University of Arkansas for Medical Sciences

Part IV - Fire Prevention & Life Safety Management Plan

FY27

I. Mission

The purpose of this plan is to promote, implement and administer a comprehensive Life Safety program for UAMS. This plan provides for and monitors a safe environment for employees, students, patients, and visitors designed and maintained to comply with the Life Safety Code (LSC), National Fire Protection Association (NFPA) 101-2012 and the Arkansas Fire Prevention Code. Design criteria accepted by the healthcare community are used when designing the environment of care including the Guidelines for Design and Construction of Hospitals and Healthcare Facilities, 2014 edition, published by The Facility Guidelines Institute

II. Scope

The Fire Prevention & Life Safety Management Plan establishes parameters within which a safe and secure environment of care is established, maintained and approved for UAMS. Fire Prevention & Life Safety are established to ensure that employees are educated, trained, and tested in the fire prevention & life safety features of the physical environment and can react to a variety of emergency situations that may affect the safety of occupants or the delivery of health care.

III. Authority/Organization

The Safety Coordinating Committee (SCC) has authority to coordinate and administer the UAMS Fire Prevention & Life Safety Management Plan and its resulting policies. Program implementation is the joint responsibility of the Departments of Occupational Health and Safety (OH&S), Design & Construction, Facilities Planning and Design and Engineering & Operations. UAMS Environment of Care (EOC) Committee members include representatives from OH&S, Engineering & Operations, Design & Construction, Facilities Planning and Design, Clinical Engineering, Telecommunications, Police, and Support Services. UAMS EOC Committee member goals and responsibilities are developed and reviewed as part of the annual evaluation.

The EOC Committee Chair has been given authority by the Chancellor to organize and implement the Fire Prevention & Life Safety Management Plan. The EOC Committee will evaluate the trends and information gathered by the committee, develop appropriate policies and procedures, understand applicable codes and regulations, and evaluate the effectiveness of the Fire Prevention & Life Safety Management Plan and its components on an annual basis. Responsibilities of the EOC Committee include reporting significant findings and recommending actions to the Safety Coordinating Committee or the Vice Chancellor of Campus Operations.

IV. Responsibilities/Functions

The EOC Committee is responsible for:

- Review and approval of all pertinent policies.
- Review and approval of the PM Maintenance Program.
- Oversight of the Fire Drill Program.
- Annual Evaluation of the Fire Prevention & Life Safety Management Plan's objectives, scope, performance, and effectiveness.

The Department of OH&S has management, enforcement and audit responsibility for all of the fire prevention & life safety programs including:

- Recognizing and reporting safety issues related to facilities, equipment, and conditions via environmental rounds and the department specific audit program.
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- Scheduling, conducting, and evaluating all fire drills and actual fire responses.
- Reporting and investigating life safety code deficiencies in existing buildings
- Implementing of Interim Life Safety Measures (ILSM) and responsibility for monitoring and training.
- Assisting in the training of all contractors working in UAMS campus facilities.
  Responsible for training of contractors concerning the UAMS policies and procedures pertaining to construction projects.

The UAMS Engineering & Operations Department is responsible for:

- Fire Alarm and Detection Equipment is Tested in Accordance with NFPA 72 as follows:

  Initiating Devices

  - All supervisory signal devices (except valve tamper switches) are tested at least quarterly.
  - All valve tamper switches, and water flow devices are tested at least semi-annually.
  - All duct detectors, electro-mechanical releasing devices, heat detectors, manual fire Alarm boxes, smoke detectors are tested at least annually.

- Kitchen automatic fire extinguishing systems are inspected for proper operation at least semi-annually (actual discharge of the fire extinguishing system is not required) in accordance with NFPA 96.

- Carbon dioxide and other gaseous automatic fire extinguishing systems are tested for proper operation at least annually (actual discharge of the fire extinguishing system is not required) in accordance with NFPA 12 and NFPA 2001. All portable fire extinguishers and standpipe systems are inspected, tested and maintained as follows:

- All portable fire extinguishers are inspected, tested and maintained in accordance with NFPA 10 as noted below:

  1. Clearly identified
  2. Inspected at least monthly
  3. Maintained at least annually

- All standpipes, hose cabinets, and fire sprinkler systems are inspected, tested and maintained in accordance with NFPA 25.

- All fire pumps are inspected and tested in accordance with NFPA 20.

Building Fire Protection Equipment is maintained as follows:

- All fire and smoke dampers are operated (with fusible links removed where applicable) to verify they fully close at least every six years in accordance with NFPA 90A.

- All automatic smoke detection shutdown devices for air handling equipment are tested at least annually in accordance with NFPA 90A.

- All horizontal and vertical sliding and rolling fire doors are tested for proper operation and full closure at least annually in accordance with NFPA 80.

