

## NIH POLICY MANUAL

### 1342 - NIH OCCUPANT EVACUATION PLAN

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1. **Explanation of Material Transmitted:** This manual chapter establishes responsibility for development and implementation of occupant evacuation plans to safeguard life and property on all NIH premises.
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#### **A. Purpose:**

The purpose of this plan is to establish the scope and method for immediate positive and orderly action to safeguard life and property during emergencies in all buildings occupied by NIH employees.

#### **B. Policy:**

This policy describes the methodology used to develop, implement and maintain a program designed to assure that employees, patients and visitors located in all NIH owned or leased facilities are safely evacuated during an emergency.

#### **C. References:**

- A. 29 CFR 1910.38 - "Employee Emergency Plans and Fire Prevention Plans"

B. FPMR 101-20.103-4 - "Occupant Emergency Program"

C. FPMR 101-20.103-5 - "Initiating Action Under Occupant Emergency Programs"

D. DHHS General Administration Manual Chapter 7-02 - "Building Evacuation Plans for the Handicapped"

E. DHHS Safety Management Manual

F. NIH Manual 1130, Delegations of Authority, Personnel

No. 18, Property: Real No. 8 and General Administration [No. 30](#).

**D. Definitions:**

A. Designated Official. The Executive Officer of the Primary Occupant Institute, Center, and Division (ICD) or the alternate highest ranking official or designee selected by mutual agreement by other occupant ICD officials.

B. Emergency. An unexpected situation which requires prompt action to protect life and property. Examples of an emergency may include: fires; explosions; chemical, biological, environmental, and radiation incidents; bomb threats; civil disturbances; medical emergencies; natural disasters; structural failures; and accidental or human-caused disasters.

C. Floor Team Coordinator. The person appointed by the Occupant Emergency Coordinator to be in charge of the emergency evacuation team on a floor of a building.

D. Floor Team Members. Persons selected to assist in the orderly evacuation of the building including Aides to Individuals with Disabilities, Stairway Monitors, Elevator Monitors, Restroom Monitors or any other person so assigned by the Floor Team Coordinator.

E. Incident Command Post. The location, in the vicinity of the incident, from which the Incident Commander directs operations.

F. Incident Commander. An individual charged with directing emergency operations to mitigate a situation which presents the possibility of harm, injury and/or destruction. Individuals designated to assume the role of the incident commander are:

1. The senior fire officer at the scene is the incident commander for fires or technological emergencies (e.g., chemical, radiological, biological and environmental incidents).

2. The senior law enforcement official at the scene is the incident commander for security and/or law enforcement emergencies (e.g., bomb threats, civil disturbances).

G. Occupants. Individuals, including visitors, employees, patients and others who work in, or frequent, NIH owned or leased buildings.

H. Occupant Emergency Coordinator. The person appointed by the Designated Official to be in charge of the Occupant Emergency Organization of a particular building.

I. Occupant Emergency Organization. The emergency evacuation organization comprised of employees in a building who are designated by their ICD to perform the requirements established by the Occupant Evacuation Plan.

J. Occupant Evacuation Plan. A method devised to protect lives by the orderly evacuation of a building or area during emergency situations in facilities occupied by NIH employees.

K. Occupant ICD. An ICD, other than the primary occupant ICD, which occupies space in a building.

L. Primary Occupant ICD. The NIH ICD having the largest number of employees assigned to a building or facility.

#### **E. Responsibilities:**

The Emergency Management Branch (EMB), Division of Safety (DS) has overall responsibility to ensure compliance with this Manual Chapter.

When an off-campus building is evacuated, it is the responsibility of the Occupant Emergency Coordinator for the building to notify the EMB/DS of such evacuation. The EMB/DS is responsible for the preparation and forwarding of GSA Form 53, GSA Fire Incident Report, as appropriate.

A. NIH Emergency Planning Coordinator. The NIH Emergency Planning Coordinator is responsible for maintaining liaison with Designated Officials and Occupant Emergency Coordinators, and assisting them in their efforts to comply with this Manual Chapter.

