Fire Alarm and Incident Response Policy

Definitions

**ALL CLEAR:** A signal that indicates that the incident has been resolved and departments may return to normal operations. The signal may be given by: Environmental Health and Service – Occupational Safety and Fire Prevention (EHS-OS&FP), UTMB Campus Police or the Galveston Fire Department (GFD).

**ANCILLARY HEALTHCARE:** An area not connected to the direct care of patients located in a healthcare building. Examples include administrative offices, cafeterias, coffee shops, chapels and gift shops.

**AREA ALARM LEADER:** A person assigned to be responsible for an area during a fire alarm. In healthcare areas, the Area Alarm Leader will generally be the unit charge nurse. In non-healthcare areas, the Area Alarm Leader may include supervisors, area administrators or any person likely to be in the area the majority of the time. An Alternate Area Alarm Leader should be assigned to stand in during the absence of the primary leader. Any one department may have multiple Area Alarm Leaders.

**FIRE ALARM:** Any fire alarm system activation to which all personnel respond. This may include fire drills, system malfunction, system maintenance/testing or accidental activation.

**FIRE DRILL:** Any scheduled fire alarm activation to practice the appropriate response to a fire alarm, including any other scheduled activation of the fire alarm system as approved by Environmental Health and Service – Occupational Safety and Fire Prevention (EHS-OS&FP).

**FIRE INCIDENT:** Any unscheduled activation of the fire alarm system upon detection of smoke, fire, and smell of gas, electrical fire, or other burning odors. May include, but is not limited to, accidental activation, system malfunction and activation of devices linked to other building protective systems.

**HEALTHCARE OCCUPANCIES:** Occupancies used for purposes such as medical or other treatment and care of persons of all ages suffering from physical or mental illness, disease, infirmity or convalescents.
IN-PATIENT HEALTHCARE: Occupancies that provide sleeping facilities and are occupied by persons who are mostly incapable of self-preservation due to age, physical or mental disability, or due to security measures not under the control of the occupants. Inpatient healthcare occupancies are located in John Sealy Annex, John Sealy Hospital, TDCJ Hospital, Waverly Smith Pavilion and Trauma Center.

OUTPATIENT HEALTHCARE: Occupancies which provide services with no sleeping facilities and are occupied by persons who are mostly capable of self-preservation. Outpatient healthcare occupancies are located in McCullough Building, Clinical Sciences Building, UTMB Health Clinics Building, Primary Care Pavilion and all other clinics.

P.A.S.S. CONCEPT (TO USE A FIRE EXTINGUISHER)

1. **Pull** the pin. This unlocks the operating level and allows you to discharge the extinguisher.
2. **Aim** low. Point the extinguisher nozzle or hose at the base of the fire.
3. **Squeeze** the level below the handle. This discharges the extinguisher agent.
4. **Sweep** from side to side, moving carefully toward the fire. Keep the extinguisher aimed at the base of the fire and sweep back and forth until the flames appear to be out. Watch the fire area to see if the fire reignites.

PRIVATE MODE ANNOUNCEMENTS: These are fire alarm announcements using coded messages to communicate the activation of the fire alarm system and other information such as location. This type of coded announcement is designed to alert just the appropriate staff in order to effect the proper emergency response without causing undue disruption to patients. Private mode announcements are only used in inpatient areas. Typically the coded announcement follows the format: “Dr. Red to John Sealy Hospital, 3rd floor, with the building and location changing as applicable.

R.A.C.E. CONCEPT (FOR FIRE ALARM RESPONSE)

1. **Rescue** anyone in immediate danger.
2. **Alarm** the building occupants and UTMB Police by calling the fire phone at Extension 21211 and activating the closest fire alarm pull station located by each stairwell entrance door or exit door. Be prepared to give your name, title, extension number,
Definitions, continued

3. **Contain or Confine** the fire or smoke by closing doors and windows. Do not lock doors.

4. **Extinguish or Evacuate** the building as defined in this plan.

Return to normal operations after an “all clear” has been given by approved personnel.

**SPECIALIZED AREAS**: An area that operates under unique conditions due to the contents of or processes performed there. These areas shall be so designated by EHS-OS&FP.

