HEALTH HOLDING

HAFER ALBATIN HEALTH CLUSTER
MATERNITY AND CHILDREN HOSPITAL

Department:	Pharmaceutical Care Department		
Document:	Departmental Policy And Procedure (DPP)		
Title:	Pharmacy Internal Emergency Preparedness Plan		
Applies To:	All Pharmaceutical Care Staff		
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1. PURPOSE:

1.1 To establish procedures to be followed in the events of an internal emergency -Code Red within the pharmacy or out of the department.

1.2 To provide evacuation guidance to pharmacy department personnel through detailed instruction during an internal disaster (Code Red).

1.3 To protect patients, visitors, staff, and to minimize property damage

2. DEFINITONS:

2.1 Internal Emergency is any event (disaster) that may interrupt operations, endanger the safety and well-being of the occupants of the families, or significantly cause damage to facilities.

2.2 Internal Emergency Preparedness Plan is a plan that has been developed to facilitate a smooth, coordinated response to projected emergency situations. It incorporates emergency initial responses and procedures.

2.3 1212 is the telephone number used to emergency extension operator twenty four (24) hours a day every day of the week.

2.4 Fire Fighting Equipment consists of fire hoses and portable fire extinguishers that are distributed throughout patient care facilities, located in built-in cabinets called fire hose cabinets. Additional extinguishers, such as, dry chemical powders, carbon dioxide and water are placed at all inpatient and outpatient nursing stations. Carbon dioxide extinguishers are also placed in areas where there is substantial amount of electrical or electronic equipment.

2.5 RACE is the acronym to help staff focus on initial response and evacuation procedures in the event of an actual fire or during a fire drill in PMH facilities. RACE stands for:

- 2.5.1 Rescue
- 2.5.2 Alarm
- 2.5.3 Confine
- 2.5.4 Extinguish/Evacuate

2.6 Fire Alarm System is an electronic detection system connected to computerized monitoring and control system. It is located in all patients care facilities and monitored twenty-four (24) hours a day, seven (7) days a week.

2.7 Alarm Sounders are used to alert occupants about fire condition. It gives two (2) types of sounds:

- 2.7.1 Alert sound, interruptible beeps
- 2.7.2 Evacuation sound, continuous beep

2.8 Fire Alarm Zones are specific areas within the facilities used to differentiate fire and smoke wall locations, as well as air conditioning system layouts.

2.9 Fire Drill Plan is a pre-arranged method for handling fire drills throughout hospital facilities.

2.10 Fire Drills:

2.10.1 Simulated Fire Drill is a fire drill carried out without actually activating the fire alarm, discharging fire extinguishers, or making phone calls to the fire control room. The simulated fire drill will be practiced at unit level in all facilities in accordance with the monthly schedule.

2.10.2 Unit Full Fire Drill is a fire drill where all necessary arrangements and contacts must be made before the commencement of the scheduled drill.
NOTE: Evacuation drill is a part of the unit full fire drill. The evacuation procedure will be practiced at the unit level.

2.11 Evacuation

2.11.1 Horizontal Evacuation is evacuation from an area of danger to a safe area at the greatest distance from the danger on the same floor or level (Assembly Point).

2.11.2 Vertical Evacuation is evacuation to a safe on another floor (usually a lower level), or to a safe area Outside the facility (usually a location in the facility grounds, although some patients may require removal to another facility).Vertical evacuation is only activated when there is a very serious confirmed threat to life and safety (Holding Area).

2.12 Local Assembly Point is the primary point of evacuation on the same floor.

2.13 Holding Area is the secondary assembly point of evacuation on the ground floor or outside the building, in the east of ER car park, where triage and/or further evacuation is carried out.

2.14 Code Red

2.14.1 Verbal Code Red is the code used by staff to initiate the RACE procedure in the event of a fire. Verbal Code Red is the professional way to raise the alarm.

2.14.2 Overhead Paging (Public Address System) Code red announces code red over the public address system specifying the location of the fire that is in progress within the area, provides instructions, and advises personnel of areas to be evacuated.

3. POLICY:

3.1 Pharmacy department shall provide safe rescue and evacuation of the patients, watchers and the staffs during an internal disaster in the department.

3.2 To promote rapid and organize response during an internal disaster –Code Red in other department.

4. PROCEDURE:

4.1 Preparation and Distribution of Internal Preparedness Plan

4.1.1 All departments and units that are an integral part of the Internal Emergency Preparedness Plan shall formulate their own plan of response to be carried out during an emergency situation. The department Safety Liaison Officer (safety representative) shall develop the plan for their area. The plan shall be reviewed and concurred by safety officer and a copy of this Internal Emergency Preparedness Plan shall be submitted to the safety Department.

4.2 Training Staff

4.2.1 All employees shall receive training in internal emergency preparedness and will be thoroughly briefed and rehearsed on procedures to be followed should fire or smoke occur in their work areas. The training shall be conducted during new hire orientation and through in-service education, annual refresher training, and drills.

