



Fire Safety Management Protocol Fire Risk Assessment

This procedural document supersedes: CORP/HSFS 14 v.6– Protocol 2



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Amendment Form

Please record brief details of the changes made alongside the next version number. If the procedural document has been reviewed **without change**, this information will still need to be recorded although the version number will remain the same.

Version	Date Issued	Brief Summary of Changes	Author	
Version 7	January 2023	 Updated into the new APD format. Change of Executive Sponsor. Revised protocol in accordance with AE audit and recommendations: - Amended section 5 to read 'Trust as an employer and as represented by the Trust Board see article 5(3) FSO'. Amended Duty Holder paragraph 3.1 - removed 'usually the Senior Person in charge'. Amended Fire Safety Manager section 5.4 (bullet point 6) to read 'Compile a quarterly report of Fire Risk Assessments reviews undertaken for submission to the Fire Safety Committee and Trust Health and Safety Committee. Minor format changes. 	Howard Timms	
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1 INTRODUCTION

This protocol contributes to the fulfilment of developing fire safety protocols as stated in Health Technical Memorandum 05-01: Managing healthcare fire safety (second edition). This protocol addresses 'Fire Risk Assessment'.

2 PURPOSE

This protocol will be implemented throughout all premises, or parts of premises, which the Trust owns, occupies or those for which the Trust is responsible for maintaining the building fabric and/or services.

The safety of patients, visitors, staff, and other building users from fire relies upon the fire precautions present within the building. Current fire safety legislation in the form of the Regulatory Reform (Fire Safety) Order 2005 requires the 'Responsible Person' to take general fire precautions so as to ensure the safety of 'Relevant Persons'. The extent of the fire precautions necessary must be determined by an assessment of fire risk.

To discharge its legal duties, the Trust is required to undertake a process of fire risk assessment for each area for which it is responsible and/or owes a duty of care to the area's occupants.

3 DUTIES AND RESPONSIBILITIES

The Trust as an employer and as represented by the Trust Board, see article 5(3) FSO, has overall responsibility.

Whilst it is incumbent upon all staff to highlight fire hazards and risks through their line management, key personnel have particular duties and responsibilities identified in the Regulatory Reform (Fire Safety) Order 2005, and are necessary to ensure that appropriate fire risk assessments and actions are undertaken as follows:

3.1 Duty Holder / Responsible Person

- Will usually exercise and undertake control.
- Ultimately responsible for taking general fire precautions.
- Ultimately responsible for ensuring that fire risk assessments are undertaken.
- Ultimately responsible for ensuring that actions to mitigate risks are identified.
- Ultimately responsible for ensuring that the significant findings of the fire risk assessments and details of dangerous substances, are recorded and communicated to staff and other Responsible Persons.
- Responsible for monitoring the completion of fire risk assessments and derived action plans.

3.2 Persons with Control

- Responsible for taking general fire precautions in the area(s) for which they have control.
- Responsible for ensuring that fire risk assessments are undertaken and maintained to reflect any material changes that take place in the area(s) for which they have control.

- Responsible for requesting a review of the fire risk assessment in response to changes that may invalidate the fire risk assessment by virtue of breaching the assessment parameters.
- Responsible for ensuring that actions to mitigate risks are identified for the area(s) for which they have control.
- Responsible for ensuring that the significant findings of the fire risk assessments and details of dangerous substances, are recorded and communicated to staff in the area(s) for which they have control.
- Responsible for ensuring that actions relating to significant findings directly under their control are completed.
- Responsible for ensuring that the fire risk assessment action plan is updated with completed actions and that the Fire Safety Advisor is notified of completed actions.
- Responsible for informing the Fire Safety Advisor of changes to any personnel identified as a 'Person with Control'.
- Where more than one Person with Control exists for an area, those individuals must coordinate with each other to ensure that the fire risks identified are communicated between all Persons with Control, and appropriate fire safety measures are set in place to mitigate the risks identified.

