

TRUST-WIDE NON-CLINICAL POLICY DOCUMENT

FIRE SAFETY POLICY

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2016 – Version 3

Quality, recovery and
wellbeing at the heart
of everything we do

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Fire Safety Policy

Further information about this document:

Document name	SA08 Fire Safety Policy
Document summary	<p>The purpose of this policy is to provide information and guidance to Mersey Care NHS Foundation Trust directors, managers and staff on their responsibilities concerning fire safety at work.</p> <p>This policy applies to trust employees and anybody who is or may be impacted upon by work activities of the trust. The trust has a duty to ensure that all workplace risks are managed appropriately. This policy has been developed in line with guidance from Department of Health, Health Technical Management 05-01, 05-02 and 05-03.</p> <p>The scope of this policy applies to all activities and functions undertaken by, or on behalf of, the trust.</p>
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To be read in conjunction with	<p>The Health and Safety at Work etc. Act 1974 The Management of Health and Safety at Work Regulations 1999</p>
This document can be made available in a range of alternative formats including various languages, large print and braille etc	
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Version Control:

		Version History:
Version 1	Trust Board	2013
Version 2	Corporate Policy Group	December 2016
Version 3	Executive Committee	January 2017

SUPPORTING STATEMENTS

This document should be read in conjunction with the following statements:

SAFEGUARDING IS EVERYBODY'S BUSINESS

All Mersey Care NHS Foundation Trust employees have a statutory duty to safeguard and promote the welfare of children and vulnerable adults, including:

- being alert to the possibility of child/vulnerable adult abuse and neglect through their observation of abuse, or by professional judgement made as a result of information gathered about the child/vulnerable adult;
- knowing how to deal with a disclosure or allegation of child/adult abuse;
- undertaking training as appropriate for their role and keeping themselves updated;
- being aware of and following the local policies and procedures they need to follow if they have a child/vulnerable adult concern;
- ensuring appropriate advice and support is accessed either from managers, *Safeguarding Ambassadors* or the trust's safeguarding team;
- participating in multi-agency working to safeguard the child or vulnerable adult (if appropriate to your role);
- ensuring contemporaneous records are kept at all times and record keeping is in strict adherence to Mersey Care NHS Foundation Trust policy and procedures and professional guidelines. Roles, responsibilities and accountabilities, will differ depending on the post you hold within the organisation;
- ensuring that all staff and their managers discuss and record any safeguarding issues that arise at each supervision session.

EQUALITY AND HUMAN RIGHTS

Mersey Care NHS Foundation Trust recognises that some sections of society experience prejudice and discrimination. The Equality Act 2010 specifically recognises the *protected characteristics* of age, disability, gender, race, religion or belief, sexual orientation and transgender. The Equality Act also requires regard to socio-economic factors including pregnancy /maternity and marriage/civil partnership.

The trust is committed to equality of opportunity and anti-discriminatory practice both in the provision of services and in our role as a major employer. The trust believes that all people have the right to be treated with dignity and respect and is committed to the elimination of unfair and unlawful discriminatory practices.

Mersey Care NHS Foundation Trust also is aware of its legal duties under the Human Rights Act 1998. Section 6 of the Human Rights Act requires all public authorities to uphold and promote Human Rights in everything they do. It is unlawful for a public authority to perform any act which contravenes the Human Rights Act.

Mersey Care NHS Foundation Trust is committed to carrying out its functions and service delivery in line with a Human Rights based approach and the FREDA principles of **F**airness, **R**espect, **E**quality **D**ignity, and **A**utonomy.

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1. PURPOSE AND RATIONALE

- 1.1 To provide an unambiguous statement of Fire Safety Policy applicable to the Trust and to all premises where patients and service users of the Trust receive treatment or care, including supported living accommodation.

2. OUTCOME FOCUSED AIMS AND OBJECTIVES

2.1 Aims

This Fire Safety Policy aims to minimise the incidence of fire throughout all activities provided by, or on behalf of, the Trust. Where fire occurs, this policy aims to minimise the impact of such occurrence on life safety, the delivery of patient care, the environment and property.

This policy applies wherever the Trust owes a duty of care to service users, patients, staff or other individuals.

2.2 Objectives

- (a) to have adequate fire precaution measures to significantly reduce the likelihood of fire to minimise the risk of arson across all Trust buildings;
- (b) to be able to respond effectively to a fire by having equipment that rapidly detects a fire and the physical means to contain a fire. Staff may be able to tackle the fire, but only if they have had the relevant training and it is safe to do so;
- (c) ensure the implementation of Trust's fire strategy and fire procedures for each Trust premise;
- (d) to review the fire policies and building fire procedures regularly so that any changes in the premise structure, function or other matters having an impact on fire safety can be taken into account promptly. They are to be reviewed annually irrespective of any changes.

