



**NEW YORK CITY
COLLEGE OF TECHNOLOGY**

THE CITY UNIVERSITY OF NEW YORK
285 JAY STREET. BROOKLYN, NY 11201-2983

DEPARTMENT OF NURSING
A-613
718.260.5660

HOSPITAL FIRE SAFETY PLAN (SAMPLE)

My signature below confirms that I have reviewed the sample hospital fire safety plan and agree to the terms defined above and understand that it is my responsibility to comply with the specific policies and standards of the facility where I am assigned to for my clinical placement.

Student Signature

Date

Print Name

**Please Note: This page must be signed, dated, and uploaded in
CastleBranch to meet
the Fire Safety Certificate requirement**

HOSPITAL FIRE SAFETY PLAN

Purpose

To assure the safety of patients, visitors, and staff.

Policy

In the event of a fire, the staff will follow the basic plan for the building they are located in. Staff will use the keyword R.A.C.E. when responding to a fire. Staff will use the same plans for the fire drills as they do in actual events. Fire drills will be observed to measure the effectiveness of staff response, as well as the response of building fire systems.

Doctor Red or Doctor Red Drill in Your Work Area

An alarm will sound throughout the building and where the pull station was activated or the automatic sensors have detected smoke or heat.

An overhead page will follow indicating the location of the fire.

If you discover smoke, fire, or the alarm system is activated in your immediate area, the appropriate response will best be remembered by using the acronym R.A.C.E.

R- Rescue/Remove/ Rescue People & Remove Items in Corridor

- Remove anyone in immediate danger to a safe area. This may be a patient, visitor or employee.
- Do not use elevators.
- Remove all items from the corridors to allow a clear egress path for evacuation. "In Use" items such as crash carts, isolation carts, chemo carts, or wheeled emergency equipment are to be moved to designated areas (inside nursing station, empty patient room, off to one side of corridor etc.

A-Alarm/Sound and Report the Alarm

- Go to the nearest pull station and activate.
 - When activating a single action fire alarm pull station, pull the lever down all the way.
 - If the pull station has a glass bar, pull all the way down to break the glass bar to activate the alarm.
 - This activates the Fire Department and mobilizes the Fire Response Team.
- After the pull station has been activated, or if there is no Pull station in the immediate vicinity, call 33, to notify the operator of the location of the fire. The operator will then overhead page "DOCTOR RED, Building, Area, and Location"

C-Confine/Secure the Area

- Close all doors and windows

E- Extinguish/Evacuate

IMPORTANT:

Only attempt to extinguish a small fire if you know how to operate the extinguisher, otherwise evacuate the immediate area.

- Personnel in the immediate department area should take an extinguisher and proceed to the fire.
- Fight the fire only if you are not placing yourself in danger.

All Clear/Situation is under control

Authorized hospital personnel at the scene verifies that the situation has been resolved. The Incident Commander will notify the Switchboard operator and "DOCTOR RED, IS ALL CLEAR" will be paged overhead.

General Responsibilities for fire alarm activation above, below, or adjacent to the Red Doctor.

If your area is above, below, or adjacent to the point or origin, the following procedures are:

- Close all doors.
- Remove all items from the corridors to allow a clear egress path for evacuation. "In Use" items such as crash carts, isolation carts, chemo carts, or wheeled emergency equipment are to be moved to designated areas (inside nursing station, empty patient rooms, off to one side of corridor etc.).
- Have patients return to their rooms.
- Remind patients and visitors not to use elevators.
- Listen for overhead pages for status of situation.

General Responsibilities for Fire Alarm Activation Remote from Your Work Area

If your area is away from the point of origin (not within your immediate area or above, below or adjacent to that area), the following procedures will need to be implemented:

- Be ready to accept patients from the point of origin.
- Remind patients and visitors not to use elevators.
- Listen for overhead pages for status of situation.

Oxygen Shut Off

The authorized individual that can shut off the oxygen zone valves is the nurse in charge of that department. The respiratory therapist responding with the Fire Response Team will aid in further procedures during or after the shutting off of the zone valve.

