

REPORT TO THE TRUST BOARD – 27th NOVEMBER 2014

Paper Title:	Annual Fire Safety Report: 2014/15 - Update
Sponsoring Director:	Eric Munro, Joint Director of Estates & Facilities
Author:	Eric Munro, Joint Director of Estates & Facilities
Purpose:	For Information
Action required by the board:	For information
Document previously considered by:	

Executive summary

1. Key messages

The Trust need to be able to demonstrate to LFEPA that a programme of Fire Protection and Prevention in regard to repair and maintenance is in place and properly supported and managed. The LFEPA inspection programme has been delayed by industrial action but the Q3 inspection has now been completed with no new issues raised.

Since January 2014, the following investments and actions have been completed to improve Fire Safety within the Trust:

- **Update to current Fire Safety Management Policy (H&S 6) - due to be ratified by the Policy Approval Group in November 2014**
- **Detailed audit of all areas requiring Fire Risk Assessments (FRAs) and establishment of a detailed FRA database**
- **Detailed assessment of the risks associated with compliance with the Regulatory Reform (Fire Safety) Order 2005 (RRO) and escalation to the Board Assurance Framework**
- **Completion of a detailed Fire Risk Assessment Programme for all patient areas**
- **Introduction of a new design, more user-friendly, Fire Folder**
- **Appointment of an additional permanent Fire Safety Adviser (who starts at the beginning of December 2014) and increase to administration support.**
- **Following remedial works carried out by the Trust, LFB has now confirmed that the Knightsbridge Wing Deficiency Notice has now been lifted**
- **The Estates and Facilities Department completed a £1.3 million project in March 2014 for a full fire safety refurbishment of the 2nd floor plant room**

Continuous action is being taken to deliver fire safety, specifically against the plans agreed with the LFEPA enforcement officers. This will include:

- **Addressing compartmentation and fire doors in Lanesborough Wing, partly through our maintenance programmes and significantly through the Children's and Women's Hospital Capital Projects**
- **Bringing forward proposals to refurbish Grosvenor Wing as part of the Development Control Plan**
- **Reinvigorating the Fire Training function and establishing a dedicated training area by the end of 2015**

2. Recommendation The Board is asked to note the update to the Annual Fire Safety Report and the progress made during the period.	
Key risks identified: BAF risk item	
Related Corporate Objective: <i>Reference to corporate objective that this paper refers to.</i>	
Related CQC Standard: <i>Reference to CQC standard that this paper refers to.</i>	
Equality Impact Assessment (EIA): Has an EIA been carried out? (Yes / No) If yes, please provide a summary of the key findings If no, please explain you reasons for not undertaking and EIA.	

Appendix A:

1. EQUALITY IMPACT ASSESSMENT FORM – INITIAL SCREENING

Headline outcomes for the Equality Delivery System (EDS)

- Better health outcomes for all
- Improved patient access and experience
- Empowered, engaged and well-supported staff
- Inclusive leadership at all levels

Service/Function/Policy	Directorate / Department	Assessor(s)	New or Existing Service or Policy?	Date of Assessment
Fire Safety	Estates	EFM	No	18 Nov 2014
1.1 Who is responsible for this service / function / policy? Director of Estates and Facilities				
1.2 Describe the purpose of the service / function / policy? Fire Safety for all patients, staff and visitors				
1.3 Are there any associated objectives? Not applicable				
1.4 What factors contribute or detract from achieving intended outcomes? Not applicable				
1.5 Does the service / policy / function / have a positive or negative impact in terms of the protected groups under the Equality Act 2010. These are Age, Disability (physical and mental), Gender-reassignment, Marriage and Civil partnership, Pregnancy and maternity, Sex /Gender, Race (inc nationality and ethnicity), Sexual orientation, Region or belief and Human Rights No				
1.6 If yes, please describe current or planned activities to address the impact. Not applicable				
1.7 Is there any scope for new measures which would promote equality? No				
1.8 What are your monitoring arrangements for this policy/ service Not applicable				
1.9 Equality Impact Rating [low, medium, high] Low				
2.0. Please give you reasons for this rating Policy applies to all persons in Trust premises				

ANNUAL FIRE SAFETY REPORT: 2014/15 - UPDATE**1. BACKGROUND**

In the CEO's report to Trust Board on 30th October 2014, it was reported as follows:

"I have signed the Trust's Annual Statement for the period 1 January 2013 to 31 March 2014. This is a compliance requirement under NHS Firecode. Whilst the statement is not able to confirm that all premises which the organisation owns, occupies or manages, have fire risk assessments that comply with the Regulatory Reform (Fire Safety) Order 2005, it does record that a detailed programme is underway to ensure full compliance by the end of 2014/15. This is consistent with the audit report into fire safety for the same period.