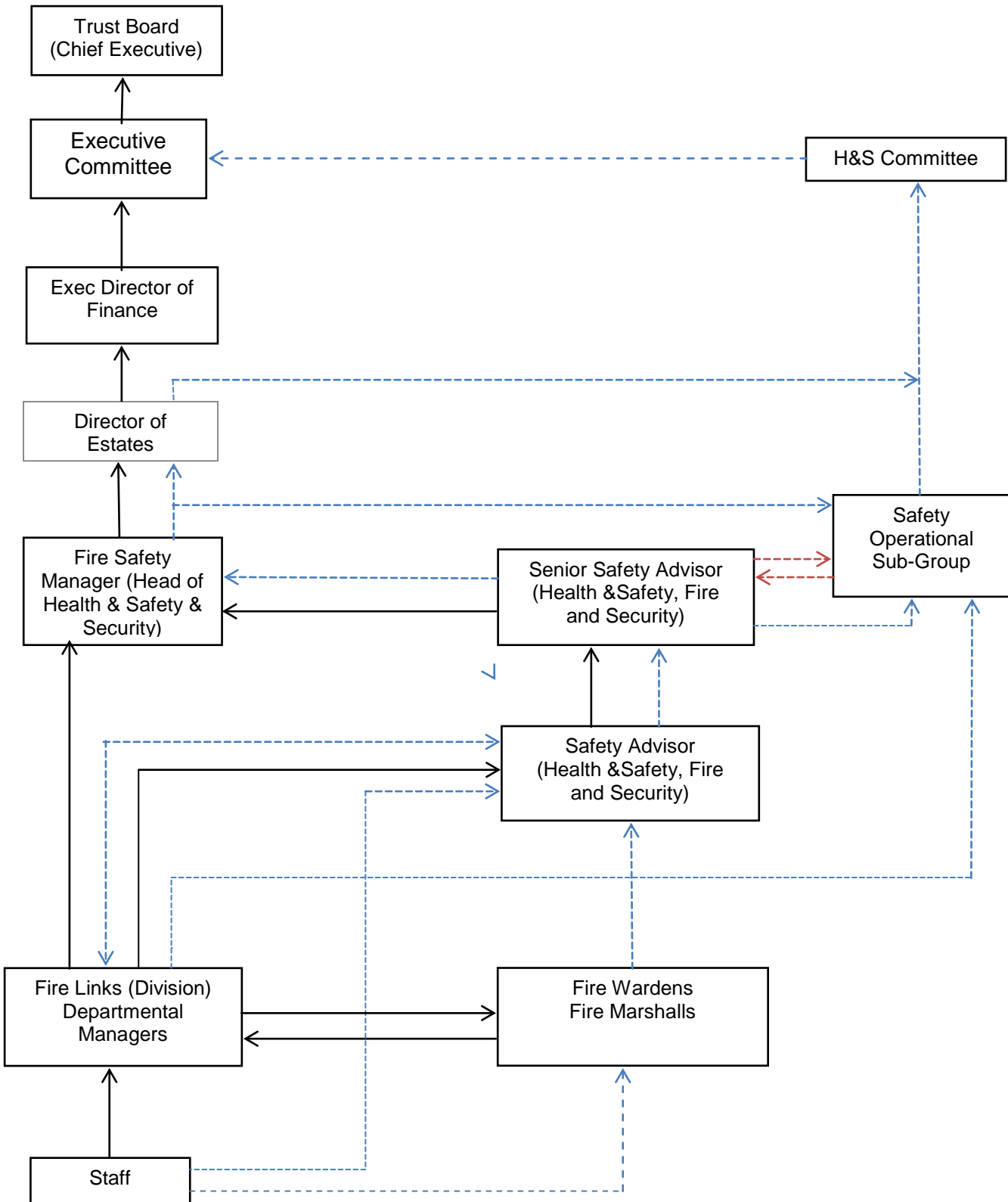
3. SCOPE

- 3.1 This policy applies to all activities and functions undertaken by, or on behalf of, the Trust and applies to all trust employees and anybody who is or may be impacted upon by work activities of the Trust. The Trust has a duty to ensure that all workplace risks are managed appropriately and has been developed in line with guidance from the Department of Health, Health Technical Memorandum 05-01, 05-02 and 05-03 (Firecode).

4. DEFINITIONS (Glossary of Terms)

Glossary of Terms	Definition
Responsible person	The person who owns or controls the business or premises.

Fire Safety Management Structure



Direct accountability for fire safety —————→
 Fire safety reporting - - - - -→
 Exception reporting - - - - -→



5. DUTIES

The Chief Executive has overall responsibility for the Trust's performance on fire safety matters. The Trust Board can be considered the Responsible Person as defined in the Regulatory (Fire Safety) Order 2005.

5.1 The Trust Board

The Trust Board undertakes to ensure, so far as is reasonably practicable, that all measures are taken to produce a safe and secure environment for staff, patients/service users and visitors whilst on Trust premises, as are our statutory requirements under fire safety legislation.

These measures include:

- (a) a current fire safety policy;
- (b) means for emergency evacuation procedures are in place, at all times the premises are occupied, without reliance on outside agencies such as the Fire & Rescue Services;
- (c) training for all members of staff, proportionate to the level of risk, including responsibility training for additional duties they may be required to perform;
- (d) are subject to a suitable system of maintenance;
- (e) the premises and any facilities, equipment and devices provided for fire safety are maintained in an efficient state, in efficient working order and in good repair;
- (f) adequate and effective fire safety signs;
- (g) well maintained compartmentation;
- (h) fire safety audits;
- (i) fire risk assessments and reviews.

5.2 Chief Executive

The Chief Executive is responsible for ensuring compliance and implementation of statutory fire requirements, and Department of Health, Health Technical Memorandum guidance, in all Trust owned premises. This responsibility has been delegated to the Executive Director of Finance.

