

MEDICAL UNIVERSITY OF SOUTH CAROLINA (MUSC)

**FIRE /LIFE SAFETY
FIRE REACTION PLAN**

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SECTION I

GENERAL INFORMATION

A. Preface

The threat of fire should concern each of us at all times. Reducing this threat is possible only with the full cooperation of each faculty member, employee and student. Practicing good housekeeping, inspection of electrical equipment and maintaining the minimum required amount of combustible materials, flammable liquids and hazardous substances on hand can be effective. However, the safety of patients, visitors, fellow employees and yourself may depend upon your knowledge of the fire plan procedures and expedient action during an emergency.

B. Abbreviated Fire Procedures

1. Remove anyone from immediate danger.
2. Ensure all doors are closed.
3. Activate the fire alarm.
4. Call the operator to report a fire.
5. Try to fight the fire.

C. Medical University Fire Marshall Responsibilities

The Director of University Risk Management is designated as the Medical University Fire Marshal and is assigned the following duties:

1. Appoint one or more deputy Fire Marshals.
2. Coordinate all fire safety activities for MUSC.
3. Keep the MUSC Vice President for Finance & Administration and the Hospital Executive Director advised as to the status and efficiency of fire prevention, alarm and

extinguishing systems.

4. Conduct fire safety inspections of all facilities, including all fire fighting equipment. Ensure the recording and correction of all deficiencies indicated. Forward inspection reports to the Hospital Environment of Care committee.
5. Continuously ensure that fire prevention practices are being followed.
6. Initiate and assist the appropriate Medical University Hospital administrative officer with fire drills.
7. Report to the MUSC Vice-President for Finance and Administration any fire hazard which cannot be corrected by available MUSC resources.
8. Make recommendations to the MUSC Vice-President for Finance and Administration concerning improvements in fire safety.
 - a. Investigate fire damage and advise the appropriate Medical University Hospital Administration officer of areas which must be removed from service because of electrical, ventilation or structural damage.

D. Do's and Don'ts of Fire Prevention

- DO Keep your working area free from debris.
- DO Report unsafe equipment and conditions.
- DO Exercise care in use of all equipment.
- DO Be careful when working around or with flammable gases and liquids.
- DO Properly store flammable materials.
- DO Learn locations of fire fighting equipment and manual alarm pull boxes. Know how to use them.

- DON'T Put oily clothes or rags in closets or cabinets.
- DON'T Let rubbish accumulate in your working area.
- DON'T Use decorations, curtains or drapes that are not made of fire resistant or fire retardant material.
- DON'T Use elevators during a fire emergency. You may be trapped if power fails or the elevator may deliver you to the scene of the fire.
- DON'T Chock, wedge or tie doors in the open position.
- DON'T Leave any cooking (including microwave cooking) unattended.

E. Types of Fire Extinguishers and Uses

1. It is important that the correct extinguisher be used on a particular fire. Fires are classified as “A”, “B”, or “C”, depending upon the materials on fire.

a. **Pressurized Water (Combustible Fires)**

A large silver vessel filled with 2-1/2 gallons of water under pressure. Use on Class “A” fires involving ordinary combustibles such as wood, paper, cloth, or anything with an ash residue. Do not use water on burning liquid or electrical fires.

b. **Carbon Dioxide (Flammable Liquid and Electrical Fires)**

Carbon dioxide (CO₂) fire extinguishers are red and are equipped with a horn for discharging the agent. Sizes range from 5 to 15 lbs. Use on Class “B” (flammable liquid) or Class “C” (electrical) fires. Carbon Dioxide extinguishers are very loud and become extremely cold when used.

c. **Dry Chemical (Combustible, Flammable Liquid and Electrical Fires)**

Dry chemical extinguishers are normally red; however, a few are gold colored. Most have a hose, but some only have a nozzle. Use on Class “A”, “B”, and “C” fires. ABC extinguishers contain a fine powder which can be very messy.

d. **Specialized Fire Extinguishers**

1. Type “K”: Filled with a wet chemical and designed for use in commercial kitchens. They are located in areas where grease laden vapors are produced.
2. Water Mist: Placed in operating suites to minimize affects to patients from CO₂, dry chemical or normal water agents.

2. **To operate Fire Extinguishers**

- a. P - Brace the top of the cylinder with one hand and Pull the safety Pin with the other hand.
- b. A - Aim at the base of the fire and
- c. S - Squeeze the handle to discharge the agent.
- d. S - Use a side to side sweeping motion.

Learn the location of all fire extinguishers in your area. It may take more than one extinguisher to put out a fire.

F. Fire/Smoke Barrier Policy

1. To maintain the integrity of all fire/smoke walls and barriers, it is imperative that all employees or contractors planning to penetrate any barrier with piping, cable, lines, ductwork, etc. must notify the appropriate building engineer prior to start of project
2. All penetrations into and protrusions out of fire/smoke barriers must be sealed with an approved Underwriters Laboratory or Factory Mutual listed fire stopping material or system.

SECTION II

Ashley River Tower

Courtney Street Campus

DETAILED FIRE PLAN PROCEDURES

Personnel in areas that are not designated as defend in place or not in direct care of patients shall evacuate the building upon activation of fire alarms, notification of a fire or instructed by emergency response personnel.

A. Responsibilities of Persons Discovering Fire

1. Remove occupants. For a fire discovered in any area, the first responsibility is to save occupants in immediate danger. Refer to the Unit Specific Plan where appropriate.
 - a. Supervisory personnel at the scene should determine whether to remove occupants or have them remain in the rooms with the door closed. Visitors should remain with patients.
 - b. Non-ambulatory Patients. Don't waste time obtaining a stretcher or wheelchair. Move the patient out of bed onto a sheet or blanket on the floor and drag them to safety in the corridor just outside the room. (Special care unit patients who cannot be moved any other way may be relocated in beds)
 - c. Ambulatory Patients. Wrap the patients in a blanket and lead them through the corridor to a safe location beyond a smoke barrier door.
2. Ensure all doors are closed. After occupants are removed from immediate danger, or if a fire is discovered where occupants are not in immediate danger, isolate the fire by closing the door of the room involved.
3. Activate the nearest fire alarm. Insert two fingers behind the handle. Pull the handle

forward and down. The fire alarm activates a chime that sounds throughout the building informing hospital personnel of a fire emergency. It also activates the flashing strobe lights, which continue to flash until the fire emergency, fire drill, or test of the fire alarm system is completed. A message will be broadcast over the fire alarm public address system, “Code Red”, and announce the location of the fire (e.g., 6 West). Personnel should close all doors, windows and openings to prevent the spread of smoke and fire and also clear the corridors in case relocation or evacuation becomes necessary. The fire alarm is connected to the City of Charleston Fire Department who will respond normally within 3 minutes.

4. Call the Operator (2-3333 or 911). Be calm and concise to avoid panic. Inform the Operator that you are reporting a fire. Give:
 - a. Exact location of fire or emergency (building, floor, and room number.)
 - b. A brief description of the emergency. Remain on the phone until released by the operator.
 - c. Call back number of phone you are on and your name.
5. Try to fight the fire. The decision to fight the fire with available extinguishing equipment or whether the door to the room containing the fire must remain closed should be made by the senior employee present. If fighting the fire, actions will be under the supervision of the senior employee present. Responsibility for fighting the fire is transferred to the Charleston Fire Department upon arrival.

B. General Responsibilities of All Other Employees

Every employee should assume the following responsibilities when a fire alarm is activated:

1. Determine the location of the fire. An announcement of the location will be broadcast the fire alarm PA system.

2. Close all stairwell and corridor doors.
3. All employees, other than those with specific duties assigned as a part of the fire plan, should close all doors in their area. Remain in your area unless otherwise notified. Do not open smoke barrier doors.
4. Public corridors of the hospital should be cleared of beds, stretchers, carts and all other obstructions (except mayday carts).
5. Remain alert for instructions broadcast over the fire alarm PA system or specific instructions by on-scene emergency personnel.

C. Responsibilities of Department Directors and Supervisors

1. Ensure all personnel are familiar with the material contained in the fire plan and trained in the use of available fire fighting equipment. Document all training of assigned staff on procedures of the Unit Specific Plan.
2. Assume control of any fire emergency occurring in your immediate area of responsibility.
3. If relocation or evacuation of occupants is necessary, horizontal routes leading to adjoining smoke/fire compartments should be used. Use procedures in accordance with Unit Specific Plans. Vertical Evacuation (if necessary) will be ordered by the Fire Chief or senior hospital administrator; or if no other evacuation route is safe, accessible or available.

D. Responsibilities of the Medical University Fire Marshal

The Director of University Risk Management is designated as the Medical University Fire Marshal and is assigned the following duties:

1. Appoint one or more deputy Fire Marshals.

2. Coordinate all fire safety activities for MUSC.
3. Advise the MUSC Vice President for Finance & Administration and the Hospital Executive Director on the status and efficiency of fire prevention, alarm and extinguishing systems.
4. Conduct fire safety inspections of all facilities, including all fire fighting equipment. Ensure the recording and correction of all deficiencies indicated. Submit fire and life safety reports monthly to the Chairmen of the Environment of Care Committee. Report fire and life safety trends analysis semi-annually to the Hospital Environment of Care Committee.
5. Continuously ensure that fire prevention practices are being followed.
6. Initiate and assist the appropriate Medical University Hospital administrative officer with fire drills.
7. Report to the MUSC Vice-President for Finance and Administration any fire hazard, which cannot be corrected by available MUSC resources.
8. Make recommendations to the MUSC Vice-President for Finance and Administration concerning improvements in fire safety.
 - a. Investigate fire damage and advise the appropriate Medical University Hospital Administration officer of areas, which must be removed from service because of electrical, ventilation or structural damage.

E. Responsibilities of Hospital Communications

The Manager for Hospital Communications will ensure all operators are properly trained to respond to all fire/alarm notifications. Separate, additional requirements may be established by the Manager, provided these guidelines are followed:

1. Telephone Notification

This procedure is also implemented as a backup system for occupants in the event of an automated system failure.

- a. Obtain the name, phone number, location and approximate size and type of fire.
Do not place caller on hold.
- b. Determine if the caller has activated a pull box. If not, request they do it immediately. This should activate the annunciator.
- c. After receiving the necessary information, release the caller to proceed with their duties.
- d. Notify Fire Department via “ring-down” phone (or 577-7070) to report the fire or verify that an alarm was received.
- e. Page (Group CODE RED) with highlighted text from the annunciator (or caller information).

If Simon pager system is not operational, notify:

1. Public Safety Dispatcher (2-4196).
 2. Trouble Call Desk (2-5600).
 3. Hospital Administrator/HSC on duty (2-3232)
- f. When an “All Clear” is reported by an appropriate authority, announce over the appropriate MIC: “THE CODE RED (building and location) IS ALL CLEAR. PLEASE RESUME NORMAL OPERATIONS.” (Repeat)

F. DEFINITIONS

ART Code Red Group

This group is the set of employees who will get the code red and all clear pages for the Ashley River Tower fire alarm system.

CEP - Central Energy Plant.

Located at 130 Bee Street, this building houses Facilities Maintenance personnel and a 24 hour call center, hereby known in this policy as CEP Call Center.

Communications

This group handles all communications for staff, patients, and visitors. They have a 24 hour call center hereby known in this policy as Communications Call Center.

Control

This is the University call center that handles trouble calls for all buildings except Ashley River Towers. They have a 24 hour call center hereby known in this policy as the University Call Center.

Third-party UL Certified Call Center

Various State regulatory groups require all hospital fire alarm systems to be monitored by a third-party UL Certified Call Center. For ART, this will be handled by Simplex, hereby known in this policy as **Simplex UL Call Center.**

THE SIMPLEX SYSTEM ACTIONS AND NOTIFICATIONS

- The Simplex System goes into alarm and makes pre-recorded announcement inside ART.
- The Simplex system signals the Keltron System which sends notification to the Charleston City Fire Department.
- Simplex System dials the Simplex UL Call Center will call, in order Charleston City Fire Department.

AND

2-5600 (CEP Call Center), **if no answer;**
2-4119 (University Call Center), **if no answer;**
2-3333 (Communications Call Center)

- Simplex System will access Simon Paging by way of the Email to Page (E2P) software sending a page to the ART Code Red Group.
- After alarm is cleared. Simplex System sends page to ART Code Red Group acknowledging all clear.

THE CEP CALL CENTER ACTIONS AND NOTIFICATIONS

Responsibilities of CEP Call Center Managers

The Manager for CEP Call Center will ensure all operators are properly trained to respond to all fire/alarm notifications.

- The CEP Call Center receives the alarm signal on its Simplex System.
- The CEP Call Center receives a call from the Simplex UL Call Center verifying the alarm.
- The CEP Call Center verifies from a desk pager that the Simon system has sent a page to the ART Code Red Group. If the signal is not received, the CEP Call Center sends a manual page via Simon Web or by calling the Communications Call Center.
- The CEP Call Center contacts the fire department to verify receipt of alarm, and offer any information available on the situation.

