

FIRE SAFETY POLICY (F-006)

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Author (name & job title)	Paul Dent, Safety, Information & PPE Manager
Executive Lead (name & job title):	Peter Beckwith, Director of Finance
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Policies should be accessed via the Trust intranet to ensure the current version is used

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1. INTRODUCTION

Humber Teaching NHS Foundation Trust (HTFT) is committed to fulfilling its obligations under the Regulatory Reform Fire Safety Order 2005 legislation with regard to fire safety.

1.1 Definition

Fire is a destructive force which not only threatens the life of patients, visitors and staff but causes damage to property and disrupts patient care. Even a relatively minor fire can have significant implications as regards loss or damage to records or clinical equipment.

The consequences of fire in hospitals and other health care premises can be especially serious because of the dangers and difficulties associated with the emergency evacuation of patients, many of whom may be highly dependent.

The aim, therefore must be to ensure that, if possible, outbreaks of fire do not occur, but if and when outbreaks do occur, they are rapidly detected, effectively contained and quickly extinguished. An involvement in fire procedures is therefore a basic duty of all staff and an essential obligation for all persons with management responsibilities.

Care Quality Commission (CQC) - Essential Standards of Quality and Safety.

This policy supports the compliance with the Care Quality Commission Regulation 10, Outcome 16 'Patients who use the service will benefit from quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety'.

2. SCOPE

This Policy applies to all staff members who are responsible for or involved in the use of Trust premises for operational matters and patient care.

3. POLICY STATEMENT

Humber Teaching NHS Foundation Trust (HTFT) is committed to providing a fire safe environment for all patients, visitors and staff.

This will be achieved through a framework of policies, procedures and training in addition to ensuring all premises meet mandatory and statutory fire precaution standards. **(See Appendix A)**

The management of fire safety is an ongoing process. Standards will be kept under constant review and the impetus for improvement maintained.

Caring for all personnel and minimising risk is inseparable from all other Trust objectives. The Trust accepts that a fire safety strategy or policy requires a high level of management commitment, professional competence and adequate resources.

This policy applies to all Trust premises and forms part of the overall risk management strategy.

This policy also applies to all staff of outside organisations frequenting Trust premises or organisations leasing/renting part of or the whole of the premises from HTFT for the use as business premises for discharging the functions of that business.

The Responsible person from the outside organisation will be accountable as the 'Responsible Person' for implementing this policy and the appendices which will be deemed an 'umbrella policy' for leased or multi occupied premises owned by HTFT.

4. DUTIES & RESPONSIBILITIES

Secretary of State

The Secretary of State retained powers of direction under the NHS and Community Care Act 1990 which requires Trust premises to comply with the provision of Firecode.

Chief Executive

The Chief Executive is responsible for compliance with all statutory fire safety requirements and Firecode documents.

Executive Director of Finance/Senior Information Risk Owner

To assist the Chief Executive in the discharge of these responsibilities, the Executive Director of Finance/Senior Information Risk Owner is nominated as having responsibility for fire matters at Trust Board level.

Fire Safety Manager

- The Fire Safety Manager is directly responsible for fire to the Executive Director of Finance/Senior Information Risk Owner. This officer is responsible for the general fire safety standards and observance and review of fire safety policies for the premises.
- The Fire Safety Manager is to act as a competent person to provide expert advice to the organisation's management and staff. Such a person must have enough training, experience and knowledge to enable them to advise and assist with regard to preventative and protective fire safety measures.
- Provide fire safety advice upon request to premises managers, nominated fire officers and fire wardens/marshals.
- Conduct audits of premises on an annual basis to ensure that fire precautions are suitable and provide a written report to the premises manager highlighting any areas of concern. **(See Appendix B)**
- Produce and deliver fire safety training packages including mandatory annual/bi-annual fire training and fire warden/marshal training.
- Collate fire and false alarm reports and provide advice to managers to prevent recurrence.

