

Fire Safety Policy

Executive or Associate Director Lead:	Phillip Easthope (Executive Director of Finance)
Author/Lead:	Stephen Price (Fire Safety Manager)
Feedback on implementation to:	Stephen Price (Fire Safety Manager)

Document type	Policy
Document status	V6
Date of initial draft	May 2017
Date of consultation	25 April to 9 May 17
Date of verification	6 June 17
Date of ratification	22 June 2017
Ratified by	Executive Directors' Group
Date of issue	3 July 2017
Ratifying body	Executive Directors' Group
Date for review	May 2020

Target audience	All SHSC staff and the Trust Board
-----------------	------------------------------------

Keywords	Responsible person, fire safety arrangements, fire marshal/fire warden
----------	--

Version 6.0 of the Fire Safety Policy

This policy includes amendments to the smoking and emergency arrangements to be undertaken in the event of a fire emergency.

This policy is stored and available through SHSC intranet and internet. This version of the policy supersedes the previous version, (V5 October 2014).

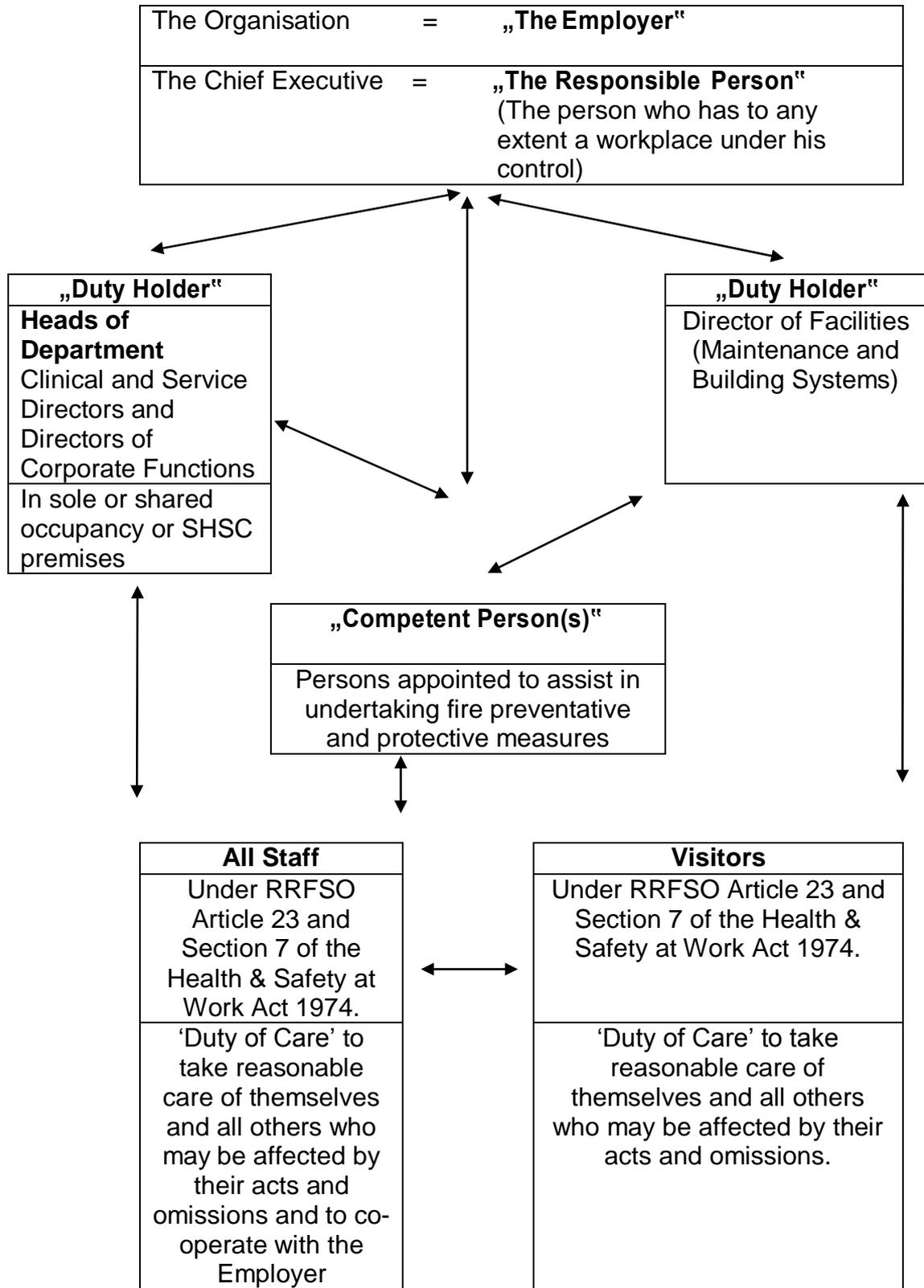
All copies of the previous policy held separately should be destroyed and replaced with this version.

Contents

Section		Page
		Contents
		Flowchart
1		Introduction
2		Scope
3		Definitions
4		Purpose
5		Duties
	5.1	Organisation
	5.2	Chief Executive
	5.3	Board Level Executive Director
	5.4	Head of Department
	5.5	Departmental Managers
	5.6	Fire Marshal
	5.7	Fire Warden
	5.8	Director of Facilities
	5.9	Fire Safety Manager
	5.10	Safety Committees
6		Process
	6.1	Managing Fire Precautions
	6.2	General Arrangements
	6.3	Assessment of Risks and Hazards from Work Activities and within Departmental Areas of Responsibilities
	6.4	Elimination or Reduction of Risks from Dangerous Substances (Article 12 RRFSO)
	6.5	Procedures for Serious and Imminent and Dangerous Areas (Article 15 RRFSO)
	6.6	Emergency Planning for Disabled Persons
	6.7	Fire Risk Assessments
	6.8	Estate Services and Facilities
	6.9	Fire Safety Arrangements for SHSC Project Management of Construction Works
	6.10	Departmental Occupation or Refurbished or New Premises
7		Dissemination, Storage and Archiving
8		Training and Other Resource Implications
9		Audit, Monitoring and Review
10		Implementation Plan
11		Links to other Policies, Standards and Legislation
12		Contact Details
13		References
Appendices:	Appendix A - Version Control and Amendment Log	
	Appendix B - Dissemination Record	
	Appendix C - Equality Impact Assessment Form	
	Appendix D - Human Rights Act Assessment Checklist	
	Appendix E - Development and Consultation Process	
	Appendix F - Policy Checklist	
	Appendix G - Fire Safety Procedural Arrangements	

Flowchart:

Management structure for fire safety



1.0 Introduction

This Fire Safety Management Policy reflects the importance Sheffield Health and Social Care NHS Foundation Trust (SHSC) attaches to the implementation of the statutory requirements of the Regulatory Reform (Fire Safety) Order 2005 (RRFSO) and to **Fire Safety Management**¹. SHSC is committed to achieving good practice in the management of fire safety by assessing and managing fire risks to prevent harm to staff, service users and visitors and anyone else who may be affected by its activities. The instruction contained within this policy document will demonstrate that SHSC recognises fire safety is an important function and is committed to the integration of fire safety into the management of activities and facilities. The version and control of this document is identified at *Appendix A*.

Consideration has been given to the governance process of this policy, including: version control, dissemination, equality impact, human rights, the development and consultation process, a policy checklist and the Fire Safety procedural arrangements; located in Appendices A to G respectively.

2.0 Scope

This Policy applies to all staff working for, or seconded to, Sheffield Health and Social Care NHS Foundation Trust.

3.0 Definitions

Fire safety management describes the preventative and precautionary measures employed to remove and reduce fire hazards that have the potential to cause injury or harm to premise occupants in the event of a fire.

Effective fire safety management evolves the arrangements that operate at all levels within the organisation and each individual should know and understand what role and responsibilities they have to manage fire safety within the premise.

A good management system will ensure that as any fire safety issues arise the individuals have the knowledge, skill and flexibility within the system to manage the issues locally without taking risks relating to the fire safety measures needed.

1. **„Fire Safety Management“** - arrangements to monitor and control fire safety standards and to ensure that once standards are reached, they continue to be implemented.
2. **„Responsible Person“** - in relation to a workplace, the employer, if the workplace is to any extent under his control (RRFSO: Article3a).
3. **„Head of Department“** - this term refers to Clinical and Service Directors and Directors of Corporate Functions.
4. **‘Duty Holder(s)’** - as defined by RRFSO: Article 5 would apply to Heads of Department that are in sole occupation of SHSC premises. Similar duties held by Heads of Department in buildings occupied by more than one department, but only in respect of premises, which their Department occupies.
5. **„Workplaces“** - any premise or parts of premises, not being domestic premises, used for the purposes on an employer’s undertaking and which are made available to an employee of the employer, as a place of work.
6. **„Relevant Persons“** - any person (including the ‘Responsible Person’) who is, or may be lawfully on SHSC premises; and any person in the immediate vicinity of the premise who is at risk from a fire on SHSC premises – this may include staff, clients, visitors or members of the public on the street adjacent the building.
7. **„Competent Person“** - a person with sufficient training and experience and other qualities to enable them properly to assist in the undertaking and protective measures identified.
8. **‘Leases’** - in leased buildings some of the responsibilities outlined below rest with the landlord or landlord’s agent as the ‘Responsible Person’.
9. **‘Dangerous Substances’** - a substance or preparation which meets the criteria in the approved classification and labelling guide as a substance which is explosive, oxidising, extremely flammable, highly flammable or flammable, whether or not that substance or preparation is classified under Chemicals (Hazards Information and Packaging for Supply) Regulations 1999 (CHIP): (b) a substance or preparation which of its physico-chemical properties and the way it is used or is present in or on premises creates a risk: and (c) any dust, whether in the form of solid particles or fibrous materials or otherwise, which can form an explosive mixture with air or an explosive atmosphere.
10. **‘Refuge Area’** - an area of the building that people who may need assistance to evacuate can go to. The area would generally be a fire protected area with access to an evacuation lift or a protected stairwell. Areas located in protected stairwells should be sited so as not to inhibit the escape route of others.
11. **‘Responsible Project Manager’** - the person responsible for a particular project. There shall be a single manager responsible for each and every project that shall be appropriately qualified and experienced.