The 2013/14 Annual Statement also records that two enforcement notices were received in relation to Lanesborough Wing and Grosvenor Wing on 11th February 2013. In response to these notices, a comprehensive Fire Safety Action and Investment Plan has been developed by the Trust and significant long-term works instigated in many areas of fire safety, fire risk assessments, compartmentation, fire door installation and replacement, fire safety training and fire safety procedures.

Major fire safety works have been completed to Knightsbridge Wing and Lanesborough Wing in particular and an additional Fire Safety Adviser has been recruited. A major programme for the replacement of fire doors is currently out to tender and is expected to commence in December 2014.

Whilst it was intended to bring a detailed fire safety update to the Board in September, incorporating the latest survey and inspection information from LFEPA, some of the London Fire Brigade inspections have been delayed until early November and so a detailed report, describing progress against the Fire Safety Action and Investment Plan, will be provided to Trust Board in November.

In the meantime, however, I am pleased to report that LFEPA has confirmed clearance of the deficiency notice received by the Trust on 19 June 2014 as a result of the Trust completing fire safety improvements in Knightsbridge Wing."

2. PURPOSE OF THE REPORT

The Regulatory Reform (Fire Safety) Order, that came into force on 1st October 2006, requires 'general fire precautions' to be put in place 'where necessary and to the extent that is reasonable and practical' for the protection of the 'relevant persons'.

Responsibility for complying with the Fire Safety Order rests with the responsible person. Broadly, in a workplace this would be the employer or any person who has control of any part of the premises (for example the occupier or owner). Where there is more than one responsible person such as in multi-occupied premises, all must take reasonable steps to co-operate and coordinate with each other.

The Chief Executive Officer is responsible for ensuring that, through appropriate delegation of responsibility within the organisation, current fire legislation is met and that, where appropriate, Firecode guidance is implemented in all premises owned or occupied by the Trust.

The Director of Estates and Facilities is the Executive Director with delegated responsibility for fire safety issues across the organisation and the delivery of a safe responsive system.

This report has been developed to provide the Trust Board of Directors accountable for the activities of the organisation with relevant information concerning the management and delivery of fire safety to the Trust during 2013/14, and a brief forecast into the year ahead, as in accordance with Healthcare Technical Manual 05-01: Managing Healthcare Fire Safety.

The outcome of this report will be used as the basis on which to formulate the Annual Statement of Fire Safety for 2014/15, which is to be retained by the organisation and may be presented to the CQC along with supporting documentation as evidence of performance against Outcome 10 of the “Essential standards of quality and safety”.

Good management of fire safety is essential to ensure that fires are unlikely to occur; that if they do occur they are likely to be controlled or contained quickly, effectively and safely; or that, if a fire does occur and grow, everyone in the premises can escape to a place of total safety easily and quickly. The following summary gives brief details of this Trusts development towards compliance with the mandatory requirements for the NHS in England (considered as best practice for NHS Foundation Trusts).

REQUIREMENT	PROGRESS	R	A	G
Clearly defined fire policy	Compliant			
Board Level Director accountable to the Chief Executive for fire safety	Compliant			
Fire Safety Manager to take the lead on all fire safety activities	Compliant			

Have an effective fire safety management strategy which enables:

REQUIREMENT	PROGRESS	R	A	G
Preparation and upkeep of the organisation’s fire safety policy	Compliant			
Adequate means for quickly detecting and raising the alarm in case of fire	Compliant			
Means for ensuring emergency evacuation procedures are suitable and sufficient for all areas, without reliance on external services	Compliant			
Staff to receive fire safety training appropriate to the level of risk and duties they may be required to perform	Levels of participation need to be increased to achieve compliance			
Reporting of fires and unwanted fire signals	Compliant			
Partnership initiatives with other bodies and agencies involved in the provision of fire safety.	Compliant			

3. TRUST FIRE POLICY AND FIRE SAFETY ACTION PLAN

The Trust’s current Fire Safety Management Policy (H&S 6) was last approved by the Organisational Risk Committee on 24th November 2010. An updated version is due to be ratified by the Policy Approval Group in November 2014.

4. GOVERNANCE - HEALTH, SAFETY AND FIRE COMMITTEE

The Health, Safety and Fire Committee reports to the Organisational Risk Committee, which in turn reports to the Quality and Risk Committee, a formal Trust Board sub-committee.

The Health, Safety and Fire Committee has continued to meet every two months and the Trust’s Fire Safety Manager presents an update report at each meeting as a standing agenda item.

