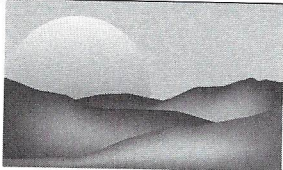




	NAME	DEPT	Hospital
	Stephanie Lebowitz	Emergency	RPMH
★	Glynis Gotscher	Supervisor	RPMH
	Lila Manray	AK	RPMH
★	Richard Aversa	SNCHD	1/2 Day
★	Larry McEACHERN	MRC	d
	Kayrene Ham	Supervisor	RPMH
★	Jimmy Hendrix	Plant Ops	RPMH
	Jessica Bond	Safety	RPMH
★	Mary Smith	IC/EH	RPMH
	Taber Harbuck	HCC	NETTRAC
	Tibby Forbes	ER	RPMH
	Adriana Cruz	EVS	RPMH
	Maurice Pias	EVS	RPMH
	Keri Halford	ER	RPMH

 R P M H +	POLICY NAME: HAZMAT EXPOSURE DECONTAMINATION PLAN	POLICY NUMBER: 3022
	APPROVAL: Not Assigned	ORIGINAL DATE: 11/03/2011
EFFECTIVE DATE: Not Approved Yet	REVIEWED DATE: No Review Date	REVISION DATE: [Add Manually]

POLICY STATEMENT Rolling Plains Memorial Hospital is a rural hospital that sits on the I-20 corridor with multiple harmful substances traveling the corridor at any given time. In addition Rolling Plains Memorial Hospital is located in the vicinity of DPC Industries which is a Chlorine distribution plant that keeps and maintains large amounts of chlorine on the premises. It is imperative that Rolling Plains have and maintain a working Decontamination and HAZMAT policy.

PURPOSE The purpose of the policy is to give direction and information to the process of recognition of a chemical exposure necessitating decontamination of a patient, and the processes that will be carried out.

SCOPE A chemical exposure may take place on the Rolling Plains campus or in the surrounding community. These individuals will typically report to the Emergency Department for treatment. All staff in the Emergency Room should know the steps to initiate a decontamination process and who their team members should consist of.

DEFINITIONS

HAZMAT- The term used for any hazardous material that has the properties to do harm to either the environment, objects in the environment or individuals in the immediate area or in contact with individuals who come in contact with contaminated individuals or objects.

Aerosol – compressed gas , liquefied or dissolved under pressure, that when expelled becomes a liquid, paste, or powder.

Absorption-

1. The process of absorbing or picking up a liquid hazardous material to prevent enlargement of the contaminated area.
2. Movement of a toxicant into the circulatory system by oral, dermal, or inhalation exposure.

Absorbed dose- In exposure assessment, the amount of a substance that penetrates an exposed organisms absorption barriers (e.g., skin,lung tissue, gastrointestinal tract) through physical or biological processes. The term is synonymous with internal dose.

Access control point- The point of entry and exit which regulates traffic to and from control zones.

Alkali- A hydroxide containing (-OH) corrosive material which is soluble in water, neutralizes acids, and is irritating or destructive to tissue.

Anhydrous- Free from water, dry. ANTIDOTE:

Antidote- A therapeutic agent which is administered to counteract the effects of a toxic agent.

Base (chemical)- A hydroxide containing (-OH) corrosive material that when in a water solution is bitter, more or less irritating, or caustic to the skin.

Biohazard- Infectious agents presenting a risk or potential risk to living organisms, either directly through infection or indirectly through disruption of the environment.

Boiling point- The temperature at which liquid changes to a vapor. Expressed in degrees Fahrenheit at sea level pressure. Flammable materials with low boiling points generally present special fire hazards.

Carcinogen- An agent that produces or is suspected of producing cancer.

Chlorep- The chlorine emergency plan, established by the Chlorine Institute, enables the nearest producer of chlorine to respond to an incident involving chlorine. (Contact is made through CHEMTREC.)

Cold zone- The area outside of the Warm Zone. Equipment and personnel are not expected to become contaminated in this area. This is the area where resources are assembled to support the hazardous materials operation.

Combustible liquid- A substance capable of fueling a fire. According to OSHA, any liquid having a flash point at or above 100oF and less than 200oF is a combustible liquid. According to DOT, any liquid having a flash point at or above 141oF and less than 200oF is a combustible liquid.

