FIRE SAFETY PLAN

The Royal

Mental Health - Care & Research
Santé mentale - Soins et recherche

ROYAL OTTAWA PLACE CAMPUS
1141 Carling Avenue
Ottawa, On
K1Z 7K4

November 2021

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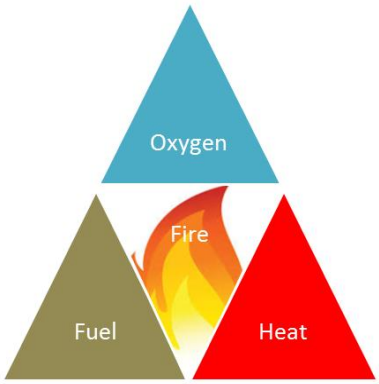


INTRODUCTION

The implementation of the Fire Safety Plan (FSP) helps to ensure effective utilization of fire and life safety equipment within the ROP. Fully functional systems and prevention measures in the ROP are designed to protect people from fire and enable safe relocation, evacuation or shelter-in-place in addition to limiting damage from fire. The Fire Safety Plan is designed to suit the resources of the Royal Ottawa Place (ROP) Campus in Ottawa. It is the responsibility of the ROP Fire Safety Plan Coordinator to ensure that the information contained within the Fire Safety Plan is accurate and complete.
Fire Safety Planning prevents the occurrence of fire by the control of fire hazards in the building, ensures operation of fire protection systems by establishing maintenance procedures, and provides a systematic method of safe and orderly evacuation of the building in the event of fire.

Section 2.8 of the Ontario Fire Code, requires the development, implementation and maintenance of a Fire Safety Plan for this facility. Copies of the FSP shall be kept in the following locations:

Position Title	Location	Name
Manager Recovery	Room # C112	Melissa McFadden
Manager Long Term Care	Room # C113	Sarah Anderson
Administrator	Room # S326	Debbie Pilon
Office Manager	Room # C115	Kathryn Thomson
Charge RN	Room # N226	As per duty shift

OREO – Emergency Management Section

The fire safety plan is a document referenced when providing training to the campus supervisory staff. The staff must receive instructions in fire safety procedures as described in the plan. Designated supervisory staff shall be available on notification of a fire or other type of emergency to fulfil their obligations as described in the plan. It is acknowledged that supervisory staff may not be in the building on a continual basis. Therefore plan availability and training for all staff are key features of the overall FSP.

FSP SUBMISSION PROCEDURES

Copies of the Plan, hard copy or electronic, as required by the Chief Fire Official will be submitted to Ottawa Fire Services.

The Chief Fire Official is to be notified regarding any subsequent material changes in the approved Fire Safety Plan.

RECORD OF REVISIONS

Date	Pages Revised	ROP G Drive Updated	Email Distribution	Hard Copy Distribution
Sept. 19th, 2019	**Pg. 2, 3**	**OREO updated**		
November 16th, 2020	**Pg3 2, 3, 11**			
Dec. 6th, 2021	**p. 1, 3, 4**			

On an annual basis the Coordinator of the ROP Fire Safety Plan will conduct a review of the plan and bring forward to the Director of Patient Care Services a report. The intent of the review is to verify that the plan appropriately reflects changes and modifications conducted through the year and that the content meets mandated requirements and standards. When advised, all manual holders and staff with assigned roles in the plan will review the changes and modifications.

ROP Campus Fire Safety Plan Coordinators

Coordinators	Location/Office	Telephone	Email
Primary Melissa McFadden Sarah Anderson	 C112 C113	 7105 6124	 Melissa.McFadden@theroyal.ca Sarah.Anderson@theroyal.ca
Alternate Kathryn Thomson	 C115	 6106	 Kathryn.thomson@theroyal.ca
Anne-Marie Smith	ROMHC - 1229	6420	Anne-Marie.Smith@theroyal.ca
Jeff Payette	ROMHC -1315	6645	Jeffrey.Payette@theroyal.ca

Approval of the ROP Campus Fire Safety Plan

Signed: Date:

AIM:

The aim of the plan is to ensure that the Royal Ottawa Place staff is as ready as reasonably practicable to prevent and when required react to an emergency that impacts the Campus. The prevention of fires, protection of life and property and least harm to the environment are principles within the aim of the FSP.

OBJECTIVES

The objectives of the fire safety plan include:

- ☐ Enhancing the life safety of occupants and the property protection of the facility, through the application of fire prevention and mitigation measures by staff, patients and residents,
- ☐ In the event of a fire emergency, to make optimal use of life and fire safety features designed into the facility,
- ☐ To have well trained emergency response staff,
- ☐ To have all campus occupants at an awareness level of actions to be taken when an emergency occurs.

OVERVIEW

This Fire Safety Plan (FSP) and the supporting emergency response system are designed to meet the requirements of the ROP Campus in Ottawa. The plan compliments the Master Emergency Operations Plan (EOP) for the ROHCG. The Fire Safety Plan aligns the Campus with the requirements of the Ontario Fire Code and stresses the importance of fire prevention, the proper maintenance of fire and life safety systems and emergency response measures. The plan includes guidelines for staff checks, inspections and use of fire and life safety systems equipment and systems at the facility. Regular fire drills, assessment of emergency measures, training of staff and functional tests of equipment are elements designed to keep the plan current and ensure an enhanced level of awareness and capability of the staff in the facility.

The priority for the staff during an emergency is the health and safety of occupants within the campus facility and campus emergency response team members. The contents and guidelines within the plan and trained staff will provide for the implementation of measures such as: oversight of the maintenance of the fire and life safety systems, orderly response and safe evacuation, sheltering in place of campus facility occupants when required, the use of areas of refuge and emergency assembly areas as appropriate and the protection of the health and safety of occupants.

Emergency situations can be dynamic and can be influenced by several variables such as:

- The magnitude of the emergency condition,
- The building design,
- Weather conditions,
- Initial actions implemented by the Emergency Code Coordinator for the Royal,
- Initial action plan objectives developed by Emergency Command Manager (Hospital Command Centre) when activated,
- And action taken by external emergency services when on scene (Fire, Police and EMS)

For whatever reason they are conducted, fire drills serve to educate building occupants, assist in the evaluation of emergency plans, and identify potential issues with the building's means of egress.

Other factors at the time of the emergency that may impact the dynamics include:

- The timing of the response,
- The decisions made to evacuate,
- Decision to shelter occupants or
- Relocate building occupants to another facility
- The need for activation of additional resources to respond, manage and recover from the emergency.

The ROP must ensure that staff in the facility receive a minimum of awareness training of the Fire Safety Plan. The on-site designated emergency response team members will receive training such that they clearly understand their roles and responsibilities and can respond to an emergency incident.

The principles of the Hospital Incident Management System will be utilized by the staff when an emergency situation causes an internal response and a response by external emergency services agencies (Fire, Police and EMS).

FIRE PREVENTION PROGRAM ELEMENTS

The fire prevention program at the ROP includes the following elements and actions:

- The establishment of emergency procedures and guidelines to be followed at the time of an emergency.
- Appointment and organization of designated supervisory staff to carry out fire safety duties e.g. Maintenance of systems, emergency response.
- Instruction of supervisory staff and other occupants so that they are aware of their responsibilities for fire safety.
- Holding of fire drills in accordance with the Fire Code and incorporating emergency procedures

appropriate to the facility. At a minimum one drill must be conducted monthly.

- A logistical emergency exercise shall be conducted at least every three years. The purpose of fire drills and exercises are to ensure that the response team and remaining staff are familiar with the: fire alarm system and signalling devices, initial emergency response measures, roles and responsibilities, emergency evacuation guidelines, firefighting guidelines, communications processes and to seek areas for improvement.
- Through fire safety checks, awareness and training, staff will assist with measures to control fire hazards in the building.
- Staff will be able to notify the appropriate Maintenance Technician about building systems and equipment provided for fire and life safety needs, that are not fully functional or in a proper state of maintenance.
- Staff will ensure that provisions of alternate measures for fire and life safety for facility occupants are implemented during shut down of fire protection equipment e.g. Fire Watch duties.
- When made aware of alternate measures, the Plan Coordinator and designated staff such as the Emergency Code Coordinator will communicate with facility occupants regarding the temporary measures implemented and when the system is restored to the fully functional state.
- Posting and maintaining at least one copy of the summary of fire emergency procedures e.g. REACT or like posting on each level within the campus facility.
- Keeping a copy of the Fire Safety Plan on the premises in a designated approved location.
- Reviewing and updating of the Fire Safety Plan a minimum of once per year.
- Ensuring that the information in the Fire Safety Plan is current and up to date.

RESPONSIBILITIES

Fire safety is everyone's responsibility. All employees should know how to prevent and respond to fires, and are responsible for adhering to company policy regarding fire emergencies. Specific responsibilities are assigned to positions within the ROP organization.

GENERAL RESPONSIBILITIES OF THE ROP AND FIRE SAFETY PLANNING

Through the hazard identification and risk assessment process, a fire emergency has been identified as one of the greatest risks the ROP is exposed to and one that can harm people, property and the environment. The ROP staff recognize that patients, residents, visitors, staff, volunteers, physicians and contractors must be protected from a fire and its byproducts. The administration team has designed and implemented processes for the management of fire safety to a degree as reasonable as practicable. These processes include measures such as:

- Fire prevention practices,
- Provision of fire and life safety systems and a thorough maintenance program,
- Alternate measures when a fire or life safety system may be compromised,
- Response guidelines in the event of a fire,
- Evacuation guidelines and techniques,
- Staff orientation, training, drills and exercises.

SUMMARY OF RESPONSIBILITIES FOR THE FIRE SAFETY PLAN

Administration/Management

Management determines the fire prevention and protection policies. Management will provide adequate controls to provide a safe workplace, and will provide adequate resources and training to its employees to encourage fire prevention and the safest possible response in the event of a fire emergency.

The Director of the ROP has overall responsibility for the Fire Safety Plan. In the absence of the Director, the Designate on duty will ensure the coordination of prevention measures and emergency response.


Emergency Code Coordinator

When on Campus the Director will respond to emergencies and assume the role of Emergency Code Coordinator. In the absence of the Director the Designate will assume the role of Emergency Code Coordinator. The Designates include:

- Manager of Recovery

- Manager of Long Term Care
- Manager MRFS
- On Duty Charge Nurse Recovery
- On Duty Charge Nurse Long Term Care
- After Hours Manager Patient Care Services (AFMPCS)

Fire Safety Plan Coordinator

The Director of the ROP shall appoint a designate for the coordination of the Fire Prevention Program for the campus and shall ensure that all records pertaining to the program are retained as required. In summary the Coordinator will:

- Ensure the development and coordination of a fire prevention program.
- Ensure that fire control equipment and systems are properly installed and maintained.
- Ensure that measures are in place to control sources of fuel that contribute to fire hazards.
- Ensure that awareness and training programs are in place.
- Ensure that plans are in place and communicated to staff for any residents who would require assistance during an evacuation due to physical or mental disabilities.
- Ensure that measures are in place and staff is trained to remove any equipment of material that may be in means of egress leading to an emergency exit.
- Ensuring an annual review if the basic fire emergency procedures are conducted and posting the most current procedures in conspicuous locations throughout the workplace e.g. REACT.
- Ensuring that staff know how to activate the fire alarm system and how to respond to the stages of fire alarm system activation.
- Ensuring that in service session are conducted for staff in basic emergency procedures and fire safety.
- Ensuring that staff is trained in the use of fire extinguishing equipment e.g. portable fire extinguishers.
- From time to time review the hazard identification and risk assessment list and adjust where needed and ensure proper measures are implemented to address new exposures to risk.
- Ensure that staff training, fire drills and emergency exercises are conducted and recorded.
- When required, respond to emergencies while on duty and report to the Emergency Code Coordinator to provide assistance.
- From time to time or as requested by the Fire Department, meet with the officials to review the plan and to discuss opportunities for improvement or deficiencies as identified.

The **Building Maintenance Operator or Designate** responsibilities include:

- Eliminating fire and life safety hazards in the workplace.
- Ensuring that all fire and life safety equipment is properly maintained, meeting the requirements of the Ontario Fire Code and the local fire authority having jurisdiction.

- Ensuring that daily, weekly and monthly checks are completed as required.
- Ensuring that proper records are developed and retained as related to elements of the fire prevention program.
- Ensuring that heating equipment is inspected and maintained to industry standards such that the equipment is in good repair and safe.
- Ensuring that contractors that conduct work in or around the facility are complying with fire prevention policies, procedures and guidelines.
- In the event that contractors conducting work at the facility create a fire hazard the Building Maintenance Operator will inform the Director and will stop work until mitigation measures are implemented to address the hazard.
- When required, respond to emergencies while on duty and report to the Emergency Code Coordinator to provide assistance.

Emergency Code Coordinator (manager of unit or designate RN/RPN)

- Don the Emergency Vest so that all are aware that you are in charge.
- Direct staff on evacuation (REACT) of patients/visitors and staff to a safe area beyond a fire door.
- Ensure Switchboard has been notified.
- Ensure Charge nurse has responded to the fire panel.
- Assign a staff member to account for and stay with patients/visitors to ensure no patients/visitors re-enter affected area.
- Direct arriving staff to:
  • Assist with the evacuation of patients/visitors past at least one fire door.
  • Assist as needed in further room evacuation or at stairways and receiving area.
  • Delegate a person to meet the fire fighters at the main entrance. **Note:** if security is present at the ROP they will meet the fire fights and escort them to the are of the fire.
- Gather information to update arriving firefighters as to status of emergency situation on their arrival.
- Direct patients/visitors/staff to evacuate further if necessary.

