

**Policy for Cumbria Partnership Foundation Trust & North Cumbria  
University Hospital NHS Trust**

**Fire Safety Policy (Joint)**

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## Policy On A Page

### **SUMMARY & AIM**

This policy has been developed to enable the Trust to execute and embed the principles of Fire Safety Management throughout the organisation and deliver the statutory requirements as required by the Regulatory Reform (Fire Safety) Order 2005 RR (FS ) O including;

- The Trust Fire Safety Policy Statement
- The Management Structure for Effective Management of Fire Risk & Fire Prevention Measures
- Fire Risk Assessments Methodology
- Fire Emergency Plans
- Fire detection systems
- Means of escape, means of fighting fire & Evacuation Procedures

### **TARGET AUDIENCE:**

All staff including volunteers and contractors within the hospitals

### **TRAINING:**

- Mandatory attendance at Trust Corporate Induction, receiving generic Fire Awareness Training.
- Annual Evacuation drill or practical training session
- Completion of Mandatory annual fire safety refresher training NCUHT completes e-learning Workbook.
- Completion of mandatory annual fire safety refresher training CPFT complete face to face Module A & Module B Non-Clinical staff complete workbook in Red File bi-annually. Clinical staff attend both A&B annually.
- Fire Warden, Fire Response Teams, Duty Fire Officer training which is role specific

### **KEY REQUIREMENTS**

1. The Trust has a number of interconnected documents that assist with the management of Fire Safety.
2. All staff are to read this policy and familiarise themselves with their roles and responsibilities as detailed in this policy.
3. All staff must complete Trust Mandatory training and refresher courses. This may be by e-learning NCUHT or Face to Face CPFT.
4. All local managers must ensure staff receive local induction on Form FT1 when first starting work including awareness of fire emergency action plan, thereby ensuring completion of Trust mandatory training requirements have been achieved
5. Fire risk assessments must be completed by the Fire Safety Advisor, the Business or Local Manager as responsible person for the area department or ward will take ownership of the completed FRA see section 8
6. Local managers supported by Fire Advisors must also undertake audits of their respective areas
7. The Estates department or PFI service provider must ensure all works are controlled effectively and compliant with relevant regulations.

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## **1. FIRE SAFETY STRATEGY STATEMENT**

The Trust is committed to improve the management of fire risk across all aspects of the organisation – to the required level. To achieve this aim the Trust will adopt the following strategy:-

- The Trust will appoint and fully support duly authorised personnel to develop and implement the Fire Risk Management System.
- The Trust has primacy for managing fire risk at all sites in which Trust staff occupy but expects any partner organisations to cooperate and contribute fully to the implementation of and improvement to the Fire Risk Management System as required under the RRO.
- The Trust will train all staff starting with mandatory fire safety training and additional role specific training for key staff to be able to play their part in the overall management of fire risk.
- The Trust will ensure that suitable systems of control are in place.

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## 2. FIRE SAFETY POLICY STATEMENT

This Fire Safety Policy aims to minimise the incidence of fire throughout all activities provided by, or on behalf of, Cumbria Partnership Foundation Trust & North Cumbria University Hospital NHS Trust.

Where fire occurs, this policy aims to minimise the impact of such occurrence on life safety, the delivery of patient care, the environment and property.

This policy applies wherever Cumbria Partnership Foundation Trust & North Cumbria University Hospital NHS Trust owes a duty of care to service users, staff or other individuals.

### **The Trust Board will:-**

- Discharge its responsibilities as a provider of healthcare to ensure that suitable and sufficient governance arrangements are in place to manage fire-related matters;
- Provide appropriate levels of investment in the estate and personnel to facilitate the implementation of suitable fire safety precautions;
- Facilitate the development of partnership initiatives with stakeholders and other appropriate bodies in the provision of fire safety where reasonably practicable.

### **The Trust Board expects those tasked with managing aspects of fire safety to:-**

- Diligently discharge their fire safety responsibilities as befits their position;
- Have in place a clearly defined management structure for the delivery, control and monitoring of fire safety measures;
- Have in place a programme for the assessment and review of fire risks;
- Develop and implement appropriate protocols, procedures, action plans and control measures to mitigate fire risks, comply with relevant legislation and where practicable, codes of practice and guidance;
- Develop and disseminate appropriate fire emergency action plans pertinent to each department/building/area to ensure the safety of occupants, protect the delivery of service and, as far as reasonably practicable, defend the property and environment;
- Develop and implement with the trust training department a programme of appropriate fire safety training for all relevant staff.
- Develop and implement monitoring and reporting mechanisms appropriate to the management of fire safety.

