I. PURPOSE
This procedure establishes the steps to perform during a fire drill for patient care areas at the University Medical Center patient care areas.

II. PERSONNEL AFFECTED
Fire Safety Unit
Department of Public Safety
Nursing
Facilities

III. DEFINITIONS
Drill Coordinator – The person responsible for scheduling and conducting the drill, usually a member of the Fire Safety Unit from EH&S.

IV. RESPONSIBILITIES
The Drill Coordinator will contact the Public Safety Dispatch Center and Facilities Work Center (X 34567) to advise them that a fire drill will be conducted for the specific area. The Drill Coordinator will disable the city tie where required.

V. PROCEDURES
Drills shall be conducted at one per shift per quarter or one per quarter as required.

At least 50% of the drills will be unannounced per Joint Commission requirements. All personnel on the drill floor above and below the drill floor will participate in the drill, if not directly involved with patient care.

Drills are to be used to determine the fire readiness of staff, their knowledge on the use and operation of the fire alarm system, the transmission of the fire alarm, the proper response, containment of smoke and fire, horizontal and vertical evacuation techniques (no actual evacuation) and fire extinguishment techniques. Drills evaluate the effectiveness of the fire plan (R.A.C.E). In addition, drills will review the communication between staff, Public Safety and the Command Post.

Each drill should simulate emergency conditions so staff act out the fire response try to include evacuation of a simulated patient from the room or to an adjoining smoke compartment.

For observing staff knowledge away from the point of origin, an approximate sampling of 20% of the remote areas will be performed. The remote evaluation will be completed by staff that is familiar with the area. At a minimum, documented observations will be done for the area of origin, the units on the floor above and below the drill floor, and units on the drill floor.
Prior to beginning the drill, the Drill Coordinator shall distribute the “Remote Area Evaluations” as defined above.

All staff will be expected to participate in each drill and carry out the procedures called for in R.A.C.E, with the exception of actually moving patients. Patients and visitors should be moved out of the corridor and the corridors cleared of any obstructions.

The Drill Coordinator will choose the site for the drill. The location will be shifted throughout the different departments so it is not held in the same area and other departments will receive experience.

The Drill Coordinator is required to notify Public Safety the location of the drill site and that they are disabling the fire alarms as follows:

**Strong Memorial Hospital**
- Day & Evenings- full alarms (City Tie Off)
- Nights- (Audio and City Tie Off)

**Behavioral Health**
- Day & Evenings- full alarms (City Tie Off)
- Nights- (Audio and City Tie Off)

**Medical Center 3000 area & 5000 area**
- Full alarms (City Tie off)

**Ambulatory Care Facility**
- Full alarms

**Rehabilitation Center 5-3200/4100 (G-6200 Fast Panel)**
- Full alarms

**Rehabilitation Center 5-2200 (SMH system- City Tie Off)**
- Full alarms

**Wilmot Cancer Center**
- Day & Evenings- full alarms (City Tie Off)
- Nights- (Audio and City Tie Off)

**Golisano Children’s Tower**
- Day & Evenings- full alarms (City Tie Off)
- Nights- (Audio and City Tie Off)

Proceed to the drill site and pick out a staff member and give them the drill scenario. The information should be specific in nature so they can have a better understanding of “what they are seeing.”
Observe staff actions throughout the drill. If staff performs inadequately, the Drill Coordinator should step in to guide the staff through the procedures. Do not prompt staff unless absolutely necessary or if they are about to perform an unsafe act. Public Safety should also participate, as much as possible, as they also are required to establish the command post & call for additional assistance. Due to their work loads, Public Safety may not be available to participate in all drills.

Depending on staff actions, expand the drill scenario (i.e. light/heavy smoke in corridor, fire extension, ineffective use of the fire extinguisher, etc.) This will allow staff to make further decisions on what additional action might be required. (i.e. evacuate, protect in place, etc.)