Line Managers

- In each premises, responsibility for continuing day to day compliance with fire safety provisions lies with the Line Manager. Line Managers may nominate persons having managerial control of the area in accordance with the requirements of the Regulatory Reform Fire Safety Order 2005 to assist in the undertaking of fire safety duties (fire wardens); however, it must be understood that such responsibilities cannot be abdicated, and the overall responsibility will always remain with the Line Manager.
- Responsible in law for ensuring that fire safety policies and particular instructions are brought to the attention of all staff and observed by them.
- Responsible in law for ensuring that staff, including part time and agency personnel, undertake mandatory annual fire safety training and, if appropriate, specific instruction on the risks and procedure relative to their workplace.
- Have a legal duty to ensure that sufficient staff are available to facilitate a total evacuation of the premises in the event of a fire and full evacuation exercises (2 per year) take place to ensure staff are familiar with their roles and responsibilities during such an evacuation.
- Liaise with the Fire Safety Manager of the Trust on all aspects of fire safety.
- Receive recommendations from the Fire Safety Manager relating to fire precautions, fire incidents and false alarms and arrange for them to be acted upon.

Trust staff

- All personnel working for the Trust have a duty to comply with the requirements of the Regulatory Reform Fire Safety Order 2005 as well as any local policies and protocols which may be in place. This will include the participation in training, fire drills and evacuation exercises.
- Staff should be encouraged to report to Line Managers or the nominated fire officer (fire wardens) instances where properly agreed fire safety procedures are not being implemented or observed, i.e. sources of ignition, inappropriate storage of combustibles, anything affecting the integrity of escape routes and fire compartments, continued use of faulty equipment etc.
- All staff have a responsibility to ensure they are familiar with the fire routine of any building in which they are working including familiarisation with escape routes, the location of fire alarm operating points, the location of fire extinguishers and the location of the assembly point.
- Responsible Persons (managers) of premises have a responsibility to ensure enough fire wardens are available at all times the premises are in use. This is a requirement under the Regulatory Reform Fire Safety Order 2005 (RRFSO 2005).

5. PROCEDURES

The Trust's policy on Fire Safety is:

- In the event of fire, the action of staff will be in accordance with the fire procedure designed for the premises. **(See Appendix F).**
- The Fire and Rescue Service must be notified of all **FIRE** incidents.
- All fire and false alarm incidents must be reported by the Line Manager of the premises to the Fire Safety Manager, any fire or false alarm of malicious or doubtful origin must be reported to the police and a crime number obtained. **(See Appendix D).**
- All outbreaks of fire in NHS premises under the control of, or contracted to a Foundation Trust must be reported promptly (within 48 hours) by the Responsible Person or Nominated Officer (Fire) via the efm system (www.efm.ic.nhs.uk). The Fire Safety Manager and Head of Estates are to be informed immediately this occurs.
- Fires involving death, serious injury, large scale evacuation or major damage are to be reported by email to fire@dh.gsi.gov.uk or telephone 0113 254 6881.
- Fires involving death or serious injury must also be reported to the Health and Safety Executive under the Report of Injuries, Disease and Dangerous Occurrences Regulations (RIDDOR). The Fire Safety Manager and Head of Estates are to be informed immediately this occurs. Liaison with the Fire Safety Manager must take place before reports are made.
- Other matters relating to fire details and procedures are attached as appendices. **(See Appendix C & H)**

6. EQUALITY & DIVERSITY

An Equality and Diversity Impact Assessment has been carried out on this document using the Trust approved E.I.A.

7. IMPLEMENTATION

This policy will be disseminated by the method described in the Policy and Procedural Documents Development and Management Policy.

The implementation of this policy requires no additional financial resource.

8. MONITORING & AUDIT

The monitoring and fire risk assessment audits of Trust buildings are carried out in the Trust by the Fire Safety Manager. This is by a yearly inspection of the premises and by interim site checks on a regular basis plus the checking of all Fire Alarm Activation Reports received.

The Trust Fire Safety Manager will audit compliance with this policy as part of the Regulatory Reform Fire Safety Order 2005. Confirmation of compliance will be through annual fire risk assessments.

9. REFERENCES/EVIDENCE/GLOSSARY/DEFINITIONS

References/Evidence

Regulatory Reform Fire Safety Order 2005
Firecode/HTM 05-01 Documents Part A-L

Associated Trust Documentation

Properties Fire Risk Assessments
Firecode (HTM) Suite of Documents

Appendix A – Statutory Requirements

STATUTORY REQUIREMENTS

The primary legislation covering fire safety is the Regulatory Reform Fire Safety order 2005. All previous fire safety legislation is repealed or revoked.

