

University of South Carolina

# CAMPUS EMERGENCY ACTION PLAN



School of Medicine Greenville

607 Grove Road  
Greenville, SC 29605

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**I. Overview**

**A. Emergency Contact Numbers**

|                                 |                |
|---------------------------------|----------------|
| EMERGENCY                       | 911            |
| Prisma Health Security Dispatch | (864) 455-7931 |
| USCSOMG Facilities              | (864) 476-2021 |

## Building Description

The HSAB (Health Sciences Administration Building) is a single floor office building housing leadership, faculty and staff for the USC School of Medicine Greenville. This is a single-story building without a basement comprised of 45 offices, 7 restrooms, 3 cubicle rooms, two conference rooms a copy room and a break room. All offices and cubicle rooms can be locked. This building is not for the storage of hazardous materials. The building is located on the Greenville Memorial Hospital campus and is physically connected to the Marshal Pickens hospital and to the west of the Health Sciences Education Building. The HSAB is approximately ( ) SQFT.

The HSEB (Health Sciences Education Building) is a three-story mixed-use building housing administrative offices and educational space on floors 1 and 3 with the second floor being shared with the Prisma Health Simulation Center and containing Educational and research space.

The HSEB has a two-story parking deck immediately below capable of holding up to 291 cars and 6 motorcycles.

The HSEB is approximately 90,000 SQFT.

The 1<sup>st</sup> floor contains 18 offices all lockable, two conference rooms, two large classrooms that are lockable A rotunda event space that is open access, 19 study rooms that are stair accessible only and a library commons that is lockable.

The 2<sup>nd</sup> Floor contains 10 offices, 6 classrooms, two small group study / meeting rooms, 14 standardized patient sim rooms and 12 technology simulation rooms. The second Floor has a connection corridor to the building adjacent to the HSEB.

The Third floor contains 8 offices, 12 small group rooms, 6 small study rooms, two small recording studios, one large teaching room, and the gross anatomy lab. The GA lab contains hazardous chemicals associated with the Cadavers and processing.

## **II. Building Emergency Personnel**

### **A. Deans/Directors**

The Dean/Director or his/her designee is responsible to ensure that the department uses the model Campus Emergency Action Plan (CEAP) and develops a department specific plan.

### **B. Building Emergency Coordinator**

The Building Emergency Coordinator (BEC) shall be assigned by the Dean/Director and is responsible for plan maintenance, employee education and annual testing of this plan. Testing will entail conducting an emergency exercise for a chosen section of the plan. During an emergency, the BEC will implement the CEAP and coordinate emergency actions to ensure the safety of the people in the building. The BEC emergency duties include:

- Ensure that the notification to emergency agencies takes place
- Assist in building evacuation
- Report to the assembly area
- Account for evacuated personnel
- Collect essential information for emergency personnel (i.e. location of the incident, persons still in the building, special hazards in the building, unique conditions, etc.)
- Develop specific procedures to assist persons with physical disabilities that are assigned to the department
- Assist physically disabled employees, students or visitors
- Meet with first responders to provide critical information and act as a point of contact for building specific concerns
- Implement the post emergency procedures

An Assistant Building Emergency Coordinator (ABEC) will be designated to assist the BEC and be responsible for the BEC's duties in their absence.

### **C. Floor Leaders**

Each floor shall designate a Floor Leader (FL) responsible for coordinating the CEAP for that respective floor. The emergency duties, as personal safety and time permits, of the FL include:

- Ensure all persons are evacuated
- Solicit volunteers to assist individuals with disabilities
- Conduct a sweep of the floor and ensure that all doors are closed, elevators empty, and critical operations stabilized, if safe to do so
- Assist physically disabled employees, students, or visitors

### D. Building Emergency Personnel Information

| <b>Title</b>           | <b>Name</b>        | <b>Office Phone</b> | <b>Cell Phone</b> | <b>Email</b>   |
|------------------------|--------------------|---------------------|-------------------|--|
| <b>Dean / Director</b> | Phyllis MacGilvray | 864-766-2067        | 910-650-2819      | <a href="mailto:macgilvr@greenvillemed.sc.edu">macgilvr@greenvillemed.sc.edu</a>   |
| <b>BEC</b>             | Austin Stephens    | 864-766-2021        | 606-524-7666      | <a href="mailto:Astephens@greenvillemed.sc.edu">Astephens@greenvillemed.sc.edu</a> |
| <b>ABEC</b>            | Dan Garwood        | 864-766-2034        | 864-650-1423      | <a href="mailto:Dgarwood@greenvillemed.sc.edu">Dgarwood@greenvillemed.sc.edu</a>   |
| <b>Floor Leader</b>    |                    |                     |                   |  |
| <b>-First Floor</b>    | Mackenzie Higdon   | 864-766-2533        | 301-751-6209      | Mhigdon@greenvillemed.sc.edu   |
| <b>- Second Floor</b>  | Henry Moulder      | 864-546-2408        | 864-546-2408      | Henry.moulder@prismahealth.org   |
| <b>-Third Floor</b>    | Peter Martinez     | 732-485-8633        | 732-485-8633      | Pm18@greenvillemed.sc.edu  |
| <b>-HSAB</b>           | Ashley Malushizky  | 864-766-2083        | 864-923-2643      | Hibbittm@greenvillemed.sc.edu  |

(BEC = Building Emergency Coordinator, ABEC = Assistant Building Emergency Coordinator)

## III. Emergency Actions

### A. Fire

This section of the Campus Emergency Action Plan will be activated in the event of:

- Fire alarm activation
- Fire discovered by building occupant

Any faculty, staff, student or visitor that becomes aware of a fire shall immediately activate the building fire alarm system. The fire alarm system will in turn notify all building occupants that a fire emergency exists. This is accomplished through sounding an audible alarm and a visual flashing light. All faculty, staff, students, and visitors will regard any activation of a fire alarm as a

true fire emergency unless there has been previous notification of the fire alarm system being tested.

The person activating the fire alarm shall dial 911 from a cellular phone and advise the Dispatcher of the fire incident in the building.

All occupants will immediately evacuate the building utilizing the posted evacuation routes. Occupants may collect their valuables (purse, coat, etc.) if time permits and should close the door upon leaving. Any occupant who encounters a student or visitor should direct them to evacuate the building. Any occupant that encounters a physically disabled individual should assist that individual (if safe for them to do so) from the building or to the nearest stairwell landing and seek assistance from an emergency responder outside the building. Individuals with physical limitations that can't maneuver the stairs should shelter in the stairwell and have someone advise the first responders of their exact location. (see Appendix B) **DO NOT USE ELEVATORS.**

Only occupants trained to operate a fire extinguisher should attempt to extinguish the fire. Those who have not been trained shall immediately evacuate the building.

Only if the fire is very small, such as an early-stage fire, should those trained occupants attempt to extinguish the fire. If the fire is not contained, involves flammable solvents, is spreading rapidly, is partially hidden behind a wall or ceiling, cannot be reached from a standing position, or if it becomes difficult to breathe in the room, one should not attempt to extinguish the fire or cease the attempt to and immediately evacuate the building.

Once out of the building, all occupants should gather at the predetermined assembly areas for accountability. The Floor Leader will look for individuals in their area and try to determine if anyone is absent. If the Floor Leaders and their assistants are absent, the Building Emergency Coordinator will cover this role or designate someone to do this. No employee should leave the assembly area, either to re-enter the building or leave the campus, until advised to do so by the Building Emergency Coordinator.