3.3 Fire Safety Advisor

- Provide technical support in the form of performing the role of the Fire Risk Assessor by:
 - Undertaking fire risk assessments on behalf of the Person with Control.
 - Recording the fire risk assessment, significant findings, and details of dangerous substances.
 - Evaluating the risks identified and scoring in a manner appropriate to the Trust's risk register and risk management processes.
 - Determining the appropriate actions to mitigate the fire risks identified.
 - Determining the appropriate timescales for actions to be completed.
- Informing the Person with Control of the outcomes of the fire risk assessment including:
 - The significant findings.
 - The control measures in place to mitigate fire risks.
 - Any shortcomings in the fire safety arrangements that require further action.
 - Any necessary actions, the timescale for such actions to be completed and, identifying those responsible for completing such actions.
 - Identifying the minimum information that must be communicated to relevant staff and others.
- A handover checklist of the fire safety arrangements in a format that can be readily understood and acted upon.
- The parameters of the risk assessment which, if breached, may invalidate the risk assessment and therefore necessitate a review (i.e. identify what may constitute a significant change).
- Liaising with other estates & facilities team members to advise of their responsibility to ensure that actions relating to significant findings directly under their control are completed.

3.4 Fire Safety Manager

- Maintain a register of significant findings across the Trust and monitor and report on the completion of actions identified.
- Determine an appropriate programme of desktop and physical fire risk assessment review based upon:
 - The potential risk to life should a fire occur.
 - The presence of hazardous processes and/or substances.
 - The likelihood of change that may invalidate the fire risk assessment.
- Undertake a review of the fire risk assessment on behalf of the Person with Control in accordance with the identified programme.
- Report instances where the Person with Control has failed to request a review in response to operational changes that may have invalidated the fire risk assessment, to the relevant Divisional Director.
- Compile a quarterly report of such instances of a failure to request a review in response to significant changes for submission to the Fire Strategy Group.
- Compile a quarterly report of Fire Risk Assessments reviews undertaken for submission to the Fire Safety Committee and Trust Health and Safety Committee.
- Compile a monthly report of specific and/or common risks identified to the Operational Fire Safety Committee.
- Compile a 6 monthly report of progress against the actions identified as being necessary to mitigate the fire risks identified.

4 **PROCEDURES**

The fire risk assessment process commences with a request to the Fire Safety Manager for a fire risk assessment to be undertaken on behalf of the Person with Control. Such a request should include details of the area to be the subject of the fire risk assessment together with details of the directorate under which the area operates, and the person(s) with control.

4.1 Selection of Fire Risk Assessors

It is important that any person undertaking a fire risk assessment is competent to do so. All persons appointed to provide fire risk assessments must demonstrate their competence by means of training, qualification, and experience.

There are a number of third-party accreditation/registration schemes for fire risk assessors, and the use of third-party accreditation is considered to be an appropriate means to assist in determining an assessor's competency. However, there is currently no third-party accreditation/registration scheme focussed on the specific risks associated with healthcare premises, and it is possible to be accredited and/or registered to one or more of the following schemes without any knowledge of the specific challenges of fire safety in healthcare premises. To this end, any assessor providing fire risk assessments must be able to demonstrate extensive knowledge of healthcare fire safety irrespective of accreditation/registration with any of the following schemes:

- IFE Register of Fire Risk Assessors administered by the Institution of Fire Engineers.
- FIA Fire Risk Assessment Register administered by the Fire Industry Association.

- Nationally Accredited Fire Risk Assessors Register– administered by the Institute of Fire Safety Managers.
- IFPO Fire Risk Assessors Register administered by the Institute of Fire Prevention Officers.
- Fire Risk Assessors Certification Scheme administered by Warrington Certification Ltd.
- BAFE (British Approval for Fire Equipment) Scheme SP205 Part 1.

4.2 Preparation

Prior to undertaking the fire risk assessment, the Fire Risk Assessor should ensure that they clearly define the extent of the fire risk assessment area, determine whether the area has third party areas embedded within it, or is an area embedded within third party accommodation, and obtain an up-to-date fire strategy drawing of the area concerned.

Where available, the Fire Risk Assessor should consult any previous fire risk assessments applicable to the area and any adjacent areas that may affect the fire safety of the area to be risk assessed. In the case of an area that has third party areas embedded within it, or an area embedded within third party accommodation, the Fire Risk Assessor should obtain the significant findings of each third-party fire risk assessment for the area concerned.