4.0 Purpose

The purpose of this policy, and the priority aims for fire safety within the Trust, are to prevent a fire and ensure the:

- (a) personal safety of staff, service users and visitors,
- (b) protection of SHSC property and assets.

SHSC is liable under the Regulatory Reform (Fire Safety) Order 2005 to ensure, so far as reasonably practicable, the safety at work of its employees and persons within its premises. This duty would cover lapses of fire safety management leading to incidents which arose as a result of SHSC failing to provide safe systems of work.

Management will, through the process of risk management, develop and implement appropriate fire safety measures to provide a safe working environment in a way which balances with the other overarching duty of providing comfortable, user-friendly, easily accessible services.

5.0 Duties

The Trust Board, as the employer of SHSC staff, has the ultimate responsibility for fire safety management in respect of the activities and premises under SHSC control. It has delegated the duty of the day-to-day running of SHSC, which includes the management of fire safety, to the Chief Executive as the **Responsible Person**² who has constituted a risk management team to draw up and monitor the implementation of this Fire Policy and the executive arrangements therein, in accordance with terms of reference laid down by the Trust Board. **Heads of Department**³ are responsible as „**Duty Holder(s)**“⁴ to the Chief Executive for the fire precautions and safe management of fire risks in all „**Workplaces**“⁵ under their authority.

SHSC will use its best endeavours to comply with the Regulatory Reform (Fire Safety) Order 2005 (RRFSO) and other applicable legislative requirements. The Regulations involve an approach to fire safety which is based on risk assessment with the responsibility for fire safety resting with the person(s) in charge of the premises and activities therein. 'Heads of Department are responsible for fire safety within areas occupied by their Departments and for ensuring that departmental activities do not put relevant people at risk of injury from fire. In premises under SHSC control, the maintenance of the building elements and systems infrastructure for fire safety is the responsibility of the Director of Facilities and other senior managers with responsibility for the relevant maintenance budget.

In cases where the Director of Facilities is not the budget holder, the responsible manager shall carry out all maintenance work identified by his/her Estate Services manager or equivalent, or reasonably advised as being necessary by the Director of Facilities. In premises leased by SHSC the responsibility will be in accordance with the repairing obligations under the lease.

Each department must ensure all persons who may be affected by its activities understand the nature of the arrangements for fire safety management as outlined in the Fire Risk Assessment and Emergency Plans relevant to the buildings occupied by the department as devised by the 'Responsible Person'.

The attention of all SHSC staff is drawn to their legal responsibilities under the RRFSO: Article 23 and the Health & Safety at Work Act (Section 7) (HSWA) 1974. These statutory regulations require all employees 'to take reasonable care' of themselves and all others who may be affected by their acts and omissions, and to comply with SHSC and Departmental policies and arrangements regarding fire precautions and general fire safety.

The attention of all staff and visitors is drawn to their legal responsibility, under the RRFSO: Article 23 and the HSWA: Section 8, not to interfere with or misuse anything, whether appliances, systems, building elements, or systems of work provided by SHSC in the interests of fire safety. In addition, all members of staff and other occupants are required to comply with the fire safety instructions approved by SHSC and issued to 'Heads of Department'. In particular, in the event of a fire alarm sounding in SHSC occupied premises all occupants are required diligently to evacuate the building and may only re-enter upon the instructions of the SHSC Fire Safety Manager (or designated fire safety representative), 'Responsible Person' or a member of the Fire and Rescue Service. Nothing must be undertaken which would affect the correct function of opening or closing of a fire door or cause any obstruction to a doorway or general means of escape from a fire.

5.1 Organisation

The Organisation is, under Regulatory Reform (Fire Safety) Order 2005, deemed the 'employer', and as such ultimately accountable and responsible for fire safety management in respect of the activities undertaken by SHSC and facilities under its control.

5.2 Chief Executive

The Chief Executive is accountable for the functions of SHSC in all its activities, including the management of fire safety.

5.3 Board-Level Executive Director

A Board-level executive director will be responsible for the day-to-day operational management of this Policy.

5.4 Head of Department

The Head of Department is responsible to the Chief Executive for the day-to-day safe management within their Department and areas of responsibility; they are to appoint suitable persons to undertake the roles of Fire Marshal and Fire Warden. In particular, they are responsible for, and shall take the lead on, the planning, implementation, monitoring and review of measures to control fire risks arising from the activities of their Department and ensuring the allocation of resources necessary for this.

Fire safety procedural arrangements, guidance and records which provide detailed advice to assist managers to fulfil their statutory responsibilities are contained at *Appendix G*.

Fire Safety Management of Work Activities in Departments

The Head of Department shall ensure within its governance structure that a suitable person(s) is appointed to assist in creation, development, monitoring and review of the Department's fire safety arrangements and compliance.

Workplace Risk Assessment:

The 'Head of Department' will ensure workplace risk assessments, in respect of their areas of responsibility, are undertaken by workplace managers and reviewed annually, as circumstances dictate, or at shorter intervals following fire-related incidents which have occurred within the workplace.

Workplace risk assessments serve the purpose of identification of the Department's significant hazards including fire and the necessary control measures to mitigate potential risks. Workplace managers should liaison with other departments, occupiers or landlords of the building to discuss the management of risks and hazardous processes generated by the Department, staff responsibilities and ensure general fire precautions have been addressed locally. The enforcing authorities may require evidence of workplace risk assessments to demonstrate that arrangements for fire safety in departments are adequate and in place. In particular, these risk assessments should identify the department's on-going requirement to carry out fire safety training for staff on employment, annually and changes of job or location etc.

5.5 Departmental Managers

Departmental Managers is an inclusive term to describe all those with the duty to manage/supervise any aspect of work activity of the Department, and shall be accountable to the 'Head of Department' (via their line manager as appropriate) for the fire safety management of the work activities under their control as directed by the 'Head of Department'. Their duties include the assessment and reduction of fire related risks through the implementation of the Nicotine Management and Smoke Free Policy.

Duties shall include the safe handling and use of hazardous substances and the maintenance of safe plant, machinery and equipment. Additionally, they shall ensure all fire incidents are reported (in accordance with SHSC Policy: *Incident Reporting and Investigation*). Furthermore they shall familiarise themselves with:

- (a) the fire action to be undertaken on discovering a fire or hearing the fire alarm,
- (b) the locations of premises fire alarm call-points and fire extinguishers,
- (c) fire escape plans, escape routes and safe refuge areas,
- (d) fire training requirements appertaining to their responsibilities.

Procedures and Emergency Measures in Respect to Dangerous Substances (RRFSO: Article 12 & 15) - the 'Head of Department' shall appoint a 'Competent Person(s)' where necessary to provide effective and appropriate procedures to safeguard „**Relevant Persons**“⁶ from accident, incident or emergencies related to the presence of dangerous substances on SHSC premises under the department's control.

5.6 Fire Marshal - the 'Head of Department' shall appoint a senior member of staff within each building/workplace for which they have delegated responsibility to become a Fire Marshal with responsibility for the co-ordination and control of the building/workplace in the event of a fire emergency. Additional members of staff shall be appointed as appropriate to become Fire Wardens to assist Fire Marshals in their duties. The duties of the Fire Marshal shall include:

- (a) To co-ordinate the department (building) Fire Wardens;
- (b) To liaise within each building, (if multi-occupied), with other departmental Fire Marshals to ensure a nominated Fire Warden gives assistance to the Fire and Rescue Service and SHSC staff etc. during an emergency during normal working hours.
- (c) To liaise within each building (if multi-occupied) with the landlord's agent and/or other occupiers giving assistance to the Fire and Rescue Service and others, as required,
- (d) To administer and organise the duties of the Department's Fire Wardens in accordance with SHSC's Fire Safety Policy.

5.7 Fire Warden

Due to the size and complexity of the premises occupied by SHSC it is neither practical nor viable to maintain a feasible register of building occupants to account for those persons using the premises during normal working hours. The 'Head of Department' shall designate sufficient staff to act as Fire Warden to be provided on a ratio of approximately two Fire Wardens per floor, or area occupied, (one to deputise for the other, during the department's normal working hours). Fire Wardens should undergo suitable competency training at intervals not to exceed 18 months between formal courses.

A written record shall be kept by the 'Head of Department' of those persons designated and trained as Fire Wardens whose primary responsibilities include:

- (1) To check all premises are vacated, to compensate for SHSC being unable to maintain any meaningful building occupant register, by visually checking their designated area of responsibility to ensure all persons are accounted for and are instructed to leave the premises immediately by the nearest fire exit.

- (2) To act as 'trained staff' in the use and safety procedures for employing fire extinguishing equipment supplied in SHSC premises, where safe and practical to do so.
- (3) To identify, assist, or report the location of any individual requiring assistance as necessary.
- (4) To identify, assist, or report any day-to-day damage or problems in respect to the means of escape, firefighting equipment, or fire safety issues to the 'Head of Department' (or their representative) to ensure suitable and relevant action is taken immediately, or as soon as reasonably practicable after discovery.

5.8 Director of Facilities

The Director of Facilities will ensure a „**Competent Person**“⁷ is available to provide sufficient advice, guidance and assistance on fire risks of SHSC's activities to management at all levels to enable them to formulate fire policy arrangements, which are adequate for SHSC to discharge its legal duties.

5.9 Fire Safety Manager

An appropriate senior manager will be appointed to assume the role of Fire Safety Manager who will be responsible for the development of an effective fire safety management strategy which enables:

- (a) the preparation and upkeep of the organisation's fire safety policy,
- (b) the provision of reports and recommendations which enables the Trust Board to consider the removal or reduction of identified risks to an acceptable level,
- (c) adequate means for quickly detecting and raising the alarm in case of fire,
- (d) means for ensuring emergency evacuation procedures for all areas, at all times owned premises are occupied, without reliance on external services,
- (e) staff to receive fire safety training appropriate to the level of risk and duties they may be required to perform,
- (f) the reporting of fire-related incidents to appropriate organisations,
- (g) the development of partnership initiatives with other bodies and agencies involved in the provision of fire safety.

