

<p align="center"><b>St. Joseph's/ Candler Health System</b></p>	<p align="center"><b>Administrative Policy</b></p> <p><b>Title: Fire Plan</b></p>	<p><b>Policy Number: 1276-A Effective Date: 11/27/2023 Page 1 of 6</b></p>
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**Policy Statement**

It shall be the policy of St. Joseph's/Candler Health System (SJ/C) to protect the safety of patients, visitors, staff and all other occupants on SJ/C property in the event of a fire. Fire represents a potentially serious threat to safety in the hospital and outpatient setting where there are patients and visitors ranging from fully ambulatory to fully confined and requires a constant state of readiness.

**Definition of Terms**

**Automatic Sprinkler System** – Piped water system in the ceiling with discharge heads that will activate at a set temperature allowing water to cover the fire area for extinguishment. The hospital system has 3 types of automatic sprinkler systems – dry, wet, and pre-action:

1. **Wet Sprinkler System** – Employs automatic sprinklers attached to a piping system containing water so that water discharges immediately from sprinklers opened by heat from a fire;
2. **Dry Sprinkler System** – Uses pressurized air to hold a remote valve in the closed position. When sprinklers are activated, the air is released from the pipes resulting in the valve being released, water to enter the sprinkler pipes and flow through the open sprinklers onto the fire.
3. **Pre-Action Sprinkler System** - dry sprinkler system in which water is not contained in the pipes but is held back by a pre-action valve. Pre-action valves are electrically operated valves activated by heat, smoke or flames.

**Clean Agent Automatic Fire Extinguisher System** – a fixed system containing a clean gas effective on fires involving electronic equipment as it does not leave a residue.

**Code Red** – Alert paged overhead in the hospital in the event of a known or suspected fire.

**Defend-in-Place** – An evacuation method for healthcare buildings equipped with compartmentalized construction and fire-resistive building materials requiring staff training and careful planning.

Defend-In-Place is broken down into three basic actions:

1. **Defend** - Keep occupants/patients in their room if they face no immediate threat
2. **Horizontal Evacuation** - Relocate occupants/patients to an adjacent compartment if a threat is imminent.
3. **Vertical Evacuation** - Relocate occupants/patients to a lower floor, if necessary, until cleared by Incident Command.

NOTE: A full hospital evacuation is only directed by Incident Command.

**Elevator Recall** – In the event of a fire, elevators will recall to the primary floor for Fire Department use only. Stairs are to be used, unless directed otherwise by Fire Department personnel.

**Fire Alarm** – A loud audible sound to warn others when there is a suspected fire.

**Fire Extinguisher** – A portable hand-held extinguishing device. Each type is designed for a specific Class fire.

ABC Fire Extinguisher	Dry chemical extinguisher, used on material, flammables or electrical fires.
Co2 Fire Extinguisher	Designed for flammable liquids or electrical fires.
Halotron Fire Extinguishers	Uses a clean agent to extinguish fires of flammable liquids and electrical fires.
K-class Fire Extinguishers	Wet chemical-based fire extinguisher designed for Kitchen fires.

**Fire Response Team** – Security, Plant Operations, and affected departmental personnel.

**Incident Command** – Senior Leadership and Emergency Responders who control the scene. Roles and responsibilities are located in the Emergency Operations Plan (EOP).

**P.A.S.S.** – National acronym used for instructions in using a fire extinguisher:

P	PULL the pin: This is to release the lock latch.	
A	AIM low: Point the extinguisher nozzle (or its horn or hose) at the base of the fire.	
S	SQUEEZE the handle: This releases the extinguishing agent. The extinguishing agent usually lasts about 10 to 15 seconds.	
S	SWEEP from side to side: Keep the extinguisher aimed at the base of the fire and sweep back and forth until it appears to be out. Watch the fire area. If fire breaks out again, repeat the process.	

**R.A.C.E.** – Acronym used by SJ/C to initiate the activation of the alarm system in the event a co-worker discovers smoke or fire.

