I. Title
   Fire Alarm and Incident Response Policy

II. Policy
   UTMB is committed to creating and maintaining a safe environment. To that end, all employees,
   contract workers, students, patients, licensed independent practitioners, visitors, and volunteers of
   UTMB hospitals and clinics are required to follow emergency response procedures, participate in fire
   safety drills and follow the direction of emergency responders. This policy is designed to improve fire
   safety awareness at UTMB and meet the requirements set forth by The Joint Commission (TJC) and the
   Texas State Fire Marshal’s Office (SFMO). The policy clearly defines the required procedures for fire
   alarm and incident response in all buildings owned or leased by UTMB.

III. Roles and Responsibilities
   Department Heads:
   1. Shall ensure that all new employees complete the fire safety training segment of the New
      Employee Orientation as scheduled and required by Human Resources as well as having
      existing employees complete required, periodic refresher training.
   2. Shall be responsible for area-specific training and the completion of departmental, written
      fire alarm response plans.
   3. Designates specialized roles for the area, including Area Alarm Leader.

   Employees:
   1. Shall respond to all fire alarms in an appropriate manner and know their individual roles
      and responsibilities during alarm events (i.e. drills and actual alarms).
   2. Know the R.A.C.E concept and its appropriate use
   3. Know the phone numbers to call in case of a fire (21211 in Galveston, 911 at League City
      or 33333 at ADC)
   4. Know the location and operation of manual fire alarm pull stations
   5. Know how to report to the Area Alarm Leader for direction
   6. Are familiar with their written, Departmental Fire Alarm Response Procedure.
   7. Are familiar with the P.A.S.S. concept to use a fire extinguisher.

   NOTE: If an employee is in a work area outside of their department during a fire alarm, he/she
   should either: a) report to the local Area Alarm Leader, area supervisor, charge nurse, or
   department head for assignments, or b) evacuate the building as appropriate.
Written Departmental Fire Alarm Response Plan

Every UTMB department is required to have a written departmental fire alarm response plan. The written departmental fire response plan shall be reviewed annually by the department. Assistance in writing departmental plans is available through EHS – Fire and Life Safety (FLS), including providing templates and older versions of departments’ plans.

Initial Fire Alarm Response Guidelines for Occupants and Staff

Initial fire alarm response guidelines differ depending on the “occupancy type” of the building. Occupancy types are defined by the NFPA and this document. These guidelines are for planning and, depending on conditions may not reflect the best response to any given fire. Generally, occupants in healthcare areas “defend-in-place”, high-rise occupants perform “staged evacuations” and other occupancies simply evacuate.

Upon first alarm or discovery of a fire, occupants of a building owned or leased by UTMB shall follow their Departmental Fire Alarm Response plan and the RACE concept. Occupants must make alerting first responders and building occupants their first priority. Occupants and staff shall not enter a building with an active fire unless authorized to do so by first responders (e.g. assisting in the evacuation of patients).

Within Healthcare Occupancies (in-patient) and clinics inside High-Rise buildings, “Defend-in-place” by:

1. Preparing the area for evacuation by closing all doors and clearing corridors
2. Following any special department procedures outlined in the Departmental Fire Alarm Response Plan
3. Staff shall ensure that visitors to the area are instructed to either leave the building, stay with the visited patient or report to a waiting room for further instructions.
4. Report to the Area Alarm Leader for further directions
5. Maintain a state of heightened awareness
6. Follow any special department procedures
7. Return to normal operations after an all clear has been given

Notes:

- Private mode announcements (aka Dr. Red announcements) will be made within in-patient areas to alert the appropriate staff of the emergency without undue disruption to patients.
- Automatic alarms within high rise buildings will only be made on the floor of event, the floor above and the floor below. Occupants on other floors may not hear these automatic alarms. When an evacuation is ordered or important information is to be provided, all floors will be alerted.
- 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 – FLS.

Within Non-High Rise Business Occupancies (clinics and other out-patient areas), Evacuate by:

1. Closing all doors and clearing corridors
2. Following any special department procedures outlined in the Departmental Fire Response Plan

Note: “Special departmental procedures” may include NOT evacuating patients, when attended to by a clinician. The written Departmental Fire Response Plan must reflect this. Actual evacuation of patients is not required nor desired during regular, planned fire drills.
3. Reporting to the Area Alarm Leader for further directions
4. Maintaining a state of heightened awareness
5. Following any special department procedures
6. Returning to normal operations after an all clear has been given

Within all other Non-High Rise Buildings, Evacuate by:
1. Closing all doors
2. Following Departmental Fire Alarm Response Plan
3. Evacuating the building
4. Proceeding to the rally point for your area and check in with the Area Alarm Leader or their designee

Within High Rise Buildings, Perform Staged Evacuation by:
1. Closing all doors
2. Following Departmental Fire Alarm Response Plan
3. Proceeding to the nearest stairwell and await instructions delivered via fire alarm system
4. Evacuate to their rally point outside should conditions be self-evident of the need (i.e. any indication of fire such as smoke). Do not wait to be instructed to do so.