In the event of a fire involving a piece of respiratory therapy equipment connected to an oxygen station outlet, the zone valve supplying that station is to be closed.

The other patients that are served by the zone valve, now closed, will be immediately evaluated for the need of portable oxygen and steps are made to minimize that hazard.

In the event of a fire involving an oxygen apparatus supplied by a cylinder or container of oxygen, it is vital in shutting off the supply to that cylinder. Take caution for this type of closure can or may cause potential injury.

Evacuation

Evacuation will not take place until directed by the Incident Commander and/or Fire Department. At any time, when patients are in immediate danger, moving them to a safer area can be done without these approvals.

Patient Representative/Administrator On Duty (AOD), Safety Officer and/or designated roles in the HICS structure evaluate the situation and determine the need to activate Code HICS and what levels.

Do Not Use Elevators unless otherwise directed by Fire Department.

There are three types of evacuations, the following are the types:

- Horizontal- move patients and families into the next smoke compartment away from the source of the fire.
- Vertical- move one floor down taking the exit stairs.
- Entire Building- all patients and visitors will be moved from the building to the alternate care sites.

Incident Commander, in conjunction with the NYC Fire Department, will determine the need for evacuation beyond horizontal evacuation to the next smoke compartment.

At the point of horizontal evacuation, the evacuation plan will be instituted. For more information on evacuation, see Evacuation Plan Annex found in the Emergency Operations Plan.

Fire Drills

Fire Drills will:

- Be conducted a minimum of quarterly.
- Be evaluated for performance of fire safety equipment and staff. Be reviewed by the EOC Committee on a regular basis.
- Simulate real-life possibilities.
- Be conducted by the Safety/Security Department at varied times and observed from varied locations.

Evaluation of Staff Knowledge will include:

- Compartmentalization and containment.
- Areas of Refuge.
- Fire extinguishment.
- Fire response duties.
- Vertical and horizontal evacuation.

Staff response will be observed at the drill location and:

- Adjacent compartment(s).
- The compartment above and below from the drill location.

Fire Response Team

The fire response team has representatives from the following departments:

- Engineering
- Security
- Respiratory Care
- Environmental Services
- Safety
- Patient Rep./AOD

They are responsible for responding to the area with a fire extinguisher when a Doctor Red is initiated. The Engineering representative or designee will direct the fire response team once they arrive on the scene. The Fire

Response Team will be trained annually on the procedures for their response.

Fire Extinguishers

Location of fire extinguishers:

- All employees should be oriented to the location of the fire extinguishers in their respective work area/department. Storage of equipment should never block fire extinguishers. The Engineering department visually inspects extinguishers every month.

Selection of Fire Extinguisher:

- Select the proper fire extinguisher for the type of fire.
 - Type A (Water):
 - Silver, long narrow nozzle
 - Use for wood, paper or combustibles
 - Type B, C (CO2):
 - Red, cone shaped nozzle
 - Use for oil, chemical, or grease
 - Type A, B, C (Dry Chemical):
 - Red, long narrow nozzle
 - Use for all types of fires including electrical

Use of Fire Extinguisher

Position yourself as close to the fire as safely possible (8 to 10 feet away).

Remember to leave a way out.

Use the **PASS** method to extinguish the fire:

Pull the pin on the extinguisher.

AIM the extinguisher nozzle at the base of the flames.

Squeeze the handle to discharge the extinguisher. Squeeze the handle, as the contents are under pressure.

Sweep from side to side at the base of the fire. Remember that the extinguisher will empty quickly. Do not waste the extinguishing agent.

DO NOT ATTEMPT TO EXTINGUISH THE FIRE IF IT IS TOO LARGE OR DANGEROUS. CLOSE THE DOOR, LEAVE THE AREA, AND AWAIT THE ARRIVAL OF THE FIRE RESPONSE TEAM AND/OR THE FIRE DEPARTMENT.