### **The Joint Trust Board will monitor the implementation of this policy through:-**

- Periodic review of fire and false alarm incident reports;
- Periodic review of fire safety training records;
- Periodic review of fire service notices and communications;
- Fire safety audit reports;
- Periodic third-party fire safety audit.

Signature of Chief Executive Officer



Stephen Eames  
Date: Day Month Year

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### **3. INTRODUCTION**

- 3.1** Cumbria Partnership Foundation Trust (CPFT) & North Cumbria University Hospitals NHS Trust (NCUH), working together as Joint Trusts with shared responsibility for Fire Safety recognise, and accept, their responsibility as an employer to provide a safe and healthy working environment, for all its employees.
- 3.2** The Joint Trust also recognises, and accepts, its responsibility to ensure the health and safety of patients, visitors and all other persons while on Trust premises, and within the scope of the Regulatory Reform (Fire Safety) Order 2005 (RR(FS)O)
- 3.3** The Health and Safety at Work etc. Act 1974 requires employers to ensure, so far as reasonably practicable, the health and safety of their employees, and any other people who may be affected by their work activities.
- 3.4** The Management of Health and Safety at Work Regulations 1992 imposes specific legal duties on employers to assess risks to employees and others and to implement control measures to reduce the risks. They must also set up procedures to deal with serious or imminent danger, and provide employees with understandable information and adequate instruction and training.
- 3.5** The Regulatory Reform (Fire Safety) Order 2005 requires that the Trust will take general fire precautions and will ensure, so far as is reasonably practicable, the safety of any of its employees, and in relation to relevant persons who are not employees, take such general fire precautions as may reasonably be required in the circumstances of the case to ensure that the premises are safe.
- 3.6** The Department of Health have agreed that for patient care areas of hospitals, the guidance in the Health Technical Memorandum 05 Suite of Documents (HTM) must be used when assessing fire safety. The HTM Fire Code suite of documents is recognised as relevant guidance. Part K is used to record fire risk assessments.
- 3.7** Each and every individual that works within the Trust, whether for pay or otherwise has a duty of care in relation to Fire Safety and to assist the Trust in the implementation of this policy and its supporting procedures to provide robust fire safety management and a fire safe environment.
- 3.8** The Trust has a number of interconnected documents that assist with the management of Fire Safety. These are referenced in Section 10 Associated Documentation
- 3.9** The Fire Safety Policy Statement is signed by the Chief Executive on behalf of the Trust Board. This Fire Safety Policy Statement must be retained by the Responsible Managers with the Fire Risk Assessment in the Fire Safety Folder for each ward/department.

#### **4. PURPOSE & SCOPE**

- 4.1** The Joint Fire Safety Policy has been developed to support the implementation of a robust application of Fire Risk Management; to ensure the Trust exercises due diligence to meet the statutory requirements imposed by the relevant legislation and apply the guidance and recommendations as identified in HTM 05-01 Managing Healthcare Fire Safety.
- 4.2** The policy covers the management of fire safety by all Trust employees, on all Trust premises, and in all other locations where Trust staff are based or provide a service, inclusive of PFI Companies and appointed contractors.

#### **5. SCOPE**

To protect the health and safety of staff, patients, contractors, visitors, and the general public:-

- 5.1** To comply with legal requirements imposed by the:-
- Health & Safety at Work etc. Act 1974
  - Regulatory Reform (Fire Safety) Order 2005
  - Management of Health and Safety at Work Regulations 1992
- 5.2** To comply with the requirements of Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 in particular Regulation 12 Safe Care and Treatment and Regulation 15 Safe Premises and Equipment
- 5.3 PFI Hospitals – Private Financing Initiative**

Throughout this document references to Estates Department will mean Facilities Management Company where the site or part of the site has services delivered by or under the control of a Facilities Management Company.

#### **6. TRAINING AND SUPPORT**

The Trust has specific duties to deliver adequate fire safety training to staff. To help achieve this objective, guidance is given in HTM 05-01 This guidance should be considered the minimum standard of training that would be acceptable to fulfil the duties imposed on any healthcare provider. In order to support the Trust in delivering improvements to the way it manages staff training it is essential that face to face delivery is adopted across the whole Trust in addition to e-learning or booklets which supplement this. Additional elements of specific role related training such as Fire Warden, Fire Response Teams and Duty Fire Officer is delivered for staff working in Trust Premises. All staff irrespective of seniority must attend mandatory training especially as they are most likely to have the greatest influence in bringing about the desired change in behaviours and governance.