The Fire Risk Assessor should obtain a unique Fire Risk Assessment Number, conforming to the numbering convention used by the Trust, for the assessment to be undertaken and use this number on all records, reports and communications relating to the fire risk assessment.

The scope of the fire risk assessment should be agreed with the Fire Safety Manager and the Person with Control, particularly in respect of:

- Whether the condition of compartmentation is assessed, particularly above ceilings and in other hidden voids.
- Whether the provision of fire dampers is assessed.
- Whether the condition of fire doors is assessed.

A suitable fire risk assessment proforma should be agreed with the Fire Safety Manager prior to undertaking the fire risk assessment. The proforma must adequately address the specific requirements of the healthcare environment particularly in respect of:

- The potential dependency of patients.
- The reliance upon staff for a safe evacuation.
- The potential for hazardous processes, substances, and environments.

A suitable time for the fire risk assessment visit should be agreed with the Person with Control to ensure their availability during the risk assessment visit since the Fire Risk Assessor will require their input in order to complete the fire risk assessment.

4.3 The Fire Risk Assessment Visit

The Fire Risk Assessor should attend at the agreed time and meet the Person with Control to discuss the process of the fire risk assessment visit and to obtain the information necessary for the completion of the fire risk assessment. This will include:

- The hours the area is in use.
- Where applicable, the number and dependency of patients.
- The number of occupants other than patients or staff.

- The number of staff present at different times of the day.
- The number of occupants other than patients that may require assistance to evacuate.
- Whether any members of staff been allocated specific fire safety or fire response roles.
- The presence and nature of any specific hazards that have been previously identified.
- The records of staff fire safety training.

The fire risk assessment visit should continue with the Fire Risk Assessor visually inspecting all parts of the assessment area to identify the hazards present, the people that may be at risk from those hazards, and to evaluate the necessary measures to remove or reduce those hazards and protect anyone that may be at risk from fire.

The outcome of the assessment should be recorded on the agreed fire risk assessment proforma.

Upon completion of this part of the fire risk assessment, the Fire Risk Assessor should communicate the preliminary findings to the Person with Control. This should include:

- The fire hazards and risks identified.
- A preliminary assessment of the control measures in place to mitigate fire risks.
- A preliminary assessment of any shortcomings in the fire safety arrangements.
- Any preliminary actions that can be undertaken or initiated by the Person with Control to mitigate any shortcomings.

It is beneficial if this communication is conducted as a walk through the assessment area with the Fire Risk Assessor pointing out the preliminary findings of the risk assessment.

4.4 Addressing the Risk

All risks identified should be addressed using a process of remove, reduce and mitigate.

By applying this process, the first stage seeks to remove any hazards that are present. This may be achieved by removing any hazardous equipment or materials from the area being assessed or restoring an area in which the use has been changed to its previous non-hazardous condition.

Where the removal of any hazard is not possible, for instance where combustible materials necessary for the operation of the department are being stored, it may be necessary to reduce the hazard by reducing the quantity of combustible materials present to the minimum necessary to facilitate the department operation.

The hazards that remain once all action has been taken to remove them and reduce them as far as practicable should be mitigated by the application of appropriate managerial and ultimately physical measures.

4.5 Risk Rating

Where measures to address the risks identified have not been completed at the time of the fire risk assessment, or a residual risk remains, each risk item must be evaluated and rated in a format appropriate to the Trust's risk register. The Trust currently utilises a 5 x 5 risk rating matrix, and all fire risks should be assessed and rated in a similar format.

When rating fire risks, the factors to consider are:

• The likelihood that it will occur, which consist of the probability of the event happening and the effectiveness of the controls in place.

• Consequence of the outcomes.

Likelihood that the hazard will occur is assessed by the combination of two variables, probability, and existing controls.

- Probability is the consideration of how often the activity takes place, the current conditions / situations in which it takes place and the perception (what could happen), or fact (what is known to happen). The two need to balance.
- Control is a consideration of the existing level of control over the hazard, the likely consequences, whether appropriate and adequate measures are in place and are they likely to have the desired effect.

Consequences may be harm to a person or damage to the property (buildings, vehicle plant, equipment or personal belongings), the environment, financial loss or reputation.

