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FMS.17.3 There are evacuation maps posted hospital wide indicating locations of:

- FMS.17.3.1 You are here.
- FMS.17.3.2 Fire extinguishers.
- FMS.17.3.3 Fire hose reel/cabinets.
- FMS.17.3.4 Fire blankets.
- FMS.17.3.5 Escape routes.
- FMS.17.3.6 Assembly points.
- FMS.17.3.7 Fire exits.
- FMS.17.3.8 Call points break glass/pull station.
- FMS.17.3.9 Medical gas isolation valves.

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**Standard Intent:**

Hospitals need to assess the type of internal disasters it is more likely subjected to and determine the type of actions needed to be taken in order to ensure patient and staff safety and continue the medical services provided.

Such disasters might include: fire emergencies, emergencies of hazardous materials spills, and any other emergencies that require evacuation of patients and/or staff.

There must be a clear internal disaster plan with roles and responsibilities for leaders and staff to refer to when needed.

As unique actions need to be considered for certain departments (such as Operating Rooms and Intensive Care Units) due to nature of it occupancy, a department-specific internal disaster plan needs to be created.

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**FMS.18 The hospital has a system for scheduling and conducting fire drills regularly.**

FMS.18.1 Fire drills are scheduled and conducted regularly in all departments.

FMS.18.2 Fire drills are conducted during different shifts to test:

- FMS.18.2.1 Using Rescue, Alarm, Confine, Extinguish/Evacuate (RACE) procedure.
- FMS.18.2.2 Using Pull, Aim, Squeeze, Sweep (PASS) procedure.
- FMS.18.2.3 The ability to contain the fire when it starts.
- FMS.18.2.4 Staff performance in the event of fire.
- FMS.18.2.5 Evacuation procedures.
- FMS.18.2.6 Whether the oxygen and electricity supplies were shut off at the right time.