If the drill escalates to a declared evacuation, have staff walk you through the appropriate procedures and carries. Do not use patients for demonstrating any fire drill technique.

There is the option to use Rescue Randy, a mannequin designed to have staff demonstrate sheet drags & carries to reinforce skills required if an evacuation was declared.

The remote areas should evaluate the staff in their area to ascertain whether or not staff is carrying out the steps as defined in the fire plan and as identified in the “Strong Memorial Hospital- Fire Drill Remote Evaluation” form (Appendix 3).

At the conclusion of the drill, conduct a brief critique of the drill with staff in the area. Bring both positives and areas for improvement to light. Have participating staff and other personnel (Facilities and Public Safety) sign the Environmental Safety Training form and attach it with the drill report.

Reset the fire alarm system and restore city tie. Notify Public Safety and the Facilities Work Center (X34567) that the fire drill is complete and to regard all alarms as actual conditions.

The remote drill sheet should be picked up by the Drill Coordinator. This provides time to discuss any questions the units that completed a remote drill sheet may have.

The Remote Fire Drill Evaluation sheets can be faxed to the office upon completion of the drill and reviewed for any issues.

The Drill Coordinator will complete the appropriate fire drill evaluation form and rate the unit’s performance.

Corrective actions should be directed to the unit Nurse Manager via email describing the problems. The evaluations are attached with the drill report and filed in appropriate drill book for review by the Fire Marshal.

Submit work orders for any items that need to be corrected by Facilities and document the work order number or place a copy of the electronic work order in the written report for tracking purposes.
Records of drill critiques shall be available for review for 3 years per New York State & Joint Commission requirements.

To ensure all units receive a fire drill, fill in the date the drill was conducted in the Unit Listing spreadsheet matrix, located in the fire drill files. Remote evaluations do not need to be tracked.

Remote area evaluations are distributed as follows:

**Strong Memorial Hospital**
All the units on the floor above, below and the other units on the floor of the drill

**Behavioral Health**
All the units on the floor above, below and the other units on the floor of the drill

**Medical Center 3000 area & 5000 area.**
Full building evacuation, no remote required

**Ambulatory Center Facility**
The floor above and below the drill floor

**Rehabilitation 5-3200/4100 areas.**
No remote required

**Wilmot Cancer Center**
The floor above and below the drill floor

**Golisano Children’s Tower**
All the units on the floor above, below and the other units on the floor of the drill

**How to Conduct an Off-Site Fire Drill**
Most of our off-site practices share space with other tenants, so the actual activation of the fire alarm system is not always possible. If you wish to conduct a fire drill and activate the fire alarm system you will need to coordinate that activity with the building landlord. Conducting drills where the fire alarm system is not going to be activated (simulated) then verbal commands will be used.

Drills are to be used to determine the fire readiness of staff and their knowledge of **Rescue, Activate the alarm, Close doors to confine the fire, Evacuate/Extinguish** is trained within the last Year. Knowledge on the use and operation of the fire alarm system (simulated but awareness that staff know where the alarms are located), the proper response, containment of smoke and fire, evacuation techniques (no actual evacuation) and fire extinguishment techniques. Drills evaluate the effectiveness of the fire plan...
(R.A.C.E). In addition, drills will review the communication between staff, and between staff and patients.

Develop a scenario (i.e. computer on fire, smoke in the hallway, trash can fire, fire in your kitchenette, simulate certain doors won’t open, etc.). Once you have a scenario, approach a staff member and describe the scenario, stress the fact that this is a drill and observe their RACE techniques. If the fire alarm system is NOT to be activated, intercept staff member from activating the pull station, but do have them identify the location and simulation of activation. Each drill should simulate emergency conditions so staff act out the fire response try to include evacuation of a simulated patient from the room or to an adjoining smoke compartment. Observe staff actions throughout the drill. Depending on staff actions, expand the drill scenario (i.e. light/heavy smoke in corridor, fire extension, ineffective use of the fire extinguisher, etc.) This will allow staff to make further decisions on what additional action might be required. Give special attention to the process of evacuating employee or patient with disabilities or special medical attention. People using walkers or wheelchairs might require assistance to exit the building. Do not use patients for demonstrating any fire drill technique.

