
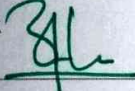
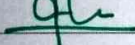
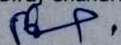


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	Issue No.	01
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	Date	03/12/2025

POLICIES ON EMERGENCY EVACUATION IN CASE OF FIRE AND NON-
FIRE EMERGENCY

ALL INDIA INSTITUTE OF MEDICAL SCIENCES,
GUWAHATI



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Control of the Manual

1. The holder of the copy of this manual is responsible for maintaining it in good and safe condition and in a readily identifiable and retrievable
2. The holder of the copy of this Manual shall maintain it in current status by inserting latest amendments as and when the amended versions are received.
3. Administrative Manager is responsible for issuing the amended copies to the copyholders. the copyholder should acknowledge the same and he /she should return the obsolete copies to the Administrative Manager
4. The amendment sheet. to be updated (as and when amendments received) and referred for details of amendments issued
5. The manual is reviewed once a year and is updated as relevant to the hospital policies and procedures. Review and amendment can happen also as corrective actions to the non-conformities raised during the self-assessment or assessment audits by NABH.

The authority over control of this manual is as follows:

Preparation	Approval	Issue
		

The procedure manual with original signatures of the above on the title page is considered as 'Master Copy', and the photocopies of the master copy for the distribution are considered as 'Controlled Copy'.

Distribution List of the Manual

Sr. No.	Designation
1.	Executive Director
2.	Medical Superintendent, Principal College of Nursing
3.	All HODs for departmental Distribution

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2.0	Scope
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8.0	Record Generated

FMS 4- POLICIES ON EMERGENCY EVACUATION IN CASE OF FIRE AND NON-FIRE EMERGENCY

1.0 PURPOSE

- 1.1 To provide guidelines for ensuring the **safety of Patients, their Families, Staff and Visitors.**
 - 1.2 To establish a **structured response mechanism** for fire and non-fire emergencies within the hospital premises.
 - 1.3 To minimize injury, loss of life, and damage to hospital property during emergencies.
-

2.0 SCOPE

- 2.1 Hospital wide – applicable to **all departments, buildings, utilities, and occupants** during fire and non-fire emergencies.
-

3.0 RESPONSIBILITY

- 3.1 Administrative Head
 - 3.2 Medical Superintendent
 - 3.3 Security Head
-

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- 3.4 Maintenance Department Staff
- 3.5 Facility Management and Safety Committee

4.0 ABBREVIATIONS

- 4.1 NABH – National Accreditation Board for Hospitals and Healthcare Providers
- 4.2 FMS – Facility Management and Safety
- 4.3 HMIS – Hospital Management Information System
- 4.4 CA – Corrective Action
- 4.5 PA – Preventive Action

5.0 REFERENCES

- 5.1 NABH: Pre-Accreditation Entry Level Standards for Hospitals, First Edition, April 2014
- 5.2 Hospital Disaster Manual AIIMS Guwahati.

6.0 POLICY

6.1 Safety Policy

- a) AIIMS Guwahati aims to provide a **safe and secure facility** for all occupants.
- b) Safety oversight is provided by the **Facility Management and Safety Committee**.
- c) Preventive and breakdown maintenance schedules are monitored by Maintenance Department staff (Biomedical, Electrical, Civil, HVAC Engineers).
- d) **Site layout, floor plans, and fire escape routes** are displayed prominently on every floor.
- e) Fire EXIT signage is **Green and self-illuminated and also floor plan for fire escape is fluorescent and self illuminated**.
- f) Signages are displayed in a **language understood by patients, families and the community**.
- g) Comprehensive safety inspections are conducted:
 - Twice yearly in patient care areas
 - Once yearly in non-patient care areas
 - h) Inspection reports are reviewed by the Safety Committee and form the basis for CA/PA.

6.2 Safety Committee

The Safety Committee conducts **Hazard Identification and Risk Analysis (HIRA)** and includes:

- Chairman

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- Quality Manager
- NABH Coordinator
- Anaesthetist
- Gynaecologist
- Safety Officers (Radiation, Infection Control, Patient Safety, Engineering)

6.3 Patient Safety Devices

Installed and periodically inspected:

- Grab bars
- Bed rails
- Sign postings
- Safety belts (stretchers/wheelchairs)
- Visual and auditory alarms
- Biohazard and radiation warnings
- Fire safety devices

6.4 Facility Inspection Rounds

- Monthly in patient care areas
- Quarterly in non-patient care areas
- Findings documented and CA/PA implemented

6.5 Safety Education

- Regular staff training on:
 - Fire safety
 - Hazardous materials
 - PPE usage
 - Biomedical waste management
- Mock drills conducted periodically

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7.0 PROCEDURE

7.1 FIRE & NON-FIRE EMERGENCY MANAGEMENT

7.1.1 Fire Protection (CODE RED)

- All fire incidents are designated “**CODE RED**”.
- Staff must **not shout “FIRE”**; instead announce “**CODE RED**”.

Fire Prevention Measures

- Hospital declared **No Smoking Zone** with signage displayed.
 - Smoke detection systems installed throughout premises.
 - Fire extinguishers (ABC, CO₂) installed on all floors and near high-risk areas.
 - Extinguishers are periodically inspected by qualified contractors.
 - Any theft or tampering of fire equipment must be reported immediately to Maintenance.
-

7.1.2 Emergency Evacuation – RACE Protocol

R – Rescue

- Remove patients and persons in immediate danger.
- Close doors behind you.
- Shout “CODE RED” if assistance is needed.

