

## An Organisation-Wide Policy for Fire Safety

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## **Equality statement**

This document demonstrates commitment to create a positive culture of respect for all individuals, including staff, patients, their families and carers as well as community partners. The intention is, as required by the Equality Act 2010, to identify, remove or minimise discriminatory practice in the nine named protected characteristics of age, disability, sex, gender reassignment, pregnancy and maternity, race, sexual orientation, religion or belief, and marriage and civil partnership. It is also intended to use the Human Rights Act 1998 to promote positive practice and value the diversity of all individuals and communities. This document is available in different languages and formats upon request to the Trust Procedural Documents Coordinator and the Equality and Diversity Lead.

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## **1. Rationale**

Surrey and Sussex Healthcare NHS Trust consider safety from fire to be of paramount importance and is committed to ensure as far as is reasonably practicable that it has appropriate policies and procedures in place to safeguard all patients, staff and visitors from the effects of fire. The Trust is committed to comply with all statutory fire safety standards and to attain the mandatory requirements prescribed in 'Firecode' where ever reasonably practicable.

The successful application of this policy will be achieved through a strategy to provide ongoing planning, organisation, control, monitoring and review of the fire safety standards. In this way the Trust demonstrates its commitment to fire safety.

The provision of a safe environment is an essential requirement for the delivery of an effective and efficient healthcare service. The purpose of this strategy is:

- To protect people from injury from the effects of fire.
- To maintain and improve performance as an employer.
- To maintain and improve the communication of fire safety values and beliefs throughout the organisation.

The Trust Board acknowledges that effective fire safety management is a key organisational objective and is of equal importance with the financial, operational and healthcare delivery objectives of the Trust.

The allocation of responsibilities for putting this into place is outlined in this document – Fire Safety Policy. The Policy will be implemented through the provision of safe fire preventative systems covering the known risks in the Trust. These will apply Trust wide supplemented as necessary by local safe practices. This policy will be reviewed regularly to reflect organisational change.

This policy is based upon the guidance contained within Health Technical Memorandum 05-01: Managing healthcare fire safety. (Second edition 2013)

## **2 Scope**

This policy applies to all SASH staff and volunteers who work within SASH premises.

Those members of SASH who work at sites that are managed by other organisations may, in addition to this policy, be subject to the fire policy and procedures of that organisation.

## **3 Fire Safety.**

### **3.1 Purpose**

The Trust Board aims to fully discharge its statutory and management responsibilities for fire safety. The Regulatory Reform (Fire Safety) Order 2005 places a legal duty on employers to provide for a fire safe environment.

The purpose of this policy is to ensure that the Trust complies with all fire safety legislation by ensuring:

- That all risks from fire to patients, staff and all members of the public are risk assessed.
- That where reasonably practical all risks will be controlled.
- That arrangements are made for implementing a comprehensive system of fire safety management, including providing adequate information and appropriate training.

Fire safety management needs to do more than just prevent harm from the effects of fire. It must also promote best practice in the provision of better fire free environments. Through this policy the Trust aims to achieve best practice in fire safety management through the following goals:

- To promote a safe and secure environment that protects patients, staff, visitors and their property, and the physical assets of the organisation.
- To achieve effective management of fire safety through the application of suitable and sufficient risk assessment process and ongoing control, monitoring and review of the fire safety risks identified through risk assessment.
- To achieve compliance with statutory and mandatory requirements and with professional regulation.
- To provide ongoing delivery of high quality education and training in fire safety risk management skills

### **3.2 Maintaining adequate levels of physical fire precautions.**

The Trust has an extensive programme for installing and satisfactorily maintaining an adequate level of physical fire precautions designed to prevent the occurrence, the detection, and stop the spread of fires. Specialist advice in the preparation of this programme will be obtained from the Fire Safety Adviser via the Security and Fire Manager.

