

FIRE SAFETY PROGRAM

Tab O

FIRE EMERGENCY - EXTENSION 46666

The Medical Center Fire Safety Program encompasses seven major steps:

- I. An Internal Fire Prevention Program;
- II. Safety to Life-Protection to Those in Immediate Fire Danger;
- III. Reporting a Fire;
- IV. Confining and Attempting to Extinguish the Fire;
- V. Evacuation, if necessary;
- VI. General Instructions;
- VII. Specific Responsibilities in the Event of Fire in Non-patient Care Areas and Buildings.

PART I

I. An Internal Fire Prevention Program:

- A. Semiannual safety inspections of all areas by the Safety Officer covering all areas of General Safety and Life Safety policies and codes.
- B. Semiannual reports are sent to Hospital Administration, Physical Facilities, or the appropriate department for corrective action if the problem is not corrected during the inspection.
- C. Routine checks are made by Campus Police Officers around the clock, particularly between the hours of 9:00 p.m. and 7:00 a.m. and on weekends and holidays, with special attention to uninhabited and construction areas of the building for the purpose of fire detection.
- D. A smoking policy has been adopted that prohibits smoking in any building at the Medical Center. Smoking is allowed in designated areas outside the building.
- E. Good housekeeping is a requirement and one of the best guarantees against fire.
- F. All staff members are prepared through education and training to activate the fire safety capabilities of the building. Training is provided at initial employee orientation and through yearly in-service and drills with emphasis on the R.A.C.E.(Rescue, Alert, Confine, Extinguish) system developed by the A.H.A. (American Hospital Association).
- G. The Medical Center has a Fire Response Team that responds to all drills and alarms.

- H. Adoption of Interim Life Safety Measures (ILSM, NFPA 241, NFPA 101) during construction and renovation periods to see that the buildings continue to be designed and constructed with the capability of being fire safe.
 - I. There is a maintenance program for the inspection and servicing of portable fire extinguishers.
 - J. Fire alarm detection and suppression systems are maintained, cleaned, and tested according to the appropriate NFPA regulations.
 - K. Fire drills will be held in the hospital and clinic areas according to the requirements of the Joint Commission on Accreditation of Healthcare Organizations and other regulatory agencies. Fire drills will be held in other areas of the Medical Center to comply with NFPA 101.
1. Fire Drill Procedures:
 - a. Fire Safety Specialist will begin drill by placing appropriate fire drill flag in the area;
 - b. All staff members will respond to the drill flag as if it were an actual fire by following the procedures outlined in Part II, Part III, and Part IV. Participants will not use an extinguisher, but should bring one to the area of the fire drill, to show they know the location of the nearest extinguisher.

PART II

II. Safety to Life in the Event of Fire or Fire Drill:

- A. Staff will follow the steps established by the A.H.A. in the R.A.C.E. system:
 1. Remove any person in immediate danger from room where fire is located;
 2. Alert other staff members to the problem in a manner so as not to cause panic among patients and visitors, **DO NOT SHOUT FIRE.** Make sure that the alarm is transmitted by dialing **46666** and pulling a manual fire alarm pull station;
 3. Confine the fire to the room of origin by closing the door after making sure all persons are safely out of the room. Close all other doors in the area to prevent the spread of fire and smoke into unaffected spaces on the wing;

4. Extinguish the fire if at all possible. Do not put yourself in unnecessary danger in attempting to do so.

PART III

III. Report Fire:

- A. Notify Physical Facilities dispatcher – extension **46666** and Activate fire alarm by pulling lever down on the nearest fire alarm pull station.
- B. When reporting by phone, speak in a moderate tone of voice and state your name, location, and extent of fire. If available, give a room number. Stay on the phone until the dispatcher has all the information needed.
- C. Physical Facilities personnel and Campus Police:
 1. Physical Facilities dispatcher on duty will receive the notification from the location of the fire by telephone or activation of the Fire Alarm System;
 2. The dispatcher will notify the Jackson Fire Department by using the direct telephone line;
 3. He will announce **Code 1** and fire location over Physical Facilities radios. This announcement will be made three (3) times, pausing between each announcement;
 4. The Physical Facilities dispatcher will notify the PBX operator and the Campus Police dispatcher of the fire location;
 5. After all of the required notifications have been made, the Physical Facilities dispatcher will announce over the fire alarm system voice circuit: "**DR. RED**", and location - three (3) times, with a pause between each announcement. A false alarm should also be announce so staff can downgrade their response;
 6. The Medical Center Fire Response Team will report to the scene of the fire and take appropriate action to locate and extinguish the fire. The first person on the scene should report their findings to the dispatcher. Any member of the Fire Response Team can give the "**All Clear**" after checking the scene and determining it is a false alarm.
 7. During times other than the regular 40 hour, Monday - Friday work week, the Physical Facilities dispatcher will contact needed personnel via telephone or radio. The order of contact will be: (1) Fire Safety Specialist, (2) Safety Officer, (3) Director of Hospital,

