

Document Title	Fire Policy			
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This policy supersedes the following documents which must now be destroyed

Reference Number	Title
CNTW(O)41 – V04.3	Fire Policy

Fire Policy

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Statement

Fire safety is everybody's concern. All Trust and NTW Solutions Limited employees have responsibility and accountability in protecting the Trust's patients, visitors, their colleagues themselves and Trust facilities from the hazards associated with fire and smoke. The Trust is committed to ensuring compliance with fire safety legislation and that all required standards will be met.

In our roles as Chief Executive and Executive Director of Finance, we accept our responsibility and ask you to do the same. Please help us to make our hospitals, homes and service centres a place where fire safety is maintained at all times.

1 Introduction

- 1.1 A fire within any of Cumbria Northumberland, Tyne and Wear NHS Foundation Trust (the Trust) properties has the potential to pose a significant threat to the personal safety of our patients, staff and visitors. It also can affect our business continuity.
- 1.2 The Board of Directors is committed to the effective management of Fire Safety and recognises its Statutory duties under The Regulatory Reform (Fire Safety) Order 2005; The Health & Safety at Work etc Act 1974; The Management of Health and Safety at Work Regulations 1999 and the requirements of HTM 05 Firecode with regard to the Management of Fire Safety in Healthcare.
- 1.3 The guiding principles of the above documents are that a strategy for the avoidance of fire by rapid detection, physical containment by well-designed & maintained buildings & control by well documented, reliable and practiced procedures, will all be the basis on which this Trust fire policy will be based.
- 1.4 This strategy requires the highest level of management commitment and professional competence and a commitment by all employees to support and practice the principles contained within this policy.
- 1.5 The Trust will ensure clearly defined managerial responsibility for fire safety in order to comply with the legislative framework that is contained in the above documents.

2 Scope

- 2.1 This policy and any procedures will apply to all premises and departments within the Trust and all premises leased or used by the Trust and its employees.
- 2.2 This policy and its procedures will apply to all persons employed by the Trust, the wider CNTW Group and any external agencies working on behalf of the Trust within Trust premises.
- 2.3 This policy forms part of a framework, which comprises the following elements:

3 Definitions

Compartment: Part of a building (which may contain one or more rooms, spaces or storeys and includes, where relevant, the space above the top storey of the compartment) constructed so as to prevent the spread of fire to or from another part of the same building.

Hazard: A situation that can give rise to a fire.

Means of escape: Safe routes provided for people to travel from any point in a building to an unenclosed safe area beyond the premises including fire safety measures to maintain those routes.

Progressive Horizontal Evacuation: A method of evacuation in a controlled sequence, with those parts of the building at greater risk being evacuated first.

Responsible Person: Under the Regulatory Reform (Fire Safety) Order 2005, every workplace within the Trust must have a responsible person; this is normally the person in charge of a particular area. This person may also be a nominated deputy or someone temporarily in charge and the person the fire service and Trust Fire Safety Advisors will need to speak to with issues regarding fire safety. Normally a ward manager, team leader, department head etc. will assume this role.

Risk: The potential for a fire to occur (likelihood) and cause death or injury (consequence).

Risk assessment: a process used to identify fire hazards and people at risk and to remove or reduce the risk of those hazards causing harm to as low as is reasonably practicable.

4 Responsibilities

4.1 Chief Executive

4.1.1 The Chief Executive assumes all responsibility for fire safety within the Trust. It will also be the responsibility of the Chief Executive to appoint a Board Director at board level who will be nominated to have responsibility for fire safety matters. The nominated Board Director is the Executive Director of Finance and Deputy Chief Executive.

4.1.2 It will be the responsibility of the Chief Executive together with the Board Director to ensure that agreed programmes of investment in fire precautions are properly accounted for in the Trust's Annual Business Plan.

4.2 Board Director (Fire) – Executive Director of Finance and Deputy Chief Executive

4.2.1 The Board Director with designated responsibility for fire is the Finance Director and Deputy Chief Executive. This role is responsible for the appointment and accountability of the Fire Safety Manager and Fire Safety Advisors and also has overall responsibility for the coordination of all activities in relation to fire safety.