Complete a CSIF report once “All Clear” is given. A copy of this report will be forwarded to the Safety & Emergency Management Systems Officer.

Charge Nurse

- Stay alert to potential fire hazards and take action to eliminate the hazards,
- Follow the guidelines provided for fire and life safety in the workplace,
- Will assume the role of Emergency Code Coordinator in the absence of the Director and Designates
- **Note:** the charge nurse should only assume the role of the emergency code coordinator if there are no designates available.
- Will work in collaboration with the emergency services Incident Commander until the “all clear” has been provided for the emergency,
- Will understand the operation and resetting of mag locks on doors and the elevators in the facility,
- Be able to summon assistance from the ROH when needed for an emergency response.
- Respond to the Fire Panel and Follow the instructions

Patient/Resident Care Staff

- Stay alert to potential fire hazards and take action to eliminate the hazards,
- Follow the guidelines provided for fire and life safety in the workplace,
- Complete training in fire prevention and emergency response as scheduled,
- Participate in emergency drills and exercises as scheduled,
- Ensure that there is an understanding of the 1st and 2nd Stage fire alarm signals and the actions to take within their work area when an alarm is activated.
- Respond to fire emergencies following the guidelines of REACT for initial actions,
- Respond to emergencies and follow directives provided by the Emergency Code Coordinator.

Patients/Residents

Patients and Residents at The ROP will follow the direction provided by the staff when there is an emergency condition or when a drill is being conducted.
Depending on the type and severity of the emergency situation or the complexity of the drill, residents may be directed to:

- Return to their rooms and remain there until further notice.
- Participate in horizontal evacuation measures by moving from one fire zone to another that is determined as an area of safety.
- Participate in a partial evacuation of the building, that is, one wing of the facility evacuating off a floor level or outside to an emergency assembly area.
- Participate in a full building evacuation to an emergency assembly area.
- Or, in the event of a disaster situation evacuate the building, be transported to an alternate care centre or be discharged temporarily to the care of a family member.
- During non-emergency times residents and patients will adhere to the fire and life safety measures implemented by the ROP Administration.

Food Services and Housekeeping Staff

- Conduct operations safely to limit the risk of fire.
- Stay alert to potential fire hazards and report them to the respective supervisor,
- Follow good housekeeping practices for fire prevention and life safety,
- Ensure an understanding of the 1st and 2nd Stage fire alarm signals and the actions to take within their work area when an alarm is activated.

- Complete all required training as scheduled.
- Participate in fire drills when conducted.
- If required, respond to fire emergencies and report to the Emergency Code Coordinator for direction.

THE EMERGENCY RESPONSE SYSTEM AND TEAM AT THE ROP CAMPUS

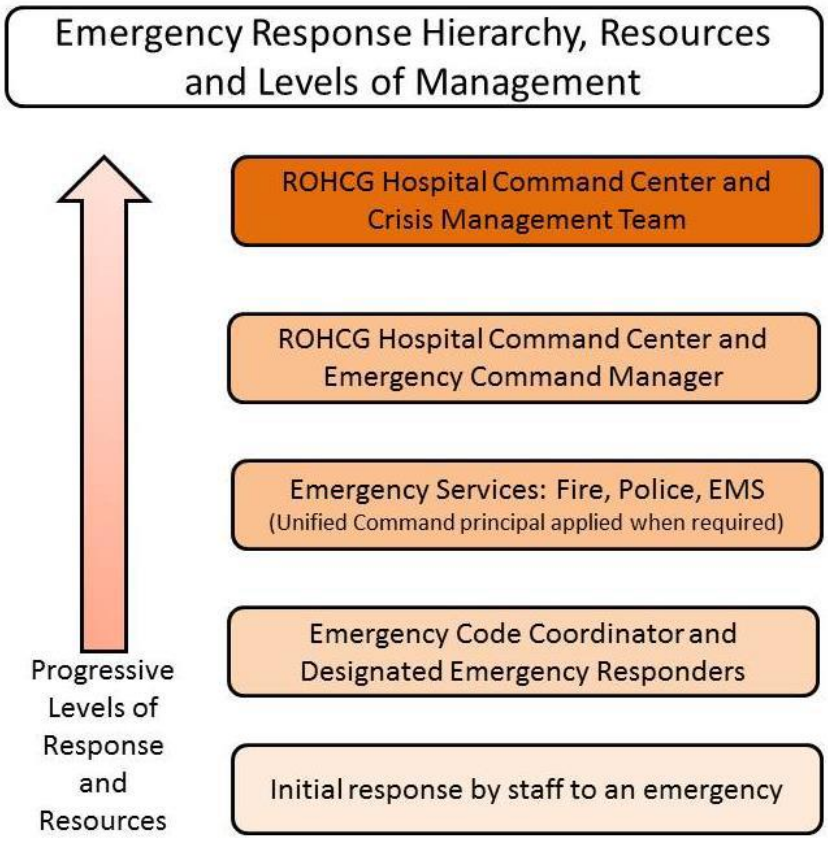
The Emergency Response Team (ERT) will be composed of ROP staff on duty during normal work hours and the After Hours Manager Patient Care Services (AFMPCS) and staff on duty during the off hours. Additional staff from the ROH may respond to assist as requested by the Emergency Code Coordinator. The fire safety plan and ERT team are an extension of the overall ROHCG Emergency Management Program. The positions within the system include:

- Staff on duty and initial response members
- The Emergency Code Coordinator
- RPN
- PSW
- Building Maintenance Operator when on duty
- Food services staff
- Housekeeping staff
- ROH staff when requested
- Hospital Command Centre Team when activated

ROP CAMPUS AND PROGRESSIVE RESPONSE STRATEGY

The diagram below highlights:

- The layers of resources/groups that may be involved in an emergency incident at the ROP Campus
- The structure within the principle of progressive response by resource groups
- The level of emergency management expectation for the groups/emergency response teams


Emergency Response Hierarchy, Resources and Levels of Management
ROHCG Hospital Command Center and Crisis Management Team
ROHCG Hospital Command Center and Emergency Command Manager
Emergency Services: Fire, Police, EMS
(Unified Command principal applied when required)
Emergency Code Coordinator and Designated Emergency Responders
Initial response by staff to an emergency
Progressive Levels of Response and Resources

GOOD HOUSEKEEPING AND FIRE SAFETY

Good Housekeeping practices by all staff and residents at all times will reduce the risk that a hazard will develop or produce a real emergency. Good housekeeping practices include:

GOOD HOUSEKEEPING AND FIRE SAFETY CHECKLIST	
	Do not store any materials or equipment in front of emergency exits. 
	Always keep mechanical and electrical rooms clear of an accumulation of combustible materials. Combustible materials have not built up in basements, storage rooms, service rooms or stairwells.
	All electrical appliances used by staff or residents must meet CSA Standards. Have all electrical appliances checked by Facility Services prior to use. All new appliances are to be purchased through the Supply Chain Management system. All funrnture and window coverings must meet flame spread and fire resistive standards as applicable to the facility and Royal policies.
	Do not wedge open any fire doors or disengage the self-closing device installed on the door. 
	Smoking inside the building is prohibited. Smoking should be closely monitored. Smoking by the residents must to be restricted to designated areas outside the building and off property.
	Never dispose of flammable liquids or aerosol cans in garbage cans within the general areas of the facility or resident's rooms.
	No open flame devices or decorations Are permitted in the facility e.g. candles or sparklers unless approved by the Director.
	Kitchen Safety: Avoid unsafe cooking practices such as stoves unattended when in use. Exercise caution around the cooking appliance when using tea towels or pot holders. Be aware of loosely fitting clothing such as bulky sweaters, or house coats with baggy sleeves. Do not store paper towels or other Class A combustible material close to stove top cooking elements.
	Lint traps in laundry equipment are to be cleaned after each use.
	Exits are to be kept free of snow and ice during winter. There is a minimum of three meters (about 10 feet) cleared of snow outside of exit. There is a cleared path so that everyone can move further away from the building.
	Exit doors are readily opened from the inside without the use of keys or other locking devices.
	Exit signs are easy to see. 
	Combustible materials are not stored next to water heaters and heating equipment.
	Propane cylinders are not stored inside the building.

	Portable fire extinguishers: fully charged, sealed, in proper location, not tampered with, inspection dates acceptable and are not obstructed. Extinguishers are located near exits and near operations that present potential fire hazards e.g. kitchens, photocopier areas
	Fire alarm manual pull stations accessible not blocked or obstructed. 
	Smoke and heat detectors are not removed not obstructed and all are fully functional.
	Automatic water sprinkler heads shall not be obstructed by coverings or storage that inhibits the designed water spray patterns.
	Safe storage, labeling and use of flammable or combustible liquids. Flammable liquids and combustibles kept a safe distance away for sources of ignitions.
	Any temporary construction projects happening within the space or the means of egress from the space not creating life safety hazards for evacuation. No obstruction of access to emergency exits, access to fire suppression equipment or safety equipment.
	Fire alarm and detection system is fully functional.
	First aid kits in place fully stocked and ready for use. Seal on kit in place

HEATING EQUIPMENT INCLUDING PORTABLE HEATERS	
	Keep all heat-producing appliances away from the wall and away from anything that might burn e.g. window coverings, clothing. Leave plenty of space for air to circulate around equipment that normally gives off heat. 
	All portable heaters shall be CSA approved. Portable electric heaters shall have tip-over protection that automatically shuts off the unit when it is tipped over. There shall be adequate clearance between the heater and combustible furnishings or other materials at all times. Facility Services will approve portable heaters used in the workplace.
	Portable heaters will not be plugged in to extension cords or power bars.

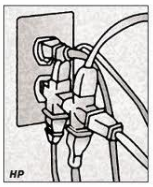
HOT WORK: CUTTING, WELDING AND OPEN FLAME WORK	
	Check with Facility Manager to ensure that all necessary approvals for hot work have been obtained prior to work beginning. A hot work permit is required for all hot work. 
	A hazards identification and risk assessment has been completed by the contractor prior to commencing work.
	Cutting and welding are done by authorized personnel in designated cutting and welding areas whenever possible.
	Adequate ventilation is provided and controlled.

	Cutters, welders, and helpers are wearing eye protection and protective clothing as appropriate.
	Cutting or welding is prohibited in areas where explosive atmospheres of gases, vapors, or dusts could develop from residues or accumulations in confined spaces.
	Cutting or welding is prohibited on metal walls, ceilings, or roofs built of combustible sandwich-type panel construction or having combustible covering.
	Confined spaces such as tanks are tested to ensure that the atmosphere is not over ten percent of the lower flammable limit before cutting or welding in or on the tank.
	Building tanks, piping, or containers that cannot be entered are cleaned, purged, and tested before cutting or welding on them begins.
	Fire Watch has been established where required and portable firefighting equipment is readily available near the project in the event of a fire emergency.

CLASS A HAZARDS: These include common combustible materials (wood, paper, cloth, rubber, and plastics) that can act as fuel and are found in non-specialized areas such as offices and storage rooms.	
	Dispose of waste daily.
	Keep the facility clean and free of fuel paths (e.g. accumulation of papers) that could allow a fire to spread.
	Keep combustibles away from accidental ignition sources, such as heaters, irons, or other heat- or spark-producing devices.
	Try not to order and store excessive amounts of combustibles on site.
	Store rags used for flammable or combustible products in metal bins with self-closing lids until properly disposed of.
	Develop a process for frequent inspections to anticipate hazards that could cause fires.

CLASS B HAZARDS: Includes flammable and combustible liquids (oils, greases, tars, oil-based paints, and lacquers), flammable gases, and flammable aerosols.	
	Handling the products: Use only approved pumps, taking suction from the top, to dispense liquids from tanks, drums, barrels, or similar containers (or use approved self-closing valves or faucets).
	Grounding: Do not dispense Class B flammable liquids into containers unless the nozzle and container are electrically interconnected by contact or by a bonding wire. Either the tank or container must be grounded.
	Store, handle, and use Class B combustibles only in approved locations where vapors are prevented from reaching ignition sources such as heating or electric equipment, open flames, or mechanical or electric sparks.
	Do not use a flammable liquid as a cleaning agent inside a building.

	Does not use, handle, or store Class B combustibles near exits, stairs, or any other areas normally used as exits.
	Do not permit or use, handle, or store Class B combustibles near exits, stairs, or any other areas normally used as exits.
	Do not generate heat, allow an open flame, or smoke near Class B products especially near open containers.
	Know the location of and how to use the nearest portable fire extinguisher rated for Class B fire.