(4)Assistant Hospital Director, (5) and others according to the current fire response assignment;

8. The Physical Facilities dispatcher will call- out others as the need indicates in reports from the scene of the emergency;
9. The Campus Police dispatcher will announce **Code 1** and location over Campus Police radios three (3) times with a pause between each announcement.

D. PBX Operators:

1. Upon notification from the dispatcher of a fire alarm in the hospital and/or CRC (Children's Rehabilitation Center) PBX personnel will:
 - a. Announce "**DR. RED & Location**" over the P.A. system three (3) times, pausing between each announcement - **(In-Hospital Area Only)**.
 - b. Call Nursing Service Office - Ext. 44130;
 - c. Page Hospital Administrator on call;
 - d. Page Nursing Supervisor on duty;
 - e. Page Public Relations personnel on call;
 - f. Page Respiratory Therapy Supervisor;
- Announce "**DR. RED - ALL CLEAR**" over the P.A. system three (3) times, pausing between each announcement, when directed to by the Fire Safety Specialist or other person(s) in charge at the scene;

NOTE: In the event a fire is reported first to a PBX operator rather than the Physical Facilities dispatcher, the PBX operator will:

- Take the information;
- Relay the information to the Physical Facilities dispatcher via the fire phone;
- Then proceed according to the procedures as outlined above.

2. Until "**ALL CLEAR**" is announced, all Medical Center personnel will realize that an **emergency exists** and **will not** call PBX operators, Physical Facilities dispatcher, or the Power Plant, except for an emergency, or if the call is related to duties of those personnel directly connected with the emergency. The "**ALL CLEAR**" will be

authorized to the PBX and Physical Plant dispatcher by (1) Fire Safety Specialist, (2) Safety Officer, (3) Hospital Administrator on call, or (4) Campus Police Captain at the scene of the emergency. If it is known to be a false alarm, the first arriving member of the Fire Response team can cancel the code and call for the “**ALL CLEAR**”.

PART IV

IV. Confining and Attempting to Extinguish the Fire:

A. To confine fire to a small area:

1. Close all doors and make certain all vertical shafts are closed, i.e., stairwells, elevator shafts, laundry chutes, dumbwaiters, etc.;
2. Turn off fans, blowers, and other equipment that may spread the fire;
3. Never take a burning bed out of a room. **Remove patient**, not the bed, and close the door.

B. Extinguishing a Fire:

1. Fires are divided into three (3) classes: **A**, **B**, and **C**, and so are the extinguishing agents.
 - A. A **Class A** fire is one involving ordinary combustible materials, such as wood, paper, and cloth, in which extinguishment is accomplished by **cooling** or **smothering**;
 - B. A **Class B** fire is one involving flammable liquids, such as alcohol, toluene, xylene, etc., in which extinguishment is best accomplished by **smothering**;
 - C. A **Class C** fire is one involving energized electrical equipment, appliances and wiring. The fire itself is either a **Class A** or **B** fire. The extinguishment is best accomplished by **smothering**;
 - D. Appropriate fire extinguishers are located in the hose cabinets and utility rooms on each nursing unit;
 - E. Fire extinguishers in the nursing units are multipurpose **ABC** units and can be safely used on all classes of fires. Certain laboratories have Carbon Dioxide (CO₂) extinguishers, which are painted red with large black plastic horns;
 - F. To use any fire extinguisher, remember the word **PASS**, you **P**ull the safety pin, **A**im the discharge nozzle at the source of the fire,

Squeeze the two (2) handles to operate, and **Sweep** the fire with the extinguishing agent.