5. RISK MANAGEMENT

5.1 Risk Registers

The ability of the Trust to demonstrate its compliance in accordance with the Regulatory Reform (Fire Safety) Order 2005 (RRO) is on the Estates and Facilities Departmental Risk Register as set out below. This risk is escalated such that it also appears on the Board Assurance Framework.

Ref.	Risk	Source of Risk	Rating	Summary Action Plan	Progress Against Action Plan
EF198	Ability of the Trust to demonstrate its compliance in accordance with the Regulatory Reform (Fire Safety) Order 2005 (RRO)	Risk of prosecution	4 x 4 = 16	Detailed fire action plan in place with additional fire officer support to deliver the risk assessments. Regular meetings with fire brigade to check progress. Specialist fire safety resource in place to lead on the actions. Planned and reactive monitoring of fire safety.	On-going monitoring and actions via the Organisational Risk Committee.

The Estates and Facilities Department have prepared and are using action plans to make progress in addressing the issues highlighted by LFEPA in the two current enforcement notices received by the Trust - these documents are shared with the inspectors from LFB. The next inspection is scheduled for February 2015.

Whilst the Trust will be able to show significant progress in relation to matters such as fire risk assessments, fire safety training and fire alarm maintenance, other issues such as compartmentation and systems upgrading will require more investment of time and capital funding. LFB will require sight of more detailed capital programmes and funding commitment if it is to be persuaded that no further action is required.

5.2 Fire Risk Assessments and Fire Safety Manuals

During 2014/15, a detailed audit of all areas requiring Fire Risk Assessments (FRAs) was completed and a database established to record:

- each area requiring to be assessed
- the date of the last FRA and who it was assessed by
- the Responsible Manager for the area
- the date that the FRA was issued to the Responsible Manager for action
- re-inspection frequency (these vary depending on the nature of usage)
- next re-inspection date
- last "no notice" inspection

The total number of areas requiring FRAs is 201 and progress as at the end of October 2014 is set out in Table 1 below. It should be noted that the FRA database also records those areas that are occupied by patients 24 hours per day and less than 12 hours per day. These areas have been a priority for FRAs in the 2014/15 programme.

Table 1: Progress on completion of Fire Risk Assessments (FRAs)

Building	No of FRAs required	No of FRAs Complete	Comment
Atkinson Morley Wing	37	28	FM areas still to be completed
Bence Jones	1	1	
Bronte House and Annex	2	2	
Chest and Breast Clinic	2	2	
Clare House	1	1	
Courtyard Clinic	1	1	
Education Centre	1	1	
Energy Centre	3	2	Switch room to be completed
F Block	2	0	SGUL responsibility
Grosvenor Wing	12	11	Security Office still to be completed
Knightsbridge Wing	22	22	
Lanesborough Wing	58	55	FM areas still to be completed
Max-Facs	7	7	
Occupational Therapy	2	2	
Phoenix Centre	1	1	
Pre-operative Care Centre	1	1	
Robert Lowe Sports Centre	1	1	
Rose Centre	6	4	FM areas still to be completed
St James Wing	41	24	Last building to be assessed in programme
Totals	201	166	

Accordingly, the 2013/14 FRA programme consisting of 201 assessments has been substantially completed using a prioritised methodology. Fire Risk Assessment documentation is a component of the newly developed 'Departmental Fire Safety Manual' currently being distributed to all departments Trust wide. As part of the delivery procedure managers are provided with familiarisation training. This provides managers with an opportunity to ask any relevant questions and confirm understanding of how the manual is expected to be used.

5.3 Fire Safety Action Plans and Documentation

The previously approved Fire Safety Action Plan has been updated and re-presented to the Executive Committee.

During recent checks, some departmental Fire Folders have been found to be incomplete. In addition to the scheduled Fire Risk Assessments, which include Fire Folder checks, the Fire Safety Team has introduced informal, no-notice, fire safety checks which will focus on the completion of Fire Folder information. A new, more user-friendly, Fire Folder has been designed. This Folder also contains more pertinent information and advice and is being rolled-out across the Trust via staff attending Fire Warden training and personal departmental visits by the Fire Safety Team.

5.4 Fire Safety Training

Face to face Fire Safety training is on-going for the weekly Trust Induction course. The 30 minutes now allowed for each of the Corporate and Medical Induction sessions is still less than the 45 minutes minimum required to include all aspects of the recommended syllabus. However, the Director of Estates & Facilities has recently instructed that one hour should be included on all Induction Training programmes for Fire Safety.