5.10 Safety Committees

The SHSC Joint Consultative Forum has been constituted in accordance with the Safety Representatives and Safety Committees Regulations 1977, where matters pertaining to health and safety (including fire safety issues) are discussed between management and union representatives who have the right, with prior notification to the employer, to conduct their own safety inspections. Through the Joint Consultation Forum, SHSC shall consult representatives of employees on safety issues.

For the purpose of the Safety Representatives and Safety Committees Regulations 1977, any employee may seek representation on health and safety (including fire safety) issues through one of the Trade Union Safety Representatives. A list of Safety Representatives is available from the Director of Human Resources. The regulations cited above in respect to consultation on fire safety issues have been made under RRFSO: Article 41 - Duty to Consult Employees.

6.0 Process

6.1 Managing Fire Precautions

SHSC is committed to managing fire precautions and fire risks through processes of risk assessment and risk control measures in respect to all facilities, which it owns or **Leases**⁸, SHSC will use its best endeavours to:

- (a) Provide appropriate 'Means of Escape' in the case of fire and ensure all the means of escape are kept free from obstruction at all times.
- (b) Provide and maintain in working order the fire alarm systems.
- (c) Provide and maintain in working order all fire extinguishing appliances, and equipment and facilities that are provided for the use by the Fire and Rescue Service.
- (d) In the event of a fire, to take all reasonable practical steps to ensure the safety of persons (including visitors) on SHSC property who are at risk from fire on the premises, from death or injury in the event of a fire or associated explosion.
- (e) Seek to reduce fire incidents by:
 - (i) Minimising the potential for fire to occur and disrupt the operational function of SHSC and cause damage to property and the environment.
 - (ii) Minimise the potential for un-wanted fire alarms to occur, which disrupt work and place an undue burden on the Fire and Rescue Service.

- (iii) Provide appropriate instructions, information and/or training for all persons, including contractors and temporary staff as necessary, on the actions to be taken in the event of fire.
- (iv) Provide relevant 'Duty Holders' with general Fire Risk Assessments, Emergency Building Plans and Departmental Action Plans stating the precautions to be observed and steps to be taken to protect people and property.
- (v) Ensure measures, that are commensurate with the risks and significance of consequential losses, are taken to protect buildings, installations and equipment from fire with an emphasis on business continuity and containing and preventing the spread of fire.

6.2 General Arrangements

All staff and work activities undertaken on behalf of SHSC must be supervised by a Competent Person(s) who will have the authority commensurate with their supervisory responsibilities. In particular, the 'Head of Department' must ensure all visitors within their area(s) of responsibility are adequately supervised to ensure they comply with all fire safety requirements to protect themselves, and others, who might be affected by their acts or omissions.

SHSC will manage its facilities as required to ensure the fire safety of persons occupying, or visiting, the premises over which it has control.

SHSC will co-operate with other employers with whom it shares a workplace and co-ordinate with them the measures necessary to control fire risks arising from its activities. Where SHSC staff work alongside the employees of another organisation they shall work to the higher safety standard which is applicable to the workplace.

SHSC will consult with staff representatives for employee safety on matters pertaining to fire safety through the Trust Safety Committee.

6.3 Assessment of Risks and Hazards from Work Activities and Within Departmental Areas of Responsibilities

The 'Head of Department' has a duty to ensure 'Relevant Persons' that may be affected by their acts or omissions are mitigated from exposure to fire and risks as far as reasonably practicable. These risks include sources of ignition leading to fires, cause and effects of chemicals and gases, explosive or harmful atmospheres, flammable or dangerous substances, ionising radiation, exposure, bio-hazards, experimental or industrial processes etc. within their Department's occupied space and responsibilities.

The 'Head of Department' is to ensure suitable and sufficient assessments of risks have been carried out by their staff as required under the Management of Health and Safety at Work Regulations 1999, Regulation 3. Significant hazards arising from risk assessment should have suitable risk control measures using the steps identified within the regulations (and other relevant documents such as Control of Substances Hazardous to Health Regulations 1999 (COSHH) and Health and Safety Executive (HSE) Guidance on the storage and handling of flammable substances and gasses etc.) are undertaken, and that suitable management controls are introduced as necessary to mitigate risks.

6.4 Elimination or Reduction of Risks from Dangerous Substances (Article 12 RRFSo)

Where **Dangerous Substances**⁹ are present in their Department, the 'Head of Department' must ensure all reasonable steps are taken to either eliminate or reduce the risks by replacing the dangerous substance with a substance or process that either eliminates or reduces the risk. 'Heads of Department' must apply measures to control the risk and mitigate the detrimental effects of a fire and its effect to members of staff or 'Relevant Person(s)'. The 'Head of Department', Departmental Safety Representatives, and other relevant staff must, under these regulations, consider the following:

- (a) Are there adequate controls of dangerous substances?
- (b) Is there adequate control of ignition sources?
- (c) Are handling, storage and transportation procedures in place?
- (d) Is the use of dangerous substances being eliminated, or reduced, as far as reasonably practicable?

6.5 Procedures for Serious and Imminent and Dangerous Areas (RRFSO: Article 15)

The 'Head of Department' shall establish, and where necessary, put in place procedures to be followed in the event of a serious and imminent danger to 'Relevant Persons' by nominating 'Competent Person(s)' to implement procedures and inform and instruct other occupants concerned. Heads of Departments, Departmental Safety Representatives and other relevant staff must under these regulations consider the following:

- (a) Is there an effective, specific emergency plan for the dangerous substances and is it published?
- (b) Are appropriate emergency procedures in place?
- (c) Are there sufficient numbers of 'Competent Person(s)' to manage the evacuation?
- (d) Are there procedures in place to restrict exposure of relevant persons to special risks unless trained?

Line Managers or persons with delegated responsibility for work premises must complete a Fire Evacuation Plan and Personal Emergency Evacuation Plan (PEEP) for individuals (where necessary) for which they have a duty of care, using the information contained within Appendix G *Section 4: Form 1 & 2*.

6.6 Emergency Planning for Disabled Persons

'Heads of Department' as 'Duty Holder' must ensure specific and suitable Departmental arrangements are in place for staff, service users or visitors, who work in, or visit, their Department and who have restricted mobility, sensory disabilities or who are temporarily incapacitated in case of fire. Particular attention must be taken to ensure that safe egress from their area of responsibility to a safe **Refuge Area**¹⁰, in case of fire or emergency evacuation, has been given due consideration including arrangements for assisting disabled people to access the refuge, supporting them while using the refuge area and how the emergency services are to be informed there are persons in the refuge area.

Where a member of staff or service user is likely to be unable to leave a building un-aided, in a prompt manner, during an emergency situation a PEEP must be completed. This may be due to:

- mobility impairment
- sight impairment
- hearing impairment
- cognitive impairment
- other circumstances

A temporary PEEP may be required, for example:

- short-term injuries, (e.g. broken leg)
- temporary medical condition
- those in the later stages of pregnancy

The Duty Holder must identify a suitable person, (such as departmental administrator, line manager, or departmental safety representative), to conduct a risk assessment and complete a PEEP.

Generally, Duty Holders should be aware that a person requires a PEEP. However, in some circumstances the need may not be obvious and in this case staff will be expected to make their head of department aware they may require assistance, (see also Appendix G, section 3.8).

Once persons with disabilities have been identified by the 'Duty Holder' then a line manager or persons with delegated responsibility for work premises must complete a Personal Emergency Evacuation Plan for individuals (where necessary) for which they have a duty of care, using the information contained within Appendix G *Section 4: Form 2*.

6.7 Fire Risk Assessments

The RRFSO is a fire risk assessment-based approach where the 'Responsible Person' and 'Duty Holder(s)' for premises must decide how to address the risks identified while meeting certain basic requirements.

By adopting a fire risk assessment approach, the 'Responsible Person' will need to look at how to prevent fire from occurring in the first instance by removing or reducing hazards (something with the potential to cause harm) and risks (ignition sources) and then look at the precautions to ensure people are adequately protected if a fire were still to occur. Risk assessments should be undertaken by a competent person using guidance provided in the Department of Health Firecode suite of documents with managers responsible for work areas completing workplace risk assessments using the guidance provided in the SHSC Policy: *Risk Management Strategy*.

6.8 Estate Services and Facilities

The Director of Facilities will ensure Fire Risk Assessment Inspections are carried out by 'Competent Person(s)' for the buildings for which she/he is responsible and that the person responsible for all other SHSC buildings are given advice and guidance necessary to ensure they are aware of, and are able to discharge, this responsibility. Fire Risk Assessment Inspections will focus primarily on the condition and adequacy of the building's fire safety provision, fire fighting equipment and facilities.

6.9 Fire Safety Arrangements for SHSC Project Management of Construction Works

The Director of Facilities shall implement systems and procedures to enable the management and control of the means of escape and the risk of fire during construction works. Where construction work is to be carried out in occupied premises, the „**Responsible Project Manager**“¹¹ shall ensure suitable arrangements and risk assessments are in place to establish the extent of the building's fire safety arrangements likely to be affected by the works. Where projects are notifiable under the Construction, Design and Management Regulations 2004 (CDM) the appointed CDM Co-ordinator (CDM-C) is responsible for ensuring they have all the relevant information to provide risk assessments to the principle Contractor as part of the Pre-tender Safety Plan. SHSC requires suitable safety control measures to remove, reduce, protect or mitigate the risk of fire and provide suitable Means of Escape and warning of Fire for the duration of the Pre-tender Safety Plan.

The Principle Contractor must include in the Construction Phase Safety Plan Fire Risk Assessments and safety control measures for the work activities and procedures to be adopted on site for the duration of the project. Fire prevention and control measures implemented by the Principle Contractor in relation to his activities on SHSC premises must meet or exceed the requirements set out in the HSE's and any other relevant statutory and/or SHSC fire safety guidance.

6.10 Departmental Occupation or Refurbished or New Premises

Under the RRFSo, Project Managers are required to make suitable arrangements with 'Heads of Department' for relevant departmental staff (e.g. Managers, Fire Marshals and Departmental Safety Representatives) to have a fire safety brief and building/area familiarisation visit with a 'Competent Person'.