### **3.3 Maintenance and testing of fire appliances, alarms etc.**

The maintenance of all fire appliances, alarms, fire doors, emergency lighting, fire barriers and mechanical ventilation etc., is the responsibility of the Head of Engineering and is implemented by designated, trained engineers. These defined policies, procedures and programmes of work; maintenance and training are

essential, irrespective of any designation of hospitals or other premises under the Regulatory Reform (Fire Safety) Order 2005.

The results of tests and examinations of this equipment, together with any subsequent remedial actions, are to be recorded. The Head of Engineering will keep the record available for inspection by the Fire Safety Advisor, Fire Safety Management Committee or the Fire and Rescue Service.

### **3.4 Escape routes**

The requirement for the maintenance of escape routes, which includes corridors, staircases, lobbies and doors is laid down in the Regulatory Reform (Fire Safety) Order 2005 and the Health and Safety at Work etc. Act 1974:

- Escape routes from each area are to be adequate, clearly marked and free from obstruction at all material times.
- A simple outline plan is to be displayed in each area as appropriate, showing the relevant escape routes and fire barriers.
- It is the responsibility of individual managers or persons delegated on their behalf to ensure that escape routes are maintained.
- Managers are to ensure that any staff with disabilities are made aware of the evacuation routes.
- A visual inspection at the start of the working day or shift should be made and any obstruction or defect found must be dealt with immediately. In case of difficulty the Fire Safety Advisor or deputy should be informed. In their absence the Nominated Officer (Fire) or his/her deputies should be informed. Further checks should be made at the end of the working period to ensure that appropriate doors are shut, locked or secured and the site cleared.

### **3.5 Fire notices**

Notices detailing the action to be taken on discovering a fire and on hearing the fire alarm are to be displayed throughout the site adjacent to each manual fire alarm call point and other locations as appropriate.

All staff will be trained to assist any persons who do not use English as their first language and or those who are unable to understand the notices provided, during an emergency evacuation.

The information contained in the notices will identify the methods of:

- Raising the alarm.
- Removal of persons in immediate danger.
- Evacuation procedure and assembly point.
- Controlling the fire.
- Other actions as appropriate.

### **3.6 Building Projects**

All new projects and proposed changes to the use of any part of the premises must be reviewed by the Head of Engineering, the Fire Safety Advisor at the design and planning stage prior to the implementation of any works or changes.

During building works:

- The site of the activities and contractors should be strictly supervised and controlled, even during small works and sporadic maintenance visits etc.
- All Management staff must ensure that all necessary precautions against fire are taken.
- The Head of Engineering and Fire Safety Advisor should give advice and guidance, and keep in regular contact with such activities to check compliance with fire safety policy.
- The 'permit to work' and 'hot work permits' policy issued by the Estates Department is to be used for removal or isolation and covering of fire detectors, and use of flame producing equipment for cutting, welding and grinding, etc.
- The HSE guidance on 'Fire Prevention on Construction Sites' is a checklist of fire precautions which contractors must observe. This is to be included as part of the contract documents.
- All Trust buildings will be protected by hard wired analogue addressable fire alarm systems designed to the current BS 5839: Fire Detection and Alarm Systems for Buildings L1 standard as supplemented by the current HTM. Some deviations from this policy may be considered for small, non-patient buildings etc.

### **3.7 Fire and Rescue Service**

The Fire and Rescue Service is to be made aware of any special hazards on site e.g. radiation and biological hazards, during inspections made by them under Integrated Risk Management Planning, and are to be kept up to date with any developments in this field by the Fire Safety Advisor and Head of Engineering.

Copies of the Fire and Rescue Service's Emergency Action Plan are held in reception at Accident and Emergency and in the telephone switch room.

The location of fire fighting facilities that may be utilised by the fire service are shown in East Surrey Hospital, Fire Procedural Manual..