R	Rescue	Remove endangered persons from fire area. Rescue patients, staff, and visitors in the immediate vicinity of the fire.
A	Alarm	Pull the nearest fire alarm and call the switchboard by dialing 7,7,7,7 and stating Code Red and location; Provide the operator with as much information as possible.
C	Confine	Confine the fire (close doors to restrict the spread of smoke and fire).
E	Extinguish	Extinguish the fire (depending on the size and type of fire, use water or an extinguisher to put out the fire).

**Procedure**

- A. Follow the R.A.C.E. procedure for Code Red and Code Red Drills.
- B. If necessary, follow the P.A.S.S. procedures for extinguishing fires, only if it can be done safely. Co-workers are not expected to fight fires.
- C. Upon arrival of firefighting authorities, all staff must cooperate and defer to their authority.
- D. If you smell smoke but are unable to determine the source and do not see smoke or fire, report it to the Switchboard by dialing 7777.

E. **Code Red Response**

- 1. When a Code Red is announced, all personnel will return to their assigned area to implement departmental assignments. Departments with no specific assignments will assist where instructed by Incident Command.
  - a. The overhead announcement heard for a Code Red is:  
  
ATTENTION! CODE RED! CODE RED! (Location of suspected fire) Repeat CODE RED in Progress (location of suspected fire)
- 2. Fire Response Team will:
  - a. Take the first accessible portable fire extinguisher to the fire location;
  - b. Determine feasibility of fighting fire with available equipment or escalate response if necessary;
  - c. Assist the Fire Department as directed by Fire Department Officer; and
  - d. Assist in evacuation as directed by Incident Command.
- 3. Administration – CEO/COO or designee will:
  - a. Activate Hospital Incident Command System (HICS) in the event the First Response Team has determined an uncontrollable fire has developed; and
  - b. Refer to Emergency Operations Plan (EOP) for a fire situation.
- 4. Plant Operations will:
  - a. Respond to fire as Fire Response Team;
  - b. Assist the nursing staff with medical gas shut offs, as directed by Respiratory Therapy and nurse manager; and
  - c. Assist the Fire Department as directed.
- 5. Patient Care Units:
  - a. Nurse Manager will compile a list of patients and determine the best method of their transfer;
  - b. Nursing supervisor will collect the patient lists;
  - c. Nursing personnel will prepare to relocate the patients/visitors and then evacuate, if determined by Incident Command; and
  - d. Nurse Manager or designee will coordinate with Respiratory Therapy if the need to turn off gases or other non-life support equipment arises.
- 6. Respiratory Therapy will:
  - a. Coordinate with the Charge Nurse of the unit if the need to turn off gases and other related equipment not essential to patient life support is necessary.
- 7. Security will:
  - a. Respond to fire as members of the Fire Response Team;

- b. Meet the Fire Department at the designated arrival location;
  - b. Assist in firefighting efforts until the Fire Department arrives;
  - c. Assist in evacuations if deemed by Incident Command; and
  - d. Keep the Incident Commander advised of current situation.
8. Switchboard Operator will:
- a. Notify the Plant Operator and Security Officer on duty of the alarm location;
  - b. Confirm with First Response Team whether fire department has been dispatched or whether fire is a false alarm.
  - c. Page additional instructions as directed by Incident Command; and
  - d. Follow directions from Incident Command.

F. **Response to Fire Not in the Immediate Area**

- 1. Close all doors; and
- 2. Stay aware of the fire situation.

G. **Evacuation**

- 1. A Defend-in-Place practice is used for evacuations;
- 2. Incident Command will implement the evacuation plan as part of the Emergency Operations Plan if needed.
- 3. Department directors and managers are responsible for accountability of all co-workers in their area(s). Unless performing an Incident Command position, co-workers will stay in their department until the order to evacuate is received.