N.B. in practice it's generally the case that the lower the control level, the higher the risk. In the case of a deficiency in fire precautions, the probability of their failure is certain, and since these precautions provide the necessary control of a fire, the likelihood of the consequences of a fire being realised is almost certain and should therefore be scored as 5.

All fire risks should be scored by referring to the following matrices which reflects the Trust's approach to assessing all types of risks.

Likelihood Rating	Descriptor
(5) Almost Certain	Will undoubtedly happen/recur possibly frequently e.g., will recur most days, weeks or months.
(4) Likely	Will probably happen/recur but is not a persistent issue e.g., will occur at least once a year. (Human Factors)
(3) Possible	Might happen/recur occasionally e.g., may occur once a year. (Other factors)
(2) Unlikely	Do not expect it to happen/recur but it is possible e.g., may occur every 2 to 5 yrs.
(1) Rare	This will probably never happen/recur e.g., may occur in exceptional circumstances every 5 to 30 years.

Assess the likelihood harm occurring - Likelihood Rating (L)

Assess the consequence of harm occurring- Consequence Rating (C)

Choose the most appropriate domain for the identified risk - either harm to individuals or harm to the organisation/ service. Then work along the rows in the same column to determine the consequence of harm occurring from the risk being assessed.

	Domains	
Consequence	Harm to Individuals	Harm to the Organization / Sorvice
Rating	(Patients, Staff & Others)	Harm to the Organisation / Service
Death /	Death directly related to the incident	Permanent loss of service/facility.
Catastrophic (5)	and not to a person's underlying	Ongoing unsafe staffing levels of >10 days.
	health condition or illness.	Financial loss of >1 million.
		Loss of >1,000 personal data records (or
		potential ID theft).
		National media coverage of >3 days.
		Prosecution.
		Gross failure to meet national standards.
Severe / Major	Permanent or long-term harm	Temporary loss of service/facility >1 week.
(4)	directly related to the incident and	Unsafe staffing levels of >1 day.
	not to person's underlying health	Financial loss £100,000 - £1 million.
	condition or illness e.g., permanent	Loss of up to 1,000 personal data records
	lessening of bodily functions,	(or particular sensitivity).
	including sensory, motor,	National media coverage of <3 days.
	physiological or intellectual including	Non-compliance with national standards
	removal of the wrong limb or organ,	with significant risks to patients if
	or brain damage.	unresolved.
Moderate	Short-term harm (up to one year).	Loss/interruption of service/facility of > 1
(3)	Moderate increase in treatment e.g.,	day.
	burns, return to surgery, an	Unsafe staffing levels >1 day.
	unplanned readmission, a prolonged	Financial loss £10,000 and £100,000.
	episode of care, extra time in	Loss of up to 100 personal data records.
	hospital or as an outpatient,	Local media coverage.
	cancelling of treatment, or transfer	Improvement Notice – single breach in
	to another area such as intensive care as a result of the incident.	statutory duty.
		Repeated failures to meet internal standards.
	Requiring time off work for > 3 days. > 7 days off work RIDDOR/External	stanuarus.
	agency reportable injuries.	
Low / Minor	Minor harm requiring	Loss/interruption of service/facility of >8
(2)	treatment/extra observation e.g.,	hours.
(-)	first aid, additional medication, or	Low staff level that reduces service
	additional therapy.	quality >8 hours.
	Requiring time off work for <3 days.	Financial loss £1,000 - £10,000.
		Loss of <20 personal data records.
		Media enquiries.
		Single failure to meet internal standards.
No Harm/	No harm minimal harm e.g.,	Loss/interruption of service of <8 hours.
Negligible	bruise/graze. No time off work	Low staff level which reduces service
(1)	required.	quality of <8 hours.
		Financial loss <£1,000.
		Loss of 1 personal data record.
		No publicity.

