



# La Quinta Pediatrics Building Emergency Plan

**Version 1.1**

**Date: September 2025**

**For Official Use Only**

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Building Emergency Plan  
University of California Riverside  
Main Campus

## I. Plan Overview

### Introduction

The following elements are included in this plan:

- Evacuation procedures and emergency escape routes.
- Procedures for employees who remain to operate critical plant operations before they evacuate.
- Procedures to account for all employees after an emergency evacuation is completed.
- Rescue and medical duties for those employees who are to perform them.
- The preferred means of reporting fires and other emergencies.
- The names, job titles, and departments of person who can be contacted for further information or explanation of duties under the plan.
- Alerting and Notifications.
- Contacts.
- Emergency Procedures.

### Summary

It is the responsibility of the Campus Emergency Manager to oversee the creation and maintenance of the Building Emergency Plans, which are intended to guide the emergency response actions of all building occupants during an event that threatens life, safety, or daily operations. Nothing in this plan shall be construed in a manner that limits the use of good judgment and common sense in matters not foreseen or covered by the elements of the plan or any appendices.

### Authority

The UC Riverside Building Emergency Plan is created and distributed in accordance with UCR Campus Policy 425-24.

### Purpose

The purpose of this plan is to establish the operational procedures necessary for personnel to respond to, and recover from, a significant emergency event in a timely and organized fashion. The University EAP also serves as the baseline by which all organizational and unit-level Emergency Action Plans are developed. This plan and organization are subordinate to State and Federal plans during a disaster declaration by those authorities.

### Approvals

This University of California Riverside Building Emergency Plan has been reviewed and approved by:

#### **Andrew Flores**

*Emergency Manager*  
(951) 827-4255

#### **Gavin Ketcheside**

*Designated Campus Fire Marshall*  
(951) 827-6309

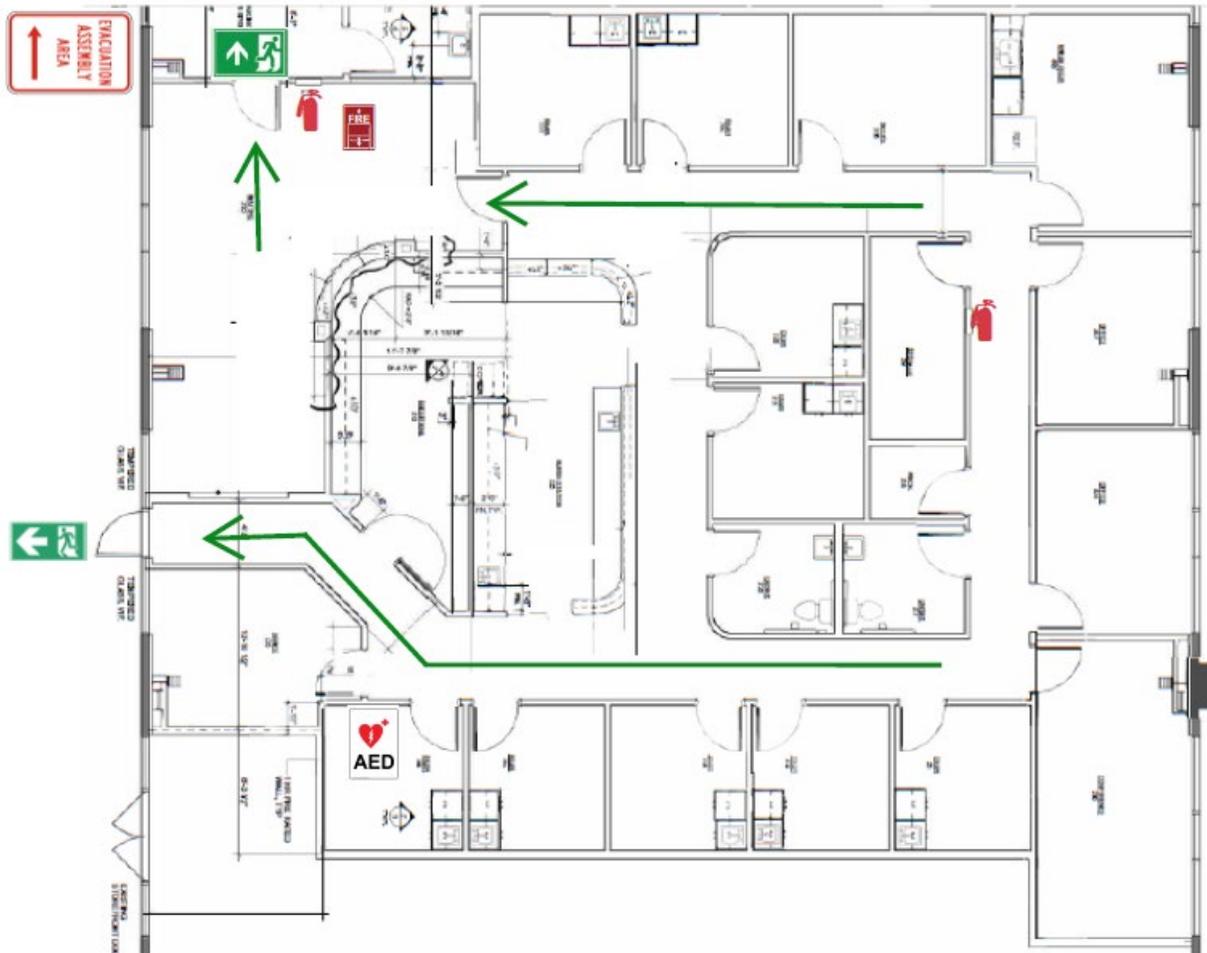
**Implementation Date: November 2025**

**Date of last Revision: November 2025**

## II. Building Specific Information

### Evacuation Plan

UCRH - Pediatrics occupies the 1<sup>st</sup> floor in Suite 102. (8) Exam rooms and (3) offices are located throughout the clinic. UCR Health La Quinta is primarily Pediatric care.