ART MAINTENANCE ACTIONS

- Designated individuals on all shifts will respond to the fire command center and meet the fire department at the door
- Designated personnel will respond to the fire scene and offer support to staff and the fire department as directed.
- Once code red is all clear Simplex System shall be reset. If “All Clear” page is not received automatically, contact the CEP Call Center to send out a manual page.

BACKUP PROCEDURES

IN THE EVENT THE SIMPLEX UL CALL CENTER GETS NO ANSWER FROM THE CEP CALL CENTER, THEY WILL CALL THE BACKUP LOCATIONS IN THE FOLLOWING ORDER:

1st Backup - University Call Center (2-4119)

Duties shall be:

- Receive a call from the Simplex UL Call Center verifying the alarm.

- Verify from a desk pager that the Simon system has sent a page to the ART Code Red Group. If the signal is not received the University Call Center sends a manual page via Simon Web. If Simon Web is down contact the Communications Call Center to send out the page.
- Contact the fire department to verify receipt of alarm, and offer any information available on the situation.
- If the Simplex System fails to send out an automated “All Clear” page to the ART Code Red Group, one should be sent out manually.

2nd Backup - Communications Call Center (2-3333)

Duties shall be:

- Receive a call from the Simplex UL Call Center verifying the alarm.
- Verify from a desk pager that the Simon system has sent a page to the ART Code Red Group. If the signal is not received the Communications Call Center sends a manual page.
- Contact the fire department to verify receipt of alarm, and offer any information available on the situation.
- If the Simplex System fails to send out an automated “All Clear” page to the ART Code Red Group one should be sent out manually.

ADDITIONAL INFORMATION

Changes to the ART Code Red Group require the following entities to be notified:

1. Simplex (747-5254)
2. CEP Call Center (792-5600)
3. University Call Center (792-4119)
4. Communications Call Center (792-7992) (Ask for member of Management)

H. Responsibilities of Medical Center Safety, Security and Volunteer Services

The Manager for Medical Center Safety and Security Services will ensure Security personnel are properly trained prior to silencing an alarm to any panel. Medical Center Safety and Security personnel will respond to every alarm activated in the Hospital. When the fire alarm is

activated, a Medical Center Security officer will respond to the fire scene. Another officer will report to the Hospital fire alarm panel and stand-by for further instructions or until relieved by ART Maintenance personnel. The fire scene respondent will investigate for flame, smoke, burning smell, etc. (any indication of the presence of fire). The first respondent must determine if there is:

1. An actual fire emergency
 - If an actual fire/emergency exists, immediately implement the five-step fire plan.
 - Notify the Public Safety Dispatcher via radio of “Actual Code Red.”
2. No fire/emergency
 - If no evidence of a fire is discovered, the responder will immediately notify Public Safety Dispatcher of “no fire/emergency” status via radio.
 - The stand-by officer will silence the alarm.

I. Evacuation/Relocation

1. Immediate Relocation of Patients and Visitors Use procedures in accordance with Unit Specific Plans use procedures in accordance with Unit Specific Plans
 - a. Arrangements to move patients from an area will be under the supervision of the charge nurse.
 - b. Visitors will be asked to stay with the patients they are visiting and to assist in their movement.
 - c. Removal of patient charts and emergency supplies, including oxygen, to the relocation area will be directed by the charge nurse.

2. General Evacuation

- a. The Chief of the Charleston Fire Department (or representative), the senior hospital staff member, or the University Fire Marshal at the scene of the fire, may order and direct evacuation of a specific area within the building. This order will be announced over the fire alarm PA system to the affected areas or relayed by messengers.
- b. Whenever possible, relocation of any area will be directed horizontally to adjacent compartments.
- c. When evacuation must be accomplished vertically, egress will be downward through stairwells. Re-entry will be made at the next safe level below.

NOTE: Building evacuation will be ordered by the Fire Chief only if necessary.

J. Activation of Alarm System

The alarm system may be activated by any of the following means:

1. Manual pull boxes located throughout the hospital.
2. Automatically, by various detection or extinguishing systems in the hospital, (i.e., smoke/heat detectors, duct detectors or flow switches).

K. Fire Drills

Fire drills will be conducted periodically, but at least every quarter for each shift. The date and time for the drills will be set by the Fire Marshal. The Fire Marshal will ensure that a report of the fire drill is completed and forwarded to the Environment of Care Committee.

L. Testing

Testing of the alarm system will be conducted in accordance with NFPA 72 by Engineering and Facilities Department. In all cases, a prior announcement of the test will be broadcast over the

fire alarm PA system: “WE ARE CONDUCTING A TEST OF THE FIRE ALARM SYSTEM. PLEASE CONTINUE WITH YOUR NORMAL ACTIVITIES UNTIL FURTHER NOTIFICATION.” (Repeat). Immediately upon the conclusion of the test, the Alarm shop employee conducting the test will ensure broadcast of the following announcement: “TESTING OF THE FIRE ALARM SYSTEM IS COMPLETE. (Repeat) Upon completion of each test, a “Report of Fire Alarm Test” will be completed and forwarded to the Director of Engineering and Facilities.

SECTION III
TEACHING HOSPITAL
DETAILED FIRE PLAN PROCEDURES

Personnel in areas that are not designated as defend in place or in direct care of patients shall evacuate the building upon activation of fire alarms, notification of a fire or instructed by emergency response personnel.

A. Responsibilities of Persons Discovering Fire

1. **Remove** occupants. For a fire discovered in any area, the first responsibility is to save occupants in immediate danger. Refer to the Unit Specific Plan where appropriate.
 - a. Supervisory personnel at the scene should determine whether to remove occupants or have them remain in the rooms with the door closed. Visitors should remain with patients.
 - b. Non-ambulatory Patients. Don't waste time obtaining a stretcher or wheelchair. Move the patient out of bed onto a sheet or blanket on the floor and drag them to safety in the corridor just outside the room. (Special care unit patients who cannot be moved any other way may be relocated in beds)
 - c. Ambulatory Patients. Wrap the patients in a blanket and lead them through the corridor to a safe location beyond a smoke barrier door.
2. **Ensure** all doors are closed. After occupants are removed from immediate danger, or if a fire is discovered where occupants are not in immediate danger, isolate the fire by closing the door of the room involved.
3. **Activate** the nearest fire alarm. Insert two fingers behind the handle. Pull the handle forward and down. The fire alarm activates a chime that sounds throughout the

building informing hospital personnel of a fire emergency. It also activates the flashing strobe lights, which continue to flash until the fire emergency, fire drill, or test of the fire alarm system is completed. A message will be broadcast over the fire alarm public address system, “Code Red”, and announce the location of the fire (e.g., 6 West). Personnel should close all doors, windows and openings to prevent the spread of smoke and fire and also clear the corridors in case relocation or evacuation becomes necessary. The fire alarm is connected to the City of Charleston Fire Department who will respond normally within 3 minutes.

4. **Call** the Operator (2-3333 or 911). Be calm and concise to avoid panic. Inform the Operator that you are reporting a fire. Give:
 - a. Exact location of fire or emergency (building, floor, and room number.)
 - b. A brief description of the emergency. Remain on the phone until released by the operator.
 - c. Call back number of phone you are on and your name.
5. **Try** to fight the fire. The decision to fight the fire with available extinguishing equipment or whether the door to the room containing the fire must remain closed should be made by the senior employee present. If fighting the fire, actions will be under the supervision of the senior employee present. Responsibility for fighting the fire is transferred to the Charleston Fire Department upon arrival.

B. General Responsibilities of All Other Employees

Every employee should assume the following responsibilities when a fire alarm is activated:

1. Determine the location of the fire. An announcement of the location will be broadcast the fire alarm PA system.
2. Close all stairwell and corridor doors.

3. All employees, other than those with specific duties assigned as a part of the fire plan, should close all doors in their area. Remain in your area unless otherwise notified. Do not open smoke barrier doors.
4. Public corridors of the hospital should be cleared of beds, stretchers, carts and all other obstructions (except mayday carts).
5. Remain alert for instructions broadcast over the fire alarm PA system or specific instructions by on-scene emergency personnel.

C. Responsibilities of Department Directors and Supervisors

1. Ensure all personnel are familiar with the material contained in the fire plan and trained in the use of available fire fighting equipment.
2. Assume control of any fire emergency occurring in your immediate area of responsibility.
3. If relocation or evacuation of occupants is necessary, horizontal routes leading to adjoining smoke/fire compartments should be used. Use procedures in accordance with Unit Specific Plans. Vertical evacuation (if necessary) will be ordered by the Fire Chief or senior hospital administrator or if no other evacuation route is safe, accessible or available.

D. Responsibilities of the Medical University Fire Marshal

The Director of University Risk Management is designated as the Medical University Fire Marshal and is assigned the following duties:

1. Appoint one or more deputy Fire Marshals.
2. Coordinate all fire safety activities for MUSC.
3. Advise the MUSC Vice President for Finance & Administration and the Hospital Executive

- Director on the status and efficiency of fire prevention, alarm and extinguishing systems.
4. Conduct fire safety inspections of all facilities, including all fire fighting equipment. Ensure the recording and correction of all deficiencies indicated. Forward inspection reports to the Hospital Environment of Care committee.
 5. Continuously ensure that fire prevention practices are being followed.
 6. Initiate and assist the appropriate Medical University Hospital administrative officer with fire drills.
 7. Report to the MUSC Vice-President for Finance and Administration any fire hazard, which cannot be corrected by available MUSC resources.
 8. Make recommendations to the MUSC Vice-President for Finance and Administration concerning improvements in fire safety.
 9. Investigate fire damage and advise the appropriate Medical University Hospital Administration officer of areas, which must be removed from service because of electrical, ventilation or structural damage.

E. Responsibilities of Hospital Communications

The Manager for Hospital Communications will ensure all operators are properly trained to respond to all fire/alarm notifications. Separate, additional requirements may be established by the Manager, provided these guidelines are followed:

1. Annunciator Notification:
 - a. Notify fire department via “ring-down” phone (or 577-7070) to report the fire or verify that an alarm was received.
 - b. Page (Group Code Red) with highlighted text from the annunciator.

If Simon pager system is not operational, notify:

- i. Public Safety Dispatcher (2-4196)
 - ii. Trouble Call Desk (2-4119)
 - iii. Hospital Administrator/HSC on duty (2-3232)
 - c. When the “All Clear” is reported by an appropriate authority, announce over the appropriate MIC: “THE CODE RED (building and location) IS ALL CLEAR. PLEASE RESUME NORMAL OPERATIONS.” (Repeat)
2. Telephone Notification

This procedure is also implemented as a backup system for occupants in the event of an automated system failure.

 - a. Obtain the name, phone number, location and approximate size and type of fire.
Do not place caller on hold.
 - b. Determine if the caller has activated a pull box. If not, request they do it immediately. This should activate the annunciator.
 - c. After receiving the necessary information, release the caller to proceed with their duties.

NOTE...The following procedures are not required if notification by fire annunciator was implemented first, and the information is identical.

- d. Notify Fire Department via “ring-down” phone (or 577-7070) to report the fire or verify that an alarm was received.
 - e. Page (Group Code Red) with highlighted text from the annunciator (or caller information).

If Simon pager system is not operational, notify:

1. Public Safety Dispatcher (2-4196).

2. Trouble Call Desk (2-4119).
 3. Hospital Administrator/HSC on duty (2-3232).
- f. When an “All Clear” is reported by an appropriate authority, announce over the appropriate MIC: “THE CODE RED (building and location) IS ALL CLEAR. PLEASE RESUME NORMAL OPERATIONS.” (Repeat)

F. Responsibilities of Service Call Dispatcher

In an effort to increase response time and expedite communications for emergency response personnel during fire emergencies, an annunciator was installed in the Service Call dispatcher control room.

1. Investigate any alarm received on the remote fire alarm annunciator.
2. If an active building fire alarm, announce over radio channel one (1): “ATTENTION ALL PERSONNEL – CODE RED, (give building name and fire scene location). PLEASE LIMIT RADIO TRANSMISSIONS TO A MINIMUM.” During normal duty hours, also announce over radio channel three (3).
3. Contact Communications Operator via “direct line” to confirm switchboard receipt of alarm notification. Communications Operators will continue to notify Fire Department.
4. Acknowledge alarm on panel. Do not reset.
5. When an ALL CLEAR is reported by appropriate authority, announce over radio: “CODE RED, (give building name and fire location), IS ALL CLEAR.” During normal business hours, also announce over channel three (3).

G. Responsibilities of Hospital Maintenance/Engineering and Facilities

The foreman for Hospital Maintenance will ensure staff is trained to reset fire alarm panels during non-duty hours, including weekends and holidays. A Hospital Maintenance

representative will assume the responsibility for the Engineering and Facilities Alarm Shop personnel during non-duty hours. The Facility Manager/Hospital Maintenance Foreman (or representative) will respond to all Medical Center fire alarms. Hospital Maintenance personnel at the scene will combat the fire until relieved by the Charleston Fire Department.