The Walk-Up/Drop-In Refresher and Fire Warden training sessions have had a mixed reception. Hardly any staff took advantage of the basic Refresher session although a few more attended the Fire Warden refresher training. Drop-in training has therefore been discontinued.

In order to reduce the loss of time from primary duties, Fire Warden training (which requires annual attendance) has been developed into a 3-year cycle. Year 1 training is the full (approx. 2 hour) training session; Years 2 & 3 will require an approximately 30 – 45 minute session of 'refresher' training. In years 4, 7, 10 etc. full training will be required to begin another 3-year cycle.

The availability of a permanent location for Fire Safety Training would provide huge benefits, convenience and encouragement for the training. Such a requirement is being examined with the preparation of the Development Control Plan for the redevelopment of the St George's campus.

The number of staff coming forward to be trained as Fire Wardens remains a cause for concern. The estimated requirement for Fire Wardens is approximately 850 staff (i.e. a minimum of 8 staff per 24-hour patient area and a minimum of 3 staff per non-patient areas). The number of Fire Wardens trained and in-date (annual training required) is currently 236.

All Fire Safety training details/booking instructions are published on the Trust Intranet and e-mailed to Directors, Matrons, Heads of Departments and departmental managers at 6-monthly intervals – see Appendix 2.

5.5 Fire Safety Team Staffing Levels

The current estates fire team consists of 1 x Fire Manager, 1 x Trainer (Interim) and 1 x Fire Advisor (Interim). This has been increased with 3 interim fire advisors to act on audit requirements and fire notice improvements. In addition, the Department has appointed an additional permanent fire officer (who starts at the beginning of December 2014) and is increasing administration support.

With the introduction of the Helipad to the Trust, the Fire Safety Team have been providing supervisor duties and training to the Helipad fire response teams in addition to their normal workload. This involves providing a fire supervisor 13 hours a day for 7 days per week. This has been required to provide levels of assurance until the site fire response team meet the required training standards.

6. UNWANTED FIRE SIGNALS (UWFS)

False fire alarms are unwanted, an interruption to business continuity, costly and can compromise patient care. The Trust has initiated 100 unwanted fire signals during since 1 April 2014 (figures up to and including the end of October 2014), an increase of 8 from the same period last year. This still exceeds the maximum number of UWFS considered tolerable (related to acceptable levels of unwanted fire signals and in accordance with HTM 05-03: Part H Reducing Unwanted Fire Signals in Healthcare Premises) for acute hospital premises of this magnitude.

To date, the Trust has received invoices from the London Fire and Emergency Planning Authority, in excess of the original *annual* budget for London Fire Brigade attendances as a result of Unwanted Fire Signals. The importance of the reduction of UWFS has now been formally included into all Fire Safety training from June 2014 have shown a significant reduction, but this needs to become a lasting trend.

From the data acquired a robust strategy needs to be put in place to raise awareness of the consequences of unnecessary fire alarm activations and our statutory duty to reduce them.

This strategy will include:

- targeted FRAs in areas with a high number of activations
- replacement of unsuitable equipment
- additional Fire Safety Training
- attending meetings with responsible persons for key "hot spots"

- Fire Safety information bulletins
- Posters and other awareness material

Healthcare Technical Memorandum 05 - 03 Part H Reducing unwanted fire signals in healthcare premises recommends a minimum reduction of **10%** activations during the next 12 month period. It is anticipated that the Trust will at least achieve this target during 2014.

7. FIRE INCIDENTS

There have been no actual fire incidents in the Trust since 1 April 2014.

8. LFEPA INSPECTIONS AND ENFORCEMENT NOTICES

Following a series of fire safety inspections by LFB and a fire incident on 2 January 2013, LFEPA took the decision to serve the Trust with two Enforcement Notices on 11th February 2013. One related to Grosvenor Wing and the other related to Lanesborough Wing. Given the items listed in the accompanying schedule, these Notices are taken to apply to the entire buildings. The original Enforcement Notices state that “these steps must be taken by 7th May 2013 (or such extension if granted by the Authority)”. Whilst actions plans are in course of being implemented and increased inspections / meetings have taken place with LFB, there has been no formal extension granted to these Enforcement Notices and there is an increased risk of prosecution as a result.

Following a small electrical fire in one of the boiler rooms of Knightsbridge Wing on 12th February 2014, the Trust received a Deficiency Notice on 19th June 2014. Whilst the notice is not building specific (and therefore could be interpreted as a site-wide notice), The Trust has received email confirmation from LFB that the notice relates to Knightsbridge Wing only.

