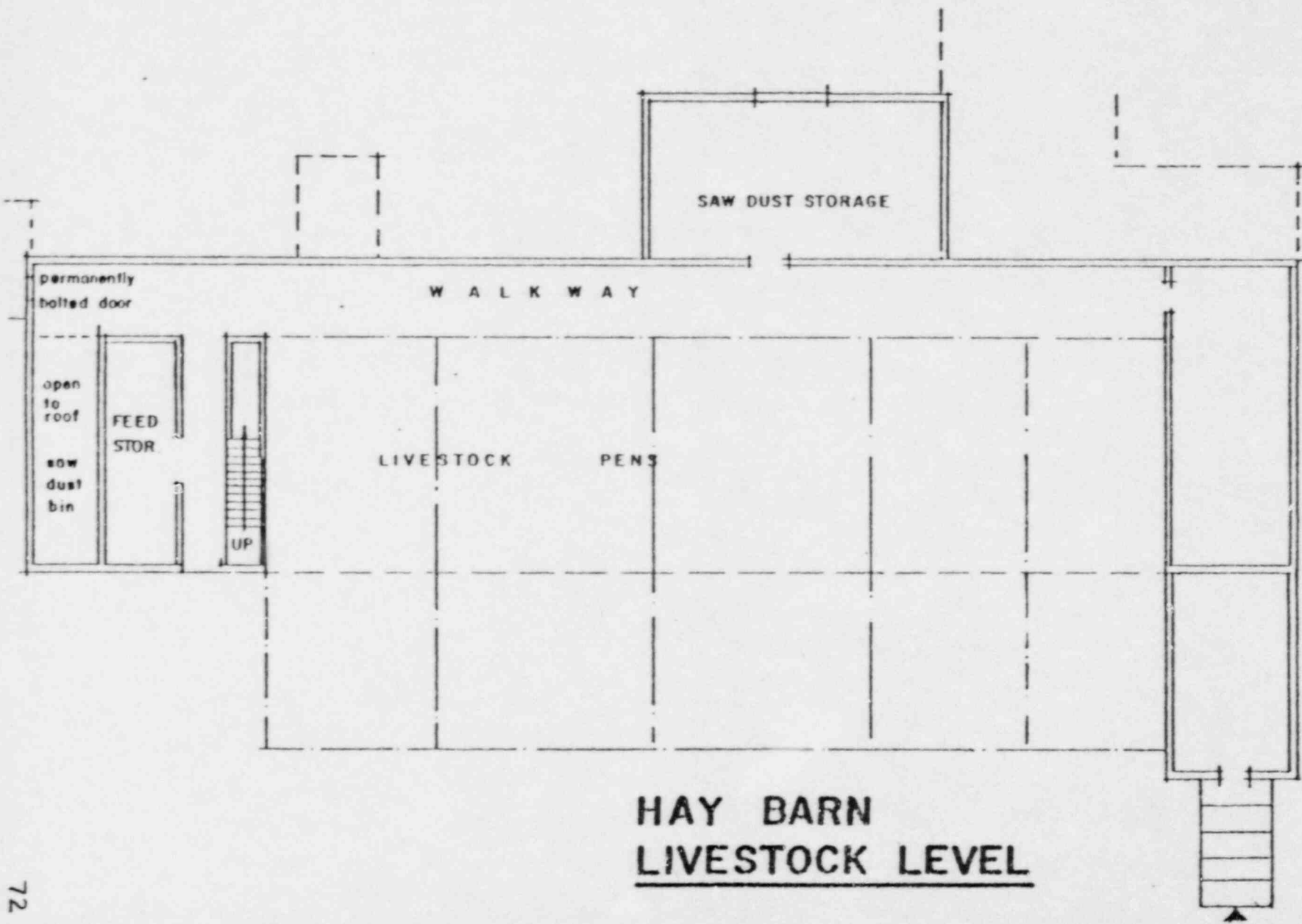




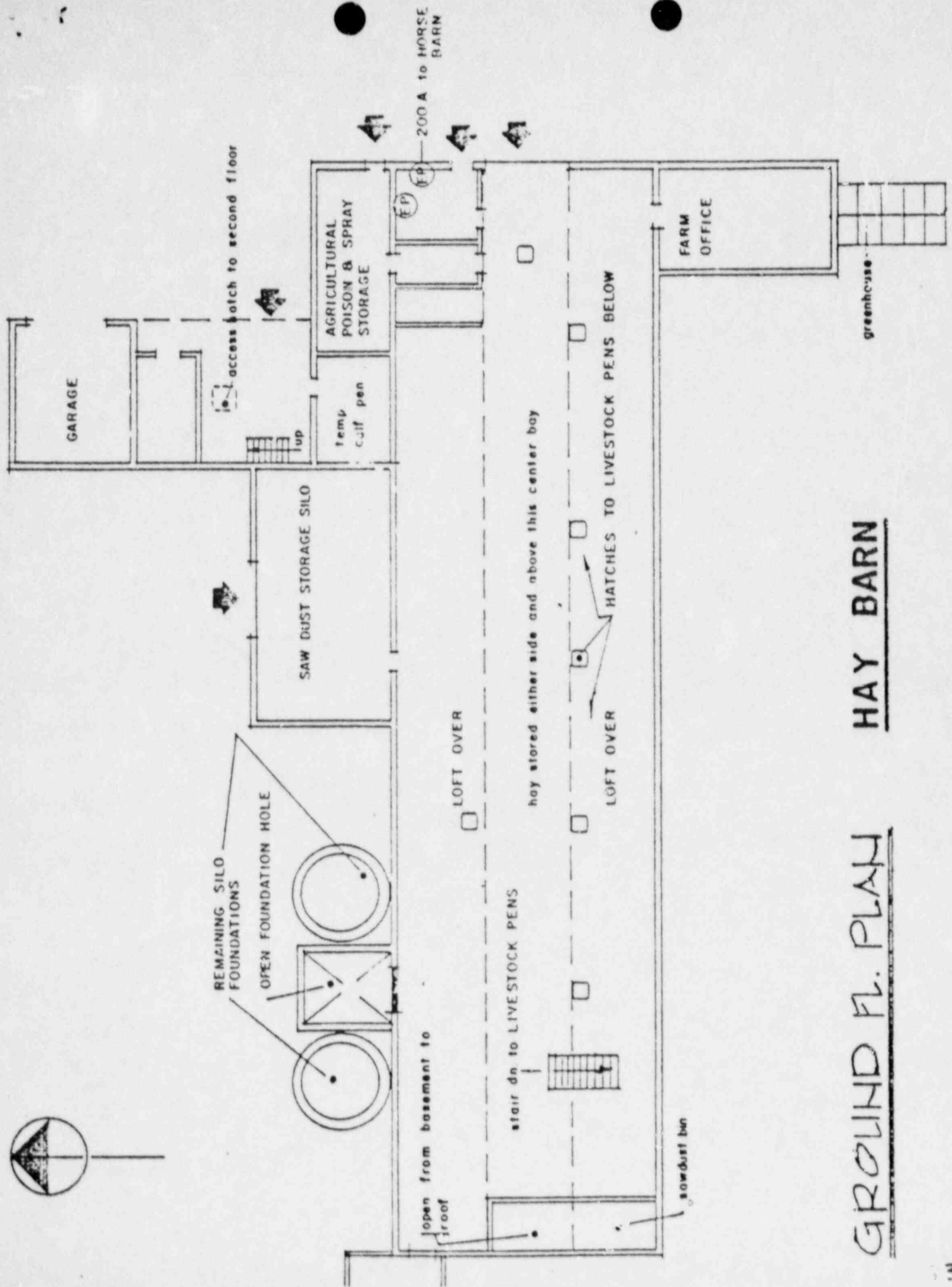
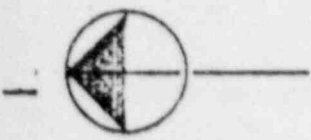
**ADMINISTRATION
BUILDING**

THIRD FLOOR



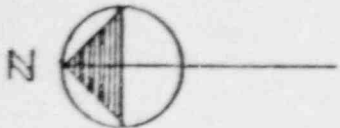


**HAY BARN
LIVESTOCK LEVEL**



HAY BARN

GROUND FL. PLAN



○ dom. water flush only

50' retaining wall

HAY & LIVESTOCK BARN

Blocked door to barn permanently bolted

Office

EP

tools

office

WOOD SHOP

pipe rack

ELECTRICAL STORAGE

Caution:

Mesh partition bolted door to garage w/ 7'-0" drop to garage floor

EP
main to shop, milking parlor, straw and calf barns

Attic access

PAINT, DRY GOODS & CLEANING STORAGE

GENERAL MAINTENCE STORAGE

PRIMARY ACCESS

loading dock retaining wall

PAINT STOR.

