Annual Fire Safety Report 2011/12

Summary:	**Summary of activity;**
	- Monitoring of fires and Unwanted Fire Signals - Risk management via the Risk Assessment Programme - Training of staff and response to emergency incidents - Planning for the future - Strategic Aims **Key findings** - Fires on site have remained the same as previous year. Unwanted fire calls are down by 20%. - Significant risks identified during the risk assessment process generally fall into one of five categories that have been placed on the Risk Register. They are Upgrade of fire alarm system, Compartmentation, Upgrade of fire doors, Storage of stock and equipment and overheating of older fluorescent lights. - Training of staff remains a challenge. The current training programme and the new e-learning module are designed to reduce the shortfall. - Day to day management of fire safety. Although performance Indicators allow us to measure the effectiveness of certain activities. Fire safety does need to be considered when dealing with, what may appear to be, routine operational decisions. **Conclusions** - Evidence would suggest that there have been improvements within some areas of fire safety management with the reduction of Unwanted Fire Signals.(UFS) - Greater emphasis on training needs to be given by managers to ensure all staff are able to follow the hospital fire routines when ever necessary. - The Strategic Aims will give us measurable indicators which will form evidence of pro-active fire safety management. **Concerns** - There are no significant causes for concerns from committees. **Actions which are being/need to be addressed from respective committees** - Work on the various action plans for identified risks needs to be continued throughout the coming year.

Action:	The Board is asked to accept the report

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Notes:

Trust objective:	Priority 1 To deliver safe, high quality care.

Legal:	Effective fire safety management is a requirement of the Regulatory Reform (Fire Safety) Order 2005.

Regulation:	

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Date	August 2012
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Audience	Trust Board Members

Introduction

Surrey and Sussex Healthcare NHS Trust (SASH) has a statutory duty to ensure that all of the premises
owned or operated by it comply with current fire safety legislation. The Trust has to ensure that suitable and sufficient arrangements are in place for the management of fire safety and the implementation of any necessary fire safety measures as required under the Regulatory Reform (Fire Safety) Order 2005.

Current fire safety law requires an employee to take a risk based approach to fire management. This will ensure significant risks are identified and adequate controls are put in place. The effectiveness of these controls will become evident by the number of fire calls on site, the number of unwanted fire signals, the effects of these calls on service delivery and the reactions of staff to a fire emergency.

Fire Safety Report 2011-2012.

The purpose of this report is to give a clear indication as to the Trust's performance in fire safety management and legal compliance.
The first section covers matters of performance over the reporting period whilst the second section looks at the aims for the coming year and performance monitoring. The final section contains specific comments on matters of day to day fire management and maintaining a safe environment.

Performance

Two areas of the East Surrey site have been audited by Surrey Fire & Rescue Service in the reporting period. They are Maple House and Phase 1. In both cases the matters raised by the fire service had already been identified as part of the on going risk assessment programme.
One point that received specific comment was the matter of the delay in dealing with the storage of stock in the Theatre Corridors and the inspector sought some confirmation as to when this matter would be resolved. However, during a subsequent follow up visit the new storage facility was being installed and the inspector acknowledged the progress being made. There was also an endorsement of the efforts made in day to day fire safety management throughout the Trust.

Fires on East Surrey Hospital site.

Fire is defined as follows;

"An incident attended by the Fire Service of uncontrolled burning involving flame and or heat and or smoke"

Fires at ESH	2010-2011	2011-2012
	3	3

There have been three fire incidents in the year although none of those have been serious in outcome.
One incident involved a toaster and two slices of bread in the Delivery Suite kitchen.
The other two involved old fluorescent light fittings. This has been a more common problem with similar minor incidents giving rise to some unwanted fire signals. The matter is on the Risk Register and a phased replacement programme for our older fluorescent lights is underway with the Head of Engineering. Much of this replacement is being completed as areas are refurbished with older lights being replaced within the specific project.