The briefing and familiarisation visits must be made prior to any departmental occupation being permitted of the area or premise. 'Heads of Department' shall ensure the information and any relevant instructions relating to fire safety are cascaded promptly to all relevant persons. A written record shall be kept by the 'Head of Department' of those persons trained and made available to the Fire and Rescue Service on request.

7. **Dissemination, Storage and Archiving**

This policy will be posted on the SHSC intranet website and available to all staff within seven days of its ratification.

An 'All Staff' email alert will be sent to all staff informing them of the policy. In addition, the 'Head of Department' will ensure that staff, for which they are responsible, are aware of the policy and how it is to be applied.

The Corporate Governance Team will keep a paper, and an electronic version, of the previous guidance for archive purposes.

8. **Training**

Fire Safety Awareness training is to be an integral part of organisational training and education. The Fire Safety Manager shall devise and facilitate a programme of fire safety training which reflects staff responsibilities for fire safety and set in place appropriate means for recording, and monitoring, staff attendance during fire training. Fire safety training programmes will be promulgated on the SHSC intranet where staff can select a suitable training venue. Managers of staff unable to attend promulgated venues are to make suitable arrangements with the Fire Safety Manager for training to be delivered within specific workplaces. All staff are to receive training that is **consummate** to maintain a level of competency that is appropriate to their duties.

Departmental Responsibilities

SHSC is committed to ensuring all work activities performed within SHSC will be performed by persons competent to carry out those duties. 'Heads of Department' must ensure all members of staff receive such training as is required for them to be able to discharge their tasks and duties in a competent manner. The following training should be provided:

- (a) **Induction Fire Safety Training** - all new members of staff must undertake fire safety training as an element of Corporate Induction Training. A written record shall be kept by the 'Head of Department' of those persons trained.

- (b) **Local Fire Induction Training (staff including temporary staff employed by the Department)** - the 'Head of Department' shall provide Local Fire Safety Induction Training as part of their local safety arrangements for permanent new and temporary staff, whether or not directly employed by SHSC.

This staff training is required at the following periods or events and shall be provided as soon as reasonably practicable after starting, or changing location or work. A written record shall be kept by the 'Head of Department' of those persons trained:

- (1) at the time when they are first employed and thereafter annually.
 - (2) in their being exposed to new or increased risk because of:
 - (i) being transferred to another building or given a change of responsibilities;
 - (ii) the induction of new work equipment, a change in the work equipment already in use, or the introduction of new technology;
 - (iii) the introduction of a new system of work or a change in the system of work already in use.
 - (3) fire training shall include:
 - (i) action on raising the alarm on discovering a fire;
 - (ii) action on hearing the fire alarm;
 - (iii) action to call the Fire and Rescue Service;
 - (iv) type of fire appliances and how to use them;
 - (v) a physical walk around local escape routes;
 - (vi) routes to, and the location of, the building's Fire Assembly Points, (including safe refuge areas);
 - (vii) any relevant hazards, processes or other relevant information.
- (c) **Fire Evacuation Drills** - 'Heads of Department' are to ensure Fire Evacuation Drills are carried out at all premises for which they have responsibility once, preferably twice, a year and undertake additional drills as necessary to ensure all staff have been included and keep a written record of such Drills. Any un-scheduled or Un-wanted Fire Alarm Signals should be treated as supplementary evacuation drills. These do not obviate the need for an annual supervised fire drill.
- (d) **Training Records** - the 'Head of Department' must ensure a written record is kept of local (departmental) fire safety training undertaken by their staff. Records should include the type of training, local information and instructions provided, date and names as necessary.

9. Audit, Monitoring and Review, Learning from Any Incidents

The 'Head of Department' shall ensure suitable and sufficient arrangements are made within their department(s) to monitor that the requirements of this policy have been implemented.

The Fire Safety Manager will ensure random audits of workplace fire safety arrangements are conducted to ascertain compliance with the requirements of this policy.

A report on the implementation of this policy, and its effectiveness, will be produced by the Fire Safety Manager for assurance to the Trust Board before the policy is reviewed.

This policy will be reviewed by the Fire Safety Manager within 3 years, or earlier, to ensure it meets new legislative requirements or appropriate guidance.

10. Implementation Plan - (no flow chart with this plan)

Action/Task	Responsible Person	Deadline	Progress update
Review policy	Author	9 May 17	
Policy submitted for consultation	Author	25 April 17	
Amend policy as required following consultation	Author	9 May 17	
Policy submitted to the Health and Safety Committee for comment	Author	9 May 17	
Policy submitted to the Director of Corporate Governance for comment by the Policy Governance Group before being submitted to EDG	Author	9 May 17	
Policy ratified by EDG	EDG	1 July 17	
Policy placed on the intranet with Trust-wide email to inform staff of policy change; previous policy removed.	Author	1 July 17	
Heads of Department to inform managers and staff of change of policy	Heads of Department	1 July 17	

11. Links to Other Policies, Standards and Legislation

This policy is required for the Regulatory Reform (Fire Safety) Order 2005. It meets the requirements of the Department of Health's fire safety policy statement which is considered by the Minister of State, (Delivery and Quality), as best practice for NHS Foundation Trusts'.

HM Government - Fire Safety Guides - HM Government has produced a series of fire safety guides in respect of the RRFSO appertaining to different types of premises. These guides assist the 'Responsible Person' and 'Duty Holder(s)' to comply with the requirements of the RRFSO, which are available from the following web site:

<http://www.communities.gov.uk/fire/firesafety/firesafetylaw/aboutguides/>

The following SHSC policies have been referenced:

SHSC Policy: Policy on Policies: Commissioning, development, consultation, ratification and up-dating
SHSC Policy: Risk Management Strategy
SHSC Policy: Incident Reporting and Investigation
SHSC Policy: Nicotine Management and Smoke Free

12. Contact Details

Title	Name	Phone	E-mail
Executive Director of Finance	Phillip Easthope	22 63978	phillip.easthope@shsc.nhs.uk
Fire Safety Manager	Stephen Price	27 18189	stephen.price@shsc.nhs.uk
Director of Facilities	Helen Payne	27 18697	helen.payne@shsc.nhs.uk

13. References

Health and Safety at Work Act 1974
Regulatory Reform (Fire Safety) Order 2005
Management of Health and Safety at Work Regulations 1999
Control of Substances Hazardous to Health Regulations 2002 (COSHH)
The Safety Representatives and Safety Committees Regulations 1977
Construction, Design and Management Regulations 2004

Appendix A - Version Control and Amendment Log

Version No.	Type of Change	Date	Description of Change(s)
4	Policy Review	6 May 2010	Changes to Policy instructions to reflect statutory fire safety requirements
5	Policy Review	4 September 2014	Policy document amended to include additional appendix containing procedural arrangements
6	Policy Review	25 April 2017	Policy document amended to include additional procedural arrangements

Appendix B - Dissemination Record

Version	Date on website (intranet and internet)	Date of „All SHSC Staff“ Email	Any other promotion/ Dissemination (include dates)
5	August 2014	October 2014	
6	1 July 2017 (TBC)	1 July 2017 (TBC)	

Appendix C - Equality Impact Assessment Form

Equality Impact Assessment Process for Policies Developed Under the Policy on Policies

Stage 1 - Complete draft policy

Stage 2 - Relevance - Is the policy potentially relevant to equality i.e. will this policy potentially impact on staff, patients or the public? If **NO** - no further action required - please sign and date the following statement. If **YES** - proceed to stage 3.

This policy does not impact on staff, patients or the public (insert name and date)

Stage 3 - Policy Screening - 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 on equality impact assessment for examples and detailed advice. This is available by logging-on to the Intranet first and then following this link https://nww.xct.nhs.uk/widget.php?wdg=wdg_general_info&page=464

	Does any aspect of this policy actually 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	
DISABILITY	No	Yes - consideration of the needs of disabled people. This is addressed in the policy and Fire Safety Procedural Arrangements 3.8	
GENDER REASSIGNMENT	No	No	
PREGNANCY AND MATERNITY	No	No	
RACE	No	Yes - identifies that language may be an issue in 3.8 of the Fire Safety Procedural Arrangements	
RELIGION OR BELIEF	No	No	
SEX	No	No	
SEXUAL ORIENTATION	No	No	

Stage 4 - Policy Revision - make amendments to the policy or identify any remedial action required (action should be noted in the policy implementation plan section)

Please delete as appropriate: Policy Amended.

Impact Assessment Completed by (insert name and date)

Stephen Price - 18 May 2017

Appendix D - Human Rights Act Assessment Checklist

1. Is your policy based on, and in-line with, the current law (including case-law) or policy?

Yes. No further action needed.

No. Work through the flow diagram over the page and then answer questions 2 and 3 below.

2. On completion of flow diagram, is further action needed?

No. No further action needed.

Yes, go to question 3

3. Complete the table below to provide details of the actions required

Action required	By what date	Responsible person

Appendix E - Development and Consultation Process

The following have been involved in the consultation process:

- Stephen Price, Fire Safety Manager with guidance from the Regulatory Reform Fire Safety Order and HTM 05-02.

Groups and individuals consulted:

- Deputy Chief Executive
- Executive Director of Finance
- Director of Corporate Governance
- Director of Facilities
- Service Directors
- Head of Clinical Governance
- Assistant Clinical Director - Acute Inpatient Services
- Assistant Service Director - Acute Inpatient Services
- Deputy Service Director - Acute Inpatient Services
- Clinical Nurse Service Manager - Acute Inpatient Services
- Clinical Psychologist
- Fire and Security Co-ordinator
- Head of Equality and Inclusion
- Investigation Lead
- Governance Officer
- Deputy Chief Nurse
- Senior Project Officer
- Clinical Nurse Managers
- Health and Safety/Risk Adviser
- Mandatory Training Lead
- Site Services Co-ordinators - (Michael Carlisle Centre, Longley Centre, Forest Close)

Amendments are shown overleaf.

The following governance groups received this policy:

- Health and Safety Committee
- Policy Governance Group

Dates for consultation and verification:

- Draft 1 25 April 2017
- Draft 2 2 May 2017
- Draft 3 11 May 2017
- Draft 4 26 May 2017

The following significant amendments have been made to the Fire Safety Policy 2014 Version 5. The document format has been changed in compliance with the Trust's Policy on Policies instructions.