H. Responsibilities of Medical Center Safety, Security and Volunteer Services

The Manager for Medical Center Safety and Security Services will ensure Security personnel are properly trained prior to silencing an alarm to any panel. Medical Center Safety and Security personnel will respond to every alarm activated in the Hospital. When the fire alarm is activated, a Medical Center Security officer will respond to the fire scene. Another officer will report to the Hospital fire alarm panel and stand-by for further instructions or until relieved by Alarm/Hospital Maintenance personnel. The fire scene respondent will investigate for flame, smoke, burning smell, etc. (any indication of the presence of fire). The first respondent must determine if there is:

1. An actual fire emergency

- If an actual fire/emergency exists, immediately implement the five-step fire plan.
- Notify the Public Safety Dispatcher via radio of “Actual Code Red.”

2. No fire/emergency

- If no evidence of a fire is discovered, the responder will immediately notify Public Safety Dispatcher of “no fire/emergency” status via radio.
- The stand-by officer will silence the alarm.

I. Evacuation/Relocation

1. Immediate Relocation of Patients and Visitors. **Use procedures in accordance with Unit Specific Plans.**

- a. Arrangements to move patients from an area will be under the supervision of the charge nurse.
 - b. Visitors will be asked to stay with the patients they are visiting and to assist in their movement.
 - c. Removal of patient charts and emergency supplies, including oxygen, to the relocation area will be directed by the charge nurse.
2. General Evacuation
- a. The Chief of the Charleston Fire Department (or representative), the senior hospital staff member, or the University Fire Marshal at the scene of the fire, may order and direct evacuation of a specific area within the building. This order will be announced over the fire alarm PA system to the affected areas or relayed by messengers.
 - b. Whenever possible, relocation of any area will be directed horizontally to adjacent compartments.
 - c. When evacuation must be accomplished vertically, egress will be downward through stairwells. Re-entry will be made at the next safe level below.

NOTE: Building evacuation will be ordered by the Fire Chief only if necessary.

J. Activation of Alarm System

The alarm system may be activated by any of the following means:

1. Manual pull boxes located throughout the hospital.
2. Automatically, by various detection or extinguishing systems in the hospital, (i.e., smoke/heat detectors, duct detectors or flow switches).

K. Fire Drills

Fire drills will be conducted periodically, but at least every quarter for each shift. The date and time for the drills will be set by the Hospital Environment of Care Committee. The Fire Marshal will ensure that a report of the fire drill is completed and forwarded to the Environment of Care Committee.

L. Testing

Testing of the alarm system will be conducted in accordance with NFPA 72 at frequencies dictated by NFPA 72 by Engineering and Facilities Department. In all cases, a prior announcement of the test will be broadcast over the fire alarm PA system: “WE ARE CONDUCTING A TEST OF THE FIRE ALARM SYSTEM. PLEASE CONTINUE WITH YOUR NORMAL ACTIVITIES UNTIL FURTHER NOTIFICATION.” (Repeat). Immediately upon the conclusion of the test, the Alarm shop employee conducting the test will ensure broadcast of the following announcement: “TESTING OF THE FIRE ALARM SYSTEM IS COMPLETE. (Repeat) Upon completion of each test, a “Report of Fire Alarm Test” will be completed and forwarded to the Director of Engineering and Facilities.

SECTION IV
CHILDREN'S HOSPITAL
DETAILED FIRE PLAN PROCEDURES

Personnel in areas that are not designated as defend in place or in direct care of patients shall evacuate the building upon activation of fire alarms, notification of a fire or instructed by emergency response personnel.

A. Responsibilities of Persons Discovering Fire

1. **Remove** occupants. For a fire discovered in any area, the first responsibility is to save occupants in immediate danger. **Refer to the Unit specific Plan where appropriate.**
 - a. Supervisory personnel at the scene should determine whether to remove occupants or have them remain in the rooms with the door closed. Visitors should remain with patients.
 - b. Non-ambulatory Patients. Don't waste time obtaining a stretcher or wheelchair. Move the patient out of bed onto a sheet or blanket on the floor and drag them to safety in the corridor just outside the room. (Special care unit patients who cannot be moved any other way may be relocated in beds)
 - c. Ambulatory Patients. Wrap the patients in a blanket and lead them through the corridor to a safe location beyond a smoke barrier door.
2. **Ensure** all doors are closed. After occupants are removed from immediate danger, or if a fire is discovered where occupants are not in immediate danger, isolate the fire by closing the door of the room involved.
3. **Activate** the nearest fire alarm. Insert two fingers behind the handle. Pull the handle forward and down. The fire alarm activates a chime that sounds throughout the

building informing hospital personnel of a fire emergency. It also activates the flashing strobe lights, which continue to flash until the fire emergency, fire drill, or test of the fire alarm system is completed. A message will be broadcast over the fire alarm public address system, “Code Red”, and announce the location of the fire (e.g., 6th Floor). Personnel should close all doors, windows and openings to prevent the spread of smoke and fire and also clear all corridors in case relocation or evacuation becomes necessary. The fire alarm is connected to the City of Charleston Fire Department who will respond normally within 3 minutes.

4. **Call** the Operator (2-3333 or 911). Be calm and concise to avoid panic. Inform the Operator that you are reporting a fire. Give:
 - a. Exact location of fire or emergency (building, floor, and room number.)
 - b. A brief description of the emergency. Remain on the phone until released by the operator.
 - c. Call back number of phone you are on and your name.
5. **Try** to fight the fire. The decision to fight the fire with available extinguishing equipment or whether the door to the room containing the fire must remain closed should be made by the senior employee present. If fighting the fire, actions will be under the supervision of the senior employee present. Responsibility for fighting the fire is transferred to the Charleston Fire Department upon arrival.

B. General Responsibilities of All Other Employees

Every employee should assume the following responsibilities when a fire alarm is activated:

1. Determine the location of the fire. An announcement of the location will be broadcast over the fire alarm PA system.

2. Close all stairwell and corridor doors.
3. All employees, other than those with specific duties assigned as a part of the fire plan, should close all doors in their area. Remain in your area unless otherwise notified. Do not open smoke barrier doors.
4. Public corridors of the hospital should be cleared of beds, stretchers, carts and all other obstructions **(except mayday carts)**.
5. Remain alert for instructions broadcast over the fire alarm PA system or specific instructions by on-scene emergency personnel.

C. Responsibilities of Department Directors and Supervisors

1. Ensure all personnel are familiar with the material contained in the Fire Plan and trained in the use of available fire fighting equipment.
2. Assume control of any fire emergency occurring in your immediate area of responsibility.
3. If relocation or evacuation of occupants is necessary, horizontal routes leading to adjoining smoke/fire compartments should be used. Use procedures in accordance with Unit Specific Plans. Vertical evacuation (if necessary) will be ordered by the Fire Chief or senior hospital administrator or if no other evacuation route is safe, accessible or available.

C. Responsibilities of Hospital Communications

The Manager for Hospital Communications will ensure all operators are properly trained to respond to all fire/alarm notifications. Separate, additional requirements may be established by the Manager, provided these guidelines are followed:

1. Annunciator Notification:

a. Notify fire department via “ring-down” phone (or 577-7070) to report the fire or verify that an alarm was received.

b. Page (Group Code Red) with highlighted text from the annunciator.

If Simon pager system is not operational, notify:

1. Public Safety Dispatcher (2-4196).

2. Trouble Call Desk (2-4119)

3. Hospital Administrator/HSC on duty (2-3232)

c. When the “All Clear” is reported by an appropriate authority, announce over the appropriate MIC: “THE CODE RED (building and location) IS ALL CLEAR. PLEASE RESUME NORMAL OPERATIONS.” (Repeat)

2. Telephone Notification

This procedure is also implemented as a backup system for occupants in the event of an automated system failure.

a. Obtain the name, phone number, location and approximate size and type of fire.

Do not place caller on hold.

b. Determine if the caller has activated a pull box. If not, request they do it immediately. This should activate the annunciator.

c. After receiving the necessary information, release the caller to proceed with their duties.

NOTE...The following procedures are not required if notification by fire annunciator was implemented first, and the information is identical.

d. Notify Fire Department via “ring-down” phone (or 577-7070) to report the fire or verify that an alarm was received.

- e. Page (Group Code Red) with highlighted text from the annunciator (or caller information).

If Simon pager system is not operational, notify:

1. Public Safety Dispatcher (2-4196).
 2. Trouble Call Desk (2-4119)
 3. Hospital Administrator/HSC on duty (2-3232)
- f. When an “All Clear” is reported by an appropriate authority, announce over the appropriate MIC: “THE CODE RED (building and location) IS ALL CLEAR. PLEASE RESUME NORMAL OPERATIONS.” (Repeat)

E. Responsibilities of Service Call Dispatcher

In an effort to increase response time and expedite communications for emergency response personnel during fire emergencies, an annunciator was installed in the Service Call dispatcher control room.

1. Investigate any alarm received on the remote fire alarm annunciator.
2. If an active building fire alarm, announce over radio channel one (1): “ATTENTION ALL PERSONNEL – CODE RED, (give building name and fire scene location). PLEASE LIMIT RADIO TRANSMISSIONS TO A MINIMUM.” During normal duty hours, also announce over radio channel three (3).
3. Contact Communications Operator via “direct line” to confirm switchboard receipt of alarm notification. Communications Operators will continue to notify Fire Department.
4. Acknowledge alarm on panel. Do not reset.
5. When an ALL CLEAR is reported by appropriate authority, announce over radio: “CODE RED, (give building name and fire location), IS ALL CLEAR.” During normal

business hours, also announce over channel three (3).

F. Responsibilities of Hospital Maintenance/Engineering and Facilities

The foreman for Hospital Maintenance will ensure staff is trained to reset fire alarm panels during non-duty hours, including weekends and holidays. A Hospital Maintenance representative will assume the responsibility for the Engineering and Facilities Alarm Shop personnel during non-duty hours. The Facility Manager/Hospital Maintenance Foreman (or representative) will respond to all Medical Center fire alarms. Hospital Maintenance personnel at the scene will combat the fire until relieved by the Charleston Fire Department.

G. Responsibilities of Medical Center Safety, Security and Volunteer Services

The Manager for Medical Center Safety and Security Services will ensure Security personnel are properly trained prior to silencing an alarm to any panel. Medical Center Safety and Security personnel will respond to every alarm activated in the Hospital. When the fire alarm is activated, a Medical Center Security officer will respond to the fire scene. Another officer will report to the Hospital fire alarm panel and stand-by for further instructions or until relieved by Alarm/Hospital Maintenance personnel. The fire scene respondent will investigate for flame, smoke, burning smell, etc. (any indication of the presence of fire). The first respondent must determine if there is:

1. An actual fire emergency
 - If an actual fire/emergency exists, immediately implement the five-step fire plan.
 - Notify the Public Safety Dispatcher via radio of “Actual Code Red.”
2. No fire/emergency
 - If no evidence of a fire is discovered, the responder will immediately notify Public Safety Dispatcher of “no fire/emergency” status via radio.

- The stand-by officer will silence the alarm.

H. Evacuation/Relocation

1. Immediate Relocation of Patients and Visitors. Use procedures in Unit Specific Plans.
 - a. Arrangements to move patients from an area will be under the supervision of the charge nurse.
 - b. Visitors will be asked to stay with the patients they are visiting and to assist in their movement.
 - c. Removal of patient charts and emergency supplies, including oxygen, to the relocation area will be directed by the charge nurse.
2. General Evacuation
 - a. The Chief of the Charleston Fire Department (or representative), the senior hospital staff member, or the University Fire Marshal at the scene of the fire, may order and direct evacuation of a specific area within the building. This order will be announced over the fire alarm PA system to the affected areas or relayed by messengers.
 - b. When possible, relocation of any area will be directed horizontally to adjacent compartments.
 - c. When evacuation must be accomplished vertically, egress will be downward through stairwells. Re-entry will be made at the next safe level below.

NOTE: Building evacuation will be ordered by the Fire Chief only if necessary.

I. Activation of Alarm System

The alarm system may be activated by any of the following means:

1. Manual pull boxes located throughout the hospital.

2. Automatically, by various detection or extinguishing systems in the hospital, (i.e., smoke/heat detectors, duct detectors or flow switches).

J. Fire Drills

Fire drills will be conducted periodically, but at least every quarter for each shift. The date and time for the drills will be set by the Hospital Environment of Care Committee. The Fire Marshal will ensure that a report of the fire drill is completed and forwarded to the Environment of Care Committee.

K. Testing

Testing of the alarm system will be conducted in accordance with NFPA 72 by Engineering and Facilities Department. In all cases, a prior announcement of the test will be broadcast over the fire alarm PA system: “WE ARE CONDUCTING A TEST OF THE FIRE ALARM SYSTEM. PLEASE CONTINUE WITH YOUR NORMAL ACTIVITIES UNTIL FURTHER NOTIFICATION.” (Repeat). Immediately upon the conclusion of the test, the Alarm shop employee conducting the test will ensure broadcast of the following announcement: “TESTING OF THE FIRE ALARM SYSTEM IS COMPLETE.” (Repeat) Upon completion of each test, a “Report of Fire Alarm Test” will be completed and forwarded to the Director of Engineering and Facilities.

SECTION V
PSYCHIATRIC HOSPITAL
DETAILED FIRE PLAN PROCEDURES

Personnel in areas that are not designated as defend in place or in direct care of patients shall evacuate the building upon activation of fire alarms, notification of a fire or instructed by emergency response personnel.