Calculate the Risk Rating Number (RRN)

Key: (L) Likelihood X (C) Consequence = RRN

Likelihood (L)		Consequence (C)		Risk Rating (R)	
(5) Almost Certain -		(5) Catastrophic			High – Stop work
Will undoubtedly	Multiply	Death /multiple		>15	and
happen		injuries			Re-examine
(4) Likely - Will		(4) Major Excessive			
probably happen		injury, high			
		environmental			
	Likelihood	implications, major	Risk Rating	8 –	Medium – Re-
	LIKEIIII000	financial loss, major	NISK Natilig	15	examine
		loss of reputation,			
		major interruption			
		of business			
(3) Possible – Might		(3) Moderate			
happen		Medical treatment			
		required, moderate			
		environmental			
		implications, high			
	Ву	financial loss,	=	<8	Low
		moderate loss of			
		reputation,			
		moderate			
		interruption to			
	-	business	-		
(2) Rare – Do not		(2) Minor First aid			
expect it to happen	Consequence	treatment			
		moderate financial			
		loss	4		ood by Consequence
(1) Unlikely– Will		(1) Negligible No		= Final	RRN
probably never		injury minimal			
happen		impact to			
		organisation			

NOTES:

1) For example, a risk that has a likelihood score of (3 possible) and a consequence score of (4 major) would give the overall RRN of 12.

2) When calculating the likelihood of an accident/incident occurring the frequency that the task is carried out must be taken into consideration e.g. If a manual handling task is carried out every day the likelihood of an accident occurring is greater than if the same task is carried out once a month.

3) <8 (Low to Moderate) All risk assessments must be retained and monitored at ward/department level

4) >8 but <15 Risk assessments must be entered on the Care Group/Directorate risk register, and an action plan agreed to minimise the risk. This action plan must be monitored by the Care Group/Directorate Governance arrangements.

5) >15(Extreme) Risk assessments must be entered on the Care Group/Directorate risk register and the action plan must be discussed at the management team meeting. If the risk cannot be reduced to below 15

or cannot be controlled within the Care Group/Directorate, it is to be forwarded to the Head of Corporate Affairs for inclusion on the agenda of the Risk Management Board, where it will be considered for entry onto the Corporate Risk Register.

QUANTITATIVE RISK ASSESSMENT MATRIX – LEVEL OF RISK						
	CONSEQUENCES					
LIKELIHOOD	Negligible	Minor	Moderate	Major	Catastrophic	
	1	2	3	4	5	
Almost Certain 5	5	10	15	20	25	
Likely 4	4	8	12	16	20	
Possible 3	3	6	9	12	15	
Unlikely 2	2	4	6	8	10	
Rare 1	1	2	3	4	5	



4.6 Recording and Reporting

The findings of the fire risk assessment should be compiled into a report following the Trust's agreed fire risk assessment report proforma. Sufficient detail and commentary must be provided to ensure a robust record of the following items:

- The area being assessed.
- The date of the assessment.
- The Responsible Person; Senior Manager, the Person with Control, and the fire risk assessor.
- The hazards identified.
- Those that may be at risk from such hazards.
- The control measures in place.
- The risk rating.
- Actions required to further mitigate the risk.
- The resultant risk rating once actions have been undertaken.

Each fire risk assessment report must include a plan clearly indicating the extent of the area assessed.

To assist the Person with Control communicating the significant findings of the fire risk assessment, the fire risk assessment report should include an appendix clearly detailing the information to be communicated to staff and other Responsible Persons where applicable.

To assist the Person with Control managing the fire risks within the area appropriately, the fire risk assessment report should include an appendix which clearly identifies the hazards and associated fire precautionary measures in the form of a check-sheet which the Person with Control can use to ensure that the fire safety measures are being appropriately managed at the beginning of each shift, clinic, or session of area use.

To assist the Person with Control to identify the need to request a review of the fire risk assessment in response to significant changes, the fire risk assessment report should include an appendix which clearly identifies the fire risk assessment parameters and examples of significant changes which may invalidate the fire risk assessment.

On completion of the fire risk assessment report, the Fire Risk Assessor should deliver the report to the Person with Control and explain its contents drawing particular attention to:

- The action plan and the need for the Person with Control to maintain it up to date.
- The significant findings and the need for the Person with Control to communicate these to staff, contractors and others working in the area concerned.
- The fire safety checklist and the need for the Person with Control to perform those regular checks.
- The fire risk assessment parameters and the need for the Person with Control to request a review of the fire risk assessment in response to significant changes.

A full copy of the fire risk assessment report should be placed in the appropriate section of the fire safety manual associated with the area in question.