This statute contains provisions which create a number of criminal offences and sets out the penalties for such offences. The penalties on conviction include fines, imprisonment, or both.

The Regulatory Reform Fire Safety Order 2005

This piece of legislation united nearly all the preceding pieces of UK Fire Safety legislation into one comprehensive law. The most significant actions in this respect were to repeal the Fire Precautions Act 1971 and to revoke the Fire Precautions (Workplace) Regulations 1997. The latter represented a significant shift of emphasis of the law toward Risk Assessment and it is in this direction that the new Order has continued.

Premises Accountability

Under the Order, accountability for individual premises is given to the person deemed to be in managerial control of the premises, the employees and other relevant persons resorting to the premises, for example patients and visitors. The Order requires this person to be the 'Responsible Person', accountable for the safety of the employees and other 'relevant persons' by properly managing the following;

- Premises Fire Risk Assessment
- Premises Fire Safety Policy
- Fire Procedures (including total evacuation)
- Staffing levels to facilitate total evacuation (adequate number of fire wardens)
- Fire Precautions (protective & preventative)
- Staff Training
- Fire Drills
- Means of Escape
- Signs and Notices
- Emergency Lighting
- Fire Alarm
- Fire Extinguishers
- Fire Doors and compartment
- Weekly/monthly checks

Assistance can be given to managers with many of the above duties, such as the formulation of the fire risk assessment and evacuation policy. Other responsibilities however require a specific commitment from the manager alone, such as the day-to-day maintenance of fire precautions in the premises and the duty to ensure that staff receives suitable training in fire safety.

Managers also have a duty to ensure that efficient arrangements are in place to guarantee the evacuation of premises in the event of a fire. This is best achieved by the appointment of trained fire wardens and the carrying out of regular fire drills/exercises.

Authorised inspections from the Fire and Rescue Service who have powers to visit premises and will require production of, for inspection the fire risk assessment and evacuation policy as well as evidence that training, evacuation exercises and weekly/monthly checks have been carried out. They may then inspect the premises to ascertain the adequacy of the fire safety arrangements.

Fire & Rescue Service Inspectors have the power to prohibit use of all or part of the premises until they are satisfied that efficient arrangements are in place to secure the safety of persons in the event of a fire.

In rare cases, usually following a fire incident where people are injured, legal action may be taken and such action will always be against the person(s) of 'most appropriate responsibility'.

Example

- A fire breaks out in a building due to a fire door being wedged open and people suffer smoke inhalation as they make their escape. The person who wedged open the fire door is obviously responsible, but so are the manager and/or any person with managerial responsibility who has allowed the door to be wedged open. They are the persons of 'most appropriate responsibility' and legal action would almost certainly follow, possibly resulting in an unlimited fine and/or imprisonment.
- The storage (however temporary) of combustibles on escape routes such as corridors, stairway enclosures, entrance/exit lobbies etc.
- Insufficient staff on duty to facilitate the total evacuation of the premises.
- Staff not trained on a frequency commensurate with their role.
- Fire drills not held.
- No regular testing of doors, alarms etc.
- No maintenance of fire precautions including the alarm system, emergency lighting, fire extinguishers etc.
- Records not kept.
- Inadequate signage of exit routes

The above list is by no means exhaustive.

The Building Act 1984 and Building Regulations

New buildings and material changes on existing buildings, including structural fire precautions and means of escape, will involve consultation with the Fire Authority to determine requirements for any active fire safety measures.

Appendix B – Fire Risk Assessments

FIRE RISK ASSESSMENTS

At least annually the Fire Safety Manager will audit the premises against the Fire Risk Assessment to ensure continuing compliance with the Regulatory Reform Fire Safety Order 2005 and Firecode (HTM Documents). The audit is to be recorded and retained with the copy of the Fire Risk Assessment, located within the site/building fire folder.

Managers are responsible for the formulation and review of the Fire Risk Assessment which will;

- Identify potential hazards.
- Identify any persons (patient, staff or visitor) at risk.
- Evaluate the risk and implement measures to remove, reduce or control the risk to an acceptable level.
- All identified risks from fire will be documented and systematically analysed and prioritised for action as necessary.
- All relevant staff should receive information on control measures, including policies, procedures and protocols put into place to minimise risk and where appropriate staff training is to be undertaken to reduce knowledge gaps.
- The Fire Risk Assessment will be in writing and made available to Authorised Inspectors on request.
- The Fire Risk Assessment will be regularly reviewed and revised if significant changes to the premises, procedures, processes, equipment or room use lead to new or increased hazards invalidating the original assessment.

