



Capital Development Guideline — Series 7

Fire Risk Management Policy and Procedures

Manual for first-time and infrequent users

Fire Risk Management — 2013

7.0



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www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/fire-risk-management

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Abbreviated Terms

The following abbreviated terms are used in this document.

ABCB	Australian Building Codes Board
AFAC	Australasian Fire Authorities Council
AS	Australian Standard
BAB	Building Appeals Board
BCA	National Construction Series – Building Code of Australia
CDG	Capital Development Guideline(s)
CFA	Country Fire Authority Victoria
CSO	Community Service Organisations
DH	Department of Health Victoria
DtS	Deemed-to-Satisfy
FBIM	Fire Brigade Intervention Model
FEB	Fire Engineering Brief
FER	Fire Engineering Report
FERPTF	Fire and Emergency Response Procedures and Training Framework
FIP	Fire Indicator Panel
FRM	Fire Risk Management
FRMU	Fire Risk Management Unit of the Department of Human Services
FSE	Fire Safety Engineer
IFEG	International Fire Engineering Guidelines 2005
MFB	Metropolitan Fire and Emergency Services Board
NGO	Non-Government organisation
RBS	Relevant Building Surveyor
SOU	Sole Occupancy Unit
SWMS	Safe Work Method Statement

1. Introduction

1.1 The purpose of the Guidelines

As part of its service provision mandate, the Department of Human Services and Department of Health (*Department*) is committed to providing safe and secure buildings for its staff and customer/*clients*. A critical part of this commitment is the development of a Fire Risk Management Strategy (FRMS).

Guidelines have been developed to aid compliance with the obligations of the Department and the Director of Housing for fire risk management (FRM) in buildings that are owned, operated or funded by the Department including for the accommodation of people under statutory supervision of the Secretary of the Department of Human Services, Secretary of the Department of Health or Director of Housing or an Agency (defined as *clients*).

The Guidelines are titled the Capital Development Guidelines – Series 7 and numbered from 7.1 to 7.12. They outline the Department policy, procedures and processes to manage the risks to life due to fire in certain types of buildings or facilities which are owned, operated or funded by the Department.

The purpose of these Guidelines is to provide appropriate levels of fire safety for staff, *clients* and other occupants of a building subject to the Guidelines, in part by providing for appropriately accredited professionals, such as *Fire Safety Engineers*, *Building Surveyors*, *Building Inspectors* and *auditors*, to audit and assess fire risk, recommend steps to minimise fire risk, and to assess and report on acceptable standards of fire safety, in specific settings.

The use of the Guidelines is subject to the following:

- (a) The Guidelines do not constitute all of the possible fire safety matters that could apply to a specific situation, but are provided for assistance in determining appropriate fire safety measures. It is up to individuals acting with appropriate professional advice to determine their application to particular situations.
- (b) Guidelines CDG 7.3 to CDG 7.12 must only be used for purposes within the range set out in the 'Introduction' section at the start of each document.
- (c) In addition to the fire safety requirements and standards in the Guidelines, owners, occupiers and operators of facilities and buildings may be subject to various other statutory, common law and contractual obligations. They should seek advice, including legal advice, on the existence and scope of these obligations.

1.2 Purpose of this document

The Manual for first time and infrequent users (the Manual) provides an overview of the FRM Guidelines published by the Department Fire Risk Management Unit (FRMU). This document is numbered 7.0 and has been prepared specifically to assist first time and infrequent users of the Guidelines to provide an overall understanding of the structure, and processes for application of the Guidelines.

1.3 Fire Risk Management Guidelines Structure

The suite of Guidelines is formally known as the Capital Development Guidelines – Series 7, and comprises the following documents:

- Guideline 7.0 – Manual for first-time and infrequent users
- Guideline 7.1 – Policy and Procedures
- Guideline 7.2 – Engineering Guidelines
- Guideline 7.3 – Secure Facilities
- Guideline 7.4 – Supported community-based houses
- Guideline 7.5 – Congregate Care Facilities
- Guideline 7.6 – Hospitals
- Guideline 7.7 – Community-based houses
- Guideline 7.8 – Single Dwellings
- Guideline 7.9 – Multi-storey housing
- Guideline 7.10 – Accommodation Buildings
- Guideline 7.11 – Short Term Emergency (Contingency) accommodation
- Guideline 7.12 – Disaster Recovery Facilities

Guidelines 7.1 and 7.2 provide background, policy and procedural information, while the remaining Guidelines provide guidance in relation to specific types of buildings or facilities.

The complete suite of Series 7 documents is collectively referred to as the Guidelines within this document and the other Series 7 Guidelines.

1.4 Interpretations

In this Manual, unless the contrary appears:

- headings are for convenience only and do not affect interpretation;
- reference to a statute or other law includes regulations and other instruments under it and consolidations, amendments, re-enactments or replacements of any of them;
- words in the singular include the plural and vice versa;
- where a word or phrase is defined, its other grammatical forms have a corresponding meaning; and
- mentioning anything after include, includes or including does not limit what else might be included.

1.5 Definitions

Words and expressions used in this document and throughout the Guidelines that are shown in *italics* are defined terms and are appended to each Guideline.

Note: The definition of a *client* is a key to the application of the Guidelines and should be noted wherever that term is used in the Guidelines.

2. Fire risk management goals and objectives

2.1 General

The Department is committed to ensure that the people of Victoria have access to services that protect and enhance their health and social wellbeing, and to best allocate available resources to meet their needs. As part of this commitment, the Department aims to address FRM in a manner that is consistent with satisfying its responsibilities and commitment in a cost-effective manner.