PART V

V. Evacuation of Patient in Emergency:

A. Know whether evacuation is to be **horizontal** or **general**:

1. **Horizontal evacuation** means moving your patients to a neighboring "safe" area. (This "safe" area may be on the same nursing division or another division on the same level).
2. **General evacuation** will be under the direction of the Hospital Administrator on call, the Nursing Supervisor on call, the City Fire Officer in charge on the scene and the UMMC Fire Safety Specialist. Egress will be to a floor on a **lower level** or to the outside of the building.

B. Handling of Patient for Evacuation:

1. Order of evacuation is determined according to patient's physical condition:
 - a. Ambulatory - Assemble patients, appoint a leader to go with them and lead to safest part of the same floor (toward an exit) and instruct the leader where to take them if they must leave the floor. **Do not leave ambulatory patients without an attendant for fear of panic;**
 - b. Wheel chair cases - Use wheel chairs to remove these patients to a safe place on other wings of the same level. Take wheel chairs back for additional patients;
 - c. Non-ambulatory patients - Move by means of stretcher or occupied bed to safe area. If necessary, place patient in blanket and drag along floor by holding corner of blanket. Give wet towel to cover face. Area near floor is most comfortable in smoke filled atmosphere. If water is falling, place sheet, blanket, towel, etc. over patient's head;
 - d. Ventilator dependent patients must be maintained during a fire emergency. Every effort must be made to keep these patients in place unless conditions dictate that they be evacuated. Adequate numbers of personnel must be available to safely and expeditiously move ventilator dependent patients. Portable oxygen apparatus should be made available to facilitate the evacuation process. In the

event portable oxygen is not available manual devices will be employed for life support;

- e. Orthopedic patients fastened in traction are the greatest problem. Give them wet towels to cover their faces. Reassure them that help will come. Have an attendant stay with such patients if at all possible until evacuated or the emergency is over. Move patients in bed, if possible. If bed will not easily go through door and/or corridor without blocking other activities, ropes and straps will have to be cut if it is absolutely necessary to move the patient. Save stretchers for these cases;
- f. Newborn babies are the most helpless of our patients. Incubator babies should be kept in the nursery as long as possible. Take along a small emergency oxygen tank, if oxygen is being used. A nurse **must** stay with these babies **at all times**.

PART VI

VI. General Instructions:

- A. The Campus Police will meet the City Fire Department in the service court and at the West (main) entrance; they will guide the fire department to the location of the fire.
- B. No elevator will be used to arrive at floor on which fire is reported unless in opposite wing from reported fire.
- C. The operation of building fire extinguisher equipment will be the responsibility of the Hospital Fire Response Team, Environmental Services and/or Nursing Services personnel. All assigned personnel will be properly instructed in the use of existing fire fighting equipment in their area.
- D. Avoid panic - never shout "**FIRE**".
- E. The evacuation of patients will be in accordance with the instructions contained in **PART V EVACUATION OF PATIENTS IN AN EMERGENCY**.
- F. Persons not directly engaged with containment and/or fighting the fire will clear the area for the Fire brigade and the City Fire department personnel.
- G. The "**ALL CLEAR**" will be authorized to the Physical
 - a. Facilities dispatcher and the PBX operator only by the Fire Safety Specialist, Safety Officer, Hospital Administrator on call, or the Campus Police Captain on duty.

- b. If it is known to be a false alarm, the first arriving member of the Fire Response team can cancel the code and call for the “**All CLEAR**”.

SPECIFIC RESPONSIBILITIES IN THE EVENT OF FIRE UNIVERSITY HOSPITAL AREAS:

A. The Fire Safety Specialist or his designee is the Fire Marshall:

He will give reports to all departments as to the progress of the fire so that they can prepare to remove patients if necessary, or can assure patients that the fire is of a minor nature;

1. Send employees to departments where most needed;
2. Notify Campus Police if their help is needed, and call other hospital personnel if their assistance is desired;
3. Assign personnel to keep all stairways and exits clear;
4. Use office personnel to keep all stairways and exits clear;
5. Advise Public Relations personnel of conditions so that press releases may be made as deemed appropriate;
6. Supervise general evacuation of patients when necessary.

