



## HEALTH & SAFETY ASSURANCE COMMITTEE PWYLLGOR ANSAWDD IECHYD A DIOGELWCH

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	06 March 2023
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Fire Safety Policy 242 – For Approval
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Andrew Carruthers, Executive Director of Operations
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Simon Chiffi, Head of Operations

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA  
SBAR REPORT**

### Sefyllfa / Situation

The Health and Safety Committee is asked to approve the Fire Safety Policy 242 (Appendix 1). This report provides the required assurance that Policy 190 – Written Control Documentation has been adhered to in the review of the above mentioned written control document and therefore the document is in line with legislation/regulations, available evidence base and can be implemented within the Hywel Dda University Health Board (HDdUHB).

### Cefndir / Background

1. Brief summary of the WCD:

This policy clearly sets out instructions and expectations for the management of fire safety for the Health Board.

2. Scope of the WCD:

This policy applies to all staff at all premises owned or occupied by the Health Board

3. Reason(s) for reviewing the Policy:

This policy required updating as it had reached its three yearly review period, this has also provided an opportunity to ensure that the policy follows the new policy template and that any changes to the guidance and any supporting technical specifications are also reflected in the new document.

4. Aim(s) of the Policy:

The aim of this policy is to set out how HDdUHB ensures its statutory duties are met with regards to fire safety.

A full review of Policy 242 has been undertaken, ensuring the document is in line with Welsh Government strategy and current legal and other requirements.

#### 4.1 Minor changes

Section 3.6 – Title change – Head of Estates Engineering & Maintenance.

Section 3.7 – Title change – Head of Estates Risk & Statutory Compliance Manager.

Section 3.9 – Title change – Head of Fire Safety.

Updates to fire safety management hierarchy diagram on page 18.

Section 4.1 – Fire Safety Groups – Removed community groups and updated diagram 1.1.

Section 4.4 – Fire Risk Assessments – Included the new Boris system.

Section 5.3 – Title change – Combined Modules 1 & 2 – General Fire Safety Training and included teams training face to face.

Section 5.4 – Title change – Module 3 – Fire Response Team Training.

Section 5.5 – Title change – Module 4 – Fire Safety Warden Training.

Section 5.6 – Title change – Module 5 – Senior Managers Training.

Section 7.3 – Updates to Smoke Free Policy Section to include new smoke free HB policy.

Appendix A – Table updated.

### Assurance

#### 1. Equality Impact Assessment (EqIA): (Appendix 2)

A EqIA was sent to the Equality Diversity and Inclusion team, it was requested that all male and female pronouns be eliminated and replaced with gender neutral pronouns. The current Policy has only received minor Changes such as job titles and the previous EqiA form updated with the current names, dates, and job titles etc.

#### 2. Privacy Impact Assessment: – Not Applicable for this document.

#### 3. Evidence base:

The following reference sources have been used in the compilation of this revised Fire Safety Policy:

- Current HTM guidance document for Fire Safety and FireCode.

#### 4. Compliance with Legislation/Regulations:

Full adherence with the content of this policy will demonstrate that as far as reasonably practicable the Health Board has complied with the necessary guidance documents such as Health and Safety Guidance (HSG) / Health Technical Memorandums (HTM) for health care purposes

#### 4.1. Interested Parties:

The Health and Safety Committee to which this document is tabled is the owning committee for its approval. To support this approval, this policy has also been officially circulated to the members of the fire safety group (FSG) for prior consultation.

#### 5. Consultation:

The owning group of the Policy, the Fire Safety Group, have officially signed off the revised policy on the 06/12/2022.

The policy was also issued for global consultation between 25 January 2023 and 8 February 2023 and no comments were received.

#### 6. Implementation:

The policy will be made available to all staff within the Health Board via the intranet policy page.

#### 7. Monitoring:

It is essential that continued monitoring is carried out to establish the effectiveness of this policy. The outcome of this monitoring will determine what measures are required in order to improve specific aspects of non-compliance or lack of adherence to the policy. Principally this will be the responsibility of the fire safety team and the members of the Fire Safety Group. This will then be further escalated to the Health and Safety Committee when requested.

#### Argymhelliad / Recommendation

For the Health and Safety Committee to approve the revised Fire Safety Policy for HDdUHB for a further three years.

#### **Amcanion: (rhaid cwblhau)**

#### **Objectives: (must be completed)**

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	Not Applicable
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Risks have been scored and identified on the Datix system
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	2.1 Managing Risk and Promoting Health and Safety
Nodau Gwella Ansawdd: Quality Improvement Goal(s):	Protect Patients From Avoidable Harm From care
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2018- 2019</a>	10. Not Applicable

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
<b>Ar sail tystiolaeth: Evidence Base:</b>	The content of this policy is developed utilising expert advice, with reference to legislation and guidance documentation.
<b>Rhestr Termau: Glossary of Terms:</b>	Not Applicable
<b>Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd Iechyd a Diogelwch: Parties / Committees consulted prior to Health and Safety Assurance Committee:</b>	Fire Safety Group

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	There are direct financial consequences associated with the content of this policy.
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	There are direct patient care consequences associated with this policy across the HDdUHB.
<b>Gweithlu: Workforce:</b>	There are direct legal responsibilities for staff (workforce) associated with this policy.
<b>Risg: Risk:</b>	There are a variety of related risks associated with this policy, which are individually referenced in the Datix system, complete with the necessary mitigation plans and further actions to be implemented.
<b>Cyfreithiol: Legal:</b>	The HDdUHB has specific legal responsibilities as defined by this policy.
<b>Enw Da: Reputational:</b>	There are potentially significant reputational and damaging consequences (claims) on the HDdUHB particularly where there is clear evidence of failings as a result of non-compliance with this policy.

<b>Gyfrinachedd: Privacy:</b>	Not Applicable
<b>Cydraddoldeb: Equality:</b>	The equality impact assessment for this policy has been included for information.



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CYMRU  
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WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

# FIRE SAFETY POLICY

## Policy Information

Policy number: 242

Classification:  
Corporate

Supersedes:  
N/A

Version number:  
V5

Date of Equality Impact Assessment:  
13/02/2023

Approval information  
Approved by:  
*Health and Safety Committee*

Date of approval:  
*Enter approval date*

Date made active:  
*Enter date made active (completion by policy team)*

Review date:  
31/03/2026

#### Summary of document:

This policy sets out instructions and expectations for management to fulfil its responsibilities to effectively manage fire safety for Hywel Dda University Health Board (HDUHB).

#### Scope:

This policy applies to all staff at all premises owned or occupied by HDUHB.

#### To be read in conjunction with:

- 393 – Confined Space Policy
- 145 – Electrical Safety Policy
- 293 – Smoke Free Policy
- 258 – Waste Management Policy
- 144 – Maintenance Policy
- 541 - Control of Contractors Policy
- 020 – Asbestos Policy

#### Owning group:

Fire Safety Group  
06/12/2022

#### Executive Director job title:

Andrew Carruthers – Executive Director of Operations

#### Reviews and updates:

- V1 New policy – 26/22/2013
- V2 Revised – 17/05/2018
- V3 Revised – 30/09/2020
- V4 Revised – 17/03/2021
- V5 Revised – (currently in progress)

#### Keywords

Fire Safety, Evacuation, Management Responsibilities, Fire Training

#### Glossary of terms

Term	Definition
HDUHB	Hywel Dda University Health Board
FSO	Fire Safety Order
HTM	Health Technical Memorandums
CEO	Chief Executive Officer
FSM	Fire Safety Manager
DPM	Designated Person Fire
GGH	Glangwili General Hospital
TNA	Training Needs Analysis
FSA	Fire Safety Advisor

FRT	Fire Response Team
FST	Fire Safety Team
PAT	Portable Appliance Test
FSG	Fire Safety Group
NWSSP-SES	NHS Wales Shared Services Partnership – Specialist Estates Services



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## **1. INTRODUCTION.**

### **1.1 Aims.**

The aim of this policy is to set out how Hywel Dda University Health Board, hereinafter referred to as HDUHB, will ensure its statutory duties are met with regards to fire safety and will be advised by relevant guidance issued by the :-

