



Stony Brook Medicine Administrative Policy and Procedures

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Environment of Care	Next Review Date: 06/11/2027
Scope: SBM Stony Brook Campus	Original Creation Date: 06/27/2017

Printed copies are for reference only. Please refer to the electronic copy for the latest version.

Policy: Stony Brook University Hospital (including all campus locations, collectively SBUH) follow defined roles and procedures in the event of a fire to protect patients, visitors and employees and minimize the impact on delivery of service, property and the environment

Definitions:

Authorized provider - A member of the medical staff, resident/fellow physician, nurse practitioner or physician assistant permitted by law and Stony Brook University Hospital (SBUH) to provide medical care, treatment and services within the scope of licensure and/or consistent with individually granted privileges.

Evacuation - the removal of patients to areas deemed fire safe for as long as necessary.

Fire Wardens (SBUH)/Fire Response Team (SBSH and SBELIH) - specially trained staff members, tasked with taking charge of their areas during fire and fire alarm situations and investigate all fire alarms within their area of responsibility.

Procedures:

A. Responsibilities

1. Fire Marshal (SBUH)/Security Officer (SBSH & SBELIH)
 - i. Respond to all fire incidents.
 - ii. Take appropriate evacuation and fire suppression actions.
 - iii. Act as emergency response Incident Commander (IC).
 - iv. Coordinates activities with the fire department.

2. Associate Director of Nursing (SBUH)/Nursing Supervisor (SBELIH) /Director of Facilities and Engineering (F&E). In the hospitals, after normal operating hours, for active fire incidents, activates the Hospital Incident Command System, as necessary, to support the relocation and evacuation efforts.
3. Fire Wardens (SBUH)/Charge Nurse (SBSH)/Administration (SBELIH) Lead the coordination of an evacuation for their area, directing patients and keeping account of who has moved.
4. Nurses take lead role under the direction of the Fire Warden (SBUH)/Administration (SBELIH)/nursing supervisor (SBSH) Security Officer or charge nurse in the evacuation and accountability of patients.
5. Authorized Providers assist the nursing staff and are under the direction of the Fire Warden (SBUH)/Administrator on Duty (SBELIH)/Security Officer (SBSH), or charge nurse, clearing halls, closing doors, and evacuating patients. They remain in the evacuation area providing patient care.
6. Volunteers who are responsible for patients assist in their evacuation under the guidance of the Fire Warden (SBUH)/Administrator on Duty (SBELIH)/Security Officer (SBSH), otherwise they evacuate the area.
7. Students evacuate the area unless specifically tasked by the Fire Warden (SBUH)/Security Officer or charge nurse (SBSH) to assist in patient evacuation or care.
8. Patient Care Technician/Certified Nursing Assistant (SBELIH) evacuate the area unless specifically tasked by the Administration or charge nurse to assist in patient evacuation or care
9. Security responds to all fires and fire alarm events in the hospital assisting with evacuation as well as keeping unauthorized personnel out of the fire zone. Security (SBELIH/ SBSH: Engineering Staff/Security or designee) meets fire department personnel directing them to the fire location and assures fire lanes are cleared for fire truck access.
10. Facilities/Engineering supervisors or designee report to the Incident Commander and make themselves available.
11. All other hospital staff present on the unit removes any of their items such as housekeeping (SBELIH/SBSH: EVS-Environmental Services), food, medication carts, code carts and linen carts from the corridors. They assist with patient evacuation, if required, or evacuate the area if not needed.