B. Nursing Services:

1. The Assistant Director of Nursing for the area experiencing the emergency shall respond to the scene and assume charge for Nursing Services. Others will be directed to report to the scene as the need requires. Designated Nursing Services personnel will staff the telephones and summon additional support as directed by the Assistant Director of Nursing:
 - a. Orderlies and aids shall report to Head Nurse or Assistant Director of Nursing at the emergency scene. Follow instructions for patient care, fire containment, and other needs;
 - b. Other Nursing Service personnel, Central Supply, and others shall remain at their duty post and be prepared to support the emergency area as directed by an Assistant Director of Nursing;
 - c. Professional and practical nurse students, and others shall remain at posts unless otherwise directed by a Nursing Service Supervisor or an Administrative Officer;

2. Weekend and Evening Environmental Services personnel:

- a. A Supervisor will call all personnel to departmental office and will follow instructions of the Fire Safety Specialist, Safety Officer, or Assistant Director of Nursing;
- b. Keep someone available to answer phone;
- c. Assist in evacuation of patients as directed;
- d. Assist in operation of fire extinguishers and fire hose;
- e. Obtain supply of blankets and robes, if needed.

E. Patient Accounts:

1. The following specific instructions should be carried out by Patient Accounts personnel in the event of a fire elsewhere in the Hospital or Medical School:
 - a. **Bookkeeper** - If fire or water threatens office area, gather all cash together in one receptacle and place all valuables and important books in fireproof safes;
 - b. **Assistant Bookkeeper** - Gather all accounts receivable cards ready to be moved. Keep track of file containing names and accounts of patients in the hospital.

F. Radiology:

1. Turn off electric current. Keep lights on. Close doors and windows. Do not remove patients from your department if fire is elsewhere in the hospital. Assume responsibility for patients. Wait for instructions before leaving your area or evacuating patients.

G. Physical Facilities:

1. The Physical Facilities dispatcher on duty will announce **CODE 1** and location of fire over the Physical Facilities radio. A Campus Police representative will meet the City Fire Department personnel in the service court and at the west (main) entrance and guide them to the location of the fire.
2. The Fire Response Team members will report to the scene of the fire and:
 - a. Check for removal of persons in immediate danger;

- b. Contain or extinguish fire by turning off all services that are spreading the fire and/or apply the correct fire extinguisher on source;
- c. Use in-house fire hose when needed;
- d. Follow instructions of the Fire Safety Specialist or Safety Officer and City Fire Chief.

H. Laboratories:

- 1. Turn off oxygen, other gases, and electrical equipment. Leave lights on. Close doors and windows. If fire is in laboratory, **Leave Area Immediately**. If fire is in another part of hospital, remain in laboratory and wait for instruction.

I. Laundry:

- 1. Close doors and windows. Turn off machinery. Assemble bathrobes and blankets. Remain at telephone for instructions as to where to deliver them or where to give help.

J. Kitchen:

- 1. Close doors and windows. Turn off gas and electrical machinery. Report to Fire Safety Specialist or Safety Officer for instructions.

PART VII

VII. Specific Responsibilities in the Event of a Fire in Non-Patient Care Buildings:

- A. All non-patient care buildings and areas occupied by UMMC employees will observe the same quality fire safety inspections, maintenance, and protection set by the appropriate building and fire codes.
- B. All occupants of these buildings will follow the same procedures as established by the R.A.C.E. system as explained in **PART II** and follow **PART III, sections A, B, and C** of this the Fire Safety Program in reporting a fire.
- C. Every building will have a fire plan that contains the proper procedures to take during a fire alarm and evacuation.
- D. For Mississippi Methodist Rehabilitation Center, the UMMC Fire Response Team will proceed to first floor connecting corridor for defense and to provide assistance, if needed.

E. External Fire on Grounds or Parking Lots:

1. Grass and/or brush fires will be reported to the Physical Facilities dispatcher by dialing **46666**;
2. An automobile or other fire in parking lots will be reported by dialing **46666**. The City Fire Department will be called to respond by the Physical Facilities dispatcher;
3. The Physical Facilities dispatcher must exercise care when notifying the City Fire Department of an external fire, being sure to advise the city dispatcher of the nature of the problem so that an excess of equipment will not be dispatched.
4. In the event of an external fire incident on campus during the normal workday, the Fire Safety Specialist will be notified. Campus Police personnel will guide the City Fire Department to the fire site.