A – Alarm

- Activate manual alarm by breaking glass panel.
- Inform Fire Brigade and local police if required.

C – Contain

- Close doors and windows to prevent fire spread.

E – Extinguish / Evacuate

- Use correct extinguisher if safe.
- Evacuate to Assembly Area if required.
- Follow emergency exit signage and instructions.

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PASS Technique for Fire Extinguishers

- Pull pin
- Aim at base
- Squeeze handle
- Sweep side to side

7.1.3 Fire Training and Drills

- Fire drills conducted **at least twice a year** with local fire services.
- All staff receive hands-on fire safety training.

7.1.4 Exits, Railings, Steps & Walkways

- No obstruction allowed at exits or staircases.
- Exit routes maintained free of materials.
- Vehicles not permitted near exit pathways.

7.2 NON-FIRE PROTECTION

7.2.1 Hazard Recognition

- Periodic clinical and non-clinical audits conducted.
- Staff encouraged to report hazards.
- Department heads responsible for identifying and reporting risks.

7.2.2 Electrical Safety

- Routine inspection of power outlets and wiring.
- Trip switches installed to prevent short circuits.
- Electrical appliances inspected before use.
- Electrical switchboards kept clear (minimum 1 meter).
- BC type fire extinguishers placed near switchboards.

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7.2.3 Biological Hazards

Sharps Injuries

- Sharps disposed at point of use.
- Needles:
 - Not recapped
 - Not bent or broken
 - Destroyed immediately after use
- Sharps disposed in puncture-resistant containers.
- Reusable sharps transported in labeled containers.

7.3 EMERGENCY CODES

- **Code Red** – Fire
- **Code Blue** – CPR Emergency
- **Code Pink** – Child Abduction / Missing Child

All emergencies are documented in **Incident Reporting Forms**.

7.3.1 HOSPITAL CODES

POLICIES ON EMERGENCY EVACUATION IN CASE OF FIRE AND NON FIRE EMERGENCY

Code	Description	Primary Response	Secondary Response	CCO
Code Red	Fire	R-Rescue patients A-Activate Code Red, Inform Fire Safety Officer/Security Officer/ Electrical Engineer/MS/DMS C-Contain the fire E-Evacuate or relocate the area	Attempt to extinguish the fire B-Pull the pin A-Alert the nearby at base of fire C-Suppress the trouble D-Sweep Area at the side Fire not controlled- Call Fire Brigade & Evacuate	27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100
Code Blue	Code: Preliminary Arrest	Activate Code Blue. Notify Emergency Doctor/Emergency Nursing Officer/BCG Technician/Consultant or SR Cardiology Consultant or SR Anesthesiology & Critical Care/DNS/DMS Get a crash Cart	Keep the person alive. Check pulse and breathing. Administer CPR if necessary by qualified staff	27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

Code Pink A newborn/ infant/child is missing or is known to have been abducted/kidnapped. Activate Code Pink. Inform the child's name and looks and mention location carry out accountability check. Inform Security Officer/DMS/NS/MS

Monitor & seal all exits for anyone attempting to leave the hospital premises. Return to normal duties once code is called off. Document appropriately.

Code Orange External disaster like (Accident with mass casualty, Natural Calamity, Epidemics, Bomb blast, terrorist activities). Activate Code Orange. Report to Security Officer/NS/DMS. Disaster response team. Coordination with command nucleus and continue care of existing patients. Return to normal duties when code is deactivated. Document as appropriate.

Purple Security Alert. Activate Code Purple. Inform Security Officer/DMS/MS/NS/Police. Respond immediately/ investigate/ rescue. Return to normal duties when code is deactivated. Document as appropriate.

HAZMAT Hazardous spill which is likely to cause unknown effects, injury, illness or harm to the environment. Call helpline number for HAZMAT. Secure the area, use PPE and go eye wash area. Don't allow people to step in the area. Assist those who have been contaminated. Take them to emergency for evaluation and management. Return to normal duties as directed. Prevent future spilage. Document appropriately.

7.4 CODE PINK – CHILD ABDUCTION MANAGEMENT

Activation

- Nursing Officer informs MS/Faculty and announces "CODE PINK" thrice.

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- Details shared: Name, age, gender, dress, time, location.

Response

- Lock all exits.
- Activate CCTV surveillance.
- Security frisking and vehicle checks.
- Police informed if child not found within 1 hour.

Demobilization

- Announcement "Code Pink – All Clear" thrice.
- Staff resumes duties.

7.5 EARTHQUAKE MANAGEMENT (CODE BLACK)

During Earthquake

- Stay indoors, protect head.
- Avoid windows and falling objects.
- Do not use lifts.

After Earthquake

- Check injuries and building damage.
- Avoid gas leaks and electrical hazards.
- Follow official instructions.

7.6 NUCLEAR / TOXIC EXPOSURE MANAGEMENT

- Remove contaminated clothing immediately.
- Wash exposed skin thoroughly.
- Shut doors, windows, ACs.
- Stay indoors and await authority instructions.
- Medical attention to be provided promptly.

8.0 RECORDS GENERATED

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1. Floor-wise Fire Exit Plan
 2. Master list of fire extinguishers
 3. Daily Facility Safety Checklist
 4. Incident Report Forms
 5. Training records
 6. Mock drill reports and videos
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