CLASS C: ELECTRICAL HAZARDS Electrical fires are fires involving potentially energized electrical equipment.	
	All electrical outlets in rooms accessible to staff, patients and residents must have proper covers in place.
	Avoid overloading electrical circuits. 
	Electrical appliances should be unplugged when not in use (toaster, coffee maker, etc.).
	Be alert around electrical equipment. If electrical equipment is not working properly or if it gives off an unusual odour - often the first sign of a problem that could cause a fire - disconnect the equipment and call Facility Services. 
	When using extension cords, protect them from damage: do not put them across doorways, under carpets or rugs and any place where they will be stepped on or chafed. Check the amperage load specified by the manufacturer and do not exceed it. Do not plug one extension cord into another. **Do not use extension cords as permanent wiring.**
	Power bars shall not be plugged into power bars. Power bars are permitted for items that do not use high amperage of electricity such as computers, desk lamps, cell phone and blackberry chargers. Appliances shall not be plugged into power bars.
	Promptly replace any electrical cord that is cracked or has a broken connection. 
	Check electrical equipment to ensure that it is either properly grounded or double insulated. Check with Facility Services if unsure.
	Only electrical appliances that are CSA approved are permitted. Hot plates and toaster ovens are not permitted.

TREES AND DECORATIONS: REAL OR ARTIFICIAL TREES AND DECORATIONS	
	No live evergreen trees are permitted within the facility.
	ALL decorations **MUST** be of a fire resistant nature. Absorbent cotton, natural evergreen boughs and untreated crepe paper **must not be used**.
	All electrically energized decorations, other than battery operated must be equipped with a three (3) wire grounded plug or two (2) pronged polarized plug which are CSA and/or Ontario Hydro labeled, approved and tagged as such.
	All electrical decorations not having proper approval must be checked and inspected by Facility Manager or the FSP Coordinator.
	No electrical cords are allowed to be running through pinch points, i.e., doors, windows, etc.
	No electrical decorations are permitted in areas where oxygen or hazardous materials are used or stored.
	No decorations of any type shall obstruct; fire exits, corridors, firefighting equipment, or fire alarm devices.

FIRE EXTINGUISHMENT, CONTROL OR CONFINEMENT

HAND PORTABLE FIRE EXTINGUISHERS

Portable Fire Extinguishers

Different types of fires can occur based on the product burning or involved in the fire. Fires and the extinguishers used to combat them are classified according to the type of material that is burning.

The three most common classes of fire are A, B, C. There is a fourth class D, which is not as commonly found in the ROP environment. In kitchen and cooking areas there may be a fixed extinguishment system installed and one or more K type portable extinguishers. A wide variety of fire extinguishers exist and any extinguisher you use must be appropriate for the type and size of the fire being fought. It is important to select the appropriate extinguisher for the correct fire classification. Using the wrong type of extinguisher may make the fire worse and can be dangerous to its operator.

Types of Extinguishers		
A	Common Combustibles - Wood, paper, cloth, etc.	
B	Flammable liquids and gasses - gasoline, propane, solvents	
C	Live electrical equipment -computers, appliances, etc.	
D	Combustible metals - magnesium, lithium, titanium	
K	Cooking Media -cooking oils and fats	

Combination extinguishers are available for use on class A, B and C fires and on class B and C fires. These extinguishers are labeled ABC and BC respectively. ABC extinguishers are common in the hospital and OGB. They are normally red in color and may have a black flexible hose and nozzle. These extinguishers contain a pressurized dry chemical agent. When released, the agent works by inhibiting the chemical chain reaction of the fire and to some extent eliminating the oxygen.

HOW TO USE A HAND PORTABLE FIRE EXTINGUISHER:

If a minor fire conditions exists and appears controllable, notify staff verbally, activate the fire alarm system and call or have someone call 333. Locate a portable fire extinguisher and if trained and safe to do so proceed with extinguishment of the fire.

Stand back from the fire 2.0 – 3.0 meters and apply the PASS system:

- P – Pull the retaining pin at the top of the extinguisher
- A – Aim the extinguisher nozzle and stream of agent at the base of the fire
- S – Squeeze the handle completely on the extinguisher to discharge the extinguishing agent
- S – Sweep the extinguisher from side to side across the base of the fire. Sweep slightly beyond the fire area with each pass. Once the fire is out wait before leaving the area in case the fire re-ignites.

PULL the retaining pin at the top of the extinguisher

AIM the extinguisher nozzle and stream of agent at the base of the fire

SQUEEZE the handle

SWEEP from side to side across the base of the fire

Safety Guidelines When Using a Fire Extinguisher

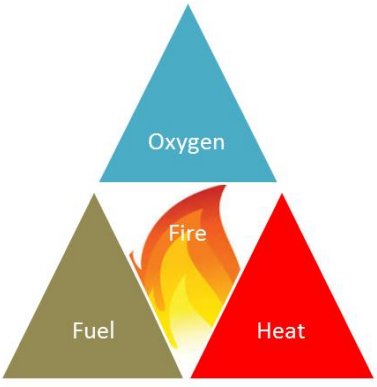
- Try not to breathe the smoke by products from the fire during extinguishment
- Maintain an exit route between you and the fire
- If you are uncomfortable with the situation for any reason, leave the area.
- After extinguishment, try not to disturb the scene of the fire if possible.
- Follow up with your supervisor and/or the Emergency Code Coordinator.

THE FIRE TRIANGLE

Fire Safety, at its most basic, is based upon the principle of keeping fuel sources and ignition sources separate.

Three things must be present at the same time to produce fire:

1. Enough OXYGEN to sustain combustion
2. Enough HEAT to reach ignition temperature
3. Some FUEL or combustible material



Combined they produce the CHEMICAL REACTION that is fire. Take away any of these things and the fire will be extinguished.

Guidelines for Installing Portable Fire Extinguishers:

☐ For an extinguisher weighing 18 kg or less mount at 1.5m (5 ft.) above the floor,

- ☐ Where they can be easily reached (i.e., they must not be blocked by machines or materials),
- ☐ In or near corridors or aisles leading to exits – however, they must not block aisles,
- ☐ Close to potential fire hazards, but not so close that they could be damaged or cut off by a fire,
- ☐ So that they are protected against the elements if stored outdoors,
- ☐ So that they are visible along with the operating instructions and identification markings,
- ☐ Where they will not be damaged by moving trucks or other work activities,
- ☐ For service rooms such as rooms containing electrical equipment locate a suitable extinguisher in or close to the room.

MAINTENANCE

Portable fire extinguishers must be properly maintained in accordance with the Ontario Fire Code and related NFPA 10 Standard. Adequate maintenance of extinguishers consists of regular inspections, recharging as needed, and a complete annual checkup and servicing. Records must be kept of all maintenance work carried out, including inspections.

ALTERNATIVE MEASURES

In the event of any shut-down of fire protection equipment systems or part thereof, in excess of 24 hours, the fire department shall be notified in writing. Occupants will be notified and instructions will be posted as to alternative provisions or actions to be taken in case of emergency. These provisions and actions must be acceptable to the Chief Fire Official.

All attempts to minimize the impact of malfunctioning equipment will be initiated. Where portions of a sprinkler or fire alarm system are placed out of service, service to remaining portions must be maintained, and where necessary, the use of watchmen, bull-horns, etc. will be employed to notify concerned parties of emergencies. Assistance and direction for specific situations will be sought from the Fire Department.

Procedures to be followed in the event of shutdown of any part of a fire protection system are as follows:

1. Notify the Fire Department. Dial (613) 613-580-2860 (DO NOT USE 911). Give your name, address and a description of the problem and when you expect it to be corrected.
2. Notify the Ministry of Health and Long Term Care

3. Post notices at all exits and the main entrance, stating the problem and when it is expected to be corrected.
4. Have staff or other reliable person(s) patrol the affected area(s) at least once every hour. Patrols shall be documented including person(s), date, time, areas patrolled and conditions found.
5. Notify the Fire Department and the building occupants when repairs have been completed and systems are operational.

FIRE ALARM AND DETECTION SYSTEM

When the **fire alarm and detection system** is compromised and cannot be repaired and returned to full operation, the following precautions should be implemented:	
	Notify Building Maintenance Operator (Facility Services) and the Director of the ROP or Designate,
	Notify the fire alarm system monitoring company,
	Notify the Fire Department,
	Ensure the staff on duty is informed.
Have a position on the premises such as a **FIRE WATCH** person who will make rounds of the facility on a scheduled basis, staying alert to potential hazards that could cause a fire or responding to a fire that is discovered. The fire watch person will:	
	Be trained on the operation of fire and life safety systems in the facility,
	Know how to report a fire,
	Know when and how to assist with the evacuation of people from the ROP,
	Be trained in the use of firefighting equipment e.g. portable fire extinguishers,
	Complete rounds as scheduled and retain a written report.

PORTABLE FIRE EXTINGUISHERS

	Where a service company removes a fire extinguisher from the building for an extended length of time, a fire extinguisher of the same type should be provided temporarily in its place.
	When extinguishers have been used, they should be serviced by qualified personnel or replaced.

	Extinguishers must be the correct type and suitable classification for the anticipated fire hazard and applied use of the extinguisher.
	Fire extinguishers must be suitably mounted and measures taken to ensure the access to the extinguisher is not obstructed.

DURING CONSTRUCTION AND RENOVATIONS

During alterations and repairs, ensure that the ROP and its occupants are not exposed to undue fire hazards created by contractor's equipment or supplies which are brought into the building. Frequent inspections of the affected area is suggested in order to check the following:	
	Exits are free of obstructions.
	Fire and life safety equipment are not obstructed by equipment and supplies.
	Tools, supplies and equipment used by contractors are secured when not in use and when required are monitored to ensure unauthorized access does not occur.
	Dangerous work areas are inaccessible to the building occupants.
	Contractors have obtained necessary building and operation permits.
	Flammable and combustible liquids are handled and stored safely.
	Heat producing equipment such as welding/cutting equipment and portable heaters are used safely.
	Where a problem is suspected the Director or Designate and if needed the Fire Department should be contacted in order to provide advice or perform an inspection.

GUIDELINES AFTER FIRE SAFETY EQUIPMENT HAS OPERATED

Fire Detection & Alarm System: **Guideline for a <u>false alarm</u>:**	
	Ensure the fire department is aware of the incident through a follow up call to Switchboard at 333. Switchboard will contact 911 or the Fire Department directly.
	DO NOT RESET the fire alarm system unless approval is provided by the Fire Department.
	When the fire department is satisfied that the alarm was false, and the "all clear" is provided, restore any activated manual pull stations (smoke and heat detection devices normally self-reset) and RESET the system at the panel.
	Reset maglocks and elevators
	COMPLETE an Incident Report and submit to the Director or Designate.
	Where a fire has occurred and damaged system wiring and/or detection devices, or you are unsure of the reset procedures, it is likely that a trouble light will be indicating on

	the system. In this case contact Building Maintenance Operator (Facility Services).
Portable Fire Extinguisher	
	When a portable fire extinguisher has been discharged it must be serviced by a qualified company.
	If the portable fire extinguisher is removed from its normal storage location for servicing, a temporary extinguisher will be in place until the serving has been completed.
	Any time a fire extinguisher is used or tested advise Building Maintenance Operator or FSP Coordinator.

EMERGENCY PROCEDURES FOR PATIENTS & VISITORS

GENERAL FIRE SAFETY GUIDELINES FOR BUILDING OCCUPANTS

- ✓ Know steps in the REACT protocol
- ✓ Know how to activate a fire alarm pull station
- ✓ Know the sound of the fire alarm signaling devices
- ✓ Know how to call for emergency services
- ✓ Know the correct address of the building
- ✓ Know your Emergency Code Coordinator
- ✓ Know at least two ways out of the building e.g. primary and alternate exits
- ✓ Know the location of the Area of Refuge or Emergency Assembly Area
- ✓ Know if there is a buddy system required in your work area to accommodate a disabled worker
- ✓ Report fire hazards observed in the workplace to your supervisor or Charge Nurse.

If you hear a fire alarm:

- Remain calm
- Prepare yourself in the event that evacuation measures will be implemented.
- Listen to the direction provided by the staff.

Why close the door in a fire situation?

- Cuts off the supply of oxygen to the fire
- Slows the fire's spread
- Protects your evacuation route
- Stops drafts from spreading the smoke

Patients at Royal Ottawa Place will follow the direction provided by the staff when there is an emergency condition e.g. evacuation or shelter in place or when a fire drill is being conducted. Depending on the type and severity of the emergency situation or the complexity of the drill, residents may be directed to:

- Return to their rooms and remain there until further notice e.g. shelter in place.
- Participate in a partial evacuation of the building, that is, one floor of the facility evacuating to another floor or outside to an emergency assembly area.
- Participate in a full building evacuation to an emergency assembly area.
- In the event of evacuation occupants may be relocated to a temporary emergency assembly area inside another building.
- Participate in fire drills and other emergency exercises as developed and conducted by Administration.
- During non-emergency times residents will adhere to the fire and life safety measures implemented by Administration.

Measures for Safety

- When you get an Area of Refuge or to a designated Emergency Assembly Area wait there for further instructions from the staff.
- Remain at the Area of Refuge or Emergency Assembly Are so that staff can account for your safety and report that to the Fire Department if needed.
- Do not re-enter the building unless told to do so by the staff.
- Do not leave the BMHC campus or go to another building unless told to do so by the staff.

SIGNAGE

Emergency procedures signage will be affixed to the wall in various locations throughout the building.

IN CASE OF FIRE

All staff should follow REACT guidelines:

R Remove people from the immediate danger. Do not use elevators.