H. **All Clear**

- 1. The “Code Red - All Clear” announcement can be directed by responding Fire Response Team if the fire is unfounded or the situation no longer presents a danger. In the event a hospital Incident Command System is set up they will issue the All Clear.
  - a. When the Code Red is over, the Fire Response Team will notify the Switchboard Operator to activate the All Clear message.
  - b. Co-workers may return to their normal duties.
  - c. Firefighting equipment and doors will be returned to their normal position.

I. **Code Red: Business Occupancies and Outbuildings**

- 1. In the event of a fire alarm activation at a SJ/C location not in the main Hospital, the facility will perform a full evacuation and follow direction from the Fire Department.
- 2. SJ/C business occupancy properties on campus include:

<b>Candler Campus</b>	<b>St. Joseph's Campus</b>
Heart & Lung Building Professional Office Building Lewis Cancer Research Pavilion Information Systems Data Center Home Health Building Medication Management Bluffton Campus	Danny Brown Building Outpatient Surgery Center Riley Building Mercy Convent Human Resources Occupational Health Outpatient Lab Pooler Campus

3. All buildings occupied by SJ/C co-workers will be subject to evacuating upon fire alarm activation.

**J. Clean Agent Fire Extinguisher System Activation**

1. Clean agent systems are located at Candler Hospital in the following areas:

Telecommunications Room  
MRI Power Supply Room  
CT Scan 1  
CT Scan 2  
Information System Data Center

2. In the event of a clean agent system activation, evacuate room and area immediately.
3. Plant Operations, Security, and Fire Department will ensure the fire has been contained and room is evaluated for safety prior to staff re-entry.
4. If you are exposed to halon during or immediately after activation, medical attention is required immediately.

**K. New Co-Worker Orientation Fire Training**

1. All new co-workers are required to attend General Orientation upon the start of their employment which includes the following fire training and education:
  - a. RACE procedures;
  - b. Code Red/Use and function of the alarm system in the hospital;
  - c. Procedures all personnel will follow to contain smoke and fire through building compartmentalization; and
  - d. Defend-in-Place.

**L. Department Specific Fire Education**

1. Each department will conduct department specific fire training at the beginning of employment and periodically at staff meetings to include (as applicable):
2. How to initiate a Code Red.
3. Primary and alternate exits and fire/smoke compartments to be used in a fire.
4. Specific roles of staff related to fire response.
5. Location and proper use of equipment for transporting patients between fire/smoke compartments.
6. Location and proper use of fire-fighting equipment, pull-stations, fire/smoke compartments and other important fire related equipment within the department.

7. Specific departmental responsibilities in preparation for evacuation.
8. Anything that makes the department unique from a life safety standpoint (chemicals, flammable liquids, special patient's needs).

**M. Computer Based Learning Fire Training**

1. All co-workers are assigned an annual Fire Safety CBL.

**N. Fire Drills**

1. SJ/C performs fire drills as prescribed by NFPA and Joint Commission
  - a. Ambulatory Care facilities quarterly fire drills
  - b. Business Occupancies perform annual fire drills
  - c. Hospitals one per shift per quarter fire drills
  - d. Anesthetizing locations annual surgical exit drill for Operating Rooms/Surgical suites. Focusing on prevention, as well as simulated extinguishment and evacuation
  - e. Hyperbaric locations annual fire drill that includes recording the time to evacuate all persons from the area, and focuses on prevention, as well as simulated extinguishment and evacuation.
2. During the fire drill, co-workers will be presented with an unannounced fire situation, in which they will use this plan and department specific needs to ensure the safety of their patients. Staff understand and know that they need to treat drills like real life scenarios in order to be prepared for an emergency. The Life Safety Officer will provide education including RACE, PASS and Defend-in-Place.
3. SJ/C utilizes the Lion Bullseye Digital fire extinguisher system to enhance and reinforce fire extinguisher training which utilizes a digital extinguisher to put out a fire on a monitor. The system tracks and monitors allowing the Life Safety Officer to control a fire situation based on the location.

Approved:



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Signature

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