The Building Emergency Coordinator will provide information to the Police Department, Greenville Fire Department or any other first responder on the scene. This information may include, but is not limited to:

- Location of the fire
- Name and Location of disabled individuals requiring evacuation assistance
- Status of the evacuation, personnel missing that may still be in the building
- Special hazards associated with the building

**DO NOT RE-ENTER THE BUILDING UNTIL FIRE OFFICIALS GIVE THE APPROVAL**



## B. Severe Weather

This section of the CEAP will be activated in the event of a severe weather situation. Inclement weather decisions and the related process follow USCSOMG-HR-2.00.

All decisions regarding closures or delayed opening for USC School of Medicine Greenville due to inclement weather are made in accordance with USC policy HR 1.18. The Executive Director for Finance and Operations monitors the South Carolina Emergency Management Division website for closure information for Greenville County government offices. These decisions are made separately from the University of South Carolina's main campus in Columbia and from the Greenville County School system.

Employees of the partner health system should refer to their policy and supervisor for inclement weather protocols.

Students, staff and faculty are urged to take all necessary precautions for travel during inclement weather, regardless of whether the event is formally declared to represent an Inclement Weather event. Faculty and staff may get approval from their supervisor to work remotely, if appropriate.

During their clinical rotations, Primary Care Accelerated Track (PCAT) and M3/M4 medical students' responsibilities to their patients and to their clinical teams require, as consistently as possible, their presence in the inpatient and outpatient environments. During times of inclement weather, students' clinical responsibilities must be balanced by concerns for safety. The final decision about travel to these inpatient and outpatient facilities should be made by students based upon their assessment of current travel conditions.

Additionally, any employee that becomes aware of a severe weather warning will immediately notify the Building Emergency Coordinator or assistant in the BEC's absence. The Building Emergency Coordinator will determine a notification method for communicating with employees for severe weather warnings. This may be accomplished through word-of-mouth, email, group text, or other means as determined to be appropriate.

Once occupants have been notified of a THUNDERSTORM WARNING, they should take no other steps than to ensure that they are prepared if conditions deteriorate.

Once occupants have been notified of a TORNADO WARNING, they should gather their valuables, if safe to do so, and move to an interior space without windows such as an interior stairwell and move to the lowest floor possible. Any occupant who encounters a student or visitor, should direct them to take appropriate actions. Any occupant that encounters a physically disabled individual should assist that individual to the Severe Weather Shelter areas (if safe to do so). Office doors should be closed upon exiting. Building occupants should take cover in the areas outlined in **Appendix A**. Everyone should try to

proceed to the lowest floor possible that they can reach safely (basement is normally the best option).

Floor Leaders will observe those in their shelter area to try to help determine if all employees are present. Floor Leaders will observe those in their shelter area to try to help determine if all employees are present. The Building Emergency Coordinator will assist in this role if any Floor Leaders are absent or designate someone to do this. If an employee is missing, the Building Emergency Coordinator will decide whether it is safe to search for the missing employee(s) and solicit someone to locate them and direct them to the shelter areas.

If injuries or building damage occurs, notify the Prisma Health Security Dispatch at 911 or 864-455-7931.

Once the warning period has expired the Building Emergency Coordinator will advise the Executive Director of Operations and Finance who will advise for occupants to return to the building or go home.

### C. Earthquake

This section of the CEAP will be activated when an earthquake occurs.

Earthquakes occur without warning. Some earthquakes are instantaneous tremors and others are significant sustained events followed by aftershocks. Once a significant earthquake begins, building occupants must take immediate actions and additional actions will be implemented after the quake stops.

An earthquake may cause noticeable shaking of the ground and building. This shaking will vary in intensity (i.e. mild tremors to shaking sufficient to destroy buildings).

When an earthquake occurs, occupants should immediately take cover. Suggested locations inside buildings that provide cover include:

- Drop, Cover, and Hold
- Getting under a desk or heavy table and hold on
- Kneeling in a corner of an interior wall with your head and face covered
- Standing in a doorway and bracing your hands and feet against each side
- Stay away from glass, bookshelves and wall hangings

Once the shaking has stopped, gather valuables and quickly leave the building. **DO NOT USE ELEVATORS.** Check for injuries to personnel in your area. Do not attempt to move seriously injured persons unless they are in immediate danger. Render first aid assistance if required.

All employees should gather at predetermined assembly areas.

Any occupant who encounters a student or visitor should direct them to take appropriate actions. Any occupant that encounters a physically disabled individual should assist that individual or take them to the nearest stairwell landing and seek assistance from an emergency responder outside the building. The Floor Leaders and/or Building Emergency Coordinator will engage with department heads to ensure proper head count of staff on site for the day.

Be prepared for aftershocks. Although smaller than the main shock, aftershocks cause additional damage and may bring already weakened structures down. Aftershocks can occur in the first hours, days, weeks, or even months after the quake. Follow the same procedures as for earthquakes.

If building occupants cannot be accounted for, the Building Emergency Coordinator may direct personnel to search for the missing people but instruct personnel **NOT TO RE-ENTER THE BUILDING.** The Building Emergency Coordinator should contact the Prisma Health Security Dispatch at 911 or 864-455-7931 for assistance.

The Emergency Management Team will consult with the Executive Policy Group and decide whether employees can return to their workstations or be dismissed

for the day. The Building Emergency Coordinator will give direction to employees based on that decision.

#### **D. Hazardous Materials**

This section of the CEAP will be activated when there is a spill or release of hazardous materials.

Hazardous material accidents can occur inside a building, on campus or in adjacent areas and could impact this building. When Prisma Health Security or Greenville County Law Enforcement obtains information concerning a hazardous material incident, proper notification will be made to those in the affected area. This may be accomplished by evacuating a building or area, through AppSpace.

Once building occupants become aware of a hazardous material incident, they should notify the Building Emergency Coordinator. The Building Emergency Coordinator will make notification to employees and advise building occupants to implement the emergency action plan.

There are two common strategies for protecting individuals during a hazardous material incident. The Building Emergency Coordinator and/or first responders, will notify the building occupants of which strategy should be implemented.

The first strategy is “Shelter in Place”. Everyone in the building would be required to stay in the building until the “All Clear” is given. Employees should take the following actions:

- Close all windows and doors
- Turn off heating/cooling systems (HVAC), if possible
- Move to designated shelter in place locations for further instructions
- Any occupant who encounters a student or visitor should direct them to take appropriate actions
- Any occupant that encounters a physically disabled individual should assist that individual, if safe for them to do so

The Building Emergency Coordinator will ensure that the actions outlined above are completed. The Building Emergency Coordinator and/or Floor Leaders will also conduct a roll call to ensure that all personnel are accounted for.

The Building Emergency Coordinator will communicate with Prisma Health Security and other first responders for additional updates and the “All Clear” declaration. The Building Emergency Coordinator should follow any instructions or guidance provided by first responders, EH&S, or other authorized personnel.

If personnel become ill or injured, the Building Emergency Coordinator or designee should contact Greenville County Emergency Services at 911, for medical assistance. If personnel become ill or injured, the Building Emergency Coordinator or designee should contact Greenville County Emergency Services at 911, for medical assistance.

The second strategy is “Evacuation”. The Building Emergency Coordinator will direct personnel to take appropriate action, including:

- Walk to the designated assembly area (consideration should be given to the type of hazard and environmental conditions – wind direction)

- Walk or drive away from the area using travel directions, if directed by first responders
- Any occupant who encounters a student or visitor should direct them to take appropriate actions
- Any occupant that encounters a physically disabled individual should assist that individual, if safe for them to do so

If building occupants cannot be accounted for, the Building Emergency Coordinator should contact Greenville County Emergency Services at 911.