The LFEPA inspector visited the Trust on 16th September in order to follow-up an Enforcement Notice on Knightsbridge Wing and also to inspect a significant number of smaller buildings which had not been audited previously. Although satisfied that appropriate work had been planned and begun in Knightsbridge Wing, he noted that the standard of housekeeping in the other areas needed to improve, as this increases the risk of non-compliance with fire safety regulations. The buildings inspected included:

- Blackshaw Annex
- Old Chest & Breast Clinics
- Occupational Health 1
- Education Centre
- Robert Lowe Sports Centre
- Bence Jones
- Phoenix Centre

Since the inspection, a range of initiatives have been undertaken by the Trust to reinforce the importance of good housekeeping on fire safety. These include:

- securing unused areas
- works to compartmentalise IT servers
- promotion of “dump the junk” waste collections
- “no notice” fire safety inspections

Such efforts will need to be maintained to ensure that housekeeping practices continue to improve.

Following remedial works carried out by the Trust, LFB has now confirmed that the Knightsbridge Wing Deficiency Notice has now been lifted. The Enforcement Officer is to return for monthly visits to these and other units and, in February 2015, will re-inspect Grosvenor and Lanesborough Wings, following up the Enforcement Notices issued in February 2013.

Further information on the legislative framework is contained in Appendix 2.

9. FIRE SAFETY IMPROVEMENT WORKS

9.1 Fire Compartmentation

Following completion of all FRAs for Lanesborough Wing, the Estates team drew up an improvement scheme for Lanesborough wing 2nd floor (Plant Room) as this was highlighted as a significant risk within the fire audit regarding compartmentation, fire doors and alarms.

The Estates and Facilities Department procured a £1.3 million project in March 2014 to complete a full refurbishment of the 2nd floor plant room which included the following works:

- full fire compartmentation and fire stopping repairs
- replace all fire doors with correct fire rated doors
- install new fire alarm in unprotected areas
- install new low level emergency lighting (lite4life)
- paint plant room walls
- paint and seal plant room floor
- apply photo luminescent way-finding system to floors
- install fire directional signage
- install intumescent grills
- install new partitions

The Lanesborough Wing 2nd Floor Plant Rooms fire compartmentation, fire stopping, fire doors and escape routes work has now been completed. A specification for Stage 2 (Grosvenor and St James Wings Plant Rooms) has been developed and is in the process of being tendered.

9.2 Fire Doors & Shutters

A full, site-wide survey of fire doors and shutters was started during March 2014; the survey is on-going and results indicate that many fire door sets are in need of repair, refurbishment or replacement.

9.3 Fire Protection Systems

The required 'L1' fire protection systems are being installed into Clare House and as part of the Lanesborough Wing Plant Room project. In addition, also as part of the latter project, a new system 'spine' for Lanesborough Wing is being installed.

Trinity Fire & Security Systems have had a permanent presence on site performing continuous maintenance to the existing systems.

10. CONCLUSION

Whilst the Trust has made significant investment and progress in the improvement of Fire Safety during 2014/15, there are still significant programmes of physical works, training development and risk management required to ensure that the momentum is maintained in future years.

APPENDIX 1 – PUBLICITY FOR FIRE SAFETY TRAINING

There is a critical need, identified during recent London Fire & Emergency Planning Authority (LFEPA) inspections of the Trust, to achieve the level of Fire Safety Training which is commensurate with the requirements of the Regulatory Reform (Fire Safety) Order 2005, the provisions of Hospital Technical Memorandum (HTM) 05-01 and the Trust's Fire Safety Management Policy.

The details of all available Fire Safety Training may be accessed via the '**Fire Safety, Training & Response**' link at the top right of the Trust Intranet Home Page. The following is a preview extract of this information which will shortly be updated on the Intranet and includes the scheduled dates/times for Fire Warden training up to March 2015:

FIRE SAFETY TRAINING

Statutory Fire Safety training for the remainder of 2014 and early 2015 may be arranged as shown below. Departmental Managers should nominate staff to attend the training by arrangement with Dave Barclay, Trust Fire Safety Manager [fireofficer@stgeorges.nhs.uk or ext. 0656], or Richard Oxborrow, Fire Safety Officer [richard.oxborrow@stgeorges.nhs.uk or ext. 0656].

FIRE WARDEN TRAINING

All Departments/Wards must have sufficient **trained and 'in date'** (annual training – see below) Fire Wardens so that at least one Fire Warden is on duty during all opening/working hours. For 24-hour patient areas, a *minimum* of 8 trained and current Fire Wardens is recommended in order to take account of shift patterns, annual leave, training days and sickness etc.

