Policy:
EST 009 V8 Fire Safety

Executive Director Lead	Director of Strategy
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Policy Author	Security and Fire Officer

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Summary of policy
This policy provides the governance structure and duties required of the board by which fire safety is managed to minimise the incidents of fire throughout all activities provided by or on behalf of SHSC.

Target audience	All staff

Keywords	Fire Prevention and Precautions

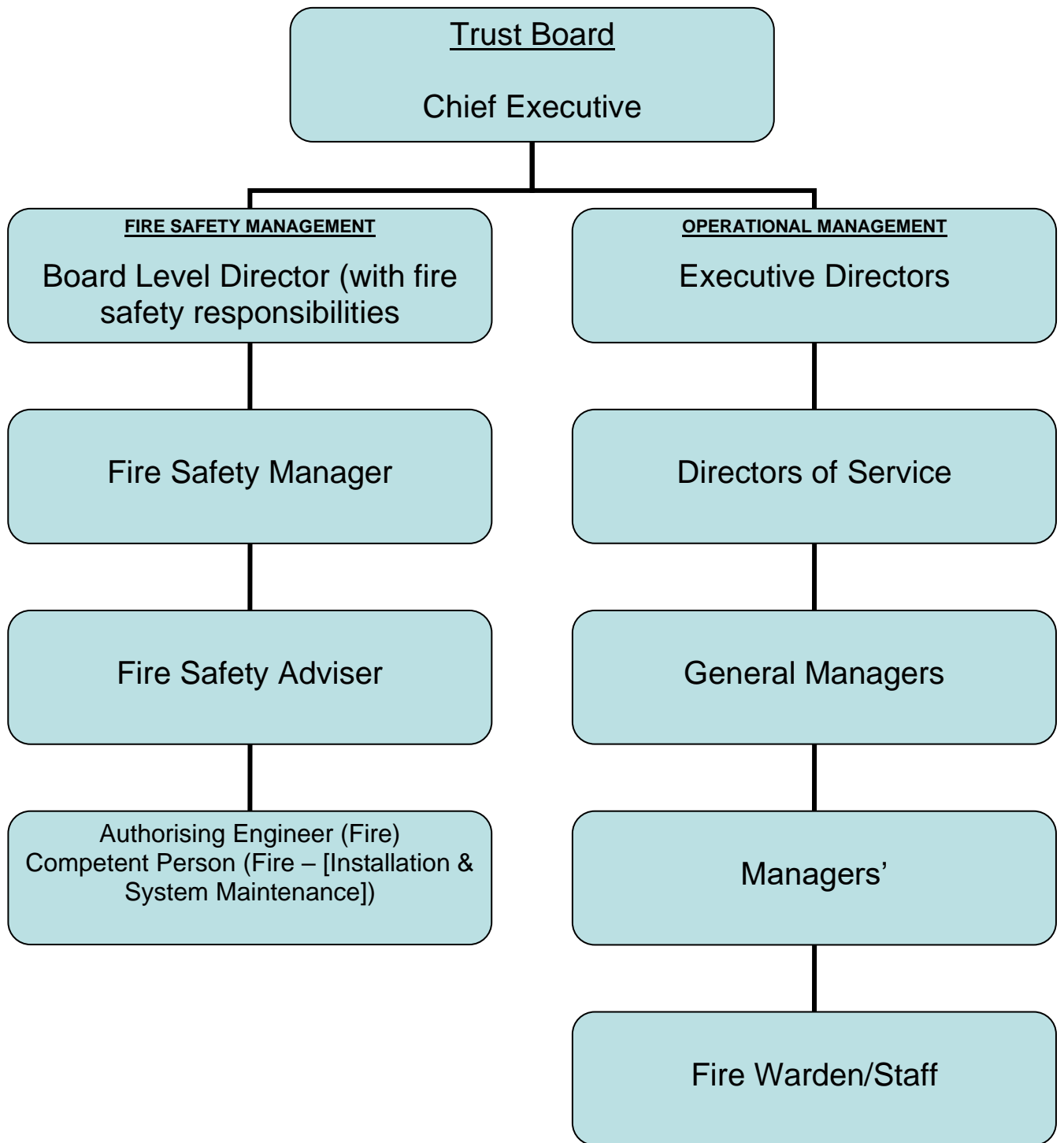| Storage and Version Control |
|---|
| Version 8.0 of this policy is stored and available through the SHSC intranet/internet. This version of the policy supersedes the previous version, (V7 April 2020). Any copies of the previous policy held separately should be destroyed and replaced with this version. |

Version Control and Amendment Log

Version No.	Type of Change	Date	Description of change(s)
4.0	Policy review	May 2010	Policy reviews to reflect fire safety requirements.
5.0	Policy review	September 2014	Policy amended to include additional appendices and procedural arrangements.
6.0	Policy review	April 2017	Policy amended to include additional procedural arrangements.
7.0	Policy review	March 2020	Policy amended to reflect HTM 05:01 guidance on policy content.
8.0	Policy review	February 2022	Policy amendment of 'Duties and Procedures'.