4.2.2 The principle fire duties of the Director are:

- To appoint a Fire Safety Manager.
- To ensure the highest standards in relation to fire safety standards within available resources are maintained and that each area or premises has a fire procedure.
- In consultation with the Fire Safety Manager, to consider the advice of the Fire Safety Advisor and implement the requirements of all statutory provisions or codes of practice via the contract in place with NTW Solutions Limited.

- To ensure that an annual report is presented to the Board of Directors detailing the current status of fire safety within the Trust.
- Responsible for ensuring procedures are in place to enable the control and coordination of major fire incidents.

4.3 Fire Safety Manager (Appointed by NTW Solutions under the contract with the Trust, this role to fulfilled by the Head of Estates - NTW Solutions)

4.3.1 The Fire Safety Manager shall directly liaise with the Board Director (Fire) on fire related issues.

4.3.2 The Fire Safety Manager should be of sufficient seniority within the organisation and proficiency to enable them to carry out the whole range of their duties effectively. The Head of Estates will undertake this role.

4.3.3 The Fire Safety Manager is responsible for:

- Ensuring the Fire Safety Policy is suitable and sufficient and up to date.
- Ensuring in conjunction with the Fire Safety Advisor that the fire-training regime is maintained, and that fire drills and records of attendance are maintained.
- Ensuring that sufficient Responsible Persons as required by the Regulatory Reform (Fire Safety) Order 2005 (RRO) are in place.
- Attend major fire drills or nominate a deputy.
- Ensuring that the Trust's fire strategy is sufficient to ensure the coordination and direction of staff actions during any serious fire incident in accordance with the Fire Evacuation procedure.
- Ensuring that the reporting of fire incidents and false alarms are reported and correctly recorded, together with any analysis of trends and patterns.
- Ensuring that suitable and adequate fire risk assessments are carried out for all areas.
- The Fire Safety Manager should have at least one appointed deputy to ensure that a responsible person is available to assume the relevant duties of their post in their absence. This person will be the Senior Fire Safety Advisor.

4.4 Fire Safety Advisors

4.4.1 The Trust has a statutory responsibility as well as other responsibilities towards fire safety, and as a means of fulfilling these obligations the Trust will employ a small team of competent Fire Safety Advisors. The Fire Safety Advisors will be responsible for advising management on technical fire matters, monitoring the state of fire precautions and for staff training programmes and will:

- Assist ward and departmental managers in undertaking suitable & adequate fire risk assessments, also refer to CNTW(O)33 - Risk Management Policy
- Advise and assist management in the implementation and application of the provisions of legislation, Firecode and other appropriate guidance in respect of fire safety.
- On an ongoing basis following inspections produce a review of the Trust building stock recommending prioritisation action in respect of fire safety improvements.
- Liaise with the Estates Department and others in the identification and assessment of fire risks in Trust premises.
- Liaise with the Estates Department, Planning Teams, local Building Control Departments or appropriate alternatives and Fire Authorities in the specification of fire precautions in new and existing premises.
- Prepare and implement training programmes for all staff employed in the Trust including contracted staff and volunteers.
- Assist local managers in organising and running fire drills. Act as an observer and to give advice on any remedial action required, to the evacuation plan.
- Advise on the appropriateness, location and deployment of all first aid fire fighting equipment, signs and notices relating to fire action.
- Support local management in complying with relevant fire legislation, recording of fire incidents and training.
- Maintain accurate records of all fire incidents, and carry out investigations into the cause of the fire via the Trust Incident Procedure within CNTW(O)05 – Incident Policy. To report these to NHS Estates within the stated timescales.
- In the event of serious concerns report to the Board Director (Fire)

4.5 **Ward and Departmental Manager and Team Leads**

4.5.1 Fire safety is a line management responsibility and irrespective of role or banding, managers are accountable for fire safety in their own area of responsibility in accordance with CNTW(O)20 - Health and Safety Policy

4.5.2 Managers and Team Leads have a responsibility for ensuring fire safety is practised within their area of responsibility, duties include:

- With the assistance of the Fire Safety Advisor (FSA), undertake a Fire Risk Assessment and ensure these are kept up to date and are communicated throughout the ward or department.
- Ensuring that staff are trained in accordance with the Trust Policy, this includes attendance at local induction, statutory & mandatory and where

necessary local training sessions.