The goal of the Department is to meet, as a minimum, the standard of fire safety applicable to the wider community and to meet additional standards where appropriate to meet the particular risks from the attributes of a particular *client*, tenant or *client* group. The Department recognises that the risk to life from fire can be significantly greater where bed-based accommodation is provided in a building or where *clients* need assistance to evacuate a building.

Effective FRM relies on a complex interaction between: human factors; building compliance; and effective operation of passive and active systems to detect, warn and where appropriate, to suppress fire.

2.2 Objectives

The FRM objectives of the Guidelines can be divided into primary and supplementary objectives.

The primary objectives are to:

- (a) Safeguard from illness or injury due to a fire, the people residing in (e.g. *clients*) or working in (e.g. Department staff) or otherwise attending a building subject to the Guidelines.
- (b) Comply with relevant Acts and Regulations that relate to fire safety in buildings subject to the Guidelines including occupational health and safety laws.
- (c) Maintain a safe and secure environment from other risks¹ in the building or facility subject to the Guidelines.
- (d) Set clear governance, accountability and reporting systems for FRM responsibilities that relate to fire safety in buildings that are subject to the Guidelines.

Compliance with the Guidelines is intended to satisfy the primary objectives.

The supplementary objectives include to:

- (a) maintain services to the local communities
- (b) enable continuation of operations (minimisation of business interruption)
- (c) protect assets
- (d) achieve community expectations for service levels and standards.

Compliance with the Guidelines may not always adequately address the supplementary objectives for a particular building or facility. Management input is required to determine if there is a need for additional precautions in relation to the supplementary objectives.

¹ For example, in secure facilities where some fire safety systems can present as hanging points and door locking processes will require management and should not be able to be automatically opened upon a fire alarm.

3. Applicability of the Guidelines

The Guidelines provide a general indication of the Department's expectations for FRM in buildings subject to the Guidelines, in specific settings.

The Guidelines do not constitute specific fire safety advice and are provided for assistance in determining appropriate fire safety measures. It is up to individuals acting with appropriate professional advice to determine their application to particular situations.

3.1 General

The Guidelines apply to buildings in which the Department and/or Director of Housing owns or operates or funds services which provide bed-based care or sleeping accommodation for people under its care. Buildings which do not provide bed-based care or sleeping accommodation are typically not required to comply with the Guidelines, unless they intrinsically form part of the building or detailed in a specific Guideline.

The fact that a building is not covered by these Guidelines does not mean that fire prevention in addition to the requirements of the BCA is not required, only that the Department does not require these Guidelines to be followed in those circumstances. While the Guidelines have been developed specifically for the buildings described above, the approach taken and elements of the Guidelines may assist fire prevention in other buildings.

The following steps should be used to determine if the Guidelines apply to a building and, if so, which Guidelines are applicable.

Step 1: Establishing if the Guidelines apply to a particular situation.

The applicability of the Guidelines can be determined in a number of ways. In all cases the building must be:

1. *owned, or operated or funded* by the Department, the Director of Housing or a community service organisation for the purpose of providing *bed-based care, support or supervision of clients* or associated services that are either directly or indirectly delivered or funded by the Department through a service agreement; or
2. owned by the Department or the Director of Housing that provides sleeping accommodation for *clients* but where staff are not present at all times when *clients* are present (i.e. single dwellings, multi-storey apartments and boarding houses); or
3. a building that does not provide bed-based care or sleeping accommodation for *clients* and is intrinsically linked to a building which does provide bed-based care or sleeping accommodation for *clients* (see sections 3.2 and 3.3 below for further explanation).

Step 2: Determining which specific Guidelines apply.



If a building is subject to the Guidelines, the *client* and *staff profiles* need to be confirmed as this is critical information for interpreting and applying the specific Guideline. Guidelines 7.1 and 7.2 apply in all cases. Guidelines 7.3 – 7.12 apply to particular types of buildings or facilities. It is possible that more than one Guideline may apply to a building, or a facility may contain multiple buildings for which different Guidelines apply.

For many buildings and facilities, the applicable Guideline is readily identifiable based on the care model provided in the building. The following table summarises the applicability of each Guideline.

Guideline	Typical Description
7.3	Facilities which provide accommodation and education for children or young adults (typically under 18 years, although may be up to 21 years old) who are subject to a court order for secure welfare.
7.4	Domestic style residential care buildings providing accommodation for up to 8 <i>clients</i> who may have physical and/or intellectual disabilities and have 24 hour staffing (may be sleep-over or up right active) when <i>clients</i> are present.
7.5	Larger residential accommodation buildings requiring 24 hour care which provide accommodation for: <ul style="list-style-type: none"> a) more than 8 <i>clients</i> who may have physical and/or intellectual disabilities b) more than 8 <i>clients</i> who are children or young adults (typically under 18 years, but up to 21 years) c) accommodation for the aged who may not necessarily require assistance to evacuate the building d) mental health facilities.
7.6	Hospital buildings which provide bed-based care.
7.7	Domestic style building providing accommodation for up to 8 <i>clients</i> where generally no more than 1 client requiring assistance to evacuate in an emergency and there is 24 hour staffing (may be sleep-over or up right active) when <i>clients</i> are present.
7.8	Typical domestic style dwelling used for public housing stock for individual rental agreements with tenants.
7.9	Low, medium and high rise multi-dwelling buildings used for public housing stock for individual rental agreements with tenants.
7.10	Accommodation buildings used as boarding houses, guest houses, hostels or the like, rooming houses as defined in the <i>Residential Tenancies Act 1997</i> and <i>crisis accommodation</i> .
7.11	Buildings used for short term emergency (contingency) accommodation where buildings/facilities are provided for children and young people in out-of-home care or persons with a disability assigned to the Department. Occupation of these buildings under these circumstances is limited to a maximum of 6 months.
7.12	Temporary facilities set up to provide any of the above types of care in the period after a declared emergency.