4.2.2 All personnel shall be familiar with their unit fire drill and be aware of the locations of fire alarms, extinguishers, oxygen shutdown valves, fire exits and evacuation routes for their work area. During evacuation, every room in the unit shall be checked to ensure that all occupants have vacated and the room shall be tagged with a room checked sign on the door of the corridor.

4.2.3 Fire Extinguisher Live Fire Training shall be conducted when a new employee is hired or when current employee is reassigned and at least annually thereafter. If work process changed, if new hazards are introduced into the workplace, or if different portable fire extinguishers are introduced into the work area, training or retraining shall be appropriate. If the emergency fire action plan or the fire prevention plan is changed, all employees shall be notified and trained to operate their different or modified role in the plan. Instructors teaching portable fire extinguishers shall be trained for different set of knowledge and skills and at a higher level than the content and level of knowledge and skills needed by employees operating portable fire extinguishers. Instructors' training and education shall be more frequent.

4.3 Fire Protection Equipment and Related Items

4.3.1 Emergency telephone numbers and their location (building number, room number, level, and ward/ unit/ area) shall be kept in each work area, preferably near each telephone.

4.3.2 Fire protection equipment and emergency systems (including sprinkler systems, fire hose cabinets, hydrants, fire/ smoke detection and alarm systems, automatic magnetic release door systems and emergency power and lightning systems), shall be maintained in fully operational condition at all times by the Maintenance Department.

4.3.3 (PIS) Fire extinguishers shall be kept in their designated places and inspected regularly as per NFPA inspection, Testing and Maintenance of Fire Protection Equipment.

4.3.4 Evacuation Plans shall be displayed in corridors in all facilities. The development of these plans must be made in coordination with the Engineering and Safety Services.

4.4 Fire Drills- Schedules and Frequency

4.4.1 Safety manager will circulate the Fire Drill Schedule via a memo to all respective Departments Heads and Safety Liaison Officers at the beginning of the year.

4.4.2 A simulated Fire Drill shall be held no less than four (4) times per year (one (1) per quarter) at unit level, for each shift and administrative personnel of inpatient, two (2) times for clinical and once per year for non-clinical, in accordance with the monthly-simulated fire drill schedule.

4.4.3 (PIS) A unit full fire drill shall be held at least annually for each of the units.
NOTE: A unit full fire drill should not be conducted without prior approval of the Medical director.

4.5 Critiques of Drills

4.5.1 All Drills at unit and department level shall be thoroughly documented and critiqued. Deficiencies identified shall be addressed promptly.

4.5.2 A fire drill evaluation form shall be completed and returned to the Safety Manager, to facilitate the compilation of statistics or the number of drills performed. These statistics shall be forwarded to the Chairman of Environmental Safety Committee, at the end of each month and yearly.

4.5.3 A critique meeting must be held immediately after the completion of the unit full fire drill.

5. MATERIAL AND EQUIPMENT:

5.1 Quick Reference Guide to Emergency Events.
5.2 Codes used on the Overhead Paging System.
5.3 Simulated and Unit Full Drill Procedures.
5.4 Fire/Evacuation Plan (Unit Specific Internal Emergency Preparedness Plan).
5.5 Fire Drill Evaluation Form.
5.6 Simulated Fire Drill Schedule (sample).
5.7 Emergency Response Steps.
5.8 Code Red Action Cards.
NOTE: Attachments include sample forms that may be photocopied for use as described.

6. RESPONSIBILITIES:

6.1 Fire within the Pharmacy Department during Working Hours

6.1.1 Staff discovering the fire

6.1.1.1 Shout for: Code Red/ 3 times

6.1.1.2 Remove his/ her colleague immediately out of the affected room.

6.1.1.3 Close the door behind him/ her if applicable.

6.1.2 The nearest staff from the fire alarm will activate the fire alarm; "break the glass and push the button".

6.1.3 The nearest staff from the telephone will call the hot line 2222 to report:

6.1.3.1 Code Red

6.1.3.2 Exact location: department, floor

6.1.3.3 Your name & ID number

6.1.3.4 Let the Switchboard staff to repeat your message

6.1.3.5 Get the name of the Switchboard staff

6.1.3.6 Be sure that the operator understands well your message

6.1.4 Out-Patient Medication Area

6.1.4.1 In-charge of Out-Patient Area or his/ her designee

6.1.4.1.1 Once code red is activated, he/ she should immediately stop the delivery of the medication.

6.1.4.1.2 Order the patients to go out from the pharmacy waiting area.

6.1.4.1.3 Order the staff to evacuate the casualties of the fire through the safe and nearest exit door to the nearest assembly point.