Unwanted Fire Signal (UFS)

A UFS is defined as follows;
"An incident to which the Fire Service is called and that on investigation no fire is found."
It should be noted that although many calls to the Trust are unwanted by the Fire Service they are a result of staff following Trust policy. For example a smell of burning may well prompt a member of staff to raise the alarm in accordance with the policy. However if no fire is found the fire service will record this as an UFS.

UFS's at ESH	2010-2011	2011-2012
	75	60

See appendix 1 for more detail.

Clarification as to current performance:
There has been a considerable decrease in UFS over the reporting period and in particular the last third of 2011. However the trend has been halted by a number of calls that have been caused by the actions of contractors on the various work sites around the hospital. Although this causes disruption it is a common phenomenon during major construction projects. It is encouraging to note that our UFS total is down by nearly 20% *See Appendix 1*

Fire Risk Assessments

One of the key factors of good fire safety management is an ongoing system of risk assessment and review.
During 2011- 12 considerable efforts have gone into ensuring all areas of the ESH site have current risk assessments.
On completion of fire risk assessments any significant findings that are identified during this process have been placed on the Datix Risk Register.

In addition departments at Crawley have had risk assessment reviews with no major problems being identified.

Significant Risks and Actions

Risk ID1084: Upgrade of fire alarm system to category L1. This category is the highest level of automatic fire detection for life safety and is the accepted standard for all major hospitals.

In order to deal with this matter it was necessary to undertake major upgrade to the base infrastructure. During this year that work has been completed and we are now in a position to increase the alarm coverage across the site. Currently this is being advanced during refurbishment and improvement projects.

Risk ID1003: Survey of fire compartment walls to ensure integrity.
During certain projects it became apparent that some of the fire compartment walls had, in the past, been breached and inadequate reinstatement work had been undertaken. In order

to establish how widespread this problem may be it was felt necessary to undertake a survey of the fire compartmentation so as to plan a phased works programme. As with other problems some of this work has been undertaken as part of building or refurbishment projects. Compartment walls in the former Redwood Wing have been dealt with and those in Theatres will be addressed within the refurbishment.

Risk ID 1085: Upgrade of fire doors. As a result of wear and tear along with a change in the recognised standards for fire doors it has become necessary to undertake a widespread upgrade programme across the site. The first stage of this work is now underway.

RISK ID 1131: Storage obstructing corridors within the Main Theatres
Storage in the Main Theatres will be greatly improved by development of new systems within the central store room which is due for commencement during April 2012.

RISK ID 1197: Risk of fluorescent lights overheating.
This has been a growing problem over the last two years. However, the risk is being reduced by replacement lighting during refurbishments and with a replacement programme that is currently underway.

Any minor infringements that can be dealt with immediately and are not a recurring issue may not be placed on the Risk Register but are recorded on the Fire Risk Assessment documentation.

Training

The policy over recent years has been to provide training for all staff once every year and although there has been some improvement over the past year generally this has not been achieved.
Although there is a statutory duty to ensure staff are trained in fire safety and emergency procedures it is now possible to employ a more flexible approach in respect of timescales.

During the last year new guidance has been circulated that allows trusts to deliver training by a more risk based approach. In short, staff that have direct contact with patients should receive training annually whilst support staff may have the period extended to every other year. In addition a newly developed e-learning module will enable some staff to undertake training at a time that is more convenient without the need to attend a specific venue.
Fire safety training is currently delivered via a range of courses of which there are three that have the most significance.
The main sessions are part of the Enhanced Statutory Update Programme (E.S.U.) and consist of 30 minute modules to experienced staff members in both clinical and non-clinical disciplines.
The Trust Welcome Programme (T.W.P.) provides induction fire training for all new staff. This module covers the hospital fire routines and basic fire safety.
The Open Fire Safety Module 1 is programmed throughout the year and allows staff to book onto courses at times that are more convenient to themselves and their managers. There are approx four Module 1 courses programmed each month.

As stated above the take up of fire training has not been sufficient to meet a target 200 per month and although the E.S.U and T.W.P. are well attended the Module 1 courses remain under utilised. On investigation one common factor emerges in that managers find it hard to release staff for training due to other pressures.
It is planned to launch the e-learning module in June with a static exhibition outside the restaurant and publicity throughout the Trust. Although the e-learning module will be a useful addition to the delivery of fire training it should not be seen as a cure for all ills as it will also

require some management intervention to ensure those staff eligible to use the module take up the option.

