WAKE FOREST UNIVERSITY FAMILY PHYSICIANS
DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE

POLICY AND PROCEDURE

Subject: **FAMILY PRACTICE CENTER AREA EVACUATION PLAN**

Purpose: To provide guidelines for Family Practice Center's safe and expeditious response to (the possibility of) fire in the Piedmont Plaza I building.

Procedure:

If there is (suspected) smoke and/or fire:

I. **Immediate Response**

A. Rescue patients in danger.

B. Pull fire alarm.

C. If there is smoke or fire in an area, close the door to that area to contain it.

D. Then call 716-9111. Following that, overhead announce (Dial 140#) "Code Red, (Location)".

E. Switchboard supervisor (or their designee) will activate the evacuation message on the phone lines.

F. The Building Coordinator, or their designee, will immediately leave the building and report to the designated area.

II. **3rd Floor Evacuation**

A. Patients and staff in Waiting rooms, Reception areas, Front hall, X-ray room, Business office, and Laboratory will evacuate down the stairs across from the X-ray room. Patients and staff in Modules A and C will also evacuate down those stairs.

Patients and staff in Modules B and D, Record Room, Switchboard, Triage, Treatment room, Break room will evacuate down the back stairs.

Once out of the building, proceed to Primary Emergency Assembly Point #3 or Secondary Emergency Assembly Point #8 designed by the Blue Triangular signs (see attached).

B. Patients and staff who are unable to safely get down the stairwell by themselves (with assistance only in guidance), will be congregated in the third floor's elevator lobby.

Persons congregating in the elevator lobby area must always be accompanied by a staff member, the most senior staff member, and then nursing personnel as soon as available. Ultimately the Nursing Manager, or their designee, will be responsible for these people.

C. Do not use the elevator.

D. Responsible staff will direct evacuation of their area, make sure all rooms/spaces are empty, and **all windows and doors closed prior to leaving their area of responsibility.** They must then report to their Supervisor (or designee) before leaving the floor.

1. Nursing Stations and Exam Rooms, including the Bathrooms, Utility and Consult rooms of Modules A-D will be under the responsibility of the Charge Nurse (or designee) in each module. The Charge Nurse in each module will be responsible for moving all oxygen tanks in their modules to the previously designated Module C location outside patient room #3. Module B(s) responsibility will also include the Break room and the A-B Triage Nurse. Module C(s) responsibility will include the C-D Triage Nurse.

   After ascertaining that an exam room is empty, nursing staff will place a pillow in front of the closed door.

2. The Reception and Waiting room areas will be under the responsibility of the Patient Service Reps.
   a) Patient Service Reps. will be responsible for closing receptionist windows and escorting patients to the nearest stairwell, or if appropriate, to the elevator lobby before exiting the building.

3. Medical Record room, Switchboard and Pharmacy Refill areas are under the responsibility of the Medical Record Supervisor (or designee).

4. The Videotape Room is under the responsibility of the Medical Record Supervisor (or designee).

5. Senior Laboratory staff member (or designee) will be responsible for the Laboratory area and the Public and Laboratory Bathrooms.
   a) Staff working at lab front desk will be responsible for closing lab window before exiting.

6. Business office, people in the front hallway and in the X-ray room will be under the responsibility of the designee of the Business Office Supervisor.

7. The Treatment Room and occupants will be under the responsibility of the Treatment Room Nurse (and/or designee).

8. If there are individuals waiting in the elevator lobby, the Nurse Manager (or designee) and an available physician will stay with them.

9. After the Floor Coordinators have completed a final inspection of the entire 3rd floor, the designated Floor Coordinator (or designee) will report to the Nurse Manager (or designee) before exiting the building. The Nurse Manager (or designee) will inform the designated Floor Coordinator of the number of people waiting in the elevator lobby and their condition. Upon exiting the building, all Floor Coordinators will report to the Building Coordinator the evacuation status of their responsible areas.

10. The Building Coordinator will alert the Fire department to the potential risks, i.e., 0_2 tanks, radioactivity in x-ray, and number of people waiting in the elevator lobby and their condition.

11. In the event the responsible person and designee are absent, the remaining staff will assume responsibility for the safe evacuation of staff and patients.

III <u>2nd Floor Evacuation</u>

A. All occupants of 2nd floor including Faculty, staff, patients and visitors will evacuate, using the closest stairwell, exiting the building on the 1st floor. Do not use the elevators. Once out of the building, proceed to the Primary Emergency Assembly Point #3 or Secondary Emergency Point #8 designed by the Blue Triangular signs (see attached).

B. After completing a final inspection of the 2nd floor, verify that all occupants have evacuated and all doors are closed, the Floor Coordinators will exit the building and report to the Building Coordinator.

IV 1st Floor Evacuation

A. All occupants of the lst floor Family Medicine area will evacuate using the closest outside exit door. Once out of the building, proceed to the Primary Emergency Assembly Point #3 or Secondary Emergency Point #8 designated by the Blue Triangular signs (see attached).

B. After completing a final inspection of the responsible areas, verifying that all occupants of the area have evacuated and all doors have been closed, the designated Area Coordinator will exit the building and report to the Building Coordinator.

Approved by: _____ Effective Date:_____

Dr. Michael Adler
Director of Clinical Operations