

UNIVERSITY OF TOLEDO

SUBJECT: CODE RED - FIRE RESPONSE PROCEDURE

Procedure No: LS-08-001

PROCEDURE STATEMENT

All fire emergencies will be designated as "Code Red." All personnel will respond accordingly.

PURPOSE OF PROCEDURE

To assure maximum safety of all patients, visitors, students, faculty, volunteers and employees.

PROCEDURE FOR HEALTH SCIENCE CAMPUS

NOTE: Glendale Medical Center (GMC) fire procedure is addressed separately under GUIDELINES - GLENDALE MEDICAL CENTER section of this policy.

- I. Any person suspecting or discovering a fire shall implement the actions described in the R.A.C.E. acronym:
 - A. **RESCUE:** any person in immediate danger from the fire if it does not endanger your own life.
 - B. **ALARM:** sound the alarm by calling **extension 77** (HSC) or **x2600** (MC, SPC) to report the fire and activating the nearest pull station (these are red boxes located on the wall in main exit corridors). Please stay on the line until the building name and location has been repeated back to you by the telephone operator or police dispatcher.
 - C. **CONFINE:** confine the fire by closing all doors and windows. Turn off fans and air conditioners.
 - D. **EXTINGUISH or EVACUATE:** locate the nearest fire extinguisher and use it to extinguish the fire if it is small in size; if not, evacuate the area immediately. Remember to **TURN LIGHTS ON . . .** light aids in controlling the situation.

NOTE: Under most circumstances, these procedures can be done together, if sufficient personnel are available and are clear in their duties.

- II. Fire Response Team (HSC only)

The fire response team, made up of representatives from Campus Police, Facilities Maintenance and Environmental Services, shall respond to any Code Red announced for buildings/areas located on the main campus grounds. The Fire Response Team, which has received hands-on fire fighting training, is responsible for containment of the fire until the Toledo Fire Department arrives, and thereafter as directed by the Senior Fire Department Officer, on the scene.

Overall coordination of the fire response shall be the responsibility of the senior Campus Police Officer on duty.

- III. Evacuation

The Administrative Coordinator, or building coordinator, as applicable, in consultation with the Senior Campus Police Officer, and the Senior Fire Department Officer, and, as possible, the Medical Director and the Administrator On Call shall make the decision concerning evacuation and supervise the evacuation. UT follows the universally-accepted "lateral, vertical, total" model for unit or building evacuation.

- A. If possible, persons in the area and where applicable on the floor below and above, are to be moved laterally so that they remain on the same floor.
- B. The evacuated area shall be isolated and entrance restricted by Campus Police.

- C. Should vertical evacuation be necessary the location to which persons will be taken will be determined based upon the situation and location available. Once a location is identified, this shall be communicated to the Campus Police Dispatcher via **Ext. 77** (HSC) or **x2600** (MC, SPC)
- D. For more detail concerning evacuation, see the Code Green: Internal Evacuation Policy (#EP-08-005).

IV. Switchboard (HSC and Medical Center)

When a call is received on **Extension 77**, the switchboard operator shall activate the emergency tone device and announce three (3) times, at three (3) second intervals "Attention - All Personnel - Code Red (giving location)." Also, the Toledo Fire Department shall be notified immediately at 9-1-1.

Smoke detectors will be checked by available officers to determine if it is an actual fire situation.

V. When a Code Red is announced - **all areas**:

- A. Do not use elevators: fire and smoke travel very quickly through elevator shafts.
- B. Close fire and smoke doors (corridor doors).
- C. Close windows.
- D. If your department or unit is near the fire area, send an individual with a fire extinguisher to assist. If you are not directly involved with the fire - **DO NOT** go to that area unless specifically assigned to do so.
- E. Station an individual by the telephone; do not use telephones except in an emergency.
- F. Establish a census of personnel present to facilitate evacuation if necessary.

Every department should keep one person available in the department to aid in communication. **Departments immediately adjacent (next to, above and below) the fire area must be keenly aware of any developing situations and be prepared to act accordingly.**

VI. Possible activation of Emergency Operations Plan (EOP) (EP-08-009): Activation of the Code Yellow policy may be required if there are multiple injuries in the community or among UT staff, patients, students and/or visitors. The senior Campus Police officer will consult with administrative/medical personnel to make a joint decision concerning activation of the EOP, and in turn the Hospital Incident Command System (HICS).

VII. Cancellation of Code Red:

Campus Police makes the final decision to cancel the Code Red in consultation with local fire authorities. Upon notification from the Campus Police officer on duty, the HSC operator will announce "Code Red is now complete" three (3) times.