- Welsh Government in the form of its Fire Safety Policy statement (WHC(2006)74)
- Mid and West Wales Fire Authority
- Health and Safety Executive
- Regulatory Reform (Fire Safety) Order 2005 (RRO)
- Firecode suite of documents – Welsh Editions

### **1.2 Objectives.**

The primary objectives of HDUHB are to:-

- Minimise risk to life and reduce incidence of injury from fire to all staff, patients, visitors and contractors.
- Minimise the incidence of fire throughout the HDUHB estate.
- Minimise the impact from fire on delivery of service
- Minimise the impact from fire on the environment
- Minimise the impact from fire on property

The objectives of this policy are:-

- to state HDUHB's commitment to manage the fire safety of our organisation and to ensure compliance with the regulatory requirements
- To clearly set out the responsibilities for fire safety within the organisation
- To outline the arrangements in place to ensure fire safety throughout the organisation

In addition to this policy there will be site specific fire safety management plans to define local arrangements

### **1.3 Policy Scope.**

This policy applies to all staff at all premises owned or occupied by the HDUHB including

- Permanent Staff
- Temporary Staff
- Students
- Agency Staff
- Contractors
- Sub-Contractors
- Volunteers

## 2. STATEMENT OF INTENT.

### 2.1 Statement.

The HDUHB attaches great importance to the fire safety of its healthcare facilities and its potential impact on patients, staff and the continued provision of its healthcare services.

In order to fulfil its fire safety obligations, a robust fire safety management system will be implemented along with the development of a strong organisational culture by ensuring that the HDUHB:

- Fully understands its obligations so that it can effectively manage fire safety.
- Has nominated a Board Level Director accountable to the Chief Executive for fire safety to champion all fire related activities.
- Has appointed a Fire Safety Manager to take the lead on all fire safety activities.
- Has appointed Fire Safety Advisors to provide the necessary training and technical advice on fire safety.
- Has nominated specific individuals who are managerially responsible for the areas under their control and that clear instructions have been provided to those individuals on their responsibilities and expectations.

A clearly defined and effective fire safety management system will ensure:

- Compliance with fire legislation including the mandatory requirements of The Regulatory Reform (Fire Safety) Order 2005 (FSO) and the Firecode suite of documents. Continual revision of this Policy will ensure compliance is maintained.
- All areas of the HDUHB building portfolio has a suitable and sufficient fire risk assessment.
- Suitable and sufficient means for quickly detecting and raising the alarm in case of fire.
- Suitable and sufficient emergency evacuation procedures for all areas, at all times the premises are occupied, without reliance on external services.
- Appropriate fire safety training for all members of staff taking into account the level of risk and duties they may be required to perform. This will be identified through a training needs analysis.
- The identification of fire hazards and risks associated with its estate and provision of appropriately funded prioritised action plans to address the fire safety risks.

- The reporting and monitoring of all fire and unwanted fire signal incidents.
- The development of partnership initiatives with other bodies and agencies involved in the provision of fire safety.

**The Fire Policy should be read in conjunction with the relevant site specific Fire Management Plans.**

## **2.2 Implementation.**

The 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 a programme of appropriate fire safety training for all relevant staff;
- Develop and implement effective monitoring and reporting mechanisms to ensure good levels of assurance.

## **3. RESPONSIBILITIES - FIRE SAFETY MANAGEMENT STRUCTURE**

### **3.1 The Board (HDUHB)**

The Board has overall accountability for the activities of the HDUHB. The responsibility for complying with the RRO rests with the responsible person. For healthcare organisations the responsible person will be the employer.

The corporate body, i.e. The Board, should ensure it has appropriate assurances that the requirements of current fire safety legislation are complied with and, that the objectives of Firecode guidance and any subsequent guidance such as the Health Technical Memorandums (HTM's) are met. The RRO requires that the responsible person puts in place all necessary fire precautions to protect relevant persons in the event of fire in and around the premises.

### **3.2 The Chief Executive (CEO)**

**Any requirement of the law placed upon the Chief Executive of HDUHB and its Board of Directors relating to fire safety is also placed upon all staff who have to any extent control of their workplace.**

The Chief Executive Officer (CEO) has overall accountability for all aspects of Health and Safety and Fire Safety as required by the RRO. As such the CEO will ensure that the responsible person's duties "The Duty Holder" are fulfilled. Article 11 of the RRO clearly stipulates that all persons who have any control must ensure arrangements are in place for effective planning, organisation, control and monitoring of fire safety measures and the keeping of records of all these measures, therefore the CEO is responsible for:

- Ensuring that current fire legislation is complied with and that, where appropriate, Firecode and HTM guidance is implemented in all premises owned or occupied by HDUHB.
- Ensuring that adequate resources are in place to meet all of the HDUHB's Fire Safety - Statutory Requirements.
- Ensuring appropriate fire safety policies, systems and programmes of work in order to improve and maintain fire precautions within HDUHB's premises.
- Delegating responsibility and nominating an appropriate executive role within the HDUHB to lead on all aspects of Fire Safety, normally the Director of Operations. This role will be known as the Designated Person for Fire (DPF)

### **3.3 Director of Operations – Designated Person for Fire**

An Executive Board Level Director, normally the Director of Operations is the Designated Person for Fire (DPF) nominated by the CEO for Fire Safety Management and is responsible for championing all fire safety issues at Board level.

This includes reporting to the Board on fire issues and proposing programmes of work relating to fire safety for consideration as part of an annual operational business plan.

They will also be responsible for:

- Submitting electronically the HDUHB's annual audit of fire precautions to NHS Wales Shared Services Partnership – Specialist Estates Services.
- Ensuring that the HDUHB has an established and effective, organisational wide, fire safety group, which is adequately supported by relevant sub-groups in order to capture the fire safety precautions across all sectors of the organisation.

- Ensuring that the Board are continually made aware of the levels of assurance for fire safety management within the organisation, through effective reporting lines.

### **3.4 The Director of Facilities, Estates and Capital Planning**

The Director of Facilities, Estates and Capital Planning is the accountable and responsible officer within the Estates Department for ensuring that adequate resources and expertise is available to formulate a Fire Safety Management Structure. This structure will deliver an effective and robust fire safety system for the HDUHB in order to meet its legal responsibilities for all fire related issues in every respect. They will ensure that all fire related issues are cascaded within the fire management structure.

- They are also permitted (following authorisation from the DPF) to submit electronically the HDUHB's annual audit of fire precautions to NHS Wales Shared Services Partnership – Specialist Estates Services.
- They are also expected to annually prepare a status of compliance and effectiveness of fire safety management report for the organisation and update the DPF accordingly.

### **3.5 The Head of Operations**

The Head of Operations is strategically and professionally accountable for the management and activities of the senior operational managers under their direct control within the operational maintenance function. They must also ensure that there is sufficient resources and expertise in supporting and maintaining HDUHB's Fire Safety Infrastructure and that all fire related issues are communicated regularly to the Director of Facilities, Estates and Capital Planning.

### **3.6 Head of Estates Engineering and Maintenance**

The Head of Engineering and Maintenance is responsible for overseeing and coordinating the day to day activities of the assistant site operational managers based at each of the acute hospital sites. Also responsible for ensuring that there is sufficient resources and expertise within the operational maintenance function to maintain HDUHB's Operational Fire Safety Infrastructure and any associated Planned Preventative Maintenance required. They will also undertake periodic performance reviews on maintenance achievements to inform the Head of Operations and the Fire Safety Manager of any concerns, risks or non-compliance activity in connection with fire safety maintenance.

They will also be required as part of the annual fire safety audit to provide accurate information relating to the performance of

maintenance on fire safety for the sites across the health board portfolio.

### **3.7 Head of Estates Risk and Statutory Compliance Manager**

The Head of Estates and Statutory Compliance Manager will (with the support from the wider compliance team) ensure that the HDUHB has implemented the appropriate operational policies and will advise on the effective management and control of operational risks across a range of statutory duties (e.g. statutory standards, Codes of Practice, Health Technical Memoranda, Health Building Notes and COSHH etc.)

The Head of Estates Risk and Compliance is expected to work closely with the Head of Fire Safety Management to identify what capital requirements are necessary to support the HDUHB in connection with fire safety improvements.

