



NHS LANARKSHIRE
FIRE POLICY
&
PROCEDURES

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CONTENTS.....

1.1	INTRODUCTION	5
1.2	STATEMENT	6
1.3	OBJECTIVES	7

2 STRATEGY..... 8

2.1	INTRODUCTION	8
2.2	FIRE PREVENTION	8
2.3	FIRE CONTAINMENT	8
2.4	COMMUNICATIONS	8
2.5	MEANS OF ESCAPE	9
2.6	PROTECT IN PLACE	9
2.7	MANAGEMENT	9
2.8	FIRE ENGINEERING	9
2.9	FIRE RISK ASSESSMENT	10
2.10	LOCAL EMERGENCY PLANS	10

3 NHS LANARKSHIRE POLICY ARRANGEMENTS..... 11

3.1	MANAGEMENT STRUCTURE.....	11
3.2	NHS LANARKSHIRE.....	12
3.3	THE CHIEF EXECUTIVE	12
3.4	EXECUTIVE DIRECTOR.	12
3.5	NOMINATED OFFICER (FIRE)	13
3.6	DEPUTY NOMINATED OFFICER/S (FIRE)	14
3.7	SPECIALIST FIRE SAFETY ADVISOR	14
3.8	SITE DESIGNATED SENIOR MANAGERS	15
3.9	LINE / DEPARTMENTAL MANAGERS	15
3.10	ALL STAFF	16

4 FIRE SAFETY PROCEDURES..... 17

4.1	INTRODUCTION	17
4.2	STAFF RESPONSIBILITIES.....	17
4.3	FIRE SAFETY COMMITTEE	17
4.4	TESTING OF AUTOMATIC FIRE DETECTION AND ALARM SYSTEMS	18
4.5	FIRE FIGHTING EQUIPMENT.	18
4.6	EMERGENCY LIGHTING PROVISION.....	18
4.7	FIRE SAFETY SIGNS AND NOTICES.....	18
4.8	REPORTING OF FIRES.....	18
4.9	STAFF FIRE SAFETY AWARENESS TRAINING.....	19
4.10	FIRE DRILLS AND EXERCISES.....	19
4.11	PRINCIPLES OF EVACUATION.	19
4.12	FIRE EVACUATION TECHNIQUES	19
4.13	BED PATIENT AREAS	20
4.14	NON-BED PATIENT AREAS	20
4.15	RAISING THE ALARM.....	20
4.16	IF YOU DISCOVER A FIRE: -	20
4.17	ON HEARING THE ALARM.	21
4.18	STAFF IN PATIENT AREAS.....	21

4.19	COMMUNICATION.....	21
------	--------------------	----

5	APPENDIX 1 FIRE PREVENTION.....	22
----------	--	-----------

5.1	THE TRIANGLE OF FIRE.....	22
5.2	FIRE BEHAVIOUR	22
5.3	CLASSIFICATION OF FIRE.	22
5.4	DANGER OF SMOKE.....	23
5.5	SMOKING.	23
5.6	HOUSEKEEPING.....	23
5.7	FIRE ESCAPE ROUTES.....	24
5.8	ELECTRICAL FIRE SAFETY.	24

6	APPENDIX 2 FIRE PRECAUTIONS	25
----------	--	-----------

6.1	SAFE MEANS OF ESCAPE.....	25
6.2	CRITERIA FOR ASSESSING THE REQUIRED MEANS OF ESCAPE PROVISION INCLUDE: -	25

7	APPENDIX 3 STRUCTURAL FIRE PROTECTION	26
----------	--	-----------

7.1	STRUCTURAL FIRE PROTECTION	26
7.2	BUILDING DESIGN.....	26
7.3	MANAGERIAL RESPONSIBILITIES	26
7.4	FIRE DOORS	27
7.5	STAFF RESPONSIBILITIES.....	27
7.6	AUTOMATIC FIRE DETECTION AND ALARM SYSTEMS.....	27
7.7	AUTOMATIC FIRE DETECTION.....	27
7.8	MANAGERIAL RESPONSIBILITIES	28

8	APPENDIX 4 FIRE FIGHTING EQUIPMENT.....	29
----------	--	-----------

8.1	FIRE FIGHTING EQUIPMENT	29
8.2	PORTABLE FIRE EXTINGUISHERS.	29
8.3	WATER TYPE FIRE EXTINGUISHERS	29
8.4	CARBON DIOXIDE FIRE EXTINGUISHER.....	30
8.5	DRY POWDER FIRE EXTINGUISHER	30
8.6	FOAM FIRE EXTINGUISHER	30
8.7	FRYGARD FIRE EXTINGUISHERS.....	31
8.8	FIRE BLANKET	31
8.9	FIRE HOSE REELS.....	31