A. Responsibilities of Persons Discovering Fire

1. **Remove** occupants. For a fire discovered in any area, the first responsibility is to save occupants in immediate danger. Refer to the Unit Specific Plan where appropriate.
 - a. Supervisory personnel at the scene should determine whether to remove occupants or have them remain in the rooms with the door closed. Visitors should remain with patients.
 - b. Non-ambulatory Patients. Don't waste time obtaining a stretcher or wheelchair. Move the patient out of bed onto a sheet or blanket on the floor and drag them to safety in the corridor just outside the room. (Special care unit patients who cannot be moved any other way may be relocated in beds)
 - c. Ambulatory Patients. Wrap the patients in a blanket and lead them through the corridor to a safe location beyond a smoke barrier door.
2. **Ensure** all doors are closed. After occupants are removed from immediate danger, or if a fire is discovered where occupants are not in immediate danger, isolate the fire by closing the door of the room involved.
3. **Activate** the nearest fire alarm. Insert two fingers behind the handle. Pull the handle forward and down.

- a. For in patient area on floors 1-3, the plastic cover must be lifted off first. This should sound a local alarm to alert staff. Replacing the cover will stop the alarm.
- b. Alarms in the patient area of the 4th floor must be activated by a “key”, which should be issued to patient care staff on this floor. Insert the key and turn to activate the alarm.

The fire alarm activates a chime that sounds throughout the building informing hospital personnel of a fire emergency. It also activates the flashing strobe lights, which continue to flash until the fire emergency, fire drill or test of the fire alarm system is completed.

The fire alarm activates a chime that sounds throughout the building informing hospital personnel of a fire emergency. It also activates the flashing strobe lights, which continue to flash until the fire emergency, fire drill or test of the fire alarm is completed.

A message will be broadcast over the fire alarm public address system, “Code Red” and announce the location of the fire (e.g., 4th Floor patient area).

Personnel should close all doors, windows and openings to prevent the spread of smoke and fire and also clear the corridors in case relocation or evacuation becomes necessary.

The fire alarm is connected to the City of Charleston Fire Department who will respond normally within 3 minutes.

4. **Call** the Operator (2-3333 or 911). Be calm and concise to avoid panic. Inform the Operator that you are reporting a fire. Give:
 - a. Exact location of fire or emergency (building, floor, and room number.)
 - b. A brief description of the emergency. Remain on the phone until released by

the operator.

- c. Call back number of phone you are on and your name.
5. **Try** to fight the fire. The decision to fight the fire with available extinguishing equipment or whether the door to the room containing the fire must remain closed should be made by the senior employee present. If fighting the fire, actions will be under the supervision of the senior employee present. Responsibility for fighting the fire is transferred to the Charleston Fire Department upon arrival.

B. General Responsibilities of All Other Employees

Every employee should assume the following responsibilities when a fire alarm is activated:

1. Determine the location of the fire.
 - a. Patients may be assembled in a predetermined staging area to provide reassurance and facilitate evacuation if required.
 - b. The charge nurse may determine to have all patients return to their rooms for better control.
2. Close all stairwell and corridor doors.
3. All employees, other than those with specific duties assigned as a part of the fire plan, should close all doors in their area. Remain in your area unless otherwise notified. Do not open smoke barrier doors.
4. Public corridors of the hospital should be cleared of beds, stretchers, carts and all other obstructions.
5. Remain alert for specific instructions by on-scene emergency personnel.

C. Responsibilities of Department Directors and Supervisors

1. Ensure all personnel are familiar with the material contained in the Fire Plan and trained

in the use of available fire fighting equipment.

2. Assume control of any fire emergency, occurring in your immediate area of responsibility.
3. If relocation or evacuation of occupants is necessary, horizontal routes leading to adjoining smoke/fire compartments should be used. Use procedures in accordance with Unit Specific Plans. Vertical evacuation (if necessary) will be ordered by the Fire Chief or senior hospital administrator or if no other evacuation route is safe, accessible or available.

D. Responsibilities of Hospital Communications

The Manager for Hospital Communications will ensure all operators are properly trained to respond to all fire/alarm notifications. Separate, additional requirements may be established by the Manager, provided these guidelines are followed:

1. Annunciator Notification:
 - a. Notify fire department via “ring-down” phone (or 577-7070) to report the fire or verify that an alarm was received.
 - b. Page (Group Code Red) with highlighted text from the annunciator.

If Simon pager system is not operational, notify:

1. Public Safety Dispatcher (2-4196)
 2. Trouble Call Desk (2-4119)
 3. Hospital Administrator/HSC on duty (2-3232)
2. Telephone Notification

This procedure is also implemented as a back-up system for occupants in the event of an automated system failure.

- a. Obtain the name, phone number, location and approximate size and type of fire.
Do not place caller on hold.
- b. Determine if the caller has activated a pull box. If not, request they do it immediately. This should activate the annunciator.
- c. After receiving the necessary information, release the caller to proceed with their duties.

NOTE...The following procedures are not required if notification by fire annunciator was implemented first, and the information is identical.

- d. Notify Fire Department via “ring-down” phone (or 577-7070) to report the fire or verify that an alarm was received.
- e. Page (Group Code Red) with highlighted text from the annunciator (or caller information).

If Simon pager system is not operational, notify:

1. Public Safety Dispatcher (2-4196).
2. Trouble Call Desk (2-41190)
3. Hospital Administrator/HSC on duty (2-3232)

E. Responsibilities of Service Call Dispatcher

In an effort to increase response time and expedite communications for emergency response personnel during fire emergencies, an annunciator was installed in the Service Call dispatcher control room.

1. Investigate any alarm received on the remote fire alarm annunciator.
2. If an active building fire alarm, announce over radio channel one (1):”ATTENTION ALL PERSONNEL – CODE RED, (give building name and fire scene location).

PLEASE LIMIT RADIO TRANSMISSIONS TO A MINIMUM.” During normal duty hours, also announce over radio channel three (3).

3. Contact Communications Operator via “direct line” to confirm switchboard receipt of alarm notification. Communications Operators will continue to notify Fire Department.
4. Acknowledge alarm on panel. Do not reset.
5. When an ALL CLEAR is reported by appropriate authority, announce over radio: “CODE RED, (give building name and fire location), IS ALL CLEAR.” During normal business hours, also announce over channel three (3).

F. Responsibilities of Hospital Maintenance/Engineering and Facilities

The foreman for Hospital Maintenance will ensure staff is trained to reset fire alarm panels during non-duty hours, including weekends and holidays. A Hospital Maintenance representative will assume the responsibility for the Engineering and Facilities Alarm Shop personnel during non-duty hours. The Facility Manager/Hospital Maintenance Foreman (or representative) will respond to all Medical Center fire alarms. Hospital Maintenance personnel at the scene will combat the fire until relieved by the Charleston Fire Department.

G. Responsibilities of Medical Center Safety, Security and Volunteer Services

The Manager for Medical Center Safety and Security Services will ensure Security personnel are properly trained prior to silencing an alarm to any panel. Medical Center Safety and Security personnel will respond to every alarm activated in the Hospital. When the fire alarm is activated, a Medical Center Security officer will respond to the fire scene. Another officer will report to the Hospital fire alarm panel and stand-by for further instructions or until relieved by Alarm/Hospital Maintenance personnel. The stand-by officer will contact 1 North at 2-0100 or relay message, “Code Red (location)”. The fire scene respondent will investigate for flame,

smoke, burning smell, etc. (any indication of the presence of fire). The first respondent must determine if there is:

1. An actual fire emergency
 - If an actual fire/emergency exists, immediately implement the five-step fire plan.
 - Notify the Public Safety Dispatcher via radio of “Actual Code Red.”
1. No fire/emergency
 - If no evidence of a fire is discovered, the responder will immediately notify Public Safety Dispatcher of “no fire/emergency” status via radio.
 - The stand-by officer will silence the alarm.

When “All Clear” is reported by appropriate authority, contact 1 North at 2-0100 or relay message, “All Clear (location)”.

H. Evacuation/Relocation

1. Immediate Relocation of Patients and Visitors. Use procedures in accordance with Unit Specific Plans.
 - a. Arrangements to move patients from an area will be under the supervision of the charge nurse.
 - b. Visitors will be asked to stay with the patients they are visiting and to assist in their movement.
 - c. Removal of patient charts and emergency supplies, including oxygen, to the relocation area will be directed by the charge nurse.
2. General Evacuation
 - a. The Chief of the Charleston Fire Department (or representative), the senior hospital staff member, or the University Fire Marshal at the scene of the fire,

may order and direct evacuation of a specific area within the building. This order will be relayed over the building PA system or by messengers.

- b. Whenever possible, relocation of any area will be directed horizontally to adjacent compartments.
- c. When evacuation must be accomplished vertically, egress will be downward through stairwells. Re-entry will be made at the next safe level below.

NOTE: Building evacuation will be ordered by the Fire Chief only if necessary.

I. Activation of Alarm System

The alarm system may be activated by any of the following means:

- 1. Manual pull boxes located throughout the hospital.
- 2. Automatically, by various detection or extinguishing systems in the hospital, (i.e., smoke/heat detectors, duct detectors or flow switches).

J. Fire Drills

Fire drills will be conducted periodically, but at least every quarter for each shift. The date and time for the drills will be set by the Hospital Environment of Care Committee. The Fire Marshal will ensure that a report of the fire drill is completed and forwarded to the Environment of Care Committee.

K. Testing

Testing of the alarm system will be conducted in accordance with NFPA 72 by Engineering and Facilities Department. In all cases, a prior notification of the test will be relayed to staff at 1 North by calling 2-0100. Immediately upon the conclusion of the test, the Alarm shop employee conducting the test will ensure staff is notified of All Clear by initiating phone tree system at 2-0100. Upon completion of each test, a "Report of Fire Alarm Test" will be

completed and forwarded to the Director of Engineering and Facilities.

SECTION VI
STORM EYE INSTITUTE
DETAILED FIRE PLAN PROCEDURES

Refer to section XIV, “All Other Areas” of the fire plan for the Storm Eye Institute detailed fire plan procedures. The facility is not designed to allow “defend in place” procedures for fire emergencies. Occupants are required to evacuate the building upon fire alarm activation.

SECTION VII
RUTLEDGE TOWER
DETAILED FIRE PLAN PROCEDURES

Personnel in areas that are not designated as defend in place or in direct care of patients shall evacuate the building upon activation of fire alarms, notification of a fire or instructed by emergency response personnel.

A. Responsibilities of Persons Discovering Fire

1. **Remove** occupants. For a fire discovered in any area, the first responsibility is to save occupants in immediate danger. **Refer to the Unit Specific Plan where appropriate.**
 - a. Supervisory personnel at the scene should determine whether to remove occupants or have them remain in the rooms with the door closed. Visitors should remain with patients.
 - b. Non-ambulatory Patients. Don't waste time obtaining a stretcher or wheelchair. Move the patient out of bed onto a sheet or blanket on the floor and drag them to safety in the corridor just outside the room. (Special care unit patients who cannot be moved any other way may be relocated in beds)
 - c. Ambulatory Patients. Wrap the patients in a blanket and lead them through the corridor to a safe location beyond a smoke barrier door.
2. **Ensure** all doors are closed. After occupants are removed from immediate danger, or if a fire is discovered where occupants are not in immediate danger, isolate the fire by closing the door of the room involved.
3. **Activate** the nearest fire alarm. Insert two fingers behind the handle. Pull the handle forward and down. The fire alarm activates a chime that sounds throughout the

building informing hospital personnel of a fire emergency. It also activates the flashing strobe lights, which continues to flash until the fire emergency, fire drill, or test of the fire alarm system is completed. A message will be broadcast over the fire alarm public address system, “Code Red”, and announce the location of the fire (e.g., 6th Floor). Personnel should close all doors, windows and openings to prevent the spread of smoke and fire and also clear all corridors in case relocation or evacuation becomes necessary. The fire alarm is connected to the City of Charleston Fire Department who will respond normally within 3 minutes.

4. **Call** the Operator (2-3333 or 911). Be calm and concise to avoid panic. Inform the Operator that you are reporting a fire. Give:
 - a. Exact location of fire or emergency (building, floor, and room number.)
 - b. A brief description of the emergency. Remain on the phone until released by the operator.
 - c. Call back number of phone you are on and your name.
5. **Try** to fight the fire. The decision to fight the fire with available extinguishing equipment or whether the door to the room containing the fire must remain closed should be made by the senior employee present. If fighting the fire, actions will be under the supervision of the senior employee present. Responsibility for fighting the fire is transferred to the Charleston Fire Department upon arrival.

B. General Responsibilities of All Other Employees

Every employee should assume the following responsibilities when a fire alarm is activated:

1. Determine the location of the fire. An announcement of the location will be made over the fire alarm PA system.

2. Close all stairwell and corridor doors.
3. All employees, other than those with specific duties assigned as a part of the fire plan, should close all doors in their area. Remain in your area unless otherwise notified. Do not open smoke barrier doors.
4. Public corridors of the hospital should be cleared of beds, stretchers, carts and other obstructions.
5. Remain alert for instructions broadcast over the fire alarm PA system or specific instructions by on-scene emergency personnel.

