

Johns Hopkins Safety Manual	<i>Policy Number</i>	HSE 401
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POLICY

It is the policy of Johns Hopkins to eliminate known fire risks and implement guidelines established to prevent fire so that a safe environment for patients, staff and visitors is maintained. In order to meet this, the following should be adhered:

1. All stairway fire doors must be kept closed and stairwell landings unobstructed. All other smoke or fire doors shall be unobstructed and closed (unless held open by an approved device interconnected with the building fire alarm system). All doors equipped with a self-closing device shall not be wedged open, propped open, or held open by any unapproved device. These doors must be maintained in a condition to assure that the doors properly close and latch.
2. Free access to fire hose cabinets, fire extinguishers, fire alarm pull stations, and other emergency equipment must be maintained at all times. In areas where sprinkler systems are not present, storage shall be maintained at a minimum of 2 feet from the ceiling. In areas equipped with sprinkler protection, no item shall be positioned or stored within 18 inches of the ceiling, so that the fire protection function of the sprinkler system is maintained. However, materials stored on shelves against a wall are not subject to this requirement because they do not impede the overlap of spray from multiple sprinkler heads. In laboratories with shelving extended to the ceiling in the middle of the room, storage is required to still meet the 2 feet/18 inch requirements.
3. Electrical panels must have at least 3 feet of clearance around it.
4. The "No Smoking" rule shall be enforced throughout the Johns Hopkins Institution.
5. Lights are never to be shielded with linen or other combustible materials.
6. Electric burners and griddles are prohibited from all areas of the hospital.
7. Spanish moss, which is used as a filler in plants, is prohibited due to its flammable nature.
8. Candles are strictly prohibited in all patient care areas, office areas, and residence halls. The only exception is that they may be used for religious gatherings if the following measures are taken:
 - a. Candles must not be left unattended.
 - b. Candles must not be located within a means of egress.
 - c. Candles must have a non-combustible stand or base.
 - d. Use of candles must be pre-approved by Health, Safety, and Environment Department.
9. The use of flammable agents and/or ether for patient anesthesia is prohibited.
10. Persons using Oxygen are prohibited from use of an open flame.
11. Special precautions shall be taken to prevent fire in oxygen-enriched atmospheres. Oxygen shall not be used in areas where there are potential sources of ignition such as static discharge, faulty electrical switches, and friction toys. Oxygen shall be stored separately from flammable gases or liquids.
12. **For The Johns Hopkins Hospital, Interim Life Safety Measures (ILSM) shall be instituted for deficiencies in fire protection systems in accordance with the Coordinated Life Safety Assurance Program, (CLASP) <http://facilities.jhmi.edu/FacilitiesV3/> CLASP program criteria shall be evaluated to determine when and to what extent ILSM measures shall be implemented for construction and engineering work, existing conditions and incidents on Hospital property. The CLASP program is administered by the Facilities Department in conjunction with Health, Safety and Environment.**

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REFERENCES

The Johns Hopkins Safety Manual: Policies on No Smoking; Clinical Equipment; Non-clinical Equipment; Use of Adapters, Power Strips, and Extension Cords; Decorations; Use of Ether; Means of Egress, and Portable Space Heaters

The BOCA National Fire Prevention Code, 2000

The BOCA National Building Code, 2000

National Fire Protection Standards (NFPA), Life Safety Code Handbook, 2001

Clarification of OSHA regulation 29 CFR 1910.159(c)(10), Sprinkler spacing.

The International Fire Code, § 315.2.1

The National Electric Code, Article 110.26

RESPONSIBILITIES

Departmental Management	Enforce these guidelines.
Health, Safety and Environment	Monitor compliance with these guidelines during Environmental Monitoring Rounds and Laboratory Safety Surveys.

REVIEW CYCLE

Annually