Appendix C – Fire Equipment Testing

FIRE EQUIPMENT TESTING

At all Trust buildings/sites a record is to be maintained of fire equipment tests and checks. The record, which must be kept for at least 3 years in the fire file, should incorporate the following;

- Tests and maintenance on fire alarm and detection systems, emergency lighting and firefighting equipment.
- Weekly & Monthly checks completed on the audit form.
- The date of the test or maintenance and who carried these out.
- Details of defects and action taken.
- Date defects rectified and by whom.

Where maintenance work on fire alarm and detection systems are being carried out by in-house staff or contractors, a permit to work is to be issued to safeguard integrity of the system and ensure an adequate level of fire arrangements are maintained.

Electrical equipment accounts for a significant proportion of fire incidents in healthcare premises. To minimise the potential risk of fire the following should always be observed:

- Unless it is designed to be permanently connected to the mains supply electrical equipment should be switched off and preferably unplugged or isolated when not in use or when it is unattended, especially overnight.
- No attempt should be made by non-competent persons to carry out an unauthorised adjustment, modification or repair to equipment or wiring.
- No official or private electrical appliance should be used until it has been subjected to Portable Appliance Test (PAT) and approved by a competent person. Subsequent tests should then be carried out annually or as dictated by a competent person.
- Any suspect electrical equipment or electrical wiring must be withdrawn from service immediately, labelled and reported to the Humber Estates Help Desk Tel: 01482 477877 or email hnf-tr.estates@nhs.net
- Hot food preparation equipment must only be located in a kitchen environment. Toasters must be fitted with a bespoke plug and socket located in the kitchen before use.

Appendix D – Fire Reporting Procedure

FIRE REPORTING PROCEDURE

- In the event of fire, the action of staff will be in accordance with the fire procedure formulated for the premises.
- The Fire and Rescue Service must be notified of **ALL** fire incidents.
- All fire and false alarm of fire incidents must be reported by the manager of the premises to the Fire Safety Manager. Any fire or false alarm of malicious or doubtful origin must be reported to the police and a crime number obtained.
- All fire and false alarm activations must be documented via the **DATIX** reporting system.
- All outbreaks of fire in NHS premises under the control of or contracted to a Health Authority must be reported promptly (within 48 hours) by the Responsible Person or Nominated Officer (Fire) via the efm system (www.efm.ic.nhs.uk). The Fire Safety Manager and Head of Estates & Environmental Services are to be informed immediately this occurs. Liaison with the Fire Safety Manager must take place before reports are made.
- Fires involving death, serious injury, large scale evacuation or major damage are to be reported by email to fire@dh.gsi.gov.uk or telephone 0113 254 6881.
- Fire involving death or serious injury must also be reported to the Health and Safety Executive under the Reporting of Injuries, Disease and Dangerous Occurrences Regulations.

Appendix E – Staff Training

STAFF TRAINING

- Effective training in fire awareness, evacuation techniques and participation in fire drills/exercises for all personnel, without exception, is of vital importance.
- It is the duty of Directors, Deputy & Assistant Directors and line managers to ensure that all staff, including part time, bank and agency personnel, receive instruction in fire safety and, if appropriate, specific instruction on the risks and procedures relative to their workplace.
- Every member of staff in premises providing healthcare for the NHS must undertake mandatory annual fire training as laid down in the Department of Health Guidelines.
- Be able to identify fire hazards involved in the working environment.
- Practice and promote fire safety in the workplace.
- Know instinctively the right actions to take if fire breaks out or smoke is detected.
- Be familiar with the evacuation procedure and escape routes appropriate to their location at the time of duty.
- The training requirement also extends to non-NHS staff working in or having regular recourse to NHS premises.
- All staff should on appointment, must attend an induction course which will include a fire safety module. Thereafter all staff are to complete online training instruction on an annual/bi-annual frequency dependent upon their role within the organisation. Under the Regulatory Reform Fire Safety Order 2005 it is a management responsibility to ensure all staff under their managerial control complete fire safety training on an annual/bi-annual frequency as laid down in the Department of Health guidelines.
- Fire drills/exercises are to be organised by managers to test the effectiveness of emergency plans and fire safety training. At least one fire drill per year is to be completed to be compliant with the Regulatory Reform Fire Safety Order 2005. Completed evacuation exercises must be documented in the fire file for inspection by authorised inspectors.
- An effective fire safety training policy will not only enable staff to learn about and practice basic fire prevention but also appreciate the wider implications of fire safety strategy and building design.
- All fire refresher and fire warden training are now online versions only.