Contents

Fire Safety Flowchart

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                          ┌─────────────────────────┐
                          │      Trust Board        │
                          │                         │
                          │    Chief Executive      │
                          └───────────┬─────────────┘
                  ┌───────────────────┴───────────────────┐
        ┌─────────────────────────┐           ┌─────────────────────────┐
        │ FIRE SAFETY MANAGEMENT  │           │ OPERATIONAL MANAGEMENT  │
        │ Board Level Director    │           │  Executive Directors    │
        │ (with fire safety       │           │                         │
        │ responsibilities        │           │                         │
        └───────────┬─────────────┘           └───────────┬─────────────┘
        ┌───────────┴─────────────┐           ┌───────────┴─────────────┐
        │   Fire Safety Manager   │           │  Directors of Service   │
        └───────────┬─────────────┘           └───────────┬─────────────┘
        ┌───────────┴─────────────┐           ┌───────────┴─────────────┐
        │   Fire Safety Adviser   │           │    General Managers     │
        └───────────┬─────────────┘           └───────────┬─────────────┘
        ┌───────────┴─────────────┐           ┌───────────┴─────────────┐
        │ Authorising Engineer    │           │      Managers'          │
        │ (Fire) Competent Person │           │                         │
        │ (Fire – [Installation & │           └───────────┬─────────────┘
        │ System Maintenance])    │           ┌───────────┴─────────────┐
        └─────────────────────────┘           │   Fire Warden/Staff     │
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1   Introduction

Sheffield Health and Social Care NHS Foundation Trust (SHSC) acknowledges its responsibilities to comply with the requirements of: the *Regulatory Reform (Fire Safety) Order 2005 (RRFSO)* which is the primary legislation governing fire safety in building in England which applies to all workplaces, *The Health and Safety at Work Act 1974*, Building Regulations and other relevant legislative requirements applicable for maintaining the safety of persons for which it holds a duty of care.

This policy has been developed following guidance provided within the *Department of Health Firecode Suite of documents - Health Technical Memoranda (DH Firecode)* and complements the requirement of Trust Policy: *DCEO 001 - Health and Safety* in considering so far as reasonably practicable the health, safety and welfare of its employees, service users and relevant persons.

This policy aims to minimise the incidence of fire throughout all activities provided by or on behalf of SHSC thereby, minimising the impact or such occurrence on life safety, the delivery of patient care, the environment and property.

2   Scope

This is a Trust-wide policy and is relevant to all staff, contract staff and volunteers where a duty of care is held.

3   Purpose

To minimise the incidence of fire throughout SHSC premises
To minimise the impact from fire on life safety, delivery of service, the environment and property.
To provide a clear statement of fire safety policy applicable to SHSC services.

SHSC will ensure that:

- all statutory requirements in respect of fire safety are met or managed,
- guidance in DH Firecode is applied in all premises owned or managed by SHSC and the only derogation will be premises used solely as office accommodation. Any derogation from DH Firecode must be approved by the Estates Fire Compliance Group,
- a programme for improving and maintaining fire precautions is in place,
- suitable provisions are scheduled for the undertaking of fire risk assessments,
- all practicable fire prevention measures are taken,
- plans to deal with outbreaks of fire and the emergency evacuation of staff, service users and visitors are in place,
- suitable fire safety training is provided through inductions and periodically.

4   Definitions

Reasonably practicable – evaluating a risk against the time and financial resources required to remove, reduce or control it.

5   Details

This policy demonstrates the arrangements by which SHSC will address the risks associated with a fire so as to prevent consequent injury or ill health to staff, service users or others, as far as is reasonably practicable.

6   Duties

6.1   SHSC Trust Board
The Trust Board has overall accountability for the activities of SHSC, which includes fire safety. The Trust Board recognises its responsibilities to implement in full their duties in respect of fire safety of the estate and to ensure all employees understand and partake in fire precaution routines. The board should ensure they have appropriate assurance that the requirements of current fire safety legislation are met and, where appropriate, that the objectives of Firecode are met. The overall responsibility for the performance of the Trust in respect of fire precautions and fire safety is delegated to the Chief Executive.

6.2   Chief Executive
The Chief Executive will, on behalf of the SHSC Trust Board, be responsible for ensuring that current fire legislation is complied with and where appropriate, DH Firecode guidance is implemented in all premises owned, occupied or under the control of SHSC.

The Chief Executive will ensure that all agreements for the provision of care and other services by third parties include sufficient contractual arrangements to ensure compliance with SHSC fire safety policy.

The Chief Executive discharges the day-to-day operational responsibility for fire safety through the Director with fire safety responsibility.

6.3   Board Level Director (with fire safety responsibility)
The Board Level Director with fire safety responsibility is responsible for ensuring fire safety issues are highlighted at Board Level, this responsibility will extend to the proposal of programmes of work relating to fire safety for consideration as part of the business planning process, including the management of the fire-related components of the capital programme and future allocation of funding.

At an operational level the Director with fire safety responsibility will:
- Assist the Chief Executive with Board level responsibilities for fire safety matters.
- Ensure that SHSC has in place a clearly defined fire safety policy and relevant supporting protocols and procedures.
- Ensure that all work that has implications for fire precautions in new and existing SHSC buildings is caried out to a satisfactory technical standard and conforms to all prevailing statutory and mandatory fire safety requirements (including DH's Firecode).
- Ensure that all proposals for new buildings and alterations to existing buildings are referred to the Fire Safety Manager before building control approval is sought.
- Ensure that all passive and active fire safety measures and equipment are maintained and tested in accordance with the latest relevant legislation/ standards and that comprehensive records are kept.

- Ensure cooperations between other employers where two or more share SHSC premises.
- Ensure through senior management and line management structures that full staff participation in fire training and fire evacuation drills is maintained.
- Ensure that agreed programmes of investment in fire precautions are properly accounted for in SHSC annual business plan.
- Ensure that an annual audit of fire safety and fire safety management is undertaken, and the outcomes communicated to the Trust Board.
- Fully support the Fire Safety Manager function.

In-line with delegated authority, the Director with fire safety responsibility will devolve the day-to-day fire safety duties to the Fire Safety Manager.

6.4 **Fire Safety Manager**

The role of the Fire Safety Manager is primarily a managerial role and will be undertaken by a senior operating manager, the role does not necessitate the duty holder to possess fire safety competencies and will be provided with sufficient access to competent fire safety advice provided either from an internal Fire Safety Advisor or external competent source.