5.3 Executive Director of Finance

The Executive director of Finance is responsible for championing fire safety issues at board level.

5.4 **Director of Estates** has fire safety within their portfolio of responsibilities and reports to the Executive Director of Finance.

5.5 **Head of Safety and Security**

The Head of Safety and Security is responsible for the day to day management of fire safety across the Trust and incorporates the key role of **Fire Safety Manager**. The Fire Safety Manager reports to the Director of Estates.

5.6 **The Trust Fire Safety Management Structure** (Appendix 2) shows how fire safety arrangements are managed within the Trust.

5.7 **Chief Operating Officers**

Chief operating Officers are responsible for the effective implementation of this policy within their area of responsibility including overall management of any potential fire risks.

5.8 **Chief Operating Officers will:**

- (a) nominate a Fire Link Person with responsibility for co-ordinating all the fire safety arrangements within their Division;
- (b) ensure that time is available for the Fire Link Person to fulfil their functions and the means at their disposal are adequate having regard to the size of the premises and the risks to which persons are exposed;
- (c) ensure that a suitable management system is in place with their area of responsibility to manage any potential fire risks and implement identified control measures.

5.9 **Fire Safety Manager**

The role of Fire Safety Manager is primarily a managerial role suitable for a senior operating manager. The role does not necessitate the duty holder to possess fire safety competencies provided that they have sufficient access to competent fire safety advice provided either from an internal Fire Safety Advisor or an external source.

The Fire Safety Manager acts as a focus for all fire safety matters in the organisation, and therefore the role should be carried out by one person. While the Fire Safety Manager may have a different line manager (the Director of Estates), accountability for fire safety matters should always be through the Board level Director – the Executive Director of Finance.

The role of Fire Safety Manager is combined with other operational roles such as health and safety and Local Security Management Specialist. However, when nominating the Fire Safety Manager, it was necessary to ensure that there are clearly defined areas of responsibility and an integrated approach to avoid conflict with any overlapping responsibilities.

5.10 **The Fire Safety Manager is tasked with developing and managing the fire safety management system, and will be responsible for:**

- (a) the day-to-day implementation of the fire safety policy;
- (b) reporting of non-compliance with legislation, policies and procedures to the Director of Estates;
- (c) obtaining expert advice on fire legislation;
- (d) obtaining expert technical advice on the application and interpretation of fire safety guidance, including Department of Health, Health Technical Memorandum;
- (e) raising awareness of all fire safety features and their purpose throughout the Trust;
- (f) the development, implementation, monitoring and review of the organisation's fire safety management system;
- (g) the development, implementation and review of the organisation's fire safety policy and protocols;
- (h) ensuring that fire risk assessments are undertaken, recorded and suitable action plans devised;
- (i) ensuring that risks identified in the fire risk assessments are included in the Trust's and Divisional risk register's as appropriate;
- (j) the operational management of fire safety risks identified by the risk assessments;
- (k) the development, implementation and review of the organisation's fire emergency action plan;
- (l) ensuring that requirements related to fire procedures for less-able staff, patients and visitors are in place;
- (m) the development, delivery and audit of an effective fire safety training programme;
- (n) the reporting of fire incidents in accordance with Trust policy and external requirements;
- (o) monitoring, reporting and initiating measures to reduce false alarms and unwanted fire signals;
- (p) liaison with external enforcing authorities;
- (q) liaison with Trust managers;
- (r) liaison with the Authorising Engineer (Fire);

- (s) monitoring the inspection and maintenance of fire safety systems to ensure it is carried out;
- (t) ensuring that suitable fire safety audits are undertaken, recorded and the outcomes suitably reported;
- (u) providing a link to the relevant Trust committees;
- (v) ensuring an appropriate level of management is always available by the establishment of Fire Link Persons for Trust sites or premises.

5.11 **Trust Safety Team**

The Trust Safety Team consists of the:

- (a) Senior Safety Advisor;
- (b) Safety Advisor(s).

5.12 **The Fire Safety Role of the Trust Safety Team is:**

- (a) to be the first point of contact for any external body with regards to fire safety;
- (b) to ensure the Trust is provided with the appropriate guidance to meet the requirements of the Regulatory Reform (Fire Safety) Order 2005;
- (c) to ensure the Trust's Fire Safety Policy (SA08) is up to date, meets the requirements of the Fire Safety Order and is effectively implemented across the Trust;
- (d) to contribute fire safety knowledge to the Health & Safety and other Trust committees;
- (e) to oversee the planning, administration and all arrangements relating to the work of the Safety Operational Sub-Group;
- (f) to co-ordinate the undertaking of all fire risk assessments in premises owned or occupied by the Trust and to provide written reports on the findings of the assessment to the Service Fire Link Person and appropriate managers;
- (g) to co-ordinate and, where appropriate, undertake regular inspections of Trust premises, or at any time deemed necessary by changed circumstances, and to provide reports as necessary;
- (h) to ensure that all fire safety requirements are in place for staff and patients with a disability, this may include the completion of Personal Emergency Evacuation Plans (PEEP);
- (i) to undertake investigations into the causes of fires occurring in Trust owned or occupied premises and to liaise with the local Fire & Rescue Service in this regard, and to report accordingly;

