Fire Safety Policy

Reference No:	P_HS_16
Version:	4
Ratified by:	LCHS Trust Board
Date ratified:	14 September 2021
Name of author:	Health & Safety Advisor
Name of approving committee:	Health & Safety Committee
Date Approved:	21 July 2021
Date issued:	September 2021
Review date:	September 2023
Target audience:	All employees
Distributed via:	Trust website

Chair: Elaine Baylis, QPM
Chief Executive: Maz Fosh

Lincolnshire Community Health Services NHS Trust
Fire Safety Policy

Version Control Sheet

Version	Section/ Para/ Appendix	Version/ Description of Amendments	Date	Author
1		Not applicable – new policy		John Prictor
2	Throughout	Full review - Replace BU for Service Managers	Oct 2016	John Prictor
3	Throughout	Full review	Oct 18	David Sedman
4	Throughout	Full review	October 2020	David Sedman

Lincolnshire Community Health Services NHS Trust
Fire Safety Policy

Background

This policy has been developed in accordance with the general requirements of 'The Regulatory Reform (Fire Safety) Order 2005 Fire'.

Statement

This policy provides the Trust with the basis of statutory compliance.

Responsibilities

Responsibilities set out within this policy are an extension of those contained within the Trust's corporate health & safety policy.

Training

Awareness training is required for all persons. Additional Specific skills training for key posts is identified within this document and the fire safety training needs analysis.

Dissemination

The Trust will disseminate this policy to those employees who have a direct responsibility for its implementation.

- Trust Induction
- Trust Newsletter
- Trust Team Brief

Resource implication

Adequate resources will be available in each location for the implementation of this policy.

Lincolnshire Community Health Services NHS Trust
Fire Safety Policy

Contents

1. INTRODUCTION

Fire is a potential hazard in all hospitals and healthcare premises. The consequences of a fire in any location at which the Trust operates, could be very serious since many of the patients and clients are dependent on staff.

The aim of the Trust is to ensure that outbreaks of fire do not occur. If an outbreak does occur, it must be rapidly detected, effectively contained and quickly extinguished; with no risk to staff, clients or visitors due to robust fire safety protection and evacuation procedures.

All employees within the Trust have an obligation to familiarise themselves with and observe fire precautions at all times. It is imperative they understand what to do in the event of fire, to ensure the safety of patients, colleagues, visitors and themselves following local evacuation procedures.

The Trust will adopt a managed risk approach to fire safety. Fundamental to a managed risk approach are robust and verifiable processes, which include but are not limited to;

- Fire risk assessment
- Fire engineering solutions
- Fire safety procedures
- Education and training
- Continual monitoring

The Trust will monitor relevant legislation, guidance and industry standards and maintain this policy and all associated procedures under review, to ensure that they reflect current legal requirements and appropriate best practice.

2. AIMS AND OBJECTIVES

The aim of this policy is to comply with the statutory obligations of the Fire Safety Order and the suite of NHS guidance on fire safety.

To minimise the risks of injury, damage to property and disruptions to service provision due to fire through direct intervention and/ or effective collaboration with our specialist external service providers and those in control of shared premises.

3. SCOPE

This policy applies to all Trust staff and other persons who carry out activities on the Trust's premises including contractors and those employed by others. Where Trust staff work in premises which are in the control of other organisations, this policy and the policy of the other organisation must be followed. Where staff visit private dwellings such as patient's homes, they must consider fire safety, familiarising themselves with the safe way in and out and considering what they would do in the event of fire. If they have fire safety concerns regarding the patient or their home, these must be reported to the Health & Safety Adviser and Fire Service to undertake a home fire safety visit.

4. CONSULTATION AND COLLABORATION

The Trust will effectively consult and collaborate with owners, landlords, their agents and other tenants in multi user premises on all aspects of fire safety

5. DEFINITIONS

Fire Safety **-** For the purpose of this policy the term fire safety will include all aspects of emergency evacuation.