1	Appendix C	Fire Safety Procedural Arrangements - amended and re-named Appendix G
2	Appendix C.2.2	Fire Alarms and Action Plans - amended and re-named Appendix G.2.2
3	Appendix C.2.2.1	Fire Action - amended and re-named Appendix G.2.2.1
4	Appendix C.2.3.4	Smoking - amended and re-named Appendix G.2.3.4
5	Appendix C.3	Fire Emergency Procedures - amended and re-named Appendix G.3
6	Appendix C.3.1	Fire Alarm Evacuation procedures, (SHSC premises only) - amended and re-named Appendix G.3.1
7	Appendix C.4 Form 1	Fire Safety Training Needs Analysis and Training Record - deleted
8	Appendix C.4 Form 2	Fire Emergency Plan - amended and re-named Appendix G.4 Form 1
9	Appendix C.4 Form 3	Personal Emergency Evacuation Plan, (PEEP) - amended and re-named Appendix G.4 Form 2
10	Inserted Appendix C	Equality Impact Assessment Form
11	Inserted Appendix D	Human Rights Act Assessment Checklist
12	Inserted Appendix E	Development and Consultation Process
13	Inserted Appendix F	Policy Checklist

Appendix F - Policy Checklist

Please use this as a checklist for policy completion. The style and format of policies should follow the Policy template which can be downloaded on the intranet (also shown at Appendix G within the Policy).

1. Cover sheet



All policies must have a cover sheet which includes:

- The Trust name and logo
- The title of the policy (in large font size as detailed in the template)
- Executive or Associate Director lead for the policy
- The policy author and lead
- The implementation lead (to receive feedback on the implementation)
- Date of initial draft policy
- Date of consultation
- Date of verification
- Date of ratification
- Date of issue
- Ratifying body
- Date for review
- Target audience
- Document type
- Document status
- Keywords
- Policy version and advice on availability and storage

2. Contents page

3. Flowchart



4. Introduction



5. Scope



6. Definitions



7. Purpose



8. Duties



9. Process



10. Dissemination, storage and archiving (control)



11. Training and other resource implications



12. 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
A) Describe which aspect this is monitoring?	e.g. Review, audit	e.g. Education and Training Steering Group	e.g. Annual	e.g. Quality Assurance Committee	e.g. Education and Training Steering Group	e.g. Quality Assurance Committee



13. Implementation plan

14. Links to other policies (associated documents)



15. Contact details



16. References



17. Version control and amendment log (Appendix A)



18. Dissemination Record (Appendix B)



19. Equality Impact Assessment Form (Appendix C)



20. Human Rights Act Assessment Checklist (Appendix D)



21. Policy development and consultation process (Appendix E)



22. Policy Checklist (Appendix F)



Appendix G - Fire Safety Procedural Arrangements

Contents

1	Introduction
2	Fire Safety Strategy
2.1	Fire Detection and Protection Systems
2.1.1	Testing, Inspection and Maintenance
2.2	Fire Alarms and Action Plans
2.2.1	Fire Action
2.2.2	Un-wanted Fire Signals (False Alarm)
2.2.3	Pre-Planning and Fire and Rescue Service Involvement
2.2.4	Impairment Procedures and Contingencies
2.3	Fire Prevention
2.3.1	Housekeeping
2.3.2	Storage and Handling
2.3.3	Fuel Source Hazards
2.3.4	Smoking
2.3.5	Facilities Fire Hazards and Checks
3	Fire Emergency Procedures
3.1	Fire Alarm Evacuation Procedures
3.2	Allocation of Responsibilities
3.3	Fire Notices
3.4	Evacuation Routes and Procedures
3.5	The Roll Call System
3.6	The Fire Marshal System – First Response
3.7	Fire Drills
3.8	Persons requiring assistance
3.9	Members of the Public
4	Workplace Fire Safety Records
Form 1	Fire Emergency Plan
Form 2	Personal Emergency Evacuation Plan (PEEP)

1. Introduction

The procedural arrangements and records contained within this document have been devised to support the instructions contained within the policy document. The information contained is considered best practice and should be implemented; however, changes are considered acceptable when supported by a suitable risk assessment. Staff with responsibility for work premises and activities should evaluate, assess and record preventative and reactive arrangements to mitigate the potential harm caused by fire whilst maintaining continuity of operation throughout a fire emergency.

The purpose of this document is to provide the necessary information to assist staff in implementing the requirements of the Fire Safety Policy.

2. Fire Safety Strategy

The Organisational Fire Safety Strategy includes the following measures:

- The identification of potential fire hazards;
- The identification of persons at risk;
- Preventative and protective control measures;
- Arrangements for the evacuation of occupants;
- Means of escape.

All persons with delegated responsibility for work premises have a duty of care to ensure a work place risk assessment is undertaken; its contents brought to the attention of staff and made readily available to authorised visitors/contractors etc. to aid work activities.

Managers with responsibility for work premises are to complete a fire risk assessment and develop suitable arrangements to protect occupants from fire; consideration is to be given to the ability of occupants to respond effectively to a fire and where necessary provide assistance in evacuation to a place of safety - ultimately away from the building. Fire Evacuation Plans are to be developed by workplace managers ensuring staff are fully aware of the action to be taken in the event of a fire.

Persons with delegated responsibility for work areas are to ensure a suitable and sufficient workplace risk assessment is undertaken identifying potential hazards.

■ **Preventative measures:** general preventative measures include the following:
a. Good housekeeping. i.e.

- bedding and linen areas kept tidy,
- combustible materials kept to a minimum,
- waste materials stored correctly and removed on a regular basis,
- routine cleaning for removal of dust and cobwebs from ledges and electrical fittings,
- circulation escape routes kept clear and free from obstruction.

- b. Electrical equipment testing and disposal of defective equipment;
- c. Arson prevention by storage of materials in designated, secure areas/facilities;
- d. Smoking restriction within confines of premises;
- e. Control of work activities likely to produce excessive heat;
- f. Control of ignition sources, flammable substances/atmospheres.

■ **Protective measures:** general protective measures include the following:

- a. Fire Alarm and Detection system providing adequate means of raising the alarm and procedures for calling the emergency services.
- b. The appointment of suitable persons to provide competent fire safety advice.
- c. The appointment of suitable persons (Fire Marshal/Wardens) to take charge and effect timely evacuation of the premise.
- d. The provision of appropriate fire extinguishers and emergency lighting (including the testing, servicing and maintenance).
- e. The display of appropriate fire instruction notices and other signage.
- f. Appropriate levels of training for staff, e.g. where appropriate, training in the use of portable fire extinguishers.

The following undertakings listed below form the Fire Emergency Prevention Plan (FEPP). The FEPP has been developed to ensure fire protective measures within SHSC are suitable and sufficient to prevent the occurrence of a fire wherever practically possible in accordance with legislative requirements. The Fire Emergency Prevention Plan includes:

- Fire detection and protection systems
- Emergency planning and response
- Installation and modification of detection and protection systems
- Fire prevention and evacuation procedures
- Training

2.1 **Fire Detection and Protection Systems**

SHSC Fire Detection and Protection Systems inspection programme is intended to identify any abnormal conditions or deficiencies which could prevent fire protection systems and equipment from performing their intended function.

Large premises will have the fire alarm system sub-divided into 'Fire Zones', which will provide a continual alarm tone in the fire zone where the fire alarm originated and initiate an Intermittent Tone in the adjacent fire zone. Included in this programme are inspections for:

- Fire Detection and Alarm Systems
- Hand-held portable extinguishers located throughout the facilities
- Fire doors
- Emergency lighting

2.1.1 **Testing, Inspection and Maintenance**

The Estate Services Manager will implement an appropriate programme of planned testing, inspection and maintenance of facility support systems in accordance with relevant statutory requirements, guidance and best practice to provide assurances that fire protection systems and equipment will function when needed. Upon installation, all protection systems will be inspected and acceptance tested by a competent person before being put into operation.

All fire protection systems and equipment will be inspected as required by statutory requirements, with follow-up corrective actions recorded and tracked for completion; this is the responsibility of the appropriate facilities manager and will be auditable in a maintenance log.

Line managers, and persons with responsibility of work areas, are to ensure regular user checks are undertaken to ensure:

- Fire Alarm systems are tested on a weekly basis.
- Fire emergency escape routes are kept clear and free from obstruction to allow free and un-hindered access at all times.
- Fire doors are not damaged or wedged open by an un-approved device and remain fit for purpose at all times.
- Portable fire extinguishers remain readily available for use by staff at all times.

Any deficiencies noted during user inspections are to be reported to the Estate Services Direct Link for maintenance, (telephone 27 18181).

2.2 **Fire Alarms and Action Plans**

All premises have automatic fire alarm systems installed comprising of break glass/key-operated call points and smoke/heat detectors. Depending on the size of the premise, the alarm system may sound when activated with a continuous tone throughout the whole building requiring a full building evacuation. Other, larger buildings providing inpatient bed-based services will have the alarm system divided in to multiple fire zones, employ dual alarm tones providing both continual and intermittent for staged progressive, horizontal evacuation.

The fire zone where the fire alarm has been activated will ring with a continuous alarm tone indicating an evacuation is required; the immediate adjacent fire zone will ring with an Intermittent Tone indicating that evacuation is un-necessary; however, arrangements should be made to evacuate the area if the alarm tone changes to a continuous tone.

The following action is to be taken in the event a fire is discovered within premises owned by SHSC; also included is the procedure to address un-wanted fire signals.

2.2.1 Fire Action

Any person discovering a fire is to:

- 1. Sound the alarm:**
Activate the nearest fire alarm call point by breaking the glass or using a key (inpatient services).
- 2. Call the Fire and Rescue Service:**
Staff within SHSC premises are to contact the switchboard operator on the emergency number 2222 and request to be connected to the Fire and Rescue Service.
(Other premises dial 999 or as per local arrangements).
- 3. Attack the fire:**
Staff may attempt to extinguish the fire using an appropriate fire appliance; only if they have been trained in their use. Staff must never place themselves in a situation where they may suffer injury or harm as a result of the fire.