E Enclose the fire area. Ensure the room door where the fire is located is closed. Leave the space. Do not lock doors. Leave lights on.

A Activate the fire alarm system.
Pull the fire alarm pull station.

C Call the Switchboard at 333 or advise someone to call the Switchboard advising of a fire emergency and the need for emergency response.

T Try to extinguish the fire if trained to do so and your safety is ensured. If not continue to evacuate and provide assistance to others if safe to do so.

Upon Hearing Fire Alarm:

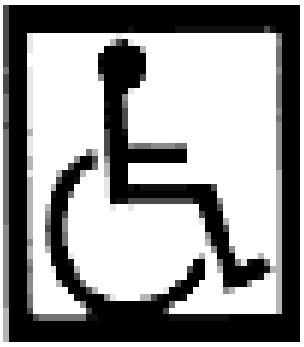
If Continuous Fire Alarm Signal (Stage 2 Alarm (Evacuation)):

- Take measures to prepare to leave or evacuate within the building.
- If directed to leave or if in danger from fire leave the building as quickly as possible using the nearest safe exit or if directed by staff.
- Listen to directions provided by the Emergency Code Coordinator and staff
- Close doors behind you, leave the lights on.
- Do not use elevator.
- Meet outside at the emergency assembly area.
- Ensure that the fire warden has accounted for you at the emergency assemble area.

CAUTION
When exiting if you encounter smoke or fire – use an alternate exit.

PERSONS WITH DISABILITIES

People with health problems, visual handicaps, or who walk with the aid of crutches or canes, may be unable to safely negotiate the means of egress from the 2nd or 3rd floors to a safe location. During an emergency, all members of the Campus have a moral responsibility to assist in the evacuation of persons with disabilities. Additional examples of disabilities include:



- Visual impairments (reduced vision or blindness)
- Hearing impairments (some degree of hearing loss or deafness)
- Mobility impairments (those who use walkers, crutches, motorized scooters,

- Wheelchairs, canes – may be short or long term)
- Other medical conditions that pose a functional limitation

All persons with disabilities, who are able to use the stairs with or without assistance, shall evacuate according to the emergency evacuation orders. Persons with disabilities who are unable to use the stairs should:

- Proceed to the nearest collection point (e.g. near elevator or safe exit).
- Use an emergency phone if available, landline or cell phone to report your location.
- Wait at that location or inside the stairwell for assistance from the Fire Department.

In addition to the above measures, to reduce the risk to people with disabilities the Campus follows the buddy system when required. The Plan Coordinator or a person assigned by the Coordinator acts as a "buddy" for the person. The "buddy" moves the person to a safe location on the floor to await help. This measure is reported to the Emergency Code Coordinator. The information I relayed to the Incident Commander from the Fire Department the Emergency Code Coordinator reports the location of the person with the disability. The Fire Department will then assume control and decide how best to respond and rescue as required.

NOTE: During a Code Red emergency elevators must not be used without the approval of the Emergency Code Coordinator.

PERSONS REQUIRING ASSISTANCE INFORMATION SHEET

Name of Patient/Resident	Room Number	Disability	Special information	Assistance Needed	Evacuation Route(s)

EVACUATION MEASURES – CODE GREEN

INTRODUCTION

Occupants in the facility may be required to evacuate the space when an emergency is declared by the Emergency Code Coordinator (ECC) or when the fire alarm system activates in the 2nd Stage (Evacuation Stage) and directed by the Emergency Code Coordinator. When directed by the ECC occupants will be expected to exit the space building via a safe exit. Persons with disabilities will proceed with their buddies/assistants (if available) to the nearest safe exit or safe area of refuge. The Emergency Code Coordinator will respond and assume command for the ROP until relived by the emergency services agency's Incident Commander.

The movement of occupants from the ROP may involve horizontal and vertical evacuation measures. Based on the information available and the magnitude of the emergency incident the Emergency Code Coordinator has several options for evacuation such as:

- Evacuate occupants to a primary Area of Refuge within the facility,
- Evacuate occupants to a primary Emergency Assembly Area outside the facility,
- Evacuate occupants to a secondary Emergency Assembly Area in the ROH campus.

In all cases it is important for occupants to assemble at the area of refuge or the emergency assembly area so that they can be **accounted for** by the Emergency Code Coordinator and response team.

GENERAL EVACUATION MEASURES FOR ROP OCCUPANTS

- If safe for you to do so, remove those in immediate danger.
- While exiting, walk and do not run.
- Shut all doors behind you.
- Do not use the elevator unless authorized by the ECC.
- Alert those who have difficulty hearing that an emergency evacuation of the building is underway.
- Proceed along corridors and through exits in a quiet and orderly manner.
    - Do not push or jostle.
- Assist persons requiring assistance to reach the nearest safe exit:
- Try to keep exits clear by permitting others to pass.
- It may be necessary to hold persons requiring assistance in or near the exit, and wait for fire department assistance.
- If you must use an escape route where there is smoke, stay as low as possible. Crawling lets you breathe the cleaner air near the floor as you move toward the exit.

The most valuable asset for the Campus during those first few minutes of a fire or other emergency is a well-trained and disciplined Emergency Response Team.

- Before you open a closed door, feel it with the back of your hand. If it is hot, leave it closed and use your alternate escape route. If it feels normal, brace your body against the door and open it a crack - be prepared to slam it shut if heat or smoke starts to rush in.
- If all exits are blocked by fire or smoke, enter a room preferably with an exterior window, and seal the cracks in the door with available materials to prevent smoke entering the room.
    - Phone 333 or 9-1-1 to report your situation, and attract the attention of someone outside the building by any possible means.
- When directed by the Emergency Code Coordinator or staff relocates to an area of refuge within the building. Try to remain in an orderly fashion with others as the accountably process takes place.

- When you have reached the outside of the building, relocate to the designated emergency assembly area away from the exit allowing others behind you to emerge.
- Do not enter the building again until the all clear has been provided by the Emergency Code Coordinator.

GUIDING PRINCPLES FOR SHELTER IN PLACE

The safety of patients, residents, staff and other building occupants becomes the priority for the ROP when an emergency causes an imminent dangerous situation or the building is damaged as a result of an emergency rendering it unsafe for occupants. Some principles associated with evacuation or sheltering measures will aid staff with making the best and most reasonable decisions during a time when the environment may be unstable and chaotic. Staff will make difficult decisions that may impact the normal care and work processes related to the residents. Optimal care for the residents may not be feasible during evacuation measures or during extended periods of shelter in place.

- Safety is a primary concern when making decisions and taking action.
- When difficult choices must be made staff will reflect on strategies that provide the greatest good for the greatest number.
- Well trained staff at all levels will support the tough decisions when timely communications with leadership positions are difficult or interrupted because of the emergency.
- Total evacuation of the building should be considered as a last resort when immediate emergency measures or contingency plans do not provide for a safe environment.
- Staff must be able to adapt to changing, dynamic situations associated with an emergency. Therefore flexibility and creativity are important elements to adjusting procedures and following guidelines.
- Relying on local emergency services such as EMS to be able to provide the resources to transport residents and staff is not promoted. A transportation plan and prior arrangements related to an alternate care center will facilitate decision making.

DECISIONS REGARDING SHELTER IN PLACE

The decision to *Shelter in Place* is a protective action strategy taken to maintain resident care within the facility and to limit the movement of residents, staff and visitors to protect people and property from a hazard.

In certain situations, such as a tornado or chemical incident creating a toxic cloud or atmosphere near the ROP, or a security concern in proximity to the facility, the authorized internal positions have may declare the implementation of sheltering measures. Or in some instances an external authority may order the facility to stay inside and shelter in place.

The facility needs to plan for sheltering in place. In some emergency situations the facility may be without telephone or other communications, electric power, or water and sewer service for several days. The ROP must plan to be able to exist (sustain) on its own for at least 72 hours without outside assistance. Planning needs to include provisions for: resident care (monitoring of medical conditions), facility safety and security, food, water, medications, contact with emergency services agencies (fire, police, EMS, etc.) and public health , alignment with the ROMHC, means of transportation as needed, staff and scheduling, internal lighting,

temperature control, waste disposal, and medical supplies.

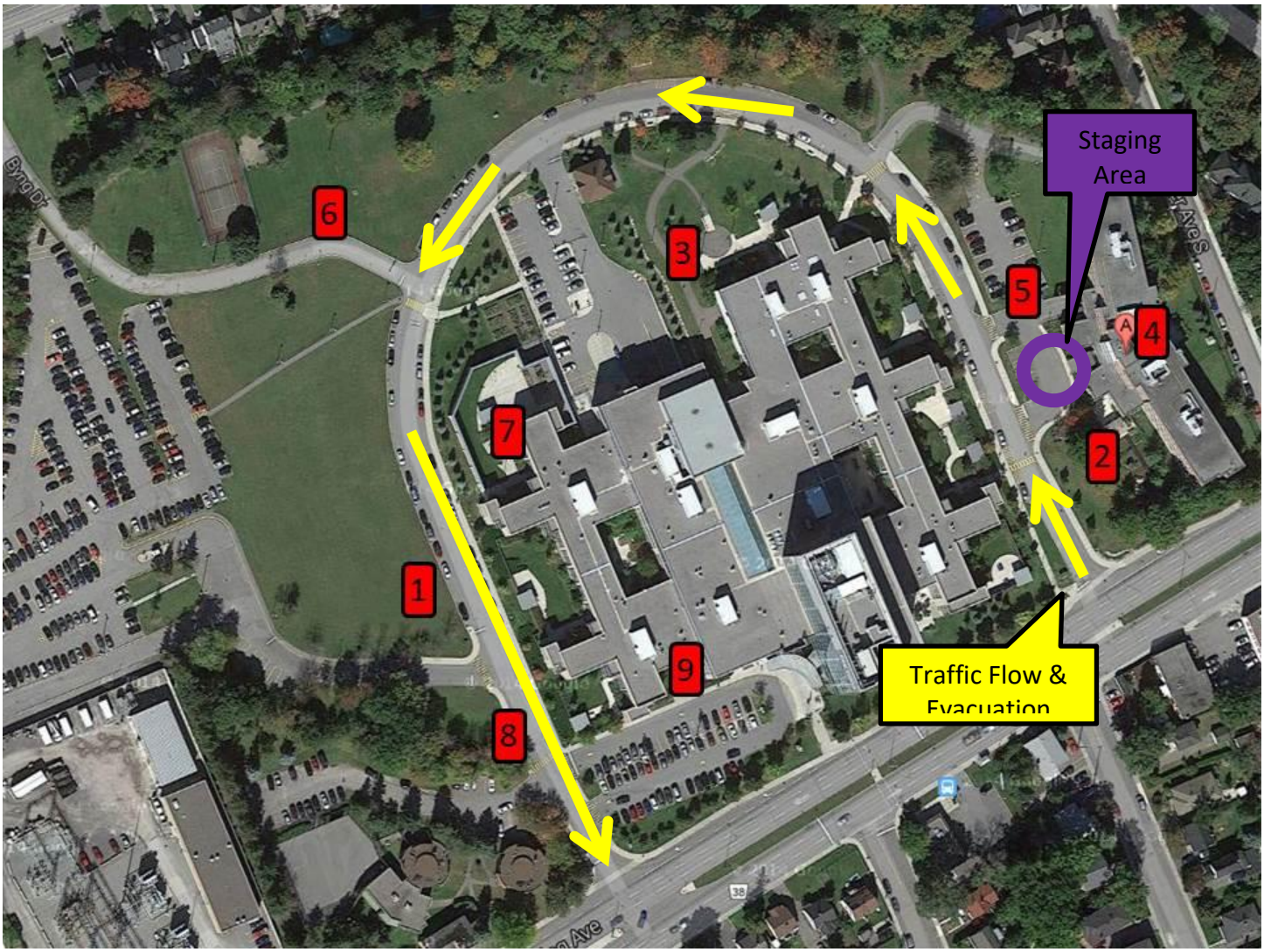
EVACUATION AND AREAS OF REFUGE AND EMERGENCY ASSEMBLY AREAS

AREAS OF REFUGE INSIDE THE FACILITY

Floor Level	**Primary Location**	**Secondary Location**
1st Floor	North Wing Dining and Lounge Rooms	South Wing Dining and Lounge Rooms
2nd Floor	North Wing Dining and Lounge Rooms	South Wing Dining and Lounge Rooms
3rd Floor	North Wing Dining and Lounge Rooms	South Wing Dining and Lounge Rooms
Basement	Stairwell	Elevator Lobby

PRIMARY EMERGENCY ASSEMBLY AREA OUTSIDE THE FACILITY and SECONDARY EMERGENCY ASSEMBLY AREA INSIDE THE ROH

EAA in Proximity to the ROP		
Relative Area of the ROP	Primary	Secondary
Emergency Assembly Area North	Parking Lot North End	Yard Area South
Emergency Assembly Area South	Yard Area South	Parking Lot North End
Emergency Assembly Area East	Courtyard Area Near Harmer Ave.	Parking Lot North End
Emergency Assembly Area Inside the ROH	The Gym 3rd Floor	OSI Clinic


Staging Area
6
3
5
4
7
2
1
9
8
Traffic Flow &

FIRE DRILLS

FIRE DRILLS AND THE ONTARIO FIRE CODE

2.8.2.1. (1) A fire safety plan shall include:

- The holding of fire drills including the emergency procedures appropriate to the **building**,
- Fire drills as described in Sentence 2.8.3.1.(1) shall be held monthly.
- Records of a fire drill required by this Article shall be kept for 12 months after the fire drill.