## 7. PROCESS FOR MONITORING COMPLIANCE

The process for monitoring compliance with the effectiveness of this policy is as follows:

Aspect being monitored	Monitoring Methodology	Reporting		
		Presented by	Committee	Frequency
What	How	Who	Where	How often
Monitor all aspects of fire safety as reported to the Fire Safety Committee	Review Reports	Fire Safety Manager	Audit & Risk Committee	Annually
Monitor and report all fire incidents and alarm activations	Review of incidents reported	Lead Fire Safety Officer	Fire Safety Committee	Quarterly
Report – All new building, alterations and changes of use are Fire Code (HTM) compliant.	Consultation with Project Managers and Fire Advisors at design stage, monitor works as required and review on completion.	Lead Fire Safety Officer	Fire Safety Committee	Quarterly
Report – Audit the arrangements for Fire Risk Management within each ward/department on a risk assessed frequency basis.	Fire Advisors to undertake the Audits and report to Fire Safety Committee.	Lead Fire Safety Officer	Fire Safety Committee	Quarterly
Report – Periodic third party audit/review of Fire Safety Arrangements	As required AE (Fire) report for Audit of Trust Fire Safety arrangements including the management of fire risk. See section 1.5	Fire Safety Manager	Fire Safety Committee	As Required
Report – All fire safety related activity in ward, department or premises	Reporting of incidents, inspections, compliance visits and review of FRA	Business Manager	Relevant Care Group Meeting	Each Meeting by Exception
Report – Statutory & Mandatory fire awareness training	Report from OLM system?	L&D	Fire Safety Committee	Annual

Wherever the above monitoring has identified deficiencies, the following must be in place:

- Action plan
- Progress of action plan monitored by the Fire Safety Committee minutes
- Risks will be considered for inclusion in the appropriate risk registers

## 8. FIRE RISK ASSESSMENTS

Fire Risk Assessments will be carried out by the Trust Fire Safety Adviser(s) in accordance with requirements of the RRO, FIRE-CODE and other relevant Guidance for NHS healthcare premises. HTM 05-03 Part K will be used to record Fire Risk Assessments.

Fire risk assessments take into account any arrangements that are, or need to be, in place to ensure the safe evacuation of any individual who may have disabilities which fall under the protected characteristics under equality and diversity legislation.

The Trust has adopted a risk based approach toward the frequency that fire risk assessments will be undertaken and reviewed. This is detailed in the table below.

Location	Frequency
1. All inpatient areas and respite homes	Detailed assessment annually
2. Day Hospitals and Premises used for outpatient appointments	Detailed assessment every two years*
3. Offices/Community Team Bases	Detailed assessment every two years*

The nominated Fire Safety Adviser will confirm on a regular basis with the Nominated Manager (Fire) of each location that no change has occurred. A review of the current fire risk assessment will be carried out where any significant change occurs. Change will be identified by Estates Department or PFI provider (major and minor alterations) and local managers (where no work has been involved) - i.e. room use change.

Completed Fire risk assessment reports will be forwarded to the relevant Trust Estates Department or Estates and Facilities Management Provider (PFI) and the appropriate Nominated Manager (Fire) for the Premises, Department or Ward which falls under their control. The risk assessment should then be held by them in their Fire Safety Management File (Red File) for each area or building.

The fire risk assessment should be embraced as a working document that is owned and controlled by those carrying the responsibility for fire safety rather than those tasked with undertaking the fire risk assessment or providing fire safety advice. Any significant risks identified from the fire risk assessments will be documented in the fire risk assessment.

The Nominated Manager (Fire) will be responsible for ensuring those risks are brought to the attention of their staff and signed off as soon as reasonably practicable and as near as possible to the timescales indicated. They should also liaise with the relevant Estates or PFI manager in order that they can be addressed and/or included in future work schedules (e.g. Estates maintenance programme). In exceptional circumstances, where there is considered to be a serious and imminent fire safety risk that endangers the health, safety or welfare of premises occupants, the Fire Safety Adviser carrying out that assessment will notify the Head of Corporate Resilience and Safety Services or fire safety Board Level Director of the significant risk directly.

