TPP 431 – Policy & Procedure

Policy on Fire Safety, Prevention & Compliance

Key Points

- This policy will ensure that there is a planned, prepared, organised and practiced response to fire and fire alarms which could cause disruption to the Trust's normal service.

- This policy will promote a safe working environment for staff, visitors and patients and highlight the actions that will be taken by both managers and staff to reduce the risk of fires and unwanted fire signals.

- This policy will ensure that all potentially hazardous fire and fire safety issues are identified, assessed, recorded and acted upon appropriately.

- Fire Wardens will be appointed in each ward / department to assist in applying the provisions of the Fire Safety Legislation and will be regarded as a competent person following sufficient training experience or knowledge to assist their line manager.

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Version Control Sheet

Version	Date	Policy Lead(s)	Status	Comment
V1	Apr 2007	Head of Health & Safety (Colin Pole)	Draft	Updated to reflect current legislation and Trust Policy
V2	Jun 2007	Head of Health & Safety (Colin Pole)	Final	Issued
V3	Jun 2009	Head of Health & Safety (Colin Pole)	Draft	Reviewed
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V4.1	Feb 2010	Head of Health & Safety (Colin Pole)	Final	Ratification by TMT
V4.2	May 2012	Health & Safety Advisor (Fire) (Trevor Hudson)	Draft	Updated to reflect current legislation
V4.3	Jul 2012	Health & Safety Advisor (Fire) (Trevor Hudson)	Draft	Reviewed to meet PRG requirements

Document Location

Document Type	Location
Electronic	Trust Intranet
Paper	Health & Safety Department

Related documents

Document Type	Document Name
Strategy	Risk Management Strategy
Policy	TPP 121 Incident and Serious Incident Reporting Policy
Policy	TPP 405 Health & Safety Policy
Policy	TPP 424 Policy on Trust Induction and Essential Training
Policy	TPP 432 Manual Handling Policy
Policy	TPP 501 Hospital Command and Coordination
Policy	TPP 501d Hospital Evacuation Plan

Contents

1.   Introduction

1.1   The Trust has a duty to provide and maintain, so far as is reasonably practicable:

- A safe place of work

- An alarm system that will notify Staff / Patients / Visitors of any danger from fire

- Fire fighting equipment appropriate for the risks likely to be encountered

- Competent and safety conscious personnel

1.2   Heatherwood and Wexham Park Hospitals NHS Foundation Trust will take a positive approach to fire prevention, fire safety and the importance of fire training.

1.3   This policy will provide a safe working environment for staff, patients and visitors for the provision of suitable and sufficient fire safety equipment, training and evacuation procedures so that if potential dangers arise it can be either averted or minimised to an acceptable level.

1.4   Heatherwood & Wexham Park Hospitals NHS Foundation Trust is committed to the provision of a service that is fair, accessible and meets the needs of all individuals.

2.   Scope of the Policy

2.1   This policy and procedure applies to all members of staff employed by The Trust.

3.   Definitions

3.1   **Fire:** The result of heating any substance until it releases flammable gasses which are then ignited or reach their spontaneous combustion temperature and auto ignition occurs.

3.2   **Fire Fighting:** The act of attempting to or succeeding in extinguishing a fire.

3.3   **Fire Extinguisher:** An item supplied specifically for extinguishing of or reducing the spread of fire.

3.4   **Fire Alarm:** A method of notifying staff patients and visitors that there is an actual or potential danger of fire in their location and which can be actuated by either automatic or manual means.

3.5   **Activate Fire Alarm:** To start the fire alarm operating.

3.6   **Fire Compartment:** A fire resisting room or structure that limits the spread of fire and smoke to other rooms or structures.

3.7   **Fire Door:** A door that is fire resisting and allows access and egress from fire compartments.

3.8   **Access:** To gain entry to.

3.9   **Egress:** To depart from.

3.10   **Fire Safety:** A proactive approach to prevention or suppression of fire by the inclusion of fire resisting building design and construction, the inclusion of automated fire fighting systems as well as the provision of training in fire and procedures, the use of fire extinguishers and evacuation procedures.