- (j) to undertake investigations where necessary into the cause of unwanted fire signals & false alarms and to report accordingly;
- (k) to provide fire statistics and identify trends when required for various Committees and other meetings;
- (l) to prepare, plan and deliver a comprehensive programme of fire safety induction and mandatory training for Trust employees;
- (m) to develop additional training for staff in in-patient areas in methods of evacuation including out of hours training to evening and night staff;
- (n) to develop and deliver specific fire safety training to staff (e.g. fire warden, use of fire fighting equipment etc.);
- (o) to work in partnership with Estates and Facilities Departments, Building Control, the Fire & Rescue Service and where appropriate designated architects and approved contractors on plans for new builds or refurbishment of existing buildings in relation to legislative fire safety requirements and other fire safety related initiatives;
- (p) to plan inspections (in connection with above) to ensure compliance with legislative requirements and to provide solutions to problem areas;
- (q) to liaise with Service Directors and their designated Fire Link Person regarding fire safety issues and when arranging all programmed fire safety related visits;
- (r) to liaise with the maintenance contractor regarding the maintenance of relevant fire safety systems;
- (s) to lead in the preparation of a Fire Safety Annual Report into the management of fire safety within the Trust;
- (t) to develop and deliver the Trust's Fire Safety Five Year Forward Plan and to provide an annual update on progress to the Trust Board or upon request.

5.13 **Fire Link Person**

The nominated Fire Link Person will liaise with the Trust Safety Team on all matters appertaining to fire safety within their Division.

5.14 **Specifically They Will:**

- (a) attend Safety Operational Sub-Group meetings as the Divisional representative;
- (b) programme fire safety risk assessments for all locations in their Divisions in conjunction with the Trust Safety Team;
- (c) ensure that action plans are developed to reduce the risks associated with the significant findings of fire risk assessments. Any financial costs associated with the fire risk assessment significant findings that require capital funding must be brought to the Safety Operational Sub-Group and Estates;

- (d) programme fire evacuation drills for all locations in their Divisions in conjunction with the Trust Safety Team and in accordance with this policy;
 - (e) co-ordinate and oversee fire safety training for their Divisional staff as programmed by the Trust Safety Team and in accordance with this policy;
 - (f) ensure that the Trust Safety Team is notified of any proposed changes to the fabric of any buildings within their Division;
 - (g) ensure Fire Marshals, Fire Wardens and staff trained in the Safe Use of Fire Fighting Equipment have been identified for each building and that their training is updated in accordance with this policy;
 - (h) ensure that fire alarms are tested weekly in all buildings in their Division either by MITIE (the Trust's maintenance contractors) as part of the fire alarm testing contract or by their own staff;
 - (i) ensure that all their premises in their Division have a Fire Safety Manual in place and that the information it contains is current.
- 5.15 **The Role of Fire Link Person** does not necessitate the nominated holder to possess fire safety qualifications provided that they have sufficient access to competent fire safety advice and training provided either from an internal Trust Safety Advisor or an external source.

5.16 **Managers (Local Responsible Person)**

All Managers of Buildings, Departments/Wards and Clinical areas are responsible for:

- (a) ensuring that any contact or written communication received from the Fire & Rescue Service is communicated to the Trust Safety Team at the earliest opportunity. This would include requests such as:
 - (i) risk/site familiarisation visits,
 - (ii) post fire inspection visits,
 - (iii) request to carry out fire safety audits;
- (b) developing and implementing local fire safety arrangements within their designated ward/department/clinical area (e.g. outlining the action to be taken in the event of a fire emergency; arranging for staff to carry out weekly fire safety checks) in conjunction with and approval from the Trust Safety Team;
- (c) liaising with other Managers in shared premises to ensure appropriate fire safety arrangements are developed and implemented;
- (d) identifying staff to undertake training to act as Fire Wardens, Fire Marshals and in the Safe Use of fire Fighting Equipment in conjunction with the Divisional Fire Link Person

- (e) where appropriate, making arrangements to ensure a competent person is nominated to test the fire alarm on a weekly basis;
- (f) ensuring that all staff are aware of and understand the fire safety arrangements within their workplace;
- (g) undertaking or nominating a person to facilitate local induction training for all new staff so that they fully understand the fire safety arrangements within their workplace;
- (h) ensuring all staff attend appropriate fire safety training sessions, including fire evacuation drills;
- (i) ensuring the premises Fire Safety Manual is kept up to date;
- (j) ensuring that all fire safety related adverse incidents are promptly reported in accordance with Trust policy;
- (k) responding positively to any reasonable request from a member of the Trust Safety Team.

5.17 **Fire Marshals**

The function of the Fire Marshal is to take control of the situation during a fire emergency, particularly one involving an evacuation. A Fire Marshal will be nominated for each premise including those premises occupied by a number of different Departments or Organisations.

To undertake this correctly they must be completely familiar with the emergency procedures and the roles of all people – (such as maintenance engineers shutting off services or similar) that have roles or responsibilities in an emergency.

Fire Marshals need to ensure that they are aware of the Trust Fire Safety Policy (SA08) and their particular role in it and attend Fire Marshal refresher training every three years. In particular they must be fully aware of the functions of the fire wardens.