B. Designated Official. The Designated Official is responsible for establishing and maintaining the Occupant Emergency Organization, ensuring that designees of the organization perform the functions of the plan, appointing an Occupant Emergency Coordinator, and assisting in selecting all necessary staff to maintain an efficient organization.

C. Occupant Emergency Coordinator. The Occupant Emergency Coordinator (OEC) is responsible for coordinating the necessary planning to ensure a readiness capability including: selecting, training and organizing adequate staff for conducting emergency operations; and for supervising the activities of the Occupant Emergency Organization. The OEC appoints a Deputy and Assistants as necessary and maintains a staff list as shown in Appendix 1. The OEC reviews and updates the Occupant Evacuation Plan and listing of staff, including individuals with disabilities, at least quarterly.

Duties include:

1. Ensuring that all employees identified as having a disability, which may prevent evacuation from the building without assistance, are assigned one or more aides to assist those individuals with evacuation in accordance with this program.
2. Conducting periodic meetings to maintain a functional organization and arranging for the training of all members of the Occupant Emergency Organization. This training is intended to inform members of the latest developments and policies affecting evacuation activities.
3. Designating a central location outside of the facility where the Floor Team Coordinators will meet to relay evacuation information to the OEC.
4. Exercising overall direction and responsibility for the orderly evacuation of personnel from the building; advising emergency responders of the location of any individuals who need assistance; reporting to the Designated Official; and keeping the Designated Official apprised of events during an emergency. Note: Rescue, firefighting, and other activities are under the direction and control of the respective service departments (fire or police).
5. Informing building occupants during and/or after evacuation of the nature of the emergency and notifying appropriate officials of problems arising during evacuations. Also, subsequent to drills, the OEC provides the building occupants an evaluation of the evacuation.

D. Deputy/Assistant OEC. Assists the OEC and assumes direction of the staff and the evacuation in the absence of the OEC.

E. Floor Team Coordinator. Floor Team Coordinators (FTCs) control and expedite the planned movement (evacuation) of floor occupants,

including individuals requiring assistance, and are responsible for the organization and functioning of the staff on their assigned floors. Ensures that the evacuation plan has been executed on their floor. Reports evacuation status to the OEC and advises the location of persons needing evacuation by the fire department.

Duties include:

1. Selecting, training, assigning and supervising alternate FTCs; aides to assist individuals with disabilities; and stairway, restroom and elevator monitors and their alternates.
2. Ensuring that floor team members are cross-trained so they can perform other duties if necessary.
3. Keeping the OEC informed of the names, assignments, locations, and telephone numbers of staff; and of the names, locations, and physical limitations of individuals with disabilities located on their floors.
4. Ensuring that each employee identified under this plan as requiring assistance is provided with one, preferably two or three, aides who will remain with and assist the individual throughout the emergency situation.
5. Ensuring familiarity with conditions on their assigned floor, including occupancy of rooms and locations of stairways and fire alarms.
6. Developing special plans for the evacuation of individuals with disabilities from floors and/or areas as necessary.
7. Informing floor occupants, after the evacuation has been completed, of the nature of the emergency and problems arising during the evacuation.
8. If, during an emergency, the OEC or the Deputy/Assistant OEC is not at the pre-arranged assembly location outside of the building, the first arriving Floor Team Coordinator shall assume the responsibilities of the OEC.

F. Assistant Floor Team Coordinator. Assists the Floor Team Coordinator and assumes responsibility for the organization and functioning of the staff on their assigned floor in the absence of the Floor Team Coordinator.

G. Stairway Monitor. Stairway Monitors assist occupants in gaining access to the stairway and ensuring the orderly movement of occupants in the stairway.

Upon hearing the fire alarm the monitor shall:

1. Proceed immediately to the assigned stairway and open the door. If the stairway is unsafe, the monitor will direct evacuees to an alternate exit.
2. Hold the door open until the floor is vacated.
3. Coordinate movement between floors to avoid congestion.
4. Control movement into stairway areas and advise the occupants to walk to the exit floor.
5. After all occupants have left the floor, the Stairway Monitor ensures that the exit door is closed to provide a smoke and fire barrier.
6. If individuals with disabilities are using the stairway as a safe haven, the monitor will advise the Floor Team Coordinator.