9	APPENDIX 5 FIRE INSTRUCTIONS	32
----------	---	-----------

9.1	FIRE SAFETY INSTRUCTIONS	32
-----	--------------------------------	----

10	APPENDIX 6 FIRE DRILLS & EVACUATION	34
-----------	--	-----------

10.1	FIRE DRILLS.....	34
10.2	FIRE ACTION NOTICES	34
10.3	EVACUATION PROCEDURES	35

11	APPENDIX 7 ARSON PREVENTION	36
-----------	--	-----------

11.1	ARSON PREVENTION	36
------	------------------------	----

11.2	HIGH RISK AREAS.....	36
11.3	WILFUL FIRE RAISING PREVENTION	36
11.4	FIRE SAFETY ARRANGEMENTS.....	37

12 APPENDIX 8 FIRE PRECAUTIONS LEGISLATION..... 38

12.1	GOVERNMENT PROPOSALS.....	38
12.2	FIRE SAFETY (SCOTLAND) REGULATIONS 2006.....	38
12.3	SPECIAL FACTORS.....	39

13 APPENDIX 9 FIRE PRECAUTIONS LEGISLATION..... 40

13.1	FIRE SAFETY (SCOTLAND) REGULATIONS 2006.....	40
13.2	AIM OF FIRE SAFETY LEGISLATION.....	40

1. FIRE POLICY

1.1 INTRODUCTION

- 1.1.1. This policy forms the basis for all Fire Procedures, Training and Guidance throughout NHS Lanarkshire (NHSL). Within the Acute Services Division and North and South CHP Localities comprehensive Local Fire Plans covering all buildings and departments shall be the basis for the development and provision of local procedures for dealing with outbreaks of Fire in all buildings, departments and wards.
- 1.1.2. The Policy sets down the objectives of the NHSL Board and the arrangements it has put in place to achieve them, in accordance with the mandatory requirements of The Scottish Government Fire Policy Document CEL (25) 2008.
- 1.1.3. Local Fire Plans are practical working documents intended for reference and use by all members of staff. The Local Fire Plans set down the Fire procedure arrangements to be followed in specific workplaces in the event of Fire, and detailed information and guidance for the training of staff and the induction of new staff. This information is additional to the emergency action information provided on local 'Fire Action' notices. Both the Fire Scotland Act 2005 and the Fire Safety (Scotland) Regulations 2006 require suitable evacuation procedures to be in place for all people using the building. A competent person must adequately train any staff required to assist with the evacuation.
- 1.1.4. This document shall be known as the *NHS Lanarkshire Fire Policy and Procedures* and shall be applicable throughout all premises in which NHS Lanarkshire employees work.
- 1.1.5. Additional guidance or clarification on any Fire related matter, including training arrangements, might be obtained from the Area Fire Safety Advisor for NHSL based at Property & Support Services Department in Wishaw General Hospital

1.2 STATEMENT

- 1.2.1 NHSL's Board will promote and maintain a comprehensive Management Structure for Fire Safety, as detailed within the Scottish Government current Fire Policy Document, CEL 25 (2008), and within the NHS Scotland Firecode suite of documents, for the protection of all staff, patients and visitors from the effects of Fire. The Board is committed to ensuring that all aspects of the Legislation relating to Fire Safety are complied with and will assist and observe the Statutory Requirements of enforcing authorities in the pursuance of their duty.
- 1.2.2 NHSL will actively work to promote a Fire Safety culture to ensure that systems are in place to actively Manage Fire Safety and the Training of Staff on how to respond to outbreaks of Fire. Provisions will also be made for the giving of Fire Safety Advice on request, to conduct Fire Safety Inspections and Fire Risk Assessments, Test and Maintain Existing Fire Safety Systems and Equipment to ensure that that any required improvements are implemented and approved standards of Fire Safety Provision remain in place.
- 1.2.3 A system of regular review will be implemented to ensure that the Fire Policy remains appropriate for all circumstances relating to Fire Safety Provision as they affect NHSL's employees and others. In particular, specific attention shall be paid to the provision and maintenance of the following: -
- 1.2.3.1 Adequate means of escape in case of fire.
 - 1.2.3.2 Adequate means for ensuring that the means of escape can be safely and effectively used at all times.
 - 1.2.3.3 Adequate means for detecting and giving warning in the event of fire.
 - 1.2.3.4 Adequate and appropriate means for fighting fire.
 - 1.2.3.5 Adequate means for the maintenance of all Fire Safety Systems and equipment.
 - 1.2.3.6 Appropriate Fire Safety Awareness Training for all members of staff regarding existing Fire Safety measures, the means of raising an alarm, action to be taken when the alarm is heard, evacuating procedures for patients, staff and dealing with visitors and others.
 - 1.2.3.7 Appropriate training shall be provided on provision for fighting Fire, and how safely tackle a small Fire within the limits of their capability and the limitations of the fire Fighting Equipment available.
 - 1.2.3.8 The recording of all maintenance and routine testing of equipment and installations and the recording of staff fire safety training.
 - 1.2.3.9 Acting on advice and guidance from the Area Fire Safety Advisor on the fire safety provision to be incorporated in new buildings or alterations to existing buildings.

Signed - Date -

Chief Executive, NHS Lanarkshire.