#### IF YOU HEAR A FIRE ALARM...

- **EVACUATE** via the nearest safe exit.
- **CLOSE** doors behind you.
- **ASSIST** persons requiring assistance.
- **PHONE 9-9-9** to report a fire at your address.
- **PROCEED** to the designated evacuation assembly area clear of the building and arriving fire apparatus.
- **DO NOT** re-enter the building for any reason until the "ALL Clear" has been given by the fire department.

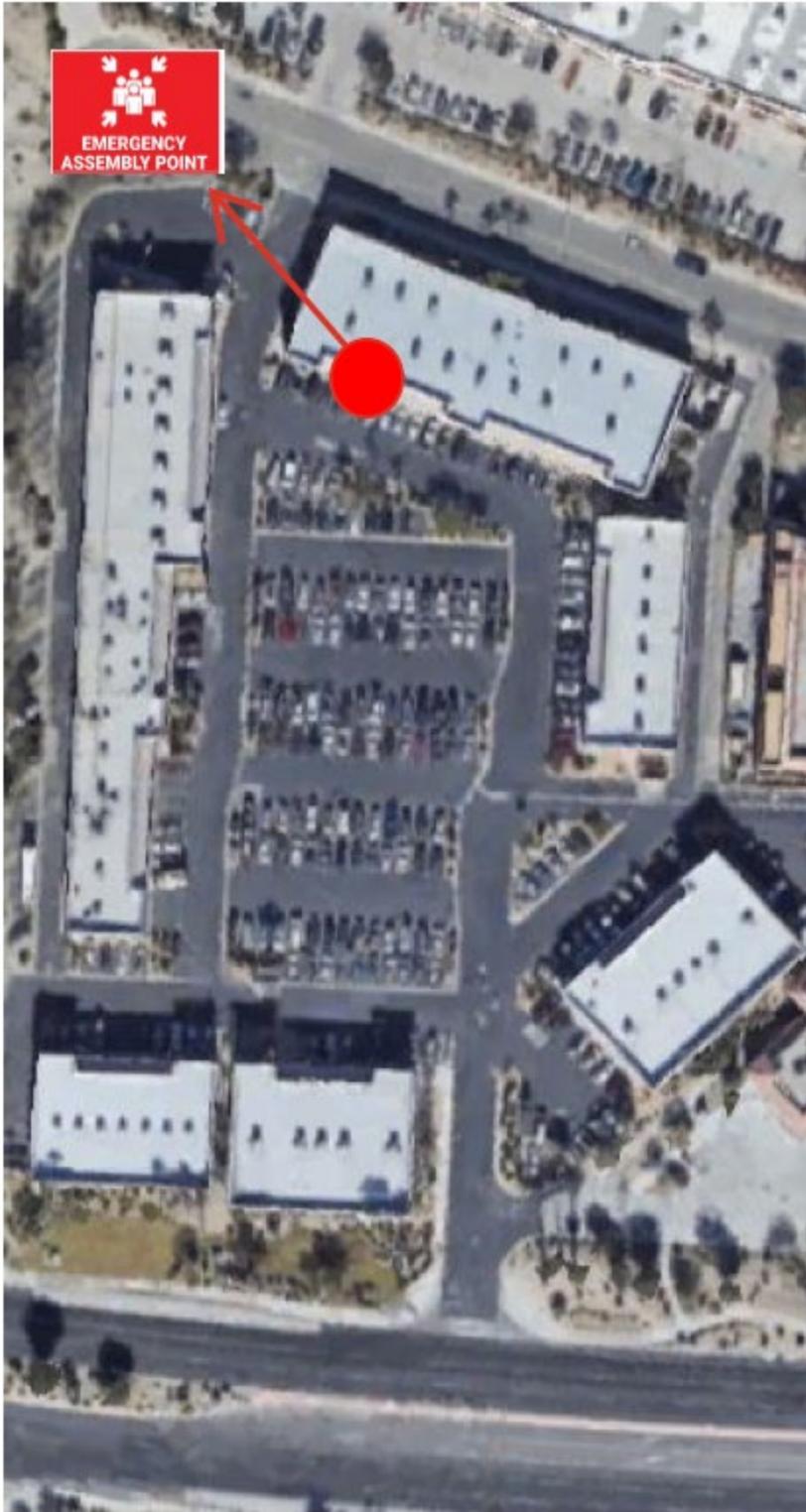
#### IF YOU DISCOVER A FIRE...