On hearing the fire alarm

- 4. Leave the area/building:**
Staff should implement the Fire Emergency Evacuation Plan as devised by the workplace manager.
- 5. Close all windows and doors:**
To reduce the spread of oxygen to a fire staff should, wherever possible, close all windows and doors behind them as they evacuate the area/building, only if safe to do so and it does not delay the safe evacuation.
- 6. Report to the Fire Assembly Point:**
The location will be contained within the workplace Fire Emergency Evacuation Plan, or as marked by the Fire Safety signs outside the building.
- 7. Do Not:**
 - Stop to collect personal belongings
 - Use the lifts
 - Re-enter the area/building for any reason until authorised to do so.

3.2.1 Un-wanted Fire Signals (False Alarm)

Due to the nature of healthcare provision within SHSC work premises there may be occasions where the fire alarm becomes activated by either malicious, accidental or deliberate acts, or even system fault. Whilst the safe evacuation of persons within the premise is paramount when discovering a fire, un-wanted fire signals cause unnecessary and needless disruption within the workplace and require an alternate approach to full evacuation. Staff with responsibility for work areas should ensure all reasonable and practical measures are undertaken to ascertain the nature of the fire alarm activation prior to requesting the assistance of the Fire and Rescue Service.

3.2.2 Planning and Fire and Rescue Service Involvement

Liaison with the South Yorkshire Fire and Rescue Service precipitate periodic inspections of SHSC facilities to allow for planning arrangements to be established assisting the Service in the event of a fire emergency.

3.2.3 Impairment Procedures and Contingencies

The Head of Estate Services will ensure any fire system outages will be as short in duration as practicably possible to prevent unnecessary disruption to service provision. Un-planned system outages, repair work or system restoration shall be expedited. Following restoration to service, tests will be made to ensure systems are fully functional.

The following steps will be taken when a Fire Alarm system is removed from service for routine maintenance:

- Notify the designated Fire Marshal before the system is removed from service and provide the anticipated duration of the outage.
- If it is not routine maintenance, a notification and work order will be created to track the outage.
- When work and testing are completed, the premise Fire Marshal is to be informed the system has been returned to operational service.
- A suitable notice will be posted on the alarm system's fire alarm indicator panels when the system is impaired.

The following steps will be taken when a fire alarm system is determined to be malfunctioning:

- After the premise's Fire Marshal has determined the fire alarm activation is due to a false alarm, and if a problem is found that cannot be immediately corrected, the fault should be reported to Estate Services to determine whether or not the system can be shut down.
- If, in residential premises, the fire alarm system's malfunctions cannot be immediately repaired, managers with responsibility for such areas will establish a 24-hour fire watch until the system is repaired.

2.3 Fire Prevention

The following procedures describe the measures which are to be implemented within all SHSC premises to reduce the risk of fire through proper housekeeping, storage and handling procedures; and guidelines to reduce fuel source hazards.

2.3.1 Housekeeping

All SHSC premises are to be maintained in a clean and tidy condition. Fire precautionary measures include:

- Refuse, debris, surplus or defective equipment and furniture are to be removed from floors, circulation corridors, storage and work areas.
- Dispose of all refuse in appropriate receptacles.
- Combustible waste is only to be stored or deposited in approved containers.
- No flammable liquid is to be used for cleaning purposes.
- Spillages of flammable and combustible liquids are to be cleaned up immediately.
- Fires and open flames are not to be left un-attended under any circumstances.
- All fire escape routes, final exits, rescue equipment and fire-fighting equipment locations are to be kept clear and free from obstruction at all times.

2.3.2 Storage and Handling

Fire extinguishers, aisles, passageways and circulation corridors are not to be blocked at any time.

Storage areas are to be kept clear and free from accumulated items that could create a fire or explosive hazard. Safety data sheets relating to hazardous materials are to be maintained and incorporated into environmental risk assessments, where necessary.

Bonding and grounding procedures are to be used in all areas where flammable liquids are transferred to portable containers. The minimum amount of flammable liquid should be stored wherever possible; however, the maximum quantity of flammable liquid stored at one location must not exceed 50 litres.

All flammable liquid containers are to be stored in approved cabinets.

All sources of ignition are to be prohibited in areas where flammable liquids are stored, handled or pumped.

Compressed gas cylinders, both empty and full, are to be properly identified and stored separately; these are to be chained and stored in an upright position.

2.3.3 Fuel Source Hazards

All chemicals must be listed on a Hazardous Substance Inventory as required by the Trust COSHH Policy before being brought on to the premises.

The Director of Facilities, or designate, is to ensure effective control measures are available for the management of all on-site fuel source hazards.

Smoking, open flames, temporary heaters and spark-producing containers, devices, or tools are not permitted in areas where flammable materials are used.

All flammable materials are to be stored in fire resistant storage containers and labelled in accordance with BS5378.

Adequate ventilation is to be provided when using flammable materials as certain vapours have a low explosive level that can be quickly reached if adequate ventilation is not provided.

Flammable liquids such as petroleum must be dispensed from approved safety cans with self-closing caps.

All storage containers, safety cans and drums containing solvents/chemicals are to be properly marked with an appropriate chemical warning label.

2.3.4 Smoking

The Trust aims to provide a safe, smoke-free environment and promote health and wellbeing for service users, staff and visitors via the Nicotine Management and Smoke Free Policy. The Trust operates a 'smoke free site' initiative whereby smoking is not permitted within any internal accommodation or external grounds owned by the Trust with the exception of Woodland View Nursing Home (as a residential care home).

Residential care homes are exempt from the smoke free legislation. Although it is not a legal requirement, designated indoor smoking rooms and/or bedrooms can be made available for use by those residents wishing to smoke indoors. It is, however, not a legal requirement to provide a bedroom.

If a residential care home designates such a smoking room, the following requirements must be met:

- The manager has to designate a room where smoking is permitted.
- The room must be completely enclosed apart, of course, from the doors and windows.
- The ventilation of the room should preferably be outside the care home or to other designated 'smoking rooms' which have external ventilation.
- The doors must close either mechanically or with closers to prevent smoke drifting to smoke-free rooms and/or corridors.
- The room should be clearly marked as a room where smoking is permitted.

There does, however, remain a ban on staff, or other persons, smoking within the care home or within the grounds as a 'smoke free site'.

Staff are required to implement all necessary safety arrangements and preventative measures as identified by risk assessment and comply with instruction referred to within other policies to ensure that smoking materials, i.e. lighters, matches and flammable fluids are not brought on to inpatient ward accommodation.

2.3.5 Facilities Fire Hazards and Checks

The hazards listed in the table overleaf represent the fire and explosive hazards and the typical preventative measures and controls, which will be implemented within SHSC premises.

Hazard	Preventative Measures	Controls
Lead acid battery, Sulphuric acid, Hydrogen during charging	Natural or forced ventilation, Hazard identification signs, No smoking policy	Acid spill kits with neutraliser, showers and eyewash, PPE
Compressed gas cylinders	Training, Storage procedures, No smoking policy	Fire extinguishers, emergency procedures
Hazardous waste and oil storage areas	Training - hazardous waste management manual, Emergency action plans	Fire extinguishers, emergency procedures, oil spill kit
Chemical storage	Chemical approval procedure, Minimize quantity and toxicity, training	Fire extinguishers, flammable cabinets
Welding	Training	Fire extinguishers, barriers

Facility checks are made at a minimum, on a quarterly basis by Estate Services personnel or designee. The following are typical checks to be made for fire prevention, employee safety, emergency equipment, they include:

- Emergency generator - fuel, heaters, batteries, general condition
- Emergency battery condition
- General housekeeping
- Eyewash stations
- Gas pumps and storage tanks
- Hazardous waste storage areas
- Oil storage areas

3. Fire Emergency Procedures

In healthcare buildings, in particularly inpatient-access areas, the immediate and total evacuation of the building in the event of a fire may not be possible or desirable. Service users with restricted mobility, those who use wheelchairs, service users confined to bed or under medication may experience difficulty negotiating escape routes, particularly stairways un-aided, which might place service users at risk due to trauma or their medical condition.

Should evacuation become necessary, except for those premises with independent occupants, the evacuation strategy will be based on the concept of progressive horizontal evacuation, with only those people directly at risk from the effects of a fire being moved.

Progressive horizontal evacuation

The principle of progressive horizontal evacuation is that of moving occupants from an area within a building affected by fire through a fire-resisting barrier to an adjoining area on the same level, designed to protect the occupants from the immediate dangers of fire and smoke. The occupants may remain there until the fire is dealt with or await further evacuation to another, adjoining area or down the nearest stairway.

To avoid delay in evacuating occupants when a fire alarm is sounded there is to be an arranged plan supported by evacuation procedures, devised by workplace managers, enabling persons to leave quickly to a designated place of safety away from the fire.

Full evacuation

The principle of a full evacuation is that of moving all occupants within the building to a designated place of safety outside and away from the building.

The following evacuation plans are to be used within SHSC healthcare premises:

- Full Evacuation: Small, single floor healthcare premises;
- Progressive Horizontal Evacuation: Large healthcare premises; Inpatient residential facilities

It is essential all employees be familiar with the escape route to be used in the event of fire, and alternative routes in case the escape route is impassable. Fire Action Notices will be promulgated within circulation corridors and identified hazard rooms giving instructions about the actions to be undertaken upon hearing the alarm.

Whilst evacuation procedures within buildings with restricted access are in the main simple to implement, those buildings with public access are more complicated to manage as it is often difficult to train or educate the public prior to entry into the premise.

It is not possible to rely on individual members of the public to read information on fire action notices and reliably act upon it; therefore in premises which allow public access a systematic sweep by designated individuals (Fire Wardens) is to be used whereby all areas are checked as part of the evacuation plan to direct or assist persons to evacuate the premise.