The Building Emergency Coordinator will determine whether employees should return to their workstations or go home, after the “All Clear” notification has been made, and after consulting with Prisma Health Security EH&S, and first responders.

### **Small Spills/Release**

Small spills that do not endanger workers in the immediate area may be cleaned up by qualified laboratory personnel who have been trained and are properly equipped to handle the situation. Faculty and staff should consider the following items:

- The hazards of the chemical(s) involved
- The amount of the chemical(s) involved
- Spill locations
- Availability of spill cleanup materials or kits

### **Large Spills/Release**

If the spill is large, if the chemical is not easily identified, if the chemical is extremely hazardous or if there has been a fire, explosion or personal injury involved, then:

- Evacuate all personnel from the area
- If the entire building requires evacuation, activate the building fire alarm system and evacuate utilizing the fire evacuation procedure. The fire alarm will be used for evacuation.
- Report the incident to Greenville Emergency Services at 911, as well as to SCDES at 888-481-0125
- When placing an emergency call:
  - o Give your name
  - o Give your location
  - o Give the phone number you are using or can be reached at
  - o Describe the emergency along with any injuries
  - o Assist in “flagging down” emergency responders to provide additional information as requested

When safe for you to do so, efforts should be made to prevent others from entering the contaminated area.

## E. Utility Outage

This section of the CEAP should be activated in the event of a utility outage.

Employees could become aware of the utility outage by the absence of that utility or through communication from a utility provider, or other means.

The Building Emergency Coordinator or designee should contact the Prisma Health Engineering office to report any outage and obtain any available information.

While a power outage or interruption doesn't usually cause an emergency within a facility or injuries to employees, hazards may be created by these issues. The Building Emergency Coordinator in conjunction with the Department Chairperson will determine the appropriate course of action. The Building Emergency Coordinator and Department Chairperson should consider the following issues:

- Dangers from tripping and injuries due to lights being out
- Person(s) being trapped in elevators
- Dangers of extreme heat or cold on employees
- Difficulty in contacting responders if an emergency occurs while telephones are out
- Limited or inability to use cellular phones during a cellular outage
- Sanitation problems due to no water
- The loss or potential loss of research and/or experiments taking place

Unless a decision has been made by the Provost, the Building Emergency Coordinator and Department Chairperson will make a decision regarding the continuance of working in the building during a utility interruption. Any occupant who encounters a student or visitor should direct them to take appropriate actions. Any occupant that encounters a visitor or student that is physically disabled should assist those individuals.

If laboratory research or an experiment is underway during a utility interruption and the interruption will affect the research/experiment, the research/experiment should cease until the utility has been restored. Experiments, chemical processes and operating electric equipment should be stopped in a manner that would not cause additional problems. Those locations that routinely conduct research or experiments should have a "shut down" plan established prior to beginning the research or experiment, which considers the potential for a utility outage and the process for mitigation during an outage.

If anyone is trapped on an elevator, immediately call the Prisma Health Security at 864-455-7931 for assistance. If you are in the elevator, utilize the call button in the elevator to notify Prisma Health security dispatch and request assistance.

## F. Active Shooter/Workplace Violence

This section of the CEAP should be activated in the event of any type of workplace violence or active shooter.

**Note:** Identifying indicators of workplace violence before an actual incident occurs can help to prevent the incident from taking place. (see Appendix F) These indicators should be report to the Greenville Police Department at 911

Building occupants could become aware of a violent act by the sounds of an explosion, gunfire, scuffling, yelling/screaming, or by observation of events that could be intentional acts of violence. Occupants may become aware of such an event based on notification from the Building Emergency Coordinator, other faculty, staff or students, from first responders, The person(s) who become aware of these life-threatening acts should immediately seek safe shelter and call the Greenville Police Department at 911 or Prisma Health Security at 864-455-7931 .

The Building Emergency Coordinator should attempt to communicate to everyone in the building that a perpetrator of workplace violence is in the building. This may be done by a Carolina Alert notification, phone paging system, fire panel public address system (if building is equipped), word of mouth, and/or phone or email notification.

Different types of workplace violence require different actions:

- Explosion – If an explosion occurs, building occupants should leave the building using the same evacuation plan and procedures as they would for a fire.
- Threatening Phone Calls – If the facility receives a threatening phone call, the call receiver is to maintain an open line of communication with the caller for as long as possible. If possible, the call receiver is to complete the “Bomb Threat Caller Checklist” located in Appendix C. The Greenville Police Department is to be contacted as soon as possible by calling 911 If possible, the call receiver should have someone else call the Police Department while they are still on the phone with the threatening caller.
- Active Shooter / Gunfire – (**AVOID, DENY, DEFEND**) If you become aware of an active shooter or gunfire in the building, you should **AVOID** the threat by immediately trying to leave the building if safe to do so (moving to an exit that is in the opposite direction of the gunfire). If leaving is not possible, you should **DENY** the threat access to you by taking refuge in a room that can be locked. Using furniture and other items, you can barricade the door and windows to prevent access into your area. You should hide in a closet or behind a large piece of furniture so that you aren’t visible inside the room. **DO NOT UNLOCK THE DOOR FOR ANYONE.** If you can’t **AVOID** or **DENY** the threat access to you, your last option is to **DEFEND** yourself. Once the



situation has been resolved, a USC Police officer or other law enforcement officer will unlock the door and provide you with instructions.

- Physical Threat – If someone’s actions pose a physical threat to you, evacuate the area and report these actions to the Greenville Police Department at 911 , and then to your supervisor.
- Toxic or Irritant Gas – Immediately evacuate the building using the same evacuation plan and procedures as they would for a fire.
- Hostage Situation – Immediately vacate the area or seek safe shelter. Take no chances to endanger the life of the hostage. Contact the Greenville Police Department at 911 If someone is hurt, tell them to vacate the area. If they are not mobile, advise the Greenville Police Department.

Any occupant who encounters a student or visitor should direct them to take appropriate actions. Any occupant that encounters a visitor or student that is physically disabled should assist those individuals if it is safe for them to do so.

The Building Emergency Coordinator, Department Chair, and the Greenville Police Department will coordinate the building’s security once the Incident Commander releases the building. This group will also determine when building occupants can return to work and the Building Emergency Coordinator can communicate that information.

The Building Emergency Coordinator and/or Department Chairperson may be asked to participate in a post-incident critique regarding the emergency. This critique does not replace the building critique or After-Action Report that should be completed for any incident or emergency in which the CEAP is activated and/or utilized.

## G. Bomb Threat

This section of the **CEAP** should be activated in the event of a Bomb Threat/Explosion.

A person could become aware of a bomb threat by either a telephone call, email, letter, text message or other forms of communication. The person receiving the threat should immediately call the USC Greenville Police Department at 911

If the threat is made by telephone, learn as much information as possible about the bomb and its location, such as:

- Exact location of the bomb?
- When is the bomb going to explode?
- What kind of bomb is it?
- Why was it placed?
- Who is calling/speaking?

(see Appendix C for the Bomb Threat Caller Checklist)

The person should then notify his or her supervisor, the Building Emergency Coordinator and/or the Department Chairperson as quickly as possible.

A decision will be made by the Building Emergency Coordinator, Department Chairperson and the Greenville Police Department to determine if a building evacuation is warranted. If it is warranted, the evacuation should take place using the same evacuation plan and procedures as they would for a fire.

Occupants should not touch any suspicious or unfamiliar objects. Occupants should wait for the police personnel to arrive on the scene and should not conduct any type of search unless directed to by police personnel.