The Fire Safety Manager will act as a focus for all fire safety matters within SHSC and through the Fire Safety Adviser is tasked with:

- The day-to-day implementation of the fire safety policy.
- Reporting of non-compliance with legislation, policies and procedures to the Board Level Director, (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 purposes throughout SHSC.
- The develop, implementation, monitoring and review of SHSC fire safety management system.
- The development, implementation and review of SHSC fire safety policy and protocols.
- Ensuring that fire risk assessments are undertaken, recorded and suitable action plans devised.
- Ensuring that risks identified in the fire risk assessments are included in the SHSC risk register as appropriate.
- Ensuring the operational management of fire risks identified within the fire risk assessments are addressed.
- Ensuring appropriate fire emergency plans are developed and implemented.
- The development, delivery and audit of an effective fire safety training programme.
- Ensuring a suitable reporting system is available for the recording of fire incidents in accordance with SHSC policy and external requirements.
- Monitor, reporting and initiating measures to reduce false fire alarms and unwanted fire signals.
- Liaison with external enforcing authorities.
- Liaison with SHSC managers.
- Liaison with Authorising Engineers (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 outcomes suitably reported.
- Providing a link to relevant SHSC committees and safety groups.
- Provide fire safety reports to SHSC safety and governance committees and sub-groups were applicable.

6.5 **Fire Safety Adviser [Authorised Person (Fire)]**

The Fire Safety Adviser will be accountable to the Fire Safety Manager for matters of fire safety, providing competent fire safety advice and will be responsible for:

- Undertaking, recording and reporting of premise fire risk assessments,
- Providing expert advice on fire legislation.
- Providing expert technical advice on the application and interpretation of statutory fire safety requirements and guidance including DH's Firecode.
- Assisting with the review of the contents of SHSC's Fire Safety Policy, procedures and protocols.
- Assisting with the development and delivery of a suitable and sufficient fire safety training programme.
- The assessment of fire risks within premises owned, occupied or under the control of SHSC.
- The preparation of fire prevention and emergency evacuation plans.
- The investigation and reporting of all fire-related incidents and fire alarm actuations.
- Monitoring and audit of fire safety systems and processes.
- Liaison with the enforcing authorities on fire safety technical issues.
- Liaison with SHSC managers, staff and contractors on fire safety issues.
- Liaison with the Authorising Engineer (Fire).
- Liaison with the Competent Person (Fire).

Where specialist solutions are required to resolve fire safety issues, the Fire Safety Adviser would not necessarily be expected to have the level of skill required, but would know the limits of their capabilities and, when necessary, seek specialist advice from an Authorising Engineer (Fire).

6.6 **Authorising Engineer (Fire) [External Specialist]**

SHSC will appoint an Authorising Engineer (Fire) as considered appropriate to address specialist fire solutions and will be required to demonstrate competence in their particular field of expertise. They will act as an independent professional adviser providing recommendations and reports to the Board Level Director, (with fire safety responsibility), or their delegated representative as required.

6.7 **Competent Person (Fire)**

Installers and maintainers of fire safety equipment and systems will be commissioned by SHSC Authorised Person (Low Voltage) and must be able to demonstrate a level of competence, knowledge and skills in the specialist serve being provided.

This may include the installation and/or maintenance of related fire safety equipment/services such as:

- Fire detection and alarm systems
- Portable fire-fighting equipment
- Fire suppression systems
- Fire dampers
- Fire-fighting hydrants etc.

In cases where external parties provide services, the party concerned should be registered with an appropriate fire industry accreditation scheme.

6.8 **Local Management**
Directors of Service, Heads of Service, General Managers, Departmental Managers, Team Leaders, Clinical Leads and other staff with delegated responsibility for a workplace have a responsibility for:

- Monitoring fire safety within their respective workplaces and ensuring that contraventions of fire safety precautions do not take place.
- Undertaking or designating suitable persons to undertake the role of Fire Warden to assist in implementing the necessary fire safety arrangements as identified to minimise the likelihood of a fire from occurring endangering the health and safety of occupants and other relevant persons for whom a duty of care is held.
- Organising local fire risk assessments to be undertaken and maintained up to date.
- Notifying the Fire Safety Adviser of any proposals for 'change of use', including temporary works that may impact on the risk assessment within their areas of responsibility.
- Reporting defects in the fire precautions and equipment in their area and ensuring that appropriate remedial action is taken.
- Ensuring that local Fire Emergency Evacuation Plan (FEEP) (including plans for persons who may require assistance) are developed for areas and individuals for which they have responsibility, which are to be brought to the attention of staff and adequately rehearsed to ensure sufficient emergency preparedness.
- Are responsible for ensuring suitable and sufficient fire safety procedures and arrangements are developed and implemented to minimise the likelihood of a fire occurring giving cause to injury or harm persons and damage property, assets and the environment.

Managers with responsibility for work areas must undertake regular review of the fire risks within their area of responsibility to ensure risk mitigation measures are appropriate to remove or reduce identified fire risks. Guidance on undertaking workplace fire safety checks will be provided and available within the Fire Safety Protocol documents supporting this policy available on SHSC's intranet, records of safety checks are to be retained and readily accessible for inspection.

6.9 **Fire Warden**
The role of a Fire Warden is to support the local manager with responsibility for the workplace with the implementation and monitoring of the fire safety measures and assisting in the evacuation of persons from the workplace in the event of a fire emergency.

Fire Wardens will act as a focal point for local staff who should be known and clearly identified when undertaking their duties by wearing a hi-visibility garment, whose duties will include undertaking a weekly fire safety check utilising the Fire Safety Protocol: Workplace Fire Safety Check (available in an electronic format on SHSC Intranet). Records of weekly fire safety checks are to be retained for audit purposes and available for inspection as required.