**Policy**

UTMB is committed to creating and maintaining an environment that is safe. To that end, all employees, contract workers, students, patients, licensed independent practitioners, visitors and volunteers of UTMB hospitals and clinics are required to participate in fire safety practices. This policy is designed to improve fire safety awareness at UTMB and meet the requirements set forth by The Joint Commission (TJC) The policy clearly defines the required procedures for fire alarm and incident response in all buildings owned or leased by UTMB.

**Roles and Responsibilities**

**Alarm Area Leaders**:

1. Ensure that all new employees attend the mandatory fire segment of the New Employee Orientation as scheduled and required by Human Resources.
2. Responsible for area-specific training and written fire alarm response policies.
3. Designates specialized roles for the area, including Area Alarm Leader.

**Employees**:

1. Responds to all fire alarms in an appropriate manner and knows their individual role and responsibility in such occurrences.
2. Knows the RACE concept and its appropriate use
3. Knows the fire phone telephone number (Extension 21211)
4. Knows the location and operation of manual fire alarm pull stations
5. Knows how to report to the Area Alarm Leader for direction
6. Is familiar with written departmental procedures for fire alarm response.
Roles and Responsibilities, continued

Written Departmental Fire Alarm Response Plan

Every UTMB department is required to have a written departmental fire alarm response plan on file with EHS – OS&FP. The written departmental fire response plan shall be reviewed annually. Assistance in writing policies is available through EHS – OS&FP.

Fire Alarm Response

Upon activation of the fire alarm, occupants shall:

Ancillary Patient Care Areas:
1. Prepare the building for evacuation by closing all doors and clearing hallways and corridors of all obstructions that may include but are not limited to chairs, boxes, carts and beds
2. Follow any special department procedures
3. Cease operations and evacuate the building
4. Proceed to the rally point for your area and check in with the Alarm Area Leader
5. Return to normal operations after all clear has been given

NOTE: Food service areas or other special occupancies may deviate from some of the requirements of this provision by filing a written department—specific fire alarm response plan with EHS – OS&FP

Healthcare Occupancies (in-patient and out-patient):
1. Close all doors and clear corridors
2. Report to the Alarm Area Leader for further directions
3. Maintain a state of heightened awareness
4. Follow any special department procedures
5. Return to normal operations after an all clear has been given

Non-healthcare Occupancies
1. Close all doors
2. Follow any departmental specific procedures
3. Evacuate the building
4. Proceed to the rally point for your area and check in with the Alarm Area Leader or their designee

Specialized Areas:
1. Alarm Area Leader implements their department specific response

NOTE: If an employee is in a work area outside of their department during a fire alarm, he/she should report to the Area Alarm Leader, area supervisor, charge nurse or department head for assignments.
Fire Alarm Response, continued

General Fire Incident Response:

Any occupant of a building owned or leased by UTMB shall follow the RACE concept upon discovery or evidence of a fire.

Healthcare Occupancies (In-patient and Out-patient):

- “Defend in place”
- Determine the location of the fire or smoke
- Alarm Area Leader activates RACE
- Close all doors and clear all corridors
- Follow any departmental specific procedures
- Inform patients and visitors of incident status
- Prepare for a possible evacuation
- Return to normal operations after an all clear has been given

NOTE: Occupants of the Primary Care Pavilion will evacuate according to written departmental fire response plans while ensuring that visitors do not remain in the building.

Ancillary Patient Care Areas and Non-healthcare Occupancies:

1. Determine the location of the fire or smoke
2. Alarm Area Leader activates RACE
3. Communicate incident status to personnel in the immediate and immediately adjacent areas
4. Follow any departmental specific procedures
5. Evacuate the building, proceed to the rally point for your area and check in with the Alarm Area Leader or their designee
6. Return to normal operations after an all clear has been given.

Specialized Areas:

1. Determine the location of the fire or smoke
2. Alarm Area Leader activates the RACE concept
3. Communicate incident status to personnel in the immediate and immediately adjacent areas
4. Area implements their department specific response plan as appropriate
5. Return to normal operations after an all clear has been given
Evacuation

Healthcare Occupancies and Specialized Areas:
Evacuation is appropriate in two situations:

1. **Imminent Danger Evacuation:** An evacuation performed to remove a person from the immediate source of danger. This usually occurs while other personnel are utilizing RACE concept. The hazard may include, but is not limited to, smoke and/or flames.