The Building Emergency Coordinator and/or Department Chairperson may be asked to participate in a post-incident critique regarding the emergency.

If an explosion does occur, occupants should leave the building using the same evacuation plan and procedures as they would for a fire.

## H. Suspicious Package/Item

Biological or chemical threats targeting individuals or departments can be screened to limit the exposure and danger to others. Following the recommendations listed below will promote the highest level of safety while minimizing the disruption associated with these incidents. Common features of suspect letters/packages are:

- Restrictive markings such as “Confidential”, “Personal”, etc.
- Excessive weight and/or feel of a powdery or foreign substance
- Foreign post marks and/or writing
- Liquid leaking from package
- No return addresses
- Handwritten or poorly typed address
- Misspelling of common words
- Source of the letter/package is not recognized by recipient/addressee

If you receive a letter or note threatening biological contamination (i.e. Anthrax) or other suspect substances:

- Relax and remain calm – Although any threatened use of a biological agent must be treated as though it is real, experience has demonstrated that these are likely to be a hoax. If the suspected biological agent is reported as anthrax, be assured that it is NOT generally contagious (i.e., spread from person to person) and that treatment is available and effective if administered before the onset of symptoms.
- DO NOT open the letter or package
- Call the Greenville Police Department at 911 or Prisma Health Security at 864-455-7931
- Remain at the site until police arrive with instructions. You do not have to remain with the package or letter but ensure that you stay near the building and let the police know where you can be located when they arrive. First responders and healthcare responders can evaluate the risk to those in the room at the time of potential exposure, as well as any impact on the remainder of the building.

If you inadvertently open a suspect package/letter or it is leaking (liquid or unknown substance):

- IMMEDIATELY set the item down gently at the location where it was opened.
- Contact the Greenville Police Department at 911
- All potentially exposed persons should wash exposed skin surfaces with soap and water. Turn off any fans, air conditioners or heaters if possible
- Return to an area within the building adjacent to the initial exposure and wait for the police (for example, a hallway outside of the room)
- DO NOT allow others into the area. If anyone enters the area, they should stay in the area until instructed to leave by police or other first responder
- First responders and healthcare responders can evaluate the risk to those in the room at the time of potential exposure, as well as any impact on the

remainder of the building. Based upon that risk assessment, further emergency measures may be implemented as necessary. If the risk is found to be minimal, other areas of the facility will not be disrupted and any necessary actions to return the affected area to normal activity will begin as soon as possible.

What you SHOULD NOT DO:

- Do Not pass the letter or package to others to examine
- Do Not touch, smell, taste or try to analyze the substance
- Do Not disturb any contents in the letter or package. Handling the letter or package may only spread the substance inside and increase the chances of it getting into the air.
- Do Not ignore the threat, it must be treated as real until properly evaluated
- Do Not leave the building until instructed to do so

If you have further questions, please contact Environmental Health and Safety at 888-481-0125 or the Greenville Police Department.

## I. Medical Emergency

Implement the CEAP for Medical Emergencies for any injury or illness that requires more than simple first aid.

Immediately contact Emergency Services at 911 and report the emergency.

When reporting the emergency, provide the following information:

- Type of emergency
- Location of the victim
- Condition of the victim
- Any dangerous conditions
- Any additional information required by the call taker (dispatcher)

Comfort but do not move the victim. Is there an AED or first aid kit in the building that may be useful based on the injury?

Avoid contact with blood or body fluids.

Have someone standby outside the building to “flag down” EMS and first responders when they reach the vicinity of the building. Provide them with the location and easiest route to the victim.

Once the victim has been cared for and is transported, normal worker injury reporting procedures should be followed.

### Biological Outbreak/Epidemic/Pandemic

In the event of a locally or nationally recognized pandemic, the USC School of Medicine Greenville and health system partner leadership will work with appropriate local, state, and federal authorities to determine the appropriate actions necessary to ensure the safety of the students, faculty, staff and visitors of the USC School of Medicine Greenville.

- The Dean and Dean’s Cabinet in conjunction with local, State, and federal guidance directives will determine level of response which may be regular business activities to cancellation of classes, clerkships, meetings, and other student activities.
- Essential staffing will be predicated on the ongoing circumstances and be determined by the Dean, Senior Associate Dean for Academic Affairs, Associate Dean for Student Affairs, and Executive Director for Operations and Finance.
- Messaging to students, staff, and faculty will be by routine mechanisms of communication by the Marketing and Communications Manager.
- Medical school administration will be represented on the Hospital Incident Management Team when activated.

#### **IV. After the Emergency**

Once the emergency is over and the building has been returned to the occupants, the Building Emergency Coordinator and Executive Director for Finance and Business Operations will determine if the building occupants should return to work or be released. If they are released, employees will be advised when to return to work.

The Building Emergency Coordinator and/or the Executive Director for Finance and Business Operations , with any other personnel who played a critical role in the incident (as deemed by BEC and/or Executive Director for Finance and Business Operations ) will participate in a post-incident critique regarding the emergency. This critique is referred to as an After-Action Review (AAR). The AAR should be documented and should include but is not limited to, a description of the incident, what actions were taken and by who, what worked well, areas for improvement, and an improvement plan. Updates and plan changes will be made as needed and building occupants will be provided with a revised plan.

The Building Emergency Coordinator will contact the University's Risk Management Office at 777-2828 regarding any injury caused by the incident. In the event an employee is injured, normal worker injury reporting procedures should be followed.

The Building Emergency Coordinator will also contact Prisma Health Facilities regarding any property damage caused by the incident. If the property damage impacts class operations, the University must be informed immediately to address potential disruptions.

#### **V. Review and Training**

##### **A. Review and Exercise**

On an annual basis, it is recommended that each department exercise a portion of their department specific plan included in the CEAP. These activities may include a fire drill, chemical spill drill, bomb threat drill, etc. Additionally, the CEAP should be reviewed at least on an annual basis to ensure building emergency coordinators and evacuation coordinators information is current.

New employees must be informed of the CEAP. It is recommended that this be part of their orientation process. This initial plan and all significant revisions to the plan should be routed to all personnel. The faculty and staff should be reminded of the plan as necessary (at least annually) and encouraged to discuss with their research groups, students, and visitors.

##### **B. Training**

Upon implementation of the CEAP and periodically thereafter, all employees must be informed of the CEAP and should attend training. The Building Emergency Coordinator (BEC) is responsible for employee education and can coordinate training and annual testing of this plan. Employees should be told where the plan is kept and copies distributed to those who want one.