The compliance team has been established to support and advise the facilities department with the development of operational policies and working practices. Also to ensure that any revisions in legislation are reflected in these policies and communicated to the various operational teams.

### **3.8 Assistant Site Operational Managers**

The Assistant Site Operational Managers are responsible for the day to day management of operational maintenance for the sites under their control. They are also responsible for coordinating the activities of all relevant maintenance staff to ensure that appropriate maintenance arrangements are in place for fire safety. They must therefore liaise very closely with support staff, such as Operational Support Officers/Site Works Supervisors and any competent person or operational maintenance operative who is involved in any fire related maintenance activity. Collectively, management must ensure that effective arrangements are continually in place to ensure that:

- Fire Detection and Alarm systems, including graphical user interfaces, are regularly serviced, maintained and tested in accordance with the relevant British Standard and results recorded accordingly.
- Information relating to the fire alarm infrastructure is accurate, including making sure that any graphical interfaces/drawings are regularly updated.
- Ensure that cause and effect systems are appropriate and receive regular testing/modifications/improvements.
- Ensure that the fire alarm zones are correct and clearly displayed.
- Ensure regular testing of emergency lighting systems.
- Ensure regular testing of lightning protection systems.
- Ensure regular testing of fire dampers and duct work systems.



- Ensure that permits are correctly completed
- That any necessary contracts are in place with external providers (Fire Extinguisher Maintenance/Suppression Systems etc.)
- Liaise closely with the Fire Safety Manager and Fire Safety Advisers and report any known defects or concerns of non-compliance and any subsequent Statutory Capital Investments that may be required.

### **3.9 The Head of Fire Safety Management**

The Head of Fire Safety Management (FSM) is responsible for co-ordinating the day to day activities of the Fire Safety Team (FST) to ensure that collectively, the team supports the HDUHB to meet its statutory obligation to Fire Safety Management. The FSM is responsible for developing, implementing and monitoring Fire Training Plans for all staff within the HDUHB. Furthermore, the FSM will implement and monitor appropriate management systems to ensure compliance with a range of requirements including those defined within HTM and Firecode.

The FSM is responsible for overseeing the co-ordination of fire safety management throughout the organisation and has a direct line of communication with the DPF in all fire related matters. Responsibilities includes the following:

- Have a detailed level of awareness of all fire safety features and their purpose.
- Reporting non-compliance with legislation, policies and procedures to the DPF
- Regularly arrange, coordinate and chair the HDUHB's Estates Departmental Fire Safety Team Meetings.
- Develop regular compliance status reports for respective line managers.
- Control statutory capital funding to address non-compliance in relation to fire safety.
- Fully recognise the fire safety risks particular to the HDUHB.
- Fully investigate incidents of fire and report findings as necessary.
- Accurately record non-compliance aspects of fire safety on the Estates Corporate Risk Register.
- Review the effectiveness of the fire safety team and its subsequent workload, make necessary work plan changes to accommodate certain activities.
- Support and address requirements for disabled staff and patients (related to fire procedures).
- Ensure the HDUHB continues to operate effective fire safety groups (FSG's), capturing acute, community and Mental Health aspects of fire safety.
- Ensure the HDUHB complies with all fire safety legislation and guidance where necessary.
- Ensure the HDUHB has an effective fire safety policy and subsequent fire safety procedures.

- Ensure that Fire Risk Assessments are completed and that risk mitigation measures are implemented.
- Ensure that all new schemes and capital developments comply with fire requirements and provides the necessary technical advice when required.
- Ensure that there is continued monitoring of HDUHB's fire safety management system, including the development of long term strategic investment planning for fire safety.
- Develop the HDUHB's fire safety strategy and site fire procedures.
- Develop an effective training programme for HDUHB staff, see Appendix 'A' (Training needs analysis).
- Liaise with property landlords, specifically where HDUHB staff utilise non HDUHB premises to confirm suitable fire safety controls are in place.
- Reporting of fire incidents in accordance with current practice.
- Monitoring and mitigating unwanted fire incidents.
- Liaising with enforcing authorities.
- Liaising with other key stakeholder departments and managers.
- Liaising with operational maintenance management to ensure that appropriate monitoring, inspection and maintenance of fire safety systems is in place.
- Develop and maintain effective relationships with external bodies in relation to fire safety related matters.

### **3.10 The Fire Safety Advisors**

The Fire Safety Advisor's role is to provide technical expertise and support to the Fire Safety Manager to enable them to fulfil their duties effectively. The Fire Safety Advisor is responsible for the following:

- Providing expert advice on the application and interpretation of fire legislation and fire safety guidance, including Firecode.
- Advising on the content of HDUHB's fire safety policy.
- Assisting with the development of HDUHB's fire precautions systems and fire safety procedures.
- Working closely with Maintenance Representatives and Fire Safety Manager.
- Attending Fire Safety Group meetings for the areas that fall under their responsibility.
- Maintaining site specific fire management plans and manuals.
- Assisting with the development of a suitable fire training programme, including delivery of training and recording staff attendance to support the Fire Safety Manager.
- Liaising with the enforcing authorities on technical issues.
- Liaising with managers and staff on fire safety issues.
- Liaising with the Authorising Engineer (Fire) at NHS Welsh Shared Services Partnership – Specialist Estate Services (NWSSP - SES).

- Conducting and reviewing suitable and sufficient fire risk assessments for all premises within their area of responsibility and agreeing action planning with the respective managers.
- Carrying out the annual fire audit for their respective areas of responsibility and agreeing action planning with the respective managers.
- Ensuring that fire risk assessments are undertaken and reviewed within agreed timescales and that they are updated to reflect investment, infrastructure changes or change in circumstances.
- Assisting in identifying annual estate capital programmes to meet and maintain fire compliance requirements

Where the fire safety issues are beyond the scope of knowledge and experience of the Fire Safety Advisor e.g. detailed fire engineering, advice will be sought from suitably qualified professionals.

### **3.11 Fire Safety Premises Management Responsibilities**

To comply with the RRO requirements of Article 3 and 5, the HDUHB will ensure that for each premises owned or occupied by HDUHB a premises manager will be nominated in writing to champion all necessary fire safety issues within that **premises**. They will be responsible for promoting, encouraging and facilitating effective fire safety management throughout the management hierarchy for the premises that they are in control of.

### **3.12 Departmental Managers Responsibilities**

Departmental Managers have a direct responsibility for the staff within their control, as such they will be expected to ensure that:

- Appropriate levels of management are always available to ensure decisions can be made regardless of the time of day.
- Effective fire safety management arrangements are encouraged throughout their department.
- Staff have received the appropriate level of fire safety training commensurate to their role and the risks that they face.
- They nominate a fire safety warden and if necessary, deputy wardens to be the eyes and ears for the department. See section **3.12** for further info.
- They have effective communication mechanisms in place to cascade fire safety information throughout the department to all staff including line managers/supervisors.
- Actions, which are within their direct control, that are identified on the Fire Risk Assessment, are dealt with in a timescales stipulated. If this is not possible then the action should be escalated to the Fire Safety team
- All relevant shortcomings are communicated to the Fire Safety Manager.

- All staff working within their designated area of control are aware of the emergency evacuation procedures for the department or area they are working in.
- They regularly monitor the fire safety training performance within their department to ensure that all staff attend training as per the TNA, including those employed from agencies or bank staff that are required at short notice.
- They regularly communicate fire safety issues during meetings or team briefs to all staff, providing suitable means by which staff can raise or communicate concerns to line managers, which can be reported to the Fire Safety Team.
- All patient areas have mechanisms in place to ensure adequate staff to be available at all times to provide assistance with patient evacuation in a fire emergency.

### 3.13 Fire Safety Wardens

The HDUHB is a complex organisation with a vast amount of building stock and people operating in busy environments, as a result of this, the HDUHB wish to encourage effective fire safety management arrangements by implementing fire safety wardens within departments across the organisation as detailed in paragraph **7.29 HTM 05 – 01 Managing healthcare fire safety**. The Fire Safety Wardens can be members of staff nominated by department managers or the managers themselves and will be provided with the necessary training to fulfil their role. This is not an enforcing role, it is purely a support role to help in the everyday management of fire safety within a department. The fire warden will be expected to:

- Act as the eyes and ears for the department in relation to fire safety matters.
- Monitor fire safety issues within the department as identified by their training.
- Regularly attend the warden refresher training when required.
- Ensure that arrangements are in place for effective day-to-day monitoring to support this Fire Safety Policy.
- Maintain a log book of warden checks and make a note of issues or concerns that have been identified for cascading/reporting. Standard templates are available.
- If required, support the fire response team during a fire safety incident/emergency.