VIII. Evacuation shall be dictated by circumstances arising from the nature and location of the fire. The evacuation drawings, mounted on each floor, should be used as a guide.

SPECIFIC ROLES AND RESPONSIBILITIES

IF THE FIRE IS IN YOUR AREA: Implement the R.A.C.E. fire response procedure immediately. **IF THE FIRE IS IN ANOTHER AREA NOT ADJACENT TO YOUR AREA:** Report to your supervisor for guidance and direction, listen for further information via the public address system, and be prepared to implement the R.A.C.E. fire response protocol should circumstances warrant.

The R.A.C.E. fire response is the universal procedure to be implemented by all persons involved in a fire. There are no specific distinctions in response roles between employees, physicians, licensed independent practitioners (LIPs), and students or volunteers.

Upon activation of a fire alarm notification/detection system, the smoke compartment doors on that floor will close immediately to trap smoke and fire, and prevent their migration. In addition, depending upon the location of the fire and its size, fire suppression systems (such as sprinklers) may deploy to extinguish the fire. Pull stations, which are small red boxes located in main exit/fire corridors, are activated by simply pulling the handle straight towards you, or pushing the plunger on the larger style pull station straight down. Pull stations are simple and fool-proof to

activate/operate, and they send an additional fire notification alarm throughout the building where the activated pull station is located. In addition, smoke detectors throughout building areas act as another layer of notification of a potential fire situation. When a smoke detector is activated, it not only automatically closes the smoke compartment doors in the immediate area, but it sends an alarm to the Campus Police dispatcher that a possible fire situation is developing.

GUIDELINES - UNIVERSITY OF TOLEDO MEDICAL CENTER

Medical Gas Shutoff Valves Protocol

Upon confirmation by the senior campus police officer on duty of an actual fire in a patient care area, the following steps will be taken in collaboration with the charge nurse:

1. Determine if there is oxygen in use in the patient room
2. Determine how many patients on the unit are using oxygen
3. Page "Respiratory Stat, Code Red, to (name of location)....."
4. Upon arrival of Respiratory staff, that staffer will make arrangements for alternative/portable sources of oxygen for all patients on that unit*
5. Respiratory staff will then instruct the senior campus police officer or designee to shut off the main oxygen valve for that unit

* If feasible, the fire response team may turn off oxygen at the source to avoid shutting off the main gas line

A similar procedure will be followed in the OR/PACU/George Isaac Center with the exception that the lead anesthesia team member will fulfill the same role as the Respiratory Care staffer described above (SEE Anesthesia Safety Policy #HM-08-022).

Should evacuation be necessary, persons responsible for patients must be certain the level of evacuation (lateral, vertical or total) is appropriate for the size of the fire. Employees evacuating patients must ensure that patients are exposed to as little smoke and fumes as possible. The use of masks to protect patients' respiratory systems is acceptable and encouraged. Employees responsible for evacuating patients must closely follow the directions given to them by the fire department officials or campus police officials on the scene. Personnel responsible for evacuating patients must ensure an accurate census to ensure that all patients are present and accounted for prior to the start of any evacuation movement. In most cases, the nursing manager on each unit to be evacuated must ensure that no patients are inadvertently left behind.

Transport and Environmental Services personnel will be pressed into service as called for in the situation to assist in evacuating patients. Volunteers have no role in preparing for evacuation of patients. LIPs should follow any evacuation instructions given by fire department or campus police officials, or the nurse manager on the unit.

NOTE: Evacuation of patients is in most cases a last resort. The intent in any fire situation is to handle the fire safely while "managing patients in place". Evacuation is a major undertaking, and can lead to compromised patient care, even with the best personnel following procedures precisely. Therefore, all attempts will be made to contain fire and its by-products so that evacuation is not required.

Gurneys and wheelchairs for evacuation of patients are to be used as appropriate for the level of evacuation decided; that equipment is located on each patient care unit or nearby that unit. Personnel should make it a regular part of their work routine to ensure there is a supply of gurneys, wheelchairs or other transportation equipment readily available on short notice, and that such equipment is operating adequately. Also, employees in all patient care units should be clear in precisely where the "staging area" for evacuation shall be located in their unit(s). This goes hand-in-hand with ensuring the easy availability of patient transportation equipment (gurneys, stretchers and wheelchairs). All nursing managers should also make certain as a regular part of departmental training that all employees know how to quickly locate, use and operate that transportation/evacuation equipment.

In addition to smoke/fire doors closing upon activation of the fire alarm/notification system, additional protections, such as dampers in air handling systems, also activate.