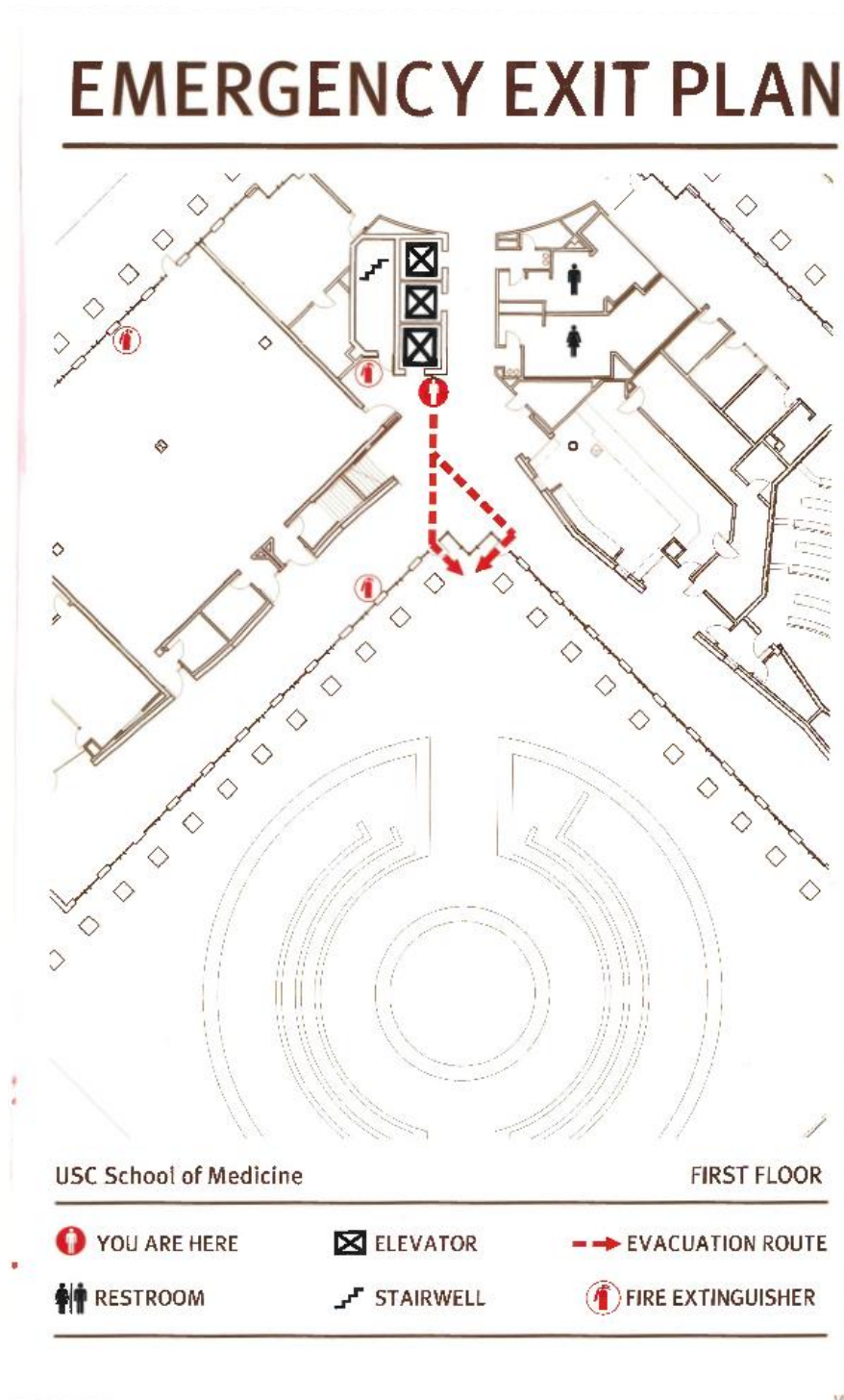
### **C. Documentation**

It is important to document the above listed information for record keeping purposes and for accountability. The annual review, along with any changes or updates should be maintained with this plan. A training log should also be maintained and should document new employee training, as well as annual training and exercise information.

**VI. Evacuation Planning**

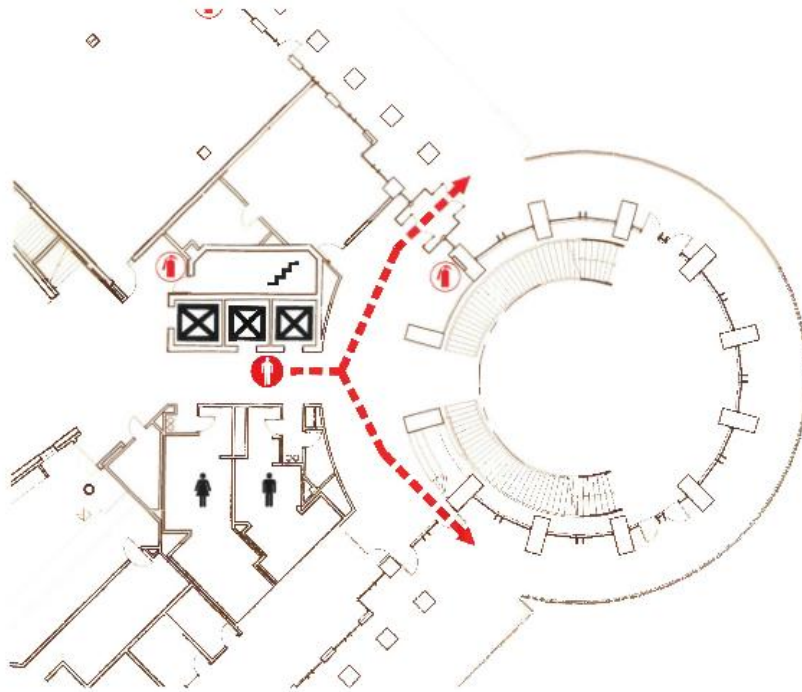
**A. Evacuation Maps with Routes**

**i. Health Sciences Education Building**





# EMERGENCY EXIT PLAN



USC School of Medicine

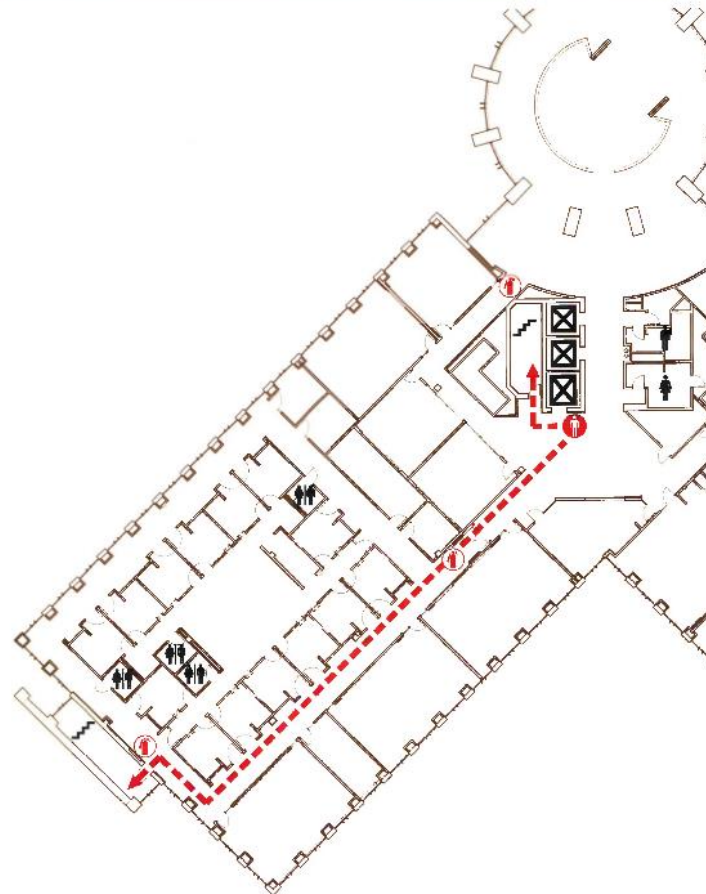
FIRST FLOOR

- |              |           |                   |
|--------------|-----------|-------------------|
| YOU ARE HERE | ELEVATOR  | EVACUATION ROUTE  |
| RESTROOM     | STAIRWELL | FIRE EXTINGUISHER |

