

Policy Number:	8000-701
Department:	Environment Of Care
Category:	Fire & Life Safety
Subject:	Fire Safety Plan
Effective Date:	July 1981
Revision:	Oct 2024

SCOPE:

The policy applies to all employees and locations of Jacksonville Memorial Hospital (JMH) and its affiliated clinics.

OBJECTIVE:

To provide guidelines for a safe and orderly procedure for insuring the safety of patients, visitors and employees in the event of a fire located in a hospital facility.

POLICY

Due to the potentially devastating effects of a fire and the non-ambulatory nature of many patients, all colleagues, licensed practitioners, and non-licensed practitioners have a responsibility to respond quickly to a suspected or actual fire following the procedures listed. This policy considers the authority for implementation, procedures to follow, personnel assignments, utilization of resources and above all, safety precautions.

ACTIVATION

This plan shall be activated upon an activation of the JMH Fire System or upon discovery of a fire, smoke, or unusual heat on a wall, door or other surface.

SPECIAL INSTRUCTIONS**I. Procedures to follow when discovering a fire:**

1. **RESCUE** persons in immediate danger.
 - i. If a fire is discovered and an individual is in immediate danger, the first duty is to rescue them by removing them from immediate danger
2. **ALARM:** Activate fire alarm, Dial the emergency phone number and report location of the fire.
 - i. Inform someone you are attempting a rescue before the attempt is made by calling out alert phrase "Fire Alarm" and "Pull the Fire Alarm" to alert others.
 - ii. Any personnel hearing a alert announced shall respond immediately by reporting the fire (**ACTIVATE**) by one of the methods below:
 - (a) Personnel shall activate the building fire alarm using the nearest manual fire alarm box, by pulling the handle on the red fire alarm box.
 - (1) This will sound an alarm signal in the Unit, throughout the hospital and alert the fire department.
 - (2) Then all personnel shall execute immediately their duties as outlined in the fire safety plan.
 - iii. During a malfunction of the building fire alarm system personnel should call out the alert phrase "Fire Alarm" to alert all others in the area.
 - (a) Dial the emergency phone number, identify yourself, and give the exact location and other information about the fire scene, i.e.

type of material burning, smoke from an unknown origin, accidental alarm, etc.

- iv. Report the fire to individuals in immediate area and immediate supervisor.
3. **CLOSE** all doors and windows to **Contain** fire/smoke. Do not turn out any lights.
4. **EXTINGUISH** when a fire is small or can be done safely and **Evacuate**/relocate persons from adjoining rooms in the same fire zone when necessary. Once all patients, visitors and staff are safely clear of the immediate area of the fire, begin preparations to evacuate the fire zone (smoke compartment) only if required for safety of patients, visitors, and staff. Trained personnel may attempt to fight the fire with the available firefighting equipment using **PASS**:
 - i. **PULL** the locking pin from its place;
 - ii. **AIM** the nozzle at the base of the flames;
 - iii. **SQUEEZE** the handles together;
 - iv. **SWEEP** from side to side at the base of the flames.

II. Reacting to a fire alarm:

1. Whenever fire alarms are activated and an announcement concerning a fire or possible fire is made, everyone not in the effected fire zone should remain in the zone they are in when the fire alarms go off. The only personnel members that are to freely move from zone locations are senior supervisory personnel, engineering personnel, and local police and fire fighters.
2. Close all doors and windows; do not turn off any lights.
3. Any personnel may be called upon to assist firefighting authorities, or assist with patient, visitor, and staff safety outside the zone by supervisory personnel, or when there is an immediate danger requiring moving from zone to zone.
4. Visitors will be asked to limit movement in the hallways until the all clear announcement is made to prevent potential visitor injuries from burns or smoke inhalation.
5. Elevators should not be used during a Fire Alarm as they will be recalled to a safe floor; stairwells should be utilized if necessary.

III. General Fire Safety procedures

1. Storage of equipment and/or supplies which block any corridor or aisle way are prohibited. 8ft clearance must be maintained in patient care area corridors.
2. Blocking fire exit doors is prohibited.
3. Materials in storage must be at least 18" from a sprinkler heads unless placed against a wall.
4. Storing equipment, supplies, etc., in such a fashion as to block access to fire alarms or extinguishers is prohibited.
5. Storing of equipment, supplies, etc., within 3 feet of sprinkler shut off valves is prohibited.
6. All nursing personnel shall be familiar with their duties in the event of fire, internal or external disaster.
7. All Staff are expected to participate in fire and disaster drills is required.
8. Staff in all areas will reports issues relating to activations of the Fire system through the submission of SENSOR reports or work orders.

9. Employees working in areas with specialized extinguishers or extinguishing systems (e.g. Ansul, FM-200) will be aware of those systems and the unique processes and properties of those systems.
10. Shut off the medical gas(es) valve(s) in the affected area, will be performed only as necessary, or as instructed by the local Fire Department.
 - i. Refer to the guidance and instruction of Policy 8000-705 Medical Gas Shut off
 - ii. Coordinate additional Respiratory Therapy personnel/resources to assist with the evacuation of patients, portable oxygen supplies and other duties as assigned, when medical gas(es) valve(s) are to be shut off.