3.11   **Fire Risk Assessment:** An inspection of the Trusts work places to confirm that they conform with fire regulations which apply to Trust premises and the purpose that they are being used for.

3.12   **Fire Wardens:** Are staff nominated to manage fire safety responsibilities in the workplace along with any other work duties they may have.

3.13   **Emergency Co-ordinator:** Is a member of staff who is not responsible for the fire safety or evacuation of a location but is responsible for liaising with the Fire Warden of the affected location and any other concerned parties. This role is covered by the Senior Manager, Clinical Site Manager or Estates.

4.   Purpose of the Policy
4.1   The purpose of this policy is to provide clear guidance for fire safety for the Trust ensuring that safe practice is adhered to in accordance with the Regulatory Reform (Fire Safety) Order, all Regulations, and various Health Care Technical Memorandum 05 03.

4.2   The main aim of this policy is to:
*   Prevent or reduce the process of fire and in doing so limit dangers to life and damage to property

*   Educate staff in what to do in the event of a fire or a fire alarm sounding and in doing so creating a controlled environment and prevent panic

*   Prevent or reduce unwanted fire signals and reduce complacency for fire signals which occur with repetition

4.3   This policy has been developed so that departments can react in the safest way within their individual requirements and in doing so:
*   Evacuate in the event of a fire if required

*   Call the fire service if they believe that there is a danger of fire (via switchboard)

*   In the event of a false fire alarm, decline the fire service being called and prevent unnecessary disruption and discomfort to the patients

4.4   The Trust recognises the need for the implementation of efficient and practical training and education programmes on fire at Trust Induction for new staff and Essential Training for all staff as well as practical fire drills.

5.   The Policy
5.1   This policy will ensure that there is a planned, prepared, organised and practiced response to fire and fire alarms which could cause disruption to the Trust's normal service.

5.2   This policy will promote a safe working environment for staff, visitors and patients and highlight the actions that will be taken by both managers and staff to reduce the risk of fires and unwanted fire signals.

5.3   This policy incorporates all relevant statutory legislation in relation to fire, fire alarms and fire safety. All staff are affected by this legislation, and must consult this document when in doubt.

5.4   This policy will ensure that all potentially hazardous fire and fire safety issues are identified, assessed, recorded and acted upon appropriately.

5.5   Fire Wardens will be appointed in each ward / department to assist in applying the provisions of the Fire Safety Legislation and will be regarded as a competent person following sufficient training experience or knowledge to assist their line manager.

5.6   The Trust may employ outside agencies and specialist external advisors to ensure compliance with the requirements of Fire Safety Legislation / Procedure.

5.7   The Trust will make available advice, guidance and help for all managers and employees.

5.8   Where it is not possible to avoid potential hazards, a suitable risk assessment will be made and appropriate measures will be taken to implement safe systems of work in order to reduce the risk of injury to the lowest level reasonably practicable.

6.   Duties / Organisational Structure

6.1   **Chief Executive Officer (CEO):** Has overall responsibility for the Trust, including the provision of a safe working environment and the safety of staff, visitors and patients. The Chief Executive Officer has delegated the Executive operational responsibility of this policy to the Director of Corporate Affairs.

6.2   **The Trust Board:** Will receive, evaluate and act upon information on fires, fire alarms and fire safety from the Business Safety Committee, the Health & Safety Advisor (Fire) and the Health & Safety Department.

6.3   **Director of Corporate Affairs (DoCA):** Is the nominated Executive lead for Health & Safety and chairs the Business Safety Committee.

6.4   **The Business Safety Committee:** Will agree the content and monitor the progress of any fire safety action plans following any reports or risk assessments. They will also process information for rapid escalation of critical concern as necessary.