**Note:** All staff with a specific role to play such as Fire Safety Wardens shall receive adequate training to perform their roles effectively, as detailed in the Fire Safety Training Delivery Plan contained in Appendix A.

### **3.14 Fire Response Team**

The HDUHB must ensure it implements the appropriate mechanisms so that it can respond promptly and efficiently to a fire alarm activation or fire incident within its premises. On large acute sites, the HDUHB will formulate a dedicated Fire Response Team (FRT) to take immediate control of situations that may arise. These arrangements are specifically documented in the individual site management plans.

### **3.15 Switchboard**

The switchboard team have an integral part to play in the response to fire signals. The alarm system is linked to switchboard for instant notification and all emergency action plans throughout the sites advise staff to contact switchboard to confirm fire or otherwise via the internal telephone line. The switchboard team will be the main point of contact with the Fire Service to either confirm or cancel their attendance. The Duty manager or Fire Response Team Leader will initially proceed to switchboard on notification of Fire for an incident update and allocation of radio, identification tabard etc.

### **3.16 Duties & Responsibilities for all Staff**

It is essential that HDUHB promotes a strong safety culture throughout the organisation that supports and promotes fire safety. All staff have a responsibility for their own safety and the safety of others as detailed in the Health and safety at work etc. Act 1974. HDUHB expect all staff to:

- To participate in fire training in accordance with their own training needs, this must be discussed with the line manager to ascertain which specific level of training is required.
- To know what to do in the event of a fire or on hearing the fire alarm.
- To know the location of fire alarm points and firefighting equipment.
- To know how to use the fire extinguishers and their uses on different fires.
- To make certain that they are familiar with all means of safe escape in the event of fire.
- To minimise potential of fire by ensuring good housekeeping.
- To ensure that any equipment used is in safe working condition and is used appropriately and safely and in accordance with manufacturer's guidelines to avoid any unnecessary risks.
- To ensure that no unauthorised electrical items are used, operated or brought into any HDUHB premises unless specifically agreed with the Fire Safety Team (FST). All electrical equipment must be kept in good working condition and appropriately PAT tested (Portable Appliance Testing) OR, if classified as a medical device, must be electrical safety tested in accordance with MHRA DB2006(05) Chapter 4.4 and IEC – 60601-01 prior to being taken back into service.
- To report any concerns or issues to line managers.

### **3.17 The Authorising Engineer (Fire)**

Where the fire safety issues are beyond the scope of knowledge and experience of the Fire Safety Team or FSM (e.g. detailed fire engineering requirements), expertise and advice will be sought from NWSSP-SES - NHS Wales Shared Services Partnership – Specialist Estates Services.

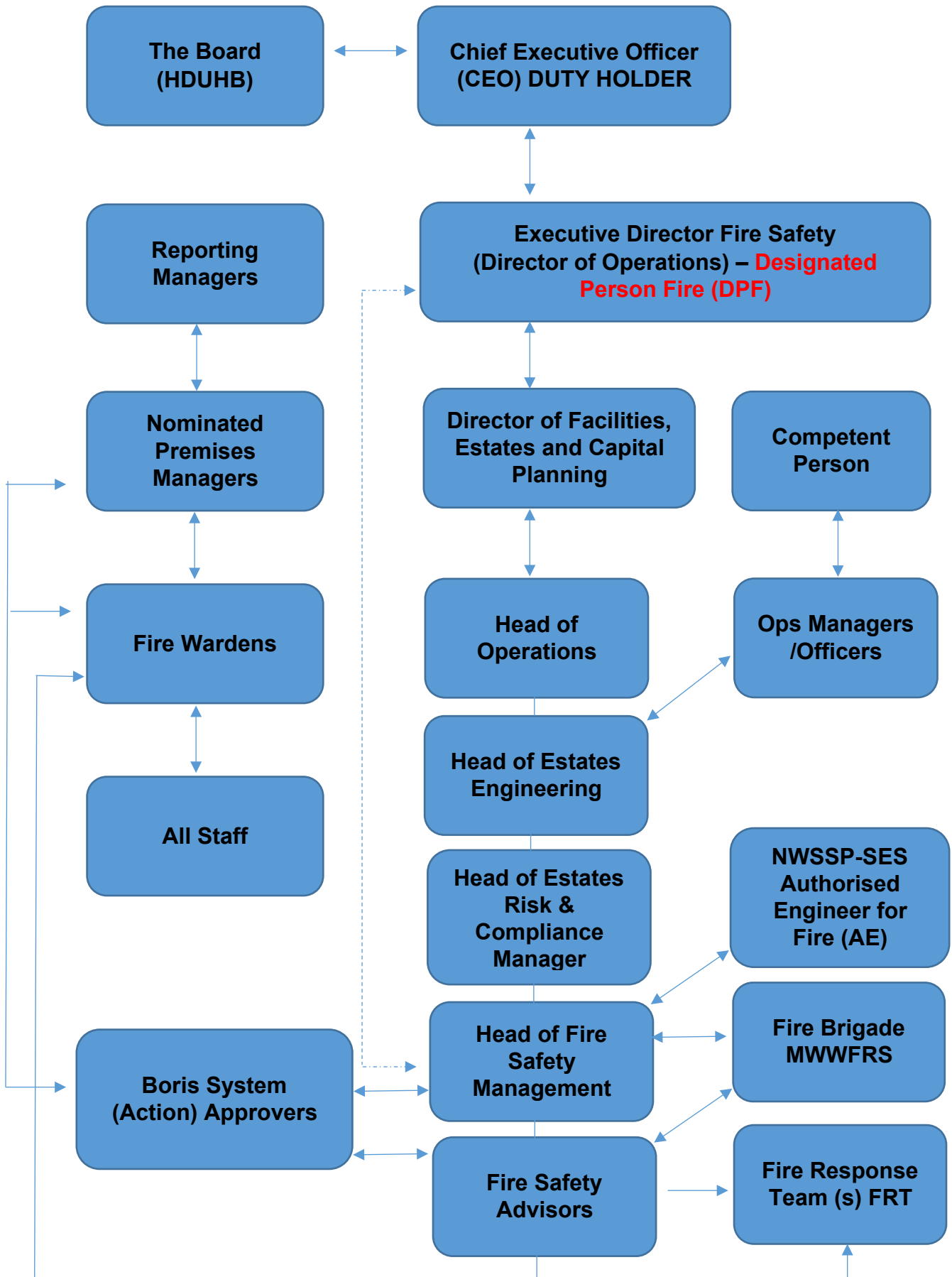
### **3.18 The Competent Person (Fire)**

HUHB will only use Approved Competent Persons to undertake installation and/or maintenance of all fire-related services. The Competent Person (Fire) must be able to demonstrate a sound knowledge and specific skills in the specialist service being provided. Affiliation with appropriate third party certification schemes will be the benchmark for demonstrating competence.

All contractors working directly on any installation involving fire doors, fire compartmentation and fire stopping will not be engaged unless they are 3<sup>rd</sup> Party Accredited through an appropriate body or organisation.

All other trades will need to demonstrate competence for particular sector by being registered with a sector specific organisation.

THE FIRE SAFETY MANAGEMENT HIERARCHY



## 4. ARRANGEMENTS

### 4.1 Fire Safety Groups

The HDUHB will ensure that an organisational wide overarching Fire Safety Group (FSG) is established, chaired by the Director of Facilities Estates and Capital Planning. This group meets every two months to facilitate effective fire safety management, effective communications and monitors practices relating to fire safety.

Due to the scale of the organisation the HDUHB will also implement a variety of fire safety sub groups (FSSG) also known as feeder groups, see diagram 1.1 below, which will cover the various sectors of the organisation such as Acute, Community and Mental Health's (MH) fire safety precautions. There will be a total of 4 sub-groups established supporting the overarching FSG. The FSG must be sufficiently represented by estates/facilities/maintenance and clinical staff, but also be represented by the key members of staff who facilitate and are responsible for the co-ordination of the sub-groups. This is to ensure that there is organisational wide ownership and representation for fire safety issues. The FSG will be governed by the Health and Safety Committee and will therefore update the Board accordingly.