- Ensuring that all potential fire hazards or malpractices (blocking fire doors, wedging fire doors open, removing waste etc) are dealt with and reported to the Fire Safety Manager and or local Fire Safety Advisors.
- Ensuring that the evacuation plan for the department or area is in place and current.
- Ensure that there are no undue risks associated with patient's equipment or bedding introduced into Trust premises. When in doubt seek advice from the local Fire Safety Advisors.
- Ensure that Personal Emergency Evacuation Plans (PEEP's) are developed and kept in one place for those staff or patients who need them. Ensure that the PEEP is made available to all staff who may be involved in that person's evacuation.

4.6 Responsibilities of All Staff

4.6.1 Fire safety is everybody's responsibility. It is the duty of every employee to report to their Supervisor or line manager or the Fire Safety Manager any instances where agreed fire safety procedures are not being implemented or are being abused and to report any fire safety concerns.

4.6.2 All employees are required to attend and participate in general fire safety training and fire drills and where necessary shall receive both basic instruction in fire safety and fire training appropriate to their own workplace.

4.6.3 In the event of an actual or suspected fire situation all staff are expected to undertake the following:

- Raise the alarm
- Follow the requirements of the local fire action notice
- Follow instructions from the person in charge

4.7 Estates Department (NTW Solutions)

4.7.1 The Estates Department will utilise locally developed procedures for maintenance of all fire related systems (fire alarms and detection, emergency lights, fire doors, fire-fighting equipment) and for controlling how hot work processes are carried out.

4.7.2 They must consult with those involved with the planning of building projects, the Trust Fire Safety Advisor and the Fire & Rescue Service regarding proposals for new premises, upgrades of existing building and/or equipment etc.

4.7.3 A system of contractor management exists in the Estates Department in order to control on site activities that may present a risk of fire.

4.8 Major Construction or Refurbishment Projects

- 4.8.1 The Fire Safety Manager and Advisors will be consulted on all matters related to both passive and active fire safety measures being undertaken within the Trust to ensure that the continuity of the fire strategy is maintained.
- 4.8.2 Consultation will include consideration of the design of new buildings particularly with regard to:
- The concept of progressive horizontal evacuation
 - Ensuring that adequate fire protection is included in the design and structural work to current Health Technical Memorandums (HTM's), British Standards and Building Regulations
- 4.8.3 The consultation should also include the active fire safety systems such as fire alarm, detection, suppression, firefighting equipment and emergency lighting.

5 Operational Framework

- 5.1 This document forms part of a framework, which comprises the following elements:

Trust Fire Policy with Practice Guidance Notes (PGN's)

- Outlines the overall responsibilities of the organisation, details responsibilities of individuals, define outline operational duties and record keeping requirements.

Estates Operational Procedures

- Details the operational criteria that must be achieved for all systems identified in the Risk Assessment. Details the specific maintenance criteria that must be achieved to minimise the risk as identified in the Health Technical Memorandums (HTM's) and any Risk Assessment.

Risk Assessments

- A fire risk assessment carried out to identify and assess the risk of fire from work and clinical care activities and other sources within the Trust and identification of any remedial or precautionary measures that need to be undertaken. The risk assessments will normally be carried out by the Responsible Person with the support of the Fire Safety Advisor. Additionally, risk assessments may need to be carried out following major changes to building layout, installation of new equipment, the emergence of a new risk etc.

Fire Precautions – Log Books (CNTW Format)

- These will record the detail of any maintenance work; inspections etc on the fire alarm, extinguishing equipment or other protection systems and

also include details of any staff training, etc. Departmental managers etc are responsible for maintaining the log books and ensuring details are filled in and the log books are available for inspection.

6 Statutory Obligations

- 6.1 The applicable legislation and associated documents which the Trust needs to follow including the RRO, Firecode, British Standards, Codes of Practice, etc. are to be used as reference and compliance documents and must be followed, the key documents are listed below:

Principal Legislation

- The Regulatory Reform (Fire Safety Order 2005 (RRO) The Health and Safety At Work etc Act 1974
- The Building Act 1984 together with the buildings Regulations (latest editions)
- The Management of Health and Safety at Work Regulations 1999
- The Dangerous Substances and Explosive Atmospheres Regulations 2002

Principal Guidance

- Firecode – Fire Safety in the NHS – HTM 05
- Health and Safety Executive Approved Codes of Practice and Guidance Documents
- Various BS and European Standards

- 6.2 The Trust as far as is reasonably practicable will follow the guidance contained in the Firecode series of documents and will include such items as furniture and fittings, fire alarms, emergency lighting, fire fighting equipment, access for fire fighting appliances.