The *client* and *staff profiles* must also be considered when determining if a Guideline is applicable. The following table summarises applicability of the Guidelines based on the intended *client* and *staff profile*.

Client Profile	Staff Profile	Guidelines Applicable To Client/Staff Profile								
		7.3	7.4	7.5	7.6	7.7	7.8	7.9	7.10	7.11
Ambulant – Type 1 Able to understand alarm and independently evacuate	Type 1 No Staff									
	Type 2 As Required									
	Type 3 24hr sleepover									
	Type 4 24hr 'stand-up'									
Ambulant – Type 2 Able to understand alarm but requires staff intervention to evacuate	Type 1 No Staff									
	Type 2 As Required									
	Type 3 24hr sleepover									
	Type 4 24hr 'stand-up'									
Ambulant – Type 3 Not able to understand alarm but can evacuate with staff intervention	Type 1 No Staff									
	Type 2 As Required									
	Type 3 24hr sleepover									
	Type 4 24hr 'stand-up'									
Non-Ambulant – Type 4 Able to understand alarm but requires physical assistance to evacuate	Type 1 No Staff									
	Type 2 As Required									
	Type 3 24hr sleepover									
	Type 4 24hr 'stand-up'									
Non-Ambulant – Type 5 Not able to understand alarm & requires physical assistance to evacuate	Type 1 No Staff									
	Type 2 As Required									
	Type 3 24hr sleepover									
	Type 4 24hr 'stand-up'									
Non-Ambulant – Type 6 May not be able to be evacuated from the building	Type 1 No Staff									
	Type 2 As Required									
	Type 3 24hr sleepover									
	Type 4 24hr 'stand-up'									

LEGEND:  Guideline is compatible with *client* and *staff profile*
 Guideline is not compatible with *client* and *staff profile*

Where a guideline is not compatible with a *client* / *staff profile* combination the proposed staffing and/or *client profile* should either be changed or an application be made to the Department FRMU for approval or direction.

Guideline 7.2 gives full details regarding *client* and *staff profiles* and the *client* risk matrix.

3.2 Parts of a building subject to the Guidelines but used for other purposes

Where a building or part of a building is used for a purpose other than sleeping accommodation or *bed-based care support or supervision* or forms an intrinsic part, then that building or part of the building must also comply with the Guidelines. This is because these spaces can contribute to the overall fire risk in the building, may contain common services and equipment and would be required to be considered in any evacuation procedures.

3.3 Other buildings on the same allotment

Generally where other buildings exist on an allotment / property, they may not need to be considered as a building subject to the Guidelines if the separation distances and external wall construction of both buildings comply with the relevant sections of the DtS of the BCA. For most situations this will mean a minimum separation distance of at least 6m, unless walls are fire resistant and all openings adequately protected.

Where buildings are adequately separated, but form an intrinsic part of the building, the requirements of the most relevant Guidelines must be applied. Example of such buildings would be non-residential buildings within the security control perimeter of a *secure facility*.

Where a building not subject to the Guidelines and is not adequately separated, the building need only be considered in terms of the threat of fire spread from that building to any building subject to the Guidelines and the building need not be audited in accordance with the Guidelines.

3.4 Connected buildings

Buildings connected only by covered walkways, carports or similar, can be considered as separate buildings (subject to separation distances) if the building is of a single storey construction, is constructed entirely of non-combustible materials and is either substantially open or adequately smoke and/or fire separated at the connection.

3.5 Short Term Emergency (Contingency) accommodation

Occasionally, *clients* need to be housed temporarily at short notice due to an order of a Court or other order or agreement. In these circumstances *client* fire safety must be maintained and compliance with the Guidelines is still required.

Capital Development Guideline 7.11 – Short Term Emergency (contingency) accommodation outlines the requirements and processes for regions to manage fire risk in temporary 24-hour staffed residential care buildings. For example, to provide accommodation for a child or person with a disability under the care of the secretary.

3.6 Disaster Recovery Facilities

In the event of a significant natural or man-made disaster it may be necessary to provide temporary replacement buildings or facilities, while permanent buildings or facilities are restored or re-built. In these situations, *client* fire safety must be maintained and compliance with the Guidelines is still required.

Capital Development Guideline 7.12 – Fire Risk Management in Disaster Recovery Facilities, outlines the requirements and processes for regions to manage fire risk in temporary facilities used to restore services following such an event. This Guideline encompasses all facilities included in Guidelines 7.3 – 7.10.

3.7 Where the Guidelines do not apply

There may be circumstances where the Guidelines do not apply but the Department is concerned to ensure and may have a duty in respect of the ongoing fire safety for Department staff, the *clients* at the building and others who may be affected by the activities of the Department at the building. Information on the duties of the Department and individuals relating to fire safety is provided in part 2.4 of Guideline 7.1.

The particular measures that should be adopted for a building to which the Guidelines do not apply must be determined by reference to the nature and use of the building. For example, for some buildings an annual reporting requirement may still apply even if the Guidelines do not (for example, buildings subject to Department funding but not provided with bed-based care, support or supervision). Examples of these buildings include community and child care centres.

The fire safety requirements of the 'Service Agreement Information Kit for Funded Organisations' are available at the following website:

www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/fire-risk-management

4. Requirements for a building subject to the Guidelines

4.1 General

The procedures in Guidelines 7.1 and 7.2 must be followed for buildings subject to the Guidelines. Additionally, the specific building and *client* outcomes in Guidelines 7.3 – 7.12 are to be applied where relevant.

