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1) PURPOSE:

- a) To ensure compliance fire safety guidelines across the hospital

2) ABBREVIATIONS:

- a) IP – Inpatient services
- b) OP – Outpatient services
- c) CSO – Chief Safety Officer
- d) MCP – Manual Call Points
- e) ER – Emergency Room

3) SCOPE:

- a) Hospital wide

4) RESPONSIBILITY:

- a) Security Staff
- b) Nursing In-Charge
- c) Medical Superintendent
- d) Nursing Staff
- e) Doctors
- f) Administrative staff
- g) Management Staff

5) DISTRIBUTION:

- a) Hospital wide

6) PROCESS DETAILS:

- a) The Hospital facility should be in compliance with the local fire safety guidelines as prescribed by the Local Fire Safety Authority. Relevant approvals and permissions should be obtained from the said authority for ensuring fire safety in the facility
- b) It is the responsibility of every manager, supervisor and employee to observe, report and check any condition or act that may be a potential cause of fire in any of the organization. The slogan "**Prevention is better than cure**" is equally applicable to fire.
- c) Old and frayed electric cables damaged switch boards, loose fixtures and sparking appliances will be reported in writing to the maintenance department by the concerned department, managers and supervisors for immediate repair/ replacement. Follow up action will be taken until work is complete.
- d) Welding / hot works by Maintenance Department/ contractors is not allowed without written permission of safety officer / shift security officer. Departments will ensure that welding is not permitted in their departments unless fire personnel are present to provide fire – fighting cover. It will also be ensured that the manager / supervisor that a radius area of twenty feet from the point of welding is cleared of all inflammable material such as petrol / thinner oil, cardboard paper, plastic cloth and dry wood. Furniture that cannot be removed shall be covered with asbestos sheets or wet hessian cloth or tin sheets.

Prepared by:	Issued by:	Reviewed by:	Approved by:	Amend Date:	Copy No: 01
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- e) Cleaning of hands / feet with petrol / thinner / diesel will not be permitted. The concerned department may ensure this.
- f) Chemicals and oil stored in material store will be divided into small stocks with adequate spacing in between.
- g) The senior supervisor / in-charge Food & Beverage department of the Hospital will be personally responsible for operation and safety of Liquid Petroleum Gas installation in the canteen Kitchen. He will ensure that all valves on the main feed pipeline and regulators on the gas stoves are shut, when not in use.
- h) Excessive paper, plastic cardboards and wooden scrap will not be allowed to accumulate in the office premises. Supervisor Housekeeping will ensure that prompt action is taken on complaint by concerned department.
- i) Used bandage / cotton etc. will not be allowed to accumulate in the Hospital
- j) Unauthorized fires will not be lit in the Hospital premises. Any authorized fire will be completely snuffed before close of work
- k) The electric main switch of all offices not occupied will be switched off when not in use
- l) Fire Works are not permitted inside the Hospital on Diwali and other festival days
- m) Private electric appliances like heaters, immersion rods are not allowed inside the Hospital
- n) Duplicate keys of all offices, stores and departments will be deposited with security, and kept in the duplicate key box. All concerned will complete this action. This is however, not applicable to individual managers' cabins with glass facings
- o) Firefighting equipment will not be removed or misused for industrial / administrative purpose. Department concerned will prohibit people for any such misuse
- p) The Tapping of hydrant lines for industrial/ administrative use is a serious violation of the safety policies. Maintenance Department will ensure that existing underground and surface tapings are disconnected immediately
- q) Whenever a new structure is to be built or an old structure is modified, maintenance, Department will involve the safety officer at the planning stage for projecting the fire safety requirements. The maintenance department will consult the safety officer whenever any work site is used involving inflammable material.

7) FIRE SAFETY PLAN

- a) This Fire safety plan has been framed to ensure that in case of fire in Hospital premises safe evacuation of its occupants may present serious problems unless a plan for orderly and systematic evacuation is prepared in advance and all occupants are well drilled in the operation of such plan.
- b) These Fire Safety Plan guidelines are intended to assist Fire Safety team in this task.
- c) The term “Emergency Evacuation” has different meanings according to the vulnerability of the building in question. When a building such as the Hospital affords protection because of its construction and fire suppression systems, “evacuation” will mean removal of patients, personnel, and visitors to areas deemed fire – safe for as long as it may be necessary to decide further action.

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- d) The plan of action for the Hospital is for horizontal evacuation to a fire-safe area until fire department officials and Chief Safety Officer deem the area safe.