- **REMOVE** people from immediate danger and close doors behind you.
- **LEAVE** the fire area.
- **ACTIVATE** a fire alarm pull station.
- **PHONE 9-9-9** to report a fire at your address.
- **FIGHT** the fire only if it is small and you are not alone.
- **EVACUATE** via the nearest safe exit.
- **ASSIST** others to reach a safe exit.

#### MAP KEY

- EXIT ROUTE
- 🧯 FIRE EXTINGUISHER
- 🚒 FIRE ALARM
- 👤 AED MACHINE
- 🚪 EXIT DOOR
- 🚰 EVACUATION ASSEMBLY AREA

## Emergency Assembly Area (EAA) Location



**Primary EAA** – Behind clinic  
on Corporate Center Dr

## Areas of Rescue Assistance (ARA)

Areas of Rescue Assistance (ARA's) are locations where people who need assistance or who cannot self-evacuate in a multi-floor building can wait until help arrives. These areas are usually near stairwells or near emergency call box locations.

Floor #	Description of Location
Basement	N/A
1	Front Lobby doors leading to outside
2	N/A
3	N/A
4	N/A
5	N/A

## Key Personnel

### EMERGENCY CONTACTS:

POSITION	NAME	MOBILE #	EMAIL
Clinic Manager	Dolores Molina	760.702.5750	Dolores.Molina@medsch.ucr.edu
DOA	Krystal Rivas	909-693-2891	Krystal.rivas.medsch.ucr.edu
BES	Renee Sanchez	760.469.6054	Renee.Sanchez@medsch.ucr.edu
Property Manager	Dalip Tibb	760-835-7333	Daltibbmd@gmail.com
Facilities Planning	Jennifer Stewart	951-827-7880	Jennifer.stewart@medsch.ucr.edu

### BUILDING EMERGENCY STAFF (BES & BSEC)

NAME	ROLE	MOBILE #	EMAIL	TRAINING (IF APP)
Dolores Molina	BSEC	760.702.5750		
Renee Sanchez	BES	760.469.6054		
Maria Robles	Mobility Assistant 1	442.324.9490		
Elizabeth Munoz	Mobility Assistant 2	760-574-1338		
	Patient Sign - In			
	Patient Reunification			
Dolores Molina	Staff Sign - In	760.702.5750		
Nancy Elizondo	Patient rescheduling	408.466.3707		
Renee Sanchez	Patient rescheduling	760.469.6054		

## Emergency Notification

<b>All EMERGENCIES</b>	<b>911</b>
<b>Local Police (Non-Emergency)</b>	<b>(951) 826-5700</b>
<b>University Police Department</b>	<b>(951) 827-5222</b>
<b>Fire Marshal</b>	<b>(951) 827-2433</b>
<b>EH&amp;S Incident Response Team - Hazardous Material Spills</b>	<b>(951) 827-5528 (Day)</b> <b>(951) 333-8983 (Eve/Weekends/Holidays)</b>
<b>UCR Risk Management</b>	<b>(951)827-8221</b>
<b>UCR Strategic Communications (For all Media Inquiries)</b>	<b>(951) 827-6397</b>

## Hazardous Materials

Type of Hazardous Materials	Location

## Safety Systems

Fire and life safety equipment are located throughout the building in common areas. These may include, AED's, First Aid Kits, eye wash stations, showers, spill kits etc. (if not applicable location should be N/A). Add equipment as necessary

Type of safety equipment	Location
AED	Lab
Trauma Kit	Lab
First Aid Kit - Adult	Lab
First Aid Kit - Pediatric	Lab
Spill Kits	Lab
Eye Wash Station(s)	Exam room
Evacuation Chair(s)	N/A

## Emergency Supplies

Type and amount of Emergency Supplies	Location
BSEC Bag, vest, radio (TBD)	Clinic Manager Office
Food, water, blankets, other supplies	N/A

## III. Evacuation Procedures and Escape Routes

### Prior to Exiting

When the building's fire alarm activates, or when notified to evacuate by medical staff, clinic manager or a department representative:

- Stop all work activities.
- If possible, to do so without endangering yourself, shut down all operations that could produce hazards if left unattended, and begin your evacuation immediately.
- Alert others around you that an evacuation is taking place and of their need to exit.
- Close doors behind you as you exit, but do not lock them
- Closed doors help contain fires, locked doors hamper rescue operations.

Unless it creates an unnecessary delay, gather your keys, purse or wallet as you evacuate, keeping in mind you may not be allowed back into the building for an extended time.

### Actions to Take

- Begin evacuation by using stairwells, not elevators
- Clinical staff sweep all rooms to ensure they are empty
- Prioritize patients for evacuation
- Mobility Assistants assist patients who are non-ambulatory or require assistance
- Identify additional resources needed to accompany patients to the EAA
- Use stairwell landings as rescue assistance areas if it is not possible to transport patient's downstairs or away from the building; Staff to notify emergency responders and/or BSEC of persons location needing additional assistance.

### Evacuation Routes / Exiting the Building

During a building evacuation, proceed to the nearest exit or stairwell if available. Use an alternate escape route if the stairwell is involved with fire, smoke, or otherwise obstructed. Each employee should be aware of at least two exit routes in their main building in the event one is compromised. **Walk, do not run, and do not use building elevators during an evacuation under any circumstances.**

### Emergency Assembly Areas (EAAs)

Once outside, move away from the building and towards the building's primary Emergency Assembly Area (EAA). The designated Emergency Assembly Area for UCR Health Riverside – South can be found In Section II of this EAP.