### **3.8 Fire training**

It is the responsibility of the Chief Executive to ensure adequate training resources are available for each category of staff. Line Managers are responsible

for ensuring that fire safety policies and particular instructions are brought to the attention of their staff and observed by them. They must make provisions so that **every** member of staff can participate in fire safety training and drills. Each member of staff is to receive fire safety instruction appropriate to their employment needs:

- Medical, clinical and ward based staff – annually.
- Scientific and technical staff – annually.
- Members of the fire team, Estates, portering and catering staff – annually.
- Non-ward based administrative staff – two yearly.
- Voluntary staff – according to the department to which they are attached.

Fire safety training will be included as part of staff induction courses. In addition, departmental induction should include fire safety issues such as location of fire exits, fire alarms, evacuation procedures etc.

Where necessary every effort will be made to adapt training delivery and materials to meet the needs of those with specific learning needs.

Permanent records of instruction received are to be kept within each department, and made available on request. A central record of all fire safety training will be maintained on the centralised training records system (OLM)

Part-time staff, Bank, agency staff, students and ancillary workers will be included in the training, and additional training will be provided for key staff e.g. Nominated Officer (Fire), members of the Fire Team and staff involved in maintenance of fire alarms etc.

Staff that do not come into contact with patients or the general public as part of their main duties are eligible to carry out fire training via the e-learning module that is available via the intranet.

### **3.9 Major fire emergency exercises**

Fire emergencies exercises will be held periodically to practice the entire or specific part of the emergency fire procedures. This will allow key personnel to practise their roles. (Responses made to genuine fire calls may be substituted for this procedure) A protocol for conducting fire drills in clinical areas is contained within the Procedural Manual

### **3.10 Replacement of furniture and textiles**

It is essential that the contents of premises comprising furniture, soft furnishings, 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 safety strategy.

Damaged furniture and textiles must be removed and repaired or replaced to meet the above guidance. Any new, donated or replacement furniture and textiles should be requisitioned through the Purchasing Department who must ensure it complies with the detailed guidance contained in Firecode.

### **3.11 Staffing levels**

The presence of an adequate number of staff who have received training in fire safety is the best line of defence against fire. This is particularly important at night when levels of activity may be reduced and staffing levels are lower.

It is the responsibility of management to achieve an agreed safe level of staffing sufficient to deal with the consequences of fire in its early stages.

Firecode requires that for each department/management unit a minimum of two fire-trained staff are to be on duty at all times. This number should be increased to a minimum of three where the number of patients exceeds thirty. This number may in turn need to be supplemented if patients are highly dependent and to ensure that the required number of trained people are quickly available at all times, for example during meal breaks, to carry out evacuation procedures in the event of fire.

### **3.12 Arson**

Hospitals and their externally and internally located storage areas are particularly vulnerable to arson attacks from intruders, confused or upset patients, visitors, unauthorised employees and others who may enter these sites. Offices, stores, including those with pharmaceuticals, may be targets for theft, and fires may be started to conceal that theft.

Identification badges must be worn at all times, particularly by contractors and Trust personnel.

The correct management of waste along with appropriate security arrangements will greatly reduce the risk of arson.

The activities of arsonists can be frustrated by alertness on the part of staff to persons acting suspiciously, and to the activities of known fire-raisers amongst patients.

All fire incidents that are staff related, either by accident or intent, will be investigated in accordance with the Trust Disciplinary Procedure.

### **3.13 Dealing with disabled people and those with special needs.**

All managers should take into account the disabilities and special needs of staff members, patients and visitors and ensure that, in the event of a fire, they are able to comply with the hospital fire routines and receive any help they may require in order to comply.

As part of the fire risk assessment process the needs of those with disabilities and special needs will be taken into consideration and where necessary specific provisions will be made. Where it is considered necessary to produce a Personal Emergency Evacuation Plan the manager will liaise with and seek guidance from the Fire Safety Adviser.