C. Responsibilities of Department Directors and Supervisors

1. Ensure all personnel are familiar with the material contained in the Fire Plan and trained in the use of available fire fighting equipment.
2. Assume control of any fire emergency occurring in your immediate area of responsibility.
2. If relocation or evacuation of occupants is necessary, horizontal routes leading to adjoining smoke/fire compartments should be used. Use procedures in accordance with Unit Specific Plans. Vertical evacuation (if necessary) will be ordered by the Fire Chief or senior hospital administrator or if no other evacuation route is safe, accessible or available.

D. Responsibilities of Hospital Communications

The Manager for Hospital Communications will ensure all operators are properly trained to respond to all fire/ alarm notifications. Separate, additional requirements may be established by the Manager, provided these guidelines are followed.

1. Annunciator Notification:

- a. Notify fire department via “ring-down” phone (or 577-7070) to report the fire or verify that an alarm was received.
- b. Page (Group Code Red) with highlighted text from the annunciator.

If Simon pager system is not operational, notify:

1. Public Safety Dispatcher (2-4196).
 2. Trouble Call Desk (2-4119)
 3. Hospital Administrator/HSC on duty (2-3232)
2. Telephone Notification

This procedure is also implemented as a backup system for occupants in the event of an automated system failure.

- a. Obtain the name, phone number, location and approximate size and type of fire.
Do not place caller on hold.
- b. Determine if the caller has activated a pull box. If not, request they do it immediately. This should activate the annunciator.
- c. After receiving the necessary information, release the caller to proceed with their duties.

NOTE...The following procedures are not required if notification by fire annunciator was implemented first, and the information is identical.

- d. Notify Fire Department via “ring-down” phone (or 577-7070) to report the fire or verify that an alarm was received.
- e. Page (Group Code Red) with highlighted text from the annunciator (or caller information).

If Simon pager system is not operational, notify:

1. Public Safety Dispatcher (2-4196).
2. Trouble Call Desk (2-4119)
3. Hospital Administrator/HSC duty (2-3232)

E. Responsibilities of Service Call Dispatcher

In an effort to increase response time and expedite communications for emergency response personnel during fire emergencies, an annunciator was installed in the Service Call dispatcher control room.

1. Investigate any alarm received on the remote fire alarm annunciator.
2. If a building fire alarm is active, announce over radio channel one (1): “ATTENTION ALL PERSONNEL – CODE RED, (give building name and fire scene location). PLEASE LIMIT RADIO TRANSMISSIONS TO A MINIMUM.” During normal duty hours, also announce over radio channel three (3).
3. Contact Communications Operator via “direct line” to confirm switchboard receipt of alarm notification. Communications Operators will continue to notify Fire Department.
4. Acknowledge alarm on panel. Do not reset.
5. When an ALL CLEAR is reported by appropriate authority, announce over radio: “CODE RED, (give building name and fire location), IS ALL CLEAR.” During normal business hours, also announce over channel three (3).

F. Responsibilities of Hospital Maintenance/Engineering and Facilities

The foreman for Hospital Maintenance will ensure a sufficient staff is trained to reset fire alarm panels during non-duty hours, including weekends and holidays. A Hospital Maintenance representative will assume the responsibility for the Engineering and Facilities Alarm Shop

personnel during non-duty hours. The Facility Manager/Hospital Maintenance Foreman (or representative) will respond to all Medical Center fire alarms. Hospital Maintenance personnel at the scene will combat the fire until relieved by the Charleston Fire Department.

G. Responsibilities of Medical Center Safety, Security and Volunteer Services

The Manager for Medical Center Safety and Security Services will ensure Security personnel are properly trained prior to silencing an alarm to any panel. Medical Center Safety and Security personnel will respond to every alarm activated in the Rutledge Tower. When the fire alarm is activated, a Medical Center Security officer will respond to the fire scene. A second officer will report to the Rutledge Tower fire alarm panel. This officer will announce the highlighted text from the annunciator over the fire alarm PA system and stand-by for further instructions or until relieved by Alarm/Hospital Maintenance personnel. The fire scene respondent will investigate for flame, smoke, burning smell, etc. (any indication of the presence of fire). The first respondent must determine if there is:

1. An actual fire emergency
 - If an actual fire/emergency exists, immediately implement the five- step fire plan.
 - Notify the Public Safety Dispatcher via radio of “Actual Code Red.”
2. No fire/emergency
 - If no evidence of a fire is discovered, the responder will immediately notify Public Safety Dispatcher of “no fire/emergency” status via radio.
 - The stand-by officer will silence the alarm and announce over the PA system, “CODE RED (location), and ALL CLEAR.”

H. Evacuation/Relocation

1. Immediate Relocation of Patients and Visitors. Use procedures in accordance with Unit Specific Plans.
 - a. Arrangements to move patients from an area will be under the supervision of the charge nurse.
 - b. Visitors will be asked to stay with the patients they are visiting and to assist in their movement.
 - c. Removal of patient charts and emergency supplies, including oxygen, to the relocation area will be directed by the charge nurse.
2. General Evacuation
 - a. The Chief of the Charleston Fire Department (or representative), the senior hospital staff member, or the University Fire Marshal at the scene of the fire, may order and direct evacuation of a specific area within the building. This order will be announced over the fire alarm PA system to the affected areas or relayed by messengers.
 - b. Whenever possible, relocation of any area will be directed horizontally to adjacent compartments.
 - c. When evacuation must be accomplished vertically, egress will be downward through stairwells. Re-entry will be made at the next safe level below.

NOTE: Building evacuation will be ordered by the Fire Chief only if necessary.

I. Activation of Alarm System

The alarm system may be activated by any of the following means:

1. Manual pull boxes located throughout the hospital.

2. Automatically, by various detection or extinguishing systems in the hospital, (i.e., smoke/heat detectors, duct detectors or flow switches).

J. Fire Drills

Fire drills will be conducted periodically, but at least every quarter for each shift. The date and time for the drills will be set by the Hospital Environment of Care Committee. The Fire Marshal will ensure that a report of the fire drill is completed and forwarded to the Environment of Care Committee.

K. Testing

Testing of the alarm system will be conducted in accordance with NFPA 72 by Engineering and Facilities Department. In all cases, a prior announcement of the test will be broadcast over the fire alarm PA system: “WE ARE CONDUCTING A TEST OF THE FIRE ALARM SYSTEM. PLEASE CONTINUE WITH YOUR NORMAL ACTIVITIES UNTIL FURTHER NOTIFICATION.” (Repeat). Immediately upon the conclusion of the test, the Alarm shop employee conducting the test will ensure broadcast of the following announcement: “TESTING OF THE FIRE ALARM SYSTEM IS COMPLETE.” (Repeat) Upon completion of each test, a “Report of Fire Alarm Test” will be completed and forwarded to the Director of Engineering and Facilities.

SECTION VIII
CHARLESTON MEMORIAL HOSPITAL
DETAILED FIRE PLAN PROCEDURES

Personnel in areas that are not designated as defend in place or in direct care of patients shall evacuate the building upon activation of fire alarms, notification of a fire or instructed by emergency response personnel.

A. Responsibilities of Persons Discovering Fire

1. Remove occupants. For a fire discovered in any area, the first responsibility is to save occupants in immediate danger. Refer to the Unit Specific Plan where appropriate.
 - a. Supervisory personnel at the scene should determine whether to remove occupants or have them remain in the rooms with the door closed. Visitors should remain with patients.
 - b. Non-ambulatory Patients. Don't waste time obtaining a stretcher or wheelchair. Move the patient out of bed onto a sheet or blanket on the floor and drag them to safety in the corridor just outside the room. (Special care unit patients who cannot be moved any other way may be relocated in beds)
 - c. Ambulatory Patients. Wrap the patients in a blanket and lead them through the corridor to a safe location beyond a smoke barrier door.
2. Ensure all doors are closed. After occupants are removed from immediate danger, or if a fire is discovered where occupants are not in immediate danger, isolate the fire by closing the door of the room involved.
3. Activate the nearest fire alarm. Insert two fingers behind the handle. Pull the handle forward and down. The fire alarm activates a chime that sounds throughout the

building informing hospital personnel of a fire emergency. It also activates the flashing strobe lights, which continue to flash until the fire emergency, fire drill, or test of the fire alarm system is completed. A message will be broadcast over the fire alarm public address system, “Code Red”, and announce the location of the fire (e.g., 3rd Floor). Personnel should close all doors, windows and openings to prevent the spread of smoke and fire and also clear all corridors in case relocation or evacuation becomes necessary. The fire alarm is connected to the City of Charleston Fire Department who will respond normally within 3 minutes.

4. Call the Operator (2-3333 or 911). Be calm and concise to avoid panic. Inform the Operator that you are reporting a fire. Give:
 - a. Exact location of fire or emergency (building, floor, and room number.)
 - b. A brief description of the emergency. Remain on the phone until released by the operator.
 - b. Call back number of phone you are on and your name.
5. Try to fight the fire. The decision to fight the fire with available extinguishing equipment or whether the door to the room containing the fire must remain closed should be made by the senior employee present. If fighting the fire, actions will be under the supervision of the senior employee present. Responsibility for fighting the fire is transferred to the Charleston Fire Department upon arrival.

B. General Responsibilities of All Other Employees

Every employee should assume the following responsibilities when a fire alarm is activated:

1. Determine the location of the fire. An announcement of the location will be broadcast over the fire alarm PA system.

2. Close all stairwell and corridor doors.
3. All employees, other than those with specific duties assigned as a part of the fire plan, should close all doors in their area. Remain in your area unless otherwise notified. Do not open smoke barrier doors.
4. Public corridors of the hospital should be cleared of beds, stretchers, carts and all other obstructions (except mayday carts).
5. Remain alert for instructions broadcast over the fire alarm PA system or specific instructions by on-scene emergency personnel.

C. Responsibilities of Department Directors and Supervisors

1. Ensure all personnel are familiar with the material contained in the Fire Plan and trained in the use of available fire fighting equipment.
2. Assume control of any fire emergency occurring in your immediate area of responsibility.
3. If relocation or evacuation of occupants is necessary, horizontal routes leading to adjoining smoke/fire compartments should be used. Use procedures in accordance with Unit Specific Plans. Vertical Evacuation (if necessary) will be ordered by the Fire Chief or senior hospital administrator; or if no other evacuation route is safe, accessible or available.

D. Responsibilities of Hospital Communications

The Manager for Hospital Communications will ensure all operators are properly trained to respond to all fire/alarm notifications. Separate, additional requirements may be established by the Manager, provided these guidelines are followed:

3. Annunciator Notification:
 - a. Notify fire department via “ring-down” phone (or 577-7070) to report the fire or verify that an alarm was received.
 - b. Page (Group CODE RED) with highlighted text from the annunciator.
 If Simon pager system is not operational, notify:
 1. Public Safety Dispatcher (2-4196).
 2. Trouble Call Desk (2-4119)
 3. Hospital Administrator/HSC on duty (2-3232)
 - c. When the “All Clear” is reported by an appropriate authority, announce over the appropriate MIC: “THE CODE RED (building and location) IS ALL CLEAR. PLEASE RESUME NORMAL OPERATIONS.” (Repeat)

4. Telephone Notification

This procedure is also implemented as a backup system for occupants in the event of an automated system failure.

- a. Obtain the name, phone number, location and approximate size and type of fire. Do not place caller on hold.
- b. Determine if the caller has activated a pull box. If not, request they do it immediately. This should activate the annunciator.
- c. After receiving the necessary information, release the caller to proceed with their duties.

NOTE...The following procedures are not required if notification by fire annunciator was implemented first, and the information is identical.

- d. Notify Fire Department via “ring-down” phone (or 577-7070) to report the fire

or verify that an alarm was received.

- e. Page (Group CODE RED) with highlighted text from the annunciator (or caller information).

If Simon pager system is not operational, notify:

- 4. Public Safety Dispatcher (2-4196).
- 5. Trouble Call Desk (2-4119)
- 6. Hospital Administrator/HSC on duty (2-3232)

- f. When an “All Clear” is reported by an appropriate authority, announce over the appropriate MIC: “THE CODE RED (building and location) IS ALL CLEAR. PLEASE RESUME NORMAL OPERATIONS.” (Repeat)

E. Responsibilities of Service Call Dispatcher

In an effort to increase response time and expedite communications for emergency response personnel during fire emergencies, an annunciator was installed in the Service Call dispatcher control room.

- 1. Investigate any alarm received on the remote fire alarm annunciator.
- 2. If an active building fire alarm, announce over radio channel one (1): “ATTENTION ALL PERSONNEL – CODE RED, (give building name and fire scene location). PLEASE LIMIT RADIO TRANSMISSIONS TO A MINIMUM.” During normal duty hours, also announce over radio channel three (3).
- 3. Contact Communications Operator via “direct line” to confirm switchboard receipt of alarm notification. Communications Operators will continue to notify Fire Department.
- 4. Acknowledge alarm on panel. Do not reset.
- 5. When an ALL CLEAR is reported by appropriate authority, announce over radio:

“CODE RED, (give building name and fire location), IS ALL CLEAR.” During normal business hours, also announce over channel three (3).