GUIDELINES - COGHLIN REHABILITATION CENTER

Evacuation Procedure

After the decision to evacuate the Coghlin Rehabilitation Center has been made, the procedure will be:

The Nursing Director of the Coghlin Rehabilitation Center or her designate will be responsible for assignment of duties. At the time of the evacuation, all Rehab Services personnel and Nursing personnel in the Coghlin Rehabilitation Center shall report to the Nursing Director for assignment. A census of the patients will be taken by the assigned nursing staff person after the evacuation point has been reached and upon return to the unit.

If a lateral move (same floor) is indicated:

- Patients/staff should move to the 6AB area, which is protected by a fire barrier.
- If a vertical move is indicated and all 6th floor areas are to be evacuated, patients and staff should be evacuated by elevator/stairs (if possible) to the 5th Floor of the Hospital. All staff and patients should remain there until return to the Coghlin Rehabilitation Center is allowed.

Evenings, nights and weekends, when no Rehab Services personnel are available to help in evacuation, the charge nurse will be responsible for assignment of duties and for requesting additional help through the Nursing Administrative Coordinator if required.

GUIDELINES - KOBACKER CENTER

1. Child & Adolescent Hospital (Sector A)

The primary nurse or child care worker will be accountable for the children/adolescents in his/her group, and shall evacuate them to the appropriate area as designated, and, should it become necessary, outside the building. Immediately notify the charge nurse of any missing school child.

2. Day Treatment School and Education Wing (Sector C)

Teachers will be accountable for children/adolescents in their classrooms, and shall evacuate them to the appropriate area as designated, and, should it become necessary, outside the building. Immediately notify the teacher in charge of any missing school child.

3. Outpatient Treatment Wing (Sector B)

Evacuation to the appropriate area as designated will take place. Patients in private offices will be evacuated along with staff and will remain with the staff member until the Code Red is terminated. The Administrative secretary shall be accountable for staff census in this area.

Evacuation of the Child & Adolescent Psychiatric Hospital shall follow these routes:

Area/Rooms	Exit	Person Accountable
1-114, 1-115, 1-116, 1-118, 1,119, 1-120, 1-121, 1-122, 1-123, 1-131	1	Charge Nurse
1-117, 1-124, 1-125, 1-126, 1-127, 1-128, 1-129	2	Charge Nurse
1-111, 1-132, 133, 134, 135, 136, 137, 138, 139	3	Charge Nurse
1-102, 104, 112, 113	4	Charge Nurse
Waiting Room, 1-100, 1-101, 1-103, 1-107, 107C, D, 1-200, 1-202, 203, 204, 205, 206, 223, 224, 225, 226, 227, 1-300, 1-302, 1-303, 1-306	5	Administrative Secretary
1-207, 1-208, 1-209, 1-210, 1-211, 1-212, A, B, 1-215, 1-216	6	Administrative Secretary
1-212C, 1-213, 1-214, 1-217, 1-218,1-219, 1-220, 1-221	7	Administrative Secretary
1-301, 1-304, 1-305, 1-307, 1-320, 1-321, 1-322, 1-323, 1-324, 1-325	8	Teacher in Charge
1-314, C, 1-315, 1-316, 1-317, 1-318, 1-319	9	Teacher in Charge
1-306, 1-308, 1-309 A, B, C, D, E, F, 1-310, 1-311, 1-312, 1-313, 1-316, B	10	Teacher in Charge

Persons exiting the building from Exits 1, 2, 3 and 4 will gather together outside of the building west of the parking area. The Charge Nurse is responsible for taking census in this group.

Persons exiting the building from Exits 5, 6, and 7 will gather together outside the building north of the parking area. The Administrative Secretary is responsible for taking census in this group.

Persons exiting the building from Exits 8, 9, and 10 will gather together outside the building east of the parking area. The Teacher in Charge is responsible for taking census in this group.

GUIDELINES - DIALYSIS UNIT

Evacuation of the dialysis unit shall be dictated by the nature and location of the fire, but should follow the “lateral, vertical, total” model for evacuation.

1. If patients are in no immediate danger and time permits, dialysis staff should immediately terminate the dialysis procedure by returning the blood to the patient, clamp access lines and disconnect the patient from the machine. The patient should then be moved to a safe area.
2. If patients are in immediate danger, terminate dialysis by shutting the blood pump off, clamp lines, and disconnect patient. Evacuate patient to a safe area.
3. After evacuation to a safe area, patients should be assessed for vital signs, and appropriate attention given to access needles or cannulas.
4. A fire plan and evacuation route is posted in the unit.