5.18 **In General the Functions of the Fire Marshal Include:**

- (a) ensuring the summoning of the emergency services during an emergency;
- (b) ensuring that emergency vehicles are met and suitably directed on arrival;
- (c) the means of accounting for everyone being out of the building – or not i.e. the roll call;
- (d) taking control of the movement – or restriction of movement – of people and vehicles to ensure their safety and to avoid impeding the emergency services;
- (e) the procedures detailed to reduce the spread or effect of the cause of the emergency (such as fire);
- (f) providing the emergency services with the appropriate site information;

- (g) ensuring the coordination of the business continuity plan;
- (h) suitable liaison with the emergency services.

5.19 **Fire Wardens**

Fire Wardens are members of staff who are nominated to undertake specific fire safety related duties within their respective workplace in line with the requirements of this Policy document. Fire Wardens need to ensure that they are aware of the Trust Fire Safety Policy (SA08) and their particular role in it and attend Fire Warden refresher training every three years.

5.20 **Requirements to be Nominated as a Fire Warden:**

- (a) for all in-patient areas – all nursing staff should be considered as Fire Wardens;
- (b) for all other areas – there should be a minimum of one Fire Warden per floor (subject to the size of the premises) at all times. The Trust Safety Team will give advice as to the recommended numbers if required.

5.21 **The Functions of a Fire Warden include:**

- (a) undertaking regular checks of their area to ensure that fire safety is not compromised – blocked exits, broken or wedged doors, missing equipment etc, as detailed in the premise Fire Safety Manual (section 6);
- (b) checking that fire safety equipment in their area has been tested as required and is present and not obscured or otherwise compromised;
- (c) ensuring that people in their area are aware of the fire and evacuation procedures, in particular the means of raising the alarm;
- (d) undertaking inductions of people new in the workplace in respect of fire safety;
- (e) that contractors working are not compromising fire safety;
- (f) feeding back to managers any problems or defects in the fire safety precautions or procedures in their area, so they can be rectified;
- (g) if requested, carry out fire alarm tests every week in their workplace and document the test in the premise Fire Safety Manual;
- (h) assist the manager of ward/department/clinical area in arranging and carrying out fire drills;
- (i) liaising with the Trust Safety Team on fire safety matters;
- (j) checking the adequacy of means of evacuation if a person with a disability (patient/service user or staff member) is in their place of work.

5.22 And in an Emergency:

- (a) ensuring that the area is clear in the event of an evacuation – by ‘sweeping’ through it, paying particular attention to toilets and/or restrooms;
- (b) reporting to the Fire Marshal that the area is clear.

5.23 Fire Fighting

Only members of staff within a building, ward or department, who have undertaken the Trust’s ‘Safe use of Portable Fire Fighting Equipment’ training course within the last three years, are deemed competent in the use of fire fighting equipment. In the event of an emergency, if it is safe to do so, only trained staff are to use the fire extinguishers provided.

Their role is to assist the Fire Marshal in relation to the extinguishment of fire. Refresher training should be undertaken every three years.

5.24 Estates/Facilities Departments

The Estates/Facilities Departments are responsible for ensuring:

- (a) a system of planned preventative maintenance of fire alarm systems, emergency/escape lighting systems, fire-fighting equipment and any other installed fire safety system (e.g. fire dampers, smoke control system, fire ventilation system, sprinklers, fixed fire suppression systems, fire doors and the integrity of fire compartments etc.) is implemented across the Trust and that appropriate records are retained for audit purposes;
- (b) work carried out on fire safety related equipment should only be undertaken by competent third party approved designers, installers, commissioning and service engineers with third party accreditation scheme membership e.g. LPS 1014 or BAFE SP203;
- (c) that prior to new and remedial works affecting the fire safety arrangements of a building, advice is sought from the Trust Safety Team;
- (d) that contractors appointed to work in Trust premises:
 - (i) have access to a copy of this policy,
 - (ii) have carried out a fire risk assessment for their work activity, with particular reference to how their work may affect the safety of staff, patients or visitors and have a copy on site for inspection if required,
 - (iii) are made aware of local fire safety arrangements/procedures,
 - (iv) work in accordance with their fire risk assessment;

- (e) fire risks have been adequately considered prior to any new build, structural change or alterations to buildings in conjunction with the Trust Safety Team;
- (f) a capital funding programme based upon the Trust-wide fire risk assessment significant findings and/or other Trust authorised inspection/survey by a competent and qualified Company or its representative (external to the Trust) is identified and action taken in conjunction with the Capital Investment Group.

5.25 **Employees**

Every employee, while at work, must take reasonable care for themselves and other relevant persons who may be affected by their acts or omissions at work. In addition, all employees must inform their employer or nominated representative of any work situation or matter that represents a serious or imminent danger or any shortcomings in safety arrangements.

5.26 **All Trust Employees Shall:**

- (a) be alert to potential fire hazards and report such hazards accordingly to their line manager without delay;
- (b) ensure they are aware of and understand the fire safety arrangements within their workplace and of the action to take in the event of fire and on hearing the fire alarm;
- (c) take an active part in fire evacuation drills;
- (d) attend appropriate fire safety training sessions and refresher training as required.