Corrosive- A material that has the ability to cause visible destruction of living tissue and has a destructive effect on other substances. May be an acid or a base.

Decontamination- The physical and/or chemical process of reducing and preventing the spread of contamination from persons and equipment used at a hazardous materials incident. (Also referred to as contamination reduction.) (NFPA 472, 1-3)

Desiccant- A substance, such as silica gel, that removes moisture (water vapor) from the air to maintain a dry atmosphere in containers of food or chemical packaging.

2-5-19



SAFETY LEAD - KAY/RENE

2 pts coming in - + 1 more
Safety - blankets, water,
unauthorized people from ER bay
Angos - unloading
brakes - Mike
1st Brumaire
small white powder
1525 dry decon on 1st
unable + cleared baby

Jebby #1 120/80-52-20

Keri #2 Keri 112/64-72-18

Jim #3 142/81-84-18

pair to
donning PPE

1530 #1 Jebby 110/60 58 99%

2# Keri 120/70-70

#3 Jim 148/80-84-

Car blocked off
Cherry takes
when do you call for
hazmat car?

3 pts.

Rolling
Plains 2-5-19



Local Brewery / Patients had
Bromine Exp
from Forklift
miss hap

1. questioning by sot/sec & Decon lead
2. Decon team - no water
- * 3. Did look up Bromine
- * 4. moved ~~some~~ someone from down wind
- * ~~Germs~~ Germs still in Decon Room?
- * calling Mike #555-1212
- * work on corgoes
- Safety ↔ Decon Lead
- * Chevy Towhee
- Bigger area for support for staging
- * Dry Decon
- Vitals/cart needs deconed
- * Technical Decon
- Dressing & Doffing in staging area
- 1535 called



Kerry 120/64 72 HR
IN 3:15 out: 3:25 18 Rep
Jenny 142/80 84 HR
IN 3:15 out: 3:29 18 Resp

DEACON TEAM LEAD - MARCUS

Get chairs, check vitals, water & soap

CHECKING VITALS

JEBBY ~~120/60~~ 120/96 92 HR Employee at Argos
IN 3:15 out 3:19

Casey ~~in~~ Candice's car
Vroman - powdery
feels itchy

Candice in her car cherry Tahoe
Vroman ER parking lot
itchy arms & neck
white powdery, no smell

Stephanie - Candice's car unloading boxes
Vroman Mike was driving
itchy & burning skin hit bromine
powdery

Mike / no show

555-1212

Missy

~~Warman~~ bromine

itchy skin burning dry decon
Candice's car

Bromine



2:56 call drill

do we call all EMS
do they need detailed

INCIDENT COMMAND - JESSICA

self presented

3 in isolation

candace's car Chang Tahoe ER parking lot

Mike Bass 555-1212 Angus Brewery

unloading warehouse - fork lift hit Bromine

white powder no smell itchy & burning

4 patients 3 adult

x

Entry point- A specified and controlled location where access into the Hot Zone occurs at a hazardous materials incident.

Flashpoint- The minimum temperature of a liquid at which it gives off vapors sufficiently quickly to form an ignitable mixture with air and will flash when subjected to an external ignition source, but will not continue to burn.

Hot zone- An area immediately surrounding a hazardous materials incident, which extends far enough to prevent adverse effects from hazardous materials releases to personnel outside the zone. This zone is also referred to as the exclusion zone, the red zone, and the restricted zone in other documents. (NFPA 472, 1-3)

Lacrimation- Tearing produced by eye irritation.

Material safety data sheet (MSDS)- A document which contains information regarding the specific identity of hazardous chemicals, including information on health effects, first aid, chemical and physical properties, and emergency phone numbers.

Neutralization- The process by which acid or alkaline properties of a solution are altered by addition of certain reagents to bring the hydrogen and hydroxide concentrations to equal value (pH 7 is neutral).

Oxidizer- A chemical, other than a blasting agent or explosive, that initiates or promotes combustion in other materials thereby causing fire either of itself or through the release of oxygen or other gases. (49 CFR 173.151)

Particulates-

1. Fine liquid or solid particles such as dust, smoke, mist, fumes, or smog, found in air or emissions.
2. Very small solids suspended in water; they can vary in size, shape, density and electrical charge and can be gathered together by coagulation and flocculation.