Service Provider **-** For the purpose of this policy the term "service provider" will relate to an external provider for the provision of fire related services, which will include but not be limited to the provision and availability of;

- An authorising engineer (Fire)
- A fire safety adviser (Authorised Person – Fire)
- Competent persons (Fire)
- Competent fire instructors/trainers

The roles and responsibilities of the above will reflect those set out within the Department of Health-Technical Memorandum (HTM) 05-01: Managing healthcare fire safety.

Authorising Engineer (Fire) - A person who has attained chartered fire engineer status and has extensive experience in healthcare fire safety. For the purpose of this policy this role will be provided by an external service provider, as required, under an agreed service level agreement.

Fire Safety Advisor (Authorised Person – Fire) - A person, who is sufficiently trained, gained experience and knowledge to enable them to properly support the undertaking of preventative and protective measures. For the purpose of this policy this role will be provided an external service provider under an agreed service level agreement.

Competent Person (Fire) - A person with appropriate skills and knowledge to provide the Trust with an adequate level of service in relation to the installation and/or maintenance of fire-related services i.e. passive and active fire safety systems. For the purpose of this policy an external service provider will provide this role under an agreed service level agreement.

Designated Nursing/Medical Officer - The most senior on-duty nurse or clinician within premises which have the availability and use of a Medical Gas Pipeline System (MGPS).

Fire Safety Manager (FSM) - For the purpose of this policy the Trust's Health & Safety Adviser will be the FSM who will report to the executive lead for health and safety.

Fire Safety Management System (FSMS) - A robust framework of protocols which support the organisation to deliver its fire safety objectives in accordance with its fire safety policy.

Fire Emergency Action Plan (FEAP) - A pre-determined plan that describes the actions necessary in the event of fire to protect people and facilitate their safe evacuation.

Fire Risk Assessment (FRA) - A methodical process for identifying fire hazards, estimating the likelihood of those hazards causing harm and, taking into account the existing protective an preventative measures, evaluating the need for further risk controls.

Personal Emergency Evacuation Plan (PEEP) - A tailormade emergency evacuation plan which meets the needs of an individual. The plan being devised by management in

collaboration with an individual employee (including temporary worker) or in the case of a patient an assessment process recorded on Systmone.

6. DUTIES/ RESPONSIBILITIES

Chief Executive

The Chief Executive will be responsible for:

- ensuring that fire risk assessments are undertaken and adequate fire safety arrangements are in place and effectively implemented throughout the Trust

- discharging day-to-day operational responsibilities for fire safety to a nominated Trust executive

- putting in place a fire safety management structure with delegated organisational responsibilities for the implementation of this policy and local fire safety arrangements in accordance with a fire safety management system

- ensuring that all agreements for the provision of care and other services by third parties include sufficient contractual arrangements to ensure compliance with the Trust's fire safety policy

Trust Board

The LCHS Trust Board is responsible for:

- having overall accountability for the activities of the organisation, which includes fire safety

- ensuring it receives appropriate assurance that the requirements of current fire safety legislation, Codes of practice, guidance and objectives are being met

- discharging operational responsibility for fire safety through the Chief Executive

- ensuring adequate funding is available for fire precautions.

Executive Lead for Health and Safety

The Executive Lead for Health and Safety will on behalf of Trust, accept nomination as executive lead for fire safety and will be responsible for:

- taking day to day operational responsibility for fire safety and championing fire safety at Board level

- providing assurance to the Chief Executive that this policy is being consistently applied throughout the Trust and a robust fire safety management system is place.

- ensuring the Chief Executive is made aware of any fire safety related risk that has been escalated to any respective risk register

- being fully supportive of the Trust's Fire Safety Manager, enabling them to effectively undertake their role and responsibilities on behalf of the Trust

- advising the Chief Executive in the event of a serious fire incident

.Fire Safety Manager (FSM)

The Trust's Health & Safety Adviser will carry out the role of FSM. The Fire Safety Manager is tasked with developing and managing the fire safety management system, and will be responsible for (exemplar role/duties):

- the day-to-day implementation of the fire safety policy;

- reporting of non-compliance with legislation, policies and procedures to the Executive Lead with fire safety responsibility;

- obtaining expert advice on fire legislation;

- obtaining expert technical advice on the application and interpretation of fire safety guidance, including DH's Firecode;

- raising awareness of all fire safety features and their purpose throughout the Trust;