Within Specialized Areas, not listed above:
1. Area Alarm Leader implements their Departmental Fire Alarm Response Plan, as appropriate and approved by EHS, F&LS.
2. Return to normal operations after an all clear has been given.

All Clear Notifications
Emergency responders will investigate the scene, determine the cause of the alarm and make the determination that it is safe to clear the scene. The official ‘All Clear’ announcement may be given by Property Services, UTMB F&LS or the local fire department.

Guidelines for UTMB Personnel Responding to a Fire Emergency
These guidelines are intended to be general, broad instructional guidelines for first responders as conditions associated with any given emergency will vary and flexibility of response actions must be allowed for effectiveness. These guidelines do not apply to leased, off-campus facilities (i.e. facilities not at Galveston, League City nor Angleton Danbury Campuses).

Upon First Alarm/Alert:
Upon receipt of first alarm (typically automatic via fire alarm network), Campus Police Dispatch will notify the following groups:
1. Local 911 dispatch for the campus served
2. Other responders (e.g. EHS, Property Services, etc.) via radio page-out as applicable
3. The UTMB Call Center (2-4040);
   a. Police Dispatch will relay the alarm details to the Call Center
   b. the Call Center will notify Property Services personnel

The following persons will report to the Fire Alarm Annunciator Panel, typically located in the lobby of each building:
1. Property Services, in order to;
   a. Provide technical assistance with utilities
   b. Provide limited fire alarm panel operation
   c. Where EHS is not on scene provide building messaging over fire alarm panel
2. Local Fire Department
3. Environmental Health and Safety, Fire and Life Safety (EHS-FLS) when on-site, during business hours only in order to:
   a. Provide comprehensive fire alarm system support
   b. Provide comprehensive messaging across fire alarm/mass notification systems

Campus Police will mobilize in order to help investigate the cause of the alarm. They will be assisted by Property Services and EHS-F&LS. If an actual fire incident is discovered, Campus Police will provide scene control, provide public safety and maintain communication with Police Dispatch.

Upon Verification of a Fire Event
Upon verification of an actual fire event;
1. Campus Police Dispatch will notify the Call Center (2-4040), with a second phone call validating the event and providing additional details, such as location of first responders’ meeting location, etc. as applicable.
2. Call Center will notify the following persons of the event:
   a. Property Services personnel for the building
   b. Clinical Operations Administrator, or equivalent, if the building is a healthcare building
   c. Emergency Medical Services (EMS) Coordinator, if the building is a healthcare building
   d. Business, Operations and Facilities (BOF) Executive on-call
   e. EHS on-call
   f. BOF Director and others on the call-down list provided to the Call Center
3. The above referenced persons will meet the first responders (GFD, LCFD, AFD, etc.) in a safe location at the affected building. Typically, this will either be at the fire alarm annunciator panel or in front of the lobby of the affected building. This location will be considered the Operational Command Post for the incident. Information on the location will be provided by the Call Center from Campus Dispatch.
4. The above referenced responders will provide assistance to the fire department with items including:
   a. Providing information such as census of patients, where applicable
   b. Providing information on acuity of patients and occupant status
   c. Giving direction to UTMB personnel to assist in resource allocation to response activities, such as directing departments to evacuate patients from affected areas to other areas appropriate to the patient profile and numbers.
   d. Where EHS is capable of responding, they shall make overhead announcements, such as:
      i. Evacuation notifications
      ii. “Prepare to receive patients” notifications
      iii. All-clear announcements
      iv. Other mass notification announcements as appropriate

Note: Where time permits, all mass notification scripts shall be cleared for content and wording through the UTMB Incident Command Center (ICC). All-Clear announcements will typically be excluded from this process.

5. Campus Police will establish communication with the first responders at the Operational Command Post.
6. Should EHS not be on-scene and mass notification announcements need to be made urgently, Campus Dispatch will be able to make these announcements with verbiage approved through UTMB leadership (program director or higher). Pre-approved scripts will be supplied by EHS-F&LS. At the League City Campus and Angleton Danbury Campus, announcements
will be made by the local responders via the fire alarm system or overhead paging system as appropriate.