### **3.14 Fire safety audits**

The Chief Executive is required to confirm annually that the management policies regarding fire safety comply with the provisions of Firecode. To assist with this mandatory requirement, an annual fire safety audit of all Trust facilities will be arranged by the Fire Safety Advisor. The fire audit team will have full access to staff, relevant staff records, buildings and plant.

### **3.15 Car parking**

The designated fire roads on all Trust premises are to be maintained clear of obstruction at all times.

### **3.16 Unwanted Fire Signals (UFS)**

It is the aim of the Trust to reduce incidents of UFS to as low as reasonably practical. Should any trends be identified the Trust will seek to put in place any necessary measures in order to reduce such calls.

### **3.17 Electrical Appliances and testing.**

All portable electrical appliances that may be connected to the Trust's electrical circuits must undergo Portable Appliance Testing (PAT) prior to being used on Trust premises.

Only chargers that are approved by the manufacturer of a specific appliance are to be used on Trust premises.

## **4 Responsibilities**

### **4.1 The Trust Board**

The Trust Board has overall accountability for the activities of the Trust. They will ensure that the requirements of current Fire Safety legislation and Firecode are met. The Board will exercise an overview of the fire safety arrangements for the Trust to ensure that the levels of fire safety are adequate to meet the Trust's legal obligations, and where necessary to consider options to improve those levels. The Board should assist the Chief Executive in ensuring that sufficient resources are allocated within the annual business plan to meet statutory and Firecode responsibilities.

### **4.2 The Chief Executive**

The day to day responsibility for the organisation of fire safety arrangements within the Trust rests with the Chief Executive (The Responsible Person) in respect of all premises within the Trust. It will be the responsibility of the Chief Executive, to ensure:

- The Trust has an effective Fire Safety Management system.
- Fire safety will be a standing agenda item at the Trust's Executive Board meetings.
- Agreed programmes of investment in fire safety improvements are accounted for in the Trust's business plan.
- An annual audit of fire precautions will be undertaken to advise the Executive Board on the current state of the fire precautions within the Trust premises.

### **4.3 Executive Director at Board Level.**

To assist him/her the Chief Executive will appoint an executive director at board level who will have the nominated responsibility for fire safety matters:

- Responsible to the Trust Board and the Chief Executive for the implementation and regular review of the Trust Fire Safety Policy and procedures.
- Establish and maintain the Fire Safety Management Committee.
- Advise the Executive Board of any serious fire incidents.
- Ensure at least annually, a special report is presented to the Executive Board informing them of the current state of fire safety in all premises for which the Board is responsible.

### **4.4 Security and Fire Manager.**

Responsible for:

- an awareness of all fire safety features and their purpose;

- fire safety risks particular to the organisation;
- requirements for disabled staff and patients (related to fire procedures);
- ensuring appropriate levels of management are always available to ensure decisions can be made regardless of the time of day;
- compliance with legislation;
- development and implementation of the organisation's fire safety policy;
- development of the organisation's fire safety strategy;
- development of an effective training programme;
- co-operation between other employers where two or more share the premises;
- the reporting of fire incidents in accordance with current practice;
- monitoring and mitigation of unwanted fire incidents;
- liaison with enforcing authorities;
- liaison with other managers;
- administration of the Fire Safety Management Committee.
- monitoring of inspection and maintenance of fire safety systems.”

## 4.5 Fire Safety Advisor/Trainer

Will be responsible for advising management on professional and technical fire matters and for monitoring the condition of fire precautions in Trust premises. The responsibilities and duties will include:

- Advising on the application of the provisions of legislation, Firecode and other guidance.
- Co-ordinate the implementation of the Trust's Fire Policy and assists the Chief Executive and Directors to carry out their fire safety responsibilities under the Trust Fire Policy.
- Liaise with managers to provide advice to help them fulfil their legal responsibilities, especially with regard to staff fire safety training.
- Visit, inspect and survey all Trust premises to ensure that existing fire provisions are being maintained, and to prepare reports for upgrading fire precautions on a priority basis.
- Liaise with Fire Authorities and other statutory bodies to ensure that the Trust fulfils its statutory duties with regard to existing and proposed premises.
- Act as the advisory member to the Fire Safety Management Group.
- Prepare training programmes and ensure that appropriate and adequate fire safety training opportunities are available to all staff, and ensure accurate records are maintained.
- Manage and supervise the work of the fire safety assessors and trainers.
- Keep accurate records of all fire incidents, investigating fires and unwanted fire calls as appropriate and where necessary in conjunction with the local fire and police authorities.
- Ensuring that reports are prepared and forwarded in accordance with HTM 05-03: Part H: Reducing unwanted fire signals in healthcare premises.

## 4.6 Nominated Officer (Fire)

The Chief Executive may nominate a member of staff as Nominated Officer (Fire) for Trust premises who will be appointed to assist the Fire Safety Advisor by:

- Ensuring that prompt and appropriate responses are made to identified contraventions of fire safety practices.
- Ensuring that appropriate fire response teams are established, adequately staffed and trained.
- Being responsible for the co-ordination and direction of staff actions at serious fire incidents, in accordance with the emergency plan.
- Ensuring that a report for each fire incident or unwanted fire call (false alarm) is prepared immediately following each call and forwarded to the Fire Safety Advisor without delay.
- To bring to the attention of the Fire Safety Advisor any contravention that may have a serious and continuing adverse effect on fire safety procedures.

## 4.7 Fire Wardens

Fire Wardens will be appointed in all wards and departments:

- In ward areas the Fire Warden will normally be the Senior Nurse on duty.
- In non-patient areas the fire warden will be appointed by, and be responsible to, the Head of Department.
- Fire wardens will be made aware of the precise location which they will be expected to cover and the extent of their responsibilities within that location. These responsibilities are detailed in the Fire Safety Procedures.

## 4.8 Line Managers

All staff with line management responsibility must ensure that fire safety instructions are brought to the attention of, and observed by, their own staff and that every member of their staff participates in fire safety training. They should also ensure that:

- Departmental induction should include identification of fire safety issues such as location of fire exits, fire alarms etc.
- They should ensure that all fire hazards identified to them are brought to the attention of the Fire Safety Advisor.
- They delegate particular duties, such as Fire Warden, to other staff members to assist in ensuring the effectiveness of the emergency procedures for the department.
- They ensure that their staff regularly inform them that the arrangements continue satisfactorily and that any hazards, difficulties or deficiencies that may arise are brought promptly to their notice.
- Any staff members who are disabled or have limited mobility are given the necessary support when required to evacuate the building.

## **4.9 All staff**

The effectiveness of this Policy depends not only on physical precautions taken to prevent the occurrence and spread of fires and the means for dealing with such outbreaks, but the co-operation of every member of staff, **without exception**, to ensure an understanding of their part in the arrangements. Co-operation should be encouraged from the highest levels. An involvement in fire precautions must, therefore, be regarded as a basic duty by all staff generally, and as an essential obligation for all staff with management responsibility particularly.

Any staff members with special needs relating to their disability or long term impairment should bring these to the attention of their line manager in order to ensure compliance with the hospital fire instructions.

## **4.10 Other authorised users, students, contractors etc.**

The co-operation of every authorised user of Trust premises is required to ensure that they understand their part in the fire safety arrangements. Employees of other bodies regularly based on Trust premises are required to attend Trust fire safety training sessions on a regular basis.

## **4.11 Fire Safety Management Committee**

The Regulatory Reform Fire Safety Order 2005 requires employers to consult employees in connection with fire safety and improving fire precautions. This consultation will be via the Fire Safety Management Committee.

The Fire Safety Management Committee will determine the standards of fire prevention and protection throughout the Trust and to keep under review the measures taken by the Trust to ensure the threat from the risk of fire to employees, patients, visitors and other users is minimised.