1.3 OBJECTIVES

- 1.3.1 To ensure that staff, patients and all other visitors to all NHSL premises are safe from the effects of Fire.
- 1.3.2. To ensure that the interests of all disabled persons are taken fully into account with regard to all Fire Safety measures being considered or proposed.
- 1.3.3 To ensure that Fire Safety matters are recognized and addressed at both Board and Divisional Management levels.
- 1.3.4 To provide adequate resources to ensure that the aims of this policy can be met.
- 1.3.5 To provide Fire Safety Instruction and Training for all staff, appropriate to their location, position and area of responsibility based on a formal training needs analysis of staff in the particular facility
- 1.3.6 To provide and maintain suitable systems and equipment for detecting and raising an alarm of Fire and for dealing with any small outbreak of Fire.
- 1.3.7 To provide appropriate means for assisting the evacuation of all persons in the event of Fire.
- 1.3.8 To carry out Fire Risk Assessments / compliance Audits and implement the required action based on the findings, and rectify any Fire Safety failures identified.
- 1.3.9 To review annually the *NHS Lanarkshire Fire Policy and Procedures* and local Fire Procedures within Divisions.
- 1.3.10 To review on an annual basis the Fire Safety Performance of the whole NHSL Estate, based on the provision of information contained within annual Fire Safety Reports.
- 1.3.11 To review from time to time all Fire Risk Assessments / Compliance Profiles; and to take account of any changes that might affect Fire Safety Provision within NHS Lanarkshire premises.
- 1.3.12 To ensure that Emergency Action Plans and Procedures are in place to deal with any outbreak of Fire, including Emergency Plans for the Evacuation of buildings.
- 1.3.13 To ensure that appropriate means are provided to investigate and record Fire Incidents and keep records of all Fire Safety Activities
- 1.3.14 To maintain Fire prevention as an integral part of the Fire Strategy ensuring that lessons are learned from any fire event.

STRATEGY

2.1 Introduction

- 2.1.1 Fire in a Hospital or other Healthcare premises presents a significant threat to the safety of everyone who is present at the time and in particular is a threat to the safety of patients who may require assistance due to their infirmity or disability.
- 2.1.2 NHSL Board shall therefore adopt a Fire Safety Strategy based on avoidance of Fire and in particular existing Fire Safety Provision shall include a programme of Fire Risk Assessment, to determine the existing level of Fire Risk and the works required to reduce the risk to an acceptable level.
- 2.1.3 Fire Safety Provisions shall be those specified and determined in the NHS Scotland Firecode, together with the **Non Domestic Technical Handbook** for compliance with the **Building Standards Agency (Scotland) Regulations 2004** and any subsequent revision of these Regulations. In all cases the strategy will comprise a range of standards that will collectively provide an acceptable level of Fire Safety Provision in each particular premises.
- 2.1.4 The overall strategy to be adopted in any given set of circumstances shall be drawn from the following components: -

2.2 FIRE PREVENTION

- 2.2.1 To prevent Fire occurring in so far as it is reasonably practicable, by ensuring that all staff are aware of the danger of Fire and know what to do to avoid it by adopting Fire Safe Working Practices. In addition, the materials, and contents of buildings shall, in so far as reasonably practicable, be selected for use on the basis of their Fire resisting properties and their ability to resist ignition.
- 2.2.3 The systems of work adopted by staff shall limit the potential for Fire from sources of Flame, Heat, Sparks, Friction or other sources, by substituting them with safer systems, and where this is not possible by adopting control measures to limit so far as possible the potential for Fire.

2.3 FIRE CONTAINMENT

- 2.3.1 To limit the potential for the spread of Fire within buildings by means of Structural Fire Protection by the provision of Fire Compartments, Sub Compartments, Fire Exit Routes, Protected Stairway Enclosures and Fire Doors where necessary in accordance with specified standards.

2.4 COMMUNICATIONS

- 2.4.1 To ensure that in the event of Fire systems are in place, both manual and automatic to raise the alarm and summon the Fire Brigade.

2.5 MEANS OF ESCAPE

- 2.5.1 To ensure that in the event of Fire all persons may escape safely by themselves, and in the case of those who are unable to do so, with assistance from staff. To facilitate this all buildings will have adequate Structural Fire Protection and other provisions for Safe Evacuation, in accordance with the principles and mandatory requirements detailed within NHS Scotland Firecode and the Building Standards Agency (Scotland) Regulations. 2004

2.6 PROTECT IN PLACE

- 2.6.1 Recognising that special arrangements are necessary in parts of hospitals to protect patients where escape is likely to be significantly delayed due to their clinical condition.
- 2.6.2 In such cases provisions shall be made in order to delay or extinguish the Fire and permit further time for escape. This may be achieved by additional Structural Separation, the use of portable hand held Fire Extinguishers or by Automatic Fire Suppression means.
- 2.6.3 The standard to be determined in each case by an assessment of the Fire Risk, the condition of the person/s who require protection, the capability and training of staff and the guidance contained in NHS Scotland Firecode.

2.7 MANAGEMENT

- 2.7.1 To ensure that a system of Fire Safety Management is in place so that adequate arrangements for Fire Safety Provision is included within the corporate business plans.
- 2.7.2 An Executive Director having specific responsibility for Fire Safety matters shall ensure that Fire Safety interests are properly represented at NHSL Board level, and that adequate resources are made available for Fire Safety Provision.
- 2.7.3 Local fire safety arrangements will be regulated, implemented, monitored and reviewed by a system of devolved responsibilities with a direct reporting line to the Director with overall responsibility.
- 2.7.4 An annual report of Fire Safety Performance shall be provided to the NHSL Board by each Division to provide assurance that appropriate actions have been taken.