GUIDELINES – OPERATING ROOM

Surgical cases won't start if a Code Red situation exists in the O.R., or anywhere in the Hospital. If a fire situation starts after surgical cases have begun, surgeries should be finished as quickly as possible. Patients whose surgery has not yet begun should be evacuated to the Recovery Room, as should patients whose surgery was completed after the start of the fire.

GUIDELINES - RUPPERT HEALTH CENTER

Evacuation of a Department or Zone in the Ruppert Health Center shall be automatic upon the determination of an actual fire situation. NOTE: If a fire is of such small nature that it could be extinguished immediately by use of a fire extinguisher, this is an acceptable response.

1. When an alarm is activated by a smoke detector or pull station, a Campus Police Officer will be dispatched to the building.
2. The Unit manager or designee will check their area(s) to determine if a fire exists at their location.
3. If it is found to be an actual fire situation, a Code Red will then be called. Personnel in the Ruppert Health Center dial **77** to report the Code Red.
4. The Department or Zone in the Ruppert Health Center shall be immediately evacuated following the fire exit diagrams and egress routes placed around the building. Patients at risk will evacuate through the exit doors located at each end of the building. The decision to evacuate other areas will be made in consultation with the Senior Campus Police Officer, Senior Fire Department Officer and Senior On-Site Manager.
5. If areas are evacuated, the Unit Manager or designee will initiate measures to determine if all of the staff and patients have been evacuated.
6. During working hours, the Administrator On-Call and Ambulatory Services Director will be notified by telephone switchboard operator. After hours, on weekends and holidays, the Administrator On-Call will be notified by the telephone switchboard operator.
7. The decision to end the Code Red is made by the Senior Campus Police Officer, Senior Fire Department Official and Senior On-Site Manager.

GUIDELINES - GLENDALE MEDICAL CENTER

Evacuation of a Department or Zone in the Glendale Medical Center (hereinafter GMC) shall be automatic upon the determination of an actual fire situation. NOTE: If a fire is of such small nature that it could be extinguished immediately by use of a fire extinguisher, this is an acceptable response.

1. When an alarm is activated by a smoke detector or pull station, a Campus Police officer will be dispatched to GMC. Personnel in that building should evacuate immediately. Evacuation should be via stairwells (not elevators) and exit through either the north or south exit doors.
2. The Unit Manager or designee will check his/her area(s) to determine if a fire exists at their location.
3. If it is found to be an actual fire situation, GMC personnel will dial **77** to report the fire to the Campus Police Department.
4. If the building is evacuated, the Unit manager or designee will initiate measures to determine if all of the staff and patients have been evacuated.
5. During working hours, the Administrator On-Call and Director of Ambulatory Services will be notified by telephone switchboard operator. After hours, on weekends and holidays, the Administrator On-Call will be notified by telephone switchboard operator.
6. The decision to end the Code Red is made by the Senior Campus Police Officer, Senior Fire Department Official and Senior On-Site Manager.

GUIDELINES - EDUCARE CENTER

Staff should call 911 and evacuate the building immediately upon receiving a fire alarm. Campus police should then be notified by calling 419-383-3770.

GUIDELINES

HEALTH SCIENCE, HEALTH EDUCATION, DOWLING HALL, MULFORD LIBRARY BUILDING, DANA CENTER

If a fire is noticed or suspected, do the following:

- R.** Rescue any person in imminent danger from the fire, if you can do so without putting yourself at risk
- A.** Activate the fire alarm notification system by pulling a pull station and calling **EXTENSION 77** to report the fire.
- C.** Confine the fire by closing all doors and windows, as applicable/practical.
- E.** Use a fire extinguisher to put the fire out if it is small in size, or evacuate the area for your personal safety.

GUIDELINES – MAIN CAMPUS AND SCOTT PARK CAMPUS

Persons (students, staff, faculty and visitors) in buildings on the Main Campus and Scott Park Campus of the University of Toledo should all follow the R.A.C.E. acronym for fire response.

In the event of a fire, in either a residence hall, a classroom-dominant building (such as Rocket Hall), or a large building such as University Hall, the following protocol should be followed:

- R = RESCUE anyone from fire danger if it does not jeopardize your life
- A = Sound the ALARM by calling x2600 (UT Police) and pulling a red pull-station box
- C = CONFINE the fire by closing all doors and windows
- E = EXTINGUISH the fire if you have been trained on fire extinguisher use, or
EVACUATE the building if the fire is too large for a fire extinguisher to put out.

Source: Safety & Health Committee

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