## HTM 05-01 (Second Edition)

The ownership of the fire risk assessment and its findings should be vested in the person in control of the area that has been assessed. Hence, in the case of a ward, it is the ward manager or equivalent that has ownership of the fire risk assessment and its findings, albeit that there may be significant findings and actions that are outside the ward manager's control which are collated and managed centrally. The local ownership of fire safety issues ensures that the person with control over individual departments or areas of the premises can discharge the duties imposed on them by the Fire Safety Order.

**9. REFERENCES:**

*Health & Safety at Work etc. Act 1974*

<http://www.legislation.gov.uk/ukpga/1974/37/contents>

*Regulatory Reform (Fire Safety) Order 2005*

<http://www.legislation.gov.uk/uksi/2005/1541/contents/made>

*Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 15*

<http://www.legislation.gov.uk/uksi/2014/2936/contents/made>

*HTM 05-01 Managing Healthcare Fire Safety*

<https://www.gov.uk/government/publications/managing-healthcare-fire-safety>

*HTM 05-02 Guidance in Support of Functional Provisions for Healthcare Premises*

<https://www.gov.uk/government/publications/guidance-in-support-of-functional-provisions-for-healthcare-premises>

*HTM 05-03 A,B,C,D,E,F,G,H,J,K,M – Operational Provisions Manuals*

<https://www.gov.uk/government/publications/suite-of-guidance-on-fire-safety-throughout-healthcare-premises-parts-a-to-m>

*CLG Guide Means of Escape for Disabled People*

<https://www.gov.uk/government/publications/fire-safety-risk-assessment-means-of-escape-for-disabled-people>

**10. ASSOCIATED DOCUMENTATION:**

Fire Risk Assessment HTM Part K

Fire Alarm Incident Report

Fire Investigation Report

Guidance for Personal Emergency Evacuation Plan (PEEP)

CIC Procedure for PABX Managing Fire Emergency

WCH Procedure for Security Desk Managing Fire Emergency

Fire Warden Documents can be downloaded from the link below

<http://www.staffweb.cumbria.nhs.uk/cas-fire-hs-security/fire-safety.aspx>

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## **11. DUTIES (ROLES & RESPONSIBILITIES):**

### **11.1 Chief Executive Officer / Joint Trust Board Responsibilities:**

The Chief Executive Officer and the Joint Trust Board jointly have overall responsibility for the strategic and operational management of the Trust, including ensuring that Trust policies comply with all legal, statutory and good practice requirements.

The Trust has a responsibility to ensure that all staff, patients, visitors and other relevant persons are not exposed to health risks arising from work activities. The Chief Executive of the Trust has overall responsibility for all aspects of fire safety, and delegates the authority for the Management of Fire Risk to a nominated board level director and senior managers of the Trust as detailed in this policy document.

The Trust Board must seek assurance through the management structure and governance arrangements, and through whatever other suitable outside means are deemed to be necessary; that the duties imposed upon the responsible person and all legal, statutory and good practice requirements are being satisfactorily met or that suitable arrangements are in place to meet those requirements in a timely manner.

### **11.2 Executive Director of Finance:**

The Executive Director of Finance, Digital, Estates and Support Services has been appointed as Trust Board level Executive Director with delegated authority for fire safety matters on behalf of the Chief Executive. The Executive Director of Finance will appoint an Authorising Engineer (Fire) [External Specialist] and designate the Fire Safety Manager. The Director of Finance will commission an annual report of the current state of management of fire risk across the Trust by the Authorising Engineer (Fire) for the Trust Board. The Executive Director of Finance is responsible for commissioning or delegating authority to commission Professional Consultation.

### **11.3 Associate Chief Operating Officer and Associate Medical Directors**

Associate Chief Operating Officer and Associate Medical Directors must take an active role in the implementation of the Fire Safety Policy in their Care Group. Associate Chief Operating Officer and Associate Medical Directors must be supportive of their staff following procedures by being:-

- Proactive with Statutory & Mandatory staff training by ensuring all staff attend training during normal working hours
- Discuss any received Fire Reports relating to their departments as an agenda item at the individual Care Group meetings. Fire Safety Advisors may be invited to attend these meetings as and when deemed necessary by the Chair In the interests of best practice and time management
- Ensuring that systems are in place to carry out any remedial work or actions in a timely manner. Feedback periodically to Trust Board giving assurance of fire safety compliance.