2.8 FIRE ENGINEERING

- 2.8.1 The standards of Fire Safety Provision in principle shall be those indicated by the regulations or other statutes applying, and those specified in the NHS Scotland Firecode and other applicable codes of practice. However a Fire Engineering Strategy may also be accepted providing it is established to the satisfaction of the NHSL Board and other enforcing authorities, within the context of the existing regulatory framework.

2.9 FIRE RISK ASSESSMENT.

2.9.1 **The Fire (Scotland) Act 2005 and The Fire Safety (Scotland) Regulations 2006** require that a Fire Risk Assessment shall be compiled for all premises occupied by NHSL to ensure that all Fire Risks, including hazards that may contribute to the spread and growth of Fire, potential ignition sources, the adequacy or otherwise of the Means of Escape Provision and supporting Fire Safety Measures in place, are assessed in relation to the applicable regulatory standards. In addition where deficiencies are identified, measures are in place, to rectify them to ensure that the NHSL Board is in compliance with the Fire Safety Regulations and other statutes currently in force.

2.10 LOCAL EMERGENCY PLANS

2.10.1 Fire Evacuation Plans detailing information on local Fire Procedures to be implemented in an emergency must be provided within each NHSL Premise. In addition detailed colour coded Fire plans of the premises indicating Fire Compartments, Fire Exit Routes, Final Exits and the location of Fire Alarm Break Glass Call Points, Automatic Fire Detection and Fire Fighting Equipment must be provided in conspicuous positions to ensure safe Evacuation and Movement in an emergency.

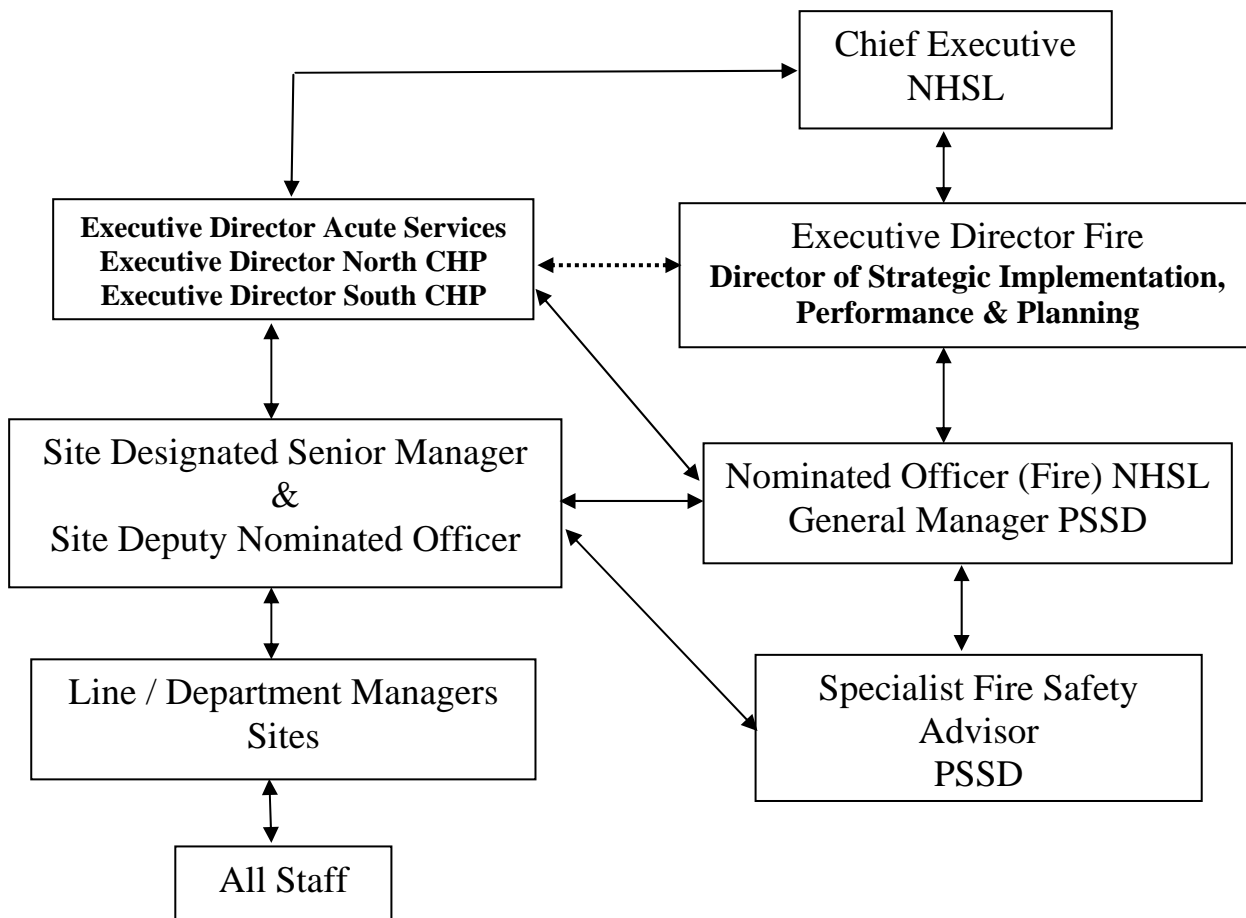
Site responsible managers to ensure that copy of emergency plans are also available in local Health & Safety Control Book

NHS LANARKSHIRE POLICY ARRANGEMENTS

3.1 MANAGEMENT STRUCTURE

3.1.1 The following arrangements have been adopted for ensuring that all Fire Safety Provisions are dealt with adequately and appropriately throughout the NHSL Estate.