The objective of the Committee is the promotion of co-operation between managers and staff in instigating, developing and carrying out measures to ensure effective fire safety management

The Security and Fire Manager is responsible for administration of the committee.

Membership of the Fire Safety Management Committee:

- Chairperson: Executive Director with responsibility for Fire Safety
- Safety Advisers:
  - Health and Safety Manager.
  - Fire Safety Advisor.
  - Resilience Manager.
- Members:
  - Security & Fire Manager (Deputy Chairperson)
  - Head of Engineering

- Representatives from the following:
  - Diagnostic Imaging.
  - Facilities.
  - Portering.
  - Site team.
  - Intensive Care Unit/HDU.
  - Theatres.
  - WACH.
  - General Surgery.
  - Medical Services.
  - HSDU.
  - Pharmacy.
  - Pathology.
  - H.R.
  - P.G.E.C.
  - E.D.

Quorum: The quorum for meetings shall be:  
Chair or Vice Chair.  
Fire Safety Advisor  
One third of Divisional representatives  
At least one member of the Site Team.  
At least one clinician.

Invitations may be extended to additional members to attend the group as required.

The secretary to the Committee will be the clerical support officer who will be an ex officio and not a member of the committee.

## **5 Compliance Monitoring arrangements**

### **5.1 Monitoring**

This policy will be monitored for its effectiveness by the Fire Safety Adviser by:

- Undertaking audits as part of the fire risk assessment programme.
- Producing incident rate reports for Divisional management meetings.
- Producing statistical training reports for Divisional management meetings.

Any identified areas of non compliance will be brought to Fire Safety Management Committee. Those that require an urgent intervention will be brought to the attention of the directorate concerned for remedial action.

## **5.2 Monitoring policy implementation**

The Trust process for dissemination of policies will be followed as described in the Organisation Wide Policy for the Management and Development of Procedural Documents.

This includes:

- posting on the dedicated Policies and Procedures page of the Intranet
- notification to all staff of the new policy on the next available E-Bulletin.
- Management cascade.

Where necessary specific training will be provided in order to ensure this policy can be fully implemented.

## **6 Training to ensure compliance with this policy**

Training will be provided within the Trust Mandatory and Statutory Training Programme and with specific training session as identified as necessary.

## 7 References and associated documents

### References

Organisation	Author	Date of Publication	Title of document
H.M. Government		June 2005	Regulatory Reform (Fire Safety) Order 2005
H.M. Government		April 2010	The Fire Safety (Employees Capabilities) ( England) Regulations 2010
Department of Health		April 2013	Health Technical Memorandum 05-01: Managing healthcare fire safety

### Associated documents

Organisation	Author	Date of Publication	Title of document
HM Government		2006	Fire Safety Risk Assessment – Healthcare Premises
HM Government		2015	Construction (Design & Management) Regulations 2015
HM Government		1974	Health and Safety at Work etc. Act
HM Government		1995	Disability Discrimination Act 1995.
HM Government		2002	Dangerous Substances and Explosive Atmosphere Regs. 2002
HM Government		1996	Health & Safety (Safety Signs + Signals) Regulations 1996

Organisation	Author	Date of Publication	Title of document
HM Government		2002	Control of Substances Hazardous to Health Regulations 2002
HM Government		2006	Approved Document B- (Fire Safety) Building Regulations 2006.
HM Government		1989	Electricity at Work Regulations.
HM Government		1994	Electrical Equipment (Safety) Regulations 1994
HM Government		1988	Furniture and Furnishings (Fire) (Safety) Regulations 1988.
HM Government		1995	Toys (Safety) Regulations 1995