If staff performs inadequately, the Drill Coordinator should step in to guide the staff through the procedures. Do not prompt staff unless absolutely necessary or if they are about to perform an unsafe act.

Perform fire drill and disaster drill at different times on each shift so staff does not become familiar with the time of day.

At the conclusion of the drill, conduct a brief critique of the drill with staff in the area. Bring both positives and areas for improvement to light. The Drill Coordinator will complete the appropriate fire drill evaluation form and rate the unit’s performance. Have participating staff and other personnel sign the Environmental Safety Training form and attach it with the drill report. Keep a copy of the report in your files and send a copy to EH&S. RC Box 278878.

Conduct drills at random times to simulate a real-world scenario.

VI. REFERENCES
International Fire Code (2015) Chapter 4
JC ECC Standards
VII. APPENDICES/FORMS
Appendix 1: Fire Drill Evaluation- Strong Memorial Hospital
Appendix 2: Fire Drill Evaluation- Strong Recovery
Appendix 3: Strong Memorial Hospital- Fire Drill Remote Evaluation
Appendix 4: Environmental Safety Training attendance form

VIII. REVISION HISTORY

<table>
<thead>
<tr>
<th>Date</th>
<th>Revision No.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>5/24/2010</td>
<td>New</td>
<td>Converting existing procedure into current policy format</td>
</tr>
<tr>
<td>6/18/2012</td>
<td>1</td>
<td>Added information about simulating emergency conditions under Procedures.</td>
</tr>
<tr>
<td>9/25/2017</td>
<td>2</td>
<td>Update drill forms, align the procedures and add Golisano Children’s Tower</td>
</tr>
<tr>
<td>11/16/18</td>
<td>3</td>
<td>Added steps on how to conduct an off-site fire drill</td>
</tr>
</tbody>
</table>
## Appendix 1
Fire Drill Evaluation - Strong Memorial Hospital

<table>
<thead>
<tr>
<th>STAFF FAMILIARIZATION</th>
<th>Possible</th>
<th>Awarded</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Rescue anyone in immediate danger**</td>
<td>C</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Activate the fire alarm/Called Security**</td>
<td>C</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Confine the fire/closed doors **</td>
<td>C</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Evacuate or Evacuation**</td>
<td>C</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Importance of Compartmentation **</td>
<td>C</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Location of extinguisher **</td>
<td>C</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Location of exits **</td>
<td>C</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Location of pull station **</td>
<td>C</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Staff key for exiting from fire alarm**</td>
<td>C</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Responsibilities for medical gas shutoff</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Location of medical gas zone boxes</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Location of Emergency Preparedness Manual</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Location of horizontal receiving site</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Location of vertical receiving site</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Operation of extinguisher P.A.S.S.</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Location of stairwell door lever/window tool</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. Removal of all equipment from the halls</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Visitors and patients informed</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Rescue Rand used for patient carries</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Location of chalk markers used on doors</td>
<td>1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SECURITY SUPPORT</th>
<th>YES</th>
<th>NO</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Security Responded</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Command Box Location</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Command Post established by</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Proper over-head pagers made</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BUILDING SYSTEMS</th>
<th>YES</th>
<th>NO</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fire Alarms tones audible</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fire Alarms tones visible</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Over-head paging system audible</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hold open doors closed on fire alarm</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SCORING</th>
<th>Score based on items #1 - #20</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pass</td>
<td>No additional action required</td>
</tr>
<tr>
<td>Critical Fail</td>
<td>Requires an In-Service training</td>
</tr>
<tr>
<td>Fail</td>
<td>Requires an In-service training and Re-Dall</td>
</tr>
</tbody>
</table>