2.8.3.1. (1) The procedure for conducting fire drills described in Clause 2.8.2.1.(1)(e) shall be included in the fire safety plan, taking into consideration

- ☐ the building occupancy and its fire hazards,
- ☐ the safety features provided in the building,
- ☐ the desirable degree of participation of occupants other than supervisory staff,
- ☐ the number and degree of experience of participating supervisory staff, and
- ☐ The fire drill procedures required in Sentence (1) shall be prepared in consultation with the Chief Fire Official.

OVERVIEW

Fire Drills are a critical element in the overall preparedness of the ROP in response to a fire or other emergency. In addition to the emergency actions to be taken by staff, practising fire drills must become an integral part of a facility's preparedness.

Trained staff are invaluable in directing, and assisting the orderly movement of residents and other building occupants in the event of a fire, and if needed performing fire control until the fire department arrives. Staff require ongoing training to ensure the proper measures are taken in the event of a fire emergency and the conducting of regular fire drills support the overall readiness of staff.

PURPOSE

The purpose of a fire drill is to ensure that the staff and residents are familiar with the building's overall evacuation procedures. To maximize the benefits of these fire drills, they should be scheduled and rotated throughout the year in such a way that the personnel on all shifts employed in the facility participate.

The monthly drills will enable the staff and residents to hear the sound of the fire alarm signaling devices. Staff will be able to practice the response guidelines to an emergency condition. Staff will get accustomed to hearing the emergency messages and blending the content of the message with the response actions.

GUIDELINES FOR CONDUCTING A FIRE DRILL

The Fire Safety Officer will assume the role as drill coordinator. Typically the staff are not advised of the date and time for a drill but that option exists for the drill coordinator.

The checklist is provided as a guideline for conducting a fire drill:

Checklist	Guideline, Actions
	Determine the objectives for the drill.
	Select a scenario, time and location for the alarm condition.
	Notify the fire alarm monitoring company of the estimated time for the activation of the fire alarm system.
	Select the activation mechanism for the alarm: e.g. staff activating a fire alarm pull station, using an artificial smoke generating device.
	As needed, set up equipment in the location of the alarm emergency e.g. simulated fire set up.
	Initiate the emergency condition.
	Monitor the response of the staff
	Monitor any emergency announcement delivered by Switchboard.
	Ensure that all staff, patients and residents are not exposed to hazards during the fire drill.
	Formally declare the drill terminated and advise the staff.
	Ensure the fire alarm system is reset and fully functional.
	Notify the fire alarm monitoring company that the drill is completed and the fire alarm system is reset.
	Remove any equipment (props) that may have been used during the drill.
	Ensure that portable fire extinguishers brought to the emergency scene are returned to their storage location.
	Conduct a debrief with the staff that actively participated in the drill.
	Record the drill and the outcomes of the debrief.
	If there are changes that need to be made to the Fire Safety Plan and of an immediate nature notify the Director of Patient Care Services or Fire Safety

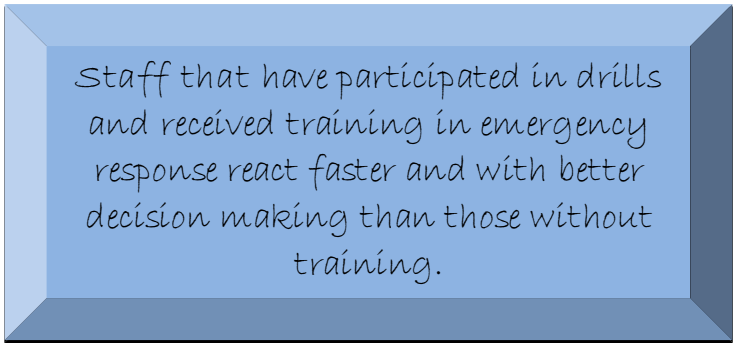
	Plan Coordinator.

STAFF, PATIENTS AND RESIDENTS

Although it may be of some inconvenience to residents, it is important to have a fire/evacuation drill that involves all of the facility's patients, residents and staff through the shift and location rotation. These scheduled fire/evacuation drills should be held at least monthly and designed so that they provide additional experience for the staff. The monthly fire drills can also be used to provide additional training for staff by allowing them to become more familiar with use of the building's fire and life safety systems.

DEBRIEFING

At the end of each drill the drill coordinator and the staff involved will participate in a debrief. It is very important that all personnel with specific responsibilities attend a debriefing meeting following every practice fire drill. This meeting will be held to review the procedures and reactions of all participants. During the debriefing, problem areas can be identified and, if necessary, solutions to overcome any deficiencies in the facility's Fire Safety Plan can be discussed and corrected.



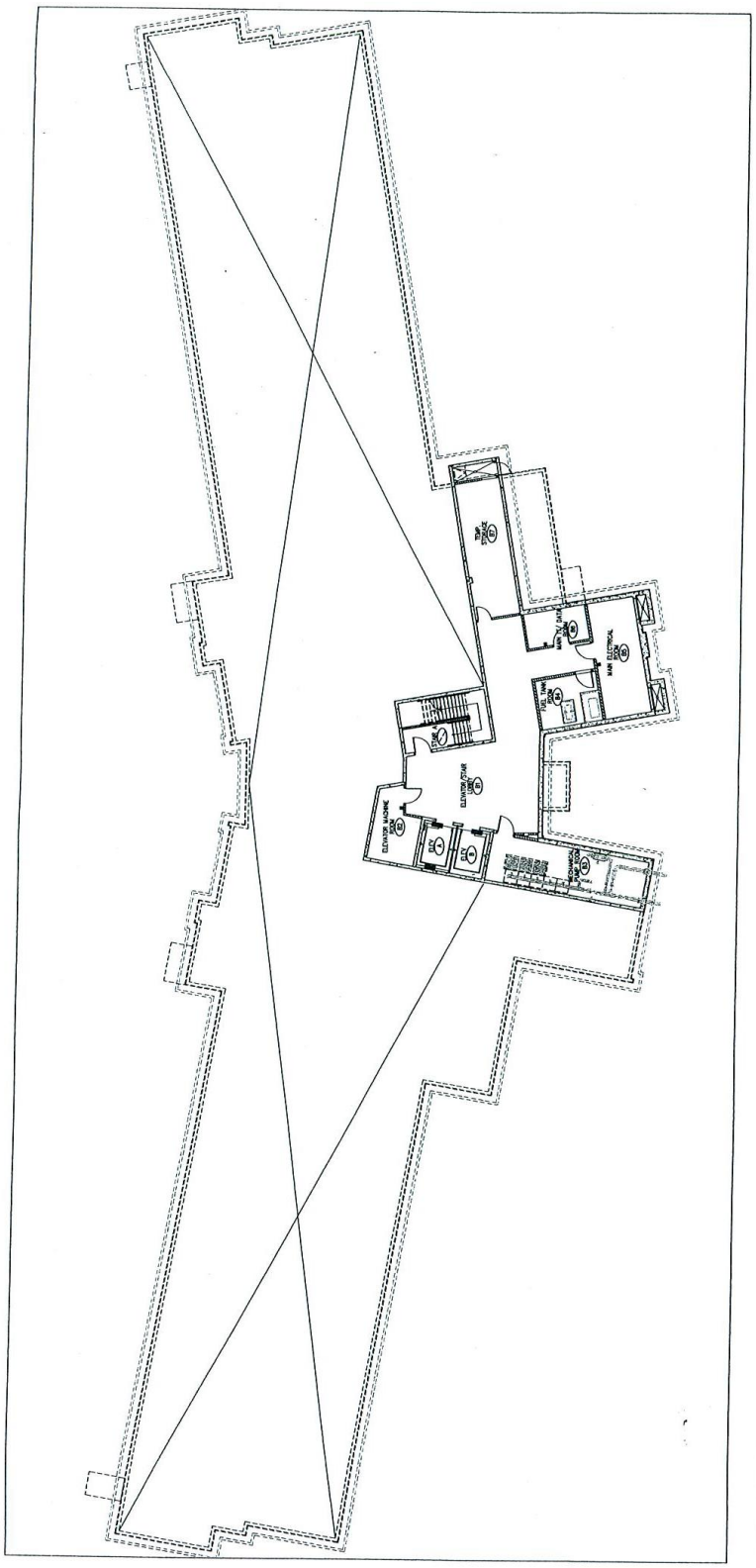
TRAINING

The Director of Patient Care Services will ensure that all new employees receive training in the fire prevention guidelines and practices as described in this section. The training will be documented and retained. Subjects to be included in the fire prevention training include:

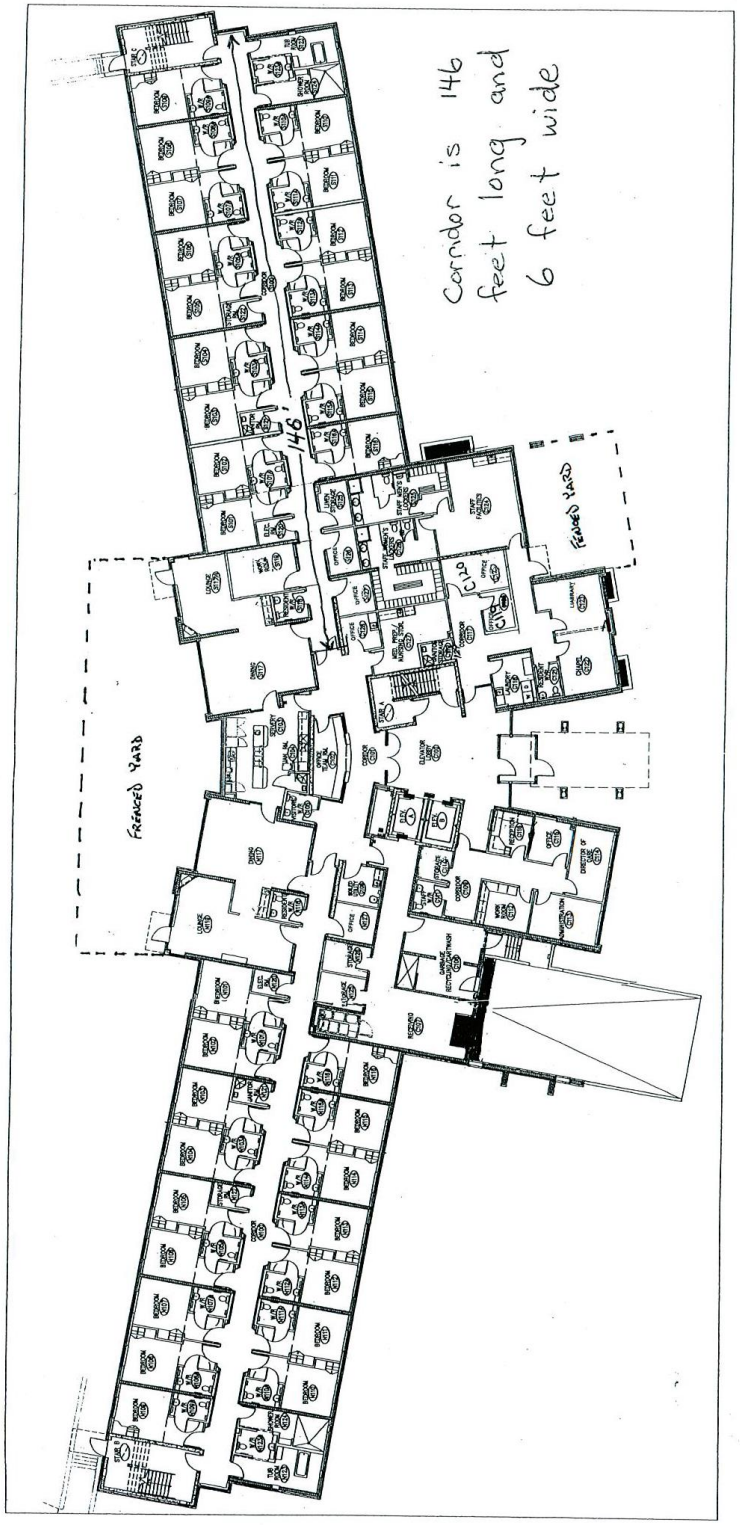
- Identifying and controlling fire and life safety hazards:
- Good housekeeping and fire safety
- Fire prevention and electrical hazards
- Heating equipment including portable heaters
- Hot work: cutting, welding and open flame work
- Office hazards
- Handling combustible and flammable materials in the facility
- Precautions during repairs, alterations & renovations (fire alarm and detection system)
- Portable fire extinguishers and precautions
- Fire prevention during construction and renovations
- Guidelines after fire safety equipment has operated
- Cooking equipment and fire safety
- Trees and decorations: real or artificial and decorations
- Fire safety instructions to residents