4.7 Communication of Significant Findings

The Person with Control must ensure that all staff, contractors, and others working within the area for which they have control are informed of the significant findings of the fire risk assessment. Such communication to staff and others working in the area for any appreciable length of time should take the form of a briefing accompanied with a copy of the significant findings appendix of the fire risk assessment report which will need to be signed for and accepted as understood. When communicating to contractors or others that will not be working within the area for any appreciable length of time, providing a copy of the significant findings appendix of the fire risk assessment report is sufficient.

Where the risk assessment area has third party areas embedded within it, or is an area embedded within third party accommodation, the Fire Safety Manager should ensure that the significant findings of the fire risk assessment are communicated to the relevant third parties.

4.8 Action Plans

Each fire risk assessment report must include a comprehensive action plan which clearly details each risk identified and any actions necessary to mitigate that risk to a level that is considered to be as low as reasonably practicable. Each action plan should be compiled by the Fire Risk Assessor and follow the Trust's agreed proforma.

4.8.1 Action Plan Format

In order to facilitate the management of actions arising from the fire risk assessment, and the coordination of actions arising from multiple fire risk assessments into a master action plan, each action plan must follow a consistent format that includes the following elements:

Risk Identifier - A unique reference which includes the fire risk assessment number and numbers identifying the risk within the fire risk assessment report. For example, the risk identifier 237.12.3 would refer to the risk listed third in Section 12 of the report with the Fire Risk Assessment Number 237:

- Location A description of the location of the identified risk.
- Risk Description A description of the risk identified.
- Current Control Measures A description of any current control measures being applied to mitigate the risk.
- Current Risk rating The current risk rating appropriate to the identified risk prior to undertaking any further action to mitigate the risk.
- Action(s) Required A description of any further action required to control the risk to a level that is considered to be as low as reasonably practicable. Where applicable, actions should be split into interim measures and longer-term measures.
- Interim measures A description of any control measures that can reasonably be introduced to reduce the identified risk in the short-term whilst longer-term and more permanent control measures are developed.
- Longer-term measures A description of any permanent control measures necessary in addition to, or in the place of, the interim measures to reduce the identified risk to a level that is considered to be as low as reasonably practicable.

Each action, whether interim or longer-term should be:

- Detailed with an anticipated risk rating upon its completion.
- Detailed with a timescale in which the action should be completed.
- Allocated to a person responsible for its completion.
- Provided with the facility to allow completed actions to be 'signed-off' by the Person with Control.

Where multiple options for control measures are available, the viable options should be presented to the Person with Control highlighting the merits and implications of each option for the Person with Control to determine the most appropriate option for the area concerned. Where such options are available, the Person with Control is required to finalise their decision within 28 days of the options being presented.

4.8.2 Setting Timescales for Action Completion

As stated above, each action should include a timescale in which identified actions should be completed. The timescale for each action should be determined by considering a combination of the following elements:

Priority – The timescale for each action should be prioritised on the current risk rating allocated to the identified risk.

Proximity – The timescale for each action should further consider the level of proximity to the area concerned, and the influence of the Person with Control. For example, some actions may

involve adjustments to processes and/or systems that extend beyond the fire risk assessment area and therefore require a significant degree of organisational planning and management.

Practicality – The timescale for each action should also the ease with which the control measures can be applied. For example, the action required may necessitate a ward being decanted, or the shut-down of essential equipment which will need to be planned and co-ordinated with the operational needs of the Trust.

Affordability - The timescale for each action also needs to consider the availability of funds to complete the necessary control measures. In some circumstances it may be appropriate to prioritise the completion of a number of low-cost actions relating lower rated risks above those associated with a high rated risk where the resultant aggregate risk reduction is greatest.

4.8.3 Responsibility for Completing Actions

As stated above, each action should be allocated to a person responsible for its completion as follows:

- **Person with Control** Where the action can be completed by management activity alone, for example removing escape route obstructions, it is appropriate to allocate such actions to the Person with Control.
- **Maintenance** Where the action relates to the deterioration of existing fire precautions or fire safety systems, such actions should be notified to the Estates Department Helpdesk.
- **Minor Works** Where the action relates to a need to improve the provision of fire precautions or extend existing fire safety systems which are within the parameters for minor works, such as the provision of an additional smoke detector, the action should be reported to the Head of Estates.
- **Capital Projects** Where the action involves a greater degree of complexity and/or requires a level of investment beyond the limit for minor works, the action should be reported to the Head of Estates for prioritising against the Fire Safety Improvement Capital Budget.