Appendix F – Emergency Plans

EMERGENCY PLANS

- Suitable emergency plans must be provided for each site. The plans are to be prepared having regard to the premises Fire Risk Assessment and set out, amongst other things, details of the action to be taken with persons in case of fire, the procedure to be followed during evacuation and the arrangements for calling the Fire Service and informing them of any special risks.
- The plans must also identify those persons responsible for supervising and reviewing the plans and the organisation and carrying out of fire drills Responsible Person & Fire Wardens.
- When formulating evacuation procedures, particular attention is to be paid to the needs of staff, visitors and patients who may suffer physical or sensory disability. Within patient bedded areas the principle of progressive horizontal evacuation will be followed. Personal Emergency Evacuation Plans (PEEP's) templates must be completed for these staff, patient or client groups frequenting HTFT premises.
- Methods and equipment (EVAC chairs etc) should be made available where applicable for the safe evacuation of patrons of the building who may have mobility issues who are frequenting the upper floors of premises.
- Adequate numbers of staff should be trained to operate Evacuation chairs in premises where they are located. The staff trained should ideally not be existing fire wardens as they will have separate duties to perform in an incident.
- Fire action notices complementing the emergency plans are to be prominently displayed in key locations such as by fire alarm call points and in staff rooms.
- The principal points to be included in the fire action notice are the actions to be taken on discovering a fire and on hearing the alarm, but these should be adapted or extended as necessary to suit an individual site.

There must be methods employed and enough trained staff to ensure the safe evacuation of all persons safely without reliance on the assistance of the Fire Service.

Appendix G – Arson Prevention and Control

ARSON PREVENTION AND CONTROL

Arson is increasing in all types of premises, including hospitals and other healthcare premises and is recognised as a major cause of fires.

Many fires started in healthcare premises occur in parts of the building used for storage.

Health premises, particularly hospitals and their externally and internally located storage areas are vulnerable to arson attacks from intruders and patients.

The arsonist is assisted by the following factors:

- Site accessibility, often spanning 24 hours
- The dispersed nature of some sites
- The multiplicity of points of access to and egress from buildings
- The ever-changing nature of the hospital population, patients, staff and visitors.
- Easy opportunities for theft and pilfering and the accessibility of combustible materials and flammable liquids.
- Bad housekeeping measures such as poor management of waste collection, storage and disposal.

The activities of arsonists can be limited by:

- Alertness of staff to persons acting suspiciously and to the activities of known fire raisers amongst patients.
- The regular removal of combustible waste to designated storage and disposal areas.
- Care in securing premises, particularly storage areas.

ALL INCIDENTS OF ARSON MUST BE COMMUNICATED TO THE POLICE AT THE TIME OF THE INCIDENT.

All fire incidents will be investigated by the Fire Safety Manager and contact must be made as soon as practical to inform the Fire Safety Manager of fire related incidents.

Appendix H – Fire Hazards During Alteration Work

FIRE HAZARDS DURING ALTERATION WORK

Premises undergoing alteration, extension, repair or maintenance are particularly vulnerable to fire. Some items, which need careful consideration, are:

- Structural fire and smoke barriers such as walls, doors, ceilings, etc, may be incomplete or temporarily removed and alternative safeguards may be necessary.
- Accumulation of flammable waste such as packing materials and wood shavings.
- Storage and use of combustible building materials which may constitute a temporary high fire load in an unsuitable area.
- Potentially dangerous processes such as hot cutting and welding techniques and the use of flammable adhesives. Hot works must not be carried out without the issue of a Hot Work Permit.
- Obstruction of escape routes by materials and equipment.
- The external storage of combustible waste or materials in such a position as can hazard the building.
- The temporary disablement of fire alarm and detection systems and the obstruction of firefighting equipment.
- The Trusts Fire Safety Manager should be kept advised of work being undertaken, particularly if external contractors are involved.