In the event of a fire or the activation of a fire alarm the Fire Warden will act as the focal point within the workplace to ensure everyone is safely evacuated to the designated place of safety being competent and able to:

- Raise the fire alarm.
- Close fire doors to prevent the fire from spreading.
- Ensure vulnerable persons are being assisted.
- Ensure everyone has exited the workplace/premise - check accommodation, including restrooms and storage areas.
- Use fire-fighting extinguishers.
- Assist the workplace manager by undertaking a roll call for people having evacuated the area
- Liaise with Fire Incident Manager/Fire and Rescue Service on arrival providing information on the fire incident and account for persons evacuation of the workplace.

6.10 **Fire Incident Manager**
In the event of a fire emergency the most senior manager in charge of the area and present at the time of the incident should assume the role of the Fire Incident Manager. The Fire Incident Manager is required to:

- Take managerial control of the fire incident.
- Direct 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 Fire Wardens, the Fire Response Team Leader and the Fire and Rescue Service on arrival informing them of the details of the incident.

6.11 **Fire Response Team Leader**
The Fire Response Team Leader is the senior member of staff in the immediate vicinity where the fire incident has occurred, they are required to:

- Respond to confirmed fire events.
- Take responsibility for the implementation of the emergency evacuation plan.
- Liaise with the Fire Incident Manager.
- Liaise with Fire Warden/s.
- Liaise with the attending Fire and Rescue Service.
- Initiate the internal major incident plan (if required).

6.12 **Staff, Contract Staff and Volunteers**
All staff must take reasonable care for the safety of themselves and of other relevant persons who may be affected by their actions at work. Staff are required to inform their line manager, other relevant manager(s) or member of staff with safety responsibilities for the safety of their fellow employees of any incident or situation which may give cause to the injury of harm of an individual whilst at work.

All staff, contractors and volunteers are required to comply with SHSC fire safety requirements and procedures as devised to provide a safe and secure environment, report deficiencies in safety arrangements to line managers and always ensure the promotion of safe and secure practices to help reduce the occurrence of fire incidents.

Contract staff, installers and maintainers of fire safety equipment employed as a Competent Person (Fire) commissioned by SHSC will be required to demonstrate proficient knowledge and specific skills in the specialist service being provided.

6.13 **Estates Fire Compliance Group**
Estate Services will establish an Estates Fire Compliance Group comprising of senior managers and competent persons, the group will report to the Estates Compliance Group providing assurance on the implementation of fire safety preventative measures:

- Fire risk assessments
- Fire risk assessment remedial action plans
- Fire safety equipment maintenance
- Fire detection and alarm system maintenance
- Fire door maintenance
- Emergency lighting maintenance
- Fire training
- Enforcing authorities reports.

7   Protocols and Procedures

7.1 **Protocols**
A set of fire safety protocols in support of this policy will be made available on the SHSC Intranet to assist staff in the development of fire safety arrangements to mitigate and minimise the occurrence of fire incidents. Staff are to familiarise themselves with the fire safety protocols ensuring they take all reasonable measures to minimise the likelihood of a fire occurrence.

7.2 **General Fire Precautions**
It is the responsibility of all members of staff to ensure:

- They comply with the fire safety arrangements devised to reduce the risk of fire within premises and the risk of the spread of fire.
- They are familiar with all means of escape from the building, that the routes are clear, free from obstruction and can be safely and effectively used.
- Fire-fighting equipment is readily available and accessible.
- They are familiar with the fire alarm and detection systems call-points and how to activate the fire alarm.

- They are familiar with the action to be taken in the event of a fire or upon hearing the fire alarm.
- All surplus or defective combustible, electrical and flammable waste materials are stored or disposed of in a suitable receptacle.
- Any significant fire risks identified are reported to line management.

7.3 **Fire Prevention**

A proactive approach is be undertaken by staff to prevent fire-based emergencies and reducing the damage caused by them, measures are to be undertaken to reduce the likelihood of a fire by safety storing or disposal of combustible materials and taking care of points of ignition (such as heating systems and plug sockets) and the restricted use/disposal of damaged electrical equipment.

Smoking is not allowed within buildings or enclosed spaces therefore all reasonable measures are to be undertaken to ensure smoking does not occur within these areas. The following preventative measures will be undertaken:

- An assessment of building fire risk will be conducted with reports submitted to the manager for the premise.
- The Fire Safety Manager reviews detailed issues surrounding the management of fire safety through the quarterly Estates Fire Compliance Group meetings.
- A programme of staff training, evacuation drills and tests are reviewed for assurance. If there is a reduction in testing, or other highlighted concerns, these will be added to the action log.
- The local Fire and Rescue Service may carry out site inspections, which will audit all aspects of fire precautions works and will result in a detailed report of findings to SHSC. Any visit by the local authority should be co-ordinated via the Fire Safety Adviser, in the event of an unannounced visit the Estates and Facilities Technical Support Team should be contacted.
- Periodic inspections of the fire safety evacuation plans carried out will be reviewed by the Fire Safety Adviser and reported back to the Estates Fire Compliance Group.
- A planned fire precautions programme of inspection and maintenance will be undertaken by the Estate Services Maintenance Department; the program and priorities will be determined at the quarterly Estates Fire Compliance Group meetings by the Fire Safety Manager to ensure it is correct and adheres to regulatory requirements.
- All Capital Development, whether new development or upgrading, will be designed in accordance with DH Firecode, incorporate all active and passive fire precautions as agreed with the Local Authority Building Control and Fire Safety Adviser as required. All projects that have a potential impact on a building or the operational delivery within that building should be reviewed by the Authorising Engineer (Fire) and, where necessary, with the Estates Fire Compliance Group.

