

Department: Emergency Preparedness	Section:	Subject: Code Red ERHHC
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## Forward

Our fire procedure is one of many risk management strategies developed to promote staff, resident, and public safety. It is reviewed annually by the Environmental Safety Manager and CQI Manager, as well as the local fire chief. This document encompasses all aspects of fire safety for Espanola Regional Hospital and Health Centre (ERHHC).

If evacuation is required, refer to ERHHC Code Green- Evacuation. If a coordinated emergency response by several agencies is required, please consult the Town of Espanola Emergency Response Plan.

## Building Design and Layout

The Espanola Regional Hospital & Health Centre is a multi-level care campus. The fire/smoke monitoring and alarm system covers the following areas and connecting corridors:

- The Hospital including Maintenance Garage
- Long-term Care North and South Wing
- Family Health Team
- Queensway Place
- Non-Profit Housing (Seniors Apartments)

\*\*\*Incident Command (IC) is responsible for coordinating response in all the above areas until the fire department assumes command\*\*

## Emergency Command Center

The Emergency Command Center is located at the Emergency Department Nursing Station. This is where the Incident Commander works to coordinate the emergency response. The area is equipped with a fire panel, "911" phone, portable radios, fire extinguisher and copies of the emergency code response procedures. A similarly equipped area is located at the hospital auxiliary desk located at the Main Entrance Area. If Emergency Department is compromised, Incident Command will be the Main Entrance Desk (ext. 4081). \*\*\*Incident Commander (ED RN) will announce overhead location of fire and that Incident Command has been transferred. The first responding Manager or Senior Manager will assume the role of Incident Commander until relieved by Fire Department.

**Fire Zone maps** (diagram below) are displayed prominently throughout the Hospital Fire Zones and layout of the facility as defined above can be seen in the diagram below.



### **Fire Detection System and Notification Panels:**

The main fire alarm panel is in the Emergency Department (ED). This panel sounds when a smoke /heat detector or fire pull station is activated.

There are 5 Secondary Fire Alarm Panels located throughout the building in the following locations:

- Long-Term Care Main Entrance
- Long-term Care South Wing (\*only station with an auditory alarm as it is staffed 24/7))
- Hospital Main Entrance
- Family Health Team
- Maintenance Hallway
- Emergency Department

These secondary panels show Pre-Alarms, Trouble Alarms, & Fire Alarms. The digital screen shows the detailed location of the alarm or the system trouble alarm.

The fire alarm system is classified as a 2-stage system and is made up of smoke detectors, high temperature (heat) detectors and pull stations installed at various locations throughout the hospital and non-profit facilities.

### **Fire Response System Notification:**

**Stage 1** - When a smoke detector or sprinkler head is activated, the fire alarm will ring the bells in a slow pulsed fashion (Stage 1). The fire location will be indicated with a red box on the fire display panel floor plan. This is the normal stage for a fire alarm **or** when a heat detector is activated, and a pre-alarm sounds in LTC South-wing nurses station and in the Emergency Department.

**Stage 2** – If an evacuation is required, the fire chief or charge nurse will manually activate the Stage 2 alarm, using the key switch located in any open pull station. The Stage 2 alarm rings in a rapid pulsing tone. The key for a Stage 2 alarm is in the ED narcotic cupboard. Pull stations are located near exits throughout the facility.

### Emergency Department Command Centre Fire Panel

In the event of a fire, the Emergency Department Fire Panel located behind the nurse's station is the central command station.

If the fire is in the ED, the command center is moved to the main entrance (foundation desk).

The ED is equipped with a First Vision Monitoring Screen. This screen is locked behind a protective door and you will see a screen saver that says First Vision when it is not activated by an alarm.

When an alarm is activated, the door will automatically unlock so you can access the touch screen panel. **To open the door, you must push on it for it to release.**

When the system is alerted, there is an alarm the screen will display a picture of the area where the fire is located.

There will be a red box that is highlighted and flashing on the screen that indicates the alarm that was set off.