H. Elevator Monitor. Elevator Monitors ensure that the elevators are not used for evacuation unless otherwise directed by the responding fire department.

Upon hearing the fire alarm the monitor shall:

1. Proceed immediately to the assigned elevator(s), refuse access to all individuals, and direct evacuees to the nearest exit.
2. If an individual needing assistance and their aide(s) are waiting in the elevator lobby to be evacuated, the monitor will advise the Floor Team Coordinator.
3. In the absence of an assigned aide, the monitor will assist in evacuating individuals with disabilities from the building.

I. Aides to Individuals with Disabilities. Aides are responsible for assisting individuals with disabilities in evacuating a facility or area during emergency situations.

Upon hearing the fire alarm the aide(s) shall:

1. Report to the assigned person.

2. When it is not possible to evacuate a person with a disability to the initial evacuation point, usually the closest elevator lobby, the aide(s) will assist the individual to the nearest stairway or exit, remain with them, and await instructions and/or assistance from the fire department.

See Section L for evacuation procedures for individuals with disabilities.

J. Restroom Monitors. Restroom Monitors are responsible for ensuring that restrooms are evacuated during emergencies.

Upon hearing the fire alarm the monitors shall:

1. Proceed to assigned restrooms and announce that it is necessary to evacuate the building.
2. Ensure that occupants leave immediately.
3. Close the door and report to the Floor Team Coordinator.

K. Supervisors. Supervisors at all levels throughout the Department are responsible for:

1. Complying with and enforcing all applicable occupational safety and health standards, rules, regulations, and orders issued by competent authority (pertaining to the activities under their jurisdiction) including this Occupant Evacuation Plan. (Authority: DHHS Safety Management Manual.)
2. Ensuring that their respective areas are evacuated during drills and emergencies. See Section L-6 for supervisor's responsibilities regarding individuals with disabilities.

L. Employees. Employees at all levels throughout the NIH are responsible for:

1. Complying with all applicable occupational safety and health standards, rules, regulations, and orders issued by competent authority, including this Occupant Evacuation Plan.
2. Evacuating the facility promptly and in an orderly manner upon activation of the fire alarm.
3. Cooperating fully with persons in the Occupant Emergency Organization.

**F. Initiating Action:**

The decision to activate the Occupant Emergency Organization shall be based upon the best available information, previous experience and at the advice of fire department or Federal and local law enforcement agencies. The primary consideration will, at all times, be the safety of building occupants.

When there is an immediate, or suspected danger, the occupants shall be evacuated in accordance with the plan, without consultation. The sounding of the fire alarm or any other available means will be used for evacuation. When a manual fire alarm pull station is used to initiate an evacuation, the individual activating the fire alarm should also call the fire department to provide additional information as to the specific location and nature of the emergency.

**G. Emergency Call List:**

Contact	On-Campus	Off-Campus
Fire/Ambulance	116	9-911
Police	115	9-911
Chemical/Biological/Radiological	116	9-911
Building 10 (Critical Medical Situations)	111	---
Engineering	108	---
TTY System	6-0063	---

**H. Non-Emergency Call List:**

NIH Fire Department	6-2372
NIH Police	6-5685
Occupational Medical Service	6-4411

**Note:** For work related injuries occurring off the NIH reservation, after the ambulance is summoned, contact the Occupational Medical Service, 6-4411.

**I. Emergency Procedures - For All Occupants:**

Supervisors are responsible for ensuring: (1) compliance with this program, (2) that all employees are safely evacuated, and (3) that individuals with disabilities are assisted to safety.

All occupants should follow these procedures:

- A. Fire

1. Confine the fire by closing all doors.
2. Pull/activate nearest fire alarm box.
3. Call the Fire Department.
4. If you are not aware of the fire, but hear the alarm, turn off gas and confine hazardous materials in cabinets; close all doors to the area involved; and, walk, do not run, to the nearest stairway and evacuate the building.
5. Do not use the elevators.

#### B. Release of Chemical or Biological Materials

1. Leave the room and close doors. Do not open the windows.
2. Remove contaminated clothing and wash any parts of the body which may have come in contact with the material.
3. Call the Fire Department.
4. Do not permit anyone to enter the room/area until the appropriate authorities determine that the area is safe.