Guidelines 7.3 to 7.11 detail a range of fire safety measures for each type of building or facility. These Guidelines adopt the BCA DtS provisions as the minimum base-line as well as providing for:

- (a) *Mandatory Measures* which must be implemented, regardless of BCA DtS provisions or any alternative solutions, and are included in Section 2.0 of the relevant Guideline.
- (b) 'Other Department Specific Measures' which must be implemented, unless otherwise assessed under a *fire risk assessment* and are included in Section 3.0 of the relevant Guideline.

The particular requirements for fire safety will depend on the circumstances, including the various matters identified and considered in the Guidelines (e.g. building use, *client* characteristics). The BCA DtS provisions are general in their nature and do not take into account the specific circumstances. Compliance only with the BCA DtS may not be sufficient to provide compliance with the health and safety duties of the Department. The Guidelines, Mandatory Measures and 'Other Department Specific Measures' take into account the specific nature and use of the buildings by the Department. Consideration should be given at all times to whether additional measures need to be taken for fire safety in the particular circumstances.

Note: Guideline 7.12 is intended to be used in conjunction with one or more of the other Guidelines.

4.2 Fire Risk Management Process

The Department Guidelines *fire risk management process* includes the steps outlined below.

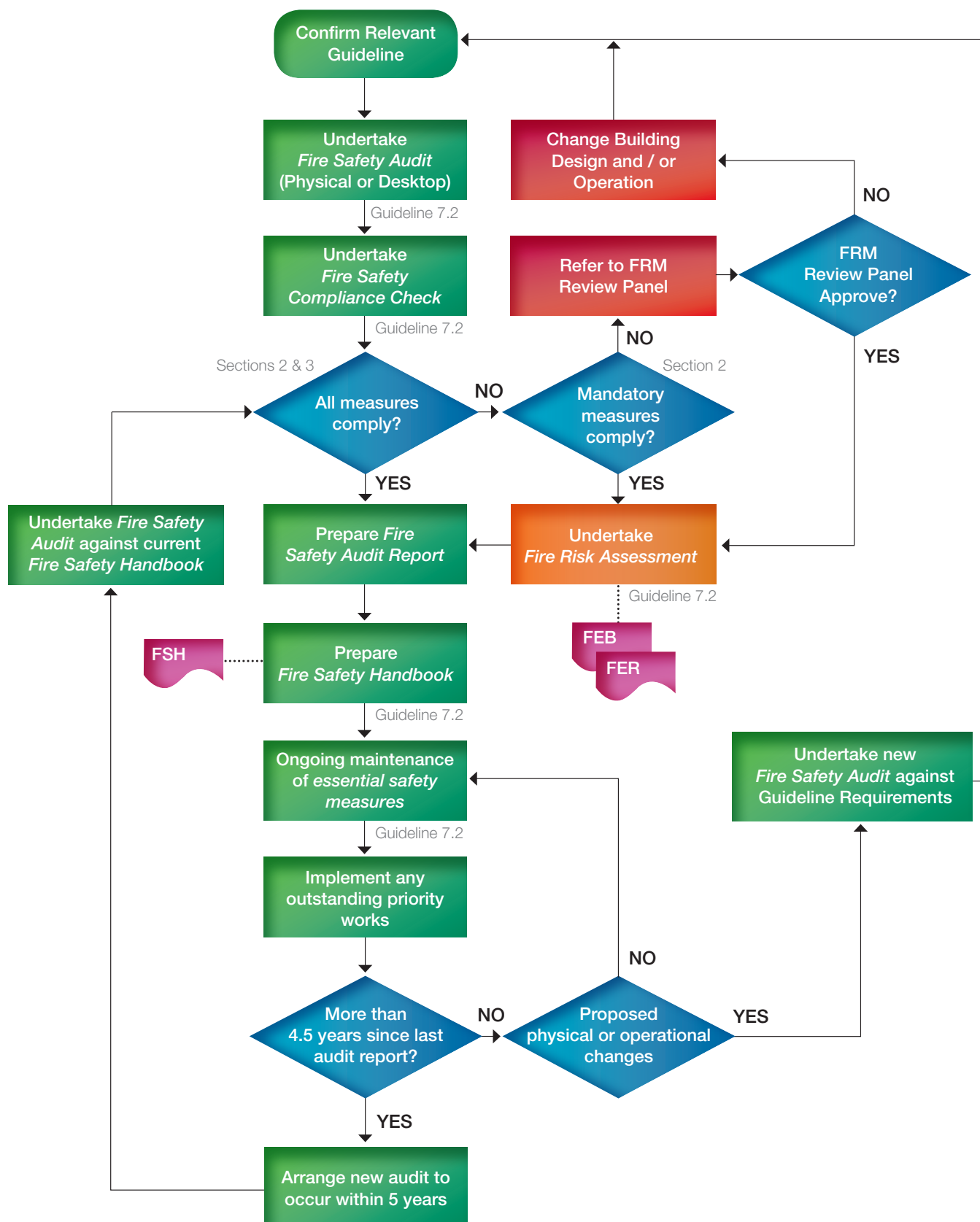
- (a) Confirm applicable Guidelines to the building being assessed.
- (b) Undertake a *fire safety audit* of the building by an *accredited auditor* in accordance with the relevant Guidelines. For buildings not yet constructed, undertake a *desktop audit* (compliance check) of the relevant documentation (plans and specifications).
- (c) Undertake a compliance review of the building or facility against the provisions of the relevant Guidelines to identify any aspects which do not satisfy nominated FRM measures.
- (d) Undertake a *fire risk assessment* where the fire safety measures cannot be implemented or implementation is not possible or desirable for operational or other reasons.
- (e) Refer any *mandatory measures* which are not proposed to be complied with to the *FRM Review Panel* for approval.
- (f) Undertake a *fire risk assessment* where the *fire safety audit* identifies any significant fire hazards.
- (g) Consolidate the fire safety requirements for the building or facility determined by the audit, compliance review and *fire risk assessment* (if applicable) in an audit report which:

- i. details compliance of the building or facility with the requirements
 - ii. identifies the works required to achieve compliance
 - iii. prioritises any required works.
- (h) Prepare a *fire safety handbook* which details the *fire safety strategy* for the building, including any performance measures, all variations from the BCA DtS provisions and relevant fire safety measures.