18'-0" ±

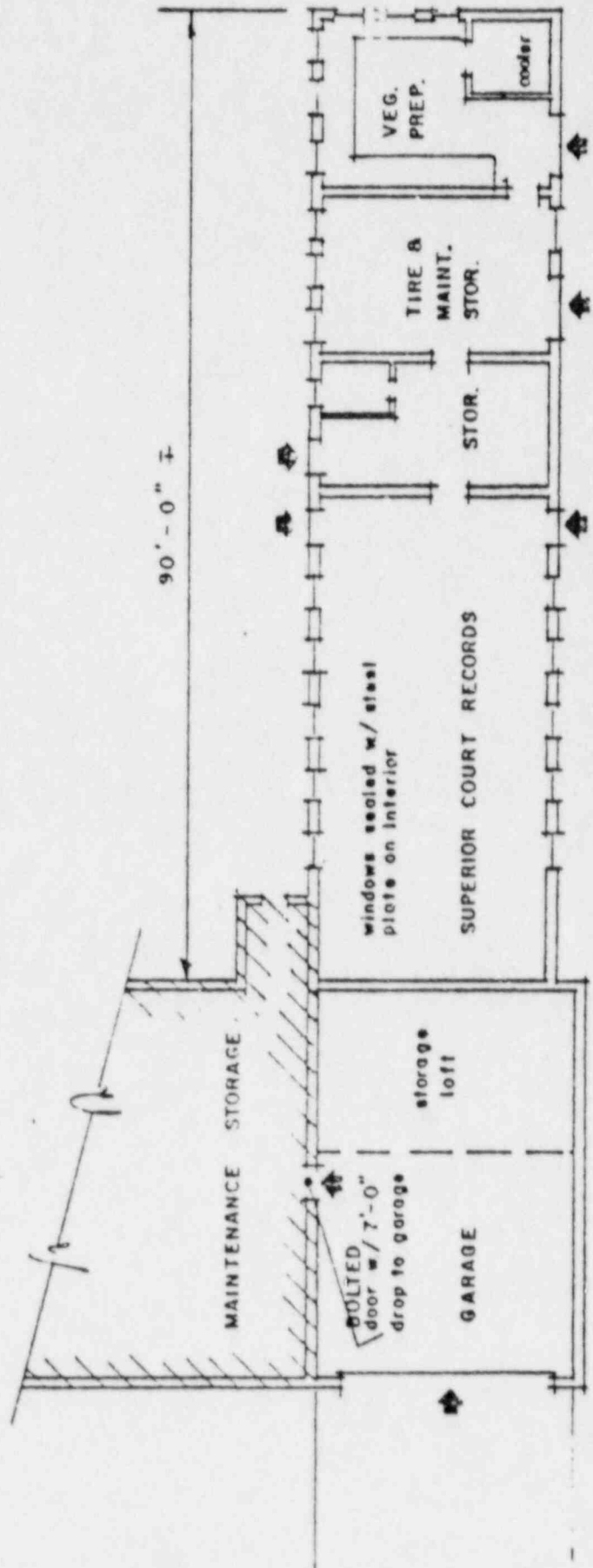
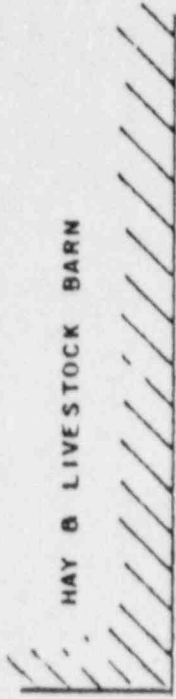
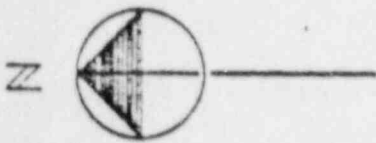
85'-0" ±