FLOOR PLANS

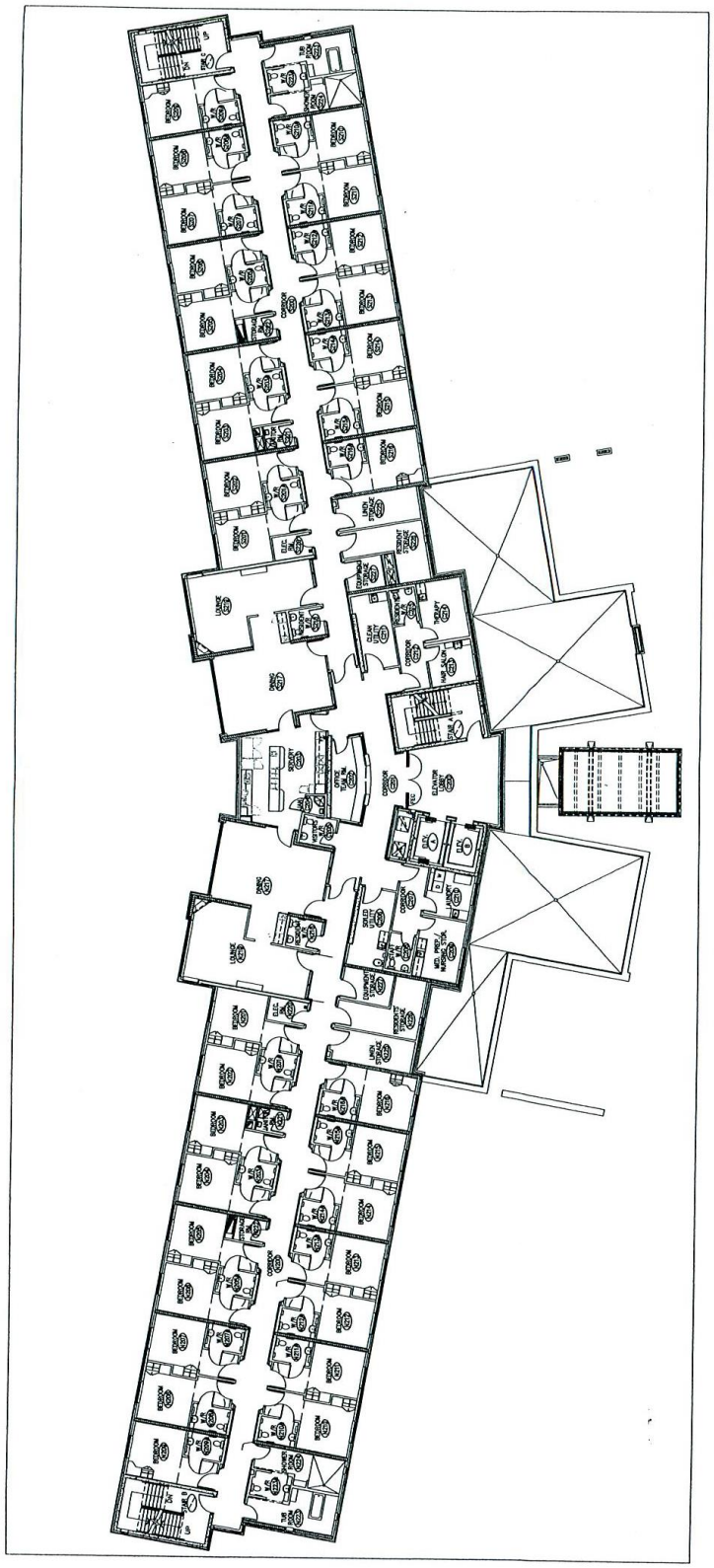
Appendix A - Floor Plans



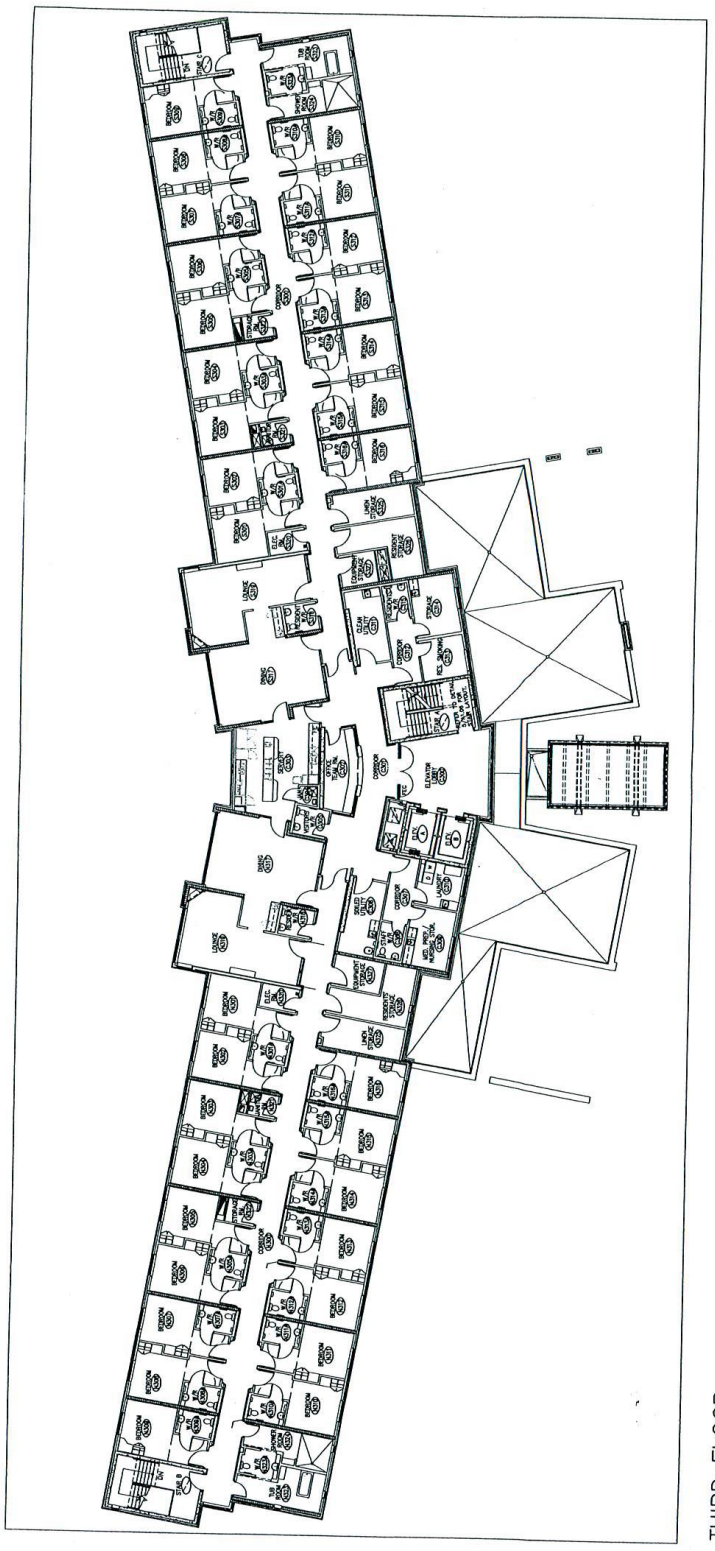
BASEMENT



GROUND FLOOR



SECOND FLOOR



THIRD FLOOR

FIRE PROTECTION SYSTEMS - MAINTENANCE COORDINATION

Facility Services (FS); ROP Staff; Contractor

General	**Responsibility**
Doors in fire separations shall be **checked** as frequently as necessary to ensure that they remain closed.	ROP Staff and FS
Exit signs shall be clearly visible and maintained in a clean and legible condition.	ROP Staff and FS
Internally illuminated exit signs shall be kept clearly illuminated at all times, when the building is occupied.	ROP Staff and FS

Weekly

When subject to accumulation of combustible deposits, hoods, filters and ducts shall be **checked** weekly and be cleaned when such deposits create an undue fire hazard.	ROP Staff

Monthly

Doors in fire separations shall be **inspected** monthly for proper operation.	Contractor

Yearly

Fire dampers and fire-stop flaps shall be **inspected** annually, or based on a schedule via contractor acceptable to the Chief Fire Official.	Contractor
Every chimney, flue and flue pipe shall be **inspected** annually and cleaned as often as necessary to keep them free from accumulations of combustible deposits.	FS
Disconnect switches for mechanical air-conditioning and ventilating systems shall be **inspected** annually to establish that the system can be shut down.	FS
Spark arresters shall be cleaned annually or more frequently where accumulations of debris will adversely affect operations. Burnt-out	

arresters shall be repaired or replaced.	FS

PORTABLE FIRE EXTINGUISHERS

General	**Responsibility**
Each portable extinguisher shall have a tag securely attached to it showing the maintenance or recharge date, the servicing agency and the signature of the person who performed the service.	FS
A permanent record containing the maintenance date, the examiner's name and a description of any work or hydrostatic **testing** carried out shall be prepared and maintained for each portable extinguisher.	FS
All extinguishers shall be recharged after use or as indicated by an inspection or when performing maintenance. When recharging is performed, the recommendations of the manufacturer shall be followed.	FS

Monthly	
Portable extinguishers shall be **inspected** monthly for: gauge reading, location and mounted, tagged.	Contractor

Yearly	
Extinguishers shall be subject to maintenance not more than one year apart or when specifically indicated by an inspection from a qualified Fire Extinguisher Service Company.	Contractor
5 Years Every five years, pressurized water and carbon dioxide fire extinguishers shall be hydrostatically **tested**.	Contractor
6 Years Every six years, stored pressure extinguishers that require a 12 year hydrostatic **test** shall be emptied and subjected to the applicable maintenance procedures.	Contractor

FIRE ALARM SYSTEMS

General	**Responsibility**
Fire alarm system components shall be kept unobstructed.	ROP Staff and FS
Fire alarm system power supply disconnect switches shall be locked on in an approved manner.	FS

Daily

The following daily checks shall be conducted and if a fault is established, appropriate corrective action shall be taken.	
a) **Check** the principle and remote trouble lights for trouble indication;	ROP Staff
b) **Inspection** of the AC power-on light shall be done to ensure its normal operation.	ROP Staff

Monthly

Every month the following **tests** shall be conducted under battery back up power and if a fault is established, appropriate corrective action shall be taken:	
a) one manual fire alarm initiating device shall be operated, on a rotating basis, and shall initiate an alarm condition	Contractor
b) function of all signal devices shall be ensured	Contractor
c) the annunciator panel shall be checked to ensure correct annunciation	Contractor
d) intended function of the audible and visual trouble signals shall be ensured	Contractor
e) fire alarm batteries shall be checked to ensure that:	
i) terminals are clean and lubricated where necessary;	Contractor
ii) terminal clamps are clean and tight;	
iii) electrolyte level and specific gravity, where applicable, meet manufacturer's specifications	Contractor

Monthly (continued) **Responsibility**

Voice paging capability to one zone shall be **tested** monthly on a rotational basis.	FS
One emergency telephone shall be **tested** monthly on a rotational basis for operation and correct indication at control unit.	FS
Loudspeakers shall be **tested** monthly as an all-call signal to ensure they function as intended.	FS
At least one fire-fighter's emergency telephone shall be **tested** monthly on a rotational basis to ensure communication with the control unit. All telephones shall be **tested** each year.	FS

Yearly

Yearly **tests** conducted by a certified alarm contractor as required by Fire Code. **Tests** shall be in conformance with CAN/ULC S536, "Inspection and Testing of Fire Alarm Systems".	Contractor

SPRINKLER SYSTEMS (WET)

General **Responsibility**

Auxiliary drains shall be **inspected** as required to prevent freezing.	FS

Weekly

Except for electrically supervised valves, all valves controlling water supplies to sprinklers and alarm connections shall be **checked** weekly to ensure that they are sealed or locked in the open position.	FS
Water supply pressure and system air or water pressure shall be **checked** weekly by using gauges to ensure that the system is maintained at the required operating pressure.	FS

Monthly

On all sprinkler systems, an alarm **test**, using the alarm test connection located at the sprinkler valve, shall be performed monthly.	Contractor

Quarterly

All transmitters and water flow devices shall be **tested** at quarterly intervals.	Contractor
Fire Department connections	Contractor

Six Months

Gate-valve supervisory switches and other sprinkler system supervisory devices shall be **tested** at six month intervals.	Contractor

Yearly	**Responsibility**
Exposed sprinkler piping hangers shall be **checked** yearly to ensure that they are kept in good repair.	Contractor
Sprinkler heads shall be **checked** at least once per year to ensure that they are kept in good repair.	Contractor
Sprinkler heads shall be **checked** at least once per year to ensure that they are free from damage, corrosion, grease, dust, paint, or whitewash. They shall be replaced where necessary as a result of such conditions.	Contractor
On wet sprinkler systems, water-flow alarm **test** using the most hydraulically remote test connection, shall be performed annually.	Contractor
Sprinkler system water pressure shall be **tested** annually or after any sprinkler system control valve has been operated, with the main drain valve fully open, to ensure that there are no obstructions or deterioration of the main water supply.	Contractor
Plugs or caps on Fire Department connections shall be removed annually and the threads inspected of wear, rust or obstruction. Re-secure plugs or caps, wrench tight. If plugs or caps are missing, examine the Fire Department connection for obstructions, back flush if necessary and replace plugs or caps.	Contractor
A copy of the annual inspections report shall be sent to the Fire Prevention and Life Safety Division within thirty (30) days of the inspection.	Contractor
A copy of the annual inspection report shall be sent to the Fire Prevention and Life Safety Division within thirty (30) days of inspection.	Contractor & FS