6.5   **Health & Safety Advisor (Fire):** Will provide effective fire safety training that is suitable and sufficient for the requirements of the staff and promote good practice in line with current legislation and Trust Policy. The Health & Safety Advisor (Fire) will:

•   Carry out fire risk assessments and inform the appropriate persons of any items raised

•   Advise on training, information and support to all managers and staff on problems relating to fire safety, training and equipment

•   Attend relevant organisational and departmental meetings

•   In conjunction with the Estates Department advise on all new facilities including new builds, refurbishment of existing structures and internal fitments including furniture and decoration.

6.6   **Head of Health and Safety:** Acts as the Fire Safety Manager for the Trust and is responsible for the co-ordination of Fire Safety prevention and compliance on a

day to day basis throughout the Trust and for the escalation of issues or concerns to the CEO / DoCA.

6.7 **Estates Department:** Will include the Health and Safety Advisor (Fire) in all planning, progress meetings and completion of work to a satisfactory standard of all new build structures or refurbishment. The Estates Department will:

- Carry out monthly inspections on fire fighting equipment in communal areas in locations such as the Plant / Boiler / Lift motor rooms etc and ensure that an inventory is held

- Provide an engineer to silence or reset the actuating alarm if it is confirmed that there is no danger from fire or smoke

- Ensure that a Portable Appliance Test (PAT) of all portable appliances is carried out and the removal of those that fail to a place of safety and appropriately label those that pass

- Issue work permits for all work processes that could be regarded as a potential fire source as well as for work on fire alarms and any fire safety systems.

6.8 **Switchboard:** Will automatically receive an alarm call and notify all persons who are required to respond to the fire alarm. Switchboard will:

- Wait for the allotted time of two minutes before contacting the fire service

- Send out a message to inform all persons who are required to respond to the fire alarm using the bleep system if and when the fire service has been called.

- Advise the Health & Safety Advisor (Fire) by the bleep system of all fire alarm actuations and fires.

6.9 **Security:** Will respond to all fire alarms and ensure no unauthorised access to suspected or actual fire affected areas.

6.10 **Fire Wardens:** Will ensure that all persons are aware of an actuating fire alarm and how to respond to the alarm, check that the area is clear and will close (if safe to do so) all doors and windows as they exit. Fire Wardens will:

- Report the status of the location they have come from to the Senior Manager, Emergency Coordinator or Fire Service at the Fire Assembly Point

- Liaise with their department manager and the Health & Safety Advisor (Fire) regarding any fire related issues

- Attend update meetings with the Health & Safety Advisor (Fire) by arranged meetings on a twice yearly basis.

6.11 **Emergency Co-ordinator:** Will liaise with the Fire Warden of the affected area(s) either at their evacuation location or in situ if they have not evacuated. They must ascertain all relevant information regarding the fire, fire alarm and potential dangers. The Emergency Co-ordinator will:

- Be responsible for escalating or de-escalating an incident in the absence of advice from the Health & Safety Advisor (Fire) and the Fire Service

- Liaise with the Fire Service upon their arrival at the scene of the incident and inform them of the situation by passing on all information gained from the Fire Warden(s) involved in the incident and what actions have been taken.

6.12 **Clinical Site Managers:** Will be alerted of fire alarm actuations and attend if required. The Clinical Site Manager will be required to silence the actuating alarm if it is confirmed that there is no danger from fire or smoke out of hours.

6.13 **On Call Director / Manager:** Will assume responsibility for the organisation if required to attend a suspected or actual fire and will carry out a risk assessment following the Command and Coordination Policy.

6.14 **Porters:** Will locate the Red Porters Bag and attend the required location of a suspected or actual fire. The Porter will liaise with the Clinical Site Manager, Senior Person or Emergency Co-ordinator as appropriate and be on hand to assist Trust staff and / or the Fire Service until notified that their services are no longer required.

6.15 **Learning and Development:** Will facilitate all training by providing a suitably equipped training location and retain records of attendance.

