



MINISTRY OF HEALTH SERVICES
POLICY COMMUNIQUÉ

COMMUNIQUÉ

TO: Chief Executive Officers, Health Authorities

TRANSMITTAL DATE: January 21, 2011

COMMUNIQUÉ NUMBER: 2011-04

CLIFF NUMBER: 867081

SUBJECT: Standardized Hospital Colour Codes

DETAILS: Cover Letter – 867428
Standardized Hospital Colour Code Policy

EFFECTIVE DATE: February 1, 2011

MINISTRY CONTACT: John Lavery, Executive Director, Emergency Management Unit

John Dyble
Deputy Minister
Ministry of Health Services



JAN 21 2011

867428

To all Health Authority Chief Executive Officers

Dear Chief Executive Officer:

I am pleased to provide you with the enclosed policy communiqué: Standardized Hospital Colour Codes.

A subcommittee of the BC Health Emergency Management Council was formed in 2009 to review and make recommendations on a standardized set of colour codes to be used by hospitals in British Columbia. This policy, that was presented to and approved by Health Operations Committee on December 3, 2010, contains a clear description of the standardized colour codes for hospitals operated by BC's health authorities.

This policy is effective February 1, 2011, with implementation to be completed by March 31, 2012. The policy will be reviewed and updated under the direction of HEMC on an annual basis.

I encourage you to circulate this policy to appropriate staff within your organization.

To improve accessibility by health authority staff and allow for timely policy updates, The Standardized Hospital Colour Codes will be posted on the Ministry's Consolidated Policy Directory via the following link: <http://admin.moh.hnet.bc.ca/libinfo/access/cpd/help.html>. Due to the constantly evolving nature of health services, health authority staff should access this site to ensure that they are viewing the most current policy.

If you have any questions, please do not hesitate to contact John Lavery, Executive Director, Emergency Management Unit, Ministry of Health Services by email at: john.lavery@gov.bc.ca.

Yours truly,

John Dyble
Deputy Minister

pc: Assistant Deputy Ministers, Ministry of Health Services

Enclosure

Ministry of Health Services Policy Directive

Title	Standardized Hospital Colour Codes
Division	Chief Operating Officer
Branch	Emergency Management Unit
Effective Date	February 1 st , 2011
Last Review Date	N/A
Next Review Date	April 1 st , 2012
Program Contact	John Lavery, Executive Director, Emergency Management Unit

Rationale

Hospital Colour Codes are used in hospitals worldwide to denote to staff various kinds of emergency situations. The use of codes is intended to convey essential information quickly and with a minimum of misunderstanding to appropriate staff, while minimizing stress and preventing panic among patients and visitors to the hospital. They enable a concise means of ensuring staff receive a common message, signaling the need for an urgent response without unnecessarily alerting or alarming patients, residents, or visitors.

A number of jurisdictions have moved towards standardization of codes. The need for codes to be uniform is underscored by the mobility of the health care workforce. Staff who are reassigned to a new facility or site or who must practice in more than one facility need to be immediately familiar with a code identifying the nature of a given crisis and their expected response.

A subcommittee of the BC Health Emergency Management Council, with representatives from Health Authorities and the Ministry of Health Services, was formed in 2009 to standardize the use of hospital colour codes in British Columbia.

Policy Statement(s)

To ensure the standard use of hospital colour codes in British Columbia, Hospitals will use the following codes, where applicable:

- Code Red: Fire
- Code Blue: Cardiac Arrest
- Code Orange: Disaster or Mass Casualties
- Code Green: Evacuation
- Code Yellow: Missing Patient
- Code Amber: Missing or Abducted Infant or Child
- Code Black: Bomb Threat
- Code White: Aggression
- Code Brown: Hazardous Spill
- Code Grey: System Failure
- Code Pink: Pediatric Emergency and/or Obstetrical Emergency

Scope

This policy applies to all inpatient facilities, clinics attached to acute care hospitals, and should be considered for administrative and corporate support staff that work or spend significant time in acute care settings, operated by the Health Authorities in British Columbia.

The following provisions also apply to the use of hospital colour codes in British Columbia:

- Hospitals are not required to use all of the standard colour codes. For example, hospitals without a pediatric program are not required to use Code Amber.
- The standardized Emergency codes relate to the type of emergency, but can be suffixed where necessary with such terms as “alert”, “Code Green Stat”; “Code Orange CBRNE”; “Code Blue Medical Emergency”.
- Code Grey: System Failure should always include a suffix to describe the impacted system. E.g. “Code Grey – Elevators”; “Code Grey – Paging”; “Code Grey – Air Exclusion”, etc.
- Code Pink can be used for Pediatric Emergencies and/or Obstetrical Emergencies. A suffix should be used when calling this code (e.g. “Code Pink - Peds” or “Code Pink - OB”)
- Individual departmental emergency procedures do not warrant a colour code.
- Lockdown of a facility is a procedure and should not be called a code.
- Code Orange should be used for mass casualties or disasters only and not for overcapacity or gridlock in an Emergency Department.
- Colour codes other than those specified in this policy statement should not be used.

Emergency Management is identified as the custodian of the codes, but is not the owner. Code Blue for example is a clinical response, Code Yellow, security. It is recommended that individual code procedures be developed and reviewed by those who have response roles on a yearly base. It is further recommended that code procedures be developed by committees comprised of those who hold the response responsibilities.

Legal Framework

Community Care and Assisted Living Act:

<http://www.bclaws.ca/default.html>

Emergency Program Act:

<http://www.bclaws.ca/default.html>

Emergency Program Management Regulation:

<http://www.bclaws.ca/default.html>

Health Authorities Act:

<http://www.bclaws.ca/default.html>

Hospital Act:

<http://www.bclaws.ca/default.html>

Accreditation Canada, Effective Organizations

Accountability

The health system as a whole is ultimately accountable to citizens for ensuring that it is capable of planning for, responding to and recovering from the impacts of emergencies. The BC Health Emergency Management Council (HEMC) provides emergency management oversight and leadership across the provincial health system. The purpose of the council is to provide recommendations and identify short and long-term actions and goals with the accountability required to achieve best practices of a comprehensive, integrated and coordinated health emergency management program.

Hospital or Health Authority requests for new hospital colour codes must be submitted to HEMC for approval.

Implementation

By March 31, 2012, all Health Authorities will have implemented the ‘Standardized Hospital Colour Codes’ Policy Directive for colour codes applicable to each specific jurisdiction. HEMC members will provide a report to the Executive Director, Emergency Management Unit confirming implementation across their jurisdiction.

Appendix 1

British Columbia Hospitals Emergency Colour Codes	
Code	Purpose
Code Red	Fire
Code Blue	Cardiac Arrest
Code Orange	Disaster or Mass Casualties
Code Green	Evacuation
Code Yellow	Missing Patient
Code Amber	Missing or Abducted Infant or Child
Code Black	Bomb Threat
Code White	Aggression
Code Brown	Hazardous Spill
Code Grey	System Failure
Code Pink	Pediatric Emergency and/or Obstetrical Emergency