In accordance with HTM 05-01 and the Trust's Fire Safety Management Policy, Fire Warden training is required annually. With immediate effect, Fire Warden training will be provided on a 3-year cycle such that full training for new *and* experienced Fire Wardens (approx. 2 hours) will be provided every 3 years (Year 1, 4, 7 etc.) and Fire Warden refresher training (approx. 45 minutes) will be provided for Years 2 and 3 of each cycle. Fire Wardens trained up to two years ago may join this cycle.

Formal Fire Warden training is scheduled throughout the year and published twice a year on this page. Sessions from September to December 2014, for both full and refresher training are listed below.

Departmental +/-or Ward/Unit Managers should submit the names of selected staff to Dave Barclay, the Trust Fire Safety Manager [fireofficer@stgeorges.nhs.uk or ext. 0656], or Richard Oxborrow, Fire Safety Officer [richard.oxborrow@stgeorges.nhs.uk or ext. 0656].

FIRE WARDEN TRAINING SCHEDULE 2014

Wed 3 December	Year 1	1400 -- 1600	Grosvenor Wing	Room G2.5
Tue 16 December	Year 1	0900 -- 1100	Grosvenor Wing	Room G2.9
Tue 16 December	Years 2 & 3	1130 -- 1215	Grosvenor Wing	Room G2.9
Wed 17 December	Year 1	1400 -- 1600	Grosvenor Wing	Room G2.9

FIRE WARDEN TRAINING SCHEDULE 2015

Tue 13 January	Year 1	0900 -- 1100	TBC
Tue 13 January	Years 2 & 3	1130 -- 1215	TBC
Wed 14 January	Year 1	1400 -- 1600	TBC
Tue 27 January	Year 1	0900 -- 1100	TBC

Tue 27 January	Years 2 & 3	1130 -- 1215	TBC
Wed 28 January	Year 1	1400 -- 1600	TBC
Tue 10 February	Year 1	0900 -- 1100	TBC
Tue 10 February	Years 2 & 3	1130 -- 1215	TBC
Wed 11 February	Year 1	1400 -- 1600	TBC
Tue 24 February	Year 1	0900 -- 1100	TBC
Tue 24 February	Years 2 & 3	1130 -- 1215	TBC
Wed 25 February	Year 1	1400 -- 1600	TBC
Tue 10 March	Year 1	0900 -- 1100	TBC
Tue 10 March	Years 2 & 3	1130 -- 1215	TBC
Wed 11 March	Year 1	1400 -- 1600	TBC
Tue 24 March	Year 1	0900 -- 1100	TBC
Tue 24 March	Years 2 & 3	1130 -- 1215	TBC
Wed 25 March	Year 1	1400 -- 1600	TBC

FIRE SAFETY REFRESHER TRAINING

In accordance with HTM 05-01 and the Trust's Fire Safety Management Policy, staff who work predominantly in clinical areas +/- or with patients **must attend annual** 'face-to-face' Fire Safety refresher training. Staff working in non-patient areas **must** attend 'face-to-face' Fire Safety refresher training once every two years. This training, with a member of the Fire Safety Team, will last 1 hour; e-learning may only **supplement** these requirements.

Fire Safety refresher training should be arranged by Departmental Managers, typically, for example, as part of mandatory training programmes or Team Days and in a suitable venue with projection. Arrangements should be made with Dave Barclay, the Trust Fire Safety Manager [fireofficer@stgeorges.nhs.uk or *ext. 0656*],

or

Richard Oxborrow, Fire Safety Officer [richard.oxborrow@stgeorges.nhs.uk or *ext. 0656*].

Subject to available time, the training will include the theory of evacuation and the use of 'Ski-Sheets'.

FURTHER INFORMATION

Contact Richard Oxborrow, Fire Safety Officer [richard.oxborrow@stgeorges.nhs.uk or *ext. 0656*]

It is the responsibility of Departmental Heads (Fire Safety 'Responsible Managers') to ensure that face to face Refresher training is up to date (annual in Patient areas) and that, in all areas, there is at least one *trained* Fire Warden on duty at all times. As a guide, we consider, that in order to take account of rotas, professional training, annual leave and sickness etc., this requires approximately *8 trained Fire Warden staff* in most 24-hour clinical units and not less than 3 in predominantly day-time areas.

Fire Warden training is required to be repeated annually but a new 3-year cycle of full & refresher Fire Warden training, which will reduce the time required for training, is explained above.

APPENDIX 2 – STATUTORY COMPLIANCE FRAMEWORK FOR FIRE SAFETY

Until 1990, NHS premises fell under the scope of Crown Immunity, which meant that they did not need to comply with “the letter of the law” relating to fire safety. However, following the NHS and Community Care Act 1990, Crown Immunity was fully removed in April 1991. Some Crown Immunity had already been removed in 1987 when the NHS became bound by the terms of the Health and Safety at Work Act 1974.