8) RACE - FIRE SAFETY PROTOCOL

R-RESCUE: Patients or person if in immediate danger.

A-ALARM: Raise alarm by calling **Code Red** or Activate the manual call points (MCP)

C- CONFINE: Close doors and windows to keep the fire contained

E-EXTINGUISH/EVACUATION: Use fire –fighting equipment if trained in its use

9) FIRE SAFETY PROCEDURE

- a) To establish method of systemic, safe and orderly evacuation of the Hospital premises by and of its occupants in case of fire or other emergency, in the least possible time, to a safe area by the nearest safe means of egress; (way out) also the use of such available fire appliances as may have been provided for controlling or extinguishing fire and safeguarding of human life
- b) To define and fix up the responsibilities of various key personnel for generating desired actions during an emergency such as evacuation plan and firefighting arrangements
- c) To consider all possible situations, which may lead to an emergency or a disaster
- d) Give clear instructions regarding what is to be done during an emergency by the occupants and other staff
- e) To provide proper education as a part of continuing employee training in principle and through continuing written protocols for all occupants to ensure prompt reporting of fire, the response of fire alarms as designated, and the immediate initiation of fire safety procedures to safeguard life and contain fire until the arrival of the Fire Brigade

10) FIRE SAFETY SYSTEM

- a) The fire safety system has been provided to detect and control an early outbreak of fire. The fire safety plan is made for Hospitals. The following fire protection systems will be kept in place:
 - i) Automatic fire alarm and detection system
 - ii) Manual call points
 - iii) Public address system
 - iv) Portable fire extinguishers of various types
 - v) Fire hydrants wet risers and sprinkler system.
 - vi) Fire hose boxes and hose reels.
 - vii) Water storage available for firefighting
 - viii) Fire water pumps
 - ix) Fire Exit Plans in all floors
 - x) Clearly demarcated - Safe Assembly Zones

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11) FIRE FIGHTING MANPOWER PLAN

- a) Systematic trained manpower is required for firefighting and salvage. The chart showing the proper organization is as follows:
 - i) **FIRE FIGHTING TEAM:**
 - (1) Under guidance from Chief Safety Officer
 - (2) Firefighting Team - Floor wise responsibility allocation by Chief Safety Officer
 - ii) **SALVAGE TEAM:**
 - (1) Material salvage by Admin Staff & Engineering team
 - iii) **CORDON TEAM:**
 - (1) Under the guidance of the security supervisor & Safe Zone in- charges
 - iv) **FIRST AID TEAM:**
 - (1) Under the guidance of the Medical Officer & ER/Casualty team
 - v) **EVACUATION TEAM:**
 - (1) As per the floor evacuation team – designated by Chief Security Officer

12) FIRE CONTROL ROOM

- a) Fire Control Room is established in a safe zone to coordinate the firefighting efforts in the hospital. The Fire Control Room consists of:
 - i) Hospital Administrative Officer
 - ii) Chief Safety Officer
 - iii) HOD Maintenance Department
- b) Fire Control – Coordination team consists of
 - i) Incharge - Billing/Operations
 - ii) Incharge – Operations
 - iii) Incharge – Security
 - iv) Electrician
 - v) House Keeping Supervisor

13) FIRE SAFETY – MOCK DRILL (CODE RED)

- a) The objective of Fire Safety – Mock Drill (Code Red) is to review basic Fire Prevention safety guidelines, understand what Code Red is and what procedures to follow, how to properly use a Fire Extinguisher and the correct way to remove patients out of the hospital building during an emergency – refer to the SOP. Fire Safety – Mock Drill (Code Red) guidelines for detailed process
- b) The Fire Safety mock drill (Code Red) is conducted by the Chief Safety Officer under the guidance of the Hospital Management.
- c) All Staff members should be priorly trained with regards to the fire safety procedure by the Chief Safety Officer – before conduct of the fire safety drill (code red) in the hospital
- d) Local Fire Safety Authority should be informed regarding the conduct of the fire safety drill procedures at the hospital facility
- e) All patients of the facility should be priorly informed regarding the conduct of the fire safety drill in the hospital

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14) DOCUMENTS:

S No	Record	Responsibility	Review after (Years)
1	List of Fire Extinguishers	CSO	1
2	Fire Extinguisher – Maintenance Record	CSO	1
3	Fire Safety – Mock Drill Register	CSO	1
4	Fire Alarm System – Maintenance Register	CSO	1
5	Public Address System – Maintenance Register	CSO	1
6	Facility Safety Rounds - Register	CSO	1

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