3.1 Fire Alarm Evacuation Procedure (SHSC premises only)

The following procedural arrangements are provided to aid staff to respond correctly upon hearing a fire alarm which is activating in their immediate work area:

Continuous Alarm Tone:

In an attempt to ascertain whether the fire alarm activation is as a result of a fire or other means staff should:

1. Contact the SHSC's 24-hour Switchboard Operator on the emergency number **2222** asking them not to call for the Fire and Rescue Service until an initial **2½ minute** investigation has been undertaken by viewing the activation report on the Fire Alarm Indicator Panel and checking the area to confirm a fire has occurred.
2. Where a fire can be confirmed, contact the 24-hour 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.
3. Where a fire cannot be confirmed within **2½ minutes** the SHSC 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, 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 adjoining area. Staff need not evacuate their working area where the alarm is sounding with an Intermittent Tone. However, they should prepare to implement the workplace Fire Emergency Evacuation Plan in the event that the alarm tone changes from intermittent to continuous.

24-hour Switchboard Operator:

All SHSC premise fire alarms are monitored by the 24-hour Switchboard Operator who will connect callers to the Fire and Rescue Service Operator as appropriate. When a fire alarm has activated the 24-hour Switchboard Operator will monitor the premise's fire alarm for a period of **2½ minutes** awaiting an emergency call from premise occupants, (where occupied). The following arrangements will be undertaken:

1. **Emergency Call Received**

When an emergency call is received following fire alarm activation, the 24-hour Switchboard Operator is to inform the caller:

- a. **“SHSC Switchboard Operator; do you require the Emergency Services? (If Yes) Can you give me your name and job title please?”**
- b. **“Do not hang up the phone; I am connecting you to the Emergency Services Operator now”.**
- c. Monitor the emergency call; provide information as appropriate to assist both the caller and the 24-hour Switchboard Operator.

2. **No Emergency Call Received**

In the event that no emergency call has been received following the activation of the fire alarm within **2½ minutes**, the 24-hour Switchboard Operator is to contact the Fire and Rescue Service informing them of:

- a. job title; **‘SHSC Switchboard Operator’**
- b. address and postcode where the fire alarm was activated, any relevant known details appertaining to the alarm activation.

3. **Liaison with the Emergency Service Operator**

The Fire and Rescue Service’s Emergency Switchboard Operator will be unfamiliar with the Trust’s evacuation strategy; **under no circumstance** should the 24-hour 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.

3.2 **Allocation of Responsibilities**

All staff have a ‘duty of care’ to ensure they take reasonable care for both their own health and safety and that of others. Workplace managers are to designate suitable persons with responsibility for the day-to-day supervision of fire safety and ensure that in the event of an emergency all occupants are assisted to a place of safety; these persons are to be appointed as Fire Marshal/Warden.

Allocation of specific responsibilities will vary according to the risks posed within individual work premises. It is imperative there should be no confusion as to who is responsible for each of the various measures that may be taken and decisions are not delayed unnecessarily because one or more of those responsible are not immediately available.

The safety of staff, patients, visitors and other relevant persons is the primary concern; the evacuation of occupants during a fire emergency is to take precedence over attempting to extinguish a fire.

3.3 Fire Notices

At conspicuous points in all parts of buildings and adjacent to fire alarm call points, (break glass, key-operated within designated inpatient areas), printed Fire Action Notices will be exhibited stating in concise terms, the essentials of the actions to be taken upon discovering a fire and on hearing the alarm - supplementary instructions may be implemented by staff in accordance with detailed Fire Evacuations Plans.

3.4 Evacuation Routes and Procedures

Evacuation routes are identifiable by the green and white safety signs situated at door height level on each circulation route. Within designated hazard areas, and where there is a change of direction, these signs indicate the quickest route of exit from the premise. In all cases, everyone will leave the premise immediately on hearing the evacuation alarm, (Continual Tone), or upon notification of an evacuation.

Egress from the premise shall take place in an orderly and safe manner using the strategy of progressive horizontal evacuation as appropriate, via the evacuation routes posted on each floor level, and under the direction of the Fire Warden or designee.

All employees, service users and visitors must assemble at the designated internal or external Fire Assembly Area as identified within workplace evacuation plans, or as otherwise directed by senior management having considered the nature of the fire risk. Each employee is required to become familiar with this procedure and the exit routes.

3.5 The Roll Call System

A system to account for an individual's whereabouts within a building is to be implemented within all premises, which can be used at emergency assembly points by Fire Marshals and management. The roll call system is based on checking that everyone in a building has reached a place of ultimate safety. The names of the building's occupants are to be recorded on a list, register or card index system etc. to confirm their arrival at a nominated assembly point.

In the event of a fire practice, following the evacuation of the building, a designated person will check that everyone on the list etc. is accounted for. This information is then passed to designated persons with responsibility for co-ordinating fire safety at the assembly point and liaising with the Fire and Rescue Service.

3.6 The Fire Marshal System - First Response

The Fire Marshal System - First Response is a management arrangement whereby designated members of staff are appointed with responsibilities for fire safety arrangements within given areas of a premise. This system is based on splitting a building into a small manageable areas, which are thoroughly checked when evacuation is considered necessary. In the event of a fire, designated people, (Fire Marshals/Wardens), will co-ordinate and search specific areas to ensure all people leave the building.

The Fire Marshal, (where appointed), will take overall responsibility for the actions of Fire Wardens in the co-ordination of movement, the gathering of information and ensuring appropriate action is undertaken to ensure the safety of people, and the property, during an emergency or an evacuation. The Fire Warden will take responsibility for local fire safety, the knowledge and awareness of people in their area of designated responsibility, ensuring the area is completely clear in the event of an emergency evacuation.

Fire Marshals and Fire Wardens are responsible for the day-to-day supervision of fire safety arrangements within the workplace and providing assistance to individuals as appropriate.

In premises where the occupancy is considered small and on one floor, it may be deemed appropriate that managers appointing Fire Marshals and Fire Wardens combine the roles.

Fire Warden duties are to include making a thorough check of all internal accommodation within their designated area of responsibility to ensure everyone is out of the building. Assistance is to be provided for persons to evacuate the premise where appropriate; time permitting, all windows and doors are to be closed to restrict the spread of the fire, ensuring no person re-enters the building.

Fire Wardens are to ensure no person leaves the Fire Assembly Area until the Fire Marshal, Fire Safety Manager or Officer of the Fire and Rescue Service has indicated it is safe to do so.

Where it is known that persons remain within the building or where they cannot be accounted for the Fire Marshal/Warden or designee, is to inform the Fire and Rescue Service on arrival providing details (where known) of the person's last known location.

3.7 Fire Drills

The purpose of a Fire Drill is to simulate a fire emergency and ensure all employees are familiar with and understand the evacuation procedure to be undertaken in the event of a fire. Fire drills are to be undertaken on a regular basis - once, preferably twice, a year - arranged by premise Fire Marshals with assistance from the Fire Safety Advisor as necessary. In an attempt to minimise stress and disruption to service users and work activities within inpatient areas, Fire Marshals in consultation with workplace managers are to consider the nature, frequency and suitability of fire drills and should seek advice from the Fire Safety Advisor as necessary.

3.8 Persons Requiring Assistance

Occupants are classified as Independent (including service users), Dependent or Very High Dependency (these latter terms refer to service users only), based upon a broad consideration of their anticipated mobility and/or dependence.

All persons who are likely to use or occupy the premise should be considered, but particular attention should be paid to people, who may be especially at risk, including:

- those persons unfamiliar with the premise
- parents with children
- people with language difficulties
- other persons in the immediate vicinity
- disabled people

Workplace managers should give suitable and sufficient consideration to the dependency of persons for which they have responsibility and where necessary develop 'Personal Emergency Evacuation Plan' (P.E.E.P.) (see Appendix G: Form 2) giving consideration to:

1. Independent
Service users will be defined as Independent if their mobility is not impaired in any way and they are able to physically leave the premise without staff assistance, or if they experience some level of mobility impairment and rely on another person to offer minimal assistance. This would include being sufficiently able to negotiate stairs un-aided or with minimal assistance, as well as being able to comprehend the emergency signage around the premise.
2. Dependent
Service users who are classified as neither 'Independent' nor 'Very High Dependency' are classified as Dependent Service Users.
3. Very High Dependency
Service users with a very high dependency are those whose clinical treatment and/or condition creates a high dependency on staff to enable them to evacuate to a place of safety. Any assessment undertaken will need to be based on the clinical dependency/care need.

Refuge

A refuge is a designated safe area within the building to where people may be located prior to receiving additional assistance in evacuating the premise. The area will generally be fire protected i.e. protected stairwell. The refuge will be treated as a 'temporary safe haven' to where people can initially be evacuated whilst it is decided, upon investigation, if it is necessary to evacuate the individuals further. In all cases where the nature of the alarm has not been ascertained the continued evacuation of individuals from refuge areas is to be undertaken unless directed otherwise by the senior officer in attendance of the Fire and Rescue Service.

3.9 Members of the Public

There will generally be greater problems with evacuating the public than evacuating employees. It is not possible to make individual escape plans for all members of the public who enter SHSC premises whereas with staff it is possible to pre-plan with the individual to develop a P.E.E.P.

All that can be done for visitors, and the general public, is a generic assessment of the type of issues with which they may be confronted together with a set of generic evacuation plans for them to use.

Staff within premises which facilitate designated refuge areas should bring them to the attention of visitors and members of the public as deemed necessary. Suitable notices should be made available on premise reception areas indicating that individuals who consider they may require assistance to evacuate the building in the event of an emergency should bring those requirements to the attention of a designated named person.

Managers with responsibility for providing reception areas within buildings, or work areas, with access control are to provide visitor log books to record the details of visitors authorised to enter the building or work area.

4 Workplace Fire Safety Records

The maintenance of appropriate fire safety records is a statutory requirement. The forms provided within this attachment are provided to assist operational managers, and persons designated within the workplace, with responsibility for the management of fire safety.

Where it is considered assistance may be required in completing the forms the 'responsible person' should contact the Trust's Fire Safety Manager or the Fire and Security Co-ordinator, within Estate Services on (0114) 27 18189 or 27 18185 respectively.

Contents include:

Form 1. Fire Emergency Plan

Form 2. Personal Emergency Evacuation Plan (P.E.E.P.)