- the development, implementation, monitoring and review of the fire safety management system;

- the development, implementation and review of the fire safety policy and protocols;

- ensuring that fire risk assessments are undertaken, recorded and suitable action plans devised;

- ensuring that signififcant risks and themes identified in localfire risk assessments are included in the Trust's risk register as appropriate;

- the operational management of fire safety risks identified by the risk assessments;

- the development, implementation and review of the fire emergency action plan;

- ensuring that requirements related to fire procedures for less-able staff, patients and visitors are in place;

- the development, delivery and audit of an effective fire safety training programme;

- the reporting of fire incidents in accordance with Trust policy and external requirements

- monitoring, reporting and initiating measures to reduce false alarms and unwanted fire signals;

- liaison with external enforcing authorities;

- liaison with trust managers;

- liaison with the Authorising Engineer (Fire);

- monitoring the inspection and maintenance of fire safety systems to ensure it is carried out;

- ensuring that suitable fire safety audits are undertaken, recorded and the outcomes suitably reported;

- providing a link to the relevant Trust committees;

- ensuring an appropriate level of management is always available by the establishment of Fire Response Teams for trust sites or premises.

<u>The Fire Safety Adviser</u>

The Fire Safety Adviser (contracted) will be accountable to the Fire Safety Manager for matters of fire safety. They provide competent fire safety advice and will be responsible for:

- undertaking, recording and reporting fire risk assessments;

- providing expert advice on fire legislation;

- providing expert technical advice on the application and interpretation of fire safety guidance, including DH's Firecode;

- assisting with the review of the content of the trust's fire safety policy;

- assisting with the development and delivery of a suitable and sufficient training programme for staff;

- the assessment of fire risks within premises owned, occupied or under the control of the trust;

- the preparation of fire prevention and emergency action plans;

- the investigation of all fire-related incidents and fire alarm actuations;

- liaison with the enforcing authorities on technical issues;

- liaison with managers and staff on fire safety issues;

- liaison with the Authorising Engineer (Fire)

<u>The Trust's Head of Education and Workforce Development</u>

The Trust's Head of Education and Workforce Development will be responsible for;

- collaborating with and supporting the Trust's FSM in the planning and delivery strategy for timely fire safety training in accordance with the Trust's approved Fire Safety Training Matrix (TM)

<u>Emergency Planning Lead</u>

The Trust's emergency planning lead will be responsible for;

- collaborating with Clinical Leads to formulate, revise and monitor plans for the re-location of patients and staff in the event of a full scale evacuation under circumstances in which re-entry to the premises is prevented.

- ensuring the re-location plans form part of the overall emergency evacuation plans for residential healthcare facilities.

- ensuring the re-location plans fall within scope of local induction at premises with residential healthcare facilities.

Designated Nursing / Medical Officer

For the purpose of this policy the Designated Nursing / Medical Officer will be responsible for;

- effective collaboration with the emergency planning lead in the development, revision and implementation of staff and patient re-location plans (which form part of overall emergency action plans) which are activated when a full scale evacuation occurs in which re-entry to the premises is prevented

- Ensuring nursing and clinical staff are aware of, and understand their responsibilities in relation to an "in-use" Medical Gas Piped System (MGPS)

Health and Safety Advisor

The Health and Safety advisor will be responsible for;

- supporting the Trust's responsible managers to meet their responsibilities set out within this policy

- supporting the development and maintenance of a robust fire safety management system

- supporting all employees to meet their responsibilities set out within this policy or the Trust's FSM

- maintaining liaison with, and collaborating with the Trust's service provider for fire safety to ensure robust compliance is in place with this policy and agreements within the terms and conditions of the agreed Service level Agreement

- Escalating as necessary identified fire safety risks to the corporate risk register

Local Management , Matrons, Heads of Service, Managers/Persons in Charge of Ward or a Building

Managers / Heads of Departments / Persons in charge of a ward/department have the delegated responsibility for the implementation and management of the fire policy and strategy in areas of their control. These responsibilities include and are not limited to:

- Ensuring that there is a current fire risk assessment and emergency plan and they and their staff are familiar with it.