** Must complete all blue shaded areas and receive at least 10 points to pass

Enter N/A for items not applicable to the drill site or for questions not asked

<table>
<thead>
<tr>
<th>CRITIQUE</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Shift schedules</th>
<th>Days</th>
<th>Evenings</th>
<th>Nights</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0700-1000</td>
<td>1500-2000</td>
<td>2300-0700</td>
</tr>
</tbody>
</table>
Appendix 2
Fire Drill Evaluation- Strong Recovery

Strong Recovery Fire Drill

Date of Drill
Dried water line
Dried water file
Time for full evacuation of area: (Target time of 3 minutes)
S O D G 1st time (dial)
2nd time (dial)
D R I L L Frequency
Firefighting Skill
Name of Charge Person

Does drill have the meaning of B.A.C.E.?

Does evacuation site known when the fire alarm will sound?

Does evacuation site know where the fire extinguisher are?

Are your evacuation plan discussed including specific movement?

What is the maintenance on the door to maintain that the room has

been sealed?

Where is the location of the clock?

Was the alarm audible in all areas of the ward?

Were the fire alarm stations visible in all areas of the unit?

DidCorrecthandopenonthefirstalarmopenrelatively,close, and

trunk without complaint?

If NO, where?

If NO, where?
## Appendix 3

### Strong Memorial Hospital- Fire Drill Remote Evaluation

#### Fire Drill Remote Site Evaluation Form

Each unit receiving this form is required to fill it out completely when a fire drill being is being conducted in another area.

<table>
<thead>
<tr>
<th>Date:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit filling out this evaluation:</td>
<td></td>
</tr>
<tr>
<td>Location of Fire Drill:</td>
<td></td>
</tr>
<tr>
<td>Shift (circle one):</td>
<td>Day (0700-1500) Evening (1500-2300) Night (2300-0700)</td>
</tr>
<tr>
<td>Charge Person Name:</td>
<td></td>
</tr>
</tbody>
</table>

### Knowledge of R.A.C.E.

<table>
<thead>
<tr>
<th>R</th>
<th>A</th>
<th>C</th>
<th>E</th>
</tr>
</thead>
</table>

(Fire Plan)

### Knowledge of P.A.S.S.

<table>
<thead>
<tr>
<th>P</th>
<th>A</th>
<th>S</th>
<th>S</th>
</tr>
</thead>
</table>

(Fire extinguisher use)

List two locations of fire extinguishers

1. ____________________________ 2. ____________________________

List two locations of pull stations

1. ____________________________ 2. ____________________________

Where is the location of your unit emergency preparedness plan?

______________________________

Where is your unit’s HORIZONTAL relocation site?

______________________________

Where is your unit’s VERTICAL relocation site?

______________________________

Where is the chalk for marking doors located at?

______________________________

Was the building paging system audible over the fire alarm tones?  YES  NO

If NO, please list where it was not heard

______________________________

Did fire doors close with the fire alarm activation?  YES  NO

If NO, please list where the doors did not close

______________________________

**PARTICIPATING STAFF: (PLEASE PRINT NAME CLEARLY)** Place additional names on back of this form if necessary

______________________________  ____________________________
Appendix 4
Environmental Safety Training attendance form

Fire Drill Attendance Form

Date: ____________________________

Location of Fire Drill: ____________________________

Shift (circle one): Day (0700-1500) Evening (1500-2300) Night (2300-0700)

PARTICIPATING STAFF: (PLEASE PRINT NAME CLEARLY) Place additional names on back of this form if necessary

______________________________  ______________________________  ______________________________

______________________________  ______________________________  ______________________________

______________________________  ______________________________  ______________________________

______________________________  ______________________________  ______________________________

______________________________  ______________________________  ______________________________

______________________________  ______________________________  ______________________________

______________________________  ______________________________  ______________________________

______________________________  ______________________________  ______________________________

______________________________  ______________________________  ______________________________

______________________________  ______________________________  ______________________________