**IN CASE OF FIRE,  
USE STAIR FOR EXIT  
DO NOT USE ELEVATOR**

320

# EMERGENCY EXIT PLAN



USC School of Medicine SECOND FLOOR

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|              |           |                   |
|--------------|-----------|-------------------|
| YOU ARE HERE | ELEVATOR  | EVACUATION ROUTE  |
| RESTROOM     | STAIRWELL | FIRE EXTINGUISHER |

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E.011

# EMERGENCY EXIT PLAN



USC School of Medicine SECOND FLOOR

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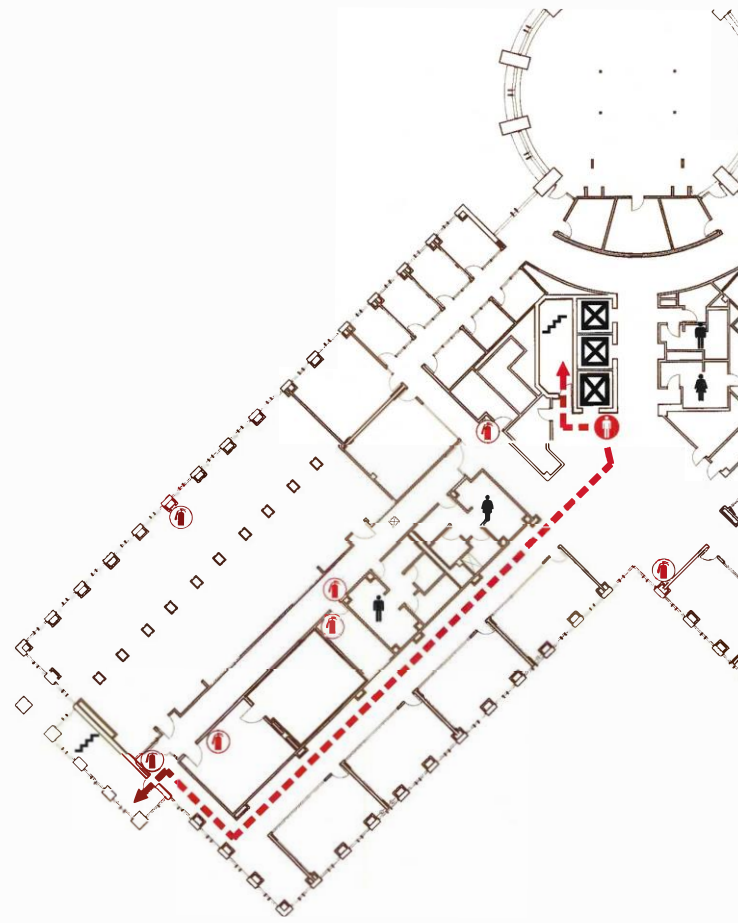
|              |           |                   |
|--------------|-----------|-------------------|
| YOU ARE HERE | ELEVATOR  | EVACUATION ROUTE  |
| RESTROOM     | STAIRWELL | FIRE EXTINGUISHER |

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**IN CASE OF FIRE,  
USE STAIR FOR EXIT  
DO NOT USE ELEVATOR**

2.CC1

# EMERGENCY EXIT PLAN



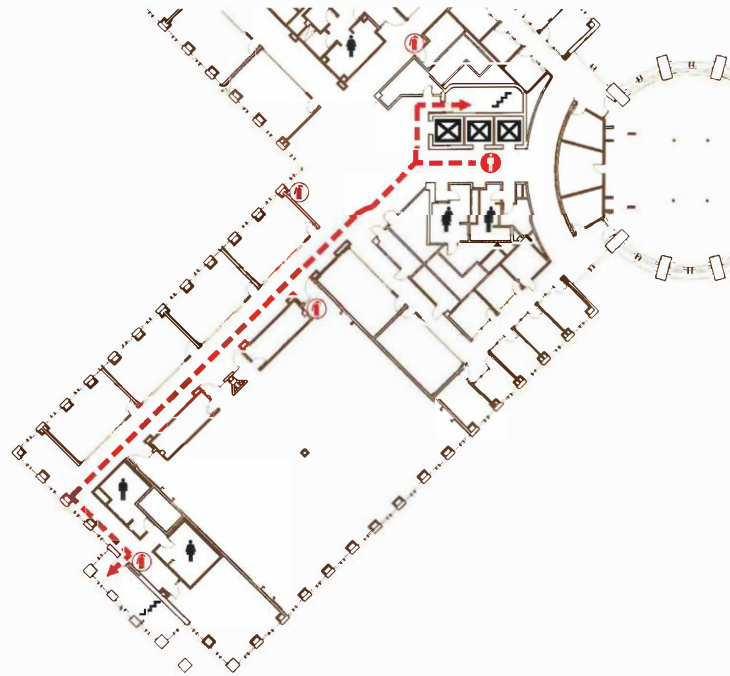
USC School of Medicine

THIRD FLOOR

- |              |           |                   |
|--------------|-----------|-------------------|
| YOU ARE HERE | ELEVATOR  | EVACUATION ROUTE  |
| RESTROOM     | STAIRWELL | FIRE EXTINGUISHER |

3.009

# EMERGENCY EXIT PLAN



USC School of Medicine

THIRD FLOOR

- |              |           |                   |
|--------------|-----------|-------------------|
| YOU ARE HERE | ELEVATOR  | EVACUATION ROUTE  |
| RESTROOM     | STAIRWELL | FIRE EXTINGUISHER |

**IN CASE OF FIRE,  
USE STAIR FOR EXIT  
DO NOT USE ELEVATOR**

3.001

ii. Health Sciences Administration Building

# EMERGENCY EXIT PLAN



701 GROVE ROAD

 YOU ARE HERE

 PRIMARY EVACUATION ROUTE

## IN CASE OF EMERGENCY DIAL 911

**B. Assembly Areas**

- a. The USC School of Medicine Greenville designated evacuation site is the grass area between the medical school and HSAB (1. on map below).
- b. The HSAB designated evacuation site is the grass area in front of the building (2. On map below).

**NOTE:** All individuals should move to the area of the evacuation site that is furthest from the impacted area. Please DO NOT gather near the emergency.



**Appendix A: Severe Weather Shelter Locations****1. Tornado****a. Watch****i. Tornado possible**

- 1. Be prepared to receive further instructions from the leadership team.**

**b. Warning****i. Tornado sighted or indicated by radar**

- 1. All faculty, staff, and students must seek shelter and will gather in the southwest corner of the P2 Parking deck.**
- 2. Remain sheltered until the all-clear is issued.**

**ii. FTL will ensure all occupants on their assigned floor have appropriately sheltered.****2. Hurricane****a. Watch****i. Issued 48 hours in advance.****ii. Sustained winds > 74 mph, hurricane possible.**

- 1. Be prepared to receive further instructions from the leadership team.**
- 2. Continue to monitor local TV and radio stations for updates and instructions.**

**b. Warning****i. Issued 36 hours in advance.****ii. Sustained winds  $\geq$  74 mph, hurricane expected.**

- 1. Be prepared to receive further instructions from the leadership team.**
- 2. Make plans to evacuate.**
- 3. Winter storm**

**a. Watch****i. Favorable conditions for a winter storm that may impact life or property**

- 1. Be prepared to receive further instructions from the leadership team.**
- 2. Continue to monitor local TV and radio stations for updates and instructions.**

**b. Winter weather advisory****i. Snow 3-5 ft/12 hours, or sleet <  $\frac{1}{2}$  inch, or blowing snow**



1. **Be prepared to receive further instructions from the leadership team.**
  2. **Continue to monitor local TV and radio stations for updates and instructions.**
- c. Freezing rain advisory**
- i. **Ice accumulation < ¼ inch**
    1. **Be prepared to receive further instructions from the leadership team.**
    2. **Continue to monitor local TV and radio stations for updates and instructions.**
- d. Winter storm warning**
- i. **Snow 6 in/12 hours, or sleet > ½ inch**
    1. **Be prepared to receive further instructions from the leadership team.**
    2. **Continue to monitor local TV and radio stations for updates and instructions.**
- e. Ice storm warning**
- i. **Ice accumulation**
    1. **Be prepared to receive further instructions from the leadership team.**
    2. **Continue to monitor local TV and radio stations for updates and instructions.**

## **Appendix B: Providing Assistance for Special Needs**

### **Evacuation for persons with special needs**

Appropriate evacuation procedures should be prearranged for persons with special needs. It is important that each Floor Leader know which persons in their area have special needs and communicate their evacuation procedures with them.