- Ensure that sufficient trained staffs are available at all times to implement the local emergency plan.

- Notifying the Health & Safety Adviser of any proposals for "change of use", including temporary works that may impact on the risk assessment, within their area

- Ensuring that in the event of a fire alarm activation or discovery of a fire, that the emergency plan is followed.

- Liaising with other organisations in multi occupied premises through co-operation and co-ordination with other responsible persons

  - Ensuring that staff in their areas of control are provided with a local induction which includes the duties outlined in this document and relevant fire safety instructions. This should be revisited at staff briefings.

  - Conducting evacuation drills at intervals as recommended by the Safety Advisor. All fire drills must be recorded in the fire log book

  - Monitoring that staff are vigilant to prevent fires in their daily duties

  - Ensuring that all staff receive fire training and are trained in the hazards related to the storage and use of oxygen. Where a piped oxygen system is in use, persons in charge must be familiar with the procedure for isolating the oxygen supply.

  - Ensuring that persons in areas of their control who have a mobility impairment or other disability which may affect either their awareness of a fire situation or affect their ability to evacuate have an individual Personal Emergency Evacuation Plan (PEEP) completed

  - Advising the Health & Safety Advisor of fire incidents / false alarms and report through Datix, the incident reporting system. Assisting with investigations into fire related incidents.

  - Assisting the Trust's Health & Safety Advisor. Appointed Consultants or Fire Service officers in conducting fire risk assessments and taking action to remedy all significant findings that have been identified during the audit process

  - Ensuring that staff in areas of their control are aware of the location of all fire- fighting equipment

  - Ensuring that the means of escape are kept clear of obstruction.

  - Ensuring any "hot work" activity is subject to an agreed risk assessment and method statement is in place prior to the hot work commencing

  - Report immediately via "task estates" any building or equipment defect/risk that effects fire safety.

  - Where appropriate, ensuring that sufficient Fire Wardens are identified and appointed for their specific areas of responsibility.

  Fire Incident Manager

  The most senior person in charge of an area and present at the time that an incident occurs or the designated responsible person, should assume the role of the Fire Incident Manager.

The Fire Incident Manager is required to: -

- Take control of the incident

- the local response;

- ensure that the fire alarm system has been activated and that staff in the area are aware of the incident;

- initiate the local fire emergency action plan;

- determine whether evacuation is necessary and commence the evacuation if appropriate

- liaise with oncoming local responders and the Fire Service

- instigate the internal major incident plan (if required).

<u>Fire Wardens and Designated Responsible Persons Including Reception Staff</u>

Fire Wardens/responsible persons are appointed in all departments or buildings to give appropriate local leadership and direction in Fire Safety matters. They are not in an enforcing role but report to their line manager, and if necessary to the Health & Safety Advisor.

Appointed and trained fire wardens/responsible persons will;

- Act as a focal point on fire safety issues for local staff

- Organize and assist in the fire safety regime within local areas

- Raise issues regarding local area fire safety with local management

- Assist with coordination of the response to an incident within the immediate vicinity.

- Be responsible for the roll call during an incident, liaising as necessary with attending fire and emergency rescue services

- Be trained to tackle fire with fire fighting equipment where appropriate

- Support the local managers on regular fire safety checks

- Participate in regular fire warden training and apply the information and duties to the workplace.

- Supporting management to implement this policy in their place of work

- Provide local fire safety induction if requested to do so

In clinics and administration premises receptionists/admin staff may be nominated as Responsible Persons within core business hours. They will take a leading role in the event of a fire, this may include, interrogating the fire alarm panel, verifying the presence of fire, calling the fire service and physically checking that freely accessible public areas are successfully evacuated. Then taking a role call and meeting the fire service.

<u>Employees</u>

All employees will be responsible for;

- Familiarising themselves with the fire procedures and emergency plans for any premises that they work at and complying with them.

- Taking care not to start fires and being vigilant, to react quickly to initiate the emergency procedures should they discover a fire.

- Reporting immediately any identified fire safety hazard

- Attending training identified by the Trust's fire safety training needs analysis

- Maintaining high standards of housekeeping and ensuring escape routes are kept clear and fire doors are not wedged open

- When cooking, never leaving it unattended and ensuring the kitchen door is closed.