#### **11.4 Head of Estates**

The Head of Estates has specific duties in respect of the management of fire risk and fire safety across the whole of the site where no other Care Group has specific local management responsibility, particularly with regard to the building and grounds development and maintenance and the way any space that is categorized as a common area is managed for fire risk, and also the maintenance and lifecycle replacement of equipment, including fire safety systems and equipment. To assist in the safe accomplishment of these duties, the Head of Estates must:-

- Ensure all proposed building development including structural alterations, change of use and change of occupancy that they are responsible for delivering, is consulted on, with the appropriate consultative body or specialist personnel (including fire advisor) at the earliest opportunity.
- Ensure the fire and smoke resisting properties of the existing building structure are maintained or reinstated following any work which might affect those properties.
- Ensure through a system of planned property maintenance, that all fire safety systems and equipment are inspected, tested, serviced and maintained in accordance with the recommendations of the appropriate standards by competent persons/organisations and that the inspection/test and maintenance records are maintained and are accessible to the enforcing authority for their inspection.
- Employ Competent Persons to carry out the installation and/or maintenance of related fire safety equipment/services.
- Ensure that all work undertaken by the Estates Department has a suitable and sufficient Risk Assessment and Method Statement (RAMS) in place and that the work is overseen and managed appropriately.
- Take responsibility for the fire safety management of the common areas of the hospital. That is, those areas where no other Care Group has local management responsibility.

#### **11.5 General Managers (GM's)**

General Managers must take an active role in the implementation of the Fire Safety Policy in their Business Unit, their role primarily being in support of BM's & HOD's as a line management function. To ensure Fire Safety is given the appropriate level of recognition and managerial support, they will:-

- Hold to account or give support where appropriate to the Business Manager/Head of Department in fulfilling their role in support of the Trusts Management of Fire Risk.
- Receive reports of any fire safety inspection, audit or evacuation drill and any report of remedial measures required to bring the standard of fire safety up to an appropriate level

#### **11.6 Business Managers (BM's) and Heads of Department (HOD's)**

Business Managers and Heads of Departments have a duty to support the Trust in the management of fire risk at both an operational and tactical level. Their position

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in the organisation makes it possible for direct intervention in operational matters taking responsibility to ensure issues are satisfactorily resolved and have a level of involvement in their department where they can directly support the operational managers and be involved in planning. To support the Trust in managing fire safety at an appropriate level, Business Managers and Heads of Departments must:-

- Take ownership of the Fire Risk Assessment (FRA) for each area they have responsibilities for
- Ensure the management issues highlighted within the FRA Action Plan are addressed as soon as reasonably practicable within the timeframe stipulated in the FRA
- Develop and update the local emergency evacuation plan in consultation with the Fire Safety Advisor
- Provide support on wards to the Sister, Ward/Department Manager in their role managing the day to day activities in a fire safe manner
- Provide feedback to the Care Group Governance Meetings covering staff evacuation training; Fire Warden Checks; fire alarm activations; Fire Risk Assessment significant findings and action plans and audits of the management of fire risk by the Fire Safety Advisors. These feedback reports should be delivered in conjunction with the Fire Advisor requested and allocated to attend these meetings.

### **11.7 Matrons**

Matrons must ensure that:-

- Ward managers and all staff within their sphere of responsibility have undertaken the statutory & Mandatory fire training
- There is a plan in place to ensure a minimum of an annual fire drill for respective wards and departments
- Ward/Department and Care Group Risk registers are reviewed and any issues or concerns escalated to the Fire Advisers and Care Group Safety & Quality Committee
- Where Fire risk assessments require actions to improve fire safety compliance, the ward managers are supported in achieving this
- Undertake regular Fire Safety and compliance checks within their sphere of responsibility
- Ensure all areas have a Fire Wardens and they are supported in maintaining high standards of fire safety

### **11.8 Manager in charge of Ward, Department or Office**

Managers in charge of a ward or department have a direct responsibility for the day to day management of that area to ensure it is managed as a fire safe environment. Within the authority of their role they will:-

- Assist in the implementation of the fire strategy and fire risk management plan
- When on duty, lead any response to a fire alarm signal and subsequent evacuation from a confirmed incident in their area
- Take responsibility for the day to day management of fire safety in their area

