

**County of San Bernardino  
Department of Behavioral Health**

**Safety and Emergency Coordination Policy**

Effective Date 7/94  
Revision Date 6/25/07

  
**Allan Rawland, Director**

**Policy** It is the policy of the Department of Behavioral Health (DBH) to establish duties and responsibilities for DBH staff assigned to safety functions; and to coordinate the functions of DBH Disaster/Safety Coordinator, Supervisors, Location Safety Coordinators (LSC), and the Department Safety Committee.

**Important:** Each operating facility within DBH must have a Location Safety Coordinator assigned to it.

**Purpose** To ensure that DBH employees have a safe work environment, and to ensure safety and emergency response coordination.

**Responsibilities** The following illustrates the responsibilities of DBH staff assigned to safety functions:

<b>Role</b>	<b>Responsibility</b>
Supervisor or designee	<ul style="list-style-type: none"><li>• Oversee safety and program compliance</li><li>• Appoint clerical/administrative staff to serve as the LSC for the facility</li><li>• Conduct safety inspections at facilities for which they do not work</li></ul>
Disaster/Safety Coordinator	Serve as the Chairperson of the Department Safety Committee – includes recording and distributing minutes.

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Location Safety Coordinator (LSC)	<ul style="list-style-type: none"><li>• Establish Assaultive Behavior Plan (ABP) and coordinate quarterly employee drills/training with the Clinic Supervisor</li><li>• Ensure <a href="#">LSC posting</a> and CalOSHA notices and reports are posted properly throughout the facility</li><li>• Maintain documentation of safety program activities and legislation within DBH's Safety Program Binder</li><li>• Conduct quarterly fire evacuation drills and report results on standard reporting format (see Fire Drill Reports link below) and coordinate annual fire extinguisher training</li><li>• Review and update site-specific Emergency Action Plan (EAP) annually and train staff on their responsibilities</li><li>• Complete <a href="#">HIPAA Baseline Privacy &amp; Security Walkthrough Audit</a> and department self-inspection checklist on a quarterly basis and submit reports at safety committee meetings</li><li>• Assess facility for reportable Hazardous Communication Program, train staff on the Hazard Communication Program and conduct an annual review</li><li>• Provide oversight and ensure compliance of the Medical Waste Management program at all applicable facilities</li><li>• Act as a liaison between supervisors and emergency services personnel in the event of an emergency or disaster</li></ul> <p><b>Note:</b> Certain circumstances may require one LSC to serve more than one facility.</p>
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Clinic Supervisor	<ul style="list-style-type: none"> <li>• Coordinate quarterly ABP training with the LSC</li> <li>• Address and/or monitor client related safety and/or hazardous issues</li> </ul> <p><b>Note:</b> ABP training should emphasize appropriate staff responses to clients, employees, or other public, who disrupt threaten, and/or are dangerous.</p>
DBH Safety Committee	<ul style="list-style-type: none"> <li>• Meet quarterly to discuss and report safety and emergency planning and/or issues</li> <li>• Coordinate annual safety inspections of all DBH facilities</li> </ul>

**Reporting Safety Issues**

Any DBH employee with a safety or hazard issue and/or complaint must report it to his/her LSC or immediate supervisor for resolution. If the problem is not resolved within a reasonable amount of time, the employee must report the issue to his/her Program Manager or the Disaster/Safety Coordinator.

**Note:** Employees may also report safety or hazard issues to the County's Risk Management Department via the [Hazard Report](#).

**CAL/OSHA Poster and Safety Representative Poster**

The State of California requires that CAL/OSHA official notices be displayed in areas visible to all employees. Posters are provided by the County's Risk Management Department, or may be obtained by request from the DBH Disaster/Safety Coordinator.

**Note:** The LSC information must be displayed adjacent to the CAL/OSHA notices and throughout each facility.

**Related Documentation**

The following is safety and emergency material for reference and coordination use:

- Standard [Emergency Action Plan \(EAP\)](#)
- Standard [Medical Waste Management Program](#)
- Standard [Hazard Communication Program](#)
- Standard [Fire Drill Reports Guide](#)