WATER SUPPLIES FOR FIREFIGHTING (FIRE PUMPS)

Daily	**Responsibility**
The temperature of pump rooms shall be **checked** daily during freezing weather.	FS

Yearly

Fire pumps shall be **tested** annually at full rated capacity to ensure that they are capable of delivering the rated flow.	Contractor

EMERGENCY LIGHTING SYSTEM

Daily	**Responsibility**
Check pilot lights for indication of proper operation.	FS

Monthly

Batteries shall be **inspected** monthly and maintained as per manufacturer's specifications.	FS
Ensure that battery surface is clean and dry.	FS
Ensure that terminal connections are clean, free of corrosion and lubricated.	FS
Ensure that the terminal clamps are clean and tight as per manufacturer's specifications.	FS
Emergency lighting equipment shall be **tested** monthly to ensure that the emergency lighting will function upon failure of the primary power supply.	FS

Yearly

Emergency lighting equipment shall be **tested** annually to ensure that the units will provide emergency lighting for a duration equal to the design criteria under simulated power failure conditions.	FS

After completion, the charging conditions for voltage and current and the recovery period will be **tested** annually to ensure that he charging system is in accordance with the manufacturer's specifications.	FS
A copy of the annual inspection report shall be sent to the Fire Prevention and Life Safety Division with in thirty (30) days of the inspection.	FS

EMERGENCY NOTIFICATIONS AND CONTACTS

ROHCG

Name	Primary Contact #	Alternate Contact #
Switchboard	333 for emergencies	613-722-6521 ext. 0
Security	613-722-6521 ext. 5752	613-722-6521 ask for security
After Hours Manager Patient Care Services	Ext. 6951 613-722-6521 ext. 6661 (Office)	613-722-6521 ext.0
ROP Charge Nurse	613-266-4184 (Cell)	613-722-6521 ext. 6107
Fire Safety Officer	613-722-6521 ext. 6645	613-899-4581
Safety and Emergency Services Officer	613-722-6521 ext. 6420	613-316-3239

EXTERNAL CONTACTS

Agency	Emergency Contact Number	Alternate (non-emergency number)
Fire Department (Ottawa Fire Services)	911	613-580-2860
Police Services	911	613-230-6211
Emergency Medical Services (EMS)	911	613-580-4771
City of Ottawa Office of Emergency Management	311	613 580-2400
HEPCO Duty Officer	613-783-1692	n/a
Fire Alarm Monitoring Company (Tyco)	1-800-289-2647	n/a
Ministry of Health and Long Term Care	1-888-593-8261	613-569-5602
Ministry of Labour		1-877-202-0008
Hydro One	1-800-434-1235	n/a
Natural Gas Company - Enbridge	1-866-763-5427	n/a

Elevator Service Company - Schindler Elevator Company	1-800-225-3123 Bldg ID # T339818-01	n/a
OC Transpo Bus Lines	613-842-3600	613-741-4390
Fire Systems Equipment Service Company – Simplex Grinnel	613-526-0435	n/a
Environmental Service Company (Hazmat)	613-0838-9300	911
Electrical Contractor – Ellis Don	6522	n/a
Alternate Care Centre Ottawa - OSI Clinic (ROMHC) – Gym 3rd Floor	6270	Security - 5752
Linen Supplies HLS Linen Services 45 Gurdwara Drive Ottawa, ON K2E 7X6	Direct: 613 842-3061 Cell: 613 913-8798	Main: 613 842-3000 Fax: 613 842-3059
Food Services	613-868-0937	613-298-3273
Health Care Supplies (Walkers, Wheelchairs, Canes) Shoppers Home Health Centre	613-725-0608	n/a
Community Care Access Centre (CCAC)	613 745-5525	n/a

HOSPITALS

Ottawa Hospital (General Campus)		613-722-7000
Montfort Hospital		613-746-4621
Queensway-Carleton Hospital		613-721-2000
Riverside Hospital		613-738-7100
St-Vincent Hospital		613-233-4041
Ottawa Hospital (Civic Campus)		613-798-5555
Perley & Rideau Veterans Centre		613-526-7170
C.H.E.O Hospital		613-737-7600
Brockville Psychiatric Hospital		613-345-1461

BUILDING AND RESOURCE INFORMATION

GENERAL CONSTRUCTION, OCCUPANCY TYPE, SYSTEMS AND EQUIPMENT

The building is classified as a non-combustible structure with respect to the building code. The ROP is a 96 bed, 3- storey above grade complex. Construction is concrete floors with interior room partitions of gypsum on steel studs. The roof is typical flat composite construction. Mechanical room, emergency generator and make up air units are located on roof level.
The ROP is a stand-alone building within which there are 6 units providing housing for 16 patients or residents per unit. The ROP includes fire and life safety systems and components such as:

- ☐ Fire compartments and rated fire separation assemblies designed to contain the spread of fire and the by-products and increase life safety. These features are located on the 3 occupied floors.
- ☐ An automatic water sprinkler system.
- ☐ A two stage fire alarm and detection system.
- ☐ Emergency power and lighting.
- ☐ Rated means of egress and exit lighting.
- ☐ Portable fire extinguishers installed on all floors.

Occupancy Classification:	B – 2 Care Occupancy. The facility includes a Long Term Care occupancy (2nd and 3rd floors) and a Recovery Program (1st floor.)
Year of Construction:	2004
Owner:	Royal Ottawa Health Care Group
Building Height:	3 - storey high facility complete with a partial basement level.
Building Size	The building is approximately 4,000 m^2 (15,000 ft^2).
Storey(s) Below Grade:	Partial basement in central core area of the building
Building Type	Non-combustible construction.
Exterior Construction	Brick veneer
Roof Construction	Conventional built-up roof.

Interior Finishing	Gypsum wall board on top of metal studding. Drop down ceiling in common corridors. Open ceiling in mechanical and electrical service rooms. The windows are double glazed units with both fixed and operable portions. The doors to the facility consist of an insulated overhead door in the loading area, and a mixture of steel and extruded metal units with glass glazing units for occupants, visitors and staff.	
Operations	24 hour operation providing care services.	
Occupant Load: Patients/Residents Staff	Patients/Residents:	96
	Staff (days):	*Totals*
	Recovery	14-18 + 2.5 admin
	Long Term Care	18-22 +2.5 admin
	Staff (evenings):	
	Recovery	6-8
	Long Term Care	9-11
	Staff (nights):	
	Recovery	3
	Long Term Care	5
Areas of Use (see floors plans in Appendix A)	<u>Main Entrance/Lobby</u>, Reception, Administration and Offices, Conference Room, Chapel and Staff Lounge. Loading dock, food storage and housekeeping storage rooms. Basement access stairs.	
	<u>1st floor Patient Care:</u> Nurse Care Station, Med Room, Staff Offices, Dining Room x 2, Patient Rooms x 2 Units, Tub Rooms, Staff Meeting Room, Servery. North and South Stairways.	
	<u>2nd floor Resident Care:</u> Nurse Care Station, Dining Room x 2, Patient Rooms x 2 Units, Tub Rooms, Staff Meeting Room, Servery, Laundry room, storage room and housekeeping storage room. North and South Stairways.	

	3rd floor Resident Care: Nurse Care Station, Dining Room x 2, Patient Rooms x 2 Units, Tub Rooms, Staff Meeting Room, Servery, Laundry room, storage room and housekeeping storage room. North and South Stairways.
	Basement: Fuel storage room (200 l for generator); Elevator equipment room; Communication/Duress System server room; Main fire alarm control panel/Electrical room; Sprinkler control valve room & maintenance room. General storage room.
Roof and Interior Roof Access	Roof top mechanical room: Boiler, Hot water tank, Roof top air make up units, Emergency generator. Access to the roof is: Through central stairway from main floor and trap doors on 3rd floor in north and south staircases.

Heating, Ventilating and Air Conditioning	
Heating	Natural gas fed boiler and distribution system.
Cooling and Ventilation	Cooling within the facility is provided by the HVAC system. Roof top Engineered Air Unit Fresh air is introduced into the facility by the roof top AHUs. The HVAC system is inter-connected with the fire alarm system. Negative pressure principle related to the building envelop.
	Activation of the fire alarm system automatically shuts down the HVAC system ventilation fans. The system will automatically restart when the fire alarm system is reset.

Fire Protection and Life Safety Systems	
Fire Alarm and Detection System	Yes. 2 - Stage System Supervised and Monitored. (ADT monitoring service)

	Components: ☐ Smoke detectors, heat detectors, duct detectors, sprinkler heads as detectors and fire alarm pull station devices provided. ☐ Fire alarm signaling devices recessed mounted. ☐ Steady single tone for 1st stage, temporal tone for 2nd stage. Interconnections: ☐ Ventilation fan shut-down ☐ Electromagnetic door devices fail open – doors close. Main fire alarm system panel in main electrical room basement level. **Remote annunciators:** ☐ Located in main entrance to right of second set of double doors. ☐ Care Stations ☐ Battery back-up power. ☐ Emergency generator power supply. ☐ Battery back-up within fire alarm system. ☐ No interconnected voice communications system.
Fire Doors   Integrated with Fire Alarm System.	Yes Rated door assemblies in common corridors separating fire zones and forming fire compartments. Rated doors on Resident rooms, Storage, Mechanical and Electrical rooms. Fire compartment doors are provided with electromagnetic devices that are inter-connected with the fire alarm and detection system. Doors have self closing devices installed. Activation of the alarm system releases the magnetically held doors causing them to close to prevent the spread of fire and by-products of combustion. <u>Secure Doors</u> 1st Stage – Secure door in local area/zone of alarm only will unlock. 2nd Stage all secured doors will unlock.

Means of Egress and Exits.  Integrated: secure doors and fire alarm system.	Exits and the means of egress are strategically designed throughout the structure. Means of egress (corridors) are designed to meet the code requirements for travel distance and width. Exit doors are marked with exit signs that are illuminated and on emergency power supply in the event of a power failure. Exit doors are located: ☐ At the end of corridors in the resident/patient room areas, ☐ From stairways, ☐ From the lounge on first floor north and family room on first floor south, ☐ From common corridor in main entrance area. Exit door assemblies include panic type push -to - open operating mechanism and swing open in the direction of travel to the exterior. Activation of the fire alarm system (1st Stage) drops the magnets on the secure doors having them fail in the unlocked position.

Emergency Power	Yes Emergency generator provided and located on roof top. Diesel fueled generator with a 906_litre storage tank on site. Estimated 3 day power supply before filling of storage tank is required. Emergency power supplied to selected lighting and power outlets throughout the facility are red in color. Fire alarm panel, exit lights and other life safety equipment are provided with emergency power.
Emergency Lighting and Electrical Outlets on Emergency Power	The facility has been provided with selected lighting fixtures throughout the building that will be supplied with emergency power. Selected electrical outlets (receptacles) will be provided with emergency power. Each resident room has 0 electrical outlets on the emergency power system.
Portable Fire Extinguishers	Hand portable fire extinguishers have been provided throughout the building. Portable fire extinguishers have been installed and mounted

<table>
<tr><td>  </td><td colspan="2">in areas that have been identified as having hazards that could lead to the development of a fire emergency e.g. kitchen, mechanical room, electrical room. Access to extinguishers in resident/patient areas extinguishers require a key to open the cabinet. All care staff have been provided with the key for the cabinet and for the fire alarm pull stations.</td></tr>
<tr><td>Water for Firefighting</td><td colspan="2">A fire hydrant is located in the front (southwest) entrance area to the facility and on the northwest corner in front of building across the ring road. Fire water is supplied through the municipal water supply system.
The hydrant(s) have/ has 1 – 100 mm outlet and 2 X 65 mm outlet ports.</td></tr>
<tr><td rowspan="8">Emergency Shut-off Devices and Location</td><td>Natural Gas:</td><td>Main shut off valve located at front exterior of building north side of loading dock. Each gas operated unit/ equipment has its own shut off valve at source.</td></tr>
<tr><td>Electrical:</td><td>Main electrical room basement B-5</td></tr>
<tr><td>Water:</td><td>Sprinkler room basement B-3</td></tr>
<tr><td>Elevators</td><td>Elevator machine room basement B-2</td></tr>
<tr><td>Roof top Units:</td><td>Each unit at source or in roof top penthouse</td></tr>
<tr><td>Automatic Sprinkler System</td><td>Sprinkler room basement B-3</td></tr>
<tr><td>Kitchen Equipment</td><td>In servery or main electrical room basement B-5</td></tr>
<tr><td>Diesel Fuel:</td><td>Fuel storage basement B-4 & Day Tank on roof top.</td></tr>
<tr><td>Fire Department Connection</td><td colspan="2">Yes 2 – 65mm Standpipe and Hose System connections.
Located: Main entrance exterior on north side of entrance.</td></tr>
</table>

Fire Department Access	Carling Ave. at Anna Ave., via Harmer Ave. or via ROMHC ring road.
Automatic Water Sprinkler System	Yes Main Control Valve Located: Basement room B-3
Sprinkler System Pressure Regulating Pump	Basement room B-3
Public Address System	Yes. Through the telephone system. Not inter-connected with the fire alarm system. Heard throughout the common areas of the facility. During emergency conditions the public address system is used to provide information to staff regarding the type of emergency, the location and when required the actions to be implemented. Switchboard at the ROH will deliver public address announcements in the ROP.