Individuals with unobserved disabilities or impairments may or may not self-identify before an emergency. Such conditions may include arthritis, a cardiac condition, chronic back problems, asthma, a learning disability, etc. These persons may need additional help during an emergency. Request that all persons who feel they may need special assistance notify appropriate key departmental persons (Floor Leader or Building Emergency Coordinator) so that arrangements can be made in advance to meet their needs.

It is not recommended that an individual cause undue harm to themselves or place themselves in a dangerous situation, to assist a special needs individual. If an individual is willing and able to assist persons with special needs, please first try to relocate the individual to the central stairwell behind the elevators for first responders to find them.

### **Visually Impaired Persons**

Tell the person the nature of the emergency and offer your arm for guidance. This is the preferred method when acting as a "sighted guide."

As you walk, tell the person where you are and where the obstacles are located.

When you reach safety, orient the person to the location and ask if further assistance is needed.

### **Hearing Impaired Persons**

Most campus buildings are equipped with audible fire alarms which should be activated during an emergency. However, hearing impaired individuals may not receive the audible signal. Use an alternative warning system. Several methods can be used, including:

- Write a note to tell the person of the situation, the nearest evacuation route, and where to meet outside.
- Turn the light switch on and off to gain their attention and then indicate through gestures or writing what is happening and what to do. Do not use the light switch technique if you smell natural gas in the area.
- Many of the fire alarms on campus are equipped with a flashing strobe light that will activate when the alarm sounds. If there is a fire alarm in your area, direct the individual's attention to the alarm so that they can see what is taking place.

### **Persons Using Crutches, Canes, or Walkers**

In evacuations, these individuals should be treated as if they were injured. Carrying options include using a two-person, lock-arm position or having the individual sit on a sturdy chair (preferably with arms) which is then lifted and carried.

Based on the individual's capabilities, some may simply need assistance in balancing while they maneuver towards the exit. This can be done by holding the person's arm with your hands to provide support, or by allowing the individual to hold your arm or shoulder.

### **People Who Use Wheelchairs (Non-ambulatory)**

Most non-ambulatory persons will be able to exit safely without assistance if they are on the ground floor.

If you are assisting a non-ambulatory person, be aware that some people have minimal ability to move and lifting them may be dangerous to their well-being. Some individuals have very little upper trunk and neck strength.

Frequently, non-ambulatory persons have respiratory complications. Remove them from smoke and vapors immediately. Some people who use wheelchairs may have electrical respirators. Give them priority assistance, as their ability to breathe may be seriously in danger.

The needs and preferences of non-ambulatory individuals vary. Always consult with the person as to his or her preference regarding:

- Ways of being moved
- The number of people necessary for assistance. If carrying a person more than three flights of stairs, a relay team may be needed.
- Whether to extend or move extremities when lifting because of pain, braces, etc.
- Whether a seat cushion or pad should be brought along
- Being carried forward or backward on stairs
- Aftercare, if removed from the wheelchair
- Remember to check the intended route for obstructions before transporting the individual. Delegate others to bring the wheelchair. When the wheelchair is left behind, remove it from the stairwell and place it so it does not obstruct the egress of others. Reunite the person with their wheelchair as soon as it is safe to do so.

Wheelchairs have many movable or weak parts which were not constructed to withstand the stress of lifting (i.e., the seat bar, foot plates, wheels, movable arm rests, etc.) If the chair is battery-powered, it may be beneficial to remove the batteries before moving it. Make sure the footrests are locked, and the motor is off. If a seatbelt is available, secure the person in the chair.

## Appendix C: Bomb Threat Caller Checklist (<https://www.dhs.gov/publication/dhs-bomb-threat-checklist>)

### BOMB THREAT PROCEDURES

*This quick reference checklist is designed to help employees and decision makers of commercial facilities, schools, etc. respond to a bomb threat in an orderly and controlled manner with the first responders and other stakeholders.*

Most bomb threats are received by phone. Bomb threats are serious until proven otherwise. Act quickly, but remain calm and obtain information with the checklist on the reverse of this card.

**If a bomb threat is received by phone:**

1. Remain calm. Keep the caller on the line for as long as possible. **DO NOT HANG UP**, even if the caller does.
2. Listen carefully. Be polite and show interest.
3. Try to keep the caller talking to learn more information.
4. If possible, write a note to a colleague to call the authorities or, as soon as the caller hangs up, immediately notify them yourself.
5. If your phone has a display, copy the number and/or letters on the window display.
6. Complete the Bomb Threat Checklist immediately. Write down as much detail as you can remember. Try to get exact words.
7. Immediately upon termination of call, **DO NOT HANG UP**, but from a different phone, contact authorities immediately with information and await instructions.

**If a bomb threat is received by handwritten note:**

- Call \_\_\_\_\_
- Handle note as minimally as possible.

**If a bomb threat is received by e-mail:**

- Call \_\_\_\_\_
- Do not delete the message.

**Signs of a suspicious package:**

- No return address
- Excessive postage
- Stains
- Strange odor
- Strange sounds
- Unexpected delivery
- Poorly handwritten
- Misspelled words
- Incorrect titles
- Foreign postage
- Restrictive notes

**\* Refer to your local bomb threat emergency response plan for evacuation criteria**

**DO NOT:**

- Use two-way radios or cellular phone. Radio signals have the potential to detonate a bomb.
- Touch or move a suspicious package.

**WHO TO CONTACT (Select One)**

- **911**
- **Follow your local guidelines**

For more information about this form contact the DHS Office for Bombing Prevention at [OBP@dhs.gov](mailto:OBP@dhs.gov)



**Homeland Security**

2014

### BOMB THREAT CHECKLIST

DATE:

TIME:

TIME CALLER HUNG UP:

PHONE NUMBER WHERE CALL RECEIVED:

#### Ask Caller:

- Where is the bomb located? (building, floor, room, etc.) \_\_\_\_\_
- When will it go off? \_\_\_\_\_
- What does it look like? \_\_\_\_\_
- What kind of bomb is it? \_\_\_\_\_
- What will make it explode? \_\_\_\_\_
- Did you place the bomb? Yes No \_\_\_\_\_
- Why? \_\_\_\_\_
- What is your name? \_\_\_\_\_