F. Responsibilities of Hospital Maintenance/Engineering and Facilities

The foreman for Hospital Maintenance will ensure staff is trained to reset fire alarm panels during non-duty hours, including weekends and holidays. A Hospital Maintenance representative will assume the responsibility for the Engineering and Facilities Alarm Shop personnel during non-duty hours. The Facility Manager/Hospital Maintenance Foreman (or representative) will respond to all Medical Center fire alarms. Hospital Maintenance personnel at the scene will combat the fire until relieved by the Charleston Fire Department.

G. Responsibilities of Medical Center Safety, Security and Volunteer Services

The Manager for Medical Center Safety and Security Services will ensure Security personnel are properly trained prior to silencing an alarm to any panel. Medical Center Safety and Security personnel will respond to every alarm activated in the Hospital. When the fire alarm is activated, a Medical Center Security officer will respond to the fire scene. Another officer will report to the Hospital fire alarm panel and stand-by for further instructions or until relieved by Alarm/Hospital Maintenance personnel. The fire scene respondent will investigate for flame, smoke, burning smell, etc. (any indication of the presence of fire). The first respondent must determine if there is:

1. An actual fire emergency
 - If an actual fire/emergency exists, immediately implement the five-step fire plan.
 - Notify the Public Safety Dispatcher via radio of “Actual Code Red.”
2. No fire/emergency
 - If no evidence of a fire is discovered, the responder will immediately notify Public Safety Dispatcher of “no fire/emergency” status via radio.

- The stand-by officer will silence the alarm.

H. Evacuation/Relocation

1. Immediate Relocation of Patients and Visitors. Use procedures in accordance with Unit Specific Plans
 - a. Arrangements to move patients from an area will be under the supervision of the charge nurse.
 - b. Visitors will be asked to stay with the patients they are visiting and to assist in their movement.
 - c. Removal of patient charts and emergency supplies, including oxygen, to the relocation area will be directed by the charge nurse.
2. General Evacuation
 - a. The Chief of the Charleston Fire Department (or representative), the senior hospital staff member, or the University Fire Marshal at the scene of the fire, may order and direct evacuation of a specific area within the building. This order will be announced over the fire alarm PA system to the affected areas or relayed by messengers.
 - b. When possible, relocation of any area will be directed horizontally to adjacent compartments.
 - c. When evacuation must be accomplished vertically, egress will be downward through stairwells. Re-entry will be made at the next safe level below.

NOTE: Building evacuation will be ordered by the Fire Chief only if necessary.

I. Activation of Alarm System

The alarm system may be activated by any of the following means:

1. Manual pull boxes located throughout the hospital.
2. Automatically, by various detection or extinguishing systems in the hospital, (i.e., smoke/heat detectors, duct detectors or flow switches).

J. Fire Drills

Fire drills will be conducted periodically, but at least every quarter for each shift. The date and time for the drills will be set by the Hospital Environment of Care Committee. The Fire Marshal will ensure that a report of the fire drill is completed and forwarded to the Environment of Care Committee.

K. Testing

Testing of the alarm system will be conducted at in accordance with NFPA 72 by Engineering and Facilities Department. In all cases, a prior announcement of the test will be broadcast over the fire alarm PA system: “WE ARE CONDUCTING A TEST OF THE FIRE ALARM SYSTEM. PLEASE CONTINUE WITH YOUR NORMAL ACTIVITIES UNTIL FURTHER NOTIFICATION.” (Repeat). Immediately upon the conclusion of the test, the Alarm shop employee conducting the test will ensure broadcast of the following announcement: “TESTING OF THE FIRE ALARM SYSTEM IS COMPLETE.” (Repeat) Upon completion of each test, a “Report of Fire Alarm Test” will be completed and forwarded to the Director of Engineering and Facilities.

SECTION IX
CLINICAL SCIENCES BUILDING
DETAILED FIRE PLAN PROCEDURES

Personnel in areas that are not designated as defend in place or in direct care of patients shall evacuate the building upon activation of fire alarms, notification of a fire or instructed by emergency response personnel.

- A. Responsibilities of Person Discovering Fire: Refer to Unit Specific Plan where appropriate.
1. Remove any injured persons in immediate danger.
 2. Ensure door is closed to isolate the fire.
 3. Activate the nearest fire alarm in buildings with installed alarm systems. Insert two fingers behind the handle. Pull the handle forward and down. The alarm will sound in all parts of the building. If the building is not equipped with a fire alarm system, alert occupants by voice command to evacuate.
 4. Call the Operator (2-3333 or 911). Be calm and concise to avoid panic. Inform the Operator that you are reporting a fire. Give:
 - a. Exact location of fire or emergency (building, floor, and room number.)
 - b. A brief description of the emergency. Remain on the phone until released by the operator.
 - c. Call back number of phone you are on and your name.
 5. Try to fight the fire. The decision to fight the fire with available extinguishing equipment or whether the door to the room containing the fire must remain closed should be made by the senior employee present. If fighting the fire, actions will be under the supervision of the senior employee present. Responsibility for fighting the

fire is transferred to the Charleston Fire Department upon arrival.

6. Responsibility for fighting the fire is transferred to the responding Fire Department, upon arrival.

B. General Responsibilities of All Other Employees (Personnel on floors 3 through 7)

Every employee should assume the following responsibilities when a fire alarm is activated:

1. Determine location of the fire.
2. All personnel should evacuate the building in an orderly manner.

C. Responsibilities of Department Heads and Supervisors

1. Ensure all personnel are familiar with the material contained in this plan and trained in the use of available fire fighting equipment.
2. Assume control of any fire emergency, which occurs in your immediate area of responsibility.
3. Manage the evacuation of any visitors in the immediate area of a fire. The procedure should be carried out in a calm manner to forestall any possibility of panic.
4. Department heads may designate monitors and alternates to help in clearing the area of visitors, students and staff.

D. Responsibilities of Hospital Communications

The Manager for Hospital Communications will ensure all operators are properly trained to respond to all fire/ alarm notifications. Separate, additional requirements may be established by the Manager, provided these guidelines are followed:

1. Annunciator Notification:
 - a. Notify Fire Department via “ring-down” phone or (577-7070) to report the fire or verify that an alarm was received.

- b. Page (Group- Code Red, Group-20 for CMH) with highlighted text from the annunciator.

If Simon pager system is not operational, notify:

- 1. Public Safety Dispatcher (2-4196).
- 2. Trouble Call Desk (2-4119).

2. Telephone Notification

This procedure is also implemented as a back-up system for occupants in the event of an automated system failure.

- a. Obtain name, phone number, location and approximate size of fire. Do not place caller on hold.
- b. Determine if the caller has activated a pull box. If not, request they do it immediately. This should activate the annunciator (Only buildings equipped with pull boxes).
- c. After receiving the necessary information, release the caller to proceed with their duties

NOTE... The following procedures are not required if notification by fire annunciator was implemented first, and the information is identical.

- d. Notify Fire Department via “ring down” phone or (577-7070) to report the fire or verify that an alarm was received.
- e. Page (Group-5) with highlighted text from the annunciator (or caller information).

If Simon pager system is not operational, notify:

- 1. Public Safety Dispatcher (2-4196)

2. Trouble Call Desk (2-4119)

E. Responsibilities of Service Call Dispatcher

In an effort to increase response time and expedite communications for emergency response personnel during fire emergencies, an annunciator was installed in the Service Call dispatcher control room.

1. Investigate any alarm received on the remote fire alarm annunciator.
2. If an active building fire alarm, announce over radio channel one (1): “ATTENTION ALL PERSONNEL – CODE RED, (give building name and fire scene location). PLEASE LIMIT RADIO TRANSMISSIONS TO A MINIMUM.” During normal duty hours, also announce over radio channel three (3).
3. Contact Communications Operator via “direct line” to confirm switchboard receipt of alarm notification. Communications Operators will continue to notify Fire Department.
4. Acknowledge alarm on panel. Do not reset.
5. When an ALL CLEAR is reported by appropriate authority, announce over radio: “CODE RED, (give building name and fire location), IS ALL CLEAR.” During normal business hours, also announce over channel (3).

F. Responsibilities of Engineering and Facilities

1. Engineering and Facilities personnel at the scene will combat the fire until relieved by the Charleston Fire Department.
2. Representatives from Physical Plant, University Maintenance, Alarm shop and Occupational Safety and Health, will respond to all fire alarm activations or after working hours, the maintenance employee on duty.

G. Responsibilities of Public Safety Officers

The Public Safety Officer on duty will be responsible for clearing the corridors of visitors and personnel, allowing firefighters to proceed directly to the fire scene.

1. Be prepared to receive city firefighters and direct them to the standby elevator (if applicable).
2. Hold an elevator for use by the Fire Department until relieved by Engineering and Facilities personnel.

H. Evacuation

1. All personnel, except those whose duties require them to be in the fire area, will evacuate the building in an orderly manner.
2. Evacuation will be downward through stairwells leading to the outside, and away from the building to allow access by firefighters.

I. Activation of Alarm System

Refer to Section XV of the Fire/Life Safety Plan in this manual for buildings with fire alarm/notification systems.

J. Fire Drills

Fire drills (if required) will be conducted as required by applicable code. The Fire Marshall will ensure that a report of the fire drill is completed and forwarded to the appropriate committee.

K. Testing

Refer to Section XV of the Fire/Life Safety Plan in this manual for buildings with fire alarm/notification systems.

SECTION X
HOLLINGS CANCER CENTER
DETAILED FIRE PLAN PROCEDURES

Personnel in areas that are not designated as defend in place or in direct care of patients shall evacuate the building upon activation of fire alarms, notification of a fire or instructed by emergency response personnel.

- A. Responsibilities of Person Discovering Fire. Refer to Unit Specific Plans where appropriate.
1. Remove any injured persons in immediate danger.
 2. Ensure door is closed to isolate the fire.
 3. Activate the nearest fire alarm in buildings with installed alarm systems. Insert two fingers behind the handle. Pull the handle forward and down. The alarm will sound in all parts of the building. If the building is not equipped with a fire alarm system, alert occupants by voice command to evacuate.
 4. Call the Operator (2-3333 or 911). Be calm and concise to avoid panic. Inform the Operator that you are reporting a fire. Give:
 - a. Exact location of fire or emergency (building, floor, and room number.)
 - b. A brief description of the emergency. Remain on the phone until released by the operator.
 - c. Call back number of phone you are on and your name.
 5. Try to fight the fire. The decision to fight the fire with available extinguishing equipment or whether the door to the room containing the fire must remain closed should be made by the senior employee present. If fighting the fire, actions will be

under the supervision of the senior employee present. Responsibility for fighting the fire is transferred to the Charleston Fire Department upon arrival.

6. Responsibility for fighting the fire is transferred to the responding Fire Department, upon arrival.

B. General Responsibilities of All Other Employees

Every employee should assume the following responsibilities when a fire alarm is activated:

1. Determine location of the fire.
2. All personnel should evacuate the building in an orderly manner.

C. Responsibilities of Ambulatory Care Clinical Trial Employees

Every employee should assume the following responsibilities when a fire alarm is activated:

1. Determine location of the fire.
2. All personnel should evacuate the building in an orderly manner.
 - a. Patients unable to use stairs to evacuate shall be escorted to the evacuation elevator lobby to be evacuated by trained employees or fire protection crews
 - b. Evacuation elevators are located in the west side of the second and third floor only. Secondary elevators are located on the east side of facility.

D. Responsibilities of Department Heads and Supervisors

1. Ensure all personnel are familiar with the material contained in this plan and trained in the use of available fire fighting equipment.
2. Assume control of any fire emergency, which occurs in your immediate area of responsibility.
3. Manage the evacuation of any visitors in the immediate area of a fire. The procedure should be carried out in a calm manner to forestall any possibility of panic.

4. Department heads my designate monitors and alternates to help in clearing the area of visitors, students and staff.

E. Responsibilities of Hospital Communications

The Manager for Hospital Communications will ensure all operators are properly trained to respond to all fire/ alarm notifications. Separate, additional requirements may be established by the Manager, provided these guidelines are followed:

1. Annunciator Notification:

- a. Notify Fire Department via “ring-down” phone or (577-7070) to report the fire or verify that an alarm was received.
- b. Page (Group CODE RED, Group-20 for CMH) with highlighted text from the annunciator.

If Simon pager system is not operational, notify:

1. Public Safety Dispatcher (2-4196).
2. Trouble Call Desk (2-4119).

2. Telephone Notification

This procedure is also implemented as a back-up system for occupants in the event of an automated system failure.

- a. Obtain name, phone number, location and approximate size of fire. Do not place caller on hold.
- b. Determine if the caller has activated a pull box. If not, request they do it immediately. This should activate the annunciator (Only buildings equipped with pull boxes).
- c. After receiving the necessary information, release the caller to proceed with their

duties.

NOTE... The following procedures are not required if notification by fire annunciator was implemented first, and the information is identical.

- d. Notify Fire Department via “ring down” phone or (577-7070) to report the fire or verify that an alarm was received.
- e. Page (Group CODE RED, Group-20 for CMH) with highlighted text from the annunciator (or caller information).