Penetration- The movement of liquid molecules through a chemical protective clothing, suit, garment or material.

Radiation- Energy radiated or transmitted in the form of rays, waves, or particles.

Salivation- An excessive discharge of saliva; ptyalism.

Vapor- An air dispersion of molecules of a substance that is normally a liquid or solid at standard temperature and pressure.

Warm zone- The area where personnel and equipment decontamination and hot zone support takes place. It includes control points for the access corridor and thus assists in reducing the spread of contamination. This is also referred to as the decontamination, contamination reduction, yellow zone, support zone, or limited access zone in other documents. (NFPA 472, 1-3)

EQUIPMENT

Level of Protection- In addition to appropriate respiratory protection, designations of types of personal protective equipment to be worn based on NFPA standards.

LEVEL A: Vapor protective suit for hazardous chemical emergencies. Pressure-demand, full-facepiece SCBA or Pressure-demand supplied-air respirator with escape SCBA. Fully-encapsulating, chemical-resistant suit. The highest available level of respiratory, skin, and eye protection.

LEVEL B: Liquid splash protective suit for hazardous chemical emergencies. Pressure-demand full-facepiece SCBA or pressuredemand supplied-air respirator with escape SCBA. Chemical-resistant clothing (overalls and long-sleeved jackets; disposable chemical resistant one-piece suit). The same level of respiratory protection but less skin protection than level A.

LEVEL C: Limited use protective suit for hazardous chemical emergencies. Full-facepiece, air-purifying, canister-equipped respirator. Chemical-resistant clothing (overalls and long-sleeved jackets; disposable chemical resistant one-piece suit). The same level of skin protection as level B, but a lower level of respiratory protection.

LEVEL D: No respiratory protection is provided. Coveralls, safety boots/shoes, safety glasses or chemical splash goggles, hard hat. No respiratory protection, Minimal skin protection

QUALITY CONTROL Quality measurements of the HAZMAT plan will be included in the overall evaluation and analysis of the Emergency Management Plan.

PROCEDURE/WORK INSTRUCTIONS

1. The person receiving the initial information about a possible Decontamination situation should immediately notify the Emergency Department, House Supervisor and Administrator on call. If the person walks into the department unannounced, they should immediately be taken to the decontamination showers and DECON should begin.
2. The House Supervisor will have the operator if available make the following overhead announcement: FACILITY ALERT – FACILITY ALERT- HAZMAT INCIDENT EMERGENCY ROOM + ESTIMATED TIME OF ARRIVAL. If after hours the Emergency Room Clerk will make the announcement.
3. The House Supervisor/ Administrator will decide if Facility Lockdown is required but Emergency Room should be locked down regardless and on call or additional staff notified as appropriate.
4. Information should be gathered from the best source(Fire Department, DPS, other Law Enforcement) about the contaminant type and class, the number of individuals exposed and if possible name or placard number in order that the chemical may be looked up in the North American Response guide for proper level of equipment needed, type of decontamination required for victims, first aid for victims and precautions prior to arrival.
5. Once the chemical is identified the Decontamination area should be prepared for the appropriate type of decontamination.
6. The HOT ZONE when possible will remain away from the entrances of the Emergency Room to prevent possible contamination by runoff, vapor or particulates.
7. Victims entering the hospital should come through the Decontamination shower or designated area and progress to the adjoining room for clothing or triage and then be put in rooms in the emergency room if available. If the victims have life threatening injuries treatment should be initiated in the decontamination shower and the victim once decontaminated should be place in either Trauma 1 or Trauma 2 with the doors closed as these are reverse pressure rooms.

RELATED DOCUMENTS

RPMH Emergency Operation Plan
RPMH Emergency Management Plan
RPMH phone tree



RRS FRA/FRO Training for Hospitals

CLASS EVALUATION

DATE: 2/5/19

NAME: _____

1	2	3	4	5
Does not meet	Marginally Meets	Meets	Exceeds	Superior

OVERALL COURSE:	1	2	3	4	5	COMMENTS
-----------------	---	---	---	---	---	----------

Did the class Hazmat training have a Hospital base focus?	1	2	3	4	5	
---	---	---	---	---	---	--

Overall quality of this course?	1	2	3	4	5	
---------------------------------	---	---	---	---	---	--