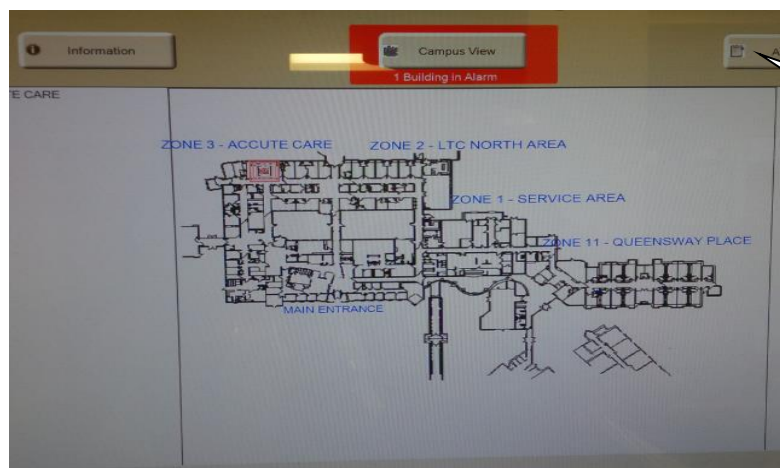
1. Touch the red box with your finger and a screen as below will show up on the monitor.
2. This screen indicated the location of the fire and the type of device set off.

Example: Emergency Entrance – Pull Station – Fire Alarm

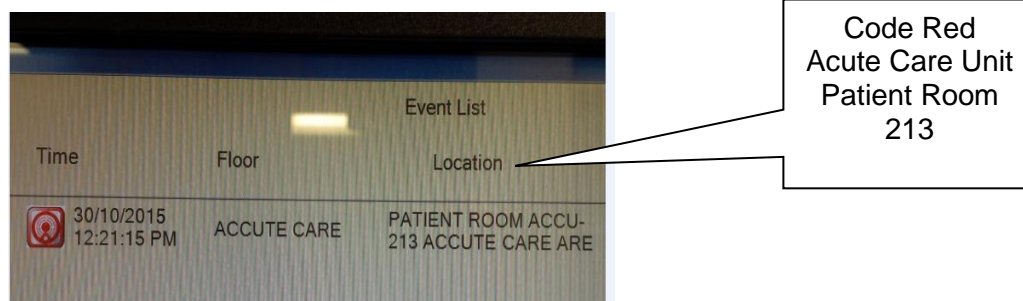
- \*Location of fire
- \*Device alerted (pull station/heat sensor)



3. If you have problems with the red box opening to the alarm screen touch the **Alarm List** button on the upper left-hand side of the screen.



4. You will see the screen to the left with the exact location of the alarm



5. Press the blue plunger and pick up the red phone.
6. Announce the location of the fire overheard – **Your attention please, your attention please – CODE RED \_\_\_\_\_** (location noted on fire panel and say location twice).
  - If ED is compromised, announce **“Incident Commander is transferred to Main Entrance Desk”**, after the announcement above.
7. Dial 9-911 and dispatch the fire department to the hospital and indicate the area of the alarm.
8. Proceed with the incident command system for the Code Red Procedure.
9. Once the alarm has been cleared and reset the fire panel will be relocked by maintenance staff.

### FALSE ALARM

A false alarm may occur due to accidental or inadvertent activation of a ‘pull station’, faulty sprinkler heads, burnt food etc.

In the event of a false alarm, contact Incident Command immediately to advise of situation. IC will announce,

**“CODE RED STANDBY- Remain on alert until all clear”**.

The monitoring station will call Incident Command when the alarm is pulled. If this does not happen, call 705-673-8181 to ensure the fire department is not dispatched.

Once IC is notified by maintenance, the Incident Commander will announce “Code Red- All Clear.

### PRE- ALARM RESPONSE

If a **pre-alarm** goes off in the building it will sound in both the LTC South Wing and the Emergency Department Nurses stations.



### **Emergency Department RN response to a Pre-Alarm or Trouble Alarm:**

The ED RN is responsible for Incident Command and for delegating someone to assess the location of the fire alarm, trouble alarm or pre-alarm.

The Code Red process is to be implemented if the pre-alarm is related to smoke or fire and the pull station closest to fire is to be activated so that a response team can be dispatched.

If it is a trouble alarm, then maintenance is to be called to reset the panel.

### **Water Sprinklers**

The hospital is designed with a fire suppression system. Sprinkler heads, located throughout the building, are designed to release water when subjected to the high temperatures created by a fire. Once released, water sprays in the affected area, the fire alarm panel is activated, and the bells will automatically ring.