If Simon pager system is not operational, notify:

3. Public Safety Dispatcher (2-4196).
4. Trouble Call Desk (2-4119).

F. Responsibilities of Service Call Dispatcher

In an effort to increase response time and expedite communications for emergency response personnel during fire emergencies, an annunciator was installed in the Service Call dispatcher control room.

1. Investigate any alarm received on the remote fire alarm annunciator.
2. If an active building fire alarm, announce over radio channel one (1): “ATTENTION ALL PERSONNEL – CODE RED, (give building name and fire scene location). PLEASE LIMIT RADIO TRANSMISSIONS TO A MINIMUM.” During normal duty hours, also announce over radio channel three (3).
3. Contact Communications Operator via “direct line” to confirm switchboard receipt of alarm notification. Communications Operators will continue to notify Fire Department.
4. Acknowledge alarm on panel. Do not reset.
5. When an ALL CLEAR is reported by appropriate authority, announce over radio:

“CODE RED, (give building name and fire location), IS ALL CLEAR.” During normal business hours, also announce over channel (3).

G. Responsibilities of Engineering and Facilities

1. Engineering and Facilities personnel at the scene will combat the fire until relieved by the Charleston Fire Department.
2. Representatives from Physical Plant, University Maintenance, Alarm shop and Occupational Safety and Health, will respond to all fire alarm activations or after working hours, the maintenance employee on duty.

H. Responsibilities of Public Safety Officers

The Public Safety Officer on duty will be responsible for clearing the corridors of visitors and personnel, allowing firefighters to proceed directly to the fire scene.

1. Be prepared to receive city firefighters and direct them to the standby elevator (if applicable).
2. Hold an elevator for use by the Fire Department until relieved by Engineering and Facilities personnel.

I. Evacuation

1. All personnel, except those whose duties require them to be in the fire area, will evacuate the building in an orderly manner.
2. Evacuation will be downward through stairwells leading to the outside, and away from the building to allow access by firefighters.

J. Activation of Alarm System

Refer to Section XV of the Fire/Life Safety Plan in this manual for buildings with fire alarm/notification systems.

K. Fire Drills

Fire drills (if required) will be conducted as required by applicable code. The Fire Marshall will ensure that a report of the fire drill is completed and forwarded to the appropriate committee.

L. Testing

Refer to Section XV of the Fire/Life Safety Plan in this manual for buildings with fire alarm/notification systems.

SECTION XI
OPERATING ROOMS

DETAILED FIRE PLAN PROCEDURES

Personnel in areas that are not designated as defend in place or in direct care of patients shall evacuate the building upon activation of fire alarms, notification of a fire or instructed by emergency response personnel.

Due to the critical care provided to patients in the surgical suites, this section will address specific responsibilities for the operating team and may deviate slightly from the standard fire plan.

A. Policies

1. “No Smoking” regulations will be strictly enforced and no open flames will be allowed in the OR corridors.
2. Electrical cauteries should not be used in the presence of flammable substances or vapors (i.e., alcohol or acetone). Prior to draping, assure there is no pooling of prep solutions and remove prep solutions containers from the room prior to using electrical cautery.
3. All patient care electrical equipment will be inspected on a semi-annual basis. Broken switches, frayed cords or equipment with electrical leakage will be repaired by the proper department. All patient care equipment must be certified by the Biomedical Engineering Department, prior to use in the Operating Room. A record of repair and inspection will be maintained in the Biomedical Engineering Department.
4. Oil, grease or other flammable lubricating substances are not to be applied to any equipment used to administer anesthetic gases.
5. Table pads are covered with black non-conductive rubber to prevent spark formation.

6. Hallways are to be kept clear of furniture, stretchers/beds and other equipment causing obstruction of passageways.

B. **Responsibilities of Person Discovering Fire.** Refer to Unit Specific Plans where appropriate.

1. **Remove** the patient. For a fire discovered in the surgical suite, the first responsibility is to save the patient. Patients under general anesthesia will be cared for by the attending Anesthesiologist or resident.
 - a. If the situation allows, the surgeon will close the incision.
 - b. If immediate action is warranted, the surgeon will pack the wound with wet lap pads.
2. **Ensure** all doors are closed. The Nurse in Charge of Operating Room will direct the nursing staff to confine the fire by closing the door and also disconnect electrical appliances if possible. With the approval of the Anesthesiologist in Charge, the installed oxygen supply will be interrupted by closing the control valve. Two staff members will remain with each patient as the evacuation proceeds.
 - a. The patient (under general or spinal anesthesia) will be rolled out of the room on the operating table or lowered to the floor by sheet allowing them to be dragged to safety.
 - b. Patients under a local anesthetic will be assisted out of the room.
3. **Activate** the nearest fire alarm. Insert two fingers behind the handle. Pull the handle forward and down. The fire alarm activates a chime that sounds throughout the building informing hospital personnel of a fire emergency. It also activates the flashing warning lights, which continue to flash until the fire emergency, fire drill, or test of the fire alarm system is completed. A message will be broadcast over the fire alarm public

address System, “Code Red”, and announce the “location” of the fire (e.g., 4th floor). Personnel should close all doors and openings to prevent the spread of smoke and fire and also clear all corridors in case relocation or evacuation becomes necessary. The fire alarm is connected to the City Fire Department who will respond normally within 3 minutes

4. **Call** the Operator (2-3333 or 911). Be calm and concise to avoid panic. Inform the Operator that you are reporting a fire. Give:
 - a. Exact location of fire or emergency (building, floor, and room number.)
 - b. A brief description of the emergency. Remain on the phone until released by the operator.
 - c. Call back number of phone you are on and your name.
5. **Try** to fight the fire. The decision to fight the fire with available extinguishing equipment or whether the door to the room containing the fire must remain closed should be made by the senior employee present. If fighting the fire, actions will be under the supervision of the senior employee present. Responsibility for fighting the fire is transferred to the Charleston Fire Department upon arrival.
6. Responsibility for fighting the fire is transferred to the Charleston Fire Department upon arrival.

C. Responsibilities for all remaining positions are the same as outlined under Children’s Hospital for Operating Rooms on the fourth floor of Children’s and Rutledge Tower for Operating Rooms on the first floor Rutledge Tower.

SECTION XII
INTENSIVE CARE UNITS
DETAILED FIRE PLAN PROCEDURES

Personnel in areas that are not designated as defend in place or in direct care of patients shall evacuate the building upon activation of fire alarms, notification of a fire or instructed by emergency response personnel.

It is of extreme importance that every member in the Intensive Care Unit be aware of their responsibilities in case of a fire. Since the Intensive Care Unit is a critical care area, a fire would require an alert team following the proper procedures quickly.

A. Factors Conducive To Fires

1. Flammable substances or vapors.
2. Oxygen supply.
3. Electrical outlets.

B. Policies

1. “No Smoking” regulations will be strictly enforced and no open flame will be allowed in the Intensive Care Unit.
2. All patient care electrical equipment will be inspected on a semi-annual basis. All broken switches, frayed cords, or equipment with electrical leakage will be repaired by the proper department. Patient care equipment must be certified by the Biomedical Engineering Department, prior to use in the Intensive Care Unit. A record of repair and inspections will be maintained in Biomedical Engineering Department.
3. Areas are to be kept clear of furniture, stretchers/beds and other equipment causing obstruction of passageways.

C. Relocation/Evacuation Plan. Refer to Unit Specific Plans.

Charge Nurse - Coordinates evacuation plan until nurse manager arrives, including the removal of patients.

Staff Nurse – Coordinates the removal of assigned patients, equipment and clipboard material.

Telemetry Tech - Gathers all charts, documentation records and narcotic book.

*Respiratory Therapist - Assists in the removal of patients on ventilators and oxygen.

*Physician - Assists in the removal of the most critical patients.

Other Staff - Will be assigned as necessary by the charge nurse or the nurse manager as they arrive in the unit.

*If in the unit at time of evacuation.

D. Responsibilities for all other positions are the same as outlined under the specific building.

SECTION XIII

UNIT SPECIFIC PLANS

Unit specific plans are required for any unit whose patients require special handling, care or attention due to their condition or treatment. Refer to the attached format to document those procedures.

Considerations to be considered shall include but are not limited to:

1. Required equipment to maintain life.
2. Methods required to move the patients.
3. Medical support required to maintain life once patient is evacuated from the unit.
4. Any specialized procedures, support or other issues required to sustain potential long term care and treatment.

SECTION XIV

ALL OTHER AREAS

DETAILED FIRE PLAN PROCEDURES

Personnel in areas that are not designated as defend in place or in direct care of patients shall evacuate the building upon activation of fire alarms, notification of a fire or instructed by emergency response personnel.

A. Responsibilities of Person Discovering Fire

1. **Remove** any injured persons in immediate danger.
2. **Ensure** door is closed to isolate the fire.
3. **Activate** the nearest fire alarm in buildings with installed alarm systems. Insert two fingers behind the handle. Pull the handle forward and down. The alarm will sound in all parts of the building. If the building is not equipped with a fire alarm system, alert occupants by voice command to evacuate.
4. **Call** the Operator (2-3333). Be calm and concise to avoid panic. Inform the Operator that you are reporting a fire. Give:
 - a. Exact location of fire or emergency (building, floor, and room number.)
 - b. A brief description of the emergency. Remain on the phone until released by the operator.
 - c. Call back number of phone you are on and your name.
5. **Try** to fight the fire. The decision to fight the fire with available extinguishing equipment or whether the door to the room containing the fire must remain closed should be made by the senior employee present. If fighting the fire, actions will be under the supervision of the senior employee present. Responsibility for fighting the

fire is transferred to the Charleston Fire Department upon arrival.

6. Responsibility for fighting the fire is transferred to the responding Fire Department, upon arrival.

B. General Responsibilities of All Other Employees

Every employee should assume the following responsibilities when a fire alarm is activated:

1. Determine location of the fire.
2. All personnel should evacuate the building in an orderly manner.

C. Responsibilities of Department Heads and Supervisors

1. Ensure all personnel are familiar with the material contained in this plan and trained in the use of available fire fighting equipment.
2. Assume control of any fire emergency, which occurs in your immediate area of responsibility.
3. Manage the evacuation of any visitors in the immediate area of a fire. The procedure should be carried out in a calm manner to forestall any possibility of panic.
4. Department heads may designate monitors and alternates to help in clearing the area of visitors, students and staff.

D. Responsibilities of Hospital Communications

The Manager for Hospital Communications will ensure all operators are properly trained to respond to all fire/ alarm notifications. Separate, additional requirements may be established by the Manager, provided these guidelines are followed:

1. Annunciator Notification:
 - a. Notify Fire Department via “ring-down” phone or (577-7070) to report the fire or verify that an alarm was received.

- b. Page (Group-5, Group-20 for CMH) with highlighted text from the annunciator.

If Simon pager system is not operational, notify:

- 1. Public Safety Dispatcher (2-4196).
- 2. Trouble Call Desk (2-4119).

2. Telephone Notification

This procedure is also implemented as a back-up system for occupants in the event of an automated system failure.

- a. Obtain name, phone number, location and approximate size of fire. Do not place caller on hold.
- b. Determine if the caller has activated a pull box. If not, request they do it immediately. This should activate the annunciator (Only buildings equipped with pull boxes).
- c. After receiving the necessary information, release the caller to proceed with their duties

NOTE... The following procedures are not required if notification by fire annunciator was implemented first, and the information is identical.

- a. Notify Fire Department via “ring down” phone or (577-7070) to report the fire or verify that an alarm was received.
- b. Page (Group Code Red, Group-20 for CMH) with highlighted text from the annunciator (or caller information)

If Simon pager system is not operational, notify:

- 1. Public Safety Dispatcher (2-4196)

2. Trouble Call Desk (2-4119)

E. Responsibilities of Service Call Dispatcher

In an effort to increase response time and expedite communications for emergency response personnel during fire emergencies, an annunciator was installed in the Service Call dispatcher control room.

1. Investigate any alarm received on the remote fire alarm annunciator.
2. If an active building fire alarm, announce over radio channel one (1): “ATTENTION ALL PERSONNEL – CODE RED, (give building name and fire scene location). PLEASE LIMIT RADIO TRANSMISSIONS TO A MINIMUM.” During normal duty hours, also announce over radio channel three (3).
3. Contact Communications Operator via “direct line” to confirm switchboard receipt of alarm notification. Communications Operators will continue to notify Fire Department.
4. Acknowledge alarm on panel. Do not reset.
5. When an ALL CLEAR is reported by appropriate authority, announce over radio: “CODE RED, (give building name and fire location), IS ALL CLEAR.” During normal business hours, also announce over channel (3).

F. Responsibilities of Engineering and Facilities

1. Engineering and Facilities personnel at the scene will combat the fire until relieved by the Charleston Fire Department.
2. Representatives from Physical Plant, University Maintenance, Alarm shop and Occupational Safety and Health, will respond to all fire alarm activations or after working hours, the maintenance employee on duty.

G. Responsibilities of Public Safety Officers

The Public Safety Officer on duty will be responsible for clearing the corridors of visitors and personnel, allowing firefighters to proceed directly to the fire scene.

1. Be prepared to receive city firefighters and direct them to the standby elevator (if applicable).
2. Hold an elevator for use by the Fire Department until relieved by Engineering and Facilities personnel.