7.4 **Fire Detection and Alarm Systems, Fire Action and Unwanted Fire Signals (UwFS [False Alarm])**

SHSC will wherever possible undertake measures necessary to identify, control and reduce unwanted fire signals (UwFS) within premises under its control to minimise the disruption caused to its service provision and that of the Fire and Rescue Service.

Fire detection and alarm systems are installed within premises to provide early detection of a fire, alerting occupants of a fire incident. Fire detection and alarm

systems within small premises will when activated provide an alarm warning throughout the building indicating that the premise is to be evacuated.

It is not considered practicable or desirable to initiate a full evacuation of a large healthcare building providing accommodation to multiple departments and services located in different floors i.e. hospital where internal fire protection can be provided, in these premises an evacuation method referred to as 'Progressive Horizontal Evacuation (PHE)' will be implemented which allows a process of evacuating people away from danger and to safety through a fire-resistant barrier on the same floor to be implemented.

The causes of a fire detection and alarm system activation can be broadly classed as one of two incident types: Fire or UwFS. These incidents can be defined as follows:

- **Fire -** a fire can be regarded as an incident resulting in the uncontrolled emission of heat and/or smoke.
- **UwFS -** an incident resulting in the undesirable activation of the fire detection and alarm system following.

Fire Action – Discovering a fire

Upon discovery of a fire, staff are to:

- Activate the Fire Detection and Alarm System by means of the Fire Alarm Call-Point (by breaking the glass or key operation), this alerts all other persons in the immediate area/building of the fire.

- Contact the Fire and Rescue Service via the Switchboard Operator on the emergency number: **2222**, informing them of the fire incident,

- Attempt to extinguish the fire using a suitable fire extinguisher only if it is considered safe to do so, the fire is no larger than a small waste bin, you have been trained or confident in the use of a fire extinguisher.

- Where the fire cannot be extinguished immediately or with one extinguisher, leave the fire, close the door and exit the workplace/building or if your escape route is compromised,

- Leave the workplace/building by the nearest available fire exit and proceed to the designated Fire Assembly Point.

Fire Action - Hearing the Fire Alarm

When a fire alarm has been heard, the following actions are to be undertaken:

- Continual Alarm Tone
  Where a continual alarm is heard by staff in their immediate working area they should contact the Switchboard Operator on the emergency number 2222 informing them of the fire alarm activation.

  In an attempt not to seek the assistance from the Fire and Rescue Service, where the alarm has been activated due to UwFS, the Switchboard Operator should be informed to delay a call for the Fire and Rescue Service for a period not exceeding 2.5 minutes to allow staff time to undertake a preliminary investigation of the alarm activation by considering the

information displayed on the premises Fire Detection and Alarm System and visiting the activation source to determine whether a fire or an UwFS has occurred and assistance from the Fire and Rescue Service is required.

Where a fire can be confirmed, contact the SHSC Switchboard Operator on the emergency number 2222 and ask to be connected to the Fire and Rescue Service to report a confirmed fire; implement the Fire Emergency Evacuation Plan.

Where a fire or UwFS cannot be confirmed within 2.5 minutes the Switchboard Operator should be contacted using the emergency number 2222 and ask to be connected to the Fire and Rescue Service to report the fire alarm activation, that a fire cannot be confirmed and that you are implementing the Fire Emergency Evacuation Plan.

- Intermittent Alarm Tone
  Where a fire alarm has activated with an intermittent tone it is indicating that a fire alarm smoke, heat or call-point has been activated in an adjourning area, staff are not required to evacuate however, they should prepare to implement the workplace Fire Emergency Evacuation Plan in the event that the alarm tone changes from intermittent to continual.

- SHSC Switchboard Operator
  All SHSC premises have Fire Detection and Alarm Systems which are monitored by the Switchboard Operator who will connect callers to the Fire and Rescue Service Operator as appropriate. When a fire alarm has activated the Switchboard Operator will monitor the premise's fire alarm for a period of 2.5 minutes awaiting an emergency call (2222) from premise occupants, (where occupied). The following arrangements will be undertaken:

- Emergency Call Received
  When an emergency call is received following fire alarm activation, the Switchboard Operator is to inform the caller:

  o **SHSC Switchboard Operator; "do you require the Emergency Services?"**
  o (If Yes) "**Can you give me your name and job title please?"**
  o **"Do not hang up the phone; I am connecting you to the Emergency Services Operator now".**

  Monitor the emergency call; provide information as appropriate to assist both caller and the Emergency Services Operator.

- Emergency Call Not Received
  In the event that no emergency call has been received following the activation of the fire alarm within 2.5 minutes, the Switchboard Operator is to contact the Fire and Rescue Service informing them of:

  o **SHSC Switchboard Operator'**
  o **Address and postcode of premises where alarm activation has occurred.**
  o **Relevant information relating to activation as requested.**

- <u>Liaison with the Emergency Service Operator</u>
  The Fire and Rescue Service's Emergency Switchboard Operator will be unfamiliar with the Trust's evacuation strategy; under no circumstance should the SHSC Switchboard Operator contact staff or departments informing them to evacuate an area/building; this is the responsibility of the workplace manager to determine in accordance with their Fire Emergency Evacuation Plan.

Unwanted Fire Signals (UwFS [False Alarm])
Undertaking normal activities may result in the uncontrolled emission of heat and/or smoke resulting in an undesirable activation of the fire detection and alarm system, it is possible for a genuine fire incident to be classed as an UwFS e.g., making toast, this is to be classed as an UwFS, other incidents such as system faults, malicious activation (including smoking), accidental damage, good intent (believed a fire had occurred) and cooking are also to be classified as UwFS.

