

**Purpose: Follow a standard response to fire in order to ensure the safety of patients, visitors, and staff**

## 1 Situational Awareness

Locate your / your department's:

- ✓ Emergency procedures flipbook (*red with tabs, hanging on wall*)
- ✓ Safety badge (*worn with your Photo ID*)
- ✓ Closest fire alarm pull station(s) and fire extinguisher(s)
- ✓ Medical gas shut-off valve
- ✓ Evacuation map sign (*by the stairwell on each unit*)
- ✓ MedSleds (*Located in the alcove next to the evacuation stairwell*)
- ✓ Disaster kit supplies

## 2 Respond using R.A.C.E.R.

In the event of a fire, staff will follow the basic plan by using the acronym **R.A.C.E.R.**

- ✓ **R – Rescue** anyone in imminent danger.
- ✓ **A – Alarm** other occupants of the danger by activating the nearest fire alarm pull station in the area and calling 211 (option 2).
- ✓ **C – Contain** the smoke/fire by closing doors in corridors and at stairs to prevent it from spreading. Clear hallways.
- ✓ **E – Extinguish** with a fire extinguisher if safe to do so by using the acronym **P.A.S.S.:**
  - **P – Pull** out the pin (*perpendicular, not up*).
  - **A – Aim** at the base of the fire and attempt to extinguish the source of fuel.
  - **S – Squeeze** the handles.
  - **S – Sweep** the extinguisher nozzle from side to side at base of fire. Start from a safe distance and move closer as the flames extinguish. Continue until fire is completely out.
- ✓ **R – Relocate**, away from smoke or fire into the next smoke compartment (may be the adjacent patient unit on the same floor).

## 3 Evacuation and Relocation

- ✓ Evacuation of a hospital due to smoke or fire is not needed in majority of cases due to the way the building is constructed and the increased risks to the patients. The hospital occupancy is designed to protect patients, visitors and staff and uses a “**Shelter in Place**” concept.
- ✓ If smoke/fire is visible within a patient care unit, occupants of the impacted unit may need to relocate to another unit on the same floor (“**horizontal evacuation**”).
- ✓ Evacuating from one floor to another (“**vertical evacuation**”) -- or out of the building -- is an absolute last resort and requires oversight of an Incident Commander to ensure patient safety.
- ✓ At the direction of hospital leadership, the impacted unit(s) would move vertically using the closest stairwell according to evacuation procedures. **MedSleds** are positioned in each patient care unit to safely evacuate patients who are unable to walk down the stairs.
- ✓ **Emergency Assembly Points** are on Pasteur Drive above the Pasteur Visitor Garage.
- ✓ “**Area of Refuge**” in the stairwell vestibules are designed to provide temporary increased smoke and fire protection for individuals awaiting evacuation assistance. Utilize the communications system to call for help and make sure people don't block the path of egress to the stairwell.