Appendix I – Hot Works Permits

HOT WORKS PERMITS

Serious fires frequently occur during maintenance and construction operations, where work is taking place on either machinery, plant or the building fabric. Most of them are the result of carelessness or ineffective supervision during operations requiring the use of open flames or the local application of heat.

The most common practices are:

- Gas or electric welding and cutting blowlamps and blowtorches.
- Grinding wheels and cutting discs
- Bitumen tar boilers
- Blowlamps may ignite adjacent or unseen material, heat may be conducted away by metal components and sparks or hot metal may travel a long distance whilst retaining the potential to ignite combustible materials.
- On Trust property, hot techniques of the type described above are not to be carried out without the prior issue of a Hot Work Permit. Permits can be provided and authorised, requiring at least 24 hour notice, via the Humber Estates Help Desk Tel: 01482 477877 or email hnf-tr.estates@nhs.net.
- The permit lays down specific conditions to be observed and is only valid for the duration of the operation for which it is issued.

Appendix J – Storage and Use of Flammables

STORAGE AND USE OF FLAMMABLES

- Flammable liquids give off vapours which, under certain conditions, can ignite or explode. Aerosol sprays may contain a flammable product or expellant and if the spray comes into contact with an ignition source a flame thrower effect can result.
- Many fires are caused by the misuse, or careless use, of such substances and care is needed in their handling and storage.
- Large stocks of flammables including cleaning materials, foam plastics and rubber should be held in designated storage areas. Only sufficient quantities for daily use should be kept within the workplace.
- Flammable liquids should be kept in suitably labelled, securely capped containers and not left standing in direct sunlight or where they may be knocked over.
- When using flammable liquids or aerosols, care is to be exercised to ensure that the liquid or spray cannot come into contact with flame equipment, hot surfaces or other ignition sources.

Appendix K - Oxygen

OXYGEN

- The main dangers associated with the use of oxygen are fire and explosion.
- Oxygen behaves differently to air, compressed air, nitrogen and other inert gases. It is very reactive. Pure oxygen, at high pressure, such as from a cylinder, can react violently with common materials such as oil and grease. Other materials may catch fire spontaneously. Nearly all materials including textiles, rubber and even metals will burn vigorously in oxygen.
- A room in which oxygen is used should be provided with a fire resisting door and automatic smoke detection linked in to the fire warning system. Appropriate signage must be displayed.
- No ignition sources should be in the vicinity of either a piped oxygen supply or oxygen cylinders.
- No combustible items or flammable liquids are to be kept in oxygen stores, even on a temporary basis.

Appendix L – Good Housekeeping

GOOD HOUSEKEEPING

Good housekeeping practices can reduce the likelihood of fire. Some of the particular practices which are to be observed are as follows;

- Avoidance of the use of highly flammable materials and liquids wherever possible.
- Avoid storing combustible items near to sources of ignition.
- Immediate removal of waste packaging materials to external storage to await collection.
- Orderly methods of stacking in stores where linen, paper or plastic packaging are used, to reduce the risk of fire spread, and assist firefighting.
- Storage of equipment and packages in designated areas only.
- Regular checks should be made to ensure that storage, however temporary is never permitted in corridors, stairways, escape routes, adjacent to fire exits, firefighting equipment or fire alarm call points.
- Regular checks should be made for the accumulation of rubbish in out of sight spaces.
- Regular cleaning of workplaces, machinery and equipment spaces to prevent the accumulation of fluff, grease or debris in laundries, kitchens and similar areas.
- Correct storage of cleaning rags and materials in non-combustible containers after use.
- When leaving places of work, checking for possible causes of fire, such as non- essential electrical equipment left on or plugged in, gas appliances or other heating sources left on. Vulnerable doors and windows should be secured against intruders.
- Removal of un-fused multi-plug adapters, extension leads and mobile phone/computer charging units.
- The prohibition of unauthorised adjustment or repair to electrical appliances. No initial use of electrical equipment until it has been approved by the appropriate technical staff.
- Regular checking of electrical cables for signs of wear and the immediate withdrawal from service of suspect electrical equipment.