### Assisting Persons with Access and Functional Needs (AFN)

Any person with a disability or other condition that would require them to need assistance during an evacuation is considered to have "access and functional Needs". This may include, but not be limited to:

- Person with a mobility impairment who use a wheelchair, walker, cane, crutches or other mobility device.
- Person recovering from surgery or medical procedure.
- Person with hearing or sight impairment.
- Pregnant

- Mental, developmental or behavioral issues.
- Language or communication barriers.

If an assistant has to leave a mobility-impaired person in an Area of Rescue Assistance (ARA), that individual is responsible for notifying the BSEC or emergency responders in the EAA where they left the person they were aiding.

## IV. Critical Plant Operations Employee

If you are unable to leave a building that is being evacuated to maintain critical processes that will create an increased hazard

if left unattended, or you are injured or trapped, attempt to alert someone evacuating the building of your inability to leave.

Advise them of your name, department, and room number or location. Make sure they understand to advise the Building Supervisor for Emergency Conditions (BSEC) of the situation.

Take steps to reduce your exposure to additional risks posed by remaining in the building. If you are able to shut down or

control critical processes, and subsequently evacuate, do so immediately. If you are injured or trapped remain where you are, unless in life-threatening danger, so that rescue can be attempted by emergency responders alerted to your location.

No one can require anyone to remain inside a building that is being evacuated. Your individual choice to remain in the building is only allowed for specific cases as indicated above.

## V. Accounting for Employees & Patients after an Evacuation

Each clinic EAA has a designated Building Supervisor for Emergency Conditions (BSEC) to act as the building's emergency point of contact and to manage EAA activities, along with trained Building Emergency Staff (BES) personnel to manage the evacuation process and assist with EAA activities.

Once you are safely at the EAA, be sure to notify the BSEC or BESs of the following:

- **Patient Reunification:** Parents will be notified once the immediate threat has passed. Designated staff to ensure children are released only to authorized individuals with proper identification. Authorized individual will need to be person listed as emergency contact on medical records and/or person who brought patient into clinic for appointment.
- The name (if known) and location of person you know are still in the building. Indicate the reason for their remaining, i.e. injuries, person trapped, monitoring critical processes, etc., if known.
- Any information observed on your way out of the building regarding the emergency condition, e.g. visible flames, smoke, odors, spills, structural collapses, sounds, etc.
- Any existing conditions that remain in your work area that might endanger emergency responders or other personnel.

All evacuees are to remain at the EAA until directed otherwise by the BSEC, BES, EH&S, Local Authorities or other authorized personnel. Information related to the length of interruption or estimates of re-entry will generally be available from the BSEC once it is available from emergency responders regardless of the nature of the incident. Do not re-enter the building for any reason, even if the alarm silences, until an all-clear is given by the Local Authorities, EH&S, the BSEC, BES, or other authorized personnel.

## VI. Building Supervisor for Emergency Conditions (BSEC)

### Assigned Job Responsibilities

**Clinic Manager's** role is the Building Supervisor for Emergency Conditions (BSEC) and is responsible for identifying and

recruiting alternate building BSEC (ABSEC) and Building Emergency Staff (BES) members in sufficient quantity for their building. The BSEC is also responsible for creating, updating, collecting, and maintaining building-specific contact lists (calling trees) and building specific accountability rosters, emergency equipment, and supplies.

Once the evacuation process is complete and building occupants have gathered at the EAA, the BSEC is responsible for taking rollcall. The BSEC should, prior to an emergency, ensure an updated building occupant roster sheet is available and accessible for this process at the time of the evacuation. The BSEC is also responsible for informing the Emergency Operations Center (EOC) by on-scene Incident Commander of the status of faculty, staff, patients, visitors, and guests gathered within the EAA.

***If needed, the BSEC can recruit volunteers to help BESs direct and manage evacuees in the Assembly Area***

BSECs should be prepared to provide the following information:

- Nature of the emergency (e.g., fire)
- Location of the emergency
- Number of person(s) trapped.
- Number of person(s) injured.
- Number of person(s) unaccounted for.

The BSEC should report any injuries in need of immediate care that are reported to them to the on-scene Incident Commander. Any other minor injuries should be documented and reported to the on-scene Incident Commander or the campus EOC by utilizing their assigned 800MHz radio, phone call, or written notice. The BSEC ensures all important communication and information is exchanged between the on-scene Incident Commander or the EOC, and for sharing information as it becomes available with the evacuated personnel in the EAA.

***The BSEC should not leave the assembly area*** until the emergency is cleared or if directed to do so by Local Authorities, EH&S, or other authorized personnel. The BSEC may assign a BES, or volunteer(s) from the assembled evacuees, to act as liaisons and assist with the collection and dissemination of information.