Was the hands on portion of class clear and helpful?	1	2	3	4	5	
--	---	---	---	---	---	--

Was the PPE portion of class clear and helpful?	1	2	3	4	5	
---	---	---	---	---	---	--

Additional comments: _____

REGARDING INSTRUCTORS:	1	2	3	4	5	COMMENTS
------------------------	---	---	---	---	---	----------

Instructors presentation of information	1	2	3	4	5	
---	---	---	---	---	---	--

Instructors listened and answered questions	1	2	3	4	5	
---	---	---	---	---	---	--

Additional comments _____

Was the class appropriately focused for hospital personnel needs?
Yes

How could this class be improved?
more people and patients

What did you consider to be the best feature of this class?
Everything was a learning progress



RRS FRA/FRO Training for Hospitals

CLASS EVALUATION

DATE: 2-5-19

NAME: Marcus Rosas

1	2	3	4	5
Does not meet	Marginally Meets	Meets	Exceeds	Superior

OVERALL COURSE:	1	2	3	4	5	COMMENTS
-----------------	---	---	---	---	---	----------

Did the class Hazmat training have a Hospital base focus?	1	2	3	4	5	
---	---	---	---	---	---	--

Overall quality of this course?	1	2	3	4	5	
---------------------------------	---	---	---	---	---	--

Was the hands on portion of class clear and helpful?	1	2	3	4	5	
--	---	---	---	---	---	--

Was the PPE portion of class clear and helpful?	1	2	3	4	5	
---	---	---	---	---	---	--

Additional comments:

REGARDING INSTRUCTORS:	1	2	3	4	5	COMMENTS
------------------------	---	---	---	---	---	----------

Instructors presentation of information	1	2	3	4	5	
---	---	---	---	---	---	--

Instructors listened and answered questions	1	2	3	4	5	
---	---	---	---	---	---	--

Additional comments

Was the class appropriately focused for hospital personnel needs?

How could this class be improved?

What did you consider to be the best feature of this class?



RRS FRA/FRO Training for Hospitals

CLASS EVALUATION

DATE:

2-5-19

NAME:

Adriana Cruz

1 2 3 4 5
Does not meet Marginally Meets Meets Exceeds Superior

OVERALL COURSE: 1 2 3 4 5 COMMENTS

Did the class Hazmat training have a

Hospital base focus?

1

2

3

4

5

Overall quality of this course?

1

2

3

4

5

Was the hands on portion of class

clear and helpful?

1

2

3

4

5

Was the PPE portion of class

clear and helpful?

1

2

3

4

5

Additional comments:

REGARDING INSTRUCTORS: 1 2 3 4 5 COMMENTS

Instructors presentation of information

1

2

3

4

5

Instructors listened and answered
questions

1

2

3

4

5

Additional
comments

Was the class appropriately focused for hospital personnel needs?

Yes

How could this class be improved?

Everything was good

What did you consider to be the best feature of this class?

The Drill



RRS FRA/FRO Training for Hospitals

CLASS EVALUATION

DATE: 2/5/19

NAME: Kayrene Han

1 2 3 4 5
Does not meet Marginally Meets Meets Exceeds Superior

OVERALL COURSE: 1 2 3 4 5 **COMMENTS**

Did the class Hazmat training have a

Hospital base focus? 1 2 3 4 5

Overall quality of this course? 1 2 3 4 5

Was the hands on portion of class

clear and helpful? 1 2 3 4 5

Was the PPE portion of class

clear and helpful? 1 2 3 4 5

Additional comments:

REGARDING INSTRUCTORS: 1 2 3 4 5 **COMMENTS**

Instructors presentation of information 1 2 3 4 5

Instructors listened and answered

questions 1 2 3 4 5

Additional

comments

Was the class appropriately focused for hospital personnel needs?

Yes - definitely am more prepared
now.

How could this class be improved?

What did you consider to be the best feature of this class?

it was all great, very informative

Thank you!