H. Evacuation

1. All personnel, except those whose duties require them to be in the fire area, will evacuate the building in an orderly manner.
2. Evacuation will be downward through stairwells leading to the outside, and away from the building to allow access by firefighters.

I. Activation of Alarm System

Refer to Section XV of the Fire/Life Safety Plan in this manual for buildings with fire alarm/notification systems.

J. Fire Drills

Fire drills (if required) will be conducted as required by applicable code. The Fire Marshall will ensure that a report of the fire drill is completed and forwarded to the appropriate committee.

K. Testing

Refer to Section XV of the Fire/Life Safety Plan in this manual for buildings with fire alarm/notification systems.

SECTION XV

DESCRIPTION OF ALARM SYSTEMS

A. Buildings without Fire Alarm/notification systems.

Any building, other than the hospitals, not listed in this section, is considered to have no fire alarm/notification system. All occupants must be alerted by voice to evacuate.

B. Buildings with Fire Alarm/notification systems and directly connected to the Fire Department.

1. Administration Building, Box 209, 171 Ashley Ave.

A general alarm horn sounds throughout the building when activated by manual pull stations or automatic smoke/duct detectors.

2. Ambulatory Care Clinic, Box 225, 30 Bee St.

A general alarm horn sounds throughout the building when activated by manual pull stations or automatic smoke/duct detectors.

3. Basic Science Building, Box 210, 173 Ashley Avenue

A general alarm horn sounds throughout the building when activated by manual pull stations, automatic smoke/heat/duct detectors or flow switches.

4. Children's Dental Annex, Box 203, 25 Bee St.

A general alarm horn sounds throughout the building when activated by manual pull stations or automatic smoke/duct detectors.

5. Children's Research Institute, Box 210, Ashley Ave.

A general alarm horn sounds throughout the building when activated by manual pull stations or automatic smoke/duct detectors.

6. Clinical Science Building, Box 208, 96 Jonathan Lucas St.

A general coded alarm bell sounds throughout the building when activated by manual pull stations or automatic smoke/duct detectors.

7. Colcock Hall, Waring Library MacCauley Dental Museum Box 211, 179 Ashley Ave.

A general alarm buzzer sounds throughout the building when activated by manual pull stations or automatic smoke detectors. An automatic Halon System protects medical journals in the Waring Library.

8. College of Health Professions, Box 212, 77 President St.

A general alarm horn sounds throughout the building when activated by manual pull stations, automatic smoke/heat/duct detectors or flow switches.

9. College of Health Professions, Box 206, 151 Rutledge Ave.

A general alarm horn sounds throughout the building when activated by manual pull stations, automatic smoke/heat/duct detectors or flow switches.

10. College of Nursing, Box 221, 99 Jonathan Lucas St.

A general bell sounds throughout the building when activated by manual pull stations or automatic smoke detectors.

11. Eye Institute, Box 205, 167 Ashley Ave.

A general alarm horn sounds throughout the building when activated by manual pull stations, automatic smoke/heat/duct detectors or flow switches.

12. Family Medicine Clinic, Box 216, 295 Calhoun St.

A general alarm series of chimes ring throughout the building when activated by manual pull stations or automatic smoke detectors. An automatic Halon system protects the computer room, FP 103.

13. Hazardous Waste Building, Box 230, 29 Bee St.
A general alarm bell sounds throughout the building when activated by manual pull stations or automatic, explosion-proof smoke detectors. An automatic dry powder system is installed for fire suppression.
14. Hollings Cancer Center, Box 202, 86 Jonathan Lucas St.
A general alarm horn sounds throughout the building when activated by manual pull stations, automatic smoke/heat/duct detectors or flow switches.
15. Institute of Psychiatry, Box 224, 100 Doughty St.
A general alarm chime sounds throughout the building when activated by manual pull stations, automatic smoke/heat/duct detectors or flow switches. An automatic Halon system protects a computer system on the third floor.
16. Parking Garage I, Box 215, 97 Jonathan Lucas St.
A general alarm sounds throughout the building when activated by manual pull stations, automatic smoke detectors or flow switches.
17. Garage II, Box 227, 91 President St.
A general alarm sounds throughout the building when activated by manual pull stations, automatic smoke detectors or flow switches
18. Parking Garage IV, 21 Courtney Drive (All American Monitor)
A general alarm sounds throughout the building when activated by manual pull stations, automatic smoke detectors or flow switches.
19. Parking Garage (V) Ashley Ave/Rutledge, Box 206, 158 Ashley Avenue
A general alarm sounds throughout the building when activated by manual pull stations or flow switches.

20. Psychiatric Institute Annex, Box 214, 102 Doughty St.

A general alarm sounds throughout the building when activated by manual pull stations, automatic smoke detectors or flow switches.

21. Public Safety Building, Box 229, 101 Doughty St.

A general alarm horns sounds throughout the building when activated by manual pull stations or automatic smoke detectors.

22. Quadrangle "E" Building, Box 204, 43 Sabin St.

A general alarm bell sounds throughout the building when activated by manual pull stations or automatic system smoke detectors/flow switch.

23. Quad "F" Building, Box 223, 280 Calhoun St.

A general alarm bell sounds throughout the building when activated by manual pull stations or automatic system smoke detectors/flow switch. Quad "F" is equipped with a standpipe system.

24. Research Building, Box 219, 39 Sabin St.

A general alarm horn sounds throughout the building when activated by manual pull stations or automatic smoke detectors.

25. Rutledge Tower, Box 550, 231 Rutledge Ave.

A general alarm sounds throughout the building when activated by manual pull stations, automatic smoke/heat detectors or flow switches.

26. Sebring Aimar House, Box 226, 268 Calhoun St.

A general alarm horn sounds throughout the building when activated by manual pull stations or automatic smoke detectors.

27. Rutledge Tower Office Building, Box 207, 150 Ashley Ave.

A general alarm horn sounds throughout the building when activated by manual pull stations, automatic smoke/heat detectors, or flow switches.

28. Strom Thurmond Building, Box 217, 114 Doughty St.

A general alarm sounds throughout the building when activated by manual pull stations, automatic smoke/heat detectors or flow switches.

29. St. Luke's Chapel, Box 213, 181 Ashley Ave.

A general alarm sounds throughout the building when activated by manual pull stations or automatic smoke/heat detectors.

30. Harper Student Wellness Center, Box 218, 44 Courtney St.

A general alarm horn sounds throughout the building when activated by manual pull stations or automatic smoke detectors.

31. University Diagnostic Center Building, Box 222, 165 Cannon St.

A general alarm horn sound throughout the building when activated by manual pull stations or automatic smoke detectors

32. Vince Moseley Center, Box 220, 39 Bee St.

A general alarm sounds throughout the building when activated by manual pull stations or automatic smoke detectors.

33. Wickliffe House, Box 206, 178 Ashley Ave.

A general alarm horn sounds throughout the building when activated by manual pull stations or automatic smoke detectors. An automatic fire suppression system protects the stove/hood in the kitchen.

C. Commercial Alarms

The following building alarm is connected to a commercial alarm company, which will notify Hospital Communications and the Fire Department.

Harborview Office Tower, 19 Hagoood Ave.

A general alarm horn sounds throughout the building when activated by manual pull stations, automatic smoke/duct detectors or flow switches. Coastal Alarm is the Central Reporting Station.

D. Testing

Testing of the alarm systems will be conducted by Physical Plant Department quarterly. Upon completion of each test, a “Report of Fire Alarm Test” will be completed and forwarded to the Director of Engineering and Facilities.

SECTION XVI

AREAS WITH ENGINEERED

FIRE SUPPRESSION SYSTEMS

(HALON, CARBON DIOXIDE, WET/DRY CHEMICAL)

The following areas have engineered systems which discharge the agent by automatic detection or manual activation in or near the area protected. Evacuation of the area is mandatory! These systems automatically activate the building fire alarm and/or shut down the equipment protected. In the event of fire, the five-step fire plan will be implemented by the person discovering the fire.

A. MAIN HOSPITAL

1. 10th Floor/Palmetto Pavilion Kitchen
 - Wet Chemical system protecting cooking appliances. (Currently not in service since grease laden vapors are not produced)
2. 5th Floor/Communication room
 - Halon system protecting wiring and equipment.
3. 1st Floor/Dietary area
 - 2 wet chemical systems protecting cooking appliances in kitchen.
 - 3 wet chemical systems protecting private vendor concessions.

B. CHILDREN'S HOSPITAL

1. Room EH638 – Halon system protecting cardiac catheterization room.
2. Room EH318A – Halon system protecting computer room.

C. PSYCHIATRIC HOSPITAL

Main Kitchen- Wet chemical system protecting cooking appliances. (Currently not in service since grease laden vapors are not produced).

D. CLINICAL SCIENCE BUILDING

Wet chemical systems protecting cooking appliances in kitchen

E. HAZARDOUS WASTE FACILITY

Dry chemical system protects contents of building.

F. INSTITUTE OF PSYCHIATRY

Room BA 304 – Halon system protecting computer room.

G. PAINT SHOP

Spray booth – Dry chemical system protecting spraying operations.

H. RADIATION SAFETY BUILDING

Dry chemical system protects contents of building.

I. RESEARCH BUILDING

Detached flammable liquid storage building (rear of Research Building)

-Carbon dioxide (CO₂) system protecting bulk chemical storage.

J. STUDENT WELLNESS CENTER

The Mustard Seed – Dry chemical system protecting cooking appliances.

K. WARING LIBRARY

Halon system protecting contents of building.

SECTION XVII

HOLIDAY DECORATIONS

The holiday season can be joyous and festive, however, many fire incidents occur each year due to negligence or disregard for safety. The following policy establishes requirements to consider before decorating. Consult personnel from Occupational Safety and Health for final determinations. The Director of Safety, Security and Volunteer Services established separate, additional guidelines to be followed in the Hospital, by clinical and non-clinical departments

A. Decorations

1. Decorations shall not be placed in any area that will obscure an exit or interfere with egress from the area.
2. Decorations of an explosive or highly flammable character are prohibited from all buildings. Decorations should be flame resistant. Combustible decorations are prohibited in health care areas, unless of such limited size or quantity that will not contribute to the development or spread of fire, such as photographs and paintings.
3. No candles or other open flame decorations are allowed.
4. All electrical components must be approved by the Underwriters Laboratory (UL) and be in good condition with no broken insulation.
5. The maximum permissible length for extension cords is six feet. Locate your tree or other decorations so that one extension cord will suffice.
6. Live Christmas trees are permitted on the MUSC campus with the following provisions: Trees must be placed so as not to obstruct exit passage. Live Christmas trees must be treated with flame retardant chemicals by the MUSC Paint Shop. **SPRAYING WILL BE AVAILABLE BEGINNING THE WEEK AFTER THANKSGIVING.** Contact

Facilities/Construction 2-4669 or Paint Shop 2-2145 two (2) days in advance to schedule a time to deliver your tree. Trees must be delivered to the Paint Shop located behind the visitor parking garage on Jonathan Lucas Street for treatment and should be ready for pick-up the following day. The Paint Shop will attach a tag, which must remain on the treated tree.

7. Christmas tree lights may be used on real and non-metallic trees but must be Underwriters Laboratory (UL) approved and must be unplugged at the end of the work period and when no one is present to monitor them.

B. Inspection

Decorations will be inspected for compliance with the foregoing rules. Any not in compliance will be removed. Please avoid unnecessary expense, embarrassment and hazard by using only approved decorations.

SECTION XVIII

INTERIM LIFE SAFETY MEASURES PLAN

Interim Life Safety Measures (ILSM) are a series of administrative actions required to temporarily compensate for hazards posed by safety deficiencies or construction/renovation activities. Implementation of ILSM is required in or adjacent to all construction areas and throughout buildings with safety deficiencies. ILSM applies to all personnel (including construction workers), and must be continuously enforced through project completion. ILSM consists of the following actions:

- a. Ensure free and unobstructed exits. Personnel receive additional training when alternative exits are designated. Buildings or areas under construction must maintain escape routes for construction workers at all times. Means of exiting construction areas are inspected daily.
- b. Ensuring free and unobstructed access to emergency services and for fire, police and other emergency forces.
- c. Ensuring fire alarm, detection and suppressions systems are in good working order. A temporary by equivalent system shall be provided when any fire system is impaired. Temporary systems must be inspected and tested monthly.
- d. Ensuring temporary construction partitions are smoke tight and built of noncombustible or limited combustible materials that will not contribute to the development or spread of fire.
- e. Providing additional fire-fighting equipment and training personnel in its use.
- f. Prohibiting smoking according to EC.5 throughout the organization buildings and in adjacent to construction areas.
- g. Developing and enforcing storage, housekeeping and debris removal practices that reduce the building flammable and combustible fire load to the lowest feasible level.

- h. Conducting a minimum of two fire drills per shift per quarter.
- i. Increasing hazard surveillance of buildings, grounds, and equipment with special attention to excavations, construction areas, construction storage and field offices.
- j. Training personnel to compensate for impaired structural or compartmentalization features of fire safety.
- k. Conducting organization wide safety education programs to promote awareness of LSC deficiencies, construction hazards, and ILSM.