3.1.2 The framework of Fire Safety management is shown in the following flowchart: -



NOTE:- The site designated senior manager for NHS Lanarkshire Health Board Headquarters is the board secretary who reports direct to the Chief Executive

3.1.3 Divisional Fire Procedures, Divisional Management Structures and Local Emergency Fire Plans will comprise part of the *NHS Lanarkshire Fire Policy & Procedures* and shall form the basis of the overall Management Arrangements for Fire Safety Provision throughout all premises for which NHSL has responsibility.

3.2 NHS LANARKSHIRE

- 3.2.1 Shall set Policy, Procedures and Fire Safety Objectives.
- 3.2.2 Shall ensure compliance with all statutory provisions and NHS Scotland Guidance in respect of Fire Safety, in so far as they apply to the NHSL Estate.

3.3 THE CHIEF EXECUTIVE

- 3.3.1 Shall have ultimate responsibility for Fire Safety Provision and shall, in that capacity, be aware of the mandatory provisions contained within the Scottish Government Fire Policy Document NHS, CEL 25 (2008)
- 3.3.2 Shall ensure that adequate resources are provided in order to meet the Fire Safety requirements of the NHSL Estate.
- 3.3.3 Shall appoint an Executive Director to assist in the execution of these responsibilities and monitor performance.

3.4 EXECUTIVE DIRECTOR.

- 3.4.1 Shall be the Director of Strategic Implementation, Performance & Planning, who has specific responsibility for the overall strategy for Fire Safety Provision throughout NHSL and shall ensure that the Chief Executive is kept informed, regarding all Fire Safety activities within NHSL.
- 3.4.2 Shall consult with the Nominated Officer (Fire) and the Fire Safety Advisor to ensure that the Fire Safety Policy is being applied and understood across all areas of NHSL.
- 3.4.3 Shall formulate, with the assistance of the Nominated Officer (Fire) and the Fire Safety Advisor, a Fire Strategy compliance programme for both active and passive measures in existing buildings and new projects.
- 3.4.4 Shall monitor the activities of, and receive Fire Precautions Audit reports at least on an annual basis from each Community Health Partnership, Acute Services Division and Corporate Services with regard to their Fire Safety activities.
- 3.4.5 Shall ensure that the interests of Fire Safety are represented at the NHSL Board. In particular that adequate financial provision is made for the maintenance of Fire Safety Provisions, the repair and upgrade of Fire Safety measures in buildings, staff training, the continuous personal development (CPD) training of specialist Fire Safety Staff and those with specific Fire Safety Duties.
- 3.4.6 Shall ensure that each Community Health Partnership, the Acute Services Division and Corporate Services have an appropriate local management structure in place and that Deputy Nominated Officers (Fire) are appointed.
- 3.4.7 Shall ensure that the Fire Policy is reviewed on a regular basis and that appropriate emergency plans are in place and tested.

3.5 NOMINATED OFFICER (FIRE)

- 3.5.1 The Nominated Officer (Fire) is the General Manager of Property and Support Services. The post holder must have a good working knowledge of NHS Scotland Firecode and related matters, and will have the authority and responsibility to carry out a wide range of duties at the highest strategic level.
- 3.5.2 Shall, have a global view in terms of future development for both premises and equipment and be able to head any project team with regard to Fire Safety planning and development
- 3.5.3 Shall supervise the upkeep of local Fire Safety Policies and Procedures, and ensure that regular review is undertaken.
- 3.5.4 Shall liaise with the Fire Safety Advisor on all aspects of Fire Safety.
- 3.5.5 Shall ensure that the Deputy Nominated Officer (Fire), or more than one where necessary, is appointed and shall keep the Deputy Nominated Officer/s (Fire) informed and involved in Fire Safety matters within their area of responsibility.
- 3.5.6 Shall ensure that appropriate emergency procedures are in place for all areas within NHSL as a whole.
- 3.5.7 Shall ensure that an emergency response team/s where appropriate are established having defined duties and responsibilities; including a duty to attend Fire training sessions.
- 3.5.8 Shall monitor the Fire Safety Training provisions for all staff, including frequency, suitability and the records that are kept.
- 3.5.9 Shall attend serious fires and co-ordinate staff response to the emergency in accordance with the emergency plan; and shall manage, monitor and review from time to time the activities and performance, including training, of the Fire Response Team/s.
- 3.5.10 Shall receive reports of Fires and take action when appropriate according to the information in such reports, in the interest of Fire Safety throughout NHSL.
- 3.5.11 Shall provide an annual report to the NHSL Board on the Fire Safety Performance of each Community Health Partnership, The Acute Services Division and Corporate Services in the preceding year, and a summary of Fire Safety Targets for the following year.
- 3.5.12 Shall be directly responsible for the day-to-day management of fire safety throughout NHS Lanarkshire and keep the Executive Director informed about Fire Safety activities.

3.6 DEPUTY NOMINATED OFFICER/S (FIRE)

- 3.6.1 Shall liaise with the Nominated Officer (Fire) and maintain an awareness of the duties and responsibilities of the position and shall assist the Nominated Officer (Fire) as directed.
- 3.6.2 Shall adopt the duties and responsibilities of the Nominated Officer (Fire) in their absence.
- 3.6.3 Shall organize and attend Fire Safety Training appropriate to their position and area of responsibility as and when directed.