**Building Emergency Staff (BES)**

BES members initiate and manage the evacuation process. They accomplish this by

- Directing patients to the nearest building exit or stairwell
- Assisting patients in exiting or relocating to an area of safe refuge
- Preventing patients from using elevators during the evacuation process
- Conducting initial damage assessments during the evacuation process
- Identifying building conditions and hazards important to emergency responders
- Directing evacuated patients to the building's assigned EAA

Upon arrival at the EAA, the BES is responsible for reporting to the BSEC that the evacuation of their designated area is complete, and reporting all physically challenged, trapped, or injured personnel remaining in the building. The BES is to assist the BSEC with the completion of the Building Accountability Roster (see attachment A) and with any other assigned duties. The BES should also complete a Building Damage Assessment & Utility Status form (see attachment B).

**Administrative Staff Role:**

- Evacuate the waiting room area, including restrooms and other common areas
- If safe, print clinic schedule to account for patients at the EAA and reschedule patients if needed
- Account for patients and staff as they arrive at the EAA

**Clinical Staff Role:**

- Sweep exam rooms, restrooms and consult rooms
- Escort patients to EAA
- Direct staff to sign-in
- Report any locked or inaccessible rooms to the clinic manager
- Report to BES – report verbal details that include locations and condition of anyone remaining in the building and any observed hazards

**Mobility Assistant Role:**

- Providing physical assistance to evacuate patients and visitors from the building.
- Direct and assist patients and visitors unable to evacuate to a Rescue Assistance Area and remain there with them

## VII. Rescue and Medical Duties

### First Responders

UCR relies on the City of Riverside Fire Department and partnering agencies to provide fire suppression, rescue, and

medical response duties. It is recommended that departments document any employees who have specialized medical training in the Business Continuity Plan. These identified individuals should not practice outside the scope of their

training and are not required or expected to assist in any emergency or medical situation but may come forth to offer or render aid and assistance as covered under “Good Samaritan” regulations.

## VIII. Fire and Emergency Reporting Procedures

### Reporting Emergencies

In the event of an emergency, contact Local Authorities by dialing **911** (from a landline phone) or (951) 826-5700 (from a cell phone).

#### When to call:

- Report a medical emergency.
- Report all fire incidents, even if the fire is extinguished.
- Report criminal or suspicious behavior.
- Report any possible situation that you believe may be serious, and that may result in injury, death, loss of property, apprehension of a suspected criminal, or prevention of a crime that is about to occur. Call even if you are in doubt about the seriousness of the situation.

#### What information to provide:

- Your Name
- The nature of the emergency
- The location of the emergency
- When emergency happened
- How the emergency happened
- Whether or not you are in a safe location

Stay on the phone with the dispatcher until otherwise notified by the dispatcher to hang up, or emergency responders arrive on scene.

## IX. Emergency Alerts and Notifications

### Emergency Communications

If an emergency requires an evacuation of the building or for employees to take action, there are systems in place to provide notification. UCR’s emergency alert and notification of employees is multilayered for the purpose of redundancy. A variety of methods are available, though not all systems are deployed for every incident.

These notification systems include:

- Building fire alarms
- RAVE or TigerText
- Text, voice and email messaging from Emergency Notification System (RAVE)
- Verbal notification from Local Authorities, UCPD, EH&S, or a department representative
- Email (Rave or Listserv)
- Website (<http://campusstatus.ucr.edu>, <http://rspace.ucr.edu>, <http://rweb.ucr.edu>)

Other examples of notification methods include Loud verbal commands, handheld & vehicle PA systems, phone trees, bullhorns, even just flashing the lights can be a way to get people’s attention so they know there is an emergency/evacuation taking place.

**RAVE** is the official UCR mass emergency notification system for UCR campus and UCR Health clinics.

**Notification Tools:** The RAVE notification System, Text or Phone call will alert all clinic staff to ensure everyone can be accounted for.

**Regular Updates:** Leadership will send regular updates to all clinic staff via all available communication channels.

**Emergency App:** The RAVE notification System can be used for real-time communication, location tracking and emergency notification.

**Designated Spokesperson:** Designate a spokesperson to communicate with media and external agencies.

### Additional Information / Follow-up Activities

Information concerning emergencies affecting UCR Health clinics and the Riverside County region will be available to the campus community through the following resources:

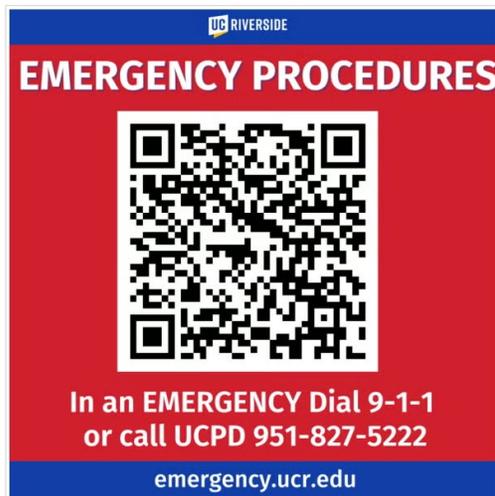
- Campus Status website <http://campusstatus.ucr.edu>

- EH&S Emergency Management website <https://emergency.ucr.edu/>
- Campus Radio KUCR: 88.3 FM or <http://kucr.org>
- Riverside Area News and Radio Stations  
[KFRG 95.1 FM](#) or [KGGI 99.1 FM](#), [KFI 640 AM](#) or [KNX 1070 AM](#)
- Emergency Alert System (EAS) Broadcasts

