

Policy Number:	8000-701
Department:	Environment Of Care
Category:	Fire & Life Safety
Subject:	Fire Safety Plan
Effective Date:	July 2021
Supersedes:	Mar 20, 2019

POLICY

Due to the potentially devastating effects of a fire and the non-ambulatory nature of many patients, all employees, licensed independent practitioners (LIPs), and non-licensed independent 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.

Fire systems should be considered as mitigation systems and failures of the mitigation system should be handled by the established procedures. Each department must develop sub-plans defining department-specific protocols that support the organization's overall fire event response.

PURPOSE

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 Passavant Area Hospital(PAH). To provide surveillance measures to take whenever the fire alarm or sprinkler system is inoperable.

ACTIVATION

This plan shall be activated upon discovery of a fire, upon an activation of the PAH Fire System, or whenever any one of the following indications is observed:

1. Seeing smoke, sparks, or a fire
2. Smelling smoke or other burning material and determining that it is a credible threat.
3. Feeling unusual heat on a wall, door or other surface.
4. In response to any fire/life safety system alarm.

SPECIAL INSTRUCTIONS

I. Procedures to follow when discovering a fire:

5. **RESCUE** persons in immediate danger.
6. 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
7. **ALARM:** Activate fire alarm box, Dial 3700 and report location of the fire.
8. 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.
9. Any personnel hearing a alert announced shall respond immediately by reporting the fire (ACTIVATE) by one of the methods below:
10. Personnel shall activate the building fire alarm using the nearest manual fire alarm box, by pulling the handle on the red fire alarm box.
11. This will sound an alarm signal in the Unit, throughout the hospital and alert the fire department.
12. Then all personnel shall execute immediately their duties as outlined in the fire safety plan.
13. 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.
14. Dial 3700, 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.
15. Report the fire to individuals in immediate area and immediate supervisor.

16. **CLOSE** all doors and windows to Contain fire/smoke. Do not turn out any lights.
17. **EXTINGUISH** when a fire is small or can be done safely and Evacuate/relocate persons from adjoining rooms in the same fire zone. 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**:
 1. **PULL** the locking pin from its place;
 2. **AIM** the nozzle at the base of the flames;
 3. **SQUEEZE** the handles together;
 4. **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.
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 Precautions for Fire Safety

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. Employees working in areas with specialized extinguishers or extinguishing systems (e.g. Ansul, FM-200) will receive specific training for those devices.
9. 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.
10. Refer to the guidance and instruction of Policy 8000-705 Medical Gas Shut off
11. 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

- A. 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

1. (217) 245-9541 Administrator on Call (Building Owner)
2. (217) 479-4620 Local fire inspector
3. (217) 479-4656 Local fire department
4. (217) 785-4264 Illinois Department of Public Health(IDPH) Life Safety Office
5. (312) 837-4477 PAH Insurance provider: Alliant Insurance Services
6. (888) 746-7539 PAH Fire Monitoring service: Johnson Controls
7. Additionally for conditions effecting TCU: (618) 656-6680 IDPH Region 4

ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

V. Authority

1. The implementation of fire safety procedures is ultimately the responsibility of the CEO of PAH.

VI. Command and Control

- A. The primary plant engineering staff member responding to the event will have command of the situation response, unless relieved by the fire department or Incident Commander.
- B. If necessary, the CEO or his representative will establish the hospital command center. Initial location is suggested to be in CEO's office or switchboard. An alternate center will be established if required.

VII. Responsibility

1. Fire safety procedures are the responsibility of all staff members, licensed independent practitioners (LIPs), and non-licensed independent practitioners on Passavant Area Hospital property.
2. Engineering:
 1. Plant 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.
 2. Respond to the area of the fire and ensure that all procedures and protective actions are active / completed.
 3. Provide the fire department with blueprints and other required assistance as needed.
 4. The Plant Engineering Leader will keep administration informed of the fire situation.
 5. After normal business hours, the plant engineering person on duty will assume the duties of the Plant Engineering Leader and assign the available staff as needed. Safety of all persons within the hospital will be maintained above all else.
 6. Reset the alarm system, magnetic hold doors, and elevators after the emergency
3. Security
 1. Identify when an alarm or call concerning a fire is received.
 2. Make the announcement regarding the alarm.
 3. Contact the Fire Department (911) to ensure that the notification signal is received
 4. Announce all clear when instructed.
 5. Respond to the scene of the fire and assist Engineering with control until arrival of the fire department.
 6. Meet the fire department and direct them to the location.
 7. Assist with evacuation procedures as required.
 8. Ensure the safety of all persons within the hospital be maintained above all else.
4. Nursing Services:
 1. The Chief Nursing Officer, House Supervisor, or Nurse Manager will assume immediate control of patient safety.
 2. Follow applicable procedures
 3. Reassure patients and visitors and provide for all medical needs.
 4. Instruct visitors to remain with patients.

5. Prepare areas not affected by the fire to take care of patients transferred from the threatened section. Prepare to assist with evacuation procedures.
6. Advise fire fighters of patients' conditions.
18. Contracted Fire Services:
 1. Fire panel systems shall automatically notify contracted fire services about an alert.
 2. Contracted fire services shall call the Jacksonville Fire Department and relate the transmitted information about the fire situation.

