This document establishes policy and procedures and assigns responsibilities and requirements to ensure a comprehensive Code Red Fire Drill policy and program exists for Duke University Hospital and Clinics. It applies to all Duke employees, contractors, and tenants on Duke premises.

1. **Objective**
   1.1. The objective of the Code Red Fire Drill Program is to ensure that employees and volunteers working in a facility will know how to respond in an efficient and orderly fashion while assisting others such as patients and visitors.

2. **Purpose**
   2.1. Fire drills are conducted in Duke University Hospital and Clinic facilities to train staff and students in the procedures to be followed to ensure the proper evacuation of all occupants during a fire or the defend-in-place response in the event of a fire in a properly configured patient care facility.
   2.2. Fire drills are used to familiarize employees with the audible and visual evacuation signal and the exit routes available to use in the event of a fire or other situations that require immediate evacuation.
      2.2.1. Primary and alternate routes should be established and all employees should be familiar with both routes.
   2.3. Fire drills are used by department managers to evaluate:
      2.3.1. the performance of the employees in a fire incident;
      2.3.2. the effectiveness of the behaviors used in accordance with the fire drills and the emergency plans/site specific fire plans.
   2.4. Fire drills are used to evaluate the effectiveness of life safety features utilized in patient care areas to protect and defend patients and staff from fire and fire effects.

3. **Duke Health Care Facilities Fire Drill Requirements**
   3.1. Fire drills are conducted quarterly on all shifts in each building defined by the NFPA 101 Life Safety Code (LSC) as the following:
      3.1.1. Ambulatory Health Care occupancy.
      3.1.2. Health Care occupancy.
3.2 Fire Drills are conducted annually in all freestanding buildings classified as a business occupancy as defined by the LSC where patients are seen or treated.

3.3 At least 50% of the required drills will be unannounced.

   3.3.1 **Facility-wide fire drills will only be initiated by a representative of the OESO-Fire and Life Safety Division.**

   3.3.2 **Exception:** Department specific drills or required re-drills may be conducted by the department leadership.

   3.3.3 Fire drills will be initiated by providing overhead voice message stating: “This is a mandatory Code Red Fire Drill; all areas will conduct a Code Red Fire Drill at this time.”

   3.3.4 Fire drills on each unit will be initiated by providing a scenario description to all employees of the area/facility being evaluated with at least the following information:

      3.3.4.1 **THERE IS SMOKE or FIRE IN (ROOM, AREA, CORRIDOR, ETC.)** Provide as realistic and specific description of the conditions as possible.

      3.3.4.2 **THE ITEM(s) BURNING (Trash can, linen, electrical cabinet, patient equipment, bedding, etc.)**

      3.3.4.3 **CARRY OUT CODE RED FIRE PROCEDURES**

3.4 Fire drills on each unit will be evaluated by the unit manager using at least the following information:

   3.4.1 Responsibility for planning and conducting drills shall only be assigned to competent persons designated to exercise leadership (e.g. Nurse Manager, Charge Nurse).

   3.4.2 All fire drills will be conducted and evaluated using the proper RACE, PASS, and Site Specific Fire Plan procedures for each area being evaluated.

   3.4.3 Staff in all areas of every building where patients are housed or treated participates in fire drills to the extent called for in the site specific fire plan.

   3.4.4 Do not activate fire alarm pull-stations unless instructed to do so.

   3.4.5 Fire extinguishers may be removed from cabinets to simulate proper response however, **DO NOT REMOVE THE PIN OR BREAK THE SEAL DURING FIRE DRILLS.**

   3.4.6 **Actual evacuation of patients, visitors, and staff during the drill is not required.**

   3.4.7 Inform patients that this is only a drill and ask them to remain in their rooms, and inform the patients if they need assistance during the drill, to use the call button.

3.5 At the conclusion of the Code Red fire drill, an announcement will be made using the overhead speaker system terminating the exercise.

   3.5.1 “Code Red Fire Drill All Clear” will be announced three times.

   3.5.2 A Fire Drill Participation Form shall be electronically.

   3.5.3 Employees may then return to their assigned work areas and doors may be reopened and conditions returned to normal.
3.6 **Note:** When fire drills are conducted between the 9:00 PM and 6:00 AM (3rd shift), an alternative method approved by the AHJ is implemented. A simulation card is presented to the staff at the point they simulate pulling the nearest Fire Alarm Pull Station. The simulation card provides information that the activation of the pull station did not initiate the fire alarm. Patient care staff are expected to verbally communicate the fire emergency by dialing BAS/911 as an alternative method of transmitting the fire alarm.

4. **Duke University Campus Facilities Fire Drill Requirements**

4.1. Fire drills are conducted twice per semester in all residential living facilities.

4.1.1. Fire drills will be conducted in all occupied campus facilities not specifically mentioned in this Operating Instruction at a frequency required by the N.C. Fire Prevention Code.

4.2. **Fire Drills will only be initiated by a representative of the OESO-Fire and Life Safety Division.**

4.3. Fire drills will be initiated by providing a scenario description to an occupant of the area/facility being evaluated with at least the following information:

4.3.1. **THIS IS A FIRE DRILL.**

4.3.2. **THERE IS A FIRE IN (ROOM, AREA, CORRIDOR, ETC.)**

4.3.3. **THE ITEM(s) BURNING (Trash can, linen, electrical cabinet, bedding, etc.)**

4.3.4. **CARRY OUT FIRE DRILL PROCEDURES**

4.4. All fire drills will be conducted and evaluated using the proper RACE and Site Specific Fire Plan procedures for each area being evaluated.

4.5. Occupants will remain clear of all facilities until the “ALL CLEAR” is given. At no time will anyone re-enter the facility prior to the “ALL CLEAR” signal being given. SILENCING THE AUDIBLE DEVICE IS NOT AN “ALL CLEAR” SIGNAL.

5. **Fire Drill Evaluation**

5.1. All fire drills will be critiqued by department leadership/management or designee to identify deficiencies and opportunities for improvement.

5.2. All fire drills will be evaluated using the Code Red Fire Drill Participation Form and Site Specific Fire Plan.

5.3. Fire Drill Participation Form will include:

5.3.1. Identity of the person conducting the drill

5.3.2. Date and time of the drill

5.3.3. Special conditions simulated

5.3.4. Problems encountered
6. **Fire alarm activations (other than announced fire drills)**

   6.1. Any fire alarm activation not preceded by a fire drill announcement is to be treated as a possible fire condition.

   6.2. Carry out the procedures for your specific area in accordance with your Site Specific Fire Plan.