In all cases, the Fire Safety Manager is responsible for ensuring that individuals that have been allocated actions are fully informed of the necessary actions to be taken in a timely manner so as to allow those individuals to reasonable complete their actions within the given timescale.

4.8.4 Completed Actions

Once an action has been completed, the Person with Control should update the action plan included in the fire risk assessment report which is filed in the fire safety manual associated with the area in question and ensure that the Fire Safety Manager is informed to enable them to update the master action plan accordingly.

4.9 Fire Risk Assessment Review

The process of fire risk assessment review is driven by the Person with Control since they are in the best position to identify any significant changes that may invalidate the existing fire risk assessment. Upon the occurrence of any significant change, the Person with Control should notify the Fire Safety Manager of the need for a review of the fire risk assessment. The Fire Safety

Manager will then assess the nature of the significant change and, where appropriate, arrange for a fire risk assessment review visit to obtain the information necessary for updating the fire risk assessment. During the fire risk assessment review visit, the Fire Safety Manager, and Fire Safety Advisor will validate the existing fire risk assessment findings and update the fire risk assessment report as necessary.

In addition to responding to requests for fire risk assessment review, the Fire Safety Manager will maintain a programme of periodic fire risk assessment review. The process of periodic review is intended to identify instances where significant changes have taken place, but the Person with Control has failed to request a fire risk assessment review. The review will take the following form:

- On an annual basis, the Fire Safety Manager will email the Person with Control identified in the fire risk assessment report together with their General Manager to inform them that their fire risk assessment has been reviewed on the basis of the information received by the fire safety team, reminding the Person with Control of their responsibility to advise the Fire Safety Manager of any significant changes, and advising the next date for review.
- On a periodic cycle, the Fire Safety Manager will arrange for a physical visit to the area in question to undertake a full review of the fire risk assessment. The frequency of physical fire risk assessment reviews will be determined on the basis of previously identified risk and the potential for significant changes to occur as follows:

Department/Area Characteristics	Frequency of Physical Fire Risk Assessment Review
Areas assessed as "Low Risk" and with independent occupancies	Every 36 months
Areas assessed as "Low Risk" and with few dependent occupants	Every 30 months
Areas assessed as "Moderate Risk" and with independent occupancies	Every 30 months
Areas assessed as "Moderate Risk" and with few dependent occupants	Every 24 months
Areas with largely dependent occupants	Every 18 months
Areas assessed as "High Risk" and with independent occupancies	Every 18 months
Areas with very-high dependency occupants	Every 9 months
Areas that frequently change (e.g., decant wards, shared clinics)	Every 6 months or twice the period of change, whichever is shorter
All other areas	Every 12 months

5 MONITORING COMPLIANCE WITH THE DOCUMENT

The ongoing performance of Fire Risk Assessments will be monitored and reported via the Fire Safety management system through reports and records generated by the Fire Safety Manager, and Fire Safety Advisor. Monitoring will be reported to the Estates and Facilities Fire Safety Committee, the Trust Health and Safety Committee and Trust Board.

In addition to the above independent third-party audits will also be undertaken yearly or as required by the Trust Fire Authorised Engineer.

6 **DEFINITIONS**

Fire Risk Assessment

A systematic process of identifying fire hazards and evaluating the risks to health and safety arising from them, taking account of existing risk controls (or, in the case of a new activity, the proposed risk controls).

Fire Risk Assessor

A competent person who carries out, and documents, a fire risk assessment.

Duty Holder / Responsible Person

The person ultimately responsible for fire safety as defined in the Regulatory Reform (Fire Safety) Order 2005.

Relevant Person

Any person lawfully on the premises and any person in the immediate vicinity, but this does not include fire-fighters carrying out fire-fighting duties.