RRS FRA/FRO Training for Hospitals

CLASS EVALUATION

DATE: 2/5/18

NAME: Jebby Forbes (Fart guy)

1 2 3 4 5
Does not meet Marginally Meets Meets Exceeds Superior

OVERALL COURSE: 1 2 3 4 5 COMMENTS

Did the class Hazmat training have a

Hospital base focus? 1 2 3 4 5

Overall quality of this course? 1 2 3 4 5

Was the hands on portion of class

clear and helpful? 1 2 3 4 5

Was the PPE portion of class

clear and helpful? 1 2 3 4 5

Additional comments:

REGARDING INSTRUCTORS: 1 2 3 4 5 COMMENTS

Instructors presentation of information 1 2 3 4 5

Instructors listened and answered

questions 1 2 3 4 5

Additional

comments

Very good info and opened up my thought

process dealing with Hazmat

Was the class appropriately focused for hospital personnel needs?

yes, we can't think like nurses, we

cleaned and send them on

How could this class be improved?

break it up to a two day course

What did you consider to be the best feature of this class?

Hands on + instructors... Would

definitely take course again



RRS FRA/FRO Training for Hospitals

CLASS EVALUATION

DATE: 2/5/19

NAME: Jessica Bond

1 2 3 4 5
Does not meet Marginally Meets Meets Exceeds Superior

OVERALL COURSE: 1 2 3 4 ~~5~~ **COMMENTS**

Did the class Hazmat training have a
Hospital base focus? 1 2 3 ~~4~~ ~~5~~

Overall quality of this course? 1 2 3 ~~4~~ 5

Was the hands on portion of class
clear and helpful? 1 2 3 ~~4~~ 5

Was the PPE portion of class
clear and helpful? 1 2 3 ~~4~~ 5

Additional comments: _____

REGARDING INSTRUCTORS: 1 2 3 4 5 **COMMENTS**

Instructors presentation of information 1 2 3 ~~4~~ 5

Instructors listened and answered
questions 1 2 3 4 ~~5~~

Additional
comments _____

Was the class appropriately focused for hospital personnel needs?

How could this class be improved?

What did you consider to be the best feature of this class?
hands on portion



RRS FRA/FRO Training for Hospitals

CLASS EVALUATION

DATE: 2/5/2019 NAME: _____

1	2	3	4	5
Does not meet	Marginally Meets	Meets	Exceeds	Superior

OVERALL COURSE:	1	2	3	4	5	COMMENTS
Did the class Hazmat training have a Hospital base focus?	1	2	3	4	5	
Overall quality of this course?	1	2	3	4	5	
Was the hands on portion of class clear and helpful?	1	2	3	4	5	
Was the PPE portion of class clear and helpful?	1	2	3	4	5	
Additional comments:						

REGARDING INSTRUCTORS:	1	2	3	4	5	COMMENTS
Instructors presentation of information	1	2	3	4	5	
Instructors listened and answered questions	1	2	3	4	5	
Additional comments						

Was the class appropriately focused for hospital personnel needs?

Excellent

How could this class be improved?

What did you consider to be the best feature of this class?

All.



RRS FRA/FRO Training for Hospitals

CLASS EVALUATION

DATE: 2-5-19

NAME: Jimmy Hendry

1	2	3	4	5
Does not meet	Marginally Meets	Meets	Exceeds	Superior

OVERALL COURSE:	1	2	3	4	5	COMMENTS
Did the class Hazmat training have a						
Hospital base focus?	1	2	3	4	5	
Overall quality of this course?	1	2	3	4	5	
Was the hands on portion of class						
clear and helpful?	1	2	3	4	5	
Was the PPE portion of class						
clear and helpful?	1	2	3	4	5	
Additional comments:						
REGARDING INSTRUCTORS:	1	2	3	4	5	COMMENTS
Instructors presentation of information	1	2	3	4	5	
Instructors listened and answered						
questions	1	2	3	4	5	
Additional						
comments						
Was the class appropriately focused for hospital personnel needs?						
<u>yes</u>						
How could this class be improved?						
What did you consider to be the best feature of this class?						
<u>hands on training & drill</u>						



RRS FRA/FRO Training for Hospitals

CLASS EVALUATION

DATE: 2-5-19

NAME: Keri Halford

1 2 3 4 5
Does not meet Marginally Meets Meets Exceeds Superior

OVERALL COURSE: 1 2 3 4 5 **COMMENTS**

Did the class Hazmat training have a
Hospital base focus? 1 2 3 4 5

Overall quality of this course? 1 2 3 4 5

Was the hands on portion of class
clear and helpful? 1 2 3 4 5

Was the PPE portion of class
clear and helpful? 1 2 3 4 5

Additional comments: _____

REGARDING INSTRUCTORS: 1 2 3 4 5 **COMMENTS**

Instructors presentation of information 1 2 3 4 5

Instructors listened and answered
questions 1 2 3 4 5

Additional
comments _____

Was the class appropriately focused for hospital personnel needs?
Yes

How could this class be improved?
nothing, it was good.