TRAINING AND DOCUMENTATION:

VIII. Fire safety drill inspections:

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 PAH Safety Officer and Director of Facilities.
2. All fire safety drill and inspection procedures in the PAH Transitional Care Unit (TCU) will be per the hospital's Fire Drill Policy (8000-702 Fire Drills), with the following exceptions:
 1. At least one fire drill per year for each shift will consist of a simulated evacuation of residents.

IX. Fire safety training:

1. All hospital personnel, hospital volunteers, and students receiving training in the facility will:
2. Annually complete a Fire Safety Plan online computer based learning (CBL) training course.
3. be familiar with the location and operation of the following items:
 - i. Fire alarms.
 - ii. Fire extinguishers.
 - iii. Emergency telephone number (**3700**).
 - iv. Emergency exits and evacuation routes.
4. Employees working in areas with specialized extinguishers or extinguishing systems (e.g. Ansul, FM-200) will receive specific training for those devices.
5. As needed and specific staff are to be familiar with conducting fire surveillance procedures utilizing the Fire Watch Checklists (8000-701.A and 8000-701.B) for hazardous surveillance.

X. Documentation:

1. Training shall be documented to include
2. Date and Time
3. Staff participation
4. Drills will be documented to include the same information as training, as well as:
5. Location (fire zone number) of the drill occurrence
6. Verification of the transmission of the alarm to the alarm company (Simplex)
7. Documentation for drills in TCU will meet the requirements of the hospital Fire Safety Plan and Fire Drill Policy and will additionally contain:
8. Signatures of staff in the area participating in the drill
9. Additional reporting will be completed by the Fire / Life Safety committee, as needed.

APPROVAL AND TRACKING

This policy has been reviewed and approved at Passavant Area Hospital by:

James Krug <i>Affiliate Vice President, IS and Support Services</i>	
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Rev #	Effective Date	Significant Changes
00	Jul 1981	Policy Created

Rev #	Effective Date	Significant Changes
01	Oct 1985	Revised
02	Jan 1988	Revised
02	Sept 1998	Reviewed, No Changes
03	Jul 1991	Revised
04	Dec 1993	Revised
04	July 1992	Reviewed, No Changes
05	Jul 1995	Revised
06	Jul 2000	Revised
07	Aug 2002	Revised
08	Oct 2004	Revised
09	Jun 2005	Revised
10	Aug 2006	Revised
11	Apr 2010	Revised
12	Sep 2012	Revised
13	Sep 2013	Revised
13	July 2015	Reviewed, no changes
14	Nov 2015	Updated Policy Number from 7420-002 to 8000-002
15	May 2016	Revised
16	Mar 2017	Revised Procedures per IDPH
17	March 31, 2018	Revised format, approver, Policies 7420-003 and 6100-124 are now combined into 8000-002, revisions per IDPH TCU Life Safety Survey
18	June 12, 2018	Updated for Plain Language Code Project, revised Emergency Phone #, and policy 8000-002 is now 8000-701.
19	Nov 28, 2018	Updated per TJC 2019 regulatory requirements
20	Feb 28, 2019	Updated per TCU annual survey
20.1	Mar 20, 2019	Updated per MHS systemization efforts and modifications made to F/LS mgmt. plan
20.1	July 28, 2021	Minor updates

A standard fire watch is assigned to observe the area of work to ensure a fire is not started for a minimum of 30 minutes after the work is complete. The fire watch must maintain their own fire extinguisher, be aware of how to activate the alarm, and have the authority to shut down operations if an unsafe condition exists.

Initiation of Fire Watch

- Local fire inspector notified (217)479-4620
- Local fire department notified (217)479-4656
- Illinois Department of Public Health Office notified (217)785-4264* for TCU contact: (618) 656-6680
- House Supervisor notified x5522
- PAH Insurance provider notified (AIG – 877 705-7287)

System removed from service:

Date: _____ **Start Time:** _____

Fire Watch Checklist

- Continuous hazard surveillance conducted.
- Hallways and Exits clear and Exit lights working.
- Fire extinguishers are in place.
- No doors propped open.
- All trash properly disposed.
- No tripping hazards.
- Ceiling tiles in place.
- If applicable, temporary construction partitions smoke tight and built of noncombustible materiel.
- All flammable liquids properly stored.
- All trash properly disposed of.
- All work areas have hazard-warning signs in place.
- Covers on electrical junction boxes.
- Smoking prohibited.
- No fire or smoke noted.

System restored and verified:

Date: _____ **Stop Time:** _____

Signature of Fire Watch:

WHENEVER THE FIRE ALARM SYSTEM IS OUT FOR MORE THAN 4 HOURS OR THE SPRINKLER SYSTEM IS OUT FOR MORE THAN 10 HOURS IN A 24 HOUR PERIOD: INTERIM LIFE SAFETY MEASURES WILL BE INITIATED & A ROVING FIRE WATCH ASSIGNED.

Fire watch look for the following: Exits clear; No improperly stores flammable materials; No Fire hazards; No fire/flames noted. Note discrepancies as discovered

Date		
Area :		

Time	Discrepancies	Initials
12am		
1am		
2am		
3am		
4am		
5am		
6am		
7am		
8am		
9am		
10am		
11am		
12pm		
1pm		
2pm		
3pm		
4pm		
5pm		
6pm		
7pm		
8pm		
9pm		
10pm		
11pm		

Further notes of Discrepancies & Corrections:

Signature of Fire Watch: