

IMPAIRED PROTECTION SYSTEM REPORTING INSTRUCTIONS

To report an impairment, please go to www.mittracking.com and log in using the following credentials:

Username: hcpptest

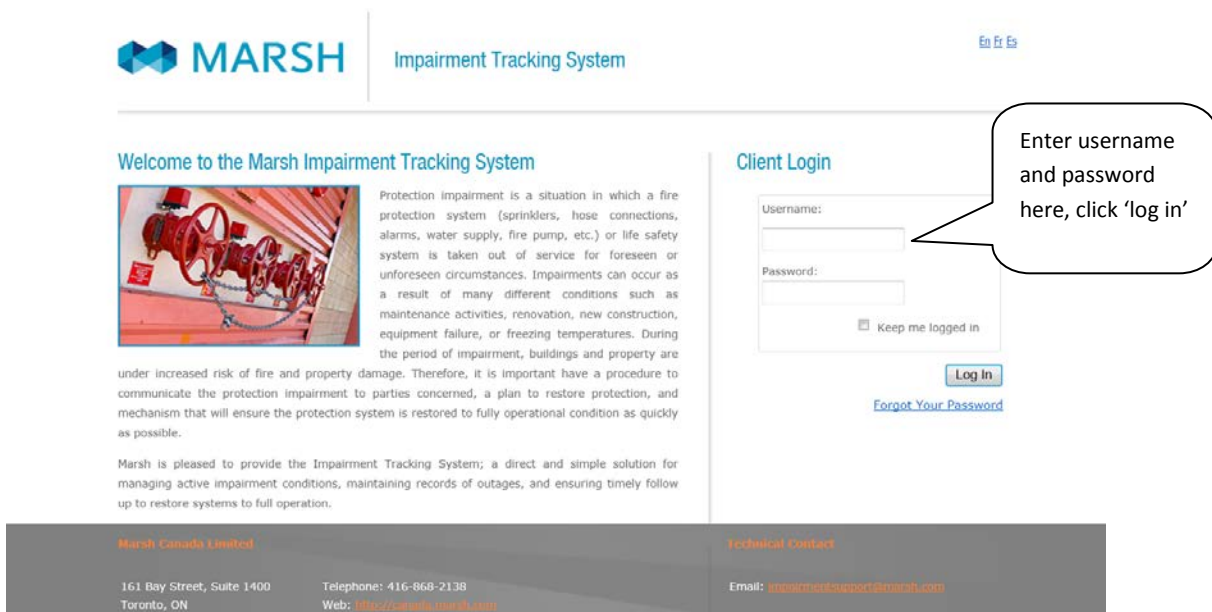
Password: test

For help, please email impairmentsupport@marsh.com and state your name, phone number, health authority and facility name along with your query.

Website User Instructions:

Go to www.mittracking.com (shown below)

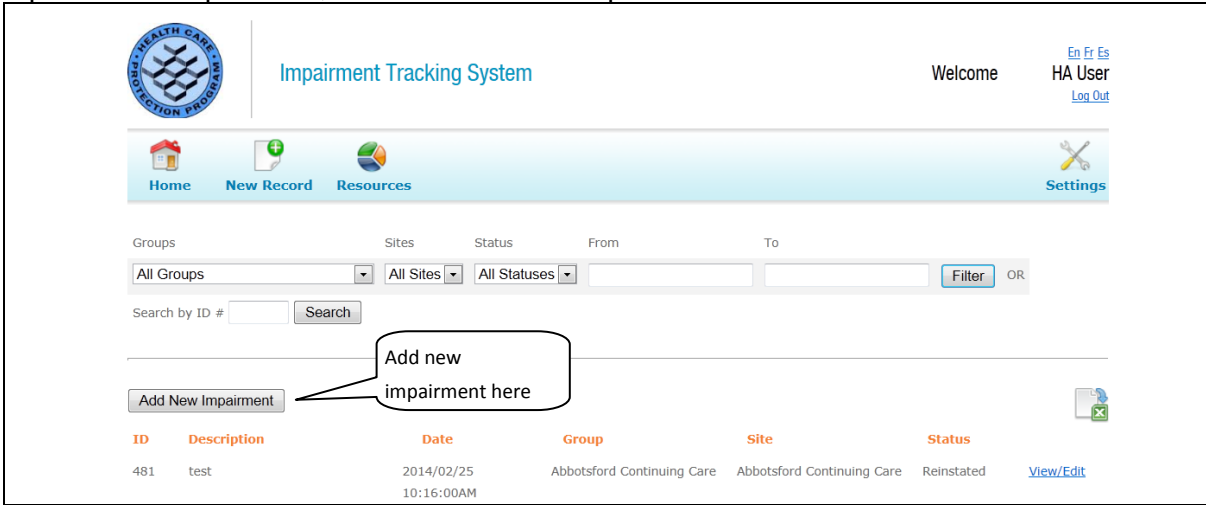
Enter your username and password



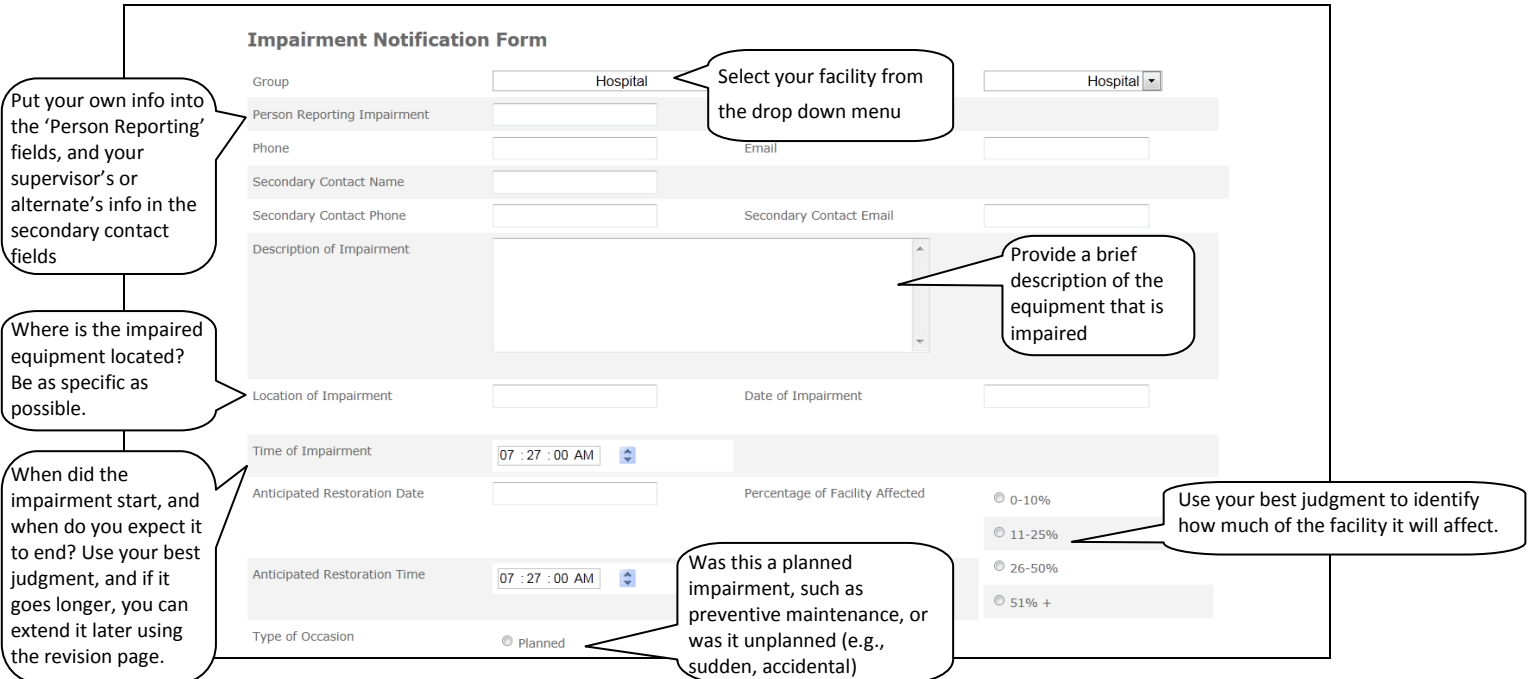
The screenshot shows the Marsh Impairment Tracking System website. The header includes the MARSH logo and the text "Impairment Tracking System". The main content area is titled "Welcome to the Marsh Impairment Tracking System" and features a photograph of fire equipment. Below the photo is a paragraph explaining protection impairment and its risks. To the right is a "Client Login" form with fields for "Username:" and "Password:", a "Keep me logged in" checkbox, and a "Log In" button. A "Forgot Your Password" link is also present. A callout bubble points to the login fields with the text "Enter username and password here, click 'log in'". The footer contains contact information for Marsh Canada Limited, including the address (161 Bay Street, Suite 1400, Toronto, ON), telephone (416-868-2138), website (http://canada.marsh.com), and technical contact email (impairment-support@marsh.com).

Submitting a new impairment

Once logged in, you will see this screen. A list of all previously submitted impairments is listed. To report a new impairment, click on 'Add New Impairment' button.



Fill in the form with all the information you have available. All fields are mandatory. Click 'save' at the bottom of the form.



An email containing a summary of the impairment will automatically be sent to the person(s) listed in 'email' on the form, as well as other administrative users.

Revising a previously submitted impairment

Once an impairment has been submitted, it cannot be changed. If the details of your impairment have changed, you can submit a 'Revision' to the impairment. This is used in the case that an impairment will last longer than originally anticipated. If you do not submit a revision before the anticipated restoration date, you will be reminded by email and if no action is taken a follow up email will be sent to your supervisor. Therefore, always submit details of a revision if a reinstatement is going to be delayed.

Find your previously submitted impairment in the list by using the filters provided at the top of the page, click view/edit on your impairment record.

The screenshot shows a web interface for managing impairments. At the top, there are filter options for Groups, Sites, Status, From, and To. Below these are dropdown menus for 'All Groups', 'All Sites', and 'All Statuses', followed by input fields for 'From' and 'To'. A 'Filter' button is present, along with an 'OR' option and a search box for 'Search by ID #'. A callout bubble points to the 'Filter' button and 'OR' text, stating: 'Filter by location, status, or find the record by entering the ID number.' Below the filters is an 'Add New Impairment' button. The main area contains a table with columns: ID, Description, Date, Group, Site, Status, and a 'View/Edit' link. A callout bubble points to the 'View/Edit' link, stating: 'View/edit will open your previously submitted impairment.'

ID	Description	Date	Group	Site	Status	
481	test	2014/02/25 10:16:00AM	Continuing Care	Continuing Care	Reinstated	View/Edit

Once the impairment form is open, note the 'Revision Log' button at the top of the page. Click that to go to the revision page. Enter details of your revision and click 'save'. As many revisions as necessary can be added to this page.

The screenshot shows the 'Revision Log' form. At the top, there are three tabs: 'Notification', 'Revision Log', and 'Reinstatement'. A callout bubble points to the 'Revision Log' tab, stating: 'Navigate to the Revision Log tab.' Below the tabs are input fields for 'Anticipated Restoration Date', 'Anticipated Restoration Time' (set to 07:41:00 AM), and 'Reason For Revision'. There is also a 'Comments' text area. A callout bubble points to the 'Reason For Revision' field, stating: 'Enter revision details then click 'save''. Below the form is a 'Save' button. At the bottom, there is a table showing the revision log entries.

Reason For Revision	Anticipated Restoration Date	Comments
reason	2/25/2014 4:19:00 PM	comments to reason

Reinstating an impairment

Find your previously submitted impairment in the list by using the filters provided at the top of the page, click view/edit on your impairment record.

The screenshot shows the top section of the impairment tracking system. It includes filter dropdowns for 'Groups' (All Groups), 'Sites' (All Sites), and 'Status' (All Statuses). There are also input fields for 'From' and 'To' dates, and a 'Filter' button. Below these is a search box for 'Search by ID #' with a 'Search' button. A table lists impairments with columns for ID, Description, Date, Group, Site, and Status. A 'View/Edit' link is present for the first record. Callout boxes provide instructions: one points to the 'Filter' button, stating 'Filter by location, status, or find the record by entering the ID number.' Another points to the 'View/Edit' link, stating 'View/edit will open your previously submitted impairment.'

ID	Description	Date	Group	Site	Status	
481	test	2014/02/25 10:16:00AM	Continuing Care	Continuing Care	Reinstated	View/Edit

Once the impairment form is open, note the 'Reinstatement' button at the top of the page. Click that to go to the reinstatement page. Enter the details of the reinstatement (static pressure and sprinkler system fields are optional) and click 'save'. Your impairment is now complete.

The screenshot shows the 'Reinstatement' form in the impairment tracking system. The top navigation bar includes 'Home', 'New Record', 'Print', 'Resources', and 'Settings'. The 'Reinstatement' tab is selected. The form contains several input fields: 'Date of Restoration', 'Time of Restoration' (set to 07:54:00 AM), 'Static Pressure', 'Sprinkler System - 2 inch drain test performed', 'Checked By', and 'Date'. A 'Save' button is at the bottom. Callout boxes provide instructions: one points to the 'Reinstatement' tab, stating 'Navigate to the Reinstatement tab.' Another points to the 'Save' button, stating 'Enter reinstatement details then click 'save''.

If for any reason the website is not available, a manual form is provided at the end of this document which can be printed, filled out, and faxed to the appropriate individuals.

If you have any questions please contact impairmentsupport@marsh.com



HCPP

Impaired Protection System Notification Report

(complete this form for any impairment of fire or life safety protection equipment)

Send to :

1 Marsh Canada Limited	2	3
Att : Nancy Pratt		
Fax : 604-685-3112		
nancy.r.pratt@marsh.com		

Instructions:

Impairment: Complete **Part A** of form and submit by email or fax

Restoration: Complete **Part B** and re-submit by email or fax

Person reporting impairment:	Site/Facility Name:	Email:	Phone:
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Description of impairment:

Location of impairment:

Part A – Notification of Impairment

Date of Impairment: dd/mm/yyyy	Time of Impairment: Local Time	Type of Occasion: <input type="checkbox"/> Planned <input type="checkbox"/> Unplanned	
Expected Date of Resoration: dd/mm/yyyy	Expected Time of Restoration : Local Time	Percent of Facility Affected: <input type="checkbox"/> 0-10% <input type="checkbox"/> 11-25% <input type="checkbox"/> 26-50% <input type="checkbox"/> 51%+	

Type of Impairment: <input type="checkbox"/> Sprinkler System <input type="checkbox"/> Fire Pump <input type="checkbox"/> Reservoir (Water Tank) <input type="checkbox"/> Fire Alarm <input type="checkbox"/> Intrusion Alarm System <input type="checkbox"/> Isolation Valve	<input type="checkbox"/> Public Water Supply <input type="checkbox"/> Underground Main <input type="checkbox"/> Specialized Extinguishing Systems <input type="checkbox"/> Smoke Detection System <input type="checkbox"/> Fire Hydrants <input type="checkbox"/> Other
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Precautions Taken <input type="checkbox"/> Site Emergency Organization Notified <input type="checkbox"/> Fire Department Notified <input type="checkbox"/> Cutting and Welding Prohibited <input type="checkbox"/> Fire Hoses Laid Out <input type="checkbox"/> Alarm Company Notified <input type="checkbox"/> Access to Facility Restricted	<input type="checkbox"/> Extra Portable Fire Extinguishers <input type="checkbox"/> Smoking Restricted <input type="checkbox"/> Hazardous Operations Suspended <input type="checkbox"/> Watchman / Guard Posted Frequency of tours: Every Hour(s) <input type="checkbox"/> Other:
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Part B – Upon reinstatement of the System

Date of Restoration: dd/mm/yyyy	Time of Restoration: Local Time
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Sprinkler System – 2 inch drain test performed

Static Pressure psi	Residual Pressure psi
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Checked By:	Date:
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