

**INTERNAL ONLY**  
**ISLHD PROCEDURE**  
**COVER SHEET**



**Health**  
Illawarra Shoalhaven  
Local Health District

<b>NAME OF DOCUMENT</b>	Fire Safety Compliance
<b>TYPE OF DOCUMENT</b>	Procedure
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<b>EXECUTIVE SPONSOR or EXECUTIVE CLINICAL SPONSOR</b>	Executive Director Infrastructure Development
<b>AUTHOR</b>	District Security & Fire Manager
<b>KEY TERMS</b>	Fire, safety, accreditation, defects
<b>FUNCTIONAL GROUP OR HUB</b>	District Wide
<b>NSQHS STANDARD</b>	Standard 1
<b>SUMMARY</b>	This procedure's purpose is to set out the roles and responsibilities and to provide guidelines for the ISLHD's site Service Managers / Facility Managers, Fire Safety Officers / Managers and the District Security & Fire Safety Manager in relation to the statutory requirements for Annual Fire Safety Certification, Fire Safety Inspections and Audits, Fire Door Audits, Fire Safety Education and Training and other fire safety related matters'.

**COMPLIANCE WITH THIS DOCUMENT IS MANDATORY**

Feedback about this document can be sent to  
Corporate Policies: [ISLHD-CorporateGovernance@health.nsw.gov.au](mailto:ISLHD-CorporateGovernance@health.nsw.gov.au)

**1. POLICY STATEMENT**

This procedure relates to MoH policy Fire Safety in Healthcare Facilities PD2010\_024.

It is imperative that ISLHD Chief Executive and General Managers have effective monitoring systems to ensure that legislative obligations as set out in PD 2010\_024 are implemented and maintained in every District facility and meet their duty of care for maintaining a safe environment for employees, patients and members of the public.

**2. BACKGROUND**

Chief Executives and General Managers of public health care organisations are personally accountable and have a duty of care for maintaining a safe environment for employees, patients and members of the public in their health facilities and to comply with NSW Fire Safety requirements.

It is imperative that Chief Executives have effective monitoring systems as to ensure compliance with legislative obligations as outlined in Section 3 of PD2010\_024.

**3. RESPONSIBILITIES**

**3.1 Employees will:**

- Familiarise themselves with all fire emergency equipment and facilities within their workplace.
- Attend mandatory Annual fire and evacuation training and report any fire related hazard immediately.

**3.2 Fire Safety Officers / Managers will:**

- Work closely with their Facility Managers and District Security & Fire Safety Manager to ensure all defects are rectified in a timely manner.
- Escalate any issues by discussing with Facility Manager and District Security & Fire Safety Manager
- Provide all Mandatory Fire Training to all Employees of your Facility.

**3.3 Line Managers will:**

- Facilitate attendance of their staff at all mandatory fire training and ensure that online training has occurred on an annual basis.
- Report all Fire Safety issues directly to the Site Fire Safety Officer for immediate review, planning and rectification.

**3.4 Facility / Service Managers are Responsible For:**

- Ensuring routine maintenance, repair and testing of all fire safety measures are applied in their buildings.
- The District Security & Fire Manager will co-ordinate the tendering process for these services maintaining a close working relationship with contractors to ensure an appropriate and timely service.
- Facility/Service Managers must be familiar with the status of defects and ensure their rectification in a timely manner.
  - Ensuring that Annual Fire Safety Statements and Maintenance Certificates (AFSS/MC) are completed by Certified Fire Safety Practitioner (CFSP) and incumbent Fire Safety Contractors respectively for each facility and that all critical defects are finalised prior to the CSFP's approval, sign-off and issuance of the AFSS'. This AFSS is an independently written confirmation that all Essential Fire Safety Measures installed in a building have been tested and certified and found to be capable of performing to the standard in which they were installed.
- The District Security & Fire Safety Manager will provide assistance to sites with obtaining all required information to assist the issuance of the AFSS.
- Ensuring that Four Yearly External Fire Audits are conducted and an action plan is developed and implemented within at least one month of receipt of the report.
- The District Security & Fire Safety Manager will schedule these inspections in consultation with the Facility Manager. However, it is also the responsibility of the Facility / Service Managers to monitor due dates.
- The District Security & Fire Safety Manager will assist Facility Managers in the development of the action plans, and will post on the District Security and Fire Safety Internal Shared Site and provide monthly reports on the progress against the plans.
- Facility Managers or designated person will hold a Monthly meeting with the District Security & Fire Safety Manager and provide status of compliance of their respective sites, including Fire Training numbers and Action Plan updates.