7 Fire Procedure Overview

7.1 Evacuation Procedures

- 7.1.1 In order to ensure that all fire or false alarm incidents are controlled and managed dealt with, it is important that all staff understand their local Fire Evacuation Procedure; this includes those with specialist duties or tasks that are an integral part of the procedure.
- 7.1.2 Different buildings will require different evacuation procedures and these need to be reflected in the Fire Risk Assessment and should be clearly communicated to all staff who either work in that building or who may be involved in assisting with an evacuation.
- 7.1.3 Any ongoing changes or local amendments to this procedure which may involve additional tasks in the overall evacuation scheme must be agreed in writing by the FSA prior to being implemented and need to be recorded in the fire risk assessment.

7.1.4 The evacuation procedure will form part of the Hospital Fire Action Notices which are generally located at final exits and adjacent to the fire call points.

7.2 Typical Fire Emergency Plan

7.2.1 The requirements of the fire emergency plan should include the following:

- Raising the alarm – locally
- Who to escalate the call to – normally dial 333 (see local procedure)
- The order of control with named persons where possible – who will take the lead
- Calling the fire service where this differs from the normal procedure, or where contact with the switchboard could not take place. If in doubt dial 999 and ask for the Fire Service
- Specific methods of evacuation
- Identification of assembly points, waiting spaces, or refuges if appropriate
- A suitable method of ensuring that occupants have left the building

7.3 Fire Drills

7.3.1 It is a statutory duty to carry out regular fire drills within each area of the Trust, these should be organised at a local level by the Ward / Departmental Manager (Responsible Person), where necessary in conjunction with the Fire Safety Advisor, who will give advice and arrange details with other interested bodies such as the Estates Department.

7.3.2 Where it is considered that a fire drill may cause distress to patients or be detrimental to the safe running of the building or department, the person requiring the drill should consult the Fire Safety Advisor for advice on the available options for carrying out the drill procedure by some other method.

7.3.3 In the event of a major incident the requirements of CNTW(O)08 - Integrated Emergency Management are to be followed in respect of escalation.

7.4 Fire Risk Assessments

7.4.1 The Regulatory Reform (Fire Safety) Order 2005 places on the Trust a requirement to carry out specific fire risk assessments of each building or department.

7.4.2 It is the responsibility of the Responsible Person or person who has control of premises as defined by the Regulatory Reform (Fire Safety) Order 2005 to instigate the specific fire risk assessment, or request assistance via the Fire Safety Manager or his Fire Safety Advisors. The Responsible person or Person who has control of the premises within Trust Premises will normally be the department head / manager.

7.4.3 The fire risk assessment should be reviewed as directed by the above Regulatory Reform Order; refer to FP-PGN-03 and CNTW(O)33 - Risk Management Policy

7.5 Fire Reporting and Lessons Learnt

7.5.1 The central incident recording system is to be utilised for the recording of fire incidents including fires, false alarms and near misses. Incidents, including near misses may highlight areas where improvements can be made – these “lessons learnt” will be evaluated by the fire officers and brought to the attention of staff during fire training sessions. Staff can report back to any of the fire officers or Fire Safety Manager on any aspects of fire safety where lessons can be learnt, the Central Alert System (CAS) system may then be utilised as a way of disseminating safety information if deemed appropriate – see Trust Policy CNTW(O)17 – Central Alert System.

8 Fire Training – Also See Appendix B

8.1 Fire training is a legal requirement and must be carried out at induction both Trust and local, at other relevant times such as moving location and then on a periodic basis. The following sections outline how this training needs to be achieved.

8.2 Trust Induction

8.2 All new members of staff will receive fire training at Trust Induction.

8.3 Local Workplace Induction Training (First shift)

8.3.1 Every new member of staff must be given basic fire precaution safety instructions relating to their own place of work by their head of department, line manager or Supervisor during their first days of work (this includes bank or agency staff) all staff should receive basic instruction in fire safety matters when being introduced to their work area.

8.3.2 Staff should be made aware of particular risks, the positioning of fire procedure notices, fire alarms, fire exit routes fire fighting equipment, what their role in the event of a fire/fire alarm would be and location of fire assembly points. This information should also be available from a fire plan displayed in the department.