- Undertaking visual checks of all portable electrical items prior to each use and switching them off at the mains when not in use, especially at the end of the working day.

Service Providers (Fire Safety)

The service providers will;

- Be responsible for providing a competent management and advisory function and to ensure the Trust is made aware of changes in legislation and nationally accepted guidance which may affect this policy or the Trust's FSMS

- Ensure that any person or third party who undertakes a task or provides a service to the Trust, is competent

- Accept, reflect and apply (as a minimum) the roles and responsibilities set out within any related Department of Health Technical Memorandum or nationally accepted guidance when evaluating the competence of any person or third party organisation who will undertake a task or provide a service to the Trust

- Ensure they meet any Trust requirement for local induction, safeguarding, entry and exit from premises or work areas under their control

- Where they provide any service which includes hot work activities being undertaken within premises or work/ healthcare service delivery areas under the control or occupancy of the Trust ensure an agreed written safe system of work (risk assessment, method statement) is in place and has been communicated to local Trust management staff

Health and Safety Committee

The Trust's health and safety committee will;

- Be the Trust's recognised forum for reviewing and monitoring the Trust's performance in respect of fire safety

- Ensure fire safety is a standard agenda item

- Ensure fire safety is a standard inclusion for the health and safety report submitted to Human Resources & Organisational Development Assurance Group

7. ARRANGEMENTS

Additional Arrangements for implementation of this policy are set out in separate Fire Safety Protocols within the Health & Safety Management system the contents of which will be reflected by the Trust's fire safety Training Needs Analysis (TNA).

Fire Safety Protocols (FSP) will reflect national legislative requirements and guidance for fire safety and will be reviewed annually to ensure they remain current.

Current FSP's at the time of implementation of this policy version are set out below.

Section 9.1	Fire Safty Protocol Introduction
Section 9.2	Fire Safety Training
Section 9.3	Fire Safety Risk Assessment (FSRA)
Section 9.4	Fire Safety Plan (Inpatient Premise)
Section 9.5	Fire Safety Plan (Non-Patient Premise)
Section 9.6	Fire Safety Log Book (FSLB)
Section 9.7	Personal Emergency Evacuation Plan (In-Patient)
Section 9.8	Personal Emergency Evacuation Plan (Staff)
Section 9.9	Medical Gas Pipeline Services (Mgps)
Section 9.10	Reducing Unwanted Fire Signals (UwFS)
Section 9.11	Fire Extinguishers
Section 9.12	Monthly Fire Equipment Inspection
Section 9.13	Fire Drill Procedure

Fire Safety Protocols will be retained electronically in the Health & Safety Management System, Section 9 for ease of access by staff and external stakeholders for reference purposes.

The Trust will actively collaborate with occupiers of premises and other stakeholders in multi-occupancy premises to further the standards of fire safety.

8. EDUCATION AND TRAINING

Effective employee training is vitally important. The Trust will ensure that every person working within the organisation receives regular instruction in fire precautions and is trained to understand the effects of fire, the fire hazards involved in the working environment, fire prevention and the action to be taken if fire breaks out

The Trust has devised a Training Matrix (TM) that will be reviewed annually to ensure its detailed contents reflect national guidance and the requirements of this policy. This TM will be readily accessible for reference purposes by any stakeholder.

9. EQUALITY AND DIVERSITY

The Trust has completed an Equality Impact Assessment (EIA) for effective implementation of this policy. The EIA will be readily accessible for reference purposes by any stakeholder.

10. REFERENCE DOCUMENTS

The primary reference documents for this policy are;

- The Regulatory Reform (Fire Safety) Order 2005 (Fire Safety Order)
- Department of Health – HTM 05-01: Managing healthcare fire safety
- Department of Health – HTM 05-02: Fire Code
- HM Government - fire safety risk assessment: healthcare premises
- HM Government - fire safety risk assessment: offices and shops