B. Fire Plan

1. The plan of action for inpatient areas and areas where the procedure renders the patient incapable of self-preservation is for complete fire/smoke compartment evacuation to an adjacent compartment protected by fire/smoke barriers until the area is deemed safe or until further evacuation is necessary.
2. Areas where patients are not rendered incapable of self-preservation and are ambulatory, the staff, patients and visitors are to evacuate.
3. Discovery of fire and/or visible smoke:
 - i. Follow **R.A.C.E.** procedures:
 1. **R** – Remove endangered persons.
 2. **A** – Alarm by activating fire alarm and dialing emergency reporting number.
 - a. SBUH: Dial 911 from any on-site landline or 631-632-3333 (911) from a cell phone.
 - b. SBELIH: Dial 66 to reach operator
 - c. SBSH: Dial 555
 3. **C** – Confine fire by closing door to room.
 4. **E** – Extinguish or Evacuate.
4. The code phrase "Code Red":
 - i. When an individual discovers a fire and/or visible smoke, immediately go to the aid of any endangered persons, then call out "Code Red".
 - ii. Upon hearing this phrase, nearby staff activate the nearest fire alarm pull station.
5. Remove all people from immediate danger.
 - i. In patient care areas, the room that has the fire, the adjacent rooms and any rooms directly across the hall are evacuated first.
 - ii. Visitors of inpatients are told to stay in the room with the person they are visiting and await further instruction.
6. If the fire alarm has not activated automatically, the person discovering the fire/smoke either follows paragraph 4.i above, or activates the nearest fire alarm pull station.
7. All patient room doors are closed to keep smoke out.
8. If the fire is being fed by piped oxygen,
 - i. The oxygen control valve for that room is directed to be shut off.
 - ii. Prior to shut off, assure that patients on that oxygen zone are not dependent on the flow of the oxygen.
9. Corridors are cleared of all obstructions on all fire alarms. Any transport bed parked in the corridor outside of a treatment room, is

- moved into the treatment room. Do not place items in patient rooms which could obstruct the removal of patients.
10. To use the fire extinguisher, the individual uses the acronym PASS:
 - i. **P**ull the pin.
 - ii. **A**im at the base of the fire standing back about 6 feet.
 - iii. **S**queeze the handle to discharge agent.
 - iv. **S**weep side to side.
 11. If the fire cannot be immediately extinguished or contained, and/or conditions warrant relocation rather than stay-in-room protection, the entire smoke compartment is evacuated to an adjacent smoke compartment.
 12. On levels 1-6 (at SBUH), all visitors and non-critical staff evacuate the alarm area to the outside or an adjoining fire safe area located past marked fire/smoke doors.
 13. In hospital areas other than alarm floor or area, staff are aware of a possible fire situation in another area and ready to receive evacuees from that area, or to evacuate based on input from the Incident Commander.
 14. SBUH: Stony Brook on-campus medical facilities are protected by supervised fire detection and alarm systems, consisting of heat/smoke detection, manual pull stations, fire suppression system interface, and occupant notification speakers and strobes.
 - i. All alarms are automatically transmitted to the University Police Department (UPD) Dispatch Center.
 - ii. The UPD Dispatch Center immediately notifies the Setauket Fire Department, Hospital and Campus Fire Marshals, and Security of the alarm.
 - iii. Within the Hospital, Hospital Pavilion and Cancer Center the direction of evacuation is guided by prerecorded voice fire alarm announcements stating the fire alarm location.
 - iv. The strobe lights activate on the floor or fire compartment where a fire condition exists. In the ACP and ASC, strobes activate throughout the building
 15. SBELIH: The hospital and off-site programs are protected by a supervised fire detection and alarm system, consisting of heat/smoke detection, manual pull stations, fire suppression system interface, and occupant notification speakers and strobes.
 - i. All alarms are automatically transmitted to the Greenport Fire Department via JCI Central Station Dispatch center.
 - ii. Within the hospital, the direction of evacuation is guided by staff (Switchboard Operation) with fire alarm announcements stating the fire alarm location.

- iii. The strobe lights activate on the floor or fire compartment where a fire condition exists. In the Quannacut and Sports Rehab buildings, alarms/ strobes activate throughout the building.
16. SBSH: The hospital is protected by a supervised fire detection and alarm system, consisting of heat/smoke detection, manual pull stations, fire suppression system interface, and occupant notification horns and strobes.
- i. All alarms are automatically transmitted to a Central Station, who dispatches the Southampton Fire Department.
 - ii. Fire alarms are coded to identify the specific location of the fire.
 - iii. Horns and strobes activate throughout the facility except for the operating room, unless the alarm is originating from within that space, at which point, the entire facility goes into alarm.
17. The Incident Commander provides further instructions on evacuation/relocation from the fire command center (SBUH), through the fire alarm speakers. Upon termination of an alarm, the Fire Marshal (SBUH)/ Operator (SBELIH & SBSH) announces all clear.