3.7 SPECIALIST FIRE SAFETY ADVISOR

- 3.7.1 Property & Support Services will appoint a Specialist Fire Safety Advisor for NHSL who will: -
- 3.7.2 Advise and assist on the application of NHS Scotland Firecode and other relevant Fire Legislation or approved codes of practice applicable
- 3.7.3 Advise on the provisions of Fire Legislation. In particular, their responsibility to comply with the relevant provisions of The Building Standards Agency (Scotland) Regulations 2004, The Fire (Scotland) Act 2005 and The Fire Safety (Scotland) Regulations 2006.
- 3.7.4 Participate in Fire Safety Audits and provide reports on the state of Fire Safety Provision throughout the NHSL Estate.
- 3.7.5 Supervise the completion of Fire Risk Assessments as defined in NHS Scotland Firecode and other relevant documentation to ensure compliance with The Fire Safety (Scotland) Regulations 2006 and any other legislation that may require Fire Risk Assessments to be carried out.
- 3.7.6 Provide reports and guidance, including recommending priorities for improvements, identified as a result of the Fire Risk Assessment non compliance
- 3.7.7 Liaise with other agencies such as the Fire & Rescue Service, Building Standards Agency, Planning Department, Architects and Local Authorities; and represent the interests of NHSL in any dealings with them; and shall ensure that appropriate Fire Safety measures are provided in any proposals or plans.
- 3.7.8 Liaise and co-operate with the Fire & Rescue Service and provide them with reasonable information and facilities in the interests of Fire Safety and their operational readiness for attending incidents within the Fire & Rescue Service integrated risk management plan.
- 3.7.9 Provide Fire Safety Awareness Training for staff and develop and maintain appropriate programmes, training material and ensure that Fire Safety Training records are entered in N Power and available for inspection
- 3.7.10 Maintain records of all Fire Incidents, and investigate any Fires on behalf of the Board in co-operation with the Police, Fire or Health & Safety Executive authorities as necessary, and will ensure that serious Fires are reported to NHS Scotland Health Department as defined in current Fire Safety Policy.
- 3.7.11 Ensure suitable provisions are in place to ensure that the activities of contractors working in the NHSL Estate do not present an unacceptable risk of Fire, or compromise Fire Safety Provision within NHS Lanarkshire premises.

- 3.7.12 Liaise with, and support the activities of, the Nominated Officer (Fire) and provide Fire Safety guidance on request, and ensure that the Nominated Officer (Fire) is informed of all Fire Safety activities throughout NHSL.
- 3.7.13 Compile an annual Fire Safety Report detailing all Fire Safety activities carried out within NHSL during the previous financial year and proposed targets for the following year.

3.8 SITE DESIGNATED SENIOR MANAGER

- 3.8.1 Will be the named point of contact for control and responsibility for all sites under their area of responsibility and will be responsible for ensuring that the appropriate number of control book holders and designated deputies are in place.
- 3.8.2 The Site Designated Senior Manager will have overall responsibilities but will discharge these duties through the Operational Management Structure to ensure that a designated person and deputy with Fire Safety responsibilities are appointed for each individual site under their area of responsibility

3.9 LINE / DEPARTMENTAL MANAGERS

- 3.9.1 Shall ensure that all staff are aware of their responsibilities and duties in respect of Fire Safety, in particular, the action required should they discover a Fire or hear a warning of Fire.
- 3.9.2 Shall ensure that new members of staff are introduced to the Fire Safety measures in their immediate working environment, in particular the Escape Routes, Final Exits and the locations of Fire Compartments, Fire Alarm Break Glass Call Points and Fire Extinguishers. The Fire Policy and Procedures should be outlined to them together with the Local Fire Plan where applicable.
- 3.9.3 Shall ensure that all staff for whom they are responsible receive fire training appropriate to their work activities and responsibilities, and shall maintain a record of such training within their department
- 3.9.4 Shall liaise with the Fire Safety Advisor as necessary with regard to the provision of appropriate training.
- 3.9.5 Shall routinely inspect the fire safety provisions, within the department, including the physical opening of Fire Doors that are not in normal use, and shall report any deficiencies or failures to the Fire Safety Advisor or Property and Support Services Department as appropriate.
- 3.9.6 Shall actively promote Fire Safety within their department or area of responsibility and discourage such things as storage in stair enclosures and exit routes, accumulations of waste material, the wedging open of Fire Doors or the abuse of Fire equipment.

3.10 ALL STAFF

- 3.10.1 Shall have a duty to raise the alarm in the event of Fire.
- 3.10.2 Shall familiarise themselves with the layout of their workplace, including the exit routes and the locations of Fire Safety equipment, installations and Fire Instructions
- 3.10.3 Shall adopt Fire Safe Working Practices appropriate to their workplace, including the adoption of safe systems of work, processes and procedures and observe Fire Safety Guidance related to the use and storage of materials or substances,
- 3.10.4 Shall adopt local Fire Safety Procedures and Instructions, as defined in the Local Emergency Fire Plan, in the event of Fire or on discovering a Fire. Staff shall not tackle a Fire unless they have received specific practical training on the danger of Fire and its products.
- 3.10.5 Shall obey the instructions of, the Nominated Officer (Fire) or Deputy, members of the local Fire Response Team (if in place), Fire & Rescue Service Officers or Police Officers at any Fire incident within their place of work.
- 3.10.6 Shall attend Fire Safety Awareness Training Sessions when instructed to do so by their line manager or supervisor and report to their line manager any faults, deficiencies or other things that may affect the safety of persons in the event of fire.

