Defend-in-Place Strategy in Healthcare Facilities

THE DIRECT ANSWER

Defend-in-place is the fire safety strategy for healthcare occupancies: instead of evacuating patients — most of whom can't walk, and some of whom can't survive being moved — the building is designed to protect them where they are . Fire-rated and smoke-resistive construction, automatic sprinklers, smoke compartments, and trained staff contain the fire and its products while patients relocate horizontally past a smoke barrier to an adjacent compartment, rather than down stairs and out of the building.

HOW IT WORKS

- Compartmentation: each floor divided into at least two smoke compartments by smoke barriers; fire areas further subdivided by fire barriers.
- Horizontal relocation: on alarm, staff move patients through smoke-barrier doors into the adjacent compartment — no stairs, no elevators, no outdoors.
- Suppression and detection: sprinklers control the fire; detection and alarm alert staff early.
- Staff action: the strategy depends on trained staff executing the fire plan — closing doors, relocating patients, and accounting for everyone.

WHAT DEFEND-IN-PLACE DEMANDS OF THE BUILDING

- Every element must work: smoke barriers intact and sealed (penetrations firestopped), corridor doors that close and latch , corridors clear for bed movement, sprinklers and alarms maintained and tested.

FIELD QUESTION

What is defend-in-place?

The healthcare fire strategy of protecting patients where they are — via compartmentation, sprinklers, and horizontal relocation past smoke barriers — instead of full evacuation.

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