11. MONITORING

Aspect Being Monitored	Monitoring process	Lead	Frequency	Action Plan Development	Action Plan Monitoring
Fire safety risk assessment	Audit	Trust FSM	Annually	Trust FSM	HSC
Fire safety audit	Audit	Trust FSM	Annually	Trust FSM	HSC
Workplace environment	Inspection	Local Premise Lead	Quarterly	Local Premise Lead	Service Manager/ HSC
Fire Safety TNA	Audit	Service Manager Primary Lead	Annually	Service Manager Primary Lead	Service Manager/ HSC

Appendix A - Equality and Health Inequality Impact Assessment Tool

This tool has been developed by the Equality, Diversity and Inclusion Leads for use in the NHS Provider organisations in Lincolnshire. The tool is designed to ensure due regard is demonstrated to the Equality Act 2010, the Public Sector Equality Duty and potential health inequalities are also identified and addressed (as outlined in the Health and Social Care Act). Please complete all sections below. Instructions are in *italics.* Email for all correspondence: email to lhnt.edifirst@nhs.net

A. Service or Workforce Activity Details	
1. Description of activity	*Fire Safety Policy*
2. Type of change	Adjust existing
3. Form completed by	*Dan Dring – Deputy Director of Innovation*
4. Date decision discussed & agreed	*Date – 21/7/21*
5. Who is this likely to affect?	Service users - Yes Staff - Yes Wider Community - Yes If you have ticked one or more of the above, please detail in section B1, in what manner you believe they will be affected.

B. Equality Impact Assessment	
Complete the following to show equality impact assessment considerations of the decision making to ensure equity of access and to eliminate harm or discrimination for any of the protected characteristics: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation. Further, please consider other population groups which are at risk of health inequality and can include, but not be limited to, people who are; living in poverty / deprivation, geographically isolated (e.g. rural), carers, armed forces, migrants, homeless, asylum seekers/refugees, surviving abuse, in stigmatised occupations (e.g. sex workers), use substances etc. Please ensure you consider the connections (intersectionality) between the protected characteristics and population groups at risk of health inequality (e.g. it is recognised that older men from a BAME background, with one or more comorbidities and living in deprivation are more at risk of a poorer outcome if they contract CV-19).	
1. How does this activity / decision impact on protected or vulnerable groups? (e. g. their ability to access services / employment and understand any changes?) Please ensure you capture expected positive and negative impacts.	This policy does not have different impacts for protected characteristics.
2. What data has been/ do you need to consider as part of this assessment? What is this showing/ telling you?	Datix incidents data

This form is based on a template produced by Cambridge University Hospitals NHS Trust and used with their kind permission. Draft NHS Lincolnshire EDI System 2.1

C. Risks and Mitigations	
1. What actions can be taken to reduce / mitigate any negative impacts? (If none, please state.)	The sharing and advertising of the policy will ensure everyone is aware of the risks and expected outcomes.
2. What data / information do you have to monitor the impact of the decision?	Datix incidents data
D. Decision/Accountable Persons	
1. Endorsement to proceed?	Yes
2. Any further actions required?	*No*
3. Name & job title accountable decision makers	Ceri Lennon – Director of People and Innovation
4. Date of decision	21/7/21
5. Date for review	*October 2022*

Purpose of the Equality and Health Inequality Assessment tool

- The NHS in Lincolnshire has a legal duties under the Equality Act 2010, Public Sector Equality Duty 2011 and the Health and Social Care Act 2012 to demonstrate due regard in all decision making, for example, when making changes to services or workforce practices, to ensure access to services and workforce opportunities are equitable and to avoid harm and eliminate discrimination for each of the protected characteristics and other groups at risk of inequality.

- Within the guidance toolkit there are also some examples of decisions this tool has been used on in other organisations and the impacts they have identified.

Checklist

- Is the purpose of the policy change/decision clearly set out? □

- Have those affected by the policy/decision been involved? □

This form is based on a template produced by Cambridge University Hospitals NHS Trust and used with their kind permission. Draft NHS Lincolnshire EDI System 2.1

- Have potential positive and negative impacts been identified? □

- Are there plans to alleviate any negative impact? □

- Are there plans to monitor the actual impact of the proposal? □

This form is based on a template produced by Cambridge University Hospitals NHS Trust and used with their kind permission. Draft NHS Lincolnshire EDI System 2.1

Page 18 of 18