Group membership must consist of an appropriate representation of staff who have management responsibilities and are able to effectively cascade information, actions and outcomes within their areas of responsibility.

HDUHB's FSG and FSSG are as follows:

- 1 \* Overarching Fire Safety Group – Chaired by the Director of Facilities Estates and Capital Planning
- 4 \* Acute fire safety sub groups (including MH and Community representation) - chaired by the Nominated Premises Manager.

Typical group membership should comprise of the following:

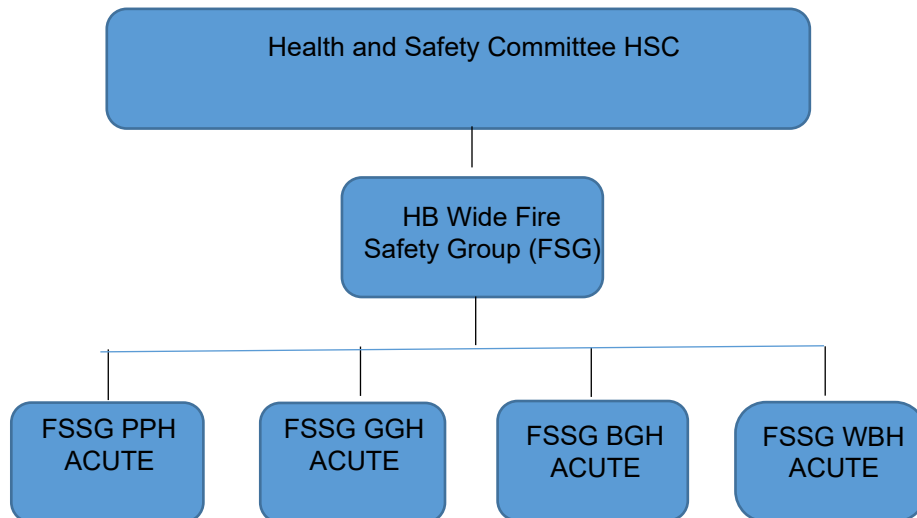
- Hospital Manager/Premises Managers
- County Directors
- Departmental Managers
- Head of Nursing
- Mental Health Leads
- General Managers Community & Primary Care
- Estates Operations Manager & Operations Compliance Manager
- Fire Safety Manager
- Fire Safety Advisors
- Health & Safety Manager
- Representative from Nursing
- Representative from Medicine
- Representative from the unions
- Other members co-opted as necessary

Standard agenda items include;



- Issues affecting operational business.
- Fire incidents / unwanted fire incidents
- Action planning following Fire Audits/ Risk Assessments / enforcement action
- Review of policy / fire management plans / evacuation strategies etc.
- A review of new schemes
- Staff training and audit of ward fire safety management files.
- Fire drills and evacuation testing.

Diagram 1.1 HDUHB Fire Safety Management Groups



Please refer to Terms of Reference (TOR's) of each group for further details.

#### 4.2 Evacuation Procedures

It is essential that HDUHB implements adequate arrangements to support effective evacuation procedures within its premises, specifically for areas where staff are required to utilise equipment aids to support and facilitate the evacuation.

The FSA's will be responsible for devising suitable fire evacuation plans/strategies for all areas within HDUHB, as they will differ depending upon the requirements of each area. These plans will be displayed where required and will also be specifically documented with the individual fire safety management plans and tested periodically. The HDUHB will devise a rolling programme for periodically undertaking formal evacuation testing to ensure that at least one high dependency area and one in-patient area (or similar) is tested annually for an agreed premises. This will be done with the respective staff and departmental managers who have managerial control over their areas. The programme must be facilitated, and arranged through the respective FSSG. All staff must be made fully aware of their individual evacuation procedures and what to do in the event of an emergency. Evidence and subsequent outcomes of evacuation exercises must be discussed and retained by both FSA and departmental managers.

The HDUHB are unable to solely rely upon the services of the fire brigade to perform evacuation procedures, as a result suitable provisions of equipment must be made available along with the appropriate number of staff trained at all times to operate them. The HDUHB has standardised its evacuation equipment for ward areas and utilises the “ski sled” product across the organisation. All ward areas are suitably stocked with this aid. Training on the use of this aid is provided by the FSA’s regularly during the ongoing fire safety training programme. In addition to this aid and for specific clinical situations, the HDUHB can also utilise devices such as the hover-mattress and the “hover-jack” air system for patient transfer, however these systems are directly managed by the manual handling department and the clinicians.

It is essential that where there are specific requirements for patient evacuation, such as plus sized (Bariatric) patients, this must be clearly identified on the patients handling assessment form, completed by a qualified clinician in line with manual handling procedures/policy. The FSA and Manual Handling Advisors must be made fully aware (by the bed manager or ward manager) of the outcome of this assessment to ensure that the risks associated with the transfer of plus sized patients have been fully considered, articulated and mitigated by HDUHB. This may on occasions require a specific fire evacuation procedure to be developed by the FSA’s.

#### **4.3 Major Incidents**

A “major incident” is defined as “any occurrence that presents a serious threat to the health of the community, disruption to the service or causes, or is likely to cause, such numbers or types of casualties as to require special arrangements to be implemented by hospitals, ambulance trusts or primary care organisations”. This includes fire.

A major incident is any event whose impact cannot be handled within routine service arrangements. It requires the implementation of special procedures by one or more of the emergency services, the NHS, or a Local Authority to respond to it.

A fire has the potential to cause a significant impact to the services and continuity of our business, departments must be able to demonstrate that suitable emergency plans are in place to deal with situations. However, where there is a situation of significant scale a major incident may need to be declared and the agreed HDUHB procedures and action cards followed appropriately.

All NHS organisations have comprehensive emergency plans in place, which are tested regularly through live and table-top exercises.

#### **4.4 Fire Risk Assessments**

HDUHB will undertake suitable and sufficient fire risk assessments in accordance with Firecode HTM 05-03 Operational provisions Part K guidance document on risk

assessments in complex healthcare premises and the risk assessment guidance published by the Department of Communities and Local Government.

Only designated members of the FST will be permitted to undertake FRA's for HDUHB. However suitable fire safety risk assessors may also be procured by the FST to assist the FSA's if necessary.

The fire risk assessments identify risks that can be removed or reduced and will assist with the decision making process regarding the extent of capital funding prioritisation and the necessary general fire precautions.

All fire risk assessments are reviewed at either a predetermined date specified within the fire risk assessment or when circumstances within the area change. The FRA must be regularly updated to reflect changes that have occurred such as capital investments or risk removal.

The significant findings of the Fire risk assessments must be recorded and communicated to subsequent managers for action planning.

Once completed, the fire risk assessments are uploaded to an online system called Boris and a copy is issued to the appropriate risk owners and action approvers. Action approvers are requested to regularly access their assigned actions and close these off within the timescales stipulated. The Boris KPI dashboard can be accessed by the fire safety team to review the status of all actions within the system. This information should be discussed at all fire safety groups.

#### **4.5 Organisational Risk Profiling and Risk Management**

The HDUHB is particularly diverse and complex, which can result in risk profile variations. It is crucial that staff are aware of the consequences of change, which may have a direct result on the level of risk the organisation faces. Changes may be a subtle as simply moving staff to a new office location, utilising a room for a different purpose or moving the location of external waste containers.

These simple changes could significantly increase the potential for incidents to occur. As an organisation effective communications are essential to control and where necessary appropriately mitigate risk. Departmental managers, must be made fully aware of any changes within their area of control. If staff require any advice or wish to discuss changes, they must contact the fire safety team directly.

#### **4.6 Equality Act 2010.**

Equality access audits will be conducted throughout the whole estate. In terms of fire safety issues they will be specifically identified in the individual fire risk assessments.

The following outlines the broad principles for managing warning and escape:

- A risk assessment will determine if visual alarms are to be provided in public areas to assist in warning those occupants with hearing difficulties. Vibrating pagers triggered by the fire alarm system can also be issued to

staff with hearing difficulties. This should be discussed with the fire safety advisors.

