



HEALTH HOLDING

HAFER ALBATIN HEALTH
CLUSTER
MATERNITY AND
CHILDREN HOSPITAL

Department:	Facility Management Safety (FMS)		
Document:	Plan		
Title:	Life Fire Safety Plan		
Applies To:	All MCH Staff		
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1. SCOPE:

- 1.1 This Life Fire Safety Plan describes the policies and procedures for the active testing and maintenance of the Life Fire Safety Systems in Maternity and Children Hospital facilities. It includes the Fire Alarm and Fire Suppressions Systems. It also provides clear maintenance of all Life Safety Fire Detection and Suppressions.

2. DEFINITION:

- 2.1 Life Safety systems are installation and equipments specifically intended to detect heat or smoke, warn the facility occupants and eliminate the effects of the incident by suppression of the fire or by controlling the smoke.

3. OBJECTIVE:

- 3.1 To identify through regular inspections, testing and maintenance possible life-threatening risks within and around the hospital facilities.
- 3.2 To maintain accurate records of testing and maintenance, and any fire-related incidents that may occur, identify the likely cause and take appropriate action to prevent reoccurrence.
- 3.3 To increase awareness to the staff of fire-related safety issues.
- 3.4 To enforce the policy of designated areas for smoking.

4. RESPONSIBILITY:

4.1 Safety / Maintenance Manager Shall:

- 4.1.1 Coordinate with the medical staff regarding any maintenance activities that could have an effect on the life safety systems at their working areas.
- 4.1.2 Ensure that the on-site work is carried out in compliance with the relevant standards or codes.

4.2 Safety Officer Shall:

- 4.2.1 Issue the relevant work permit for construction work on the life safety systems.
- 4.2.2 Inspect the work sites to ensure the minimum standards of safety are adhered for protection of co-workers, staff and patients.

4.3 The Maintenance And Safety Department Shall:

- 4.3.1 (PIS) Implement the regular inspection and testing of the fire detection and suppression systems and equipment in accordance with the referenced codes and standards.
- 4.3.2 Keep records of all tests and maintenance activities carried out on the fire detection and suppression systems and equipment in the hospital facilities.
- 4.3.3 Provide adequate notice to the Maintenance Management when shutdown of the fire detection or suppression systems and equipment is required for repair or renovation work. This notification shall indicate the duration and extent of the outage.

- 4.3.4 Provide construction or renovation drawings, specifications and records of original design and alterations (change-orders) involving fire detection and suppression systems and associated equipment.
- 4.3.5 Ensure that all systems are adequately reinstated after completion of any shutdown.
- 4.3.6 Maintain a log of alarm events, both real and false, and their location and likely cause. Advise the Low Current Engineer of these events.
- 4.3.7 Ensure that all systems are adequately reinstated after completion of any shutdown.

4.4 Responsibilities Tech. Of Low Current Engineer shall:

- 4.4.1 The Low Current Engineer shall: Be responsible for the overall maintenance and operation of all fire detection and suppression systems and equipment.

4.5 The Safety Officer / Safety Technician Shall:

- 4.5.1 Receive initial response to the alarm signal and provide appropriate secondary response as required.
- 4.5.2 Investigate and identify the cause of the signal and in the case of a real fire but small and controlled, extinguish it. And if fire is beyond his power he should along with staff on site with the RACE procedures (please refer to internal disaster plan).
- 4.5.3 Silence the audio alarms and reset the system upon conclusion of the incident.
- 4.5.4 Prepare a report on the incident.

5. PROCEDURES:

5.1 Checking, Testing and Maintenance:

- 5.1.1 Fire Extinguishers:
 - 5.1.1.1 Monthly checking of fire extinguishers by safety tech.
 - 5.1.1.2 Pressure indicator should be checked and should be in the green point.
 - 5.1.1.3 Ensure that the safety pin is in place and should be sealed.
 - 5.1.1.4 Ensure safety of cylinder body and there is no any damage, chasm or corrosion.
 - 5.1.1.5 Ensure safety of the hose and that there are no splits.
 - 5.1.1.6 Handle safety.
 - 5.1.1.7 Ensure availability of enough number of extinguishers in the area intended to be checked.
 - 5.1.1.8 Ensure fix of extinguisher in proper location and height not exceeded 150 cm from floor level.
 - 5.1.1.9 Ensure availability of guiding signs of the extinguisher.
 - 5.1.1.10 Ensure that there is no obstacles could obstruct easy access to the extinguisher.
 - 5.1.1.11 Clean extinguishers from dust and dirty.
 - 5.1.1.12 Record the checking on the extinguisher sticker and document it on the records.
 - 5.1.1.13 Safety committee cares to advice safety administration to carry out training program to hospital staff on how to use fire extinguishers once a year.
- 5.1.2 Emergency Exits / Fire, Smoke Proof Doors :
 - 5.1.1 Ensure that the emergency exits are not locked.
 - 5.1.2 Ensure that there are no obstacles could obstruct easy exit either directly in front of the door or in the corridors.
 - 5.1.3 Ensure availability of manufacture board which indicates that the door is fire proof door for one hour and half.
 - 5.1.4 Ensure door mechanics; easy open and tightly close.
 - 5.1.5 Ensure existence of push handle and proper function.
 - 5.1.6 Ensure having auto close system.
 - 5.1.7 Ensure free stairs and no obstacles.
 - 5.1.8 Ensure availability of the guiding signs of emergency exit.
- 5.1.3 Elevators:
 - 5.1.3.1 The utility technician ensure that all elevators connected to fire warning system that in case of fire warning, it sends a sign to the elevators to take down all elevators to the

ground floor and open its doors and stop until the system returned to its operation nature.

5.1.4 Emergency lights:

5.1.4.1 Monthly check of emergency lamps by safety technician and ensure its effectiveness and to document the check in its records every 3 months by general maintenance.

5.1.5 Material Purchase:

5.1.5.1 Hospital Administration supports provide used materials in the hospital to be fire proof such as curtains and furniture.

5.1.5.2 Safety Committee follow up separation of hazardous and flammable materials, and keep it away from heat sources, and to store it according to Material Safety Data Sheet.

5.1.5.3 Safety Committee cares to advice Maintenance Department to close holes and gaps in the wall with anti-smoke and fire leak materials especially in mechanic rooms, electricity room, corridors and staircase.

5.1.6 Fire Alarm System:

5.1.6.1 Acceptance Testing:

5.1.6.1.1 Following installation of a new system, it shall be subjected to a (acceptable standards) rigorous acceptance test. This shall include verifying that the entire component devices work as designed and the overall system is fully functional.

5.1.6.2 Additional Testing:

5.1.6.2.1 It shall be carried out to ensure that the system functions properly under emergency power operation.

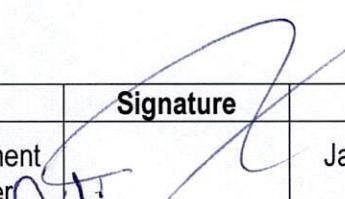
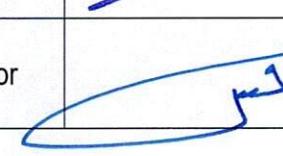
5.1.6.3 Maintenance Testing:

5.1.6.3.1 Fire alarm panels shall have the lamps and fuses tested periodically every 3 months. The ground fault and supervisory signals shall also be tested every 3 months. Where the fire alarm panel is monitored remotely from the site, the connection shall be tested monthly.

6. REFERENCE:

6.1 MOH civil rules and regulations

7. APPROVALS:

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