A *fire safety audit* of the building is to be undertaken:

- (a) at least once every 5 years to confirm compliance, implementation and ongoing maintenance of the *fire safety strategy* for the building as documented in the *fire safety handbook* (see Figure 4.1 over page)
- (b) otherwise as required by the FRM Review Panel
- (c) whenever a modification or addition is to be made, or within one month of an unplanned modification or addition being made, to the structure of the building that will have an effect on the egress, fire safety systems of the building or set criteria of the *Fire Safety Handbook* of the said building.
- (d) whenever required by the Department or Director of Housing.

Figure 1: Simplified Fire Risk Management Process



4.3 Guideline Documents

The Department has developed templates for all key documents such as a building permit, occupancy permit, fire risk assessment, audit report, *Fire Safety Handbook* and annual essential safety measures maintenance report. These documents are available from the FRMU and at www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/fire-risk-management

4.4 The Fire Safety Handbook for each building

The *fire safety handbook* is a unique document for each building or facility that defines the *fire safety strategy* for that building in terms of the required levels of compliance, performance, design parameters and maintenance requirements for each physical or human measure/factor.

The *fire safety handbook* should include copies of relevant information as set out below.

- (a) Reference to the most recent audit report.
- (b) Occupancy Permit and/or Certificate of Final Inspection, if applicable.
- (c) Maintenance Determination made by the relevant *building surveyor* under Regulation 1204 of the *Building Regulations*; or, maintenance schedule in relation to the building prepared by a municipal *building surveyor* or private *building surveyor*, under regulation 1206 of the *Building Regulations*.
- (d) Determinations that relate to the building that have been issued by the Building Appeals Board, or any other applicable Board or Tribunal having authority to make a determination to the *building regulations* and BCA.
- (e) *Fire risk assessment* reports that relate to the building.
- (f) Alternative solutions that have been used to determine compliance with the Performance Requirements of the BCA related to the building.
- (g) Consents made by a Reporting Authority pursuant to the *Building Regulations*, or issued under previous Regulations. For example, *Building Interim Regulations 2005* or *Building Regulations 1994*, that are still applicable to the building.
- (h) Determinations issued by the *FRM Review Panel*.
- (i) Updated floor plan of all the buildings, which must include changes or modifications from time to time, whether of a permanent or temporary nature (*does not have to be to scale, but must be legible e.g. evacuation plans*).

5. Practitioner Accreditation

5.1 FRMU accreditation

The Guidelines require the use of appropriately qualified and experienced building practitioners including registered *Fire Safety Engineers*, *Building Surveyors*, *Building Inspectors* and *Auditors*. Only practitioners *accredited* with the Department can provide these services. Each Guideline describes the roles of these persons and the FRMU maintains a list of *accredited* practitioners that can provide services in accordance with the Guidelines.

In addition to Continuing Professional Development (refer 5.2 below) all practitioners must attend any seminar and/or briefing as required by the Department in order to maintain or obtain *accreditation*.

5.2 Continuing Professional Development

To maintain accreditation with the Department, all practitioners undertaking work in relation to the Guidelines are required to undertake Continuing Professional Development (CPD) by means of an approved industry scheme that has an auditing scheme in place. For example, Engineers Australia (IEAust), Fire Protection Association Australia (FPAA), Australian Institute of Building Surveyors (AIBS). For non-members of such associations, equivalent activities with records made available to the FRMU on request.

6. Fire Risk Management Review Panel

6.1 Establishment and membership of the Fire Risk Management Review Panel

- (a) Under the Guidelines, the *FRM Review Panel* is established.
- (b) Members of the *FRM Review Panel* are listed in section 6.2. Some members are automatically appointed due to their position within the Department, relevant authority or organisation. The following members are appointed by the Secretary or Deputy Secretary of the Department:
 - i. a person who is an Australian lawyer (within the meaning of the *Legal Profession Act 2004*) of at least 5 years standing
 - ii. a registered *fire safety engineer*
 - iii. a registered *building surveyor*.

6.2 Membership of FRM Review Panel

The *FRM review panel* consists of the following members:

- (a) Secretary – *Department* (Chairperson)
- (b) Deputy Secretary (Deputy Chairperson)
- (c) Director, Property & Asset Services or delegate (Deputy Chairperson)
- (d) Assistant Director, Property Maintenance or delegate (Deputy Chairperson)
- (e) Principal Manager, FRMU or delegate (Registrar)
- (f) Chief Officer MFB or delegate
- (g) Chief Fire Officer CFA or delegate
- (h) Chairperson, Engineers Australia – Society of Fire Safety Victorian Chapter
- (i) Person who is an Australian lawyer (within the meaning of the *Legal Profession Act 2004*) of at least 5 years standing (up to 2 members)
- (j) *Accredited* and Registered *Fire Safety Engineer* (up to 3 members)
- (k) *Accredited* and Registered *Building Surveyor* (up to 2 members).