8.3.3 Where necessary, staff must also be given suited keys in order to open locked fire doors, fire extinguisher cabinets and keys to operate call points.

8.4 Annual Fire Safety Training

8.4.1 All staff should receive fire safety instruction organised by departmental head / ward manager on an annual basis. This training should consist of:

- Identifying Fire Hazards
- The action to take in the event of a fire.
- Use of fire fighting equipment
- Evacuation procedures

8.4.2 Managers are responsible for ensuring staff, under their management; attend fire safety training sessions at least once a year. For office-based staff only – fire training can be by the Trust approved e-learning on a bi-annual basis alternating with face to face training – therefore still maintaining an annual training pattern.

8.4.3 Fire training can be delivered in a number of ways:

- Attendance at a Trust Induction session for new employees
- Attendance at Statutory Mandatory training sessions
- Local workplace training delivered by a Trust Fire Officer - this can be classed as meeting the Statutory training if all general areas are covered by the Fire Safety Advisor
- Trust approved e-learning (suitable only for those staff not likely to be involved in patient evacuation and face to face training is still required every other year).

8.5 Local Workplace Training

8.5.1 As part of the risk assessment process, Line managers and departmental heads need to assess the level training required within their departments. Particular consideration should be given to the safe evacuation of clients in the event of a fire, taking into consideration staffing levels and the challenges faced with a specific client group.

9 Smoking

9.1 Managers of staff and those with a responsibility for patient care have a duty to prohibit smoking on Trust premises so that it does not present any undue fire risk to the organisation and to follow the requirements of Trust policy, CNTW(O)13 - Smoke Free Policy

10 Arson

10.1 Arson is the cause of one in four fires within the United Kingdom and therefore a significant risk to all health care buildings. Accidental fires are an ever-present risk but with due diligence and a high degree of prevention, their incidence can be reduced. However, arson is a difficult crime to safeguard against.

10.2 Our client group includes individuals who have deliberately caused fires in Trust premises, causing both injury and significant damage to the building fabric. Therefore, the risk associated to both the individual and others in the vicinity; need to be managed by those staff with responsibility for patient care, led by the Responsible Person for the area and the risk escalated as necessary.

10.3 Department managers should be aware of the threat to the building and infrastructure and as such should undertake a full arson risk assessment. The assessment should be updated at regular intervals; specialist advice is available from the Fire Safety Advisor.

11 Reporting Mechanisms

11.1 The Fire Safety Manager and the Senior Fire Safety Advisor shall report to the Health, Safety and Security Group on all relevant fire issues on a quarterly

basis.

- 11.2 The group will review a range of fire precaution matters. These might include advising on the implementation of any new fire precaution legislation / regulations / guidance, Fire Prevention Standards, content and availability of fire training, fire action notices, response planning for serious incidents.
- 11.3 The Estates Fire Safety Group meets monthly and standard agenda items includes, incident statistics, audit reports, risk assessment and ward/community and departmental issues. Notes are kept and used internally within the Estates Department.

12 Disabled Persons

- 12.1 Disabled persons should not only be able to enter and use Trust premises safely and conveniently but should also be able to leave safely in the event of an emergency. The needs of patients and visitors are not necessarily known, and often their only knowledge of the building is the route by which they entered. It is the role of Managers to consider disabled persons when planning means of escape in the event of an emergency evacuation.
- 12.2 Specific measures to meet the needs of disabled people may include alterations to alarm systems to include audio visual alarms to alert patients and visitors who are deaf, and the provision of special aids and equipment such as “evacuation chairs” to move people with impaired mobility downstairs.
- 12.3 In the event of a fire, visually impaired people should be given verbal instructions to advise them of the evacuation route and any other necessary information (e.g. not to use lifts). If possible, visually impaired people should be escorted out by staff, who should let them hold onto their arms as they exit.
- 12.4 Staff should alert people with a hearing disability by touch and eye contact. Clearly state the problem using gestures and pointing and be prepared to write a brief note if the person does not understand. Offer visual instructions to advise the safest evacuation route by pointing towards exits.
- 12.5 People with impaired mobility should be evacuated in beds or wheelchairs if possible. Manual handling techniques should only be used to evacuate patients in emergency situations and if they are in immediate danger. If necessary, and where they are available „evacuation chairs” can be used to move patients downstairs.