From 1990, all NHS Trusts, their staff and their fire prevention advisers were required to ensure compliance with NHS Firecode, a suite of documents first published by NHS Estates and intended to provide a systematic approach to reduce the potential for fire in health service premises. NHS Firecode compliance now falls to the Department of Health and the documents still set standards for the layout, design, construction and fire safety management of hospitals and other healthcare premises.

Firecode is underpinned by a policy and principles document and includes a number of Health Technical Memoranda (HTMs) and Fire Practice Notices (FPNs) that consider policy, technical guidance and specialist aspects of fire precautions.

STATUTORY COMPLIANCE

In addition to Firecode, the principal statutory requirements that have a direct bearing on fire safety and must be observed by NHS Hospital Trusts at all times are:

- Building Regulations 2013 Approved Document B - Fire Safety
- Regulatory Reform (Fire Safety) Order 2005.
- Fire Safety and Safety at Places of Sport Act 1987.
- Health and Safety at Work Act, including the Management of Health and Safety at Work Regulations.
- NHS Housing in the Community: Housing Act 1985.
- Registration of Houses in Multiple Occupancy.
- Places of Work Regulation 1992 (as amended).

DUTIES AND RESPONSIBILITIES

Trust Board

The Trust Board has overall accountability for the activities of the organisation. 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.

Chief Executive

The Chief Executive has overall responsibility for the implementation of the Trust’s Fire Safety Policy and of the guidance detailed in the Department of Health “Health Technical Memorandum 05-01: Managing Healthcare Fire Safety”. The Chief Executive will appoint a Fire Safety Manager to assist in the implementation of this Policy. This Officer will be of sufficient seniority/rank to be able to carry out the duties required.

Board Level Director (Director of Estates and Facilities)

The Board Level Director is responsible for fire safety issues at Board level, including programmes of work relating to Fire Safety for consideration as part of the annual Business Plan.

Fire Safety Manager

The Trust's designated Fire Safety Manager is Dave Barclay, and his principal duties are to:

- appoint Deputies on all Trust sites to ensure that a designated person is always available to take command of a fire emergency until the Fire Brigade arrives.
- ensure that all staff receive clear written instructions on the actions to be taken in the event of a fire.
- liaise with all organisations working on Trust premises to ensure that they are aware of the Trust Policy and Procedures.
- co-ordinate and direct actions of staff in a fire emergency i.e., to establish control points, provide contact with the Fire Brigade and to ensure the safe evacuation of patients, visitors and staff.
- liaise with the Fire Advisor for advice on developing a plan of action for dealing with a fire emergency.
- ensure that all staff with special responsibilities in a fire emergency situation are aware of the procedure to be followed and are clear as to their role and responsibilities.
- ensure that agreed programmes of investment in fire precautions are correctly accounted for in the Trust's annual Business Plan and prepare an Annual Fire Report for submission to the Trust Board.
- establish a multi-disciplinary fire precautions group that will review the fire policy and procedure annually.
- co-ordinate all fire precautions within the Trust and have a working knowledge of fire precautions and the fire alarm systems.
- consult with the Fire Advisors and Estates Management to ensure that fire alarm systems are maintained and tested in accordance with NHS Guidance (HTM 05-03 Part B) and British Standard 5839.
- arrange for periodic site fire safety audits.
- investigate and remedy abuse of fire equipment.
- co-ordinate with Managers and the Fire Advisors to ensure that all staff participates in an annual mandatory fire training programme and required fire drills and that training records are maintained.

Fire Advisors

The Trust has statutory and other responsibilities in respect of fire safety for all its premises. As a means of fulfilling its obligation, the Trust has appointed specialist Fire Advisors. These are responsible for advising management on technical fire matters, monitoring the state of fire precautions in the Trust's premises and for arranging sufficient training sessions for all staff.

The Fire Advisors are responsible to the Fire Safety Manager. The duties of the Fire Advisors are to :

- provide expert advice on the application and interpretation of fire legislation and fire safety guidance, including Firecode
- advise on the content of the organisation's fire safety policy

- assist with the development of the organisation's fire strategy
- help with the development of a suitable training programme, including delivery of the training
- liaise with enforcing authorities on technical issues
- liaise with managers and staff on fire safety issues
- liaise with the Authorising Engineer (Fire)

REGULATORY REFORM (FIRE SAFETY) ORDER 2005.