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- Maintain the Fire Folder in good condition in an accessible position (i.e. at the Staff Base)
  - Support the Fire Wardens in completing their checks
  - Ensure all staff; they have line management responsibility for complete Trust mandatory fire training
  - Facilitate Local Induction Training for all new and transferred staff
  - Facilitate and organise evacuation training with the Fire Wardens
  - Facilitate evacuation drills within their area of responsibility as and when directed by the Fire Safety Manager
  - Provide feedback to the Care Group Governance Meetings via the BM covering staff evacuation training; Fire Warden Checks; fire alarm activations & fire safety audits by the Fire Safety Advisors
  - Work with the Fire Advisors to develop local fire procedures (Emergency Plan) detailing the action to be taken on discovering a fire, or on hearing the fire alarm; retaining a copy in the local Fire Folder
  - Ensure workplace/process Risk Assessments are completed and where fire related hazards are identified the Fire Advisor reviews the Fire Risk Assessment
  - Ensure Personal Emergency Evacuation Plans (PEEPS) are completed for any staff working in their area that has any condition which affects the staff members' ability to respond to the fire alarm.

### **11.9 Fire Safety Manager**

The post of Fire Safety Manager is a delegated role. The Trust, through the Executive Director with Board level responsibility for Fire must formally appoint a suitable person to the role of Fire Safety Manager to be responsible for the day to day activities of fire safety within the Trust.

The Fire Safety Manager will be responsible for coordinating the management of fire safety and with the assistance of the Fire Safety Advisors will undertake the following:-

- Provide staff with an awareness of all fire safety features and their purpose
- The management of the fire safety risks particular to the organisation
- Requirements for disabled staff and patients (related to fire procedures)
- Liaison with other managers to ensure appropriate levels of management are always available to ensure decisions can be made regardless of time of day
- Advise regards compliance with legislation
- Development and implementation of the organisations fire safety policy
- Development and monitoring of an effective training program including evacuation drills
- Co-operation between other employers where two or more share the premises
- The reporting of fire incidents in accordance with current practice
- Monitoring and mitigation of unwanted fire incidents
- Liaison with enforcing authorities
- Monitoring of inspection and maintenance of fire safety systems with technical support being provided by external bodies.
- Maintain necessary arrangements for consultation with appropriate organisations for appointment to the role of Authorising Engineer (Fire).

### **11.10 Authorising Engineer (Fire) [External Specialist]**

The role of an authorised engineer is as an independent external specialist who may from time to time be engaged by the trust for a specific purpose or project. The trust may also engage the services of other appropriately qualified consultant(s) for specialist fire safety advice as deemed necessary.

### **11.11 Resilience Manager**

The Resilience Manager will liaise with the Fire Safety Manager and Fire Safety Advisors when producing emergency plans and assist with the organisation and delivery of evacuation drills.

### **11.12 Lead Fire Officer - Fire Safety Advisor**

The Lead Fire Officer will advise the Trust on technical fire matters, and will monitor the state of fire precautions within Trust premises. This will include:-

- Advising and assisting in the interpretation and application of Fire-Code, fire safety legislation, and other official guidance relevant to health care premises
- Participate in the risk assessment process in order to identify areas of concern and non-compliance
- Prepare an annual report on the current state of fire safety in all premises
- Liaise with staff in the design office, local authority building control and the fire service, in the specification of fire precautions in new and existing buildings
- Provide training on fire safety, the management of fire risk, and evacuation procedures
- Assist in preparing annual training programmes and evacuation drills
- Assist managers/heads of department to develop local fire procedures, including personal emergency evacuation plans
- Monitor the adequate provision, siting and effective maintenance of all firefighting equipment, alarm systems, fire safety signs etc.
- Manage investigations into all fire alarm activations and fire incidents and collate for reporting to the relevant Business Manager and Fire Safety Committee, the information provided on the appropriate forms

The Lead Fire Officer will coordinate visits to all wards and departments on a risk assessed priority basis, to audit the overall effectiveness of the Fire Risk Management including all aspects of fire safety, evacuation procedures, and fire risk assessments, and to discuss fire safety procedures with staff. The Lead Fire Officer has line management responsibility for the team of Fire Safety Advisors.

### **11.13 Fire Safety Officer - Advisor**

The Fire Safety Officer - Advisors will assist the Lead Fire Officer to advise the Trust on technical fire matters, and will monitor the state of fire precautions within Trust premises. This will include:-

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- Advising and assisting in the interpretation and application of Fire-Code, fire safety legislation, and other official guidance relevant to health care premises
  - Participate in the risk assessment process in order to identify areas of concern and non-compliance
  - Liaise with staff in the design office, local authority building control and the fire service, in the specification of fire precautions in new and existing buildings
  - Provide training on fire safety, the management of fire risk, and evacuation procedures
  - Assist in preparing annual training programmes and evacuation drills
  - Assist managers/heads of department to develop local fire procedures, including personal emergency evacuation plans
  - Monitor the adequate provision, siting and effective maintenance of all firefighting equipment, alarm systems, fire safety signs etc.
  - Investigate all fire alarm activations and fire incidents as directed by the Lead Fire Officer and complete the appropriate forms

The Fire Safety Advisors will visit all wards and departments on a risk assessed priority basis, to audit the overall effectiveness of the Fire Risk Management including all aspects of fire safety, evacuation procedures, and fire risk assessments, and to discuss fire safety procedures with staff.