- Evacuation - In all patient areas evacuation will be staff-assisted for both patients and disabled visitors alike utilising the appropriate evacuation aids as necessary.
- HDUHB also has procedures for developing bespoke Personal Emergency Evacuation Plans (PEEPS) for all disabled employees.

#### **4.7 Building Regulations.**

Wherever new building projects, extensions or alterations to existing buildings are planned, a detailed fire strategy will be prepared. The strategy will outline the intended fire safety objectives, address the management of fire safety and include an overview of the passive and active fire safety provisions to be incorporated into the design, which will all support the future management of the scheme once occupied.

Where Building Regulations apply to these schemes, the fire strategy will form part of the supporting information for the Building Regulation submission.

Generally, compliance with Firecode will satisfy the requirements of the Building Regulations with regard to Part B (Fire Safety). HDUHB acknowledges that Firecode may not be appropriate for all types of building and that judgement should be exercised based on a full understanding of the problem taking into account such issues as:

- The type of care being provided;
- The mobility and age of the patients;
- The planned staffing levels;
- The size of the premises.

Where fire engineering solutions are adopted, the designers must demonstrate that the approach does not result in a lower standard of fire safety than if Firecode had been applied. HDUHB expects the above principles to take into consideration the future management of fire safety and not impose any undue burden upon management to maintain the fire engineered design compliant.

Upon completion of all projects the site fire safety management plan will be updated to include information relevant to that project. Should the project warrant it (e.g. the construction of a detached building on an existing site), HDUHB may decide to compile a separate fire safety management plan for that project. Whichever option is adopted, the plan will include the following information:

- the rationale of the fire strategy;
- the fire safety management policy statement and procedures;
- the passive and active fire precautions included in the design and their maintenance.

Wherever schemes are proposed, reference will be made to the appropriate Firecode guidance, HTMs, HBNs and associated British Standards impacting upon the design.

#### **4.8 Arson**

All of HDUHB's premises have externally and internally located storage areas which are potentially vulnerable to arson attacks from intruders, patients with disturbed patterns of behaviour, employees and others who may enter sites, including contractors.

Departments such as stores, including those with pharmaceuticals, may be targets for theft and fires may be started to conceal the theft. Attention to housekeeping, for example management of waste collection, storage and disposal, and security arrangements can make a very positive contribution to the prevention of arson.

Extra vigilance and control must be adopted by the HDUHB to reduce the potential for Arson to occur. It is essential that departmental managers actively take control of their areas and report any specific concerns to the Fire Safety Team. Refer to WHTM 05-03 part f for further information relating to the control of Arson.

#### **4.9 Dangerous Substances and Explosive Atmospheres Regulations 2002 (DSEAR)**

The HDUHB must ensure that it implements the appropriate controls in accordance with the DSEAR Regulations 2002 to manage any dangerous substances which may increase the risk and potential for explosive atmospheres to occur within any of its premises. Due to the nature of our business the HDUHB will inevitably require the use of chemicals and or dangerous substances, which if used, stored, or operated incorrectly (not in accordance with stipulated guidelines) and without adequate controls has the potential to create explosive atmospheres.

It is imperative that a suitable and sufficient risk assessment be carried out by staff to control the risks, where required. If there is any doubt or concerns, staff must contact the Fire Safety Team and/or Health and Safety Managers for further advice and guidance.

#### **4.10 Site Control and Contractors**

HDUHB must ensure that it implements appropriate controls for contractor access for all its premises. The HDUHB has a Control of Contractors policy and any contractor who is appointed by the HDUHB must comply with the policy at all times they are on HDUHB property.

A site induction will be required by the maintenance department or the Fire Safety Team.

Contractors are required to sign in correctly (and out following completion of the work) at one of the acute sites, in order to obtain an official contractors badge before any work commences.

The work activity, use of materials, equipment used and the location of work must also be discussed with a member of the estates/maintenance team in detail to assess the corresponding risks and to determine if any associated permits are required.

This includes work that may be carried within a designated confined space, specific requirements for access to these areas have been implemented by the HDUHB and must be continually adhered to at all times.

Contractors may be asked to leave the site where there is evidence of inappropriate behaviour or evidence of poor workmanship.

For further information please refer to HDUHB's control of contractor's procedure and confined space policy documents.

#### **4.11 Unwanted Fire Signals**

HDUHB acknowledges the importance and the benefits of reducing false alarms and unwanted fire signals throughout all of its premises.

HDUHB will ensure the promotion of fire safety at all times to help reduce the occurrence of fire and unwanted fire alarm signals. This will be a regular feature covered during all fire safety training and fire safety groups. Records of fires, false alarms and unwanted fire signals are recorded locally by the FSM and reported to NWSSP-SES annually. The FST must analyse statistics regularly with respective managers to ensure there is ongoing commitment and agreed solutions in which to reduce them. Refer to WHTM 05-03 part H for further information relating to reducing false alarms and unwanted fire signals.

#### **5.0 Fire safety training:**

It is essential that HDUHB has a workforce that is suitably informed, instructed and trained and that they are provided with the necessary learning to support the organisation's fire safety management system.

The Regulatory Reform (Fire Safety) Order 2005, the Health and Safety at Work etc. Act 1974, The Management of Health and Safety at Work Regulations 1999 and Firecode, place a responsibility not only on management, but also on all staff to take care to avoid injury to themselves and others. Therefore all employees have a responsibility to be aware of and comply with the fire procedures in the workplace. The HDUHB has devised a detailed plan on how it will conduct its fire safety training programme and who should attend.

#### **5.1 Fire Safety Training Programme**

A detailed Fire Safety Training Programme has been prepared by the Fire Safety Team, which considers the needs of the entire organisation. It is paramount that staff receive the correct type of training for the area that they are contracted to work in. This takes into account the risks present in the premises/area (identified through the fire risk assessment process), the number of people at risk and the responsibility of staff in an emergency.

Managers who are specifically responsible for staff must ensure that each member of staff within their control is assigned to the correct training programme (Refer to training needs analysis (TNA) Appendix A) and encourage the need for training. It is then the responsibility of individual members of staff to book the training relevant to their type of work and or place of work, making the booking directly with the Fire Safety Team who will deliver the training session. Bespoke training can either be delivered at the place of work or at a suitably agreed location (classroom) for high risk areas such Critical Care & Theatres.

It is not the responsibility of the Fire Safety Team to ensure training is booked for staff, the Fire Safety Team will provide the expertise to deliver the training. Whilst making sure they are as flexible as possible to accommodate specific needs (times) of staff groups. They will also be responsible for devising new and innovative ways in which training can be delivered and improved upon for the organisation. A minimum number of 5 members of staff will be required to formulate a training session.

Individual prospectuses outlining the various training programmes are available on the Learning and Development Website. These have been developed to describe the various types of training, who should attend and the expected learning outcomes.

The Fire Safety Training Programme, which is periodically reviewed, broadly identifies the following training: Refer to appendix A in the fire safety policy for a detailed analysis on all training.

## **5.2 Fire Safety Awareness E-Learning**

All new staff starters must complete the online e-learning fire safety training module as part of their induction process. All staff regardless of their role should receive a local induction by line management immediately on commencement of work in their workplace.

Where bank and / or agency staff are utilised for in-patient areas, the departmental managers (or nominated deputy) are responsible for ensuring that they complete the combined Module 1 & 2 fire module and assessing their competency to ensure they have an appropriate level of understanding in order to work safely within that area.

The outcome of this may require the departmental manager (or nominated deputy) to undertake an immediate fire induction covering the key principles and risks within the area of work.

For new staff working in community in-patient areas, departmental managers (or nominated deputy) must also assess staff competency, any queries or concerns can be communicated with the respective Fire Safety Advisor to discuss training needs and competency concerns.

### 5.3 Combined Modules 1 & 2 - General Fire Safety Training

These levels of training are delivered on a face to face basis via Teams.

For those staff requiring a Level 1 competency, the e-learning module should be completed on a two-yearly basis. For those staff requiring a Level 2 competency (nursing staff working in inpatient areas or those who would be expected to assist with the evacuation of patients), the e-learning module should be completed annually. Bespoke face to face sessions can be arranged for high risk areas such as Critical Care & Theatres in the interim.