2. **Precautionary Evacuation:** An evacuation performed to expand the safe zone around an existing source of danger. The hazard may include, but is not limited to, fire emergencies on other floors within the same structure or on the same floor in connected buildings.

3. **Health Systems Administration** will order evacuations of healthcare occupancies. A specialty area representative will order evacuations of specialty areas. The area supervisor or designee shall coordinate the evacuation of specialty areas when so ordered. Such evacuations shall be ordered upon the mandate of the representatives from the Galveston Fire Department, UTMB Environmental Health and Safety Department, or UTMB Police Department.

Non-Healthcare Occupancies:
Evacuation of the building shall occur for each incident. If any departmental specific procedures exist, evacuation shall occur immediately following the completion of said procedures. **In all situations, follow all departmental-specific procedures.**

Fire Incident Reporting

**Standard Incident Reporting Procedures:** At the time of the fire incident, the appropriate Fire Alarm Response Report will be completed by:

1. the Alarm Area Leader
2. the responding officer of the UTMB Police Department
3. the responding personnel for FOAM Maintenance
4. the responding representative of EHS-OS&FP

**Standard Incident Reporting Procedures**
At the time of the fire incident, the appropriate Fire Alarm Response Report will be completed by the Area Alarm Leader, the responding
Fire Incident Reporting, continued

officer of the UTMB Police Department, the responding personnel for Business, Operations and Facilities (BOF) Maintenance and the responding representative of EHS – OS&FP.

During regular working hours reports from BOF Maintenance, UTMB Police and the Area Alarm Leader shall be sent to UTMB Police Dispatch, EHS – OS&FP representative shall then collect all written reports during regular working hours at the beginning of the next business day.

After hours, weekends, or holidays:
1. BOF Maintenance representative: leave the report at the Control Office of BOF-Utilities Plant.
2. UTMB Police representative will leave the report at the UTMB Police Department administrative offices.
3. Alarm Area Leader will forward the original report to EHS-OS&FP.
4. EHS-OS&FP representative will collect all written reports at the beginning of the next business day following the incident and forward a copy of the Alarm Area Leader’s written report to the area’s department head.

Additional Incident Reporting Procedures:
EHS-OS&FP will generate a written report within 8 working hours of a fire emergency if one of the following conditions occurs: a death, an injury or damage over $1,000. Copies of this report will be sent to the Program Director of EHS-OS&FP (UTMB Institutional Safety Officer), Chief of the UTMB Police Department, Chair of the Environment of Care Committee and Chair of the Life Safety Subcommittee.

If the incident occurs in a healthcare occupancy, a copy of the report will also be sent to the Medical Director for Inpatient Care, Hospital Executive Director, Hospital Administrator, Chair of the Environment of Care Committee and Chair of the Life Safety Committee.

Fire Drills and Response

EHS – OS&FP will conduct required fire drills in all areas of all buildings on a regular and scheduled basis to meet requirements of the National Fire Protection Association (NFPA) and TJC.

Healthcare Occupancies – Inpatient, Outpatient and Ancillary
1. Once per quarter, per shift
Fire Drills and Response, continued

2. 50% required to be announced
3. In healthcare areas, fire drills will not occur during shift changes and will not involve movement of patients.

Non-healthcare Occupancies
1. Annually
2. Unannounced

Specialty Areas:
1. On a periodic basis
2. Scheduled with the full cooperation of the area to ensure minimal disruption to the area

All Occupancies:
1. On a schedule deemed necessary by EHS – OS&FP to comply with Interim Life Safety Measures (ILSM) implementation

Quarterly fire drill reports and training issues will be reported to the UTMB General Safety Committee, the Environment of Care Committee and the Life Safety Subcommittee.

References
- The National Fire Protection Association (NFPA)
- The Joint Commission (TJC)
- *UTMB Emergency Preparedness Plan*