## Sum Hospital Fire: Civil Society demands action against erring Officials

A team of activists and human rights defenders have questioned the role of Government officials responsible to inspect/review/monitor or to issue/renew/reject licenses/certificates on the the adherence to safety related Acts/rules/Guidelines that led to a major fire in SUM Hospitals. The failure to carry out the official mandate by the concerned duty-bearers allowed the hospital authority flout all the norms and standards in this case, alleged the team in a press meet at Bhubaneswar Friday.

After the review of the incident Sum incident, laws and orders, statements by different persons and government and others, a civil society team share their concerns and findings with media.

The team said, as per Clinical Establishment Act 1990, the supervising authority after due consideration of the application may grant registration, maintenance or renewal certificate in Form 2 or issue order of rejection with reasons within three months from the date of receipt of application. According to letter no 2596, Dated, 28.02.2015 MET-III—Misc-6/14 of DMET, CDMO will look out the Fire Prevention measures in Hospitals and clinical establishments follow a Fire Safety Clearance Certificate from the Fire Prevention Wing of the office of Directorate General, Fire Service, Home Guards & Civil Defense, Odisha, for obtaining a new registration or renewal. Who are the officers to issue renewal to SUM hospital or remained silent even after the violations of safety norms by it? It should be probed and action should be taken against erring officials.

Hospital authorities shall provide required fire prevention and safety measures, installations, extinguishers and appliances and maintain them in best repair and efficient working condition at all times for use by the occupants or the members of Fire Service or both in the event of outbreak of fire.

Sensitize all their staff by conducting mock drills periodically and make them conversant in operation/use of fire prevention and safety measures, installations, extinguishers and appliances. Photocopies of the Fire Safety Clearance Certificate issued by the Fire Prevention Wing of Directorate General shall be framed and displayed at all conspicuous places in the corridors and lobbies in all floors of the buildings of the Hospital/Clinical Establishment for general public information. It was not done, no officer monitored it.

The State Government has amended the Odisha Clinical Establishments (Control and Regulation) Act, 1991 to strengthen the licensing authority with provisions of entry, inspection and compliance for such institutions in 2015. As per amendment, Fire safety and life safety standards have been made mandatory for clinical establishments.

The SUM hospital had not obtained a NOC (No-Objection Certificate) from the fire department. Since 17<sup>th</sup> November 2014 Sum hospital has been empanelled under Central Government Health Scheme (CGHS), how did the Govt. empanel a hospital without required license and safety measure? Why shouldn't action against CDMO be initiated for it?

There are several regulations and guidelines mentioned in the National Disaster Management Guidelines and National Building code laid out by the Government of India for hospital safety. Here are major fire safety norms that the SUM was found to violate. Water sprinklers were nonfunctional where the Intensive Care Unit is located, and where the fire broke out. No overhead water tank or water storage was there to douse fire in such mishaps. As per the guidelines, SUM was directed to set up a 25,000 - litres tank. Lack of emergency Exit/staircases for immediate fire exit was found in the Hospital. No system or sirens are in place for automatic fire alarm. Fire hydrants installed had no water connection. There is no smoke detector or no weight rigor.

568 hospitals in Odisha, only three have clearance from the state's Department of Fire Safety. How come? Why didn't SUM Hospital keep up to safety standards although it was reportedly warned in 2013? What steps/precautions have been taken or are recommended to be taken by the Fire Safety Director office Odisha government to prevent recurrence of such mishaps?

Why the safety standards, rules and regulations are not executed properly, why the governmental officials/bodies (duty bearers) responsible for inspection & monitoring and issuing of licenses/NOC are not able to prevent the Hospitals from flouting laws & committing crimes? In case, these officials are not able to perform their mandated duties, they must be held responsible for their omissions and commissions that leads to such devastations causing innumerable damages to the state and people.

## **Our recommendation and Demands:**

## **Immediate:**

- 1. File FIRs against concerned government officials those failed to take necessary steps to against violation of rules and norms of fire safety in Sum Hospital and prevent the disaster.
- 2. Arrest all the persons directly or indirectly responsible for the deaths and damages because of fire-breakouts.
- 3. Provide Rs. 20 lakhs as minimum compensation to the relative of the persons (to each) who lost their lives as a result of fire-breakout in Sum Hospital and Rs.5 lakh to the severely injured ones each.

## Long term:

- The state government should implement fire safety measures strictly at all hospitals,
- A Hospital Disaster Management Plan (HDMP) and frequent ICU & ward evacuation drills are deemed necessary amidst several other safety measures. The HDMP, formed by a set Disaster Management Committee of the hospital is also required to design floor maps, pointing at the designated exit ways for smooth evacuation in case of a mishap. Every hospital must not just have adequate resources like fire extinguishers and prestored water supply, but must also conduct regular training of hospital staff about evacuation procedures for patients.
- Regular monitoring and action should be undertaken by the appropriate authority
- All clinic and hospital must be register under CEA
- Citizen charter should be (mentioning all safety measure) displayed in all hospital
- All clinic should have Evacuation/ rapid response team and Medical emergency/cardiac arrest", in place to communicate in times of crisis.

- State should design disaster preparedness Program and implement it in partnership ULBs, Critical Public service institutions and Community groups.
- Hospital safety initiatives should be integrated with the health programs.
- Safety measure audits should be made mandatory for all hospital
- City Disaster Management Plan should be introduced
- The provisions under the DM Act 2005 should be applied to enforce accountability. A few prosecutions will set example for others.
- Patent safety should be incorporate in CEA