The Regulatory Reform (Fire Safety) Order (known Fire Safety Order) applies to England and Wales (Northern Ireland and Scotland will have their own laws). It covers 'general fire precautions' and other fire safety duties that are needed to protect 'Relevant Persons' in case of fire in and around 'most premises'. The Order requires fire precautions to be put in place 'where necessary' and to the extent that it is reasonable and practicable in the circumstances of the case. Responsibility for complying with the Fire Safety Order rests with the 'Responsible Person'.

The Fire Safety Order is a Fire Risk Assessment based approach where the responsible person(s) for the premises must decide how to address the risks identified, while meeting certain basic requirements.

By adopting a fire risk assessment approach, the responsible person(s) will need to look at how to prevent fire from occurring in the first place, by removing or reducing hazards and risks (ignition sources) and then look at the precautions to ensure that people are adequately protected, if a fire were still to occur.

The fire risk assessment must also take into consideration the effect a fire may have on anyone in or around your premises plus neighbouring property and will need to be kept under regular review. The building fire risk assessment concentrates on the following areas:

- Elimination or reduction of risks (ignition sources),
- Suitable means of detecting and raising the alarm in the event of a fire,
- Adequate emergency escape routes and exits,
- Adequate fire compartmentation (fire and smoke spread and the protection of escape routes),
- The appropriate type and sufficient quantities of fire extinguishers,
- Correct type and sufficient quantities of fire signs and notices,
- Provisions for the correct maintenance of installed fire equipment,
- Suitable provisions for the protection of Fire Brigade personnel,
- Ensure that occupants receive the appropriate instruction and training in: 'Actions to be taken in the event of fire' and fire evacuation drills etc,

The Fire Safety Order applies to virtually all non-domestic properties, including voluntary organisations and is subject to monitoring and enforcement by the Local Authority Fire Services (LAFS).

All previous fire legislations has been repealed or revoked, including the Fire Precautions Act 1971 (Fire Certificates are abolished), the Fire Precautions (Workplace) Regulations 1997, plus 100 other pieces of fire related legislation.

Responsible Person - (*The Responsible Person*)

In relation to a workplace, it is the employer and any other person who may have control of any part of the premises, e.g. the occupier or owner for whatever they have control of:

In all other premises, the person or people in control of the premises will be responsible, those premises not falling within paragraph (a):

- (a) the person who has control of the premises (as occupier or otherwise) in connection with him carrying on by him of a trade, business or other undertaking (for profit or not); or
- (b) the owner, where the person in control of the premises does not have control in connection with the carrying on by that person of a trade, business or other undertaking.

In summary, the 'Responsible Person' is:

- The Employer with control of a workplace

Failing that or in addition;

- Persons with overall management control of a building (or part of the building)
- Occupier of the premises, owner of the premises (i.e. empty building),
- Landlords (in multi-occupied buildings)

ACTION BY LONDON FIRE AND EMERGENCY PLANNING AUTHORITY (LFEPA)

The Trust's premises are inspected regularly by LFEPA, who run the London Fire Brigade (LFB). The number of inspection visits have been increased in recent years as the Trust failed to heed informal warnings about its failures to comply with the Regulatory Reform (Fire Safety) Order 2005.

Under this order, there are three types of formal notice that can be served on the Trust.

Alterations notice (Article 29)

An alterations notice requires the responsible person to notify LFB of any proposed changes which may increase the risk in the premises. They are issued where LFB considers that the premises constitute a serious risk or may constitute a risk if changes are made. An alterations notice does not mean that the responsible person has failed to comply with the Regulatory Reform (Fire Safety) Order 2005.

Enforcement notice (Article 30)

An enforcement notice is issued where the responsible person has failed to comply with the Regulatory Reform (Fire Safety) Order 2005 and details corrective measures that they are legally obliged to complete within a set timescale, to comply with the law.

Prohibition notice (Article 31)

A prohibition notice is issued where the use of the premises may constitute an imminent risk of death or serious injury to the persons using them. This may be a restriction of use, for example imposing a maximum number of persons allowed in the premises, or a prohibition of a specific use of all or part of the premises, for example prohibiting the use of specific floors or rooms for sleeping accommodation.

The issue of a Prohibition Notice under the Regulatory Reform (Fire Safety) Order 2005 is the most serious enforcement option available to the LFB other than prosecution and can only be authorised by identified senior officers.

Deficiency Notice

In addition to these formal notices, LFEPA can issue a Notification of Fire Safety Deficiencies (often abbreviated as “Deficiency Notice”). A Deficiency Notice carries no statutory force but “may result in formal action being undertaken if the agreed improvements do not take place” – this is effectively an informal warning from the fire safety inspectors at LFB.