ELEVATORS

All elevators home/return to the 1st floor when the fire alarm system is activated.

Identification of Elevator	**Location**	**Emergency Power**	**Firefighter Service**
Number 1	1st Floor	Yes	Yes
Number 2	1st Floor	Yes	Yes

Elevator re-setting procedure:

1. Turn key counter clockwise to furthest position
2. Turn key clockwise back to 12 o'clock position

FIRE DEPARTMENT KEY BOX

Location: North wall of front entrance vestibule

Key #	Access to or Operation of
1	A – master key
2	Laminated card with front door code access
3	Elevator key
4	Fire alarm panel key

HAZARDOUS MATERIALS AND STORAGE

Name of Material	Location	Amount
Diesel Fuel	1.Fuel storage basement room B-4 2.Underneath diesel on rooftop	1. 906 litre storage tank (2013) 2. 738.16 litre tank
Gasoline	n/a	n/a
Oxygen (Compressed gas cylinders)	1st floor medication room (C-127) 2nd floor clean utility room room(C-211) **Clients:** Michael M. room S206, Ken B. room N316.	2 – Recovery 1 - LTC
Propane (BBQ)	East courtyard rear of property in locked cage	2 – 25 lb tanks
Oil	n/a	n/a

FIRE PROTECTION SYSTEMS AND EQUIPMENT MAINTENANCE

The Ontario Fire Code sets out specific requirements for checking, inspecting and testing of fire safety and protection equipment in existing buildings. The tables in this section of the Fire Safety Plan include a list of Ontario Fire Code required checks, inspections and/or tests to be made of fire protection and life safety systems and equipment.
The Fire Code also contains specific requirements for the keeping of records of routine maintenance. Log books/records must be kept and may be created by the owner/operator in a format that is functional. The Ontario Fire Code requires that records of all tests and corrective measures be retained for a period of two years after they are made. During routine inspections the local Fire Authority (Ottawa Fire Department) may request records to ensure that the necessary checks, inspections and/or tests are being done and records are in order.

IN GENERAL

The Ontario Fire Code Regulations require that fire protection installations be maintained in operating condition in accordance with Part 6 & 7. In most cases the Fire Code does not specify in detail the necessary inspection, maintenance, and testing procedures; instead, it references standards such as those developed by the National Fire Protection Association, Canadian Standards Association and Underwriters Laboratories of Canada. Where such standards are referenced by the code; they have been identified in this maintenance plan.

EXCERPTS AND DEFINITIONS FROM THE ONTARIO FIRE CODE

Article 1.1.1.1
Unless otherwise specified the ***owner*** is responsible for carrying out the provisions of this code.

Article 1.1.1.2
Where tests, repairs or alterations are made to fire protection installations, including sprinkler and standpipe systems, a procedure of notification shall be established, and the procedure shall include notifying the fire department and the building occupants where necessary for safety in the event of a fire emergency.

Article 1.1.2.1
A written record shall be kept of all tests and corrective measures for a period of two years after they are made, and the record shall be made available upon request to the Chief Fire Official.

Check
Means visual observation to ensure the device or system is in place and is not damaged or obstructed.

Inspect
Means physical examination to determine that the device or system will apparently perform in accordance with its intended function.

Test
Means operation of the device or system to ensure that it will perform in accordance with its intended operation and function.

Owner
Means any person, firm or corporation controlling the property under consideration.

Chief Fire Official
Means the Municipal Fire Chief or a member of the Fire Department designated by such.

SUMMARY OF FIRE PROTECTION AND LIFE SAFETY SYSTEMS AND EQUIPMENT AT ROP

Fire Alarm System

The purpose of a fire alarm system is to alert all the occupants of the building that a fire emergency exists, so that such occupants may implement the measures required by the Fire Safety Plan. All fire alarm systems shall be maintained in a fully operational condition at all times.
A two stage fire alarm system is installed at ROP. A two-stage system is designed to allow staff to investigate (1st Stage Alert) and take appropriate action that may require relocation or evacuation of the people in the fire-affected area. The general alarm or second stage signal is reserved as a clear indication for a partial or complete evacuation of the building where this proves necessary.

Fire Alarm Monitoring

The fire alarm system at ROP is monitored by an external agency at all times. In the event that the alarm system is activated either in 1st Stage or 2nd Stage the monitoring agency will immediately contact the fire department and initiate the response.

Emergency Lighting

Emergency lighting ensures that exits, corridors and principal routes providing access to exits are illuminated in the event of loss of electrical power to the building.

Emergency Power

Emergency power is required to ensure the continued operation of fire and life safety systems in case of loss of normal hydroelectric power. Emergency power is provided through an on-site emergency generator.

Exits

An exit is that part of a means of egress that leads from the floor area it services to a public thoroughfare or to an approved open space. Walls, floors, doors or other means provide a protected path necessary for occupants to proceed with reasonable safety to the outside.

Portable Fire Extinguishers

Portable extinguishers are intended as a first aid measure to cope with fires of limited size. The basic types of fires are Class A, B, and C. Portable extinguishers are rated for the corresponding class of fire. Multipurpose portable fire extinguishers have been provided in strategic areas of the facility.

Safe Area of Refuge

A safe area of refuge is intended to be a smoke free area, usually protected by a fire separation from other zones or floors, to which occupants may proceed immediately following the sounding of a fire alarm and when so instructed. Occupants may remain in these designated areas until receiving further instruction. Areas of refuge have been identified within the ROP.

Smoke Control Measures

Smoke control measures consist of special construction and equipment to control the movement of smoke from fire, thereby limiting the volume of contaminated air into all floor areas from the fire floor. Smoke control is provided within the HVAC system through the use of duct detectors and fan shut-down and inter-connection with the fire alarm system.

Public Address System

A public address system is used at ROP primarily to provide information and instructions for staff and occupants during an emergency. Emergency announcements are delivered through Switchboard in the ROH. The system is not a component of the fire alarm and detection system panel.

Water Supply

The water supply required for firefighting purposes at ROP is supplied from the municipal water supply system. Water supply (fire hydrants) must be accessible to firefighting equipment.

Fire Department Access

Fire department access allows fire fighters and their equipment to gain access to the building. Vehicles parked in a fire route, excessive vegetation, snow and other forms of obstructions to access routes, fire hydrants, and fire department connections are not permitted by the Ontario Fire Code. Maintaining Fire Department Access is an ongoing matter.

EMERGENCY LIFTS AND CARRIES

THE BACK PACK LIFT The Rescuer would kneel at the front of the person being assisted and place the person's arms up and over the rescuer's shoulders and chest. The rescuer would then lean forward before raising slowly, to a full standing position.	

TWO RESCUER EXTREMITIES CARRY The person being assisted would be placed on the stairwell landing. One rescuer would lift at the legs, under the knees, while the other would lift under the shoulders with fingers locked across the individual's chest. Rescuers, with backs erect, would lift together, rising slowly to a standing position.	
TWO RESCUER SEAT CARRY: Two rescuers position themselves next to the wheelchair (or beside the person being assisted) in order to grasp each other's upper arm or shoulder (Figs. 3 & 4). The person being assisted would place his/her arms firmly around both rescuers' necks as per Fig. 5. The two rescuers would then lean forward placing their free arm under the individual's legs, firmly grasping each other's wrists as per Fig. 6. Working together, both rescuers lift, using legs, and carefully step forward.	   

THE CHAIR LIFT Lay the person on his or her back and slide a chair under his or her buttocks, until the person is in a sitting position but still lying on the floor. Put the person's hands on his or her lap, and slowly raise the chair to a vertical position. Rescuers may then pick up the chair (either side-by-side, or front and back) and proceed to safety.	 

Building Name:	The Royal Ottawa Place (ROP)
Municipal Address:	1141 Carling Avenue, Ottawa, ON K1Z 7K4
Building Owner:	Royal Ottawa Health Care Group
Business Phone Number:	613 722-6521
Business Fax Number:	613 761-3609
Website:	www.theroyal.ca
Mailing Address:	1145 Carling Avenue, Ottawa, ON K1Z 7K4

FIRE PROTECTION AND LIFE SAFETY SYSTEMS AND EQUIPMENT

EMERGENCY LIGHTING SYSTEM AND COMPONENTS

System or Equipment	Industry Standard Reference	Frequency of Checks		Work Conducted by	Summary of Components: checked, inspected, tested	Date Completed (Records Retained minimum of 2 years
Emergency Lighting System and Components Notes: Additional checks that can be completed when possible: ✓ The terminal connections are clean, free of corrosion and lubricated when necessary, ✓ The terminal clamps are clean and tight as per manufacturer's specifications, and ✓ The battery surface is kept clean and dry.	Fire Code: 2.7.3.3 and 6.7.1.1	x	Monthly	Facility Services or Qualified Person/Contractor	Check all components of system. test emergency lighting units to ensure emergency lights will function upon failure of the primary power supply	Retain all check and test reports.
		x	Annually	Facility Services or Qualified Contractor.	Test system. Test emergency lighting units to ensure unit will provide emergency lighting for a duration equal to the design criteria under simulated power failure conditions (After completion of the test, the charging conditions for voltage and current and the recovery period should be tested to ensure that the charging system is in accordance with the	

					manufacturer's specifications.)	

EMERGENCY POWER SYSTEMS (GENERATOR)

System or Equipment	Industry Standard Reference	Frequency of Checks	Work Conducted by	Summary of Components: checked, inspected, tested	Date Completed (Records Retained minimum of 2 years)

Emergency Power Systems (Generator)	Fire Code 6.7.1.1 and CAN/ CSA-C282-M, *Emergency Electrical Power Supply for Buildings*	x	Weekly	Facility Services or qualified person/contractor	Check components of the system; operate the generator set under at least 50% of rated load for 30 minutes.	Retain weekly and monthly checks. Retain remaining records at least two years past the date of completion.
		x	Monthly	Facility Services or qualified person	Check the following as applicable: Emergency Generator and Support Equipment: Fuel tank level Lubricating oil level Engine coolant Heaters, lubricant and/or coolant Engine, generator, fuel tanks and cooling systems for evidence of leakage Operation of fuel transfer pump Starting system-batteries, etc., for leakage, cleanliness and terminal security Air tanks for pressure (air motor system) Valves for leakage (air motor system) Operation of auxiliary engine and compressor (air motor system) Bleed off condensation (air motor system) Louvre settings-control panel settings (ensure the unit is ready for start-up) Battery electrolyte level Battery specific gravity Battery electrical connections (tightness, leaks or sulfation)	
		x	Every 6 months	Facility Services or qualified person	check and clean crankcase breathers, governors and linkages on emergency generators	
		x	Annually	qualified person	inspect and service generator and generator set	

		x	Every 2 years	qualified person	check torque and valve adjustments for engines	
		x	Every 3 years	qualified person	inspect and service injector nozzles and valve adjustments on diesel engines	
		x	Every 5 years	qualified person	check insulation of generator windings	

FIRE PROTECTION SYSTEMS AND EQUIPMENT: FIRE ALARM AND DETECTION SYSTEM

System or Equipment	**Industry Standard Reference**	**Frequency of Checks**		**Work Conducted by**	**Summary of Components: checked, inspected, tested**	**Date Completed (Records Retained minimum of 2 years**
Fire Alarm and Detection System Notes: The fire alarm system is to be maintained in operating condition. When the system or any part of it is shut down the supervisory staff are to be notified and alternative measures are to be followed as outlined in this approved fire safety plan in accordance with Section 2.8. of the Fire Code.	ON Fire Code: 6.3.2.2 – 6.3.2.4 CAN/ULC S-536-M97	x	Daily	Facility Services or Qualified Person	Check fire alarm AC power lamp and trouble light, Check trouble conditions, Check central alarm and control facility.	Maintain daily and monthly check records Ensure that the annual test and inspection report meet the requirements of CAN/ULCS-536-M97.
		x	Monthly	Facility Services or Qualified Person	Check all fire alarm components including standby power batteries, test fire alarm system, (can be done at same time as drill) Test voice communication systems	

Once activated, a fire alarm system shall not be manually silenced unless it has been confirmed by the supervisory staff, in consultation with the Chief Fire Official on scene that no fire exists. The repair or cleaning of equipment and the periodic replacement of components must be as per manufacturer's specifications and recommendations and must not reduce the level of performance of the equipment. Access to fire alarm and voice communication system components requiring inspection or servicing shall be kept unobstructed.					that are not integrated with a fire alarm system (same time as drill).	
		x	Annually	Person acceptable to the authority having jurisdiction for servicing fire alarm systems.	Test fire alarm system by persons acceptable to the authority having jurisdiction, Test voice communication to and from floor areas to the central alarm and control facility by persons acceptable to the authority having jurisdiction. N/a at ROP	

FIRE DEPARTMENT ACCESS

System or Equipment	Industry Standard Reference	Frequency of Checks	Work Conducted by	Summary of Components: checked, inspected, tested	Date Completed (Records Retained minimum of 2 years
Fire Department Access	Ontario Fire Code	As required	Facility Services	Fire access routes	As needed

	2.5.1.5			– streets, yards, private roadways, shall be maintained so as to be immediately ready for use at all times by fire department vehicles	