6.16 **Managers:** Will ensure that sufficient time is allocated for fire training and that staff attend all relevant Trust Induction / Essential Training. Managers will ensure that staff are familiarised with this policy and ensure control measures including the correct use of fire doors and fire exit routes are maintained. Managers will also nominate staff to be trained as Fire Wardens for their area.

6.17 **Employees:** Are responsible for adhering to this Policy at all times. Employees are in conjunction with the Head of Health & Safety, the Health & Safety Advisor (Fire) and all Trust Managers responsible for ensuring all safety / hazard notices in relation to fire are sited correctly, are clearly visible and are appropriate to the action required.

The Procedure

7.   Risk Assessment
7.1   A Fire Risk Assessment will be carried out by the Health & Safety Advisor (Fire) on an annual basis or as the needs change to confirm that wards and departments, but overall the Trust is meeting the requirements of the Regulatory Reform (Fire Safety) Order, Healthcare Technical Memorandum 05 03, The Buildings Act 1984 and Associated Regulations and Approved Documents A to N standard for construction, fire exit routes, fire fighting equipment and directional signage.

7.2   A risk assessment must result in the elimination or minimisation of the risk of injury so far as reasonably practicable. It is a structured approach to analysing risks and identifying control measures. Risk assessments must be reviewed if there is reason to suspect that it is no longer valid or if there has been a significant change in the matters to which it relates.

7.3   The Fire Risk Assessment will be undertaken by the Health & Safety Advisor (Fire) in line with the requirements of the Trust Risk Management Strategy. The outcome of the Risk Assessments will be fedback to the individual managers for their areas.

8.   Accident / Incident / Near Miss Reporting

8.1   Using the Trust's Incident Reporting Policy TPP121, staff must report all accidents / incidents / near misses including fires and false alarms so that the causes of problems are recorded and can be investigated by the Health & Safety Advisor (Fire) with any trends being identified and improvements made where appropriate.

8.2   The Reporting of Injuries, Diseases and Dangerous Occurrence Regulations 1995 (RIDDOR) requires that death, major injury or notification of an employee suffering from a reportable work related disease, dangerous occurrence or injury which result in more than seven days absence (including non working days) must be reported to the Head of Health & Safety who will report this to the Health & Safety Executive by the quickest possible route.

8.3   Fire, fire alarm and fire fighting incident details must be forwarded to the Health & Safety Advisor (Fire) and will be investigated and a written report issued for fires and fire fighting incidents. The report will be entered on to the Datix Risk Management System and forwarded to the Manager of the affected area and when appropriate it may be necessary to liaise with the Head of Health & Safety.

9.   Departmental Procedures
9.1   Managers must create a departmental emergency procedure for their individual departments in conjunction with the Health & Safety Advisor (Fire).

9.2   Departmental procedures must include the location for assembly following an evacuation, when the fire alarm is tested and what sound it makes or if it is a strobe light. It must also include where and what type of fire extinguishers the department has and the lockdown or securing procedures for dangerous substances and medical gasses.

9.3   All personnel within the department are to be familiarised with the procedure on their induction to the department, on a regular basis, when any relevant alterations are made and when the old procedures are no longer relevant.

9.4   A copy of the Fire Safety Handbook is to be readily available in all wards / departments for the information of all existing staff and the education of new, bank and agency staff.

9.5   The Fire Safety Handbook must be kept inside the red folder and in a prominent location for access by all staff and contains flowcharts and information for all actions to be taken in the potential or actual event of a fire.

9.6   The Fire Safety Handbook will be kept inside the red folder along with the Departmental Fire Safety Logbook. The Departmental Fire Safety Logbook contains information and steps required to be undertaken and log sheets for Fire training and the testing of various fire safety equipment. These log sheets are to be completed on a regular basis in line with the requirements of the Logbook.

10.   Alarms & Fire Doors
10.1   Intermittent alarms will become activated and sound or light up for between three and six seconds, then become silent for the same amount of time. This will continue until the alarm is either silenced or reset.

10.2   The Senior Person / Emergency Coordinator will give the order to close all doors and windows.

10.3   If available they will dispatch a member of staff to the fire alarm panel to offer assistance to the affected area or carry information back to their own area.