### 5.4 Module 3 - Fire Response Team Training

This is a detailed **face to face** training session for staff who have a specific role to play within the Fire Response Teams, for example, Clinical Site Managers (FRT Leader) porters (including evacuation lift training), estates staff (electricians & boiler men) and any other specifically named personnel.

This will be delivered face to face annually by the Fire Safety Team. The training will be specific and will cover all the necessary details for staff to perform their duties correctly.

The course will also include a short question and answer section to test competency of staff and their learning.

Staff can if required use the e-learning module if they so wish as a refresher, however this will not be recorded as a competency on the ESR system.

### 5.5 Module 4 – Fire Safety Warden Training

This is a specific **face to face** training session provided by an external trainer, for those members of staff who have been chosen by management (or have volunteered themselves) to become fire safety wardens for their departments. A fire safety warden is a non-enforcing supporting role, to assist with the management of fire safety precautions at a local departmental level. The training for this aims to cover the core principles of a fire safety warden role. Staff will be provided with all the necessary information to become a warden for their department. The course will cover the following:

1. To help promote fire safety within their workplace.
2. To act as the eyes and ears of the department.
3. To monitor fire safety in your workplace.
4. Actively adopt good fire safety at all times.
5. Be aware of significant changes in your work place.
6. Assist where possible during an evacuation if present.



7. Report issues and concerns to management and estates for rectification.

The course will also include a short question and answer section to test competency of staff and their learning will be accredited.

Staff can if required use the e-learning module if they so wish as a refresher, however this will not be recorded as a competency on the ESR system.

## **5.6 Module 5 - Senior Managers Training**

This is a specific **face to face (via Teams)** training session delivered every three years specifically aimed at managers (of 8B and above) who have a direct responsibility for staff. This session is designed to raise the awareness of fire safety responsibilities and to highlight what is required of them as identified under the Regulatory Reform (Fire Safety) Order. This session will be delivered by one of the Fire Safety Advisors.

Refer to appendix A in the fire safety policy for a detailed analysis on all training.

### **Training Records**

Records of the training provided are retained by the Fire Safety Team and copies are issued to the ESR team for centrally recording. Details include:

- Fire safety training course provided;
- Name of the person giving the training
- Content of training given;
- Recommended intervals for staff training.

In addition to the training needs analysis and induction training program, a series of fire drills has been developed to test and refine the response procedures. Details of all fire drills, including the associated debriefing, are retained by the Fire Safety Advisers.

## **6. Monitoring arrangements**

### **6.1 Fire Safety Audit**

Annual fire safety audits are conducted in accordance with WHC (04)010 using the intranet based Fire Audit Information System facilitated by NWSSP-SES on behalf of the Welsh Government.

The fire safety audit is divided into two main sections and includes various sub-sections:

Level one: HDUHB wide fire safety issues;

Level two: Site Specific fire safety issues.

The fire safety audit is submitted annually for evaluation, by the prescribed date. All issues identified are to be actioned accordingly.

## **7. Other Fire Safety Related Policies and considerations.**

### **7.1 Policies.**

Please refer to “Control of Contractors Policy” – “Confined Space Policy” – “Waste Management Policy” and “Low Voltage Electrical Safety Policy”

### **7.2 Smoke Free Policy.**

HDUHB operate a completely smoke free policy. HDUHB does not tolerate smoking within any of its premises and grounds and this policy must be fully adhered to at all times.

All staff are encouraged to discuss concerns with the fire safety team if they witness smoking and where there is evidence of smoking “hotspots”.

For further information, please refer to HDUHB’s Smoke Free Policy

### **7.3 Smoke Free Policy**

The HDUHB has developed a smoke free policy (No-293) which sets out its aims and objectives to ensure compliance with the smoke-free premises and vehicles (Wales) Regulations 2020. This policy is also fully aligned with the strategic aims contained in the Welsh Governments – A Smoke-free Wales Tobacco Control Strategy and Delivery Plan 2022-2024.

The Smoke Free Policy requires that all Hywel Dda University Health Board sites are smoke free. This includes, but it is not limited to all owned or leased buildings, wards, residential units, structures, outdoor areas, grounds, car parks and vehicles.

The policy identifies how HDUHB will fulfil its obligation to provide, as far as possible, a Smoke Free working environment for its employees, contractors, visitors and people in its care. It also recognises that this policy may have a significant influence on the thinking and attitudes towards smoking in the wider community. As a result, HDUHB will work in partnership with and actively support other agencies and community groups who are promoting a non-smoking environment.

### **7.4 Car Parking/Roads**

The designated fire roads on all HDUHB’s premises must be adequately maintained, they must be clear of obstruction at all times to allow for emergency vehicle attendance.

### **7.5 Waste Management**

The collection, storage and disposal of waste will be undertaken on a regular basis in accordance with the HDUHB’s waste policy and procedures. Storage containers of an approved type will be strategically placed, they must be locked and secured at all times.

## 7.6 Furniture and Textiles

It is essential that the contents of premises comprising furniture, textiles, fixtures and fittings, including mechanical and electrical equipment, receive careful consideration and selection in order that they will fulfil the aims of the fire strategy.

Any new or replacement furniture and textiles should be requisitioned through the Procurement Department who must ensure that they comply with the detailed guidance contained Firecode WHTM 05-03 Operational Provisions Part C – Textiles and Furniture.

Damaged furniture and textiles must be removed and repaired or replaced to meet the above guidance.

Donated furniture or textiles from whatever source must meet the above standards. The Fire Safety Team should be consulted if there is any doubt about the suitability of any item.

All soft toys in Paediatric Wards and Children's Centres should comply with the above guidance. Commercially produced toys should already meet the requirements; however, donations of homemade toys and other donations should not be accepted if they do not comply with the requirements.

## 8. SCHEDULE OF premises SITE MANAGERS

The HDUHB has a nominated premises manager for each individual site, who will be expected to **champion** all fire safety issues throughout their areas of control. This should be the person who has day to day overall management control for that site, (for example - Acute Site Manager, Community Site Manager) therefore possessing the authority and ability to communicate issues throughout that site and equally with other nominated managers who have area specific responsibilities to manage staff.

A copy of nominated premises managers with fire safety responsibilities is available on request from the Fire Safety Manager, any queries relating to the responsibilities of these roles, must be discussed with the Fire Safety Manager directly.

Where premises are shared or where premises are rented, then reference must be made to respective Fire Safety Management Plan, co-ordination and arrangements must be made with the landlord to ensure management arrangements are clearly defined.

## 9. Procedures for Reporting Fires (Wales)

Health Technical Memorandum 05-01

Managing Healthcare Fire Safety – Welsh Edition 2006

More serious outbreaks such as fires involving death, injury, large scale evacuation or damage on a large scale are to be reported immediately to the Welsh Government (with an assessment of the cost involved, if possible). This is to be done through the Site Specific Internal Major Incident Plan Reporting structures.

## 10. Appendices

HYWEL DDA UNIVERSITY HEALTH BOARD

**APPENDIX A – TRAINING NEEDS ANALYSIS FOR FIRE SAFETY**

Fire Safety Training will be delivered throughout the Health Board in the following way. This is to ensure consistency in the quality and effectiveness of the training on a corporate basis.

Training	Who Should Attend?	Brief description of course	Competency Assessed	Approx. Duration	Course Facilitator	Update Required	Comments
<b>Induction</b>  <b>MANDATED</b>	All new staff joining the Health Board	New staff starters are expected to undertake the online e-learning fire safety module.	Y- Random questions as part of session	1.0 to 1.5 Hours	Learning & Development.	This is dependent upon staff roles in the HB and what category of training staff are assigned to. Staff must ensure they attend the appropriate session and that training is kept up to date.	All bookings through the Staff Development Training Programme.
<b>Combined Modules 1 &amp; 2</b>  <b>General &amp; Specific Fire Safety Training</b>  <b>MANDATED</b>	All Employees	A <b>face to face</b> lecture giving an awareness of General & Specific Fire Safety procedures. Training items to include:  <ol style="list-style-type: none"> <li>1. Common causes of fire.</li> <li>2. Fire Triangle.</li> <li>3. What to do on discovering a fire.</li> <li>4. How to raise the alarm.</li> <li>5. Alarm sounds.</li> <li>6. Types of firefighting equipment.</li> </ol> (Please note there is no practical element in this session).	Y- Questions will be included at end of training session.	1.5 – 2.0 Hours	Fire Safety Advisors	Annually for all staff that work within an in-patient area and would be expected to assist with patients during an evacuation.  Biennially for all other staff that fall outside of the above scope.	To book onto this session please see dates and booking details on the Learning and Development prospectus page here. <a href="http://howis.wales.nhs.uk/sitesplus/862/page/43236">http://howis.wales.nhs.uk/sitesplus/862/page/43236</a>  This training can take place via teams.  For be-spoke training, sessions will only be delivered where there are more than 5 participants.