13 Dissemination

- 13.1 The policy and procedure will be made available on the Trust intranet. The Fire Action Notices will be displayed throughout the Trust.
- 13.2 The training of all employees in the Fire Safety Policy and Fire Evacuation Procedure will take place during mandatory fire training. The Trust Fire Safety Advisor will conduct training in the application of the Fire Evacuation

Procedure and the duties of the individuals responsible for the corporate and departmental response.

- 13.3 It is the responsibility of all managers to develop department specific fire procedures, which will complement the Trust's Fire Evacuation Procedure and thereafter, apply them to local conditions. These procedures will be forwarded to the Trust Fire Safety Advisor for comment prior to implementation.
- 13.4 It is the responsibility of all managers and staff to attend regular fire training, which will reinforce the Trust's Fire Policies and Procedures.

14 Identification of Stakeholders

- 14.1 This is an existing policy with only minor changes, therefore, in line with CNTW(O)01 – Development and Management of Procedural Documents, no consultation was necessary.

- North Locality Care Group
- Central Locality Care Group
- South Locality Care Group
- North Cumbria Locality Care Group
- Corporate Decision Team
- Business Delivery Group
- Safer Care Group
- Communications, Finance, IM&T
- Commissioning and Quality Assurance
- Workforce and Organisational Development
- NTW Solutions
- Local Negotiating Committee
- Medical Directorate
- Staff Side
- Internal Audit
- Health Safety Security and Resilience

15 Monitoring and Audit – (See Appendix C)

- 15.1 A nominated investigation officer appointed by the Fire Safety Manager will review the adherence to this Fire Safety Policy and Fire Evacuation Procedure following an incident of fire.
- 15.2 Each Department is subject to a specific fire risk assessment where the evacuation policy is considered; alterations and amendments may be a requirement of the stated outcomes of the risk assessment. This will be reviewed annually by a fire safety audit carried out by the Fire Safety Advisor.
- 15.3 The Trust will react to advice and comments made by specified regulatory bodies following an incident and the Fire Evacuation Procedure being instigated, or by general comments made following statutory safety inspections.
- 15.4 It will be the duty of the Fire Safety Manager in consultation with the Fire Safety Advisors to regularly review the fire strategy of the Trust and to make recommendation via the Director of Finance or via the Health, Safety and

Security Group where fire safety matters are brought.

16 Equality and Diversity assessment

- 16.1 In conjunction with the Trust's Equality and Diversity Officer this policy has undergone an Equality and Diversity Impact Assessment which has taken into account all human rights in relation to disability, ethnicity, age and gender. The Trust undertakes to improve the working experience of staff and to ensure everyone is treated in a fair and consistent manner.

17 Implementation

- 17.1 It is envisaged that this policy will be embedded across the Trust by February 2021.
- 17.2 This will be monitored by the Trust Health Safety and Security Group during the review process. If at any stage there is an indication that the target date cannot be met, then the Trust Health Safety and Security Group will consider the implementation of an action plan.

18 Fair Blame

- 18.1 The Trust is committed to developing an open learning culture. It has endorsed the view that, wherever possible, disciplinary action will not be taken against members of staff who report near misses and adverse incidents, although there may be clearly defined occasions where disciplinary action will be taken.

19 Associated Documentation

- CNTW(O)05 – Incident Reporting
- CNTW(O)08 - Integrated Emergency Management CNTW(O)13 - Trust wide Smoke Free Policy
- CNTW(O)17 – Central Alert System (CAS) CNTW(O)20 - Health and Safety Policy
- CNTW(O)33 - Risk Management Policy
- Local Fire Procedures
- Fire Practice Guidance Notes listed in the contents page