Fire Emergency Plan

Name of Organisation	<input type="text" value="Sheffield Health and Social Care NHS Foundation Trust"/>		
Address of Premises	<input type="text"/>		
Area (i.e. ward)	<input type="text"/>		
Date Plan Produced and/or Amended	<input type="text"/>		
Name of Person Producing Plan (print name)	<input type="text"/>		
Job Title	<input type="text"/>		
Signature	<input type="text"/>		
Date:	<input type="text"/>		
Occupancy Levels:	Staff: (quantity)	<input type="text"/>	
	Service Users: (quantity)	<ul style="list-style-type: none"> ▪ Independent <input type="text"/> ▪ Partial Dependant <input type="text"/> ▪ Fully Dependant <input type="text"/> 	
Fire Risk: (Tick ✓)	HIGH	<input type="checkbox"/>	<input type="text" value="Significant Injury or Harm"/>
	MEDIUM	<input type="checkbox"/>	<input type="text" value="Minor Injury or Harm"/>
	LOW	<input type="checkbox"/>	<input type="text" value="No Injury or Harm"/>
Evacuation Method	<input type="text" value="Progressive Horizontal or Full"/>		

1. Introduction

The safety instructions and arrangements contained within this Fire Emergency Plan, (FEP), have been devised with the aim of ensuring all members of staff are aware of designated roles, responsibilities and the actions that must be taken in the event of a fire emergency to preserve life and prevent injury.

The premise provides healthcare services for service users with a range of mental health and learning disabilities with administrative support, it is occupied:

1. 24 hours per day or
2. Monday to Friday 7.00am to 6.00pm

The fire safety prevention and precautionary measures within the premise comprise an automatic fire alarm system installed throughout the internal accommodation, circulation escape routes and restricted areas for the detection of fire and provide early warning to occupants of a fire. Fire doors, portable fire-fighting appliances and safety signs are provided to restrict the spread of a fire, provide the opportunity for occupants to extinguish the fire (if it is considered safe to do so), and move away from the fire to a place of safety determined by the person with authoritative control of the premise at the time of the fire.

All members of staff working in the premise are responsible for ensuring they fully understand their individual responsibilities and comply with any reasonable instruction made of them by management in the event of an emergency

2. Fire Alarm Systems

The automatic fire alarm system installed within the workplace will, upon detection of a fire, ring with a **Continual Tone** within the area where the fire has originated or alarm trigger point has activated.

In larger premises the fire alarm system will be separated into individual fire zones providing 1 hour fire protection; upon alarm activation an adjacent zone will ring with an **Intermittent Tone**. Staff should prepare to evacuate these areas only if the alarm tone changes to a Continual Tone.

3. Responsibilities and Roles

a. **Manager**

The Workplace Manager, (or delegated member of staff), with authoritative control of activities within the work area is responsible for the control and co-ordination of any evacuation of the workplace as a result of a fire. Suitable and sufficient quantities of staff will be appointed to assist the Manager to manage fire safety and assist all occupants to evacuate the workplace to a designated place of safety away from a fire.

b. Staff

Designated members of staff will be appointed to undertake the role of Fire Safety Marshal/Fire Warden, who will ensure all fire safety precautionary and control measures within the workplace are being implemented to ensure the safety and welfare of occupants.

c. Service Users and Visitors

The senior member of staff on duty is to ensure all persons within the workplace are provided with assistance to evacuate the premise. Where it is considered that an individual's needs are such that they would require the physical assistance of members of staff to evacuate the premise a Personal Emergency Evacuation Plan (PEEP) is to be undertaken identifying specific requirements. This information may be contained within a Service User's Care Plan, if considered appropriate.

d. Fire Marshal/Fire Warden

Members of staff appointed as Fire Marshal/Fire Warden have the responsibility for monitoring fire safety precautions and equipment in the workplace whilst they are on duty. They will respond to the activation of the fire alarm with a view to identifying the source of the alarm activation by checking the Fire Alarm Indicator Panel and assist in the evacuation of all occupants from the workplace to a place of safety, where considered necessary.

Fire Marshals/Fire Wardens are to work closely together to co-ordinate any emergency actions as directed by the senior member of staff on duty.

4. Fire Alarm

The workplace has an automatic fire alarm, installed with call point, situated in circulation corridors with a combination of smoke and heat detectors in sleeping, (where provided), and office accommodation, kitchens, plant rooms and other high-hazard rooms.

The fire alarm indicator panel is located: _____

When the fire alarm is activated in your area it will ring with a **Continual Tone**.

5. Emergency Fire Action

The emergency fire actions should be undertaken in the event of a fire emergency.

➤ Action to be taken upon discovering a fire:

- 1. Raise the alarm** - nearest call point
- 2. Call Fire Service** - 2222 (via the 24-hour Switchboard Operator)
- 3. Attack the fire** - use extinguisher (only if trained and safe to do so)

➤ **Action on hearing the alarm - Continual Tone**

4. **Leave the building by the nearest exit**
5. **Report to the designated assembly area**

➤ **Action on hearing the alarm - Intermittent Tone:**

6. **Do not evacuate unless informed to do so**
7. **Make preparation to evacuate in the event the alarm tone changes to a Continual Tone**

6. **Fire Evacuation Procedural Arrangements**

When a fire alarm is activated the following procedural arrangements should be undertaken by appointed members of staff:

Fire Marshal/Fire Warden

- ◆ Call 2222 as soon as possible informing the 24-hour Switchboard Operator that a fire alarm has activated and you are proceeding to undertake an initial investigation to ascertain whether a fire has occurred. The 24-hour Switchboard Operator should be informed that if confirmation has not been received that a fire has occurred within **2½ minutes** then the Fire and Rescue Service should be called for assistance.
- ◆ Check the Fire Alarm Indicator Panel. Observe which detector/call point has activated and proceed as quickly as possible to the area collecting a Water or CO² fire extinguisher en route for use to extinguish the fire, if required, directing occupants to the fire assembly area.
- ◆ On initial investigation, if a fire is discovered and an evacuation required this should be undertaken as a priority. If possible, other members of staff should be instructed to report the fire to the 24-hour Switchboard Operator and request assistance from the Fire and Rescue Service informing them of the action being undertaken.
- ◆ Close the compartment door and contain any fire, or remnants of a fire, and proceed to the designated assembly area.
- ◆ Liaise with the Fire and Rescue Service and obtain any device(s) required to aid in the evacuation of occupants, (e.g. wheelchairs), and proceed to the location of the fire alarm.

7. Key escape routes, (how access can be gained, where they lead, how they are protected from fire)

The primary emergency escape route is along the main circulation corridor as depicted by the green and white fire safety directional signs; these will lead to a final exit door outside the building to a place of safety away from the building.

The circulation corridors are protected by fire doors which should not be wedged open as this will allow smoke to compromise the escape route.

8. Arrangements for the safe evacuation of persons identified as being especially at risk from fire

Persons with **Visual**, **Hearing** or **Mobility** restrictions are to be provided with assistance, if necessary, to move to the designated place of safety. Mobility-restricted persons may be required to be moved to the designated Refuge Assembly Point and wait for all independent persons to be evacuated prior to being assisted by a designated member of staff. The Fire and Rescue Service is to be informed of any persons located within Refuge Areas.

9. Fire/Refuge Assembly Area

Fire Assembly Area:	_____
Refuge Area:	_____

10. Keys

It is the responsibility of all staff on duty to be in possession of, or have immediate access to, a pass key to gain access to all internal rooms in the event of fire.

Keys must be signed out at the start of the shift and on completion should be returned to the Pass Key Safe and signed to indicate returned.

11. Firefighting equipment provided, (locations and details)

Water and CO ² Portable Fire Extinguishers are located:

12. Additional Comments/Details

A large, empty rectangular box with a thin black border, intended for providing additional comments or details. The box is centered on the page and occupies most of the vertical space below the section header.

Personal Emergency Evacuation Plan, (PEEP)

Employers and employees have a duty of care to protect the health and safety of staff, visitors and other relevant persons from risks associated with fire and other emergencies. Where it is considered necessary to evacuate a workplace/premise, persons with responsibility for workplace activities are required to ensure they and other staff are fully aware of the evacuation procedures in the buildings in which they work and provide assistance to occupants to evacuate a building promptly during an emergency.

Where it is considered necessary to provide assistance to a person to aid their evacuation a suitable PEEP must be produced with the individual (where possible) to identify any special needs that may be required.

The Person and the Location	
Name of Individual	<input type="text"/>
Staff <input type="checkbox"/> Service user <input type="checkbox"/>	Employee/Enrolment Number <input type="text"/>
Contact Details	Telephone Number <input type="text"/>
	Mobile Number <input type="text"/>
	Email Address <input type="text"/>
Location	Building <input type="text"/>
	Floor <input type="text"/>
	Room <input type="text"/>
Line Manager	<input type="text"/>
Contact Details	Telephon <input type="text"/>
	Email Address <input type="text"/>
Nature of Disability	<input type="text"/>
If disability is temporary, give date for review of PEEP	<input type="text"/>

Awareness of Alarm and Evacuation Procedure

State how the individual disabled person is to be made aware of the fire alarm actuation and evacuation procedure to be followed, (e.g. existing alarm, visual alarm etc).

Arrangement for Evacuation

Give details of the procedure to be followed, giving a step-by-step account of the procedure to be followed:

on hearing the alarm (disabled person)

on hearing the alarm (assistance)

Designated Assistance

Give details of the names and contact details of those who have been designated to assist.

Name Contact Details

Location in Building

Name Contact Details

Location in Building

Name Contact Details

Location in Building

Methods of Assistance

Give details of the method of assistance that is to be employed, (e.g. transfer to and evacuation using evacuation chair, escorting down stairs, guidance etc).

Equipment Provided

Give details of the equipment to be provided, (including evac-chairs and any communications equipment).

Safe Routes

Give details of the routes of evacuation to be used including any secondary routes and assembly points, (attach plans if necessary).

Places of Safety

Give details of the arrangements for ensuring the comfort and wellbeing of disabled persons if having to remain at the assembly point/place of safety for a considerable period of time.

Personal Emergency Evacuation Plan completed by:

Name:

Appointment:

Signature:

Date