The training statistic are shown in Appendix 2

Strategic Aims for 2012-13

The strategic aims that are set out below are designed to maintain existing standards and where appropriate seek improvement.

Strategic Aim 1

To reduce the number of fire incidents and their consequences.

We will achieve this by being proactive with well focused prevention activities and measures

Key areas of focus for Aim 1:

- Risk management, prevention and education.
- Understanding departmental risk assessments.

We will measure this Aim against the following performance indicators

A1;1 The number of fire incidents on site.

A1;2 The cost of incidents to the Trust.(Fires only)

A1;3 The progress of risk assessment action plans by % of High. Moderate. Low.

Strategic Aim 2

To reduce the number of Unwanted Fire Signals (UFS) and the disruption to service delivery.

We intend to achieve this by developing a well informed workforce and effective engineered fire safety systems.

Key areas of focus for Aim 2:

- Staff behaviour and practices.
- Safe systems of work employed by contractors.
- Maintenance of fire detection & warning systems.

We will measure this Aim against the following performance indicators

A2;1 The number of calls caused by staff behaviour.

A2;2 The number of calls caused by contractors.

A2;3 Mechanical failures of the fire alarm system.

A2:4 Total number of UFS per month.
Monthly target = < 4 UFS

Strategic Aim 3

To manage fire safety in line with current laws and regulations using a risk based approach with effective action plans.

This will be achieved by a coordinated process that links fire risk assessments to the Risk Register and subsequent implementation of action plans by managers.

Key areas of focus for Aim 3:

- Fire risk assessments or reviews of all wards and departments.
- Fire safety input at the earliest point of project planning.
- Fire safety action plans that effectively address identified needs.

We will measure this Aim against the following performance indicators

A3;1 Current fire safety risk assessments in place for all areas by %

A3;2 Fire incidents on site. (A1:1)

A3;3 Enforcement action by the Fire Service.
Monthly target = 0 items.

<u>Strategic Aim 4</u>

To ensure the workforce have a sound understanding of fire safety provisions and emergency procedures.

We will achieve this by providing sufficient training sessions both face to face and via the e-learning module.

Key areas of focus for Aim 4:

- Training needs for specific work groups.
- Training that is integrated with risk assessment action plans.
- Effective control of emergency situations.

We will measure this Aim against the following performance indicators

A4;1 Numbers of staff attending fire training sessions and or E-learning. ≈ 200 per month.

A4;2 Monitoring the actions taken during fire emergencies. Satisfactory/ Unsatisfactory.

A4;3 Reviewing comments by Fire Service.
Action required/ not required.

Maintaining a safe environment.

Satisfying legal requirements and the pursuit of performance indicators can, at times, become so much the point of focus that day to day management of fire safety gets overlooked.

It is with this in mind that the following comments are made as part of this report in order to highlight how changing situations can impact upon fire safety management.

Storage

Since the hospital was opened in the early 1980s there have been considerable changes not only to the layout of the building but also in the way patients are cared for. Certain pieces of equipment, that were not so prolific in the 80s have become standard items on wards and therefore require space in which to be stored. In addition the increased requirement for effective infection control, and the change over of mattresses and beds, has also created a need for space.

As part of the Fire Advisors duties it is necessary to carryout routine audits of wards and departments in support of the risk assessment programme. It does need to be noted that one recurring problem is the storage of stock and equipments in circulation spaces such as corridors and doorways. The Progressive Horizontal Evacuation system which is a key part of the fire procedure relies upon the ability to move patients and beds from one area to another without unnecessary delay. The build up of stored items in circulation spaces could have a detrimental influence upon our ability to undertake an evacuation.

Management of storage is included in the fire safety training sessions but staff members are quick to comment that there is often little choice but to store items in such locations.