## X. Emergency Procedures

Emergency Procedures are available online at <https://emergency.ucr.edu/emergency-preparedness> for the following:

- Blood and Body Fluid Exposure
- Bomb Threat
- Civil Disturbance or Demonstration
- Earthquakes
- Fire and Smoke Conditions
- Hazardous Material Exposure / Spill
- Homeland Security Incident
- Medical Emergencies and First Aid
- Radioactive Contamination / Spill
- Suspicious Mail or Packages
- Utility Failure
- Violence or Crime on Campus



### Shelter in Place – Hazardous Materials Exposure

You may receive a text, voice mail, or e-mail to Shelter-In-Place via the campus emergency alert system (RAVE). Shelter-In-Place simply means seeking immediate shelter inside a building. This action may be taken during release of toxic chemicals, biological or radioactive materials to the outside air, or other emergency situations. If the outside air quality is threatened or compromised, sheltering in place keeps you inside an area offering more protection. Although rarely called for, Shelter-In-Place events usually last only a few hours. Emergency supply kits of food, water, and other items can be used during Shelter-In-Place events.

#### IMMEDIATE SHELTER-IN-PLACE:

- When the release is nearby and the need to seek shelter is immediate.
- Stay inside a building. • If outside, enter the nearest building.
- Remain in place until advised by emergency personnel that it is safe to leave.

#### DELAYED SHELTER-IN-PLACE:

- When a release occurs off campus and there is time (30 minutes or more) to move people to large, enclosed areas.
- Follow directions of emergency personnel to move quickly to a delayed Shelter-In-Place location.
- Remain in place until advised by emergency personnel that it is safe to leave.

**INFORMATION SOURCES INCLUDE BUT ARE NOT LIMITED TO:**

- Designated BSEC/BES members will receive phone notifications.
- Emergency Notifications (email/text) messages will be sent campus-wide & clinic-wide

**ADDITIONAL PROCEDURES:**

- Move to floors above ground level. Shelter-In-Place in an interior room without windows or with the least number of windows.
- Shut and lock all windows. Shut exterior and interior doors. Limit the use of telephones to emergency calls only.
- If in a laboratory, reduce all operations to a safe condition as quickly as possible. Follow instructions of the Lab manager or Principal Investigator (PI).
- Do not use elevators. The movement of elevators pumps significant amounts of air in and out of the building.
- Many buildings' ventilation systems are remotely controlled by Facilities Services. If necessary, locally turn off heat, fans, air conditioning, or ventilation systems. Close vents if you are able.
- Follow instructions of BSEC/BES members.
- Make yourself comfortable. Look after one another.

**ALL-CLEAR:**

- BSEC/BES members will be advised of the all-clear.
- Open doors and windows. • Return the ventilation system to normal operations.

## Secure in Place – Police Activity

A Secure-In-Place notification may be issued when the Local Authorities determines that there is a potential threat to the clinic. When notified to Secure-In-Place, initiate action immediately. Take ALL Emergency Notifications seriously. You will be safest by placing a locked door or other barricade between you and the associated violence or danger.

**HOW DO I SECURE-IN-PLACE?**

- REMAIN CALM! • Find an interior room and lock or barricade the doors.
- If there are other staff, patients or visitors with you or in the vicinity, tell them to go to the closest office/ exam room/lab/restroom or other enclosed space.
- To minimize vulnerability, turn off lights, silence phones, and draw blinds.
- Move away from doors and windows.
- Move/use furniture to provide added protection.
- Follow instructions from Police, Fire, BSEC/BES team members, and other first responders.
- DO NOT leave until an all-clear message is received.

**WHAT IF I AM OUTSIDE?**

- If you are outside during a Secure-In-Place emergency, you should seek shelter in a nearby building.
- If you are unable to get inside a building, seek nearby shelter, e.g., large trees, walls, cars in a parking lot/garage, away from the danger area (if known).
- Follow instructions from Police, Fire, BSEC/BES team members, and other first responders.
- Stay sheltered until an all-clear message is received.

## Emergency Planning Procedures

This section outlines an emergency preparedness plan to ensure safety and operational continuity during a crisis. It covers risk assessment, emergency response, communication, coordination with authorities, and the necessity of training and drills. The goal is to minimize emergency impacts and establish clear protocols.

**1. Risk Assessment:**

- a) Identify potential risks, including fire (high probability, high impact), earthquake (moderate probability, high impact), active shooters (low probability, high impact), power outage (moderate probability, moderate impact), and gas leak (low probability, high impact).
- b) For each risk, assess the impact on essential systems: IT infrastructure (data centers, servers, network), security systems (alarms, access control, cameras), medical equipment, and critical operations.
- c) Document vulnerabilities, such as a lack of backup power for certain systems or insufficient fire suppression in specific areas.