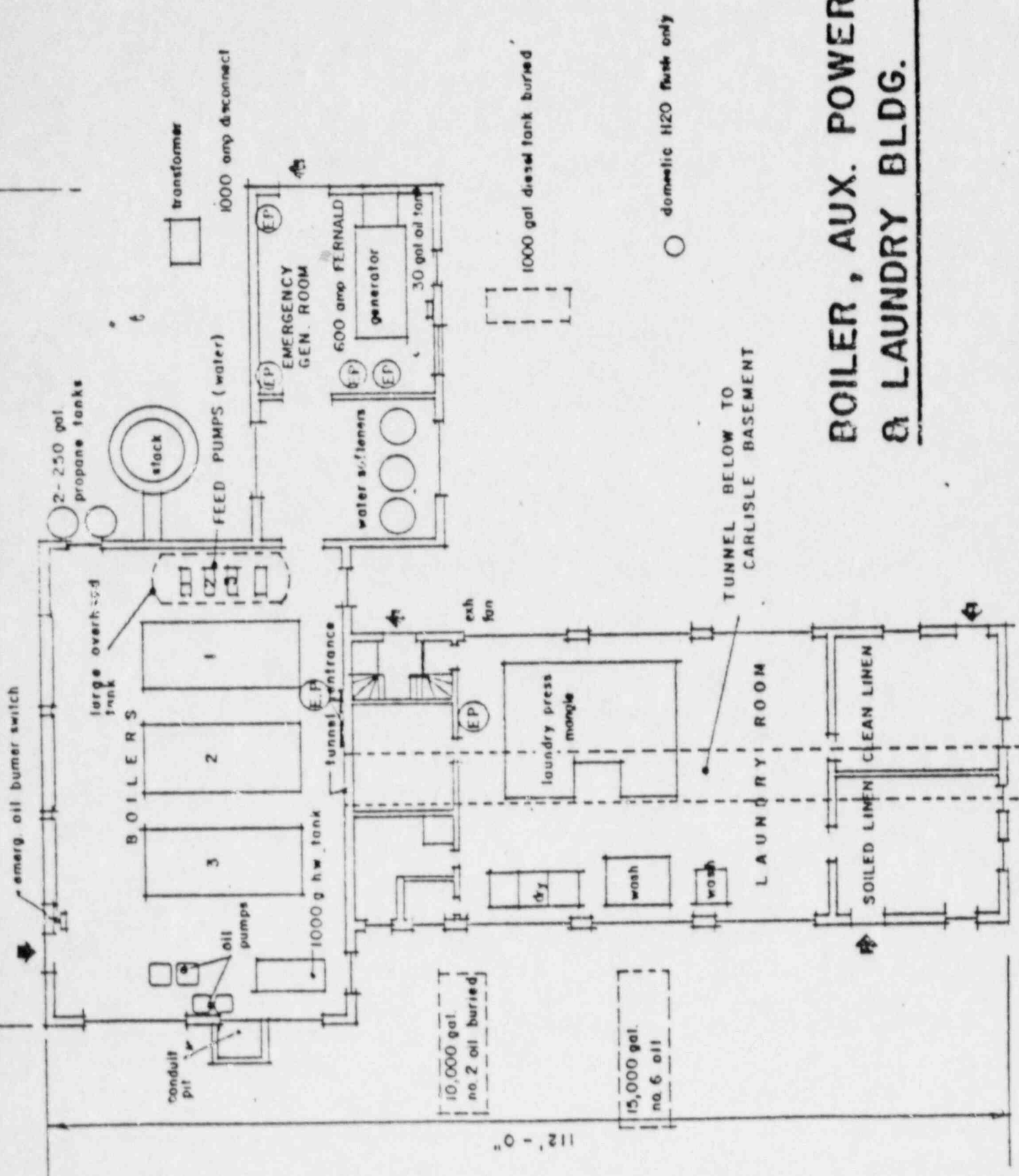
65'-0" ±

MAINTENANCE SHOP & STORAGE

MILKING PARLOR PLAN

(BUILDING NOW USED FOR STORAGE)





BOILER, AUX. POWER & LAUNDRY BLDG.