Fire Drills

The hospital fire routines are tested from time to time. This can be as a result of a legitimate actuation of the fire alarm or by a routine fire drill. Following all such occasions the actions of staff are reviewed. In most instances the routines operate effectively, however, should a matter of concern be identified remedial actions can be implemented.
It is the case that the routines have not been tested by drills involving in-patient areas. We therefore have little evidence that the routines are effective in these areas of the hospital.
A draft set of proposals for the planning and implementation of fire drills within in-patient areas is to be drawn up and will be submitted in due course.

Building Projects

The last year has seen a growing number of building projects that require specific fire safety input at both planning and construction stages.

Ensuring that all fire safety requirements are dealt with at the earliest point in the project is essential so as to avoid problems post construction. The working relationship with Capital Projects and outside agencies has been positive and constructive but there is a constant need for monitoring throughout the project. This is to ensure building works do not compromise the safety of the hospital and that of staff and patients.

Much of the Fire Safety Advisers time is spent monitoring the activities of contractors and revising the risk assessments as necessary.

Escalation

Accommodation of patients during times of extreme activity has led to beds being placed in corridors and in locations that could have a serious impact on our ability to evacuate the area.
Managers making such decisions should be aware of the fire safety implications and, if no other solution can be found, they should seek to reduce the risk as a matter of urgency.

	2010/11	2011/12	Fire 2010	Fires 2011
April	7	8		
May	5	4		
June	6	6		1
July	7	6	1	
August	4	5		
Sept	9	2	1	
October	7	3	1	1
November	11	4		1
December	6	2		
January	5	10		
February	4	8		
March	4	2		
TOTALS	**75**	**60**	**3**	**3**
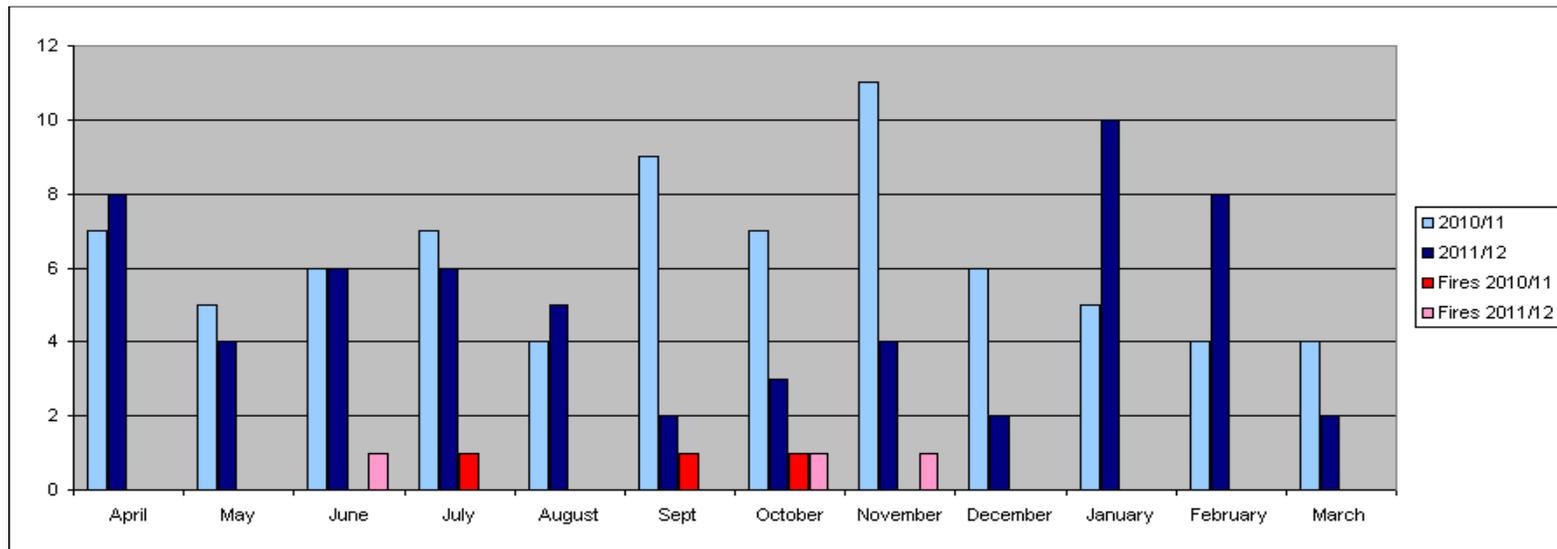
Causes of alarm actuation.