Person with Control

Any person who to any extent has control over the premises, or part(s) of the premises at any time, usually the senior person in charge. In the context of the Trust, this could include a General Manager, a Department Manager, a Matron, and a Ward Sister. Each area may have more than one Person with Control, and the extent of their responsibilities is determined by the extent of the control they exercise over the area.

7 EQUALITY IMPACT ASSESSMENT

The Trust aims to design and implement services, policies and measures that meet the diverse needs of our service, population, and workforce, ensuring that none are disadvantaged over others. Our objectives and responsibilities relating to equality and diversity are outlined within our equality schemes. When considering the needs and assessing the impact of a procedural document any discriminatory factors must be identified.

An Equality Impact Assessment (EIA) has been conducted on this procedural document in line with the principles of the Equality Analysis Policy (CORP/EMP 27) and the Fair Treatment For All Policy (CORP/EMP 4).

The purpose of the EIA is to minimise and if possible, remove any disproportionate impact on employees on the grounds of race, sex, disability, age, sexual orientation, or religious belief. No detriment was identified. (See Appendix 1)

8 ASSOCIATED TRUST PROCEDURAL DOCUMENTS

Fire Safety Policy – CORP/HSFS 14

9 DATA PROTECTION

Any personal data processing associated with this policy will be carried out under 'Current data protection legislation' as in the Data Protection Act 2018 and the UK General Data Protection Regulation (GDPR) 2021.

For further information on data processing carried out by the trust, please refer to our Privacy Notices and other information which you can find on the trust website: <u>https://www.dbth.nhs.uk/about-us/our-publications/information-governance/</u>

10 REFERENCES

Legislation.gov.uk. (2005). Regulatory Reform (Fire Safety) Order. [ONLINE] Available at: http://www.legislation.gov.uk/uksi/2005/1541/contents/made

Relevant fire risk assessment reports.

DOH (2013). Health Technical Memorandum 05-01: Managing healthcare fire safety. [ONLINE] Available at:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/192065/HTM_0 5-01.pdf

DOH (2008) Health Technical Memorandum 05-03 Part K: Guidance on fire risk assessments in complex healthcare premises. [ONLINE] Available at:

https://www.england.nhs.uk/wp-content/uploads/2021/05/HTM 05-03 Part K Final.pdf

APPENDIX 1 – EQUALITY IMPACT ASSESSMENT - PART 1 INITIAL SCREENING

Service/Function/Policy/Project/Strategy	Division	Assessor (s)	New or Existing Service or Policy?	Date of Assessment	
Fire Safety Management Protocol 2	Estates and Facilities	Howard Timms	Existing	31 October 2022	
Fire Risk Assessment		Howard Hillins	LAISting	31 OCIODEI 2022	
1) Who is responsible for this policy? - Nan					
			ed to benefit? What are the intended outco		
	•	•	hout all Trust Premises to ensure complian	ce with the Regulatory	
Reform (Fire Safety) Order and the DOH F					
	islation, targets national expe	ectation, standards R	egulatory Reform (Fire Safety) Order 2005	and the DOH Firecode	
HTM 05 Series					
4) What factors contribute or detract from					
		er, gender reassignme	nt, sexual orientation, marriage/civil part	nership,	
maternity/pregnancy and religion/belief					
If yes, please describe current or					
6) Is there any scope for new measures whi		- /	en] - N/A		
7) Are any of the following groups adversel		0			
Protected Characteristics Affect	ed? Impact				
a) Age No					
b) Disability No					
c) Gender No					
d) Gender Reassignment No					
e) Marriage/Civil Partnership No					
f) Maternity/Pregnancy No					
g) Race No					
h) Religion/Belief No					
i) Sexual Orientation No					
8) Provide the Equality Rating of the service / function /policy / project / strategy – tick (1) outcome box					
Outcome 1 ✓ Outcome 2	Outcome 3	Outcome 4		l'u a	
*If you have rated the policy as having an outcome of 2, Date for next review: October 2025	3 or 4, it is necessary to carry out a	aetailea assessment and co	omplete a Detailed Equality Analysis form in Appen	aix 4	
Checked by: Sean Tyler - Head of Compliance/Neil Colton - Fire Safety Advisor Date: 31 October 2022					
Checked by. Sean Tyler - Head of Compliance	Autoriconton - The Salety Aut	/1501	Dale. 51		