The following areas of the building are not equipped with sprinkler systems:

- Assisted living
- Non-profit housing
- Queensway Place
- Family Health Team
- Maintenance Garage

### **Fire Hose Cabinets**

These cabinets are installed throughout the facility and may contain an extinguisher and fire hose. The fire hoses are for fire department use only. These hoses, when activated, can create serious injury due to the high pressure and volume of water they dispense.

### **Fire Extinguishers**

Fire extinguishers are in each fire hose cabinet. Many departments have additional extinguishers located in their work areas. Trained staff may use the fire extinguishers to extinguish a small fire (smaller than the size of a desk) that does not have excessive heat or smoke.

### **Smoke Control Doors**

The hospital is divided into various fire zones. Each zone is designed to contain smoke should a fire occur. The containment is achieved by using hallway and room doors which are manufactured to withstand smoke and fire for a specific time period. Many of these doors are held open electronically such as hallway doors and are released closed when the fire alarm is activated. By closing the doors, smoke is contained. Hold open devices are re-energized when the fire alarm panel is reset. **It is illegal to manually block smoke control doors open with any obstruction such as a doorstop, chair etc.** Staff should try to avoid opening a smoke control door in the fire zone.

### **Electronic Door Lock Release**

Any magnetically or electronically locked doors unlock when the fire alarm panel is activated.

### **Ventilation Shutdown**

In an effort to contain smoke created from a fire, the fire alarm panel when activated, will turn off all ventilation systems until the problem is cleared and the panel is reset.

### **Automatic Call Out to the Fire Department**

When the fire alarm sounds, the fire alarm monitoring station will automatically call the police dispatch to indicate a fire at the hospital. The Incident Commander will also call 9-911, and report on the status of the fire.

### Rescue Markers

Most doors within the facility have a rescue marker installed on the hinge side of the door. The marker is used to indicate that a room has been evacuated of its occupants and has been checked for smoke or fire. When a room is checked, the door is closed; the rescue marker is positioned to show only the white tab. If the door is opened, the marker separates and displays both the red and white tabs. In summary, any rescue marker that displays 2 colors indicates that room must be checked for occupants or smoke. A rescue marker that displays only a white tab indicates that room has been checked. Refer to Appendix 1.

### Staging Areas

When required, occupants of the building can stage in a variety of open areas. These include:

- Main entrance lobby
- Registration waiting area
- Emergency department waiting area
- LTC entrance lobby
- LTC-S activity room
- LTC dining rooms
- Cafeteria
- FHT waiting room

Incident Command will announce when departments should stage. When announced, staff should proceed to the nearest staging area that is not in the fire zone. At no time should a person pass through the fire zone to get to a staging area.

### Servicing of Fire Detection and Suppression Systems

A specialty service company performs annual and semiannual checks of fire detection and suppression systems including the fire alarm panel, fire hose cabinets, static pressure testing of all fire extinguishers in compliance with legislation and manufacturer's recommendations. The hospital maintenance department performs routine monthly inspections of all fire hose cabinets and fire extinguishers.

### Fire Protection System Impairment

If the sprinklers need to be shut off due to repairs, a Red Tag Permit must be affixed to the sprinkler to alert staff that the sprinkler is not operational. Notification must also be made to FM Global to advise of this sprinkler shut off.

**FM Global Phone Number- 905-763-5676**

**\*\*Maintenance staff will be responsible for affixing the Red Tag Permit and for notifying FM Global. \*\***

### Fire Drills

Fire drills are conducted twice each month. Drills may be "silent" or may involve activation of the fire alarm system. During a drill, the announcement of "Code Red" and location of the fire will be prefaced with "Exercise, Exercise, Exercise". Following the drill, a debriefing may be held to review the drill with the persons involved. The Manager Emergency Preparedness organizes, and initiates fire drills, provides written reports on all drills and fire alarms, and provides them to the management team as well as the Joint Health and Safety Committee.

The Incident Command system is implemented as indicated in this policy, and staff are required to conduct themselves as they would in an actual fire. Maintenance staff ensure that all ventilation systems have shut down, magnetic doors have unlocked, electric door holders have released, and that all systems have reset properly once the drill is complete.