Transition to Institutional Emergency Response Plan
As the event develops, UTMB will execute its Emergency Operations Plan and the UTMB Institutional Command Center (ICC) will be established. At this point, the COA and others will report to the ICC leaving a representative to interface with fire department responders in the field. See the UTMB Emergency Operations Plan for details.

Evacuation Process
Healthcare Occupancies and Specialized Areas:
Health Systems Administration will order evacuations of healthcare occupancies. The area supervisor or designee will coordinate the evacuation of their areas when instructed to do so. Such evacuations may also be ordered upon the mandate of the representatives from the local fire department, UTMB Environmental Health and Safety Department, or UTMB Police Department in the absence of senior Health Systems Administration personnel during rapidly evolving events. Evacuation is appropriate in situations such as:

- **Imminent Danger Evacuation:** An evacuation performed to remove a person from the immediate source of danger. The hazard may include, but is not limited to, smoke and/or flames.
- **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.

Non-Healthcare Occupancies:
Evacuation of the building shall occur for each incident. Where additional Departmental Fire Alarm Response Plans exist, evacuation shall occur immediately following the completion of the procedures.

Post-Incident Activities
Fire Incident Reporting
At the time of the fire incident, the appropriate Fire Alarm Response Report will be completed by the following persons (electronic format preferred):

1. the Area Alarm Leader
2. the responding representative of EHS-FLS

Additional Incident Reporting Procedures
EHS-FLS will generate a written report within 8 working hours of a fire emergency if one of the following conditions occurs: an actual fire, a death, an injury or damage of any significance. Copies of this report will be sent to the Program Director of EHS-FLS, the 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 and the Hospital Administrator.

Fire Drills and Response
Required fire drills will be conducted in all areas of all buildings on a regular and scheduled basis to meet requirements of the National Fire Protection Association (NFPA) and TJC. Drills may be conducted by EHS or by occupants of outlying facilities such as clinics. Quarterly fire drill performance reports and training will be reported to the UTMB Life Safety Subcommittee and the Environment of Care Committee.
Healthcare Occupancies – Inpatient, Outpatient, and Ancillary Areas: Frequency
1. Once per quarter, per shift
2. 100% required to be un-announced (when the drill is alarmed, it may be announced at that time)
3. In healthcare areas, fire drills will not occur during shift changes nor involve moving patients.

Non-healthcare Occupancy: Frequency
1. Annually and shall typically be unannounced

All Occupancies:
1. On a modified schedule to comply with Interim Life Safety Measures (ILSM) implementation.

IV. Definitions

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.

Business Occupancies: These are all other types of buildings not listed above, for the purposes of this procedure. The defining characteristics of Business Occupancies is that all of the occupants are capable of self-preservation and evacuation when ordered to do so.

Healthcare Occupancy: These are entire in-patient buildings or entire floors of in-patient buildings where 4 or more occupants are admitted on an in-patient basis for healthcare. Additionally, buildings that provide routine access/services to any number of in-patients that are rendered incapable of self-preservation are defined as a Healthcare Occupancy.

High-Rise Occupancy: These are buildings that are 75 feet in height to the highest floor plate of a building. They will additionally be either Business, Healthcare or other type of occupancy.

Operational Command Post: a temporary location for on-scene incident command and management of an emergency event. Typically, the operational command post is located at or in the immediate vicinity of the incident site and is the focus for the conduct of direct, on-scene control of tactical operations. As the situation develops, operations will eventually transfer to the institutional Incident Command Center as the immediate event response is complete and the situation is under control.

P.A.S.S. concept: How to use a fire extinguisher: Pull the pin; this unlocks the extinguisher. Aim low; point the extinguisher nozzle at the base of the fire. Squeeze the lever below the handle; this discharges the extinguisher. 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.

Private Mode Announcements: These are fire alarm announcements using coded messages to communicate the activation of the fire alarm system and its location. This type of announcement is designed to just alert staff in order to effect the proper emergency response without causing undue disruption to patients. Private mode announcements are only used in inpatient areas. The typical format is: “Dr. Red to John Sealy Hospital, 3rd floor”, with the building and location changing as applicable.

R.A.C.E concept: Concept for fire alarm response: Rescue anyone in immediate danger. 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, location and the extent of the fire. Contain or
Confine the fire/ smoke by closing doors and windows. Do not lock doors. Extinguish or Evacuate the building, as appropriate.

V. Related UTMB Policies and Procedures
UTMB Emergency Operations Plans

VIII. Additional References
The National Fire Protection Association (NFPA)
The Joint Commission (TJC)

IX. Dates Approved or Amended

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X. Contact Information
For more information, please contact:
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