#### C. Radiation Incident

1. Confine the contamination, using absorbent material to keep it from spreading.
2. Remove contaminated clothing and shoes before entering a clean area.
3. Wash any parts of the body which may have come in contact with the radioactive material.
4. Call the Fire Department.
5. If a Clinical Center patient is involved, call the physician in charge and the Nursing Service Chief or Nursing Supervisor.

#### D. Bomb Threat/Incident

1. Engage caller in conversation, be calm, and, if possible take notes to determine (a) the exact location of bomb (b) the source of threat (c) time of explosion (d) background noises on phone (e) peculiarities of the callers voice (f) gender and approximate age. Have someone else listen

on an extension or a speaker phone.

2. Call the Police.

3. Never touch a suspected bomb device; turn off all types of radios and transceiver equipment near the suspected area.

4. If building evacuation is necessary, leave in an orderly manner. Cooperate with police, fire and building occupant emergency organization staff.

## **J. Evacuation Information:**

### **A. Persons Authorized to Order Evacuation**

1. Designated Official

2. Occupant Emergency Coordinator

3. Senior fire/police officer

4. Chief, EMB, DS

5. Director, DS, or the senior DS official present and/or aware of the problem.

6. Director, Division of Security Operations

7. Any person aware of an emergency who believes immediate action may be necessary to protect the lives of occupants.

### **B. Evacuation Signals**

Activation of the fire alarm indicates that the building must be evacuated. During evacuation drills, or actual emergency situations, occupants should acquaint themselves with the sound of their building's evacuation signal.

### **C. Means of Evacuation**

1. Occupants should exit by the closest stairway or as directed by a member of the evacuation team.

2. Individuals with disabilities and their aide(s) should immediately proceed to the designated evacuation area (the nearest elevator lobby). If this area is untenable due to fire, heat, smoke, etc., proceed to an alternate exit, either another elevator lobby or the closest stairwell.

3. The Floor Team Coordinator (FTC) will report the location of individuals with disabilities to the Occupant Emergency Coordinator

(OEC) who, in turn, will relay the information to the senior fire or police officer, depending on the nature of the emergency.

#### D. Relocation Site

Upon exiting the building, assemble in a location far enough away as not to interfere with the arrival of fire apparatus and the activities of emergency responders, yet in an area that provides adequate safety for evacuees.

#### E. Building Re-Entry

Occupants will return to the building only when authorized by the senior fire or police officer present.

### **K. Evacuation Drills:**

A. Panic is one aspect of a disaster with which evacuation team personnel should be prepared to cope. A building population and emergency organization that is well informed about the building evacuation plan, through training, will be less likely to panic than one which is unaware of the correct action to take. Organization personnel and building occupants will participate in drills that will familiarize them with the duties they are expected to perform in an emergency.

B. Evacuation drills will be scheduled twice each calendar year for all buildings occupied by NIH employees.

C. As requested by the OEC, buildings with critical operations which may not be safely neglected, such as laboratory and computer facilities will be notified on the day of the drill.

D. With the conscientious participation of all employees, evacuation drills typically do not take longer than 15 minutes.

E. The Emergency Management Branch, Division of Safety is responsible for:

1. Scheduling evacuation drills.
2. Notifying the Occupant Emergency Coordinator, in advance, of the drill.
3. Notifying building occupants on the day of the drill, when applicable.
4. Coordinating with the Division of Engineering Services, the Division of Space and Facility Management, local fire departments, and other appropriate authorities, as required.
5. Conducting evacuation drills.

6. Documenting drill results and conducting critiques.

7. Reporting results of drills to the Occupant Emergency Coordinator noting:

- a. The amount of time required for occupants to vacate the building.
- b. Deficiencies encountered, including problems experienced by individuals with disabilities and their aides.
- c. Observations and recommendations, including references to occupant emergency staff and their activities.

