

## Measurable Elements of FMS.06.01

1. The fire safety program includes equipment/systems for the early detection and alarm notification of fire and smoke.
2. The fire safety program includes equipment/systems for the suppression of fire.
3. The fire safety program includes the safe exit from the facility through free and unobstructed access to exits.
4. The fire safety program includes clearly visible exit signage that is understandable to the hospital's occupants.
5. The fire safety program includes lighting for emergency exit corridors and stairs.
6. When required by local laws and regulations, the fire safety program includes containment of fire and smoke, and these features are maintained to ensure effectiveness and safety.

## Standard FMS.06.02

All fire safety equipment and systems, including devices related to early detection, alarm notification, and suppression, are inspected, evaluated, and maintained.

### Intent of FMS.06.02

The hospital's fire safety program identifies the frequency of inspecting, testing, and maintaining fire protection and safety systems, consistent with requirements. Fire safety equipment and systems in hospitals include but are not limited to the following:

- Heat and smoke detectors
- Fire alarms
- Fire pumps
- Standpipe systems
- Sprinklers
- Fire suppression systems
- Fire hoses
- Portable fire extinguishers
- Fire doors and assemblies (including sliding and roll-down doors)
- Automatic shutdown devices for air handling systems
- Automatic smoke management systems

The hospital inspects, evaluates, and maintains all fire safety equipment and systems within its building(s), including equipment for early detection and suppression of fire and smoke. Activities and frequencies for inspection, testing, and maintenance are consistent with manufacturers' recommendations. When local codes, laws, and regulations include requirements for inspection, testing, and maintenance of fire safety equipment and systems, the hospital follows the more stringent requirements, whether those are the manufacturers' recommendations or the local codes, laws, and regulations.

Any deficiencies identified, such as impaired or nonfunctioning systems and equipment, are immediately corrected. When corrections cannot be immediately carried out, interim measures are implemented to reduce fire risk and ensure safety of patients, staff, and visitors until deficiencies can be fully corrected. The results of all inspections, testing, and maintenance are documented, including corrections and interim measures that are implemented.

## Measurable Elements of FMS.06.02

1. All fire safety equipment and systems, including those for smoke and fire detection and suppression, are inspected, evaluated, and maintained according to manufacturers' recommendations or as required by local codes, laws, and regulations, whichever sets the more stringent requirement.
2. ⓧ Inspection, testing, and maintenance of all fire safety equipment and systems are documented, including results and corrective actions.
3. Any deficiencies identified in fire safety equipment and systems are immediately corrected, or interim measures are implemented to reduce fire risk until deficiencies can be fully corrected.

## Standard FMS.06.03

The hospital conducts regular exercises with staff to evaluate the fire safety program.

### Intent of FMS.06.03

The hospital's fire safety program includes but is not limited to the following:

- Plan for reporting and responding to a fire emergency
- Plan for safely evacuating the facility in the event of fire or smoke emergencies
- Process for evaluating all portions of the fire safety program during each 12-month period
- Responsibilities of different staff members during a fire emergency
- Necessary education of staff to effectively protect and evacuate patients when an emergency occurs
- Participation of staff members in at least one fire safety exercise per year, or more frequently when required by laws and regulations, national fire protection standards, or other authorities

Exercises to evaluate the fire safety program can be accomplished in multiple ways but should always include a physical component in which staff must respond to an alarm and take appropriate actions during a fire alarm exercise. Staff are trained in what to do, how to exit, and where to assemble (the "assembly points"). The hospital may choose to conduct evacuation exercises during various shifts, including nights and weekends.

(Simulated evacuation exercises in areas such as the intensive care unit, operating theatre, or on high floors of the building may provide additional insights but are not mandatory.) **Note:** Evacuation exercises to evaluate the fire safety program should not directly involve patients or visitors; however, it must address how staff would protect patients and visitors in a fire emergency. It is also important to note that high-risk areas of hospitals that are identified in its risk assessment, such as operating theatres and hyperbaric treatment areas and equipment, may have unique risks that require additional elements of its fire safety exercises. In this case, the hospital should conduct exercises based on these risks, as well as laws and regulations, Ministry of Health requirements, or other authorities.

Another example of an exercise to evaluate the fire safety program is assigning a "fire marshal" to each unit and having them randomly quiz the staff about what they would do if a fire occurred on their unit. The staff can be asked specific questions, such as, "Where is the oxygen shutoff valve? If you have to shut off the oxygen valve, how do you take care of patients who need oxygen? Where are the fire extinguishers on your unit located and how/in what circumstances would you use one? How do you report a fire? How do you protect the patients during a fire? If you need to evacuate patients horizontally or vertically, what is your process?" Staff should be able to respond correctly to these questions. The fire marshal should keep a record of those who participated. Other examples of exercises include computer-based teaching and testing or a written test for staff to take relating to the fire safety program.

Whatever the exercise chosen to evaluate the fire safety program, staff should be knowledgeable of the program and be able to describe how to bring patients to safety. Staff who do not pass are reeducated and retested.