SHSC will undertake reasonable measures to minimise the occurrence of UwFS with the aim of reducing the requirement for the mobilisation of the Fire and Rescue Service in response to a fire alarm activation. Staff should attempt to ascertain the cause of the fire alarm activation by reviewing the information displayed on the Fire Detection and Alarm System Indicator Panel and undertake an initial investigation (where safe to do so) to determine whether the Fire and Rescue Service need to be mobilised, where an UwFS has been confirmed the member of staff undertaking the investigation is to:

- Inform the Switchboard Operator of the cause of the UwFS and not the call for the Fire and Rescue Service.
- Silence and Reset the Fire Alarm Indicator Panel.
- Return to normal working duties.
- Complete a Ulysses Incident Report Form.

7.5 **Fire Emergency Evacuation Plans (FEEP)**
Managers with delegated responsibility for work areas are to ensure they have developed a suitable FEEP for the benefit of all staff and a Personal Emergency Evacuation Plan (PEEP) for persons who require assistance to evacuate which is to be shared and made readily available within the workplace for all staff. The FEEP is to explain the fire safety actions that are to be taken by staff in the event of discovering a fire or fire alarm actuating. Rooms where fires have occurred are to be evacuated within 2.5 minutes to a designated place of comparative safety within an enclosed area protected to a half hour fire resisting standard i.e., adjacent fire compartment, an enclosed corridor or staircase, then 30 minutes in a comparative safe area to outside the premises and finally to the ultimate safe area away from the building i.e., external Fire Assembly Point.

7.6 **Fire Fighting Equipment, Fire Detection and Alarm Systems and Fire Dampers**
All premises, where required, will be provided with suitable and sufficient fire-fighting equipment, fire detection and alarm systems and fire dampers to allow for a fire to be extinguished in its initial stages of development (if safe to do so), a fire to be detected and an alarm raised and the prevention of smoke transfer within ventilation/ducts systems.

The Fire Safety Adviser and or delegated persons, will ensure that fire-fighting equipment, fire detection and alarm system and fire damper systems are

serviced and maintained by a Competent Person (Fire) in accordance with relevant inspection and maintenance standards. A Programme of Planned Maintenance (PPM) is to be developed by Estates Maintenance Manager to allow for the monitoring of inspections and maintenance undertaken with records retained and assurance reports provided to the Estates Fire Compliance Group.

Line managers are to ensure that all staff are familiar with the location of fire detection and alarm system call-points and how to use them in the event of a fire emergency, the location of fire-fighting equipment within their work area(s) and the action to be undertaken in the event of a fire alarm activation.

7.7 **Emergency Routes and Exits**
All designated fire escape routes to exits are to be kept clear and free from obstruction at all times to enable free and unhindered egress to the exit door leading outside the premise. All escape routes will be suitably illuminated with appropriate directional safety signs to indicate the direction of travel to the exit doors, which will open in the direction of escape.
Final exit doors must not be locked or fastened so they cannot be opened easily and immediately by any person who may require to use them in an emergency.

7.8 **Serious and Imminent Danger - Fire Warden**
All line managers with responsibility for work areas are to appoint a suitable quantity of persons as Fire Wardens to assist them to implement those fire emergency arrangements in so far as they relate to the evacuation of persons from the workplace/building in the event of serious and imminent danger as a result of a fire when the workplace is occupied. Managers providing agile working environments must ensure that all staff are suitable trained as Fire Wardens and provided with suitable hi-visibility garments so as to ensure they are easily identified during as a Fire Warden in a fire emergency. Fire Wardens will be required to undertake specific training on the 'Roles and Responsibilities of a Fire Warden'; training will be provided by direct learning and SHSC online learning programme every two years. Online learning is available via the Electronic Staff Record System (ESR).

7.9 **Maintenance of Electrical Equipment**
A Programme of Planned Maintenance (PPM) for fixed electrical wire testing (every 5 years) and portable appliance testing (annually and 6-monthly) for electrical equipment is undertaken, records of compliance are provided to the Estates Electrical Safety Compliance Group by competent persons with assurance provided to the Estates Compliance Group.

All line managers with responsibility for the operational use of electrical equipment must ensure equipment used remains in good working order and that defective equipment is removed from use until repaired for use or disposed of via Estate Services.

7.10 **Textiles and Furnishings**
SHSC will ensure that textiles and furnishings used are purchased in accordance with relevant legislative requirements providing the recommended level of resistance to ignition. All healthcare premises and hospitals are classified as medium or high hazard with an additional category of "very high hazard", covering accommodation in certain hospital wards (secure psychiatric units/wards).

The in- patient accommodation listed below for patient categories classified as "High Hazard – High Risk" require to be provide with bed-based mattresses fire resistant to ignition source 7:

- The elderly
- People with learning difficulties
- Young people with disabilities
- Medium secure and secure premises for people with mental health problems.

Furniture and furnishing provided for all accommodation not identified as 'High Hazard – High Risk' in-patient and administrative accommodation classified as 'Medium Hazard – Medium Risk' are required to be fire resistant to ignition source 5.

Pressure-Relief Products
Where there may be a conflict between fire safety and the health of a patient, discussion should take place between care staff and the Fire Safety Advisor, decisions on the suitability of any pressure- relief products selected for use should be adequately documented in a fire risk assessment and monitored by the Fire Safety Adviser for audit.

7.11 **Provision of Fire Safety Information**
The Fire Safety Adviser will ensure all work premises are provided with appropriate fire safety signage including: 'Fire Action Notices' indicating the action to be undertaken, the direction of travel to exit the building in the event of a fire emergency, Refuge Areas and Fire Assembly Points. All managers with devolved responsibility for the management of risk within the workplace are to ensure that relevant fire safety information including the premise fire risk assessment and the fire emergency evacuation plan relating to the safety of premise occupants are made readily available to inform staff and visitors of safety information relevant to the workplace.

