

Fire Safety Certificate No. 6 for a Health Service

(for public hospitals)

Reporting Period July 20.... - June 20....

The Certificate is to be signed annually by 30 September by the CEO (or equivalent) acting for and on behalf of the Health Service to confirm that premises coming within the Health Service's control comply with the Department of Human Services Capital Development Guidelines - Fire Risk Management (FRM).

Completed certificates are a requirement of the Health Service Agreement, and are to be submitted to the Department's Program & Service Advisor (PASA) or directly to the Metro Health & Aged Care Services Representative.

Refer overleaf for instructions on completion of this certificate.

Property Address: _____
(provide a schedule for multiple sites/buildings)

- I certify that from the information obtained and to the best of my knowledge that the property listed above or on the attached list has been assessed in terms of the current statutory and departmental fire safety requirements as follows:

The DHS Capital Development Guidelines Series 7: Fire Risk Management, specifically Guideline 7.1 & Guideline 7.6 (include any other relevant guideline numbers, as applicable)	
The <u>Date</u> of the last fire safety audit/risk assessment report is or as indicated in the attached schedule of properties	
<u>Outstanding works</u> from last audit(s) are in the attached schedule with details of <i>Immediate</i> and <i>Priority</i> works and the <i>Action Plan</i> to address these items over the next 12 months	
The Emergency Response Policy and procedures required by the DHS Guideline: Fire & Emergency Response Procedures and Training Framework (FERPTF) are being met.	Yes/No
OR	OR
FERPTF does not apply, and the requirements to the level specified in the Australian Standards (ie. AS4083 & AS3745 as amended) are being met	Yes/No
<i>The relevant provisions of the Building Act and building regulations are being met including the annual essential safety measures report</i>	Yes/No

- I certify that any identified fire related issues have been discussed with the regional Program & Service Advisor (PASA) or the Metro Health & Aged Care Services Representative **who has a record of the requirements of the outstanding item(s) and has reviewed the progress and program for completing the fire safety work.**
- I certify that all reasonable steps have been taken for the preceding twelve-month reporting period to ensure that the fire safety measures fulfil their required purpose and that procedures are in place for this to continue for the next twelve months.

Signed for and on behalf of the Health Service

Signature: _____

Date: _____

Name: _____

Title: _____

CEO or equivalent



DHS Capital Development Guideline 7.6 - Fire Safety Certificate

EXPLANATORY NOTES FOR SIGNATORIES

This certificate is only to be used for public hospital sites where it has been determined that the DHS Capital Development Guideline Series 7 are to apply.

Certification is retrospective for the preceding twelve-month financial period. Certificates fall due after 1 July each year and for Departmental reporting purposes must be completed and submitted before 30 September in the same year.

Service Agreement: The Certificate 6 is the means for CEOs to certify on behalf of the Health Service that the facility has been maintained and will continue to be maintained for the next twelve months and that any outstanding fire safety items that do not satisfy the Capital Development Guidelines Series 7 – Fire Risk Management, have been reported, reviewed and scheduled for action by a determined date. It also certifies that emergency management and evacuation procedures are in place and exercised to meet Australian Standards AS 4083 or AS 3745.

DHS Capital Development Guidelines Series 7 - Fire Risk Management (FRM Guidelines) assist in determining the appropriate level of fire safety to be afforded to clients accommodated at the facility and takes into account the requirements of relevant acts, regulations and the Building Code of Australia (BCA).

Audits: To satisfy these requirements the FRM Guidelines require audits of the fire safety features and in some instances fire risk assessments to be undertaken. An audit process is programmed on a 5 yearly rolling basis. New works undergo a desk-top assessment that includes certification. If a facility has not had an audit or re-audit conducted within the past 5 years or if an audit has been conducted and interim, urgent or priority recommendations are outstanding, further investigation should be undertaken before completing the fire safety certificate.

Annual Essential Safety Measures Report (ESM Report): Consistent with the Building Regulations requirements for maintenance of buildings, the Guidelines also require essential safety measures maintenance and testing of facilities. **An annual essential safety measures report for each facility must be completed** (applies to properties in use for a period of twelve months) as evidence of the maintenance required and undertaken.

In completing this certificate it is important to confirm that the report has been completed. Where a maintenance service is contracted, annual fire safety maintenance declarations should be available as provided by the contracted fire services manager, together with other records that assist in providing evidence of the maintenance undertaken in the previous twelve months and to be used to complete the annual ESM Report.

The DHS Fire & Emergency Response , Procedures Training Framework (FERPTF) document focuses on policies and procedures for fire & emergency response procedures and training. Under FERPTF, facility management is required to ensure that staff are trained, drills are conducted and that documented emergency procedures are in place. A fundamental requirement in managing this and other FERPTF requirements is the establishment of Emergency Planning Committees (EPC). For facilities managed by a Health Service where FERPTF has not been mandated, a formalised process is required to ensure the requirements of AS 4083 or AS3745 are being met.

Schedule of Fire Safety Works: In most instances, a facility is likely to have some outstanding fire safety work whether it is a drill not being conducted, an audit recommendation outstanding or a fire extinguisher with an overdue service. Whilst technically this may be viewed as a non-compliance of the property, it should not prevent the fire safety certificate from being completed with an attached schedule of fire safety works, see below. Outstanding fire safety related issues of a severe nature, eg. sprinklers not installed, should be discussed with your regional Program & Service Advisor (PASA) or the Metro Health & Aged Care Services Representative to determine what action is required and the detail that is to be included when the facility is being reported.

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SCHEDULE OF FIRE SAFETY WORKS

DHS Health Service Name

Property Details

Street Address/Postcode

Outstanding fire safety work from the last fire safety audit report and the current annual Essential Safety Measures report			Status		
Description of item to action	Priority Urgent, P1, P2/P3	Order of Cost Estimate	Actions	Timing for implementation completion	Comments Issues/Impacts