## 2. Emergency Response Plan:

- a) **Emergency Bag:** The Building Supervisor for Emergency Coordinators (BSEC) retrieves the emergency bag and radio, proceeds directly to the EAA.
  - b) **Fire:** Evacuate the building via designated fire exits to the primary assembly point. Assigned clinical team members will sweep assigned areas to ensure everyone has evacuated. Department manager to use a phone tree to account for all students and staff at the assembly point. Contact emergency services 911. Do not re-enter the building until authorized by emergency personnel.
  - c) **Earthquake:** Drop, cover, and hold under a sturdy desk or table. Remain indoors until the shaking stops. Evacuate the building cautiously after the shaking stops, watching for falling debris. Proceed to the designated assembly point. Check for injuries and administer first aid as needed.
  - d) **Active Shooter:** Run, hide, or fight. If possible, evacuate the building immediately. If evacuation is impossible, hide in a secure location and barricade the door. As a last resort, if confronted by the shooter, fight back aggressively.
  - e) **Power Outage:** Activate backup power systems. If backup power is unavailable, implement procedures to minimize disruption to essential services. Communicate the situation to stakeholders.
  - f) **Medical Emergency:** Call 911. Provide first aid until medical personnel arrive. Ensure clear access for emergency vehicles.
- EMERGENCY PLANNING PROCEDURES – UNKNOWN THREAT

## 3. Communication Plan:

- a) **Before an Emergency:** Review emergency procedures with employees regularly. Conduct regular drills (fire drills, earthquake drills, lockdown drills)
- b) **During an Emergency:** Initial communication within 20 minutes of the confirmed emergency. Updates every hour or as needed. Use the RAVE Notification System (push notifications, text messages, email) as the primary communication tool. If the RAVE Notification System is unavailable, use phone calls, Zoom, and in-person announcements
- c) **After an Emergency:** Communicate the status of the situation, any damage, and the plan for resuming normal operations. Provide resources for support and counseling.
- d) **Message Templates:** Develop pre-written messages for common scenarios (e.g., Building evacuation in progress., Please remain in your designated safe area, Power outage affecting campus)

## 4. Coordination with Authorities:

- a) Designated leadership or representative will be the primary point of contact with emergency services (police, fire department, etc.). They will provide regular updates to the designated leadership representative.
- b) The BES team leader will coordinate with the emergency response team on-site.

5. **Training and Drills:** Conduct regular training and emergency drills to ensure preparedness and familiarity with the emergency plan.

## After an Emergency

**“All Clear” – After coordinating with authorities, the designated person to issue Verbal, RAVE and / or Tiger Text Communication / Notifications – RAVE, Tiger Text, Email; to come from Clinic Manager or DAO Reporting**

## Emergency Communication Plan

**Purpose:** This emergency Communication Plan for UCR Health outlines the process for disseminating critical information and coordinating responses in case of an immediate threat impacting onsite working conditions and educational operations. The goal is to ensure the safety and well-being of all faculty, staff, patients and students through clear, consistent, and timely communication.

### Communication Sources:

- **RAVE Notification System:** The *RAVE Notification System* will alert all SOM and UCR Health / Clinical Affairs employees and students via phone, text, and email to ensure everyone can be accounted for.
- **SOM Listserv:** Listserv that enables messaging via email to all UCR Health / Clinical Affairs and SOM faculty, students, and staff.
- **UCR SOM Website:** A main page will only be set up if the threat lasts longer than one week. If so, a temporary banner with a hyperlink to a centrally dedicated web page with updated comprehensive information for all faculty, administration, students, and affiliates will be made available

### Communication Plan:

- **Regular Updates:** Once a known threat is communicated, UCRH CEO, COO, SOM Dean or delegate will gather the most recent updates on the threat at hand and lead the regular communication updates to all UCR Health / Clinical Affairs and SOM employees and students via available communication sources noted above. If the threat is prolonged for more than 1 week, a SOM dedicated page will be set up and maintained with regular updates through the end of the threat.
- **Communication about Status and SOM Uniform Action:** UCRH CEO, COO, SOM Dean or delegate will communicate with all the members of the UCRH or SOM leadership team daily via a meeting on Zoom, in-person, and/or email, as conditions change, to update contingency plans. UCRH CEO, COO, SOM Dean or delegate will then communicate updates to all employees and students via the RAVE Notification System and the SOM listserv to provide information on alternative work, class, or clinical training arrangements if the building and/or conditions for travel to clinical affiliates are deemed unsafe. Departments will follow uniform guidance provided by the department manager and/or their respective unit heads; employees and students will be referred to their business continuity plans. For student-facing units, each unit head will be responsible for providing students with directions on alternative curriculum locations, such as online curricula, etc., per the table below.

### EMERGENCY COMMUNICATION PLAN – KNOWN THREAT

Student Body Group	Responsible Unit Head
Graduate Medical Education (GME)	Senior Associate Dean

### Communication Notification Process:

- RAVE Notification System – All SOM personnel and students will receive notifications through the RAVE Notification System (phone call, text messages, email), the primary communication tool. If the system is unavailable, communication will occur through standard phone calls, Zoom, via the SOM listserv, and/or in-person announcements (if applicable).
- Uniform decisions to activate the department’s continuity plan will be communicated via the UCRH CEO, COO, SOM Dean or a designated spokesperson
- UCRH CEO, COO, SOM Dean or Dean’s delegate will communicate daily notifications through the RAVE Notification System and SOM listserv.
- Daily communication will continue until the emergency incident has been resolved or it is safe to return to on-site work.

## XI. Contacts

### Campus Responsibilities

The following are names, job titles, and departments of the person who can be contacted for further information or an explanation of duties under the plan.