6.3 Role and authority of the Fire Risk Management Review Panel

The role of the *FRM Review Panel* is to ensure compliance with these Guidelines and the objectives of the Department. The *FRM Review Panel* operates under the Department and has the authority to:

- (a) vary the Guidelines, in exceptional circumstances
- (b) make determinations or orders on any matter related to the operation of or compliance with the Guidelines
- (c) resolve matters of technical interpretation, disputes or inconsistencies in the application of the Guidelines
- (d) decide on matters of practitioner conduct (including *accreditation* of practitioners).

6.4 Quorum of a meeting

A quorum of the *FRM Review Panel* shall consist of the following positions:

- (a) Chairperson or Deputy Chairperson
- (b) Registrar
- (c) Chief Officer or Delegate of MFB and/or Chief Fire Officer or delegate of the CFA (depending on the matter/property and the mandate of the relevant Authority)
- (d) a person who is an Australian lawyer (within the meaning of the *Legal Profession Act 2004*) if the matter requires legal interpretation or a determination as decided by the Chairperson or Deputy Chairperson
- (e) an *accredited* and registered *fire safety engineer* or *accredited* and registered *building surveyor* as decided by the Chairperson or Deputy Chairperson.

6.5 Process for making application to the FRM Review Panel

- (a) The application must be accompanied by all necessary documentation as indicated in the application form and information sheet. (*These documents are available from the FRMU and at www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/fire-risk-management*)
- (b) An application will not be processed until all the mandatory information has been provided.

Appendix 1: Definitions

The following definitions apply where these terms are used (either in lower or upper case) in the Guidelines:

Accredited

Means a person accredited by the Department of Human Services in the appropriate category to undertake a specific task.

Advisory Note

Means formal advice issued by the Department of Human Services in relation to application or interpretation of the Guidelines. Advisory notes are not mandatory but must be taken into account in any assessment process.

Agency

A third party organisation provided with funding or support by the Department to provide care for *clients*. Often also referred to as a Community Service Organisation (CSO) or Non-Government Organisation (NGO).

Auditor

Means a practitioner who is *accredited* to undertake *fire safety audits*. Accreditation may be limited to specific building or buildings and/or occupancy types.

Bed-based care, support or supervision

Where overnight accommodation is provided for *clients* in buildings that are *owned, operated or funded* by the Department and the provision of special or personal care is provided as follows:

- (a) assistance with one or more of the following –
 - (i) bathing, showering or personal hygiene
 - (ii) toileting
 - (iii) dressing or undressing
 - (iv) eating meals; or
- (b) physical assistance for persons with mobility problems; or
- (c) assistance for persons who are mobile but require some form of supervision or assistance; or
- (d) assistance or supervision in administering medicine; or
- (e) the provision of substantial emotional support.

Bed-based Service

A service contracted to provide overnight accommodation for *clients*.

Boarding House

A boarding house, guest house, hostel or the like in which more than 6 unrelated persons would ordinarily reside, but full time staff are not provided.

Building Act

Means the *Victorian Building Act 1993* or as amended.

Building Code of Australia (BCA)

The National Construction Code Series – Building Code of Australia, as published from time to time by the Australian Building Codes Board.

Building Inspector

A person, who is registered in the category of building inspector (unlimited) by the Building Practitioners Board of Victoria or other appropriate Statutory Body for registering practitioners in the state of Victoria and has the appropriate experience in fire safety to apply and interpret these Guidelines and has been *accredited*.

Building Legibility

Relates to the complexity of the building layout which has an impact on the ease of way finding by the occupants or rescue personnel.

Building Regulations

Means the *Victorian Building Regulations 2006* or as amended.

Building Surveyor

A person who is registered under the category of *building surveyor* (unlimited) or *building surveyor* (limited) and be registered or eligible to be registered in the category of building inspector (unlimited) by the Building Practitioners Board of Victoria or other appropriate Statutory Body for registering practitioners in the state of Victoria and has appropriate experience in fire safety to apply and interpret these Guidelines and has been *accredited*.

Client

Is a natural person who is:

- (a) provided with accommodation, supervision and/or care or a young person on statutory supervision in the criminal justice system or any other person on statutory supervision in the care of the Secretary of the Department of Human Services or Secretary of Department of Health; or
- (b) provided with support for accommodation, supervision or care from another Authority, organisation or agency that has a service agreement with the Department of Human Services or Department of Health; or
- (c) a tenant or resident who is housed in rental accommodation provided by the Director of Housing or Department of Human Services.

Staff members, visitors or the public are not considered *clients*.

Client Profile

Means one or more of the following:

- Ambulant (Type 1) – A *client* who is able to understand and respond to an alarm and able to independently evacuate without staff present in the building.
- Ambulant (Type 2) – A *client*, who is able to understand and respond to an alarm, can evacuate with staff intervention or can evacuate independently with a delay. For example, staff implement the evacuation plan including providing verbal instructions, coordination, supervision and limited physical assistance, such as hand or arm holding.

- Ambulant (Type 3) – A *client* who is not able to understand and respond to an alarm but, can evacuate with staff intervention. For example, staff implement the evacuation plan including providing verbal instructions, coordination, supervision and limited physical assistance, such as hand or arm holding.
- Ambulant (Type 4) – A *client* who is able to understand and respond to an alarm but, may not be able to evacuate independently or, will take extra time to evacuate independently. They will require verbal instructions and substantial physical assistance from staff to evacuate. For example, removal from bed and placement in a wheelchair or stretcher.
- Non-ambulant (Type 5) – A *client* who is not able to understand or respond to an alarm and not able to evacuate without physical assistance. The *client* will require verbal instructions and substantial physical assistance from staff to evacuate. For example, removal from bed and placement in a wheelchair or stretcher.