The UAMS Planning, Design and Construction Department is responsible for:

- Implementation of the ILSM/ICRA Program
- Designing all newly constructed and existing environments of care in accordance with the Life safety Code (LSC), NFPA 101 2012.
- Using design criteria that are referenced by the healthcare community.
- Maintaining and updating the eSOC.
- Reviewing Proposed Acquisitions of Bedding, Window Draperies, and other Curtains, Furnishings, Decorations, Wastebaskets, and Other Equipment for Fire Safety.

Reporting and Investigating Fire Protection Deficiencies, Failures, and User Errors:

The Fire Prevention & Life Safety Management Program identifies and documents fire protection deficiencies, failures, and user errors that may threaten the patient care environment. These issues are documented via Hazard Reports, Maintenance Work Orders, Fire Drill Critiques, Interim Life Safety Inspection Forms, Environmental Rounding, or Departmental Specific Audits. Summaries of the reports are provided to the EOC Committee.

When problems are identified, actions are taken to resolve them, and such actions are documented.

V. Training and Education:

The UAMS Education Program incorporates an orientation program for new employees and an annual in-service education for existing employees. Both training programs are designed to enhance employee safety awareness in an effort to eliminate, as much as possible, potential safety hazards.

The Orientation and Annual Education Program addresses the following:

- Specific roles and responsibilities of personnel, physicians, and other licensed independent practitioners at a fire's point of origin.
- Specific roles and responsibilities of personnel, physicians, and other licensed independent practitioners away from a fire's point of origin.
- Specific roles and responsibilities of other personnel who must participate in the fire plan, such as volunteers, and students.
- Use and functioning of fire alarm systems.
- Specific roles and responsibilities in preparing for building evacuation.
- Location and proper use of equipment for evacuating or transporting patients to areas of refuge.
- Building compartmentalization procedures for containing smoke and fire.

Training may also be completed with annual refresher training requirements through

- Scheduling OH&S to present a customized presentation
- Review of the Safety in-service Module
- Mail out of safety review module
- Review of video presentation

VI. Information Collection & Evaluation System (ICES):

Information from departmental specific audits, environmental rounds and construction projects are compiled by the OH&S department. Life safety code infractions that are identified are entered into the LSC database and transmitted to the Engineering & Operations for corrective action. The LSC Database tracks all reports of potential hazards by department, category of hazard, resolution and time until completion.

VII. Performance Improvement Indicators for FY:27

UAMS will maintain ongoing monitoring of performance regarding actual or potential risk within the Fire Prevention & Life Safety Management program related to one or more of the following:

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- Increase in inspection/repairs to Fire Door damage and or closing/latching effectiveness, reduce repeat E&O Fire Door work order deficiencies by 25%.
- Increase in in-person Fire & Life Safety Training, measure 25% increase of employee participation.
- Increase in repair and or replacement of broken, stained or missing ceiling tiles, reduce repeat E&O work order deficiencies by 25%.
- Increase in number of ICRA/ILSM Inspections for on-campus projects, measure < 90% bi-weekly on-campus project inspections.

Performance monitors are established and monitored by OH&S and summary reports are provided to the Environment of Care and Safety Coordinating Committee. The measures are monitored as long as deemed necessary by OH&S and the overall effectiveness of the performance monitors are assessed as part of the annual evaluation of the Fire Prevention & Life Safety Management Program.

Annual Evaluation:

The objectives, scope, performance, and effectiveness of the Fire Prevention & Life Safety Management program are evaluated annually and reviewed by the Environment of Care & Safety Coordinating Committee. The following aspects of the program will be assessed:

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- Fire Door damage/Latching effectiveness
- In-Person Fire & Life Safety Training
- Broken, Stained or Missing ceiling tile repairs
- Project Inspections

The evaluation will focus on the results of the program over the past year, and quantitative data will be used as much as possible.

Statement of Conditions:

The UAMS Facilities Planning and Design Department is responsible for developing and maintaining an electronic Statement of Conditions (eSOC) for all applicable buildings.

The hospital maintains an on-going effort to assess the facility for compliance with the 2012 Life Safety Code and keep the facility in compliance with the Code. The eSOC is an embodiment of UAMS' on-going efforts to keep its facilities in compliance with the Life Safety Code.

VIII. Corresponding Policies:

Interim Life Safety Measures (ILSM) and Infection Control Risk Assessment (ICRA) Campus Operations, 11.2.08

Infection Control: Construction Areas – Infection Control policy 10.41

Maintenance of Smoke/Fire Barriers Campus Operations 11.1.08

UAMS Contractor/Consultant Orientation Design & Construction

Hot Work Permits Campus Operations 11.1.11