What did you consider to be the best feature of this class?
Hands on portion of decon.



RRS AFTER ACTION PLAN

Location: Rolling Plains Memorial Hospital			Date: 02/05/2019		Time: 2:56
Description of Scenario: Three employees from a local brewery presented at the ED contaminated with bromine. A 50-gallon barrel of bromine fell off of a fork lift and when it fell off it opened up and the bromine contaminated the three employees. Their symptoms included slight respiratory issues, skin burning, skin itching and eye irritation. They drove themselves to the ED for treatment and decontamination.					
Objectives for this drill/exercise: At the end of this drill, class participants at Rolling Plains Memorial Hospital will be able to understand the flow and set up understand how to stage the internal shower hazmat decontamination area, patient flow through fixed location and hand off to hospital staff. Class participants will also demonstrate efficient proper donning and doffing of PPE.					
Response Agencies, Facilities and Departments: Class Participants/ hazmat team at Rolling Plains Memorial Hospital.					
Evaluation					
• Communications	<input type="checkbox"/> Excellent	<input checked="" type="checkbox"/> Very Good	Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Notes: During the drill, Rolling Plains Memorial Hospital demonstrated a very good ability to communicate. Information was passed on in a good manner and was able to be used to help safely complete a patient decontamination drill.					
• Resources and assets	<input type="checkbox"/> Excellent	<input checked="" type="checkbox"/> Very Good	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Notes: The resources available at Rolling Plains Memorial Hospital very were good.					
• Staff responsibilities	<input type="checkbox"/> Excellent	<input type="checkbox"/> Very Good	<input checked="" type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Notes: The staff demonstrated a good ability to handle a patient decontamination.					
• Patient & support activities:	<input type="checkbox"/> Excellent	<input type="checkbox"/> Very Good	<input checked="" type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Notes: During the drill, it was demonstrated and observed patient support was good.					

<p>Other considerations: In the support zone/green/cold zone, large blankets are needed for receiving clean patients. Rolling Plains Memorial Hospital needs to have more Unexpired FR-57 filters. Buckets, sponges also needed.</p> <p>****Butyl Rubber Hoods are for Hazmat Decontamination**** White hoods are for infectious disease not recommended for chemical hazmat decontamination.</p>			
<p>Objectives met: The objectives set for this drill were met by Rolling Plains Memorial Hospital. The team/class members were able to successfully set up and stage the hazmat area, understand the set-up zones, equipment storage and needs, patient flow and gain a full understanding of where their facility would conduct a hazmat patient decontamination if one were needed at this facility. Properly demonstrate their ability to don and doff PPE.</p>			
<p>Issues identified/items needed for improvement</p> <ol style="list-style-type: none"> 1. FR-57 filters 2. Blankets for support zone 3. Buckets/Sponges 4. Dawn Dish Soap for decon. 			
Action Plan			
Issue	Plan	Responsible Staff	Completed on (date)
1.	Initiates HCIS. Communication of incident/event, what the drill/event consists of, number of patients, contaminate, communication to other entities involved in the incident/event. Documentation of all aspects of incident/event. Overseer of all aspects of the incident/event/drill. Incident Commander/Task Force Leader	Incident Commander/Task Force Leader	02/05/2019
2.	Safety Officer: Overseer of all safety aspects of the incident/event/drill. Communication and documentation of event details, relays information to the IC/TFL.	Safety Officer	02/05/2019
3.	Decontamination Team Leader: Leads decontamination team with proper donning of PPE, vitals, hydration and overall health of decon team. Track time in/out of PPE, vitals of team in PPE.	Decon Team Leader	02/05/2019
4.	Support: Receiver of clean patients. Ensures contamination is complete, if not, send the patient back through decon. Communicates information learned from patient to IC/TFL and Safety Officer.	Support Team	02/05/2019
Completed by: Chris Maze			02/11/2019