FIRE SAFETY PROCEDURES

4.1 INTRODUCTION

- 4.1.1 There is a duty on every member of staff to adopt safe procedures when dealing with Fire and to fully understand the role that he or she has to play in the event of such an incident.
- 4.1.2 NHSL Managers have a further duty to ensure that an adequate Fire Risk Assessment is compiled for all areas within their level of responsibility and that the assessments are regularly updated.

4.2 STAFF RESPONSIBILITIES

- 4.2.1 In particular all members of staff must: -
- Know how to raise the alarm.
 - Raise the alarm and report all Fire incidents.
 - Attend Fire Safety Awareness Training.
 - Participate in any local Fire Drills.
 - Understand the nature and hazards of Fire, Smoke and Toxic Fumes.
 - Know the hazards involved within their working environment.
 - Practise and promote Fire Prevention and Awareness.
 - Follow local procedures and training should a Fire incident occur.

4.3 FIRE SAFETY COMMITTEE

- 4.3.1 A Fire Safety Committee chaired by the Nominated Officer (Fire) or Deputy will develop and supervise *NHS Lanarkshire Fire Policy and Procedures*.

Membership of the Committee shall include the following: -

- Specialist Fire Safety Advisor.
- Health & Safety Advisor.
- Representatives of Senior Management (Corporate and Clinical).
- The committee shall meet a minimum of six monthly intervals.

4.4 TESTING OF AUTOMATIC FIRE DETECTION AND ALARM SYSTEMS.

- 4.4.1 The Nominated Officer (Fire) must ensure that there is a system in place to ensure that the Fire Alarm Systems are being tested on a weekly basis and that all records are kept and available for inspection.
- 4.4.2 All testing and maintenance procedures shall be in compliance with the criteria as detailed within BS 5839 and NHS Scotland Firecode document HTM 82.

4.5 FIRE FIGHTING EQUIPMENT.

- 4.5.1 The Nominated Officer (Fire) must ensure that all Fire Fighting Equipment is examined on an annual basis and tested when required in accordance with the criteria as detailed within BS 5306. Records of all tests should be kept and available for inspection.

4.6 EMERGENCY LIGHTING PROVISION.

- 4.6.1 The Nominated Officer (Fire) must ensure that any Emergency Lighting Systems adequately illuminate all stairways, passageways, corridors, exit routes and final exits forming part of and comprising the means of escape from NHSL premises.
- 4.6.2 Testing and maintenance of emergency lighting systems should be in compliance with the criteria detailed within BS 5266. Records of all tests should be kept and available for inspection.

4.7 FIRE SAFETY SIGNS AND NOTICES.

- 4.7.1 The Nominated Officer (Fire) must ensure that all Fire Safety Signage and Notices are in compliance with BS 5499 and The Health and Safety (Safety Signs and Signal) Regulations 1996.

4.8 REPORTING OF FIRES.

- 4.8.1 Where a Fire occurs or is suspected, no matter how trivial, the Fire Alarm must be activated and the Fire & Rescue Service immediately alerted.
- 4.8.2 A report regarding the incident shall be submitted for the attention of the Nominated Officer (Fire), a copy sent to the Fire Safety Advisor and an IR1 or Datix report completed.
- 4.8.3 In the case of serious Fires involving fatalities, serious injury, closure and or significant damage to any NHSL property, the Nominated Officer (Fire), the Fire Safety Advisor and the Health & Safety Advisor shall be notified by the quickest practicable means. The Fire Safety Advisor will then arrange for any necessary subsequent investigation and reporting procedures to be implemented.

4.9 STAFF FIRE SAFETY AWARENESS TRAINING.

4.9.1 All members of staff are required to attend appropriate and sufficient Fire Safety Awareness Training Sessions to ensure NHSL compliance with the Scottish Government's current Fire Policy Document. Material for Fire Safety Training will be provided by the Fire Safety Advisor

The Fire Safety Awareness Training will ensure that all staff will: -

- Understand the character of Fire, Smoke and Toxic Fumes.
- Know the Hazards involved within their working environment.
- Practice and promote Fire Prevention and Fire Awareness.
- Know instinctively the correct action to implement should Fire occur.
- Be familiar with the evacuation procedure and escape routes appropriate to their location.

4.9.2 The department manager or line manager will ensure that records are kept of all staff attendance at Fire Training in accordance with 4.9.1 above and personal development plans.

4.9.3 Specific additional Fire Safety training will be made available for specialised roles, e.g. Fire Response teams, Deputy Nominate Officers (Fire) and Line/Departmental Managers.

4.10 FIRE DRILLS AND EXERCISES.

4.10.1 The Nominated Officer (Fire) will ensure that programmes of Fire Drills or exercises are implemented on an annual basis throughout NHSL. Records of the drills or exercises will be kept and available for inspection. (See Appendix 6 for details)

4.10.2 A further drill or exercise will be carried out as soon as practicable afterwards if the previous drill reveals serious problems, should there be any appreciable changes to staff, or there has been any building works or alterations to the premises or department which affects the means of escape provision.