### Debrief Meetings

A debrief meeting will be held within 1 business day where possible and will be facilitated by the Emergency Preparedness Manager. Immediate notification to the departmental manager and the Environmental Safety Manager must be made following/during a code red so that timely follow up can be initiated.

### Staff Training

All staff must regularly review the fire procedure. It is the responsibility of the department manager to ensure their staff review the document following any revision. Since many combustible and explosive materials are used in some medical procedures, it is the responsibility of all staff to follow safety processes in place when handling these substances and performing these procedures. Staff are required to be alert and familiar with the Code Red process. Fire procedures training is included in the orientation of new employees.

## **FIRE PROCEDURE – ROLES**

### **Manager Emergency Preparedness:**

- Recommends Staff Training for Code Red/ Incident Management response
- Schedules and oversees monthly fire drills
- Creates fire drill and fire alarm reports
- Ensures routine maintenance of all fire safety equipment
- Arranges the debrief meetings

### **Incident Commander - ED Nurse on duty during a Code Red, or Manager if ED is compromised**

The Emergency Department Nurse will assume the role of Incident Commander (IC). They shall relinquish Incident Command of the fire situation to the Fire Chief or designate upon Fire Department arrival but shall continue to be responsible for hospital patients and staff. Incident Command will respond to all fire / trouble or pre-alarm notifications throughout the facility to include:

- The Hospital to include Maintenance Garage
- Long-term Care North and South Wing
- Family Health Team
- Queensway Place
- Non-Profit Housing (Seniors Apartments)

Incident Command or their designate will act as Emergency Command Dispatcher and utilize the Code Red Response Sheet to ensure the appropriate steps are followed (see Appendix 2). If the Emergency Department is compromised, the Incident Commander will announce "Incident Command is now at the main entrance". When this is heard, available managers will report to the main entrance. The first to arrive will assume the role of Incident Commander and will plug the EP phone into the red phone jack. This person will remain Incident Commander until relieved by Fire Department.

### **Responsibilities of Incident Commander:**

- Identifies the fire zone in alarm by reading the display on the fire panel located in the Emergency department
- Announces "CODE RED (and location)" 3 times on overhead paging system.
- Calls 9-911 **and** confirms that fire department has been dispatched and that the fire chief or designate will access facility via Emergency entrance
- Maintenance responds to the fire. If after 4:00 p.m., IC pages maintenance on call
- Ensures all departments follow REACT and respective departmental fire procedures
- Meets Fire Officer at Emergency Department (Incident Command Centre)
- Fire Chief or Incident Commander will declare "All Clear" and Incident Commander will announce accordingly
- Once the Incident Commander or Fire Chief have determined an all clear", they may order that maintenance reset the alarm panel.
- Keep written records and times of sequence of events as per record sheets.

**In addition,**

- Incident Commander may have the emergency command center transferred to the Main Entrance Desk (ext. 4081) if the Emergency area is affected by smoke or fire.
- Provide the stage 2 evacuation key to the fire chief when requested. (Key is in the narcotic cupboard)
- 

**Fire Procedure – Overview**

Areas of the hospital not affected by the fire may continue to provide services as usual. Any departmental requirements (i.e., completing a patient census) should be completed.

No unauthorized person shall enter the fire zone during a fire alarm or drill.

There should be no unnecessary phone calls or overhead paging during a fire alarm or drill.

**If the fire is in your area:**

If smoke, flame, or heat make working in the area unsafe, get to safety. At no time should staff be putting themselves at undue risk. The fire department is responding, and they are trained and equipped to deal with the fire.

Do not allow any unauthorized persons to enter the fire zone.

If you have clients in your area, guide them to the nearest safe area or have them leave the building.

**If you discover smoke or fire in your area.... REACT!**

**R**emove persons in immediate danger

**E**nsure all doors are closed to confine the fire and smoke

**A**ctivate the fire alarm system using the nearest pull station

**C**all 911, notify incident command of location of fire during the day or page fire location by dialing \*\*9 (pause) 00, then announcing, "Code Red (location of fire)!"