#### **11.14 Fire Warden**

Each ward or department must appoint sufficient members of staff to act as Fire Wardens to give resilience to the post and support the workload. Fire Wardens will be required to:-

- Act as a focal point on fire safety issues for local staff
- Assist their manager in the organization of evacuation training; new starter local induction and support the local fire safety regime
- Raise issues regarding local area fire safety with line management
- Support line managers on fire safety issues
- Carry out a monthly audit within their ward/department; record the findings in the fire folder and by exception reporting, report to their line manager and forward defects on the Department Fire Audit Defect Form to the relevant site helpdesk and site Fire Advisor.

#### **11.15 Managers Responsibilities:**

Fire safety is a line management responsibility. Executive Directors, Clinical Directors, General Managers, Business Managers and Departmental Managers are accountable for fire safety in their own area of authority. Managers are responsible for ensuring that adequate arrangements are in place for this policy to be fully implemented at all levels within the Trust.

Managers are responsible for ensuring adequate dissemination and implementation of policies relevant to the staff in their areas. Managers are also responsible for ensuring all staff understand how to access policies on the Intranet.

Managers will hold to account so far as their authority extends and to the degree appropriate to the extent of the failure, any member of staff they have managerial responsibility for, for any failure to comply with any requirement under legislation, guidance, Trust Policy or procedural document in relation to fire safety and fire risk management.

### **11.16 Staff**

All members of staff are responsible for cooperating with the development and implementation of Trust policies as part of their normal duties and responsibilities. They are responsible for ensuring that they maintain up to date awareness of corporate and local policies with regard to their own and their staff roles and responsibilities.

All staff are required to:-

- Read the parts of this revised policy that apply to them, to maintain awareness of the current individual requirements for fire within the Trust
- Complete mandatory annual fire safety training to maintain knowledge of actions to take in the event of a fire
- Attend any specific role related training as defined in the TNA
- Make themselves aware of fire evacuation routes, the location of manual call points, firefighting equipment in their work area and comply with all fire safety requirements within the Trust
- To read and understand the local fire arrangements for their ward/department
- Take part in evacuation drills and/or desktop training twice each year when working in patient care areas
- Bring any concerns related to fire safety to the attention of their line managers
- Read the Fire Safety Policy Statement. (Fire Safety Policy Statement.docx)

Successful implementation of this policy will require the cooperation of every employee whilst at work. In particular employees have a duty to:-

- Take reasonable care for their own health and safety, and that of others who may be affected by their activities
- Cooperate with the Trust to ensure that all statutory duties and requirements are complied with
- Not interfere intentionally or recklessly with anything provided for their health, safety and welfare.

It is essential that every member of staff in the Trust understands the character of fire, smoke and toxic fumes; is able to recognise fire hazards in the workplace; practices and promotes fire prevention; and is instructed in the right action to take if fire breaks out; and for specific roles – the application or use of firefighting equipment.

### **11.17 Approving Committee Responsibilities: Fire Safety Committee**

The Fire Safety Committee must monitor all aspects of work and reports submitted by the Fire Safety Advisors and Fire Safety Manager for onward submission through

the appropriate reporting channels as detailed in section 5 Process for Monitoring Compliance.

### 11.18 Health and Safety Committee

The Health and Safety Committee will receive reports from the Fire Safety Committee for onward submission through the appropriate reporting channels as detailed in section 5 Process for Monitoring Compliance.

### 11.19 Care Groups Operational Governance Meetings

Each Care Group should have Fire Safety as a standing agenda item on the governance meetings agendas. Each Care Group has a Fire Advisor allocated to attend the governance meetings to provide feedback from fire safety audits, fire alarm activation investigations, staff fire awareness training, evacuation drills and to give general fire safety advice. Also to discuss any received Fire Reports relating to their departments. Fire Safety Advisors may be invited to attend these meetings as and when deemed necessary by the Chair In the interests of best practice and time management.