10.4   The Senior Person / Emergency Coordinator will prepare to evacuate the affected area if required.

10.5   All break glass call points in public areas that are vulnerable to misuse and call points that could be confused with 'exit door release buttons' are to be protected with a transparent protective cover which is easily opened to allow the device to be operated.

10.6   All fire doors are to be kept in the closed position with the following exceptions:
- The door needs to be open for access or egress, but are to be closed after safe passage through them and not wedged or blocked to keep them open

- The doors are held open by fire alarm activated release mechanisms which will allow the doors to close fully on activation of the fire alarm.

10.7   The use of unauthorised means of retaining a fire door in an open position is strictly prohibited.

11.   Actions to be Taken in the Event of a Suspected or Actual Fire
11.1   In the event of a full fire alarm sounding in any location the Senior Person in that location will assume command.

11.2   If there is no obvious fire, smoke or unexplained smell of burning and no danger to themselves and others the Senior Person will conduct a physical investigation into the cause of alarm.

11.3   The Senior Person will contact switchboard by phoning 3333 informing them that there is either a fire or no apparent fire. This process must be completed within two minutes so the fire service is not called if they are not required.

11.4   The Senior Person is responsible for informing evacuated staff, visitors and patients that it is safe to re enter the affected location if the fire service are not called

11.5   Following the event the Senior Person of the of the department where the alarm has been actuated must complete a DATIX report giving details of the incident.

11.6   When a fire alarm actuates Switchboard will notify the Health & Safety Advisor (Fire), Clinical Site Manager, Estates Department, Porters and Security but not the fire service at this stage of the proceedings.

11.7   Switchboard will note the time of the alarm actuating and wait for the affected area to call them within two minutes (as per the flowcharts in the Fire Safety Handbook) and notify them if there is a fire or a false alarm in their area.

11.8   If the call from the affected area states that there is a fire, smoke or an unidentified smell of burning then Switchboard are to call the fire service by dialling 999 immediately giving full details and state "There is a Fire".

11.9   If after two minutes there has been no call from the department where the alarm is sounding Switchboard are to call the fire service by dialling 999 giving full details of

the fire alarm that has actuated and explain that there has been no contact from the affected area after the agreed two minute delay.

11.10   Switchboard will contact the Health & Safety Advisor (Fire), Clinical Site Manager, Estates Department, Porters and Security by the bleep system and inform them if the Fire Service has been called.

11.11   Switchboard will contact the affected area by phone if this is possible and inform them that the Fire Service has been called.

11.12   If the call from the affected area states that it is a false alarm then Switchboard are to take no further action and are to let the Clinical Site Manager, Estates, Porters or Security attend the affected area as they may still be required.

11.13   Following the actuation of a fire alarm a member of the Estates Department will make their way to the given location.

11.14   If the fire alarm affected location is unoccupied or a communal area with no direct ownership Estates or the Clinical Site Manager attending the incident will be deemed as the Senior Person.

11.15   If a full fire alarm is sounding and there is a fire, smoke or unidentified smell of burning but no danger to personnel, if appropriate, Estates or the Clinical Site Manager can silence the alarm for the convenience and comfort of any staff, visitors or patients who may be in or around the affected area as it can be a considerable period of time before the alarm can be reset. Estates will not reset the alarm until asked to do so by the Fire Service.

11.16   If a full fire alarm is sounding and there is no fire, smoke or unidentified smell of burning and no danger to personnel Estates and the Clinical Site Manager must investigate the cause of the alarm and take appropriate action. The Clinical Site Manager is to silence the fire alarm but they must not reset the alarm system as this will require the services of Estates as failing to do so correctly could cause further false alarms if the cause is not alleviated.

11.17   The designated Porter will make their way to the Porters Lodge and collect the Red Porters Bag and attend the given location.