**T**ry to extinguish the fire or concentrate on further evacuation, set rescue markers

**If the fire is outside of your area:****If you hear the fire alarm....**

- Listen for the location of the fire from overhead paging
- If your work area is in the fire zone – "REACT"
- Remain in your work area if you **are not** in the fire zone; perform duties as outlined by your department. Listen for announcements over public address system.
- If returning to your work area, do not cross into or through a fire zone
- The alarms will stop, and "All Clear" will be announced when the situation is resolved

These 2 fundamental processes are the foundation of the fire procedure, and all staff are expected to respond accordingly. Various departments have specific duties in addition to the 2 processes.

**Departmental Procedures**

Some departments have specific duties unique to their work area. These are listed under



each department heading. In general, however, all departments must:

- Perform additional duties as outlined in their specific department procedures
- Attend a debrief meeting after each fire drill or fire alarm
- In the event of Zone evacuation, follow your department assembly area designation unless otherwise instructed by the Incident Commander or Fire Chief.

**In addition, specific requirements for each department are as follows.**

### **Acute Care Department**

If fire is in this area:

- REACT
- Do not allow unauthorized persons to enter this area
- Shut off all medical gas. Medical gas valve boxes are in the hallway wall outside room 209
- Evacuate to ED or registration waiting area
- If evacuating:
  - Turn on room lights
  - Remove patient to safe location
  - Close patient room door
  - Set rescue markers (Only on verified vacant room)
  - Palliative Room 209- put patient on a blanket on the floor and drag out, if necessary, as the bed does not fit through the door.
- Evacuation will be completed in the following order:
  - Those patients in immediate danger
  - Patients who are ambulatory
  - Patients who use mobility aids (wheelchair or walker)
  - Patients who are bedridden
- If time permits, take the patient charts and medication cart

If fire is outside of this area:

- Complete patient census. (Refer to Appendix 3). Reassure patients and visitors as you proceed.
- Listen for announcements
- Respond as directed
- If the situation in your area changes, call 911 to inform the Incident Commander

### **Diagnostic Imaging Department**

If fire is in this area:

- REACT
- Do not allow unauthorized persons to enter this area
- Shut off all medical gases if the fire or smoke originates in your department. Medical Gas valve box is located on the wall of the diagnostic imaging department outside of the washroom
- Evacuate to Outpatient/Registration waiting area
- Assist patients in evacuation

If fire is outside of this area:

- Reassure patients and visitors
- Listen for announcements
- Respond as directed
- If the situation in your area changes, call 911 to inform the Incident Commander

### **Dietary**

If fire is in this area:

- REACT

- Do not allow unauthorized persons to enter this area
- Turn off all cooking appliances

If the fire originates from the cooking surfaces in the kitchen, and the over the range extinguisher has not been activated, activate the dry chemical extinguisher by pulling the pin on the extinguishing system located on the wall beside the ice machine.

- Evacuate to the main lobby.
- Assist patients in evacuation

If fire is outside of this area:

- Reassure patients and visitors
- Listen for announcements
- Respond as directed
- If the situation in your area changes, call 911 to inform the Incident Commander
- If you are outside of the kitchen or server, and in the fire zone, assist as instructed; otherwise return to your workstation (kitchen or server), without crossing the fire area.

### **Emergency Department**

If fire is in this area:

- REACT
- Do not allow unauthorized persons to enter this area
- Shut off all medical gas. Medical gas valve boxes are located at the emergency nursing station, on the hallway wall across from the emergency nursing station, in the cast room.
- Evacuate to Main Lobby
- The emergency department ward clerk will monitor the emergency entrance and screen patients.
- Assist patients in evacuation
- If evacuating:
  - Turn on room lights
  - Remove patient to safe location
  - Close patient room door
  - Set rescue markers (Only on verified vacant room)
- Evacuation will be completed in the following order:
  - Those patients in immediate danger
  - Patients who are ambulatory
  - Patients who use mobility aids (wheelchair or walker)
  - Patients who are bedridden
- If time permits, take the patient charts

If fire is outside of this area:

- Complete patient census. (Refer to Appendix 4) Reassure patients and visitors as you proceed.
- Listen for announcements
- Respond as directed
- If the situation in your area changes, call 911 to inform the Incident Commander

### **EHT –Clinic**

If fire is in this area:

- REACT
- Do not allow unauthorized persons to enter this area
- Shut off all gas cylinders
- Evacuate to cafeteria
- Assist patients in evacuation
- If evacuating:
  - Turn on room lights
  - Remove patient to safe location

- Close patient room door
- Set rescue markers (Only on verified vacant room)
- Evacuation will be completed in the following order:
  - Those patients in immediate danger
  - Patients who are ambulatory
  - Patients who use mobility aids (wheelchair or walker)

If fire is outside of this area:

- Reassure patients and visitors.
- Perform patient census by inspecting all rooms for patients. Assign designated staff for count.
- Close room doors
- Listen for announcements
- Respond as directed
- If the situation in your area changes, call 911 to inform the Incident Commander

### **Laboratory**

If fire is in this area:

- REACT
- Do not allow unauthorized persons to enter this area
- Evacuate to Main Lobby
- Assist patients in evacuation

If fire is outside of this area:

- Reassure patients and visitors.
- Listen for announcements
- Respond as directed
- If the situation in your area changes, call 911 to inform the Incident Commander

### **Long Term Care North**

If fire is in this area:

- REACT
- Do not allow unauthorized persons to enter this area
- Perform resident census (Appendix 5) by inspecting all rooms for residents, close resident room door, **set rescue marker only if resident is removed from room.**
- Evacuate to LTC-S dining room or activity room
- If evacuating:
  - Turn on room lights
  - Remove resident
  - Palliative Room- put patient on a blanket on the floor and drag out, if necessary, as the bed does not fit through the door.
  - Close resident room door
  - Set rescue markers (Only on verified vacant room)
  - Evacuate resident outside of the fire zone
- Evacuation will be completed in the following order:
  - Those residents in immediate danger
  - Residents who are ambulatory
  - Residents who use mobility aids (wheelchair or walker)
  - Residents who are bedridden
- If time permits, take the resident charts and medication cart

If fire is outside of this area:

- Perform resident census by inspecting all rooms for residents, close resident room door, **set rescue marker only if resident is removed from room.**
- Magnetic doors unlock. Ensure that residents do not wander off of unit

- Reassure residents/visitors.
- Listen for announcements
- If the situation in your area changes, call 911 to inform the Incident Commander

### **Long Term Care South**

If fire is in this area:

- REACT
- Do not allow unauthorized persons to enter this area
- Perform resident census (Appendix 6) by inspecting all rooms for residents, close resident room door, **set rescue marker only if resident is removed from room.**
- Evacuate to LTC-N dining room or activity room
- If evacuating:
  - Turn on room lights
  - Remove resident
  - Close resident room door
  - Set rescue markers (Only on verified vacant room)
  - Evacuate resident outside of the fire zone
- Evacuation will be completed in the following order:
  - Those residents in immediate danger
  - Residents who are ambulatory
  - Residents who use mobility aids (wheelchair or walker)
  - Residents who are bedridden
- If time permits, take the resident charts and medication cart
- Activate the reset key switch at the nursing station once the fire alarm panel has been returned to normal. Until this is done, the door locks on this wing will remain unlocked.

If fire is outside of this area:

- Perform resident census by inspecting all rooms for residents, close resident room door, **set rescue marker only if resident is removed from room.**
- Magnetic doors unlock. Ensure that residents do not wander off unit
- Reassure residents/visitors.
- Listen for announcements
- If the situation in your area changes, call 911 to inform the Incident Commander
- Activate the reset key switch at the nursing station once the fire alarm panel has been returned to normal. Until this is done, the door locks on this wing will remain unlocked.

### **Laundry/EVS**

If fire is in this area:

- REACT
- Do not allow unauthorized persons to enter this area
- Shut down the washing machines, place dryers in cool down mode before shutting them down. Turning a dryer off while hot can spontaneously ignite linen.
- Evacuate to Main Lobby

If fire is outside of this area:

- Reassure visitors.
- Listen for announcements
- If the situation in your area changes, call 911 to inform the Incident Commander
- If the fire is not in this fire zone, staff will proceed to the visitor entrance in their work assignment area and restrict any visitor access to the building until the "all clear" is given. (See Appendix 7)
- Patients may be granted entry to the emergency department, diagnostic imaging, laboratory, physiotherapy, or family health team provided that the department is not in the

fire zone.