**3.5 ISLHD District Security & Fire Safety Manager Responsible For:**

- Overseeing and monitoring District wide compliance with NSW Health PD 2010\_024 – Fire Safety in Health Care facilities.
- Monthly meetings with site Fire Safety Officers / Managers to ensure they are aware of their obligations to fire systems requirements including training of staff.
- Reporting any priority issues and recording compliance with fire safety requirements.
- Escalating to ISLHD Executive any high priority recommendations which have not been addressed, and or have any approved mitigation plans.

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**Fire Safety Compliance**

ISLHD CORP PROC 62

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- Working with relevant ISLHD Staff and Management in the tendering process for contractors to provide routine maintenance, repair and testing of all fire safety measures in every District building.
- Maintaining a close working relationship with the successful and incumbent contractors to ensure appropriate and timely services which include provision of user friendly defect reports in a timely manner.
- Monitoring provision of AFSS by the contractors to each facility. Assisting in this process to ensure no outstanding high priority defects delay the issuing of these Statements.
- Post these statements on the District Fire Safety Internal Shared website.
- Development of a schedule for the mandatory four (4) yearly fire inspections in each facility and arrange contractors to provide this service – scheduling will be undertaken in consultation with Site Managers or designated person.
- Provide assistance to Facility Managers / Fire Safety Officers in the development of the Four Yearly Action Plan and report on progress against the plan.
- Posting the inspection reports and Action Plan on the District Fire Safety Internal website.
- Assisting sites to develop a mitigation plan where rectification is not immediately possible.

#### **4. PROCEDURE**

##### **4.1 Routine maintenance, repair and testing of all fire safety measures**

- A Contractor will be selected to undertake routine maintenance, repair and testing of all fire safety measures within each District Facility – this selection will be via a tender process.
- The appointed Contractor will provide a timely service across the District.
- Any defects that are identified will be reported by the Contractor and recorded in report format to facility Fire Officers and Facility Managers who will immediately action any defects with a high priority status e.g. 'Requirement'.
- If any defect cannot be rectified immediately the Facility Manager, with assistance from the District Security & Fire Safety Manager to develop a mitigation plan, gain approval from the ISLHD Executive and implement immediately.

##### **4.2 Annual Fire Safety Statements**

- AFSS are issued by the contractor when all Fire Services/ Measures/ Essential Fire Safety Measures have been inspected by qualified and competent persons and these Measures are capable of performing to a standard no less than that specified in any applicable Fire Safety Schedule to a standard no less than that to which the Measure was originally designed and implemented.
- AFSS cannot be issued whilst ever high priority defects have not been rectified.

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**Fire Safety Compliance**

ISLHD CORP PROC 62

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- Every AFSS will be posted in the relevant facility in a prominent location and a copy downloaded onto the District Fire Safety Internal Shared website.

**4.3 Four (4) Yearly External Audits**

- The District Security & Fire Manager will assist with the scheduling and organising of these inspections to ensure they occur on a regular four yearly basis.
- Following receipt of the inspection report, each Facility Manager and Fire Safety Officer/Manager with the advice from the District Security & Fire Manager will immediately develop an action plan to address every defect and recommendation provided
- This plan will be placed on the District Fire Safety Internal Shared website.
- The Site Manager must monitor and action all defects.

**5. DOCUMENTATION**

- MoH policy Fire Safety in Healthcare Facilities PD2010\_024

**6. AUDIT**

The District Security & Fire Manager direct report will audit compliance with this procedure on an Annual basis and discuss with Fire Safety Contractor services at Monthly meetings as and when required.

**7. REFERENCES**

- [MoH Policy – Fire Safety in Healthcare Facilities – PD2010-024](#)
- [WHS Contractor Management – ISLHD OPS PROC 76](#)
- [WHS Risk Management – ISLHD OPS PROC 48](#)
- [Enterprise Risk Management Systems \(ERMS\) – ISLHD OPS PROC 42](#)
- [Work Health & Safety \(WHS\) – ISLHD OPS PD 84](#)

**8. REVISION & APPROVAL HISTORY**

Date	Revision No.	Author and Approval / Date
June 2017	2	<b>Author:</b> District Security & Fire Safety Manager
		<b>Approval / Date:</b> ISLHD Executive Director Finance / June 2017
August 2017	3	<b>Author:</b> District Security & Fire Safety Manager
		<b>Approval / Date:</b> ISLHD Executive Director Finance / June 2017
August 2019	4	<b>Author:</b> District Security & Fire Safety Manager
		<b>Approval / Date:</b> Director AIEMS / August 2019
March 2020	5	<b>Author:</b> District Security & Fire Safety Manager
		<b>Approval/Date:</b> Corporate Policy Recommendation committee / February 2020
		<b>Approval/Date:</b> Executive Director Infrastructure Development / March 2020