5.27 **Trust Safety Operational Sub-Group**

The Trust Safety Operational Sub-Group was formed in September 2015 and is a Sub Group of the Trust Health & Safety Committee. The Group operates within the parameters of its Terms of Reference and its membership incorporates representation from the Trust Safety Team, staff side and each Division with input from the Estates and Facilities departments.

6. **PROCESS**

6.1 **Fire Safety – General Principles**

6.2 Fire safety in the healthcare environment is particularly challenging since many healthcare building occupants will require some degree of assistance from healthcare staff to ensure their safety in the event of a fire. Effective fire safety depends on a combination of physical fire precautions and a robust system of effective management.

6.3 The fire precautions which the Trust must provide and maintain are those which are needed to reasonably protect relevant persons from risks to them in case of fire.

These will be determined by the findings of the fire risk assessment where any preventive and protective measures are applied using the principles of prevention (*Regulatory Reform (Fire Safety) Order 2005 Schedule 1 Part 3*)

- 6.4 The current legislation in the form of the Fire Safety Order requires a managed risk approach to fire safety. The process of fire risk assessment, mitigation and review requires a robust system of management capable of identifying hazards, qualifying their impact, devising appropriate mitigation and continual monitoring.

The presence of a robust system of fire safety management is a key influence in fire risk assessment and in many healthcare environments it is the determining factor in evaluating the level of fire risk.

- 6.5 In a healthcare environment, particularly mental health or with very high dependency patients, it is unlikely that physical fire precautions on their own can reduce fire risks to an acceptable level. Adequate risk mitigation can only be achieved with the provision of a sufficient number of suitably trained staff, an environment in which the fire precautions are well maintained, and effective emergency action plans that have been sufficiently rehearsed. It is the non-physical elements of these fire precautions that are provided as a function of fire safety management.

- 6.6 The effective management of fire safety in any organisation requires the board, partners or equivalent controlling body to clearly set out the fire safety priorities and objectives for the organisation. In order to protect all persons from the hazards of fire, the Trust will make the following arrangements:

- (a) implement a system of fire risk assessments for all premises and activities;
- (b) prepare and implement Action Plans to action the significant findings of fire risk assessments;
- (c) provide appropriate guidance/advice to all staff on how to prevent fires;
- (d) provide appropriate training to employees in fire safety;
- (e) provide and implement a robust monitoring and reporting system of fire incidents, false alarms, unwanted fire signals and other fire safety issues;
- (f) implement periodic audits to assess the organisations fire safety objectives;
- (g) programme a series of fire evacuation drills for all premises;
- (h) provide and maintain fire alarm/emergency lighting systems;
- (i) provide and maintain fire-fighting equipment;
- (j) provide and maintain appropriate fire signage;

- (k) provide and maintain fire safety systems (e.g. smoke extraction, fire ventilation, fire dampers, fixed fire fighting installations, sprinklers etc.) including fire doors and fire compartmentation;
 - (l) develop a system of monitoring to ensure the effectiveness of fire safety arrangements.
- 6.7 While physical fire precautions within a building are intended to provide protection to building occupants, effective fire safety management ensures that the incidence of fire is minimised, the physical fire precautions are maintained in an operational state, the organisation is able to respond effectively should a fire occur, and that the impact of a fire incident is minimised.
- 6.8 **Fire Risk Assessments**
- 6.9 The Trust recognises that good management of fire safety in all of its premises is an essential element in ensuring that fire is unlikely to occur. However should a fire occur, good fire safety management will ensure that it is more likely to be controlled or contained quickly and effectively, thereby allowing everyone in the premises to escape to a place of safety, quickly and easily.
- 6.10 A fire risk assessment is a method of identifying fire hazards and assessing the likelihood and potential severity of fires, so that appropriate fire safety arrangements can be implemented to eliminate or reduce the risk of fires starting and maintain the safety of persons from the effects of fire.
- 6.11 Any preventive and protective measures are applied on the basis of the principles of prevention (*Regulatory Reform (Fire Safety) Order 2005 Schedule 1 Part 3*):
- (a) avoiding risks;
 - (b) evaluating the risks which cannot be avoided;
 - (c) combating the risks at source;
 - (d) adapting to technical progress;
 - (e) replacing the dangerous by the non-dangerous or less dangerous;
 - (f) developing a coherent overall prevention policy which covers technology, organisation of work and the influence of factors relating to the working environment;
 - (g) giving collective protective measures priority over individual protective measure;
 - (h) giving appropriate instructions to employees.
- 6.12 The fire risk assessment is designed to ensure that:
- (a) the fire safety equipment and facilities in the premises are suitable and sufficient for the risk, and are working correctly;