### **Maintenance**

If fire is in this area:

- REACT
- Do not allow unauthorized persons to enter this area
- Evacuate to Cafeteria
- Once the Incident Commander or Fire Chief have determined an all clear”, they may order that maintenance reset the alarm panel.
- Close any open pull station
- Return the fire alarm panel to normal operation
- Reset doors
- Call back to incident command so they can announce the “all clear.

If fire is outside of this area:

- Reassure patients and visitors.
- Listen for announcements
- Pick up fire extinguisher and respond to location of fire. Call 911 and report situation to Incident command. If possible, extinguish fire or close door to contain it.
- Meet with fire department
- Assist in evacuation or any other task as required by department manager
- Once the Incident Commander or Fire Chief have determined an all clear”, they may order that maintenance reset the alarm panel.
- Close any open pull station
- Return the fire alarm panel to normal operation
- Reset doors

### **Management Group**

If fire is in your area:

- REACT
- Do not allow unauthorized persons to enter this area
- Evacuate to Main Lobby
- Assist patients in evacuation

If fire is outside of this area:

- Reassure patients and visitors.
- Listen for announcements
- Respond as directed
- If the situation in your area changes, call 911 to inform the Incident Commander
- When requested by the IC, the management team will meet in the Registration waiting area for instructions from incident command.

### **Medical Records / Finance**

If fire is in this area:

- REACT
- Do not allow unauthorized persons to enter this area
- Evacuate to Main Lobby
- Assist patients in evacuation

If fire is outside of this area:

- Reassure patients and visitors.
- Listen for announcements

- Respond as directed
- If the situation in your area changes, call 911 to inform the Incident Commander
- During business hours, one person will proceed to the Main Entrance to screen persons entering the building. Anyone who would be entering or passing through the fire zone will be required to stage in the entrance area until the "all clear" announcement is made.

### **Pharmacy**

If fire is in this area:

- REACT
- Do not allow unauthorized persons to enter this area
- Evacuate to Emergency Department or Main Lobby
- Assist patients in evacuation

If fire is outside of this area:

- Reassure patients and visitors.
- Listen for announcements
- Respond as directed If the situation in your area changes, call 911 to inform the Incident Commander

### **Physiotherapy**

If fire is in this area:

- REACT
- Do not allow unauthorized persons to enter this area
- Evacuate to Cafeteria
- Assist patients in evacuation

If fire is outside of this area:

- Reassure patients and visitors.
- Listen for announcements
- Respond as directed
- If the situation in your area changes, call 911 to inform the Incident Commander

### **Registration**

If fire is in this area:

- REACT
- Do not allow unauthorized persons to enter this area
- Evacuate to Main Lobby
- Assist patients in evacuation

If fire is outside of this area:

- Reassure patients and visitors.
- Listen for announcements
- Respond as directed
- If the situation in your area changes, call 911 to inform the Incident Commander

### **QWP/Non-Profit Housing-Refer to Code Red Non Profit Fire Procedure**

If fire is in this area:

- REACT
- Do not allow unauthorized persons to enter this area
- Evacuate to Cafeteria or outside
- Assist residents in evacuation

**\*\*\*If this area needs to be evacuated, please identify yourself when going door to door.**

**Recovery Plan**

- Debrief for staff, residents, patients, volunteers, students using EAP, Social work department or delegate
- Create an action plan to resume operations, evaluate current process, and identify process improvement opportunities.

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Signatures of Approval

Emergency Preparedness Manager

*Brunetti*

Fire Chief

*Gabe Fisher*

Date

*6/10/22*

*1 6/16/22*

*For Code Red F.S.P.*

Appendix 1

**Rescue Markers**

Image 1. Indicates a room has been evacuated.



Image 2. Indicates a room has not been evacuated.