Appendix A

Equality Analysis Screening Toolkit			
Names of Individuals involved in Review	Date of Initial Screening	Review Date	Service Area / Locality
Matthew Lessells	Feb 2021	Feb 2024	Trust-wide
Policy to be analysed		Is this policy new or existing?	
Fire Policy – V05		Existing	
What are the intended outcomes of this work? Include outline of objectives and function aims			
Fire safety is a requirement under legislation. The Trust is required to have a policy in place to address the complexities of fire safety management and set out strategies including identification of responsibilities and standards to which the organisation must comply with.			
Who will be affected? e.g. staff, service users, carers, wider public etc			
A fire within any of Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (the Trust) properties has the potential to pose a significant threat to the personal safety of our patients, staff and visitors.			
Protected Characteristics under the Equality Act 2010. The following characteristics have protection under the Act and therefore require further analysis of the potential impact that the policy may have upon them			
Disability	The adoption of the latest standards in fire safety will recognise the need to build in suitable facilities and systems to be able to safely evacuate disabled people.		
Sex	N/A		
Race	Fire evacuation signage meets European standards and is pictorial, this is useful where English is a second language.		
Age	The adoption of the latest standards in fire safety will recognise the need to build in suitable facilities and systems to be able to safely evacuate older people.		
Gender reassignment (including transgender)	N/A		
Sexual orientation.	N/A		
Religion or belief	N/A		
Marriage and Civil Partnership	N/A		
Pregnancy and maternity	N/A		
Carers	N/A		
Other identified groups	N/A		

How have you engaged stakeholders in gathering evidence or testing the evidence available?	
Through Trust wide consultation process	
How have you engaged stakeholders in testing the policy or programme proposals?	
Through Trust wide policy process	
For each engagement activity, please state who was involved, how and when they were engaged, and the key outputs:	
Through Trust wide policy process	
Summary of Analysis Considering the evidence and engagement activity you listed above, please summarise the impact of your work. Consider whether the evidence shows potential for differential impact, if so state whether adverse or positive and for which groups. How you will mitigate any negative impacts. How you will include certain protected groups in services or expand their participation in public life.	
This Policy adopts the latest standards in fire safety and recognises the need to build in suitable facilities and systems to be able to safely evacuate older and disabled people, signage meets European standards and is pictorial which is useful for when English is a second language.	
Now consider and detail below how the proposals impact on elimination of discrimination, harassment and victimisation, advance the equality of opportunity and promote good relations between groups. Where there is evidence, address each protected characteristic	
Eliminate discrimination, harassment and victimisation	By way of equality impact analysis.
Advance equality of opportunity	
Promote good relations between groups	
What is the overall impact?	
Addressing the impact on equalities	
From the outcome of this Screening, have negative impacts been identified for any protected characteristics as defined by the Equality Act 2010?	
If yes, has a Full Impact Assessment been recommended? If not, why not?	
Manager's signature:	Matthew Lessells
	Date: Jan 2021

Communication and Training Check list for policies-

Key Questions for the accountable committees designing, reviewing or agreeing a new Trust policy

Is this a new policy with new training requirements or a change to an existing policy?	Existing Policy – training needs remain the same
If it is a change to an existing policy are there changes to the existing model of training delivery? If yes specify below.	Existing Policy – training needs remain the same
<p>Are the awareness/training needs required to deliver the changes by law, national or local standards or best practice?</p> <p>Please give specific evidence that identifies the training need, e.g. National Guidance, CQC, NHS Resolutions etc.</p> <p>Please identify the risks if training does not occur</p>	<p>Requirements are necessary by law and NHS national standards (Firecode)</p> <p>If training does not occur then staff, patients and visitors may be at risk of harm in the event that they do not know what action to take in the event of a fire.</p> <p>Risk to Trust assets.</p>
Please specify which staff groups need to undertake this awareness/training. Please be specific. It may well be the case that certain groups will require different levels e.g. staff group A requires awareness and staff group B requires training.	All staff require fire training. New staff at Trust induction, staff new to an area should receive appropriate local induction, all staff require annual fire training. Depending on ward / departmental need additional local training may be required.
Is there a staff group that should be prioritised for this training / awareness?	All Trust staff need to be aware of the Trust policy on fire and specifically their duties and responsibilities.
<p>Please outline how the training will be delivered. Include who will deliver it and by what method.</p> <p>The following may be useful to consider: Team brief/e bulletin of summary Management cascade Newsletter/leaflets/payslip attachment Focus groups for those concerned Local Induction Training Awareness sessions for those affected by the new policy Local demonstrations of techniques/equipment with reference documentation Staff Handbook Summary for easy reference Taught Session E Learning</p>	<p>For the majority of staff, attendance at fire training sessions will suffice. E Learning is suitable for office based staff (not based on a ward) alternating with face to face training. Fire training will be delivered by one of the Fire Safety Advisors.</p> <p>Staff with ward / departmental management responsibilities need to be aware of their specific responsibilities for fire; this can be achieved by reading a copy of the policy and associated PGN's and through the RRO risk assessment process that has been completed.</p>
Please identify a link person who will liaise with the training department to arrange details for the Trust Training Prospectus, Administration needs etc.	Head of Estates and Facilities or the Senior Fire Safety Advisor