## 8 Glossary/ explanation of terms used in this document

Acronym/ Abbreviation/ Term	Meaning
Reasonably practicable	Ensuring a risk has been reduced so far as is reasonably practicable, is an assessment which involves weighing the risk against the sacrifice needed to make further reductions.
Firecode	Firecode is the generic title of a suite of Health Technical Memoranda that cover all aspects of fire safety in healthcare organisations and represents “best practice” for the NHS
Fire Safety Order. (FSO)	This is a commonly used term when referring to the Regulatory Reform (Fire Safety) Order 2005 which is the main piece of fire safety legislation that applies to all premises other than single private dwellings.
Responsible Person.	The person ultimately responsible for fire safety as defined by the Regulatory Reform (Fire Safety) Order 2005. For the majority of cases in healthcare organisations the responsible person will be the employer. In a hospital NHS trust the responsible person is likely to be the Trust Board.
Unwanted fire signal (UFS)	A call to the fire service which upon arrival has no evidence of uncontrolled fire.

## 9 Document Control

This procedural document supports:

Standard(s)/ Key Lines of Enquiry:	Para/ I.D. no.	Standard/title
Regulatory Reform(Fire Safety) Order 2005		All articles
The Fire Safety(Employees Capabilities) ( England) Regulations 2010		All sections.
HTM Firecode Documents		All documents

### Consultation record

Relevant service	Speciality, Sponsor or User Group name	Individual's name	Job title	Date consulted	Date feedback received
Trust wide	Health & Safety Committee				

## 9 Document Control (continued)

### Change History

Version	Date	Author/ Lead	Job title	Details of Change	Ratificati on body	Archiving location
1	2007	Roger Tickner	Fire Safety Adviso r	New Policy		
2	May 2008	Colin Pink		Human rights statement and minor format changes		
3	Dec 2008	Bill Howkins	Fire Safety Adviso r	Equality issues		
4	Aug 2012	Bill Howkins	Fire Safety Adviso r	Changes to definitions and management structure.		
5	Feb 2016	Bill Howkins	Fire Safety Adviso r	Change of format and minor ammendments		

## Appendices

## Appendix 1      Equality Analysis (EqA)

By completing this document in full you will have gathered evidence to ensure, documentation, service design, delivery and organisational decisions have due regard for the Equality Act 2010. This will also provide evidence to support the Public Sector Equality Duty.

<b>Name of the policy / function / service development being assessed</b>	<b>An Organisation-Wide Policy for Fire Safety</b>	
<b>Date last reviewed or created &amp; version number</b>	2016	
<b>Briefly describe its aims and objectives:</b>	Surrey and Sussex Healthcare NHS Trust consider safety from fire to be of paramount importance. The Trust is committed to comply with all statutory fire safety standards	
<b>Directorate lead</b>	Director of Information and Facilities.	
<b>Target audience (including staff or patients affected)</b>	All staff , volunteers and patients	
<b>Screening completed by (please include everyone's name)</b>	<b>Organisation</b>	<b>Date</b>
Bill Howkins	Estates and Facilities	02/02/2016

<b>Equality Group (Or protected characteristic):</b>	<b>What evidence has been used for this assessment?</b>	<b>What engagement and consultation has been used</b>	<b>Identify positive and negative impacts</b>	<b>How are you going to address issues identified?</b>	<b>Lead and Timeframe</b>
<b>Age</b>	All staff	Assessed	None	n/a	n/a
<b>Disability</b>	All staff	Assessed	None	n/a	n/a
<b>Gender reassignment</b>	All staff	Assessed	None	n/a	n/a
<b>Marriage &amp; Civil partnership</b>	All staff	Assessed	None	n/a	n/a
<b>Pregnancy &amp; maternity</b>	All staff	Assessed	None	n/a	n/a
<b>Race</b>	All staff	Assessed	None	n/a	n/a
<b>Religion &amp; Belief</b>	All staff	Assessed	None	n/a	n/a
<b>Sex</b>	All staff	Assessed	None	n/a	n/a
<b>Sexual orientation</b>	All staff	Assessed	None	n/a	n/a
<b>Carers</b>	All staff	Assessed	None	n/a	n/a