IV. Interim Life Safety Measures (ILSM) and Fire Watch

1. Whenever the sprinkler system is to be inoperable for a period of ten hours or more or the fire alarm system is to be inoperable for a period of four hours or more, in a twenty-four hour period, the procedures of Policy 8000-703 ILSM shall be enacted, specifically, the following outside agencies need to be notified at initiation
 - i. (447) 784-2890 Administrator on Call (Building Owner)
 - ii. (217) 479-4620 Local fire inspector
 - iii. (217) 479-4656 Local fire department
 - iv. (217) 785-4264 Illinois Department of Public Health(IDPH) Life Safety Office
 - v. (312) 837-4477 JMH Insurance provider: Alliant Insurance Services
 - vi. (888) 746-7539 JMH Fire Monitoring service: Johnson Controls

ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

V. Responsibility

- A. The primary engineering staff member responding to the event will have command of the situation response, unless relieved by the fire department, Incident Commander, or house Supervisor.
- B. Fire safety procedures are the responsibility of all staff members and licensed practitioners on Jacksonville Memorial Hospital property.
- C. Engineering:
 - i. Engineering shall perform only basic fire response operations for beginning stage fires that can be controlled or extinguished by portable fire extinguishers without the need for protective clothing or self-contained breathing apparatus.
 - i. Respond to the area of the fire and ensure that all procedures and protective actions are active / completed.
 - ii. Provide the fire department with blueprints and other required assistance as needed.
 - iii. The Engineering Leader will keep administration informed of the fire situation.
 - iv. After normal business hours, the engineering person on duty will assume the duties of the Engineering Leader and assign the available staff as needed. Safety of all persons within the hospital will be maintained above all else.
 - v. Reset the fire system, magnetic hold doors, HVAC Systems and elevators after the emergency
- D. Security

- i. Identify when an alarm or call concerning a fire is received.
- ii. Make the announcement regarding the alarm.
- iii. Contact the Fire Department (911) to ensure that the notification signal is received
- iv. Respond to the scene of the fire and assist Engineering with control until arrival of the fire department.
- v. Meet the fire department and direct them to the location.
- vi. Assist with evacuation procedures as required.
- vii. Ensure the safety of all persons within the hospital be maintained above all else.
- viii. Announce all clear when instructed.
- E. Nursing Services:
 - i. The Chief Nursing Officer, House Supervisor, or Nurse Manager will assume immediate control of patient safety.
 - ii. Reassure patients and visitors and provide for all medical needs.
 - iii. Prepare areas not affected by the fire to take care of patients transferred from the threatened section. Prepare to assist with evacuation procedures.
 - iv. Advise fire fighters of patients' conditions.
- F. Contracted Fire Services:
 - i. Fire panel systems shall automatically notify contracted fire services about an alert.
 - ii. Contracted fire services shall call the Jacksonville Fire Department and relate the transmitted information about the fire situation.

TRAINING AND DOCUMENTATION:

VI. Fire safety drills:

- 1. Fire drills are to be conducted per policy 8000-702 Fire Drills at least once a quarter on every shift coordinated and monitored by the Engineering Dept. and Safety Officer .

VII. Fire safety training:

- 1. All hospital personnel, hospital volunteers, and students receiving training in the facility will:
 - i. Annually complete a Fire Safety Plan online computer based learning (CBL) training course.
 - ii. be familiar with the location and operation of the following items:
 - (a) Fire alarms.
 - (b) Fire extinguishers.
 - (c) Emergency telephone number (217-479-**3700** or **447-784-3434**).
 - (d) Emergency exits and evacuation routes.
- 2. Employees working in areas with specialized extinguishers or extinguishing systems (e.g. Ansul, FM-200) will receive specific training for those devices.
- 3. Specific staff are to be familiar with conducting fire surveillance procedures utilizing the Fire Watch Checklists (8000-707.A and 8000-707.B), as necessary.

APPROVAL AND TRACKING

This policy has been reviewed and approved at Jacksonville Memorial Hospital by:

James Krug <i>Affiliate Vice President, IS and Support Services</i>	
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Rev #	Date	Significant Changes
00	July 1, 1981	Policy Effective
1-19 (see past versions for details)
20	Mar 20, 2019	Updated per MH system & modifications made to F/LS mgmt. plan
20	July 28, 2021	Reviewed and Minor updates
21	July 2024	Triennial Review & Updates per Vizient Survey
22	Oct 2024	Updated phone numbers per Avaya project

REFERENCE:

1. NFPA 101-2012 "Life Safety Code" - Section 18/19.7.1
2. The Joint Commission EOC and LS chapters

DEFINITIONS

- A. For time frames per TJC:
 - a. Annually/every 12 months/once a year/every year = 1 year from the last event, plus or minus 30 days
 - b. Quarterly/every quarter = every 3 months, plus or minus 10 days
 - c. Monthly/30-day intervals/every month = 12 times a year, once per calendar month

APPENDIX

- A. none