6.1.4.1.4 Ensure that all his staffs are out from the pharmacy department.

6.1.4.1.5 Apply wet clothes under the door of your affected area or room (if it's the one affected by the fire)

6.1.4.1.6 Put extinguishers fire beside the door of your affected area or room (if it's the one affected by the fire)

6.1.4.2 Other staff of out-patient area

6.1.4.2.1 Evacuate the casualties of the fire through the safe and nearest exit door to the nearest assembly point.

6.1.4.2.2 Go out from the pharmacy through the safe and nearest exit door to the nearest assembly point.

6.1.5 In-Patient Medication Area

6.1.5.1 In-charge of In-Patient Area or his/ her designee

6.1.5.1.1 Once code red is activated, he/ she should immediately stop the delivery of the medication.

6.1.5.1.2 Order the staff collecting the in-patient medication to go out from the pharmacy waiting area.

6.1.5.1.3 Order the staff to evacuate the casualties of the fire through the safe and nearest exit door to the nearest assembly point.

6.1.5.1.4 Ensure that all his staffs are out from the pharmacy department.

6.1.5.1.5 Apply wet clothes under the door of your affected area or room (if it's the one affected by the fire)

6.1.5.1.6 Put extinguishers fire beside the door of your affected area or room (if it's the one affected by the fire)

6.1.5.2 Other staff of in-patient area

6.1.5.2.1 Evacuate the casualties of the fire through the safe and nearest exit door to the nearest assembly point.

6.1.5.2.2 Go out from the pharmacy through the safe and nearest exit door to the nearest assembly point.

6.1.6 The In-charge of the IV Room

6.1.6.1 Once code red is activated, he/ she should immediately stop the delivery of the medication.

6.1.6.2 Order the staff to evacuate the casualties of the fire through the safe and nearest exit door to the nearest assembly point.

6.1.6.3 Ensure that all his staffs are out from the pharmacy department.

6.1.6.4 Apply wet clothes under the door of your affected area or room (if it's the one affected by the fire)

6.1.6.5 Put extinguishers fire beside the door of your affected area or room (if it's the one affected by the fire)

6.1.7 Chief of Pharmacy or his/ her designee

6.1.7.1 Ensure that all staff follow instructions according to department plan.

6.1.7.2 Ensure that the department is empty and all staff have evacuated.

6.1.7.3 Ensure that all the rooms are checked and labelled by "Room Checked" and nobody still inside including staff room, bathrooms,and the stores.

6.1.7.4 Apply wet clothes under the door of your affected area or room (if the fire out of the out-patient and in-patient area or the IV room)

6.1.7.5 Put extinguishers fire beside the door of your affected area or room (if the fire out of the out-patient and in-patient area or the IV room)

6.1.7.6 Call the ware house pharmacy staff and order him to serve the in-patient medication from the ware house pharmacy stock.

6.1.8 The housekeepers of the department will help other staff in the evacuation if needed.

6.1.9 In the assembly point, the victims will be assessed and triaged by the pharmacy staff and the assigned staff in this area.

6.1.10 In the absence of the in-charge or his designee of any area, Chief of the pharmacy or his/ her designee will take over his/ her responsibility.

6.2 Fire within the Pharmacy Department during off working hours

6.2.1 During off working hours, three (3) pharmacy staff on duty; one pharmacist and two (2) technicians. Once the fire is discovered they will stop the delivery of the medication for outpatient and inpatient.

6.2.2 Staff discovering the fire

6.2.2.1 Shout for: Code Red/ 3 times

6.2.2.2 Remove his/ her colleague immediately out of the affected room.

6.2.2.3 Close the door behind him/ her if applicable.

6.2.3 The nearest staff from the fire alarm will activate the fire alarm; "break the glass and push the button".

6.2.4 The nearest staff from the telephone will call the hot line 2222 to report:

6.2.4.1 Code Red

6.2.4.2 Exact location: department, floor

6.2.4.3 Your name & ID number

6.2.4.4 Let the Switchboard staff to repeat your message

6.2.4.5 Get the name of the Switchboard staff

6.2.4.6 Be sure that the operator understands well your message

6.2.5 The two (2) Pharmacy Technician on duty

6.2.5.1 Evacuate the casualties of the fire through the safe and nearest exit door to the nearest assembly point.

6.2.5.2 Go out from the pharmacy through the safe and nearest exit door to the nearest assembly point.

6.2.6 The Pharmacist on duty

6.2.6.1 Apply wet clothes under the door of your affected area or room (if it's the one affected by the fire)

6.2.6.2 Put extinguishers fire beside the door of your affected area or room (if it's the one affected by the fire)

6.2.6.3 Ensure that all his staffs are out from the pharmacy department.

6.2.6.4 Call the ware house pharmacy staff and order him to serve the in-patient medication from the ware house pharmacy stock.

6.3 Fire outside of the Pharmacy

6.3.1 Chief of Pharmacy or his/ her designee

6.3.1.1 Order his/ her staff to standby in the department.

6.3.1.2 Communicate with the incident commander for any new order or instruction.

6.3.2 Pharmacy Staff

6.3.2.1 Standby and be ready for any potential evacuation.

6.3.2.2 Follow the orders of the department chief or designee.

7. APPENDICES

7.1 N/A

8. REFERENCES:

8.1 NFPA standard 99, Healthcare Facilities, National Fire Protection Association.

8.2 Emergency Management in Healthcare: An All Hazards Approch, 2nd Edition. Dennis Manely, May 2012

9. APPROVALS:

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