- (b) the activities carried on in the premises do not present an unacceptable risk of fire and any potential that exists for a fire to start is identified;
 - (c) the fire safety procedures are appropriate for the premises;
 - (d) fire prevention measures are in place and suitable;
 - (e) any areas of fire safety that are deemed to be deficient are identified and addressed;
 - (f) arrangements for the effective planning, organisation, control, monitoring and review of preventative and protective measures;
 - (g) risks from dangerous substances is eliminated or reduced;
 - (h) the premises are equipped with the appropriate fire-fighting equipment and with fire detectors and alarms;
 - (i) in the event of danger, it must be possible to evacuate the premises as quickly and safely as possible; emergency routes and exits must lead as directly as possible to a place of safety;
 - (j) safety equipment and devices are subject to suitable system of maintenance and are maintained in an efficient working order and in good repair;
 - (k) competent persons are appointed to assist in undertaking the preventative and protective measures;
 - (l) that risks identified and preventative measures are communicated to employees;
 - (m) that employees are provided with adequate and appropriate fire safety training.
- 6.13 The Trust Safety Team will ensure that fire risk assessments are undertaken for all premises owned or occupied by the Trust. All fire risk assessments will be completed by members of the Trust Safety Team, (*Appendix 1 – Fire Risk Assessment*) or a competent third party fire assessor. They are planned in accordance with the timescales set out in the policy and organised in conjunction with the Division Fire Link Person and the plan is monitored by the Safety Operational Sub-Group and Health and Safety Committee.
- 6.14 The fire risk assessment is based on the legislative requirements of the Regulatory Reform (Fire Safety) Order 2005 and the relevant guidance and codes of practice. The aim of undertaking the fire risk assessment is to identify and record the significant findings and, by deciding what physical fire precautions and management arrangements are necessary, reduce the risk of hazards causing harm to as low as reasonably practicable thereby ensuring the safety of people in the premises if a fire does start.
- 6.15 The fire risk assessment is non-invasive and is based on a combination of observation made within the property, information provided during the course of the assessment and records available on site and provided by other relevant parties and departments.

- 6.16 In order to determine if the risk arising from a specific hazard, significant findings are classified as low, moderate, high or extreme in accordance with the Trust Risk Matrix (*Trust Policy SA02, Effective Management of Risk*). The risk assessor will carry out a simple mathematical calculation, which quantifies the likelihood that the harm from a hazard is realised and the severity of that harm. This determines the urgency of any action required.
- 6.17 On completion of the fire risk assessment, a copy will be forwarded to Divisional Senior Management Teams (via their nominated Fire Link Persons), Ward/Department/Clinical area Managers, Facilities Managers (where appropriate) and any other relevant person. At this stage the identified significant findings and associated risks are transferred to the Service.
- 6.18 The Division is to ensure that an appropriate action plan is developed (nominated Fire Link Persons) to reduce the risks including the completion of business case(s) for capital works when required. The risks should be added to the Division risk registers and if required to the Trust risk register (*Trust Risk Management Policy & Strategy (SA02) Section 11*). Action plans will be monitored by the Division Fire Link Person and reviewed by the Trust Safety Team as part of the fire risk assessment process. The completed fire risk assessment and action plan will be held centrally by the Trust Safety Team and a copy should also be held within each Premise Fire Safety Manual.
- 6.19 A programme to regularly review fire risk assessments is developed by the Trust Safety Team in conjunction with the Division Fire Link Person. Fire risk assessments will be reviewed periodically as follows:
- (a) in in-patient areas every 12 months;
 - (b) in all other areas every 3 years;
 - (c) however, fire risk assessments should also be reviewed when any of the following occur;
 - (d) fires;
 - (e) structural changes;
 - (f) changes of use;
 - (g) new plant, equipment or procedure are introduced which introduce fire hazards;
 - (h) significant findings following the investigation of fire related incidents;
 - (i) new or existing members of staff or service users are identified as being disabled.
- 6.20 **Important** – Managers must contact the Trust Safety Team prior to any work commencing that is likely to alter a building however minor, or indeed, if any of the above criteria is found. This is to ensure that any new proposals do not affect the fire safety arrangement within the building or put any individual at risk.

6.21 Personal Emergency Evacuation Plan (PEEP)

A Personal Emergency Evacuation Plan (PEEP) (*Appendix 4 – PEEP*) must be completed for those staff or service users/patients, who for whatever reason, could be foreseen to encounter difficulties or require assistance during any fire evacuation.

Reasons may include (but not exhaustive):

- (a) mobility impairment
 - (b) visual impairment; or
 - (c) hearing impairment; or
 - (d) any other disability including bariatric or medical (drugs or sedation).
- 6.22 PEEPs should be developed between the individual concerned and their line manager/clinician. The Trust Safety Team will, once alerted by managers, work with them and employees to prepare the PEEP, if necessary. The outcome should be agreed and documented by both parties. The completed PEEP must be reviewed locally at regular intervals due to any rapid changes that may occur to the individual.
- 6.23 To facilitate the evacuation of all relevant persons to a place of safety outside the premises without the aid of external services it may be necessary to purchase/use evacuation equipment or make reasonable alterations to the building.

7. TRAINING AND SUPPORT

- 7.1 Face to face Fire Safety training is given to all Trust new starters as part of the Corporate induction package. This is followed up with a local induction at the workplace. Thereafter a mandatory e-learning package must be completed every 3 years.
- 7.2 Fire Safety training takes place monthly and details of all training can be found in the Trust's Learning and Development training prospectus. The training package, refreshed every three years, is facilitated by the Trust Safety Team and consists of:
- (a) duties of a Fire Warden;
 - (b) duties of a Fire Marshal;
 - (c) safe use of Fire Fighting Equipment.

Divisions are required to have a minimum of 10% staff that are fire safety trained.