11.18   If the fire service is called:
- The Porter is to remove the reflective waist coat / tabard from the bag and put it on

- The Porter is to give the Red Bag to the Clinical Site Manager, Senior Person or Emergency Coordinator in attendance

- The Porter must make their way to the designated hospital entrance gate and await the arrival of the fire service

- The Porter is to direct / accompany the fire service as appropriate to the affected location

11.19   If the fire service is not called then the Porter is to remain at the scene of the original call until the Clinical Site Manager or Estates informs them that they and the contents of the Red Bag are no longer required.

11.20   Post incident the Porter is to retrieve the Red Bag, remove the reflective waist coat / tabard and re-pack if used and return the Red Bag to the Porters Lodge.

12.   **Command and Coordination**
            The On Call Duty Director and Manager must be informed of all fire alarm actuations. They will assess the situation and attend if required to do so.

12.1   Either the On Call Duty Director or Manager, if in attendance, will assume responsibility for the Trust.

12.2   The On Call Duty Director will be responsible for keeping the CEO informed of significant fires and talking to the press if required.

12.3   The Security Department will attend all fire alarms and prevent unauthorised persons from entering the alarm affected area and offer assistance to authorised persons to enter areas where they hold any keys or door combinations for fire fighting and safety purposes. They will remain in an unsecured area following a fire or fire alarm until it is secured or other appropriate precautions have been taken.

13.   **Hospital Evacuation Procedure (Command and Coordination)**
13.1   The Senior Person / Emergency Coordinator will take control and check the immediate area for fire smoke or an unidentified smell of burning.

13.2   If there is no smoke but there is an unidentified smell of burning the Senior Person must reassure staff, patients and visitors and order a check of all rooms and cupboards. If no smoke or unidentified smell of burning is found they can remain in situ and Switchboard must be contacted by calling 3333 within two minutes.

13.3   If there is smoke and / or fire the Senior Person will give the order to evacuate.

13.4   All persons must evacuate the location without panicking or stopping to collect personal effects with the last person leaving closing all doors and windows as they leave (if possible) this task is normally performed by the Fire Warden. The Senior Person is to call 3333 within two minutes.

13.5   Patient evacuations must be carried out in the priority order of:
            • Those in immediate danger

            • Those with the furthest distance to travel to safety

13.6   All evacuees must assemble at the designated assembly location where the Senior Person or Fire Warden will either take the role call or confirm the location is empty and report their findings to the Senior Person of the Trust present or the Fire Service.

13.7   All staff will remain outside until an appropriate person from the Trust or the Fire Service informs them that it is safe to re-enter the building.   In the event of the evacuation taking place due to a significant fire the Head of Emergency Planning will immediately after the event conduct a 'Hot De-brief' which will be followed up by a 'Cold De-brief'.

14.   **Fire Fighting & Fire Safety Equipment**
14.1   Fire fighting must only be undertaken by members of staff who have assessed the situation and consider themselves:
            • Competent in using the fire fighting equipment

- Confident that they have the correct fire fighting medium for the item that is alight and have an escape route if it is required

- Capable of attacking the fire without endangering themselves or others.

14.2   A Fire Warden following training will:
- Be competent in the use of fire extinguishers

- Have adequate knowledge of fire prevention

- Be able to identify fire hazards

- Have a good knowledge of their local fire action plan and how to implement it

- Be familiar with any close down procedures necessary

- Be responsible for checking primary and secondary escape routes regularly

14.3   Items of fire safety equipment must not be:
- Disconnected

- Isolated

- Modified

- Relocated

- Removed

- Replaced (except with an identical item and by an authorised person)

14.4   In the event that the above is to occur this must be with prior notification and discussion with the Health & Safety Advisor (Fire).

14.5   Estates will inform the Health & Safety Advisor (Fire) immediately of any issues or malfunctions, or if equipment is moved to another location. All fire safety equipment will be suitably stored, labelled and maintained and an annual servicing contract must be maintained and enforced by Estates to ensure that the Trust complies with legislation.