Appendix B – continued

Training Needs Analysis

Staff/Professional Group	Type of Training	Duration of Training	Frequency of Training
All	1 st day local induction training to provide: <ul style="list-style-type: none"> • Awareness • firefighting equipment • evacuation protocol • specific risks 	20 minutes	1 st shift
All	Trust induction training for new employees to provide: <ul style="list-style-type: none"> • awareness of fire alarm system • location of fire exits/fire fighting equipment • evacuation protocol • specific risks 	1 hour	Within first 2 months of employment
All	Annual attendance at statutory and mandatory training session on fire. <ul style="list-style-type: none"> • Gain a greater awareness of fire safety relevant to hospitals 	1 hour	1 yearly
Qualified and Unqualified Nursing and those with a responsibility for evacuation	Specific local training on fire safety relevant to the area of work taking into account the local risks and patient group	Site specific	1 yearly – or as determined locally based on risk
Contractors	Induction training including hot work	Site specific – typically 20 minutes	1st time on site and each occasion where hot work is required
Fire Wardens	Training for staff acting in the role of Fire Wardens	1 hour	1 yearly

Should any advice be required, please contact:- 0191 2456770 (Option 1)

Appendix C

Statement

The Trust is working towards effective clinical governance and governance systems. To demonstrate effective care delivery and compliance, policy authors are required to include how monitoring of this policy is linked to auditable standards/key performance indicators will be undertaken using this framework.

CNTW(O)41 – Fire Policy - Monitoring Framework			
Auditable Standard/Key Performance Indicators		Frequency/Method/Person Responsible	Where results and any associated action plan will be reported to, implemented and monitored; (this will usually be via the relevant governance group).
1.	The number of unwanted fire alarm signals (no specific KPI, however trends and comparison with previous periods is made)	Monthly fire report produced by the Senior Fire Advisor using statistics recorded on the IR system. This is presented on a quarterly basis showing the month by month breakdown of data.	Trust Health Safety and Security Committee
2.	Current completion of fire safety training, 90% or above is the minimum acceptable level	Operational Directors and managers are responsible for training in there area and need to monitor compliance via the dashboard – this needs to be done on a monthly basis.	Trust Health Safety and Security Committee. Directorate Q&P groups. CDT (Included in performance report)
3.	The number of recorded fires (no specific KPI, however, trends and comparison with previous periods is made)	Monthly fire report produced by the Senior Fire Advisor using statistics recorded on the IR system. This is presented on a quarterly basis showing the month by month breakdown of data.	Trust Health Safety and Security Committee

4.	Enforcement notices issued by the Fire and Rescue Service – the target is 0.	Enforcement notices	Trust Health Safety and Security Committee
5	Ensuring all areas of CNTW operated premises (owned, SLA, leased) have a named responsible person for fire safety – typically a Ward or Departmental Manager.	Annual end of FY fire report produced by Senior Fire Safety Advisor.	Trust Health Safety and Security Committee – following March.
6	Ensuring fire risk assessments are carried out in accordance with Trust Policy and associated risks are recorded and reviewed	A monthly review of the fire Risk assessment is carried out at the Estates fire safety meeting. The review confirms the current % of areas with a current FRA and highlights those areas where one is required or due. Any significant risks from assessments carried out in the preceding month are discussed and actioned as necessary. The information is recorded and prepared by the Fire Safety Advisors.	The % compliance for FRA (target 100% of occupied areas) will be reported along with any undue risks to the Trust Health Safety and Security Committee
7	Ensuring that mandatory equipment testing, examination, and maintenance is carried out and recorded.	A monthly review of fire associated maintenance activity is collated by the Operational Estates Managers and reported on at the Estates fire safety meeting. The review confirms the current % compliance and highlights any gaps. Information on any continued non completion of maintenance activities will be reported	Trust Health Safety and Security Committee – following March.

The Author(s) of each policy is required to complete this monitoring template and ensure that these results are taken to the appropriate Quality and Performance Governance Group in line with the frequency set out.