7.12 **Training**
The provision of fire safety training is a mandatory requirement; staff are required to have an understanding of the fire risks to which they or relevant persons may be exposed to and know what to do in the event of a fire so that fire safety procedures can be effectively applied.
Fire safety training will be provided to staff by a person competent in fire safety matters and via the Electronic Staff Records (ESR) 'my learning' page and must be undertaken by all staff every two years.

Fire Wardens who undertake a vital role in assisting in the management of fire safety arrangements within the workplace will be required to undertake additional specific training on the 'Roles and Responsibilities of a Fire Warden', which is available via the 'my learning' on-line learning programme within the Electronic Staff Records System (ESR) and must be undertaken every two years.

A simulated fire emergency evacuation exercise known as a 'Fire Drill' will be conducted by a person competent in fire safety matters on a regular basis or as determined appropriate by the competent persons:

- None in-patient accommodation: Annually,
- In-patient accommodation: Biannually (1 x Day & 1 x Night)

Managers are to ensure that all staff for which they have responsibility undertake fire safety training identified as relevant to their roles and responsibilities. Line managers are to undertake local fire safety induction training with all new members of staff to include:

- Details of risks identified in the fire risk assessment.
- Details of fire protective and preventative measures in place.
- Specific instructions necessary to prevent fires from occurring.
- Details of the local fire emergency plan including:
  o The action to be taken on discovering a fire
  o Means of raising the fire alarm
  o Actions upon hearing the fire alarm
  o Staff responsibilities during a fire alarm
  o Procedures for evacuation
  o Location of fire exits and evacuation equipment
  o Location of fire-fighting equipment (fire extinguishers)
  o Other relevant equipment etc.
  o A physical tour of the escape routes and fire assembly points if appropriate or places of relative safety.

7.13 **Co-operation and Co-ordination**
Where SHSC is the controller of a premise, it will co-operate and co-ordinate with other employers when occupying a shared workplace on a permanent or temporarily duration and take all reasonable actions to enable each employer to comply with fire safety legislation. SHSC will take all reasonable measures to inform other employers of the fire risks to their employee's health and safety from the conduct of its undertakings.

Where the controller of the workplace is not SHSC and the responsibility for the premises fire safety systems and arrangements belong to a landlord or third party, SHSC will coordinate with the premise controller to ensure the premise is safe to occupy.

8   Development, Consultation and Approval

Name of Policy: Fire Safety	Name of Policy Lead: Stephen Price, Security and Fire Officer
Date: March 2023	Contact Details: (0114) 271 8189

Consultation Plan:
This policy is applicable to all SHSC staff, volunteers and contractors. The policy will be provided to Service Directors, Ward Managers, Unison Members and placed on the SHSC Intranet Policy Forum - Policy consultation page to allow comments and amendments to be provided prior to being submitted for approval and ratification.

RECORD OF CONSULTATION (interactive)			
Group or individual consulted	**Date of consultation/ response received**	**Comments on draft policy**	**Your response (say if policy amended - if not, why not)**
Service Directors	18/10/2022	Nil	
Ward Managers	18/10/2022	Nil	
Unison Members	18/10/2022 13/03/2023	Nil Nil	
SHSC Intranet Forum – policy consultation	18/10/2022 13/03/2023	Nil Nil	
Health and Safety Manager	18/10/2022/ 14/11/2022	Changes to draft text and suggested inclusion of additional text	Policy amended to reflect suggested changes
Director of Strategy	03/03/2023	Fire precautions in new and refurbished buildings	Fire Safety Protocols provide supporting implementation process

9   Audit, Monitoring and Review

Monitoring Compliance Template						
Minimum requirement	Process for monitoring	Responsible individual/ group/committee	Frequency of monitoring	Review of results process (e.g. who does this?)	Responsible individual/group/ committee for action plan development	Responsible individual/group/ committee for action plan monitoring and implementation
Policy monitoring	Levels of reported incidents	Fire Safety Adviser	Daily	Security and Fire Officer	Fire Safety Adviser	Health and Safety Committee
Policy monitoring	Fire Risk Assessment and Remedial Action Plans	Fire Safety Adviser	Daily	Security and Fire Officer	Fire Safety Adviser	Health and Safety Committee
Policy monitoring	Equipment Testing and Maintenance	Estate Services Maintenance Manager	Monthly	Head of Estate Services	Estates Compliance Group	Health and Safety Committee
Policy monitoring	Fire Training	Fire Safety Adviser	Monthly	Fire Safety Adviser	Estates Fire Compliance Group	Health and Safety Committee
Policy monitoring	Fire Audit	Fire Safety Adviser	Daily	Security and Fire Officer	Estates Fire Compliance Group	Health and Safety Committee

The Fire Safety Adviser is responsible for ensuring that suitable audits, monitoring and review of this policy is undertaken to assess the effectiveness of this policy. This policy will be reviewed in 3 years or earlier if required due to changes in its effectiveness, legislative requirements or national guidance.