Appendix M - Fire Risk from Personal Rechargeable Electronic Devices

This appendix covers the use of electrical items and charging facilities to be used in Trust buildings.

Device Details

All personal electronic devices that require recharging such as e-cigarettes, mobile phones, laptops, tablets, cameras and e-bike batteries etc.

Where personal electrical equipment is permitted in a healthcare environment, it is essential it is used and charged in a safe manner. Staff should be aware of the risk of fire as a result of faulty rechargeable devices, particularly those with lithium batteries, and faulty chargers.

Personal rechargeable electronic equipment belonging to staff, patients or others should not be used in healthcare premises unless:

- The local fire policy permits the use of personal electronic devices and their charging on the healthcare premises
- It displays the CE mark of conformity
- The charger was supplied with the device (no mixing of chargers/devices) and
- It has been visually inspected prior to use and found to be free from defects, cracks, damaged cables, burn marks etc.

Charging of electrical equipment must take place in a safe, controlled environment and consideration should be given to the provision of designated charging locations. Where a designated charging location is not provided, alternative charging locations need to be fully risk assessed complete with documentation and their use only authorised if risks are deemed acceptable.

Staff Awareness

All staff are responsible for ensuring their own safety and that of others in the workplace. This involves identifying and taking the appropriate action to remove or minimise fire hazards. The following list outlines common causes of electrical fires which staff should be aware of and, if encountered, they should take action themselves wherever possible or report the matter to the responsible person:

- Charger or battery/device overheating
- Damage to the lead including fraying, cuts or heavy scuffing, e.g. from floor box covers.
- Damage to the plug, e.g. to the cover or bent pins.
- Signs of overheating, such as burn marks or staining on the plug, lead or the electrical equipment.
- Tape applied to join leads together.
- Coloured wires visible where the leads joins the plug (the cable is not being gripped where it enters the plug).
- Damage to the outer cover of the equipment itself, including loose parts or screws.
- If any of the above are discovered whilst an appliance is in use, it should immediately be switched off at the mains and its use discontinued.

Hazard Reduction

- Personal electrical devices should not be charged where water or other liquid spills are likely.
- Chargers should be unplugged when the battery is fully charged.
- Personal rechargeable electronic equipment should be visually inspected prior to use and found to be free from defects, cracks, damaged cables, burn marks.
- Cables should not be trapped under furniture or in floor boxes.
- Devices must not be charged in an oxygen rich environment.
- E-cigarettes should not be used in an oxygen rich environment.
- Safety advice should be given to patients receiving oxygen therapies at home. This should be consistent with advice from the European Industrial Gases Association.

Appendix M - Document Control Sheet

This document control sheet, when presented to an approving committee must be completed in full to provide assurance to the approving committee.

Document Type	Policy		
Document Purpose	This policy ensures that fire safety protective and preventive measures are managed and employed effectively by the Trust.		
Consultation/ Peer Review:	Date:	Group / Individual	
<i>List in right hand columns consultation groups and dates</i>	8 th December 2021	H&S Group	
	13 December 2021	EMT (as part of Health & Safety Group chairs log)	
Approving Committee:	Governance Committee	Date of Approval:	30 December 2018
Ratified at:	Trust Board	Date of Ratification:	December 2018
Training Needs Analysis: <i>(please indicate training required and the timescale for providing assurance to the approving committee that this has been delivered)</i>	N/A	Financial Resource Impact	None
Equality Impact Assessment undertaken?	Yes [<input checked="" type="checkbox"/>]	No [<input type="checkbox"/>]	N/A [<input type="checkbox"/>] Rationale:
Publication and Dissemination	Intranet [<input checked="" type="checkbox"/>]	Internet [<input type="checkbox"/>]	Staff Email [<input checked="" type="checkbox"/>]
Master version held by:	Author [<input type="checkbox"/>]	HealthAssure [<input checked="" type="checkbox"/>]	
Implementation:	<i>Describe implementation plans below - to be delivered by the author:</i>		
	<ul style="list-style-type: none"> Will be placed on the intranet and update information in Midweek Global 		
Monitoring and Compliance:	<ul style="list-style-type: none"> 		