Cause of alarm	Total
Contractors activity.	13
Smell of burning.	11
Unidentified actuation.	2
Mechanical fault.	5
Light fitting.	5
Deep cleaning activity.	2
Toast.	6
Bonfires off site.	3
Patient related	4
Aerosol spray.	1
Steam from shower	3
Accidental	5
Contaminated detector	3
Total	**63**

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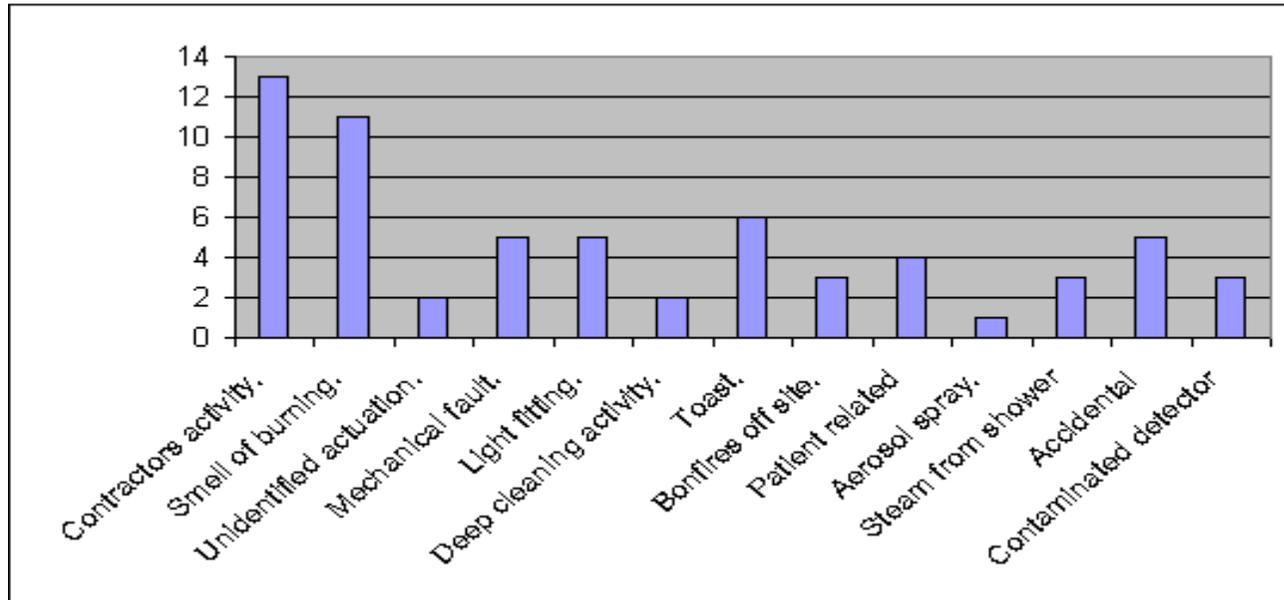
Directorate	Staffing 2010/11	Trained 2010/11	%Trained 2010/11	Staffing 2011/12	Trained 2011/12	% Trained 2011/12
CSS	580	220	38%	583	308	53%
Elective	942	257	27%	960	521	54%
Emergency	797	229	29%	803	380	47%
Estates and Facilities	299	54	18%	304	120	39%
Finance.	56	17	30%	58	13	22%
Human Resources	82	30	37%	85	55	64%
IMT	42	15	35%	48	10	21%
Medical	10	3	30%	10	7	70%
Nursing	71	51	72%	72	21	30%
WACH	504	197	39%	493	306	62%
Chief Ex Office	7	2	28%	8	1	12%
TOTALS	**3390**	**1075**	**32%**	**3424**	**1742**	**51%**

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