Community-based Houses

House of a typical domestic type construction and layout with 24 hour staff accommodating no more than eight (8) *clients*, of which no more than one client requires assistance to evacuate the building during an emergency.

Competent person

Is a natural person who holds required academic qualifications relevant to the activities they are undertaking under these Guidelines and is either:

- (a) not registered as a building practitioner in Victoria; or
- (b) is registered as a building practitioner in Victoria in the relevant category but either does not have the appropriate experience, or has not yet been assessed, for *accreditation* under these Guidelines.

A *competent person* is permitted to undertake work in relation to these Guidelines under the direct supervision of an *accredited* person who takes full responsibility and liability for the assessment, report and work.

Congregate Care Building

A 'single residential care building' as defined in the *BCA (Appendix Victoria)* with 24-hour on-site support or care staff accommodating more than eight (8) *clients* where 10% or more of residents require significant (or physical) assistance to evacuate the building during an emergency; or a building where more than eight (8) *clients* reside, and where at least one requires physical assistance with daily activities and/or to evacuate the building during an emergency and where staff who provide care, support or supervision, are present at all times that *clients* are present. If a hospital or major part of a hospital is predominantly used for the 24-hour accommodation of the aged or those with mental illness or intellectual disabilities the parts providing these services may be treated as *congregate care facilities*. The models of care and support include:

- accommodation for the aged
- nursing homes
- geriatric facilities
- accommodation for people with disabilities
- accommodation for children and youth
- training centres providing 24-hour care

- nursing homes
- large shared supported accommodation
- community residential units
- mental health facilities
- community care units
- secure extended care units
- psychiatric units.

Day Centres

A building or part of a building that is used for educational, training, rehabilitation and similar functions, but is not used for residential purposes. Such facilities include kindergartens, clubs, halls, occupational therapy centres, clinics/day programs, Adult Training Support Services.

Day Hospital

A building, or part thereof, used to provide same day services or treatment to four or more patients at the same time. This includes facilities that provide, on an in-patient basis, treatment for patients that would render them incapable of taking action for self-preservation under emergency conditions without assistance from others, or facilities that provide, on an in-patient basis, surgical treatment requiring general anaesthesia.

Department

Is either the Department of Human Services (DHS) or Department of Health (DH) as appropriate that has authority to make decisions or has control, management or supervision of the subject matter or provides funding.

Desktop audit

Used in reference to either a *fire safety audit* or a *fire safety compliance check*. This type of audit does not involve a physical site inspection and is therefore reliant on a careful examination of relevant documentation.

Essential Safety Measures

Means same as definition in the Building Regulations.

Evacuation Capability

The ability of the occupants (including *clients*, residents, visitors and staff) to evacuate a building. The evacuation capability takes account of the ability of staff and *clients* to assist each other during the evacuation.

Evacuation exercises

Real-time, full scale practice evacuations done to test and record actual evacuation capability and time.

Exercises

Training programs that are given to staff and/or *clients* to explain, promote and understand the emergency evacuation system. Examples could be walking residents through the egress system, explaining waiting areas, listening to alert and evacuation tones and practising door closing. Usually exercises are not done in real time as a 'test' evacuation, but are a training process. For example, additional exercises might be done to assist improving the drill time for a building.

Existing Building

A building that existed prior to the adoption of these Guidelines, whether or not that building was used for the purpose being considered under these Guidelines.

False alarm

Activation of an alarm system in a building that does not result from the effects of fire. For the purposes of this definition, a false alarm is alarm activation by water vapour (i.e. steam), animal hair, lint, faulty installation, wiring, corrosion or lack of maintenance. Alarm activation resulting from burnt toast, cooking appliances or heating appliances is not a false alarm for the purposes of this definition.

Fire Brigade Intervention

Means all fire agency activities from the time of notification up until fire extinguishment and overhaul and includes fire brigade operations.

Fire Risk Assessment

An assessment of the potential for the realisation of an unwanted fire event, which is a function of the hazard, its probability and consequences. A Fire Risk Assessment is one or more, but normally a combination, of:

- a qualitative analysis;
- a quantitative analysis; and
- a regulatory assessment;

Depending upon the particular application, *fire risk assessments* can be undertaken by *accredited fire safety engineers* for specific buildings, or may form part of the specific technical outcomes of a Guideline.

Fire Risk Management (process)

The process of determining, by *fire safety audit* and *fire risk assessments*, whether an appropriate level of fire safety is achieved in a facility or building. As a minimum, an appropriate level of fire safety means the minimum statutory requirements applicable to that building or facility and implementation of the outcomes of a *fire risk assessment* based on use, building type, *client profile*, occupant profile, *staff profile* (if any), fire prevention training and ongoing maintenance.

Fire Safety Audit

The structured auditing of fire safety measures in a facility or building against nominated audit criteria, including those relating to life safety as described in AS 4655. Definitions in AS 4655 have the same meaning when used in these Guidelines, unless otherwise noted. For a new building, change of use of a building, or where major renovation work is proposed the *fire safety audit* can consist of a *desktop fire safety audit*.

Fire Safety Compliance Check

A check performed by an accredited *Building Surveyor*, *Building Inspector* or *Fire Safety Engineer* in lieu of a *fire safety audit* and *fire risk assessment* on buildings that comply, or are to be brought into compliance, with the relevant Department Guidelines.