Department	Names / Job Title(s)	
<b>Environmental Health &amp; Safety</b> <a href="http://ehs.ucr.edu">http://ehs.ucr.edu</a> Phone: (951) 827-5528 Fax: (951) 827-5122 Email: <a href="mailto:ehs@ucr.edu">ehs@ucr.edu</a>	<b>Andrew Flores</b> <i>Campus Emergency Manager</i> <a href="mailto:andrew.flores1@ucr.edu">andrew.flores1@ucr.edu</a> (951) 827-5528  Gavin Ketcheside <i>Campus Fire Marshal</i> <a href="mailto:Scott.jackson@ucr.edu">Scott.jackson@ucr.edu</a> (951) 827-6309	<b>Shelia Hedayati</b> <i>Executive Director</i> <a href="mailto:Shelia.hedayati@ucr.edu">Shelia.hedayati@ucr.edu</a> (951) 827-5119  <b>Jason Delaney</b> <i>Campus Fire Inspector</i> <a href="mailto:Jason.delany@ucr.edu">Jason.delany@ucr.edu</a> (951) 827-5874
<b>University of California Police Department (UCPD)</b> <a href="http://police.ucr.edu">http://police.ucr.edu</a> Phone: (951) 827-5222 Fax: (951) 827-1639 Email: <a href="mailto:ucpdgeneralmail@ucr.edu">ucpdgeneralmail@ucr.edu</a>	<b>Jeffrey Talbott</b> <i>Chief of Police</i> <a href="mailto:Jeffrey.talbott@ucr.edu">Jeffrey.talbott@ucr.edu</a> (951) 827-3848	<b>Jason Day</b> <i>Police Lieutenant</i> <a href="mailto:jason.day@ucr.edu">jason.day@ucr.edu</a> (951) 827-6188

### Department Head / Chair Director Responsibilities

The Department is responsible for implementing essential elements of the BEP; planning, employee awareness training, the assignment of department personnel responsibilities (BSEC & BES positions), and annual Department EAP evaluation and maintenance.

The following duties must be performed to maintain an effective BEP:

- Develop, review, and update the Department BEP annually or as needed.
- Train all employees on the location of all emergency exits, fire extinguishers, manual pull stations, first aid kits, and Automated External Defibrillators (where applicable) within their assigned building/workspace.
- Ensure each person assigned space by the department creates and updates the Emergency Contact information for each room placard at <http://econtact.ucr.edu>.

## XII. Additional Information

### Additional UC Riverside Resources

- UC Riverside Office of Emergency Management <https://emergency.ucr.edu/>
- UC Riverside Environmental Health & Safety <https://ehs.ucr.edu/>
- UC Riverside Emergency Operations Plan & Emergency Response Procedures <https://emergency.ucr.edu/emergency-preparedness>

- UC Riverside Emergency Action Plan [https://ehs.ucr.edu/emergency/emergency\\_action\\_plan.pdf](https://ehs.ucr.edu/emergency/emergency_action_plan.pdf)

### Additional Local Resources

- County of Riverside Department of Public Health Director (951) 358-7036
- Western Riverside Emergency Council (WREC) Emergency Operations Center of the Riverside Fire Department (951) 826-5550
- County of Riverside Department of Public Health Director of Disease Control (951) 358-5107
- Riverside Community Hospital Infection Disease Officer (951) 788-3000

<https://medschoolintranet.ucr.edu/ucrhealth> - Add EAP to UCR Health website for easy reference

<https://emergency.ucr.edu/document/emergency-flip-chart> - Add clinic flip chart and QR Code

**Additional Information / Follow Up Activities** Information concerning emergencies at UCR and related topics will be available to the campus community through the following resources:

- UCR Website at [www.ucr.edu](http://www.ucr.edu)
- UCR Campus Status • UCR Campus Radio KUCR: 88.3 FM or [www.KUCR.edu](http://www.KUCR.edu)
- Riverside Area News and Information Radio o KFRG 95.1 FM or KGGI 99.1 FM o KFI 640 AM or KNX 1070 AM
- Riverside Area Emergency Information – Charter Cable Channel 32 or 33

### Additional Information / Follow Up Activities

- Notify supervisor of exposure to a potential infectious fluid
- Notify EH&S as soon as possible of potential infection from blood or body fluid due to exposure
  - During business hours contact Environmental Health & Safety (951) 827-5528 to report exposure (Monday through Friday, 8:00 am - 5:00 pm)
  - After hours contact UCPD Dispatch (951) 827-5222 and request they notify EH&S

## Appendix:

### Attachment A

# UC Riverside – Building Evacuation Roster

Building/Location: \_\_\_\_\_

	Last Name	First Name	Evacuated	Faculty	Staff	Patients	Visitor	Injured	Trapped	Left EAA	Date	Time
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
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26												
27												
28												
29												
30												

<b>Instructions</b>
Place an "X" in the box to indicate affiliation to the campus.
Complete all boxes. Total columns in the boxes below.
<b>Total Evacuated</b>
<b>Total Faculty</b>
<b>Total Staff</b>
<b>Total Patients</b>
<b>Total Visitors</b>
<b>Total Injured</b>
<b>Total Trapped</b>
<b>Total Left EAA</b>
<b>Total Unknown</b>

