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PROTECTING CANADIANS.**

CORRECTIONAL SERVICE CANADA



Audit of Fire Safety

Internal Audit and Evaluation Sector
August 19, 2025



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Background

The Correctional Service of Canada Fire Safety Program

The Correctional Service of Canada (CSC) is responsible for the establishment and maintenance of a fire safety program at all operational sites for the safety of its staff and individuals in CSC custody. Correctional facilities present unique and heightened fire safety risks given their operational nature.

There are several legislative and policy requirements that govern fire safety in federal buildings within CSC (listed in Annex C).

CSC has developed the Commissioner's Directive (CD) 345 – *Fire Safety* to support fire safety within operational sites and to meet legislative and Treasury Board (TB) policy requirements, including, but not limited to the *National Building Code of Canada*, the *National Fire Code of Canada* (NFCC), and the TB *Directive on Building Emergency and Evacuation Teams*.

The CSC Fire Safety Manual (FSM) is the key guidance material to support the implementation of CD 345 and identifies uniform procedures and practices which enable operational units to maintain a high standard in fire safety performance and to minimize the risk of loss of life and property from fire through prevention and effective fire response.

The Audit of Fire Safety links to the CSC priority of safety and security of the public, victims, staff and offenders in institutions and in the community.

As per CD 345, which was updated in March 2024, the fire safety program at operational sites must contain, at a minimum, the following elements:

- Fire safety planning
- Fire safety training
- Fire safety awareness
- Fire hazard control
- Inspections
- Investigations and reporting of fires, fire alarms and false alarms
- Maintenance of fire equipment and systems
- Fire safety orientation for offenders

The Compliance and Operational Risk Report (CORR) is a management tool designed to confirm the level of policy compliance in selected areas and to assess the level of risk associated with any non-compliance. Fire safety was selected in the 2018 and 2022 CORR cycles. See Annex E for a comparison of audit findings and CORR results.

Fire Safety Program Structure and Responsibilities

National Headquarters (NHQ)

Corporate Services:

- The Assistant Commissioner, Corporate Services, in collaboration with the Director General, Technical Services and Facilities (TSF), will issue a FSM and ensure it is updated as necessary.
- The Director, Engineering and Maintenance (E&M) is designated as the Departmental Fire Protection Coordinator (authority having jurisdiction) overseeing the fire safety program, pursuant to the FSM.
- The CSC Fire Protection team within the TSF Branch, reports to the Director, E&M, and is composed of the following roles:
 - Departmental Fire Protection Coordinator
 - Chief Fire Protection Engineer
 - Fire Protection Engineer(s)
 - Regional Fire Safety Officers (RFSOs)
 - Fire Safety Advisor

Regional Headquarters (RHQ)

- The Regional Deputy Commissioner will ensure fire safety procedures in operational units are supported, monitored and reported on in accordance with the FSM.
- The Regional Administrator, TSF is responsible for incorporating fire safety features in the design of additions and modifications to existing structures and in proposed new construction under their responsibility and providing regional delivery and support to facilities maintenance programs including fire safety.

Institutions/Districts

- The Institutional Head/District Director will ensure all components of the fire safety program applicable to the institution/district are implemented in accordance with the FSM and in collaboration with the Fire Safety Program Coordinator, ensure the development, implementation and maintenance of an effective fire safety program and enforce all regulations and standards required by Part II of the *Canada Labour Code*.
- The Assistant Warden/Assistant District Director, Management Services is designated as the Fire Safety Program Coordinator and will ensure individuals designated as Fire Emergency Officers (FEOs) carry out the roles and responsibilities related to the fire safety program, as outlined in the FSM.
- Other operational roles, as outlined in the FSM, include:
 - Assistant Warden, Operations
 - Chief, Facilities Management
 - Crisis Manager
 - Correctional Managers/Team Leaders
 - Correctional Officers (COs)
 - Managers and Supervisors
 - Occupational Health & Safety (OHS) Committee
 - FEOs and Alternates

A full listing of all responsibilities can be found in CD 345 and the FSM. See Annex D for a graphical representation of key roles and responsibilities at institutions.

Audit Objectives, Scope, and Approach

Audit Objectives, Scope, and Approach

Audit Objectives

Objective 1 To provide reasonable assurance that a management framework is in place to support an effective fire safety program.

Objective 2 To provide reasonable assurance that CSC is complying with key requirements of the fire safety program to mitigate the risk of fire and reduce incidences within the operational units.

Scope

The audit was national in scope, with onsite visits limited to the Atlantic, Quebec, and Pacific regions. Given that the higher risks associated with fire safety and the associated controls are primarily driven by the operational environment, the focus of the audit was on that area and excluded the administrative environment (NHQ, RHQs, training centres, etc.).

Approach



Interviews

98 interviews were conducted with key stakeholders involved with the CSC fire safety program, including inmates, management, and staff at the national, regional and operational levels.



Review of Documentation

Relevant documentation, such as legislation, CDs, CORR results, job descriptions, committee minutes, institutional reports, training material, and monitoring and reporting information was reviewed.



File Review and Testing

File review and testing was performed on, but not limited to fire safety plans, memoranda of understanding (MOU), job descriptions, fire safety processes, fire safety records, and fire safety reviews of building construction and design projects.

Samples were selected from fiscal year 2022-2023.

Audit Findings

Governance and Oversight

The audit team expected to find that an adequate and effective governance and oversight structure is in place to support the fire safety program.



Finding: Although CSC has a functioning governance and oversight structure in place to support the fire safety program, additional oversight procedures are necessary to support the consistent implementation of the fire safety program.

National Oversight and Real Property Review

- NHQ provides governance and oversight of fire safety by establishing fire safety priorities/policy/guidance, facilitating periodic meetings with stakeholders, monitoring elements of fire loss and incident reporting, and setting technical specifications for key equipment. However, there are challenges associated with the fire safety policy and procedures, and monitoring and reporting which are presented on pages 11 and 16.
- The governance and oversight structure within the fire safety program is reviewed periodically and updates are made to reflect the changing needs through CD 345 and the FSM.
- As per the FSM, projects that impact fire safety life and safety components such as new building construction and changes to fire protection systems should be highlighted to the NHQ Fire Protection Engineering Group for review and comment prior to construction.
 - Only 50% (5/10) of the real property projects sampled that met these requirements were highlighted to the NHQ Fire Protection Engineering group for review and approval prior to construction.
 - At one institution, a building project was initiated that did not meet the *National Building Code of Canada* nor did it involve the NHQ Fire Protection Engineering Group at the outset. This resulted in a project of significant cost that was not fit for its intended purpose.

Occupational Health and Safety

- OHS committees are established at the national, regional and institutional levels with appropriate reporting relationships as per the OHS Program Guidelines (GL) 254-1 – *Occupational Health and Safety Program*. However, institutional Terms of Reference do not clearly specify fire safety objectives or outline monitoring responsibilities related to the operation of the fire safety program as required by the FSM.

Without sufficient oversight, CSC may not be aware of current and emerging fire safety risks and therefore may not be able to plan for, mitigate, and respond to fire emergencies, which may lead to increased risk of loss of life, property damage, and have adverse operational impacts.

Policies and Procedures

The audit team expected to find that CDs, GLs and manuals are clear, support fire safety, and align with applicable legislation.



Finding: CSC has a fire safety policy framework in place that is clear and supports fire safety. However, a key gap between the CSC policy framework and Treasury Board requirements related to building evacuations exists.

CSC Fire Safety Policies and Procedures

- The audit team reviewed and compared the contents of the CSC fire safety policy framework, which includes CD 345 and the FSM, to the following legislation and central agency requirements:
 - *National Fire Code of Canada*
 - *National Building Code of Canada*
 - *Corrections and Conditional Release Act*
 - *Corrections and Conditional Release Regulations*
 - *Canada Labour Code (Part II)*
 - *Canada Occupational Health and Safety Regulations*
 - *TB Directive on Building Emergency and Evacuation Teams*
 - *TB Directive on the Management of Real Property*
- The audit team noted that the CSC policy framework is generally clear, in compliance with applicable legislation, and meets the CSC fire safety needs with one major exception.
- The *TB Directive on Building Emergency and Evacuation Teams*, which replaced the *TB Standard for fire safety planning and fire emergency organization - Chapter 3-1* requires an evacuation and a lockdown or shelter-in-place exercise to be conducted at least once every calendar year in all buildings where persons are employed. While the FSM does require fire drills to occur, it does not indicate the need for one of those fire drills to be an evacuation and a lockdown or shelter-in-place exercise. This has led to an inability to demonstrate compliance with this requirement despite fire drills occurring as required in the FSM as sites are not capturing this information in their reporting on fire drills.
- The FSM does not clearly indicate the frequency for real fire drills versus paper-based fire drills. This has led to 44% (36/81) of the buildings selected completing only paper-based fire drills. Fire drill compliance information is presented in more detail on page 18.

A policy framework that is not in full alignment with central agency requirements and an over-reliance on paper-based fire drills may increase the risk that CSC is not sufficiently prepared to respond and evacuate in the case of a fire emergency.

Roles and Responsibilities

The audit team expected to find that roles and responsibilities are adequately assigned to, clearly communicated with, and well understood by staff.



Finding: Fire safety roles and responsibilities, with the exception of forest fires, are defined in the CSC policy framework and are understood by NHQ staff. However, not all key roles and responsibilities are defined in job descriptions and roles and responsibilities at operational sites are not consistently defined, clear, and understood.

Documentation

- The audit team reviewed job descriptions related to fire safety roles and responsibilities for all fire safety personnel. For some key fire safety site-level roles (e.g., Assistant Warden, Operations; Correctional Manager), the standardized job descriptions did not reflect any of the current fire safety responsibilities as defined in the FSM. The lack of clear job descriptions for critical roles at the operational level is a risk to the fire safety program.
- The audit team also reviewed MOUs with local fire departments. These documents exist at all reviewed sites and clearly define the roles and responsibilities of the local fire department and site management were generally aware of these MOUs.

Clarity of Roles and Responsibilities

- Fire safety roles and responsibilities are understood by NHQ staff; however, operational staff at sites did not consistently feel their roles and responsibilities were clearly communicated and understood. Only 54% (27/50) of operational staff at sites interviewed felt their fire safety roles were clearly defined and communicated. High staff turnover, knowledge retention challenges, and a reactive approach to fire emergencies were some of the reasons noted.
 - Although a Service Level Agreement (SLA) was designed to ensure clarity regarding the operational priorities and expectations between regional and operational staff at sites, recent changes to the SLA have shifted responsibilities (e.g., Self-Contained Breathing Apparatuses (SCBA) maintenance) to operational staff without additional resources.
 - The changes to the SLA have also required an adjustment to how CSC staff manage fire-related processes.
- Non-CO supervisory staff complete National Training Standards (NTS) fire safety training at the Institutional Head's discretion. Compliance results were low for this group. Training is presented in more detail on page 14.

Roles and Responsibilities (cont.)

Forest Fires

- The roles and responsibilities for the planning, mitigation and response to forest fire emergencies are not defined within the fire safety policy framework or CD 600 – *Management of Emergencies in Operational Units*.
- Contingency plans, with a specific section on emergencies that address evacuation procedures and reference to the fire safety plan, exist at all sites.
 - 90% (9/10) of selected sites have contingency plans which clearly outline who is to take charge and direct activities during a fire emergency.
 - However, only 10% (1/10) of selected sites' contingency plans included forest fire procedures, despite four of those sites being in areas of proximity to large forest fires that occurred between 2012 and 2023.¹

Without clear roles and responsibilities, management and staff may not understand their respective roles in the event of a fire emergency which may increase the risk of loss of life, property damage, and operational impacts.

Fire Safety Training

The audit team expected to find that CSC has an adequate national fire safety training program in place for, and taken by staff prior to assuming responsibilities, and that offenders are made aware of fire safety procedures.



Finding: CSC has an adequate national fire safety training program in place that meets legislative and CSC policy framework requirements. However, there are gaps in compliance due to the discretionary nature of the training for certain groups and there is inconsistent fire safety orientation provided to offenders.

Site-Level Training

- As per the NFCC, supervisory staff shall be trained in the fire emergency procedures described in the fire safety plan before they are given any responsibility for fire safety.
- While the names of fire training courses in some cases vary by region, CSC provides an adequate fire safety training program by having the following required training:
 - Fire Safety and SCBA NTS Training
 - FEO Training (Fire 5)
 - Initial Fire Prevention Training (Fire 1)
- To meet legislative requirements, and to understand and follow CSC's FSM, all the fire safety training listed above needs to be taken. That said, only one of the courses, Fire Safety and SCBA, is an NTS requirement.

Monitoring and Tracking

- The FEO Training (FIRE 5) and Initial Fire Prevention Training (FIRE 1) help to ensure staff follow the requirements of the FSM. As these are non-NTS requirements, the compliance, monitoring, and tracking of these training items is less rigorous and it is up to the individual sites to maintain records. However, these courses are necessary to meet legislative requirements.
- Only 30% (3/10) of the selected sites could provide any evidence of completion of FEO training. Of the three sites, two could identify the staff who completed the training and date of completion, while the remaining site provided a generic attestation that the necessary staff were trained.

Fire Safety Training (cont.)

Compliance Rates

- While CO staff have training compliance rates ranging from 70 to 90% per site under the NTS, non-CO supervisory staff are not consistently completing required fire safety training to meet legislative requirements at the sites visited.
 - 20% (2/10) of sampled Assistant Warden, Management Services (AWMS) completed the training.
 - 60% (6/10) of sampled Assistant Warden, Operations completed the training.
 - 20% (2/10) of sampled Deputy Wardens completed the training.
 - 30% (3/10) of sampled Wardens completed the training.
- The NFCC requires supervisory staff to be trained in the fire emergency procedures before they are given any responsibility for fire safety. The discretionary nature of training for supervisory staff is a key driver of low compliance amongst this group. This is an important risk and oversight, given supervisory staff's role as part of the contingency plan should a major fire event occur.

Offender Awareness

- The FSM requires offenders to receive orientation/information in fire alarm system operation, fire emergency procedures, evacuation and fire hazard control. The inmate handbook is the primary means of communicating this information.
- Fire safety orientation/information is not always provided to inmates in compliance with FSM requirements.
 - 70% (7/10) of sites had inmate handbooks which contain the necessary information as defined in the FSM.
 - 20% (2/10) of sites had inmate handbooks which reference fire safety but do not include all the FSM requirements.
 - 10% (1/10) of sites did not include fire safety at all in the inmate handbooks.

Sufficient training allows CSC to position itself to plan for, mitigate and respond to fire safety emergencies and to ensure CSC is compliant with legislative and policy requirements.

Monitoring and Reporting

The audit team expected to find that CSC has a systematic approach in place to monitor and report on fire safety risks and functions and to effectively measure the performance of the fire safety program in place.



Finding: A systematic approach is in place to monitor and report on some fire safety risks and functions, including fire incidents, investigations, and the CORR exercise. However, there is an opportunity to improve how fire safety data is used to effectively measure fire safety performance and support management decision-making.

Performance Measurement

- A fire incident monitoring and reporting process is in place at NHQ in accordance with the FSM. However, CSC has not implemented a performance measurement framework to track, benchmark and improve the overall fire safety approach at CSC in a systematic manner.

Incident Reporting

- A review of fire reports indicated two additional fire incidents, in addition to the 74 fire incidents reported within the tracker, which were not reflected in the NHQ fire incident reports tracker in the 2022 to 2023 fiscal year. The tracker is the NHQ Fire Protection team's method of compiling all fire reports from CSC sites.
- As per the FSM, fires are considered an incident and must therefore be investigated and reported in a situation report (SITREP) which provides senior management with relevant information on incidents. Based on a review of SITREPs, none of the sampled fire incidents were reported in the SITREP and fire incidents are not included in the SITREP writing guide.

CORR Monitoring

- NHQ monitoring of operational compliance from the CORR exercise takes place as prescribed and results are reported to senior management in a timely manner. While CORR approaches change between years, CORR non-compliance rates have increased from 2018 to 2022 even after accounting for these changes in the approach. A comparison of audit findings and 2022 CORR results is presented in Annex E.

Equipment Monitoring

- The Maximo maintenance management software has been launched nationally and is used to help monitor and track equipment and systems to ensure compliance with applicable standards. The implementation status of Maximo varies across regions and is not used consistently. If fully implemented, it could provide a systematic approach for the tracking and monitoring of fire safety equipment and systems. It could also help improve the timeliness of response rates to deficiencies, which are presented in detail on page 19.
- [REDACTED]

[REDACTED]

Fire Safety Planning

The audit team expected to find that for each operational unit, fire safety plans (FSPs) are adequately developed and documented by qualified personnel, based on risk and security requirements, reviewed by appropriate individuals, and communicated to and well understood by CSC staff.



Finding: FSPs are developed and documented in most cases to meet FSM requirements. However, there is a lack of evidence of oversight and approval by qualified personnel.

Fire Safety Plan

- As directed in the FSM, a FSP must be developed for each building within the operational unit to outline the equipment and procedures specific to that building. Although all sites visited had a FSP available, 20% (2/10) of sites did not meet the FSM requirements to have a separate FSP for each building.
- The FSM requires sign-offs by the Fire Safety Program Coordinator (AWMS), Institutional Head, and the RFSO for a FSP to be approved. 70% (7/10) of sites visited did not meet this requirement to have the appropriate FSP sign-offs.
- Based on interviews conducted, institutional management did not feel FSPs were sufficiently clear, and some appeared to be unaware or unfamiliar with their own roles related to the FSPs. 60% (6/10) of Wardens interviewed and 30% (3/10) of AWMS interviewed stated that the FSP is not clear and customized enough to meet the site's operational and fire safety needs.
- As presented on page 14 (Fire Safety Training), NTS fire safety training requirements for site management is at the Institutional Head's discretion; as a result, some key personnel do not take training and are not aware of their roles and responsibilities.

Given that not all sites comply with the FSM requirements on the preparation, review, and approval of FSPs, there is a risk that the fire emergency procedures are not sufficient and building-specific for staff to refer to in the event of a fire, which may increase the risk of loss of life, property damage, and adverse operational impacts.

Fire Drills

The audit team expected to find that fire drills and mock evacuations are conducted and reported in accordance with the CSC FSM and central agency requirements.



Finding: Although sites are meeting the monthly fire drill frequency requirement as per the FSM, CSC is not documenting evacuation and lockdown or shelter-in-place exercises in alignment with the revised TB Directive.

Central Agency Compliance

- The *TB Directive on Building Emergency and Evacuation Teams*, which replaced the *TB Standard for fire safety planning and fire emergency organization - Chapter 3-1* requires an evacuation and a lockdown or shelter-in-place exercise to be conducted annually in all buildings where persons are employed. This change has resulted in the Correctional Operations and Programs Sector playing a key role for this requirement, which is no longer solely focused on fire safety.
- The documentation required for the FSM mandated fire drills does not provide enough information to support whether an evacuation and a lockdown or shelter-in-place exercise was completed as per *TB Directive on Building Emergency and Evacuation Teams* therefore compliance cannot be demonstrated. The scenario information provided in almost all cases did not note or explain how an evacuation and a lockdown or shelter-in-place exercise occurred.

Real versus Paper-based fire drills

- The audit selected 10 buildings per site (where applicable) to determine the frequency of real versus paper-based fire drill, evacuation and lockdown or shelter-in-place exercises:
 - 30% (3/10) of sites conducted real exercises in all sampled buildings during the year
 - 60% (6/10) of sites conducted real exercises at some sampled buildings during the year
 - 10% (1/10) of sites did not conduct any real exercises in the sampled buildings (i.e., all fire drill reports reviewed were paper-based exercises)

FSM Compliance

- Although not all sites can demonstrate they have conducted an evacuation and a lockdown or shelter-in-place exercise, they do adhere to the monthly fire drill frequency specified in the FSM. The FSM does not outline a requirement for real fire drills versus paper-based fire drills.
- Per the FSM, the RFSO shall be included in fire drills at least once annually when possible, and the local fire department shall be invited to attend at least one fire drill on an annual basis. Based on fire drill reports obtained, there is no record (0/10) of fire drill monitoring/attendance by the RFSO or the local fire departments.
- Sites shall develop site-specific fire drill schedules as per the FSM. Based on documentation obtained, sites do not consistently maintain a fire drill schedule, with 50% (5/10) of sites visited maintaining documented schedules.

Lack of alignment between the revised TB directive and the FSM may increase the risk of non-compliance and inconsistency in how evacuation exercises are performed across operational sites. This creates a disparity in how sites are prepared to respond to emergencies.

Fire Safety Inspections and Deficiencies

The audit team expected to find that fire safety inspections are carried out by qualified personnel in accordance with the CSC FSM and that identified deficiencies are remediated in a timely manner.



Finding: Fire safety inspections are carried out by qualified personnel in accordance with the CSC FSM. Issues were identified related to record keeping, documentation, and sites not addressing deficiencies in a timely manner.

Formal Semi-Annual Inspections

- As per the FSM, all buildings and areas of the operational site shall be inspected for fire safety by a qualified person at regular intervals but not less than semi-annually. Based on a review of inspection reports, inspections of CSC facilities, fire safety systems, and equipment are being carried out by third-party contractors and RFSOs in accordance with the requirements.
- Although inspections are being carried out by qualified personnel, only 40% (4/10) of sites visited demonstrated monitoring and tracking of fire safety deficiencies identified from formal semi-annual inspections.

Daily Visual Inspections

- As per the FSM, all buildings, areas, cells, bedrooms and dormitories, shall be inspected daily by the FEO or "Alternates" to ensure day-to-day hazards are corrected without delay and that fire safety equipment and building features are in apparent good order. The FSM requires any deficiency identified from daily visual inspections to be logged in a Fire Safety Exception Report, properly dated, and described with an action statement to resolve the situation. Based on the documentation obtained, the daily visual inspection logs are generally not maintained, and sites were unable to provide any evidence of these examinations occurring.

Deficiencies

- As per the FSM, all identified deficiencies must be documented and addressed within a specified timeframe based on their associated risk level. Critical or high, medium, or low-risk deficiencies require immediate, 5-day, or 30-day resolutions, respectively.
- Sites that fully implemented Maximo, a computerized maintenance management system, had significantly more timely responses to deficiencies that were identified (80 to 100% timeliness compliance rates), whereas sites that had not fully implemented Maximo had timeliness compliance rates of 0 to 40%.

Properly documented records can help identify and address issues in a timely manner, and help CSC to better plan for, mitigate, and respond to fire emergencies. Without addressing deficiencies in a timely manner and/or documenting actions taken, it may increase the risk of loss of life, property damage, compliance risk, and may have adverse operational impacts.

Audit Conclusion

Audit Conclusion

CSC has implemented parts of a management framework to support fire safety; however, there are several gaps to be addressed to ensure that CSC has an effective fire safety program. These areas include:

- aligning the CSC policy framework with the revised TB requirements
- clearly defining roles and responsibilities
- updating training requirements
- improving monitoring and reporting of key fire information to support management decision-making

CSC complies with many key requirements of the fire safety program. To better mitigate the risk of fire incidents, there are still areas that need to be addressed. These areas include:

- ensuring all operational units have documented fire safety plans
- conducting evacuation and lockdown or shelter-in-place exercises in accordance with the revised TB requirement
- improving record keeping and fire safety document tracking
- addressing deficiencies in a timely manner

Recommendations and Management Response

Recommendation	Management Response
<p>The Assistant Commissioner, Corporate Services should provide greater oversight of key fire safety controls identified throughout this report to improve the effective implementation of the FSM and CD 345, and to resolve persistent fire safety non-compliance issues further identified in Annex E.</p>	<p>We agree with Recommendation 1.</p> <p>By 2025-11-30, the ACCS will ensure better tracking and resolution of non-compliances in the following ways:</p> <ol style="list-style-type: none"> 1. The ACCS will commit to ensuring that National Headquarters, Regional Fire Safety Officers (NHQ RFSO) resource will attend Regional Health and Safety Policy Committee (RHSPC) meetings to discuss and monitor resolution of persistent fire safety non-compliances as identified to track the resolution process of the non-compliance issues. 2. The ACCS will create a national reporting structure based on information submitted to the RFSO. (This work will be done in conjunction with Recommendation 4 actions: Engineering and Maintenance (E&M) Division will create a national reporting structure).
<p>The Assistant Commissioner, Corporate Services in collaboration with the Assistant Commissioner, Correctional Operations and Programs should strengthen the policy framework to address issues highlighted by the audit, including:</p> <ul style="list-style-type: none"> • determining who is responsible for ensuring the <i>TB Directive on Building Emergency and Evacuation Teams</i> requirements are met and ensuring that the scenarios and supporting documentation clearly capture the requirements • updating the policy framework to include roles and responsibilities for the planning, mitigation, and response to forest fires and providing guidance to sites in this area • documenting minimum requirements for real versus paper-based fire drill frequency in the FSM 	<p>We agree with the strengthening of the policy framework issues as highlighted.</p> <p>By 2026-06-30, the ACCS, in collaboration with ACCOP, will:</p> <ol style="list-style-type: none"> 1. Update the FSM to reflect current policy requirements relating to TB Building Emergency and Evacuation Team (BEET) Directive. <p>With respect to the recommendation on forest fire guidance to sites:</p> <ol style="list-style-type: none"> 2. Update the policy framework to include roles and responsibilities for the planning, mitigation, and response to forest fires and providing guidance to sites in this area in the following way: <ul style="list-style-type: none"> • Fire Safety Manual (Published by E&M): Reference to National Research Council (NRC) Wildfire Urban Interface (WUI) standards. • Technical Criteria Document (Published by Facility Planning and Standards (FPS) Division): Reference to NRC Wildfire Urban Interface standard for construction material recommendation. <p>Additionally, the DGTSF will assist Correctional Operations and Programs (COP) Sector with the planning of emergency evacuation contingency plans through reviews and recommendations as outlined in CD-600 Management of Emergencies in Operational Units (including consultation and coordination with external partners).</p>

Recommendations and Management Response (cont.)

Recommendation	Management Response
<p>The Assistant Commissioner, Corporate Services should ensure legislative requirements are met by making fire safety training mandatory for all supervisory staff (including non-CO supervisory staff) with fire safety responsibilities.</p>	<p>We agree to working with Learning and Development (L&D) Branch to ensure mandatory training for all supervisory staff with fire safety responsibilities.</p> <p>By 2026-12-31, the ACCS will, in collaboration with Assistant Commissioner, Human Resource Management (ACHRM):</p> <ol style="list-style-type: none"> 1. Commit to assisting Learning and Development (L&D) Branch to include fire safety in National Training Standards (NTS) for General fire safety training as well as Fire Emergency Officer (FEO) training. 2. Issue a memo to L&D indicating mandatory training requirements for all staff including supervisory staff. <p>Additionally, recommend that AWMS/Assistant Warden, Operations (AWO) to provide site-specific and building-specific info based on the institution's Fire Safety Plans.</p>
<p>The Assistant Commissioner, Corporate Services should implement a performance measurement framework that includes performance indicators linked to data sources and requires periodic reporting of performance information to management of the Fire Safety Program at NHQ.</p>	<p>We agree to the implementation of a measurement framework for the periodic reporting of performance information on fire safety. By 2026-12-31, the ACCS will:</p> <ol style="list-style-type: none"> 1. In collaboration with Senior Deputy Commissioner (SDC) Sector, develop an IT-based solution for stronger/clearer reporting of annual deficiencies and issues. <p>Additionally, it is recommended to the audit group that the ACHRM include key performance indicators associated with fire safety compliance within PSPM.</p>

Recommendations and Management Response (cont.)

Recommendation	Management Response
<p>The Assistant Commissioner, Correctional Operations and Programs should:</p> <ul style="list-style-type: none"> • review and revise the existing emergency evacuation contingency plans to ensure that they address forest fire emergencies when and where appropriate • revise the SITREP writing guide to align with FSM requirements • work in collaboration with the Fire Safety Program to identify requirements for monitoring and reporting fire incidents and, if required, implement new mechanisms to achieve these requirements 	<p>Supported: Pursuant to Commissioner’s Directive 568-1 – Reporting and Recording of Security Incidents, there are various incident types under which a fire may be reported, depending on the circumstances. To enhance monitoring in the short-term, the National Monitoring Centre has reviewed and amended the SITREP writing guide to specify that any incident involving a fire will be included in the SITREP. By the end of October 2026, the Preventive Security and Intelligence Branch will collaborate with the Technical Services and Facilities Branch to assist them in identifying and implementing appropriate reporting mechanisms for monitoring fire incidents, including associated policy and OMSR changes if required.</p>
<p>The Regional Deputy Commissioners should communicate and enforce fire safety requirements defined in the FSM and CD 345 by ensuring that:</p> <ul style="list-style-type: none"> • institutional OHS Committees update their Terms of Reference to outline fire safety responsibilities that align with the FSM • all construction projects that impact fire safety systems are highlighted to the Fire Protection Engineering Group at NHQ, for review and comment prior to construction • training is provided to all supervisory staff prior to assuming fire safety responsibilities, and evidence of training completion is maintained to demonstrate compliance with this requirement • offenders receive fire safety orientation/information as required by the FSM • each building has a detailed fire safety plan which addresses that building’s unique fire safety needs and is signed off in alignment with the FSM • fire drills are completed as required and documentation is maintained to demonstrate compliance with requirements • there is completion of daily visual inspection logs by operational staff • a method for monitoring and tracking fire safety deficiencies identified from inspections and investigations is implemented and functioning as intended 	<p>Management has accepted the recommendation, and separate management action plans have been created in response to the recommendation with all actions to be implemented by April 2026.</p>

Overall Management Response

Management has prepared a detailed Management Action Plan to address the issues raised in the audit and associated recommendations. The Management Action Plan is scheduled for full implementation by December 31, 2026.

Annexes

Annex A: Audit Objectives and Audit Criteria

Objective	Criteria
Objective 1 To provide reasonable assurance that a management framework is in place to support an effective fire safety framework.	1.1 An adequate and effective governance and oversight structure is in place to support the fire safety program.
	1.2 Commissioner's Directives, guidelines and manuals are clear, support fire safety and comply with applicable legislation.
	1.3 Roles and responsibilities are adequately assigned to, clearly communicated with, and well understood by staff.
	1.4 CSC has an adequate National fire safety training program in place for, and taken by, staff and offenders prior to assuming responsibilities.
	1.5 A systematic approach is in place to monitor and report on fire safety risks and functions, to effectively measure the performance of the fire safety program in place, and to ensure that CSC is in compliance with applicable legislation.
Objective 2 To provide reasonable assurance that CSC is complying with key requirements of the fire safety program to mitigate the risk of fire and reduce incidences within the operational unit.	2.1 For each operational unit, fire safety plans are adequately developed and documented by qualified personnel, based on risk and security requirements; reviewed by appropriate individuals; communicated to and well understood by CSC staff.
	2.2 Fire drills and mock evacuations are conducted and reported in accordance with CSC's Fire Safety Manual.
	2.3 Fire safety inspections are carried out by qualified personnel in accordance with CSC's Fire Safety Manual; deficiencies identified are remediated in a timely manner.

Annex B: Sites Selected

Regions	Sites
Atlantic	Parrtown Community Correctional Centre
	Dorchester Penitentiary
	Springhill Institution
Quebec	Archambault Institution
	Joliette Institution for Women
	Regional Reception Centre
Ontario and Nunavut	Beaver Creek Institution (virtual visit)
Pacific	Kwikwèxwelhp Healing Village
	Kent Institution
	Pacific Institution – Regional Treatment Centre

Annex C: Legislation and Policy Framework

Legislation

Legislative and policy requirements that govern fire safety are contained within:

- *Canada Labour Code*
 - Section 125 applies to fire safety.
- *Canada Occupational Health and Safety Regulations*
 - Sections 10.45, 14.2, and 17 apply to fire safety.
- *Corrections and Conditional Release Act*
 - Section 70 applies to fire safety.
- *Corrections and Conditional Release Regulations*
 - Section 83 applies to fire safety.
- *National Fire Code of Canada*
 - This code contains technical provisions that regulate activities related to the construction, use or demolition of buildings and facilities, the condition of specific elements of buildings and facilities, and the design or construction of specific elements of facilities related to certain hazards.
- *National Building Code of Canada*
 - This code contains technical provisions for the design and construction of new buildings and applies to the alteration, change of use, and demolition of existing buildings.

Central Agency Requirements

Although there are no longer TB policies or directives specific to fire safety, the following policy instruments relate to the subject:

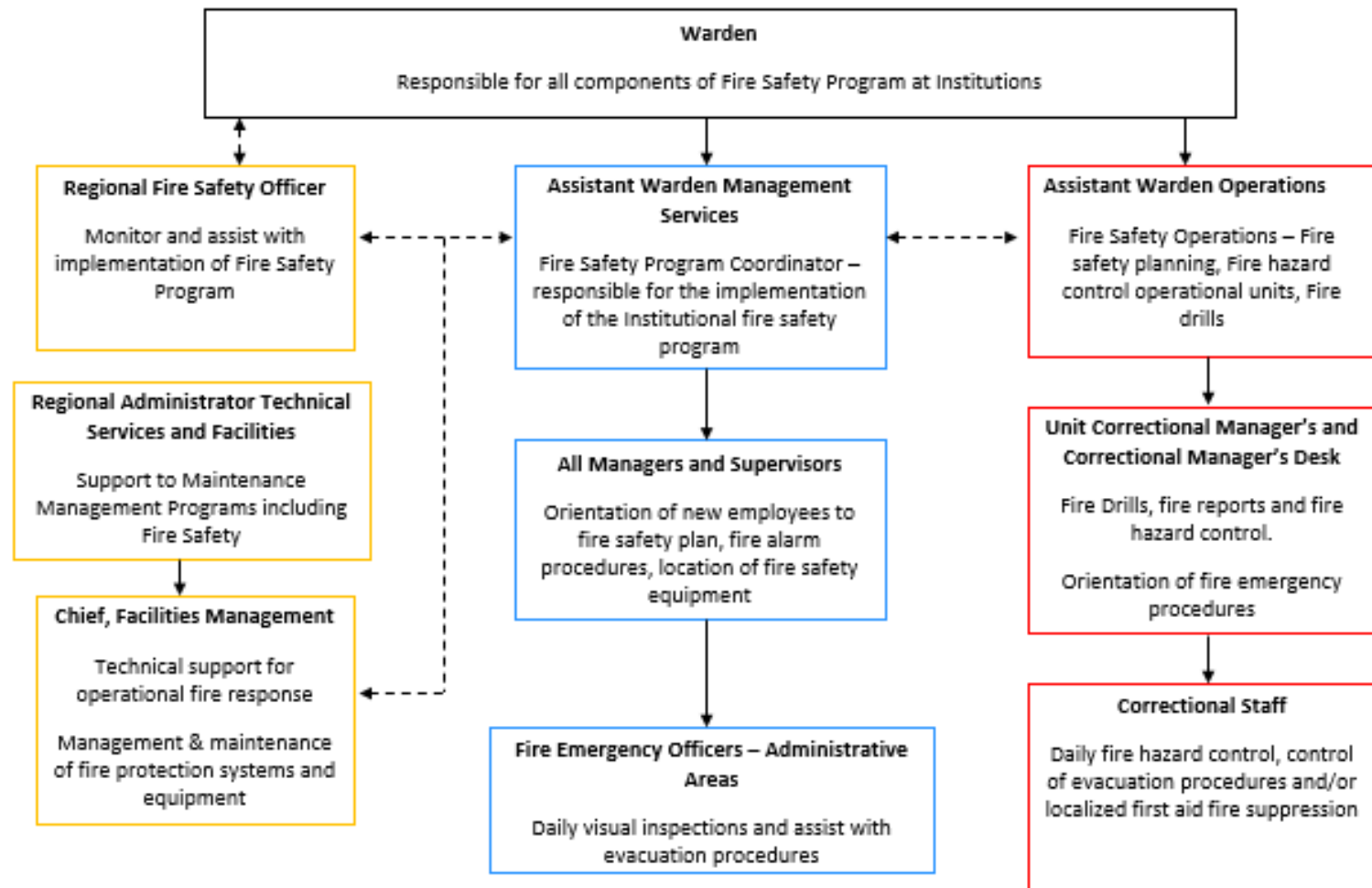
- *Policy on People Management;*
- *Directive on Building Emergency and Evacuation Teams;* and
- *Directive on the Management of Real Property.*

CSC Policy Framework

The CSC policy devoted to fire safety is CD 345. The CSC FSM is the key driver for fire safety and ensures that the operational units' fire safety response is commensurate with its risk environment. In addition, other requirements applicable to fire safety are included in the following policy instruments:

- CSC Technical Criteria for Correctional Institutions; and
- GL 254-1 *Occupational Health and Safety Programs.*

Annex D: Roles and Responsibilities – Institutions



Annex E: Comparison of Audit Findings and CORR Results

Overall CORR compliance rates from 2018 to 2022 have declined, and some issues identified in 2018 remained in 2022. The main deficiencies included inconsistent data management and storage practices for key fire safety records (e.g. fire drill records, training records), and many sites conducting paper fire drills rather than real evacuations.

While CORR provides a degree of assurance, it is conducted by program management and, consequently, is not intended to be an independent form of assurance.

Fire Safety CORR Criteria	Summary of CORR (2022) Non-Compliance	Audit Findings
Adequate fire safety planning	<ul style="list-style-type: none"> Some fire safety plans were outdated and/or not reviewed annually as required. Many fire drills are done as paper-based exercises rather than practical ones as required. No training confirmations/attestations provided by the site. Communications between different members of the institutional hierarchy are inconsistent and, as such, compliance requirements are being missed. Damaged/obstructed/missing equipment and/or excess fire load in certain cells/units. Lack of inspection records being uploaded, tracked, and/or provided, resulting in inability to verify information. Lack of documentation provided to demonstrate follow-ups with deficiencies. Data management and storage practices are inconsistent within institutions. 	<p>Audit findings are consistent with CORR results. Record keeping is a major cause of non-compliance in several fire safety areas, including training, monitoring and reporting, fire safety plans, and fire drills.</p>
Adequate fire safety training, fire safety awareness programs, and fire safety orientation		
Adequate fire hazard control and inspections		
Adequate inspections, maintenance of fire protection equipment and systems, and adequate fire equipment standards		
Procedures in place for record keeping and investigating and reporting of fires		

Annex F: Statement of Conformance

This internal audit engagement was conducted in conformance with *the International Standards for the Professional Practice of Internal Auditing*, the Treasury Board of Canada *Policy on Internal Audit*, and the Treasury Board of Canada *Directive on Internal Audit*, as supported by the results of the Quality Assurance and Improvement Program of Correctional Service Canada.

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