Fire Safety Engineer

A person, who is registered in the category or engineer of class of *fire safety engineer*, by the Building Practitioners Board Victoria or other appropriate statutory body for registering practitioners in the state of Victoria, has appropriate experience in conducting *fire safety audits* and *fire risk assessments* and has been *accredited*.

Fire Safety Handbook

A document that defines the fire safety strategy for a facility in terms of the essential safety measures and management in use requirements, levels of performance, design parameters and maintenance requirements for each physical or human measure/factor.

Fire Safety Strategy

A combination of physical essential safety measures and human measures/factors including maintenance and management in use systems which have been specified to achieve the nominated *fire risk management* objectives.

FRM Review Panel

The Board established in accordance the Capital Development Guidelines -Series 7, Fire Risk Management (FRM) to hear and make determinations in relation to any matter contained in the Guidelines and into the performance of any *accredited* practitioner pursuant to the Guidelines.

High Rise Building

A building which has an effective height, as defined in the Building Code of Australia, of more than 25m.

Hospital

A building, or part thereof, used on a 24-hour basis for medical, obstetrical or surgical care of four or more inpatients, including acute hospitals.

Human Factors (Measures or Precautions)

Occupant characteristics, management practices, emergency control organisation, training and the like that may impact on fire safety. Human measures or precautions typically relate to facilities/building management issues.

International Fire Engineering Guidelines

The provisions of the *International Fire Engineering Guidelines 2005* published by the Australian Building Codes Board that apply to Australia. Definitions in the *International Fire Engineering Guidelines 2005* have the same meaning when used in these Guidelines unless otherwise noted in the Guidelines.

Interim Fire Safety Precautions

Temporary or permanent fire safety measures to address severe and urgent fire hazards prior to the implementation of full fire safety upgrade works. Interim measures do not, as a matter of course, ensure facilities are compliant but are required to address immediate significant risks.

Lead Tenant

A service which provides semi-independent accommodation in a household for people who are in transition to independent living using a live-in volunteer to facilitate a supportive environment.

Low Rise Building

A building which has a rise in storeys of 3 or less, as defined in the Building Code of Australia.

Mandatory Measures

Provisions in the Guidelines that cannot be varied by a *fire risk assessment*, unless approved in writing by the *FRM Review Panel*.

Medium Rise Building

A building which has a rise in storeys of 4 or more, but is has an effective height of less than 25m, as defined in the Building Code of Australia.

Nominated Fire Risk Management Officer

A senior manager normally reporting directly to a CEO who has overall responsibility for *fire risk management*. The nominated fire risk management officer may have responsibility for more than one building or facility and may carry out other duties in addition to those required of the nominated fire risk management officer.

Owned, operated or funded

In relation to **owned** means buildings or facilities that are owned by the Department of Human Services Victoria, Department of Health or Director of Housing or the Crown in the right of the State of Victoria and are under the control or management of the Department, or Director of Housing.

In relation to **operated** means buildings or facilities that are operated, managed or controlled by the Department of Human Services Victoria, Department of Health, Director of Housing whether or not the building is owned by the Department or the Crown in right of the State of Victoria.

In relation to **funded**, means building or facilities that are directly or indirectly funded by the Department and for which the Department of Human Services, Department of Health or Director of Housing has a non-delegable duty of care to ensure adequate fire safety is provided.

Practice Note

Means a *practice note* issued by the Department of Human Services in relation to an application or interpretation of the Guidelines. Compliance with *practice notes* is mandatory and may modify or enhance existing requirements of the Guidelines.

Primary Exit

A continuous and unobstructed way of getting from any point in the building to a road or open space leading to a street which would be likely to be the first choice for an occupant in a fire emergency.

Private Home

A home owned by the occupant or a home formally or informally leased by the occupant.

RBS

Means the relevant *building surveyor*, which has the same meaning as Section 3 of the *Building Act 1993*.

Secondary Exit

An alternative means of escape, which can be used if the primary means of escape is not available. Windows that can open and the like may be used as a secondary means of escape but not as a primary means of escape.

Secure Facility

A building or group of buildings within the confines of a complex for which egress to a street is required through a secure control centre or any other building that has a functional relationship to it. This includes a building, or part of a building, that provides sleeping facilities and is occupied by persons who are generally prevented from taking self-preservation action due to security measures not under their control. A secure facility includes an educational/training building, recreational building, work shed or office within the secure perimeter of the facility. Examples include correctional institutions, detention centres, secure welfare facilities, prisons, community residential centres, training centres and substance abuse centres.

Staff Profile

Means one or more of the following:

- Staff Profile 1 – no staff present.
- Staff Profile 2 – at least one staff member present during part of any 24 hour period.
- Staff Profile 3 – at least one staff member present during all of each 24 hour period, but staff may be asleep at night (also referred to as ‘sleepover’ staff).
- Staff Profile 4 – at least one staff member present during all of each 24 hour period, staff awake during all shifts (also referred to as ‘stand up’ staffing).

Statutory client

Persons for whom the Department of Human Services, Department of Health or any other Department have custody, or guardianship, or protection order of, and persons having any other order pursuant to either the *Children Youth and Families Act 2005* and/or *Disability Act 2006* and/or *Mental Health Act 1986* or a person on an order of the Courts.

Supported Community-based Houses

Houses of a typical domestic type construction and layout, which may be on separate sites or grouped together on one site; have 24-hour on-site support or care staff; where each house does not accommodate more than eight (8) *clients* and where more than one of the residents within that building requires significant (or physical) assistance to evacuate the building during an emergency.

24 Hour Support or Supervision

Staff support or supervision is provided whenever *clients* are in residence and includes active night rosters, sleepover rosters and the 24 hour worker model.

[illegible]