<p><b>Combined Modules 1 &amp; 2 continued...</b></p> <p><b>MANDATED</b></p>		<p>Importance of fire compartmentation.</p> <ol style="list-style-type: none"> <li>7. Evacuation principles/strategies.</li> <li>8. Bariatric or Plus Size Patients.</li> <li>9. Practical use of evacuation aids.</li> </ol> <p>(Ward evacuation techniques in accordance with the specific fire evacuation strategies will also be covered)</p>	<p>Y- Questions will be included at end of training session.</p>	<p>1.5 – 2.0 Hours</p>	<p>Health Board Fire Safety Advisers</p>		<p>To book onto this session please see dates and booking details on the Learning and Development prospectus page here. <a href="http://howis.wales.nhs.uk/sitesplus/862/page/43236">http://howis.wales.nhs.uk/sitesplus/862/page/43236</a></p>
<p><b>Module 3</b></p> <p><b>Fire Response Team Training</b></p> <p><b>MANDATED</b></p>	<p>Staff who have been designated with a specific role to play for fire safety (excluding wardens)</p>	<p>An advanced <b>face to face</b> training session, which also covers elements of Level 1 and Level 2 training. Training will be specific and will involve practical demonstrations covering a range of activities for staff as identified below</p> <ol style="list-style-type: none"> <li>1. Members of the fire response team.</li> <li>2. Key Estates staff – Boiler man/Duty Electricians and other operational staff.</li> <li>3. Incident recording staff.</li> <li>4. Porter training / lift operating.</li> </ol>	<p>Y- Questions will be included at end of training session.</p>	<p>2.0 – 2.5 Hours</p>	<p>Fire Safety Advisers</p>	<p>Annually</p> <p><b>Note.</b> The on line e- learning module can also be accessed to support this learning if required, but it is not mandated.</p> <p>There is no competency issued for e-learning</p>	<p>The FSA will also be responsible for co-ordinating and arranging the bookings for this category of training for the sites they are responsible for to ensure staff are trained.</p>

<p><b>Module 4</b></p> <p><b>Fire Safety Warden Training</b></p> <p><b>MANDATED</b></p>	<p>Staff who have been designated or volunteered as Fire Safety Wardens for their departments</p>	<p>A specific <b>face to face</b> training session, which aims to cover the core principles of a fire safety warden role. Staff will be provided with all the necessary information to become a warden for their department. The course will cover the following:</p> <ol style="list-style-type: none"> <li>1. To help in the management of fire.</li> <li>2. To act as the eyes and ears of the department.</li> <li>3. To monitor fire safety at all times and regularly assess your workplace</li> <li>4. Actively adopt good fire safety principles at all times.</li> <li>5. Be aware of significant changes in your workplace.</li> <li>6. Take swift action for evacuation when necessary.</li> <li>7. Understand the various types of evacuation equipment.</li> <li>8. Report issues and concerns to management and Estates.</li> <li>9. Practical use of firefighting and evacuation equipment</li> </ol>	<p>Y- Questions will be included at end of training session. This training is certified.</p>	<p>2.0 – 2.5Hours</p>	<p>Externally appointed service provider (Accredited training)</p>	<p>Annually</p>	<p>This training is to be arranged via the Fire Safety Advisors.</p> <p>Departmental managers will be expected to nominate staff as fire safety wardens within their departments. The HB must hold a register of all fire wardens.</p>
<p><b>Module 5</b></p> <p><b>Senior Managers Training</b></p> <p><b>MANDATED</b></p>	<p>Principal and Senior Managers,</p>	<p>A specific <b>face to face</b> training session specifically for site managers/senior departmental managers who are 8B and above. This session is designed to raise the awareness of responsibilities that</p>	<p>Y- Questions will be included at end of training session.</p>	<p>1.5 Hours</p>	<p>Fire Safety Advisors</p>	<p>Biennially</p> <p>This must be attended by managers who have direct control of staff</p>	<p>This training will be facilitated by staff attending the Health &amp; Safety Managers Induction dates</p>

	<p>Departmental Managers at 8B and above.</p>	<p>managers have for fire safety as identified by the Regulatory Reform Fire Safety Order (2005).</p> <ol style="list-style-type: none"> <li>1. The role of the responsible person and what this means.</li> <li>2. Looking at our fire safety policy and our management arrangements</li> <li>3. Understanding our training needs analysis</li> <li>4. The importance of effective co-ordination and communication.</li> <li>5. Looking at appropriate measures to reduce and minimise risk.</li> </ol>				<p>and who have a departmental or premises management responsibility.</p> <p>Note. The on line e- learning module can also be accessed to support this learning if required, but it is not mandated</p> <p>There is no competency issued for e-learning</p>	
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## SUMMARY EQUALITY IMPACT ASSESSMENT – 242 Fire Safety Policy

<b>Organisation:</b>	Hywel Dda University Health Board
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<b>Proposal Sponsored by:</b>	<b>Name:</b>	Richard Jupp
	<b>Title:</b>	Head of Fire Safety
	<b>Department:</b>	Estates

<b>Policy Title:</b>	Fire Safety Policy
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<b>Brief Aims and Objectives of Policy:</b>	<p>The Hywel Dda Health Board acknowledges the Welsh Assembly Government's fire safety policy statement published under cover of WHC (2006)74 and aims to meet the primary objectives required by the Assembly to:</p> <ul style="list-style-type: none"><li>• Minimise the incidence of fire throughout the Hywel Dda Health Board estate; and</li><li>• Minimise the impact from fire on life safety, delivery of service, the environment and property.</li></ul> <p>The objectives of this policy are:-</p> <ul style="list-style-type: none"><li>• to state HDUHB's commitment to manage the fire safety of our organisation and to ensure compliance with the regulatory requirements</li><li>• To clearly set out the responsibilities for fire safety within the organisation</li><li>• To outline the arrangements in place to ensure fire safety throughout the organisation</li></ul>
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	In addition to this policy there will be site specific fire safety management plans to define local arrangements
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<b>Was the decision reached to proceed to full Equality Impact Assessment?</b>	<b>No</b>
	The policy is designed to protect and ensure the safety of all individuals, irrespective of any protected characteristic. Provision is made within the policy for those who may need assistance in the event of a fire.
<b>If no, are there any issues to be addressed?</b>	<b>Yes</b>
	<b>Review 2023</b> A number of references to he/she or him/her were replaced with Gender Inclusive language, i.e. they or their

<b>Is the Policy Lawful?</b>	<b>Yes</b>
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<b>Will the Policy be adopted?</b>	<b>Yes</b>
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	<b>If no, please record the reason and any further action required:</b>	

<b>Are monitoring arrangements in place?</b>	<b>Yes</b>	
	Any complaints received in relation to equality, diversity or human rights will be addressed on an individual basis and appropriate action taken.	

<b>Who is the Lead Officer?</b>	<b>Name:</b>	Richard Jupp
	<b>Title:</b>	Head of Fire Safety
	<b>Department:</b>	
<b>Review Date of Policy:</b>	Three yearly.	

Signature of all parties:	Name	Title	Signature
	Paul Evans	Head of Estates Risk & Compliance	
	Jackie Hooper	Equality and Diversity Advisor	
	Richard Jupp	Head of Fire Safety	<b>Review January 2023</b>
	Alan Winter	Senior Diversity & Inclusion Officer	13/02/2023

**Please Note: An Action Plan should be attached to this Outcome Report prior to signature**

No action plan required as no negative impact has been identified.