FIRE SAFETY POLICY

POLICY REFERENCE NUMBER | RM02
VERSION NUMBER | 4.1
KEY CHANGES FROM PREVIOUS VERSION | Various amendments and corrected, reviewed as per yearly review schedule; 3 month extension (GC)

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CONSULTATION GROUPS | HSSC, EOSC, EPUT Estates
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APPROVAL BY HEALTH, SAFETY & SECURITY SUB-COMMITTEE | April 2020 (Chair’s Action)
RATIFICATION BY QUALITY COMMITTEE | April 2020

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POLICY SUMMARY

Compliance with this policy will ensure the trust meets its obligations for fire safety management within all its buildings for which it owns, lease or has areas of occupation from a third party where the trust provides treatment or care, excluding private dwellings.

The trust will ensure they remain compliant with all relevant statutory fire safety legislation and adopt ‘best practice guidance’ where practicable.

The Trust monitors the implementation of and compliance with this policy in the following ways:

- Periodic review of fire and false alarm incident reports.
- Periodic review of fire safety training records.
- Periodic review of fire service notices, communications and audits.
- Internal fire safety audit reports.
- Direct lines of communication with fire safety manager/advisors.
- Periodic third-party fire safety audits.

Services | Applicable | Comments
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Trustwide | ✓ | 

The Director responsible for monitoring and reviewing this policy is
The Executive Chief Finance and Resources Officer
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FIRE SAFETY POLICY

Assurance Statement

Compliance with this policy will ensure the trust meets its obligations for fire safety management within all its buildings for which it owns, lease or has areas of occupation from a third party where the trust provides treatment or care, excluding private dwellings.

The trust will ensure they remain compliant with all relevant statutory fire safety legislation and adopt ‘best practice guidance’ where practicable.

1.0 INTRODUCTION

This fire safety policy reflects the statutory requirements of the Regulatory Reform (Fire Safety) Order 2005 and other statutory fire safety legislation and guidance. This policy aims:

- To minimize the incidences of fire and Unwanted Fire Alarm Signals throughout buildings owned and by those parts occupied by EPUT.
- To minimize the impact of fire on life safety, delivery of service, property and the environment.

This policy applies wherever EPUT owes a duty of care to its staff, service users or others carrying out duties on their behalf in accordance to its assurance statement.

2.0 DUTIES

The Trust board will:-

Discharge its responsibilities as a provider of healthcare to ensure that suitable and sufficient governance arrangements are in place to manage fire safety related matters.

EPUT recognizes the need to commit adequate human resources and finances to enable this policy to be achieved so that fire safety systems are suitably managed within its buildings including those owned by EPUT, leased to other organizations or buildings that EPUT staff occupy space in but have no responsibility for.

EPUT should ensure staff with responsibilities for fire safety are identified and competent to undertake such duties safely.

Facilitate the development of partnership initiatives with other appropriate bodies in the provision of fire safety precautions.
3.0 PRINCIPLES

The Trust Board expects those tasked with managing aspects of fire safety to:

- Diligently discharge their fire safety responsibilities as befits their position;
- Have in place a clearly defined management structure for the delivery, control and monitoring of fire safety measures;
- Have in place a system for the assessment and review of fire risks;
- Develop and implement appropriate protocols, procedures, action plans and control measures to mitigate fire risks, comply with relevant legislation, and where practicable codes of practice and guidance;
- Develop and disseminate appropriate fire emergency action plans pertinent to each department/building/area to ensure the safety of occupants, protect the delivery of service and as far as reasonably practicable, defend the property and environment;
- Develop and implement a programme of appropriate fire safety training for all relevant staff;
- Develop and implement monitoring and reporting mechanisms appropriate to the management of fire safety.

4.0 MONITORING OF IMPLEMENTATION AND COMPLIANCE

The Health, Safety & Security Sub-Committee will monitor the implementation of this policy through:

- Periodic review of fire and false alarm incident reports.
- Periodic review of fire safety training records.
- Periodic review of fire service notices, communications and audits.
- Internal fire safety audit reports.
- Direct lines of communication with fire safety manager/advisors.
- Periodic third-party fire safety audits.

5.0 LEGISLATION & REGULATORY GUIDANCE

Relevant statutory legislation and guidance includes:

- The Regulatory Reform (Fire Safety) Order 2005.
- Building Regulations Approved Document B.
- The Health & Safety At Work Act 1974
- Registered Homes Act 1984.
- Equalities Act 2010.
- Government guide for health care establishments.
- EFA/2018/007 Fire risk from personal rechargeable electronic devices
Note – Statutory fire compliance should be achieved by the application of Firecode suite of the Healthcare Technical Memorandums (HTM’s) & The Regulatory Reform (Fire Safety) Order 2005.

6.0 REFERENCE TO OTHER TRUST POLICIES/PROCEDURES

This document should be read in conjunction with the following (but not limited to) trust policies/protocols/plans:

- RM01 Corporate Health and Safety Policy
- RM09 Security Policy
- RM14 Major Incident Plan
- CP32 Smoke Free Policy
- RM13 Waste Management Policy
- CP3 Adverse Incident Policy
- RM04 Control Of Substances Hazardous to Health (COSHH) Policy
- HR21 Induction, Mandatory & Essential Training Policy

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