## 12. ABBREVIATIONS / DEFINITION OF TERMS USED

ABBREVIATION	DEFINITION
BM	Business Manager
CAS	Central Alert System
CEG	Clinical Executive Group
CFOA	Chief Fire Officers Association
CIC	Cumberland Infirmary, Carlisle
CLG	Communities and Local Government
EFAG	Estates & Facilities Assurance Group
EFAG	Estates & Facilities Advisory Group
ESR	Employment Service Record
F&RS	Fire & Rescue Service
FRA	Fire Risk Assessment
H&S	Health & Safety Committee
HOD	Head of Department
HTM	Health Technical Memorandum
NCUH	North Cumbria University Hospitals
PFI	Private Financing Initiative
PPM	Planned Preventative Maintenance
RR(FS)O	Regulatory Reform (Fire Safety) Order 2005
TNA	Training Needs Analysis
UwFS	Unwanted Fire Signal – Any false alarm that is subsequently passed to the Fire & Rescue Service

TERM USED	DEFINITION
Care Group	clinical body that will replace the clinical divisions as a management and governance structure.
Common Area	This includes Atria, double height spaces, circulation spaces (passages, corridors, landings, hallways, lobbies and stairways)

TERM USED	DEFINITION
	and any other area within the hospital buildings not under the direct control of a specific care group.
Trust Board	The executive management body with responsibility for Cumbria Partnership Foundation Trust and North Cumbria University Hospitals Trust.
Manager in charge of ward department or office	This being the most senior manager working in an area on a day to day basis. (This includes any person with managerial responsibilities for persons working within the managers' area of responsibility, whether clinical or non-clinical activities or duties are performed in that area.).
PABX	Switchboard – CIC
PFI Company	Any Company that has any Private Financing Initiative contract with Cumbria Partnership Foundation Trust, North Cumbria University Hospitals Trust or the Joint Board of both.
Trust	This is any of Cumbria Partnership Foundation Trust, North Cumbria University Hospitals Trust or the Joint Board of both.

## DOCUMENT CONTROL

<b>Equality Impact Assessment Date</b>	
<b>Sub-Committee &amp; Approval Date</b>	Fire Safety Committee 22/03/2019

### History of previous published versions of this document:

Trust	Version	Ratified Date	Review Date	Date Published
NCUHT	8.0	21/12/2017	31/03/2018	28/12/2017
CPFT	CO/POL/ 002/022	27/10/2015	October 2018	27/10/2015

### Statement of changes made from previous version

Version	Date	Section & Description of change
1.0	2018	This is a complete rewrite of the policy to streamline the document by removing all procedural information to separate documents while adopting the new joint policy template
1.1	March 2019	<ul style="list-style-type: none"> <li>Section 7 revised list of Reporting Committee</li> <li>Section 8 New Section Insertion of frequency of Fire Risk Assessments and Responsibilities</li> <li>Section 11.1 removal of reference to Annual AE fire report</li> <li>Section 11.2 update to Executive Director title responsible</li> <li>Section 11.5 Review of wording for Authorised Engineer and when they may be engaged</li> <li>Section 11.13 Change to wording Fire Advisors to be invited to Care Group meetings by Chair as required.</li> </ul>
1.2	28/03/2019	Responsibilities section renumbered and approving committee identified as Fire Safety Committee

**List of Stakeholders who have reviewed the document**

Name	Job Title	Date
Hannah Wilson, NCUH Andrew Adams, NCUH Lynn Anderson, NCUH Linda Bennetts Nikki Bridson-Nelson, CPFT Michelle Davies, CPFT Grant Donaldson, CPFT Steve Dougan, NCUH Sheena Fish, NCUH Peter Fisher, NCUH Gordon Morrison Graham Frost Suzanne Halsall, NCUH Richard Heaton, NCUH Emma Hoyles Paula Irving, NCUH Elizabeth Klein, NCUH Russell Law, CPFT John Mitchell, NCUH Nick Hood Richard Pape, CPFT Emma Park, CPFT Stephen Prince, CPFT Jackie Rigby, CPFT Robin Treasurer Daniel Scheffer, CPFT Scott Smith, CPFT Alan Shepherd, CPFT Smillie Michael Smith Craig Smith John Pearson Steve Sutcliffe Martyn Teasdale Diane Thompson Julie Thorneycroft Ian Tudor Jane Watson Stephanie Weatherill Jane Webster Gillian Wharton Jan Fleary Barbara Cliff Harding		