F. All employees are expected to participate in evacuation drills as follows:

When the fire alarm signal sounds, occupants shall promptly leave their work areas, close doors, and proceed directly to the nearest exit. Elevators shall not be used, except under the direction of the fire department. During an emergency, the nearest exit may be blocked by smoke; therefore, employees should be familiar with alternate exits. Alternate exits should also be used if the primary exit is inaccessible. For this reason, employees should always familiarize themselves with the building, particularly alternate escape routes.

## **L. Evacuation Procedures for Individuals with Disabilities:**

### **A. Evacuation Signals**

Activation of the fire alarm indicates that the building must be evacuated. Hearing impaired occupants should be personally informed of the emergency by a Floor Team member, supervisor or any other person. For this reason, special provisions must be made to ensure that hearing impaired individuals are informed in the event of an emergency.

In some on-campus buildings an emergency vibrating pager system is available to alert hearing impaired individuals that the fire alarm has activated. For information on buildings equipped with this emergency notification system or for information on obtaining a vibrating pager, contact the Emergency Management Branch on 496-1985.

### **B. Aides to Individuals with Disabilities**

Aides will be assigned to all individuals with disabilities, including those who are temporarily disabled. Aides will assist these individuals to a safe area away from the building or to a protected area.

All personnel working as part of the evacuation team must be familiar with the emergency procedures for dealing with individuals with disabilities. Any employee may become temporarily disabled due to an injury or illness; for example: broken leg, injured foot, back problem, complications with a pregnancy, etc. Disabled visitors may also be in the facility at the time of the emergency.

### C. Means of Evacuation

Individuals with disabilities will be assisted by one or more assigned aides. Aides will assist the individual(s) to the nearest elevator lobby.

If this area is untenable due to fire, heat, smoke, etc., they will proceed to an alternate exit, another elevator lobby or the closest stairwell.

Elevators must NEVER be used for emergency evacuation unless the elevators are under the direction of the fire department.

If two aides are present, one will report the location of the individual with a disability to the Floor Team Coordinator for evacuation by emergency personnel, if necessary. If only one aide is present, that person will remain with the individual and have another employee inform the Floor Team Coordinator of their location.

The Floor Team Coordinator will report the location of all individuals with disabilities to the Occupant Emergency Coordinator (OEC) who, in turn, will relay the information to the responding Fire Department.

D. Remember that firefighters and rescue personnel always proceed initially to the areas of greatest risk to systematically perform search and rescue operations.

### E. Visitors with Disabilities

Because visitors who have disabilities will not have aides especially assigned to them, as NIH employees do, Floor Team Coordinators will ensure that all areas on the floor, including restrooms, are thoroughly checked.

### F. Supervisors' Responsibilities

All supervisors are responsible for:

1. Reporting to the OEC and FTC the presence of individuals who have a hearing, sight or physical impairment, or who have any other impairment which may restrict an individual from readily evacuating the building.
2. Ensuring that all individuals with disabilities, who work under their supervision, are assigned one or more Aides by the Floor Team Coordinator and are assisted to safety during emergencies.
3. Ensuring that individuals with disabilities who may work other than normal business hours (i.e., evenings, weekends, holidays) are always adequately protected during emergency situations necessitating building evacuation.

**M. Training:**

A. The EMB will provide training to the Occupant Emergency Organization members as requested by the Occupant Emergency Coordinator.

Training seminars will be provided by the EMB, DS.

**N. Records Retention and Disposal:**

Records pertaining to this chapter are retained and disposed of under the authority of NIH Manual [1743](#) "Keeping and Destroying Records," Appendix 1, "NIH Records Control Schedule," Item 1100-I-1. See manual for specific disposal instructions.

**Appendix 1. NIH Occupant Emergency Organization Staff List:**

**NIH OCCUPANT EMERGENCY ORGANIZATION FOR BUILDING**

Designated Official:

Executive Officer,  
Occupant Emergency Coordinator (OEC)

Room #

Phone #

Deputy Occupant Emergency Coordinator

Room #

Phone #

Floor Number

Floor Team Coordinator

Asst. Floor Team Coordinator

Stairway Monitor

Elevator Monitor

Restroom Monitor

Aides to the Disabled Individuals with Disabilities

Name & Room Number / \*\*

Emergency Management Branch, Division of Safety

Date:

\*\* Denotes hearing impaired individual

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