10 Implementation Plan

Action/Task	Responsible Person	Deadline	Progress update
The draft, revised policy submitted to identified individuals and groups for consultation	Security and Fire Officer	October 2022	Policy distributed for consultation
Comments received for consideration and amendment	Security and Fire Officer	November 2022	Comments received and policy amended
Policy sent to the Health and Safety Committee for approval	Security and Fire Officer	March 2023	Policy approved 28.3.2023
Health and Safety Committee submit Policy to the Policy Governance Group for approval	Security and Fire Officer	April 2023	Policy submitted for approval
The Policy Governance Group approve policy and submit it to the Quality Assurance Committee for ratification	Chair of Policy Governance Group	April 2023	Policy approved with minor changes to Items 10 & 12 and removal of App 3 with changes brought to Health and Safety Committee
Resubmit Policy to Health and Safety Committee with minor changes for approval	Security and Fire Officer	May 2023	Policy approved by Health and Safety Committee 23.05.2023
Policy sent to the Quality Assurance Committee for ratification	Chair of Policy Governance Group	May 2023	Policy approved by PGG and HSC
Policy placed on the Trust's intranet and internet for dissemination. All previous versions to be removed with an email alert to all staff	Policy Governance Group	May 2023	
Managers to inform staff for which they have responsibility of the revised Policy	Managers	May 2023	

11 Dissemination, Storage and Archiving (Control)

Upon ratification of this policy, an 'All SHSC staff' email alert will be sent to staff, informing them of the new/revised policy and attaching the link showing where the policy can be accessed via the intranet and internet. Directors of Service are to ensure all teams and areas are made aware of this new/revised policy and how to apply it.

The previous Fire Policy, (version 7), will be removed from the Trust intranet by the Director of Corporate Governance and archived on the policy database. Team managers are responsible for ensuring it is also removed from any policy and procedure manuals, or files stored in their offices, and destroyed.

12 Training and Other Resource Implications

Suitable, sufficient and appropriate fire safety training will be devised and delivered by competent persons to ensure Trust employees and other persons for whom the Trusts holds a duty of care are aware of fire risks and the actions required to be undertaken to minimise the risk of a fire occurring. All members of staff are required to undertake mandatory fire safety awareness training every 2 years.

13 Links to Other Policies, Standards (Associated Documents)

This policy has been devised in accordance with the requirements of:

- Regulatory Reform (Fire Safety) Order 2005
- The Health and Safety at Work Act 1974
- *Department of Health Firecode Suite of documents - Health Technical Memoranda*
- SHSC Policy: *DCEO 001 – Health and Safety*
- SHSC Policy: MD 023 - Incident Management Policy and Procedure (including Serious Incidents).

14 Contact Details

Title	Name	Phone	Email
Security and Fire Officer	Stephen Price	27 18189	stephen.price@shsc.nhs.uk
Fire Safety Adviser	Douglas Alcock	27 18185	dougie.alcock@shsc.nhs.uk

Appendix 1

Equality Impact Assessment Process and Record for Written Policies

Stage 1 – **Relevance** - Is the policy potentially relevant to equality i.e. will this policy potentially impact on staff, patients or the public? This should be considered as part of the Case of Need for new policies.

NO – No further action is required – please sign and date the following statement. **I confirm that this policy does not impact on staff, patients or the public.**	*I confirm that this policy does not impact on staff, patients or the public.* Name/Date: Stephen Price, March 2023	**YES,** go to **Stage 2**

Stage 2 Policy Screening and Drafting Policy - Public authorities are legally required to have 'due regard' to eliminating discrimination, advancing equal opportunity and fostering good relations in relation to people who share certain 'protected characteristics' and those that do not. The following table should be used to consider this and inform changes to the policy (indicate yes/no/ don't know and note reasons). Please see the SHSC Guidance and Flow Chart.

Stage 3 – **Policy Revision** - Make amendments to the policy or identify any remedial action required and record any action planned in the policy implementation plan section

SCREENING RECORD	Does any aspect of this policy or potentially discriminate against this group?	Can equality of opportunity for this group be improved through this policy or changes to this policy?	Can this policy be amended so that it works to enhance relations between people in this group and people not in this group?
Age	No	No	No
Disability	No	No	No
Gender Reassignment	No	No	No
Pregnancy and Maternity	No	No	No
Race	No	No	No
Religion or Belief	No	No	No
Sex	No	No	No
Sexual Orientation	No	No	No
Marriage or Civil Partnership	No		

Please delete as appropriate: - Policy Amended

Impact Assessment Completed by: Name/Date: Stephen Price, March 2023

Appendix 2

Review Policy Checklist

This checklist to be used as part of the development or review of a policy and presented to the Policy Governance Group (PGG) with the revised policy.

		Tick to confirm
	Engagement	
1.	Is the Executive Lead sighted on the development/review of the policy?	√
2.	Is the local Policy Champion member sighted on the development/review of the policy?	√
	Development and Consultation	
3.	If the policy is a new policy, has the development of the policy been approved through the Case for Need approval process?	N/A
4.	Is there evidence of consultation with all relevant services, partners and other relevant bodies?	√
5.	Has the policy been discussed and agreed by the local governance groups?	√
6.	Have any relevant recommendations from Internal Audit or other relevant bodies been taken into account in preparing the policy?	√
	Template Compliance	
7.	Has the version control/storage section been updated?	√
8.	Is the policy title clear and unambiguous?	√
9.	Is the policy in Arial font 12?	√
10.	Have page numbers been inserted?	√
11.	Has the policy been quality checked for spelling errors, links, accuracy?	√
	Policy Content	
12.	Is the purpose of the policy clear?	√
13.	Does the policy comply with requirements of the CQC or other relevant bodies? (where appropriate)	√
14.	Does the policy reflect changes as a result of lessons identified from incidents, complaints, near misses, etc.?	√
15.	Where appropriate, does the policy contain a list of definitions of terms used?	√
16.	Does the policy include any references to other associated policies and key documents?	√
17.	Has the EIA Form been completed (Appendix 1)?	√
	Dissemination, Implementation, Review and Audit Compliance	
18.	Does the dissemination plan identify how the policy will be implemented?	√
19.	Does the dissemination plan include the necessary training/support to ensure compliance?	√
20.	Is there a plan to i. review ii. audit compliance with the document?	√
21.	Is the review date identified, and is it appropriate and justifiable?	√