14.6   Managers of all areas where fire fighting equipment is located are responsible for ensuring that equipment is available, clean and in good order at all times and that this is recorded in the appropriate areas of Departmental Fire Safety Logbook which gives details of the checks and frequency that they are to be carried out.

14.7   Managers, in conjunction with the Health & Safety Advisor (Fire), are also required to ensure that all Fire Action Notices display their departmental evacuation location and that any individual departmental procedure for the safe evacuation of their area is suitable and sufficient for their individual requirements and located in their red folder alongside the Departmental Fire Safety Logbook and Fire Safety Handbook.

14.8   When equipment is believed to be faulty employees must complete the following steps:
- Report the item for repair to their departmental manager and the Estates Help Desk, recording the job number for future reference or follow up

- Withdraw the item from use (if appropriate)

- Label the item (if appropriate)

15.   Hot Food Preparation

15.1   The preparation of hot food is only permitted in kitchen areas and staff are reminded of the following for the use of toasters, cookers and ovens:
- Only toasters, cookers or ovens provided by the Trust are to be used

- Toasters, cookers or ovens must only be used in designated kitchen areas (i.e. kitchens which are fire compartments)

- The kitchen must be fitted with a working heat detector

- The kitchen doors must be kept closed while hot food preparation (including making toast) is in progress

- Prior to using a toaster, cooker or oven staff must ensure that it is free from crumbs, food debris and all other items that may affect its performance and that the item is fit for use

- During the use of the toaster, cooker or oven the kitchen window must be open (this must be a window not a door) or the appropriate extract ventilation is switched on and working

- Staff using a toaster, cooker or oven must remain in the kitchen until the food is cooked and the cooking appliance is switched off

- If a member of staff is required to leave the kitchen prematurely then the food must be completely removed from the toaster, cooker or oven and the appliance switched off before the member of staff leaves the kitchen

15.2   It is the responsibility of all managers to ensure that any toasters in their area that are not provided by the Trust are removed and that all staff adhere to the requirements as set out above.

15.3   If the above rules are applied then there is no reason for the fire alarm to become activated.

15.4   If the rules are not adhered to or the facilities are not to the required standard the toaster will be removed immediately by the Health & Safety Advisor (Fire).

16.   Raising Awareness / Training

16.1   The Trust accepts its responsibility to provide statutory Fire training and refresher training to employees where necessary.

16.2   All staff will be provided with Fire training as part of their Induction to the Trust and thereafter every year for both Clinical and Non Clinical Staff.

16.3   Fire training attendance will be monitored and recorded by the Learning & Development department as per TPP 424 Trust Induction and Essential Training.

17.   Implementation Plan
17.1   This policy and procedure will be implemented as follows:
- The policy and procedure will be reviewed and approved Business Safety Committee before final ratification by the Policy Review Group.

- The new version of the Policy / Procedure will be placed on the Trust intranet for viewing by any member of Trust staff.

- A paper copy of the policy will be held by the Health & Safety Department for general viewing.

- A notice will be placed on the Trust intranet informing all staff of the policy.

18.   Monitoring Compliance of Policy & Procedure
18.1   The Business Safety Committee will monitor fire safety through information given to them by the post incident fire reports and fire alarm records and fire risk assessments from the Health and Safety Advisor (Fire) on a bi monthly basis.

18.2   Managers and the Health and Safety Advisor (Fire) will assess hazards / risks through Fire Risk Assessments, practices and procedures on an annual basis.

18.3   Fire related incidents will be reported by the Head of Health and Safety at the Business Safety Committee meetings in the form of a report, with trends being identified.

19.   References
- The Regulatory Reform (Fire Safety) Order 2005 SI 1541 2005

- Health Care Technical Memorandum 05

- The Buildings Act 1984 and Subsequent Regulations and Approved Documents A to N

- Health and Safety at Work etc Act 1974

- Provision and Use of Equipment Regulations 1998

- Electrical Safety in the Workplace Regulations 1989

- A Guide to the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995

- Manual Handling Operations Regulations 1992 (as amended)