# CODE RED - ERHHC



INCIDENT COMMANDER: ER NURSE, PHYSICIAN ASSISTANT OR REGISTERED NURSE

Date of Incident: \_\_\_\_\_

Time of Incident: \_\_\_\_\_

		Time	Initial
1	Fire alarm sounds or a fire is reported to ED staff		
2	Establish Emergency Command Centre at the Emergency Nurse Station or Main Entrance if ED is compromised		
3	Check Fire Panel for location of the fire (door panel unlocks when alarm is activated- push on door to open)		
4	A red box will appear on the screen when the fire alarm was activated - <b>touch the "alarm list" box with your finger.</b>		
	A grey screen will pop up with the location of the fire and the pull station or heat sensor that was activated.		
4	<b>Press the Blue Plunger</b> at the panel to activate the bell delay so you can announce the fire location		
5	<b>Pick up Red phone and dial **9 (pause) 00 to announce to entire health campus</b>		
	<b>Announce:</b> "Your Attention Please, Your Attention Please, Code RED _____ (location on the screen) Code RED _____ (location on the screen) If ED is compromised Announce: "Incident Command is transferred to the Main Entrance Desk". The first responding manager will take over IC.		
	<b>Hang up and dial 9-911</b> (external call to the Fire Dispatch Centre)		
5	<b>Notify</b> fire dispatch of the location of the alarm and if it is a real alarm or a scheduled drill		
6	Maintenance person will respond to the location of the alarm with the fire extinguisher. Maintenance or unit staff will call 911 to report conditions at the scene.		
7	<b>Update</b> 9-911 dispatch as necessary with specifics of the fire/smoke (location, size, life safety issues, need to evacuate)		
8	<b>Call</b> Maintenance On-Call staff (705.675.9499) if not on-site		
9	<b>Receive</b> Fire Department and transfer Incident Command to the Fire Chief or Designate		
	<b>At this point the Fire Department Takes Control</b>		
	<b>Assist</b> Fire Chief as required - they will inform you of any needs		
10	<b>Identify</b> appropriate staging area (main entrance, Cafeteria, QWP, FHT etc.) if evacuation required		
	<b>If evacuation required, activate stage 2 alarm</b> (key in narcotic cupboard)		
	<b>Pick up Red phone and dial **9 (pause) 00 to announce to entire health campus</b>		
	<b>Announce:</b> "Your Attention Please, Your Attention Please, Code Green _____ (location of area to be evacuated) Code GREEN _____ (location of area to be evacuated), Staging area _____ (location of staging area), Staging area _____ (location of staging area)"		
	<b>Notify</b> Senior Manager if after hours.		
10	<b>Designate</b> Communication Officer, Area Manager or designate and assign duties as required		
11	<b>Once maintenance have reset the fire panel, pick up Red phone and dial **9 (pause) 00 to announce to entire health campus Announce "All Clear Code Red, All Clear Code Red"</b>		

Appendix 3

**Emergency Code Census- ACUTE****Date:****Staff:**

<b>ROOM</b>	<b>PATIENT (if present)</b>	<b>VISITORS (#)</b>
201-1		
201-2		
202-1		
202-2		
202-3		
203-1		
203-2		
205		
209		
211-1		
211-2		
213-1		
213-2		
215-1		
215-2		
Conference Room		
Family Room		

Comments:

Appendix 4



**Emergency Code Census- EMERGENCY DEPARTMENT**

**Date:**

**Staff:**

<b>ROOM</b>	<b>PATIENT (if present)</b>	<b>VISITORS (#)</b>
<b>1</b>		
<b>2</b>		
<b>3</b>		
<b>4</b>		
<b>5</b>		
<b>6</b>		
<b>7</b>		
<b>8</b>		
<b>9</b>		
<b>10</b>		
<b>11</b>		
<b>Chairs</b>		
<b>Triage</b>		
<b>Registration</b>		
<b>W/R</b>		
<b>Conference Room</b>		
<b>MD Office</b>		

Comments:





**Appendix 7****EVS Code Red Response by Workload**

- SH - LTC S fire exit (door into garden)
- NH - LTC N at door to lab/main entrance inside LTC facing out to watch acute door also
- AA - Middle of link to limit access into hosp/clinic as needed depending on fire area
- ALH- Acute to main lobby doors  
One person from Health Records/Finance will watch the Main Entrance door
- AB - Acute into waiting room and ED  
Main Entrance after 4
- L/FL Service Hall to LTC N door inside LTC to watch exit door (or as needed)
- NEH - As needed by charge nurse
- QWP- Follow procedure as posted.

**Please remember when watching a door that unlocks, you must wait until maintenance has confirmed they are locked before leaving – not just when “All Clear” is announced.**