8. MONITORING

- 8.1 The Trust is legally obliged to ensure the safety of all persons from the risk of injury and ill-health arising from its undertaking. The Safety Partnership Agreement (SPA) provides the process through which the trust can be assured that there is an effective system of internal control to monitor and continually improve safety performance. The SPA for every trust premise is audited annually by the Trust Safety Team as part of the Quality Review Visits (QRV) thereby reducing the chances of injuries and ill-health occurring.

- 8.2 In addition to the annual audit the SPA is updated and presented to the Safety Operational Sub-Group by the Divisions and monitored at the Health and Safety Committee every two months.
- 8.3 An audit under the Fire Safety Order is conducted at each premise every 3-5 years by Mersey Fire & Rescue Service. As part of the audit the inspector will monitor the fire safety standards in all or part of the building and will talk to members of staff to confirm their level of fire safety awareness.

During the audit the inspector will view the following information and documents applicable to the premises:

- (a) Fire Risk Assessment;
- (b) Fire Evacuation Procedure;
- (c) Fire Safety Manual;
- (d) records of Staff Training and Fire Drills;
- (e) records of Testing and Maintenance of fire-fighting equipment, fire alarms and emergency lighting;
- (f) details of the total number of automatic detector heads fitted within the premises/building.

Due to the level of continual external audit any additional internal fire safety audit will take place at the request of the Director of Finance.

9. Equality and Human Rights Analysis

Title: Fire Safety Policy SA08
Area covered: Fire

<p>What are the intended outcomes of this work?</p> <p>(a) to ensure compliance with the statutory, common law, and trust minimum performance standards;</p> <p>(b) to eliminate or implement appropriate control measures arising out the trust’s work activities to reduce identified risk to as low as is reasonably practicable.</p>
<p>Who will be affected?</p> <p>Applies to all activities and functions undertaken by, or on behalf of, the trust and applies to all trust employees and anybody who is or may be impacted upon by work activities of the trust.</p>

Evidence
What evidence have you considered?
<p>Disability (including learning disability)</p> <p>The operational issues of fire evacuation when a person with a disability is identified are to complete the Personal Emergency Evacuation Plan. This will determine the level of assistance and any equipment required to undertake a safe fire evacuation.</p>
<p>Sex</p> <p>No significant issues</p>
<p>Race</p> <p>No significant issues</p>
<p>Age</p> <p>Complete the Personal Emergency Evacuation Plan. This will determine the level of assistance and any equipment required to undertake a safe fire evacuation.</p>
<p>Gender reassignment (including transgender)</p> <p>No significant issues</p>
<p>Sexual orientation.</p> <p>No significant issues</p>
<p>Religion or belief</p> <p>No significant issues</p>
<p>Pregnancy and maternity.</p> <p>Complete the Personal Emergency Evacuation Plan. This will determine the level of assistance and any equipment required to undertake a safe fire evacuation.</p>

Carers No significant issues
Other identified groups No significant issues
Cross Cutting No significant issues

Human Rights	Is there an impact? How this right could be protected?
Right to life (Article 2)	Supportive of HRBA.
Right of freedom from inhuman and degrading treatment (Article 3)	Supportive of HRBA.
Right to liberty (Article 5)	Supportive of HRBA.
Right to a fair trial (Article 6)	Supportive of HRBA.
Right to private and family life (Article 8)	Supportive of HRBA.
Right of freedom of religion or belief (Article 9)	Supportive of HRBA.
Right to freedom of expression Note: this does not include insulting language such as racism (Article 10)	Supportive of HRBA.
Right freedom from discrimination (Article 14)	Supportive of HRBA.

Engagement and Involvement <i>detail any engagement and involvement that was completed inputting this together.</i>
This was the bi-annual policy review and other than being taken to the Health and Safety Committee there was no formal engagement

Summary of Analysis *This highlights specific areas which indicate whether the whole of the document supports the trust to meet general duties of the Equality Act 2010*

Eliminate discrimination, harassment and victimisation

Where appropriate the policy is supportive

Advance equality of opportunity

Where appropriate the policy is supportive

Promote good relations between groups

Where appropriate the policy is supportive

What is the overall impact?

The overall impact on the implementation on this policy review is minimal

Addressing the impact on equalities

There needs to be greater consideration re health inequalities and the impact of each individual development /change in relation to the protected characteristics and vulnerable groups

Action planning for improvement

Detail in the action plan below the challenges and opportunities you have identified. *Include here any or all of the following, based on your assessment*
*Plans already under way or in development to address the **challenges** and **priorities** identified.*
Arrangements for continued engagement of stakeholders.
Arrangements for continued monitoring and evaluating the policy for its impact on different groups as the policy is implemented (or pilot activity progresses)
Arrangements for embedding findings of the assessment within the wider system, OGDs, other agencies, local service providers and regulatory bodies
Arrangements for publishing the assessment and ensuring relevant colleagues are informed of the results
Arrangements for making information accessible to staff, patients, service users and the public
Arrangements to make sure the assessment contributes to reviews of DH strategic equality objectives.

For the record

Name of persons who carried out this assessment:

George Shield
 Tony Crumpton

Date assessment completed:

01/12/2016

Name of responsible Director:

Neil Smith

Date assessment was signed:

Action plan template

This part of the template is to help you develop your action plan. You might want to change the categories in the first column to reflect the actions needed for your policy.

Category	Actions	Target date	Person responsible and their area of responsibility
Monitoring			
Engagement			
Increasing accessibility			