#### Exact Words of Threat:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### Information About Caller:

- Where is the caller located? (background/level of noise) \_\_\_\_\_
- Estimated age: \_\_\_\_\_
- Is voice familiar? If so, who does it sound like? \_\_\_\_\_
- Other points: \_\_\_\_\_

| Caller's Voice                           | Background Sounds                          | Threat Language                        |
|--|--|--|
| <input type="checkbox"/> Female          | <input type="checkbox"/> Animal noises     | <input type="checkbox"/> Incoherent    |
| <input type="checkbox"/> Male            | <input type="checkbox"/> House noises      | <input type="checkbox"/> Message read  |
| <input type="checkbox"/> Accent          | <input type="checkbox"/> Kitchen noises    | <input type="checkbox"/> Taped message |
| <input type="checkbox"/> Angry           | <input type="checkbox"/> Street noises     | <input type="checkbox"/> Irrational    |
| <input type="checkbox"/> Calm            | <input type="checkbox"/> Booth             | <input type="checkbox"/> Profane       |
| <input type="checkbox"/> Clearing throat | <input type="checkbox"/> PA system         | <input type="checkbox"/> Well-spoken   |
| <input type="checkbox"/> Coughing        | <input type="checkbox"/> Conversation      |  |
| <input type="checkbox"/> Cracking voice  | <input type="checkbox"/> Music             |  |
| <input type="checkbox"/> Crying          | <input type="checkbox"/> Motor             |  |
| <input type="checkbox"/> Deep            | <input type="checkbox"/> Clear             |  |
| <input type="checkbox"/> Deep breathing  | <input type="checkbox"/> Static            |  |
| <input type="checkbox"/> Disguised       | <input type="checkbox"/> Office machinery  |  |
| <input type="checkbox"/> Distinct        | <input type="checkbox"/> Factory machinery |  |
| <input type="checkbox"/> Exhited         | <input type="checkbox"/> Local             |  |
| <input type="checkbox"/> Laughter        | <input type="checkbox"/> Long Distance     |  |
| <input type="checkbox"/> Lip             |  |  |
| <input type="checkbox"/> Loud            | <b>Other Information:</b>                  |  |
| <input type="checkbox"/> Nasal           | _____                                      |  |
| <input type="checkbox"/> Normal          | _____                                      |  |
| <input type="checkbox"/> Ragged          | _____                                      |  |
| <input type="checkbox"/> Rapid           | _____                                      |  |
| <input type="checkbox"/> Raspy           | _____                                      |  |
| <input type="checkbox"/> Slow            | _____                                      |  |
| <input type="checkbox"/> Slurred         | _____                                      |  |
| <input type="checkbox"/> Soft            | _____                                      |  |
| <input type="checkbox"/> Stutter         | _____                                      |  |

**Appendix D: Student Care and Outreach Team****Purpose of the Student Care and Outreach Team**

Because of growing national trends on college campuses of mental health issues and the increase in hospitalizations and deaths due to alcohol consumption, the University of South Carolina created the Student Care and Outreach Team. To promote the safety and health of its students, the Student Care and Outreach Team addresses student behaviors that are disruptive and may include mental health and/or safety issues. [Click here to access the link.](#)

The Student Care and Outreach Team consists of a group of qualified and dedicated USC professionals whose mission is to:

- Balance the individual needs of the student and those of the greater campus community
- Provide a structured positive method for addressing student behaviors that impact the University community and may involve mental health and/or safety issues
- Manage each case individually
- Initiate appropriate intervention without resorting to punitive measures
- Eliminate “fragmented care”

**What to look for:****Emotional signs**

- Inappropriate emotional outbursts (unprovoked anger or hostility, sobbing)
- Exaggerated personality traits; more withdrawn or more animated than usual
- Expressions of hopelessness, fear or worthlessness
- Direct statements indicating severe distress
- Perceived and real threats about harming self or others
- Other students being “on watch” for a patient

**Physical signs**

- A dramatic change in energy level (either direction)
- Worrisome changes in hygiene or personal appearance
- Significant changes in weight
- Frequent state of intoxication or abuse of prescription drugs
- Noticeable cuts or burns on student

**Academic signs**

- Deterioration in quality/quantity of work
- A negative change in classroom or research performance (e.g., drop in grades)
- Missed assignments or exams
- Repeated absences from class or from research lab
- Disorganized or erratic performance
- Student sends frequent, lengthy, “ranting” or threatening types of emails to professor/TA

- Continual seeking of special provisions (e.g., late papers, extensions, postponed exams, and projects)

**Categories:**

- **Self-injurious behavior**
  - Suicidal ideation
  - Suicide attempt
  - Self-injurious behavior causing significant disruption
- **Erratic Behavior**
  - Disruptive to the mission of the university
  - Possible threat to self or others

**Making a report:**

[https://cm.maxient.com/reportingform.php?UnivofSouthCarolina&layout\\_id=3](https://cm.maxient.com/reportingform.php?UnivofSouthCarolina&layout_id=3)

Student Full Name (First, Middle, Last)

- Student E-mail Address
- Reporter's name and contact info
- Date, time, location of incident
- Incident Description
- Effects of behavior
- Attempts to address behavior and student's response
- Purpose of report "concern; making aware but not necessarily requesting action; providing update"

**What Happens Next:**

- Team members receive an email with information submitted
- Research of the student
- Communications via email, phone, or in person amongst team members
- Recommendation made (conduct referral, soft intervention, required assessment, or emergency response)
- Team members have a weekly meeting for follow up and to discuss progress

**Team Make-up:**

- Student Conduct Associate Dean(s)
- Behavioral Health Consultant
- Law Enforcement
- **Consult with**
  - Student Disability Services Columbia
  - Prisma contact
  - General Counsel Columbia

## Appendix E: Indicators of Violent Behavior

As reported by multiple national media sources, the United States has experienced a recent increase in active shooter and workplace violence incidents. The Emergency Management and Response-Information Sharing and Analysis Center <http://www.usfa.dhs.gov/emr-isac> observed that these incidents have been as dangerous to emergency responders as they are to innocent bystanders.

Because of the obvious risks to personnel from first responder departments and agencies, the EMR-ISAC examined that some early warning indicators of violent behavior in the workplace, prepared by the FBI's National Center for the Analysis of Violent Crime <http://www.fbi.gov/hq/isd/cirg/ncavc.htm> and summarized as follows:

- Expressing direct or veiled threats of harm
- Engaging in intimidating, belligerent, harassing, bullying, or other aggressive behaviors
- Experiencing numerous conflicts with supervisors and other employees
- Bringing a weapon and/or brandishing a weapon in the workplace
- Making inappropriate references to guns or a fascination with weapons
- Showing blatant interest with incidents of workplace violence
- Indicating approval of the use of violence to solve problems
- Identifying with the perpetrators of workplace homicides
- Demonstrating desperation over professional or personal problems
- Articulating thoughts about the possibility of suicide
- Exhibiting extreme changes in attitude and/or behavior
- Displaying drug and/or alcohol abuse, particularly where abuse did not previously exist

The FBI explains that each of these indicators could be a clear sign that something is wrong. They caution that none should be ignored. The Bureau further asserts "By identifying the problem and dealing with it appropriately, managers and coworkers may be able to prevent violence from happening."

For students who may be demonstrating indicators like those listed above, or whom you believe may be exhibiting mental health issues, drug or alcohol related issues, etc. you are strongly encouraged to complete a Student Care and Outreach Team referral by completing an incident report found at [https://www.sc.edu/about/offices\\_and\\_divisions/student\\_affairs/our\\_initiatives/health\\_and\\_well-being/student\\_care\\_and\\_outreach\\_team/](https://www.sc.edu/about/offices_and_divisions/student_affairs/our_initiatives/health_and_well-being/student_care_and_outreach_team/) or by calling Prisma Health Security Dispatch at 864-455-7931.

For all emergencies or if there is a faculty member, staff member, or visitor who is demonstrating indicators like those listed above, or whom you believe may be exhibiting mental health issues, drug or alcohol related issues, etc. call 911.