C. Operating rooms and Anesthetizing locations

1. [EC0067 Fire Emergency Prevention and Response in the Operating Rooms and Other Anesthetizing Locations](#) policy is referenced for full guidance.
2. The Fire Wardens (SBUH)/ Security Officer, Anesthesia, and Nurse Managers/Nursing Administrative Supervisors (NAS) (SBSH), Nurse Managers (SBELIH), are responsible for coordination of activities in the event of fire.
3. No cases are started after a fire alarm has activated. Surgeons and Anesthesiologists with cases in progress are informed of the situation and if active fire is present, advised to complete procedures as quickly as possible and report the minimum length of time before evacuation of the patient can take place.
4. The surgical team stays with their patient in the room until instructed to evacuate.
 - i. If evacuation becomes necessary, all patients are stabilized surgically and moved as quickly as possible to an adjacent smoke compartment.
 - ii. Reference posted fire evacuation plans for location of barriers and direction of travel to areas of refuge.
5. The decision to shut off oxygen flow to the affected room is made by the surgical team who then shut off the supply valve.

- D. SBUH and SBSH Emergency Department (ED). As part of [LD0065 Emergency Department Full Capacity Protocol](#), patients awaiting in-house acute care bed assignment are moved from the ED and to the most appropriate safe space.
- E. Sites with mental health services - Fire evacuation for the Mental Health Services (SBUH on T10, T12 North, and L4 CPEP, and in SBELIH on 2S) are delineated as per [MHEC0002 Fire Evacuation Plan](#).
- F. Off-sites specific fire evacuation procedures.
 - 1. During any fire/fire alarm incident, all building occupants exit the building and remain outside in designated area until the fire department authorizes re-entry.
 - 2. For a confirmed fire, the facility administrator or designee contacts:
 - a. **SBUH**: During Duty Hours: Fire Marshall Office at (631) 444-6783; After Duty Hours: University Police
 - b. **SBELIH**. During Duty Hours: Hospital Administration at (631) 477-5100; After Duty Hours: Nursing Supervision
 - c. **SBSH**. Both During and After Duty Hours: Facility Administrator or designee.
 - 3. If the fire department does not allow re-entry, the facility manager makes notification and a determination is made as to the disposition of the department's activities.
 - a. **SBUH**. Nurse Manager for Ambulatory Care
 - b. **SBELIH**. Director or Administrator
 - c. **SBSH**. Off-Site Manager for Ambulatory Care
 - 4. Note that some off-sites do not have fire alarm pull stations. In these cases, staff dial 911.
- G. Training on this Fire Plan and fire safety is provided at New Employee Orientation and Annual Required Education via LMS and in other modes (i.e., Daily Huddle Messages) as appropriate.
- H. A copy of this fire plan is provided to the Hospital Operator.

Forms: (Ctrl-Click form name to view)

None

Policy Cross Reference: (Ctrl-Click policy name to view)

[EC0027 Fire Prevention](#)

[EC0073 Life Safety Plan](#)

[EC0067 Fire Emergency Prevention and Response in the Operating Rooms and Other Anesthetizing Locations](#)

[LD0065 Emergency Department Full Capacity Protocol](#)

[MHEC0002 Fire Evacuation Plan](#)

[LD0065 Emergency Department Full Capacity Protocol](#)

Emergency Management P&P Manual, Total Evacuation Plan (SBUH)

Relevant Standards/Codes/Rules/Regulations/Statutes:

NFPA Life Safety Code 101-2012

NFPA 99-2012 Health Care Facilities Code

References and Resources:

None