Document Change History:			
<i>Version Number / Name of procedural document this supersedes</i>	<i>Type of Change i.e. Review / Legislation</i>	<i>Date</i>	<i>Details of Change and approving group or Executive Lead (if done outside of the formal revision process)</i>
2.0	Review	30.12.2010	Reviewed.
3.0	Review	05.11.2012	Reviewed with several additions.
4.0	Review	30.12.2015	Reviewed with several ammendments.
5.0	Review	30.12.2018	Reviewed with several ammendments.
5.1	Review	08.12.2021	Reviewed minor ammendments Approved at Health & Safety Group 8 th December 2021

Appendix N - Equality Impact Assessment (EIA)

For strategies, policies, procedures, processes, guidelines, protocols, tenders, services

1. Document or Process or Service Name: Fire Safety Policy
2. EIA Reviewer Paul Dent Information, Safety & PPE Manager
3. Is it a Policy, Strategy, Procedure, Process, Tender, Service or Other? Policy

Main Aims of the Document, Process or Service

It is imperative that all staff understand what to do in the event of a fire to protect the safety of their colleagues, patients, the general public and themselves.

Please indicate in the table that follows whether the document or process has the potential to impact adversely, intentionally or unwittingly on the equality target groups contained in the pro forma

<p>Equality Target Group</p> <ol style="list-style-type: none"> 1. Age 2. Disability 3. Sex 4. Marriage/Civil Partnership 5. Pregnancy/Maternity 6. Race 7. Religion/Belief 8. Sexual Orientation 9. Gender re-assignment 	<p>Is the document or process likely to have a potential or actual differential impact with regards to the equality target groups listed?</p> <p>Equality Impact Score Low = Little or No evidence or concern (Green) Medium = some evidence or concern (Amber) High = significant evidence or concern (Red)</p>	<p>How have you arrived at the equality impact score?</p> <ol style="list-style-type: none"> a) who have you consulted with b) what have they said c) what information or data have you used d) where are the gaps in your analysis e) how will your document/process or service promote equality and diversity good practice
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Equality Target Group	Definitions	Equality Impact Score	Evidence to support Equality Impact Score
Age	<p>Including specific ages and age groups:</p> <p>Older people Young people Children Early years</p>	Low	<p>The Policy sets out responsibilities and arrangements to protect the safety of people involved with or affected regardless of their age.</p>
Disability	<p>Where the impairment has a substantial and long term adverse effect on the ability of the person to carry out their day to day activities:</p> <p>Sensory Physical Learning Mental Health</p> <p>(including cancer, HIV, multiple sclerosis)</p>	Low	<p>Where an individual's sensory, physical, learning or mental health may adversely impact on their ability to undertake activities, a specific risk assessment is required to be carried out by the Line Manager.</p> <p>Where the risk assessment identified a requirement to implement a reasonable adjustment due a disability, the Trust would seek to implement the adjustment.</p> <p>Advice and guidance on the carrying out of and implications of the risk assessment would be available from the Safety Team, Occupational Health and Human Resources.</p>
Sex	<p>Men/Male Women/Female</p>	Low	<p>The requirements of the policy apply equally.</p>

Marriage/Civil Partnership		Low	The requirements of the policy apply equally.
Pregnancy/ Maternity		Low	Where an individual's pregnancy may adversely impact on their ability to undertake activities, a specific risk assessment is required to be carried out by the Line Manager. Where the risk assessment identified a requirement to implement a reasonable adjustment to the individual's work activity, the Trust would seek to implement this adjustment.
Race	Colour Nationality Ethnic/national origins	Low	Evidence to support Equality Impact Score
Religion or Belief	All Religions Including lack of religion or belief and where belief includes any religious or philosophical belief	Low	The Policy sets out responsibilities and arrangements to protect the safety of people involved with or affected by using hazardous materials activities regardless of their age.
Sexual Orientation	Lesbian Gay Men Bisexual	Low	The requirements of the policy apply equally to any to any religion or belief.
Gender reassignment	Where people are proposing to undergo, or have undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attribute of sex	Low	The requirements of the policy apply equally to any sexual orientation.
			The requirements of the policy apply equally to either gender.

Summary

Please describe the main points/actions arising from your assessment that supports your decision above.

Generic comments regarding staff bases for implementation of fire safety matters.

EIA Reviewer: Paul Dent

Date completed; 8 December 2021

Signature: P Dent