4.11 PRINCIPLES OF EVACUATION.

4.11.1 Evacuation procedures are clearly divided into patient and non-patient areas throughout NHSL. The alarm of Fire where evacuation must be considered to be appropriate will be the continuous sounding of the Fire Alarm.

4.12 FIRE EVACUATION TECHNIQUES

4.12.1 Where staff may have to take part in the evacuation of patients the Department Manager / Line Manager must ensure that they receive appropriate training and instruction in the methods and procedures to be adopted and records of the training recorded and available for inspection. In addition staff should be provided with the opportunity to practise the required techniques at least on an annual basis to ensure that safe movement during evacuation procedures is employed.

4.13 BED PATIENT AREAS

- 4.13.1 As a general principle, bed patients and their visitors should only be evacuated if the Fire incident is located within their immediate area. The continuous sounding of the Fire Alarm will be the appropriate signal for evacuation to be considered.
- 4.13.2 The decision to evacuate the area will be made by the senior clinical person on duty at the time of the incident. Support for the evacuation will be provided by the Deputy Nominated Officer (Fire), Response Team if applicable and the Fire & Rescue Service when they arrive.
- 4.13.3 Patient evacuation when implemented should normally be by lateral means from compartment into adjoining compartment utilising available circulation routes away from the Fire zone and not necessarily into the open air.
- 4.13.4 In the event of an intermittent Fire Alarm Signal, preparation for evacuation should be made. Instructions will be given by either the Fire & Rescue Service, the Deputy Nominated Officer (Fire) or Senior Manager after consultation with the Senior Clinical Person present.

4.14 NON-BED PATIENT AREAS

- 4.14.1 On hearing a continuous Fire Alarm signal all staff, patients and visitors should evacuate the area to the designated assembly points.
- 4.14.2 On evacuation staff should ensure that all areas within their department are clear of all patients, staff and visitors if safe to do so.
- 4.14.3 In the event of an intermittent Fire Alarm Signal staff should prepare for evacuation of the area on instruction from the Fire & Rescue Service or the Deputy Nominated Officer (Fire).

4.15 RAISING THE ALARM.

- 4.15.1 The first few minutes are crucial in the development of a Fire and therefore staff should not attempt to tackle a Fire unless it is safe to do so and they have been trained in the use of the Fire Fighting Equipment provided within the premises.

4.16 IF YOU DISCOVER A FIRE: -

- 4.16.1 Operate the nearest Fire Alarm Break Glass Call Point.
- 4.16.2 Inform the senior person in charge, Deputy Nominated Officer (Fire) or switchboard if applicable on the location and type of Fire incident and ensure that a 999 call to the Fire & Rescue Service is made.

(Within hospital premises an emergency telephone number may be provided.)

- 4.16.3 Tackle the Fire using the appropriate Fire Extinguisher.

(If safe to do so and you have been trained in their use.)

- 4.16.4 Close all doors as you leave the area to contain the Fire and prevent the passage of smoke.

4.17 ON HEARING THE ALARM.

- 4.17.1 Staff should primarily be concerned for the safety of patients and others in the vicinity of the Fire. Staff (except those having duties within patient areas) should: -
- 4.17.2 Proceed immediately to the designated assembly areas for roll call.
- 4.17.3 Ensure visitors are instructed to leave by the nearest Fire Exit. (N.B. Lifts should not be used during Fire Evacuation).
- 4.17.4 Close all doors behind them as they leave to prevent the passage of smoke and limit the spread of Fire.
- 4.17.5 Never re-enter the building or Fire Area unless on the instructions of the Senior Person in Charge.

4.18 STAFF IN PATIENT AREAS.

- 4.18.1 Once a decision to evacuate patients has been made by the senior person in charge staff should: -
- 4.18.2 Remove all patients from the immediate vicinity of the Fire Incident.
- 4.18.3 Direct visitors and ambulant patients to the nearest Fire Exit.
- 4.18.4 Non-ambulant patients should be evacuated using approved and recognised methods utilising available equipment.
- 4.18.5 Close all doors behind them as they leave to prevent the passage of smoke and limit the spread of Fire.
- 4.18.6 On leaving the area, the person in charge should uplift the patient list and staff duty register.
- 4.18.7 At the assembly point a roll call should be taken of all staff and patients and the results passed to the person in charge.
- 4.18.8 Ambulant patients should be supervised to ensure that they do not wander away.

4.19 COMMUNICATION.

- 4.19.1 Communication is a vital part of NHSL Fire Strategy and should be introduced at an early stage throughout any Fire incident. The duty Deputy Nominated Officer (Fire) for the premises or department will be responsible for its co-ordination. Communication between the person in charge, the Fire Response Team (if applicable), the switchboard other members of staff and the Fire & Rescue Service is essential and must be maintained during the incident to ensure additional assistance is available if required.
- 4.19.2 In the event of a Fire Incident developing and having a consequential effect on other areas of the premises, the Deputy Nominated Officer (Fire) has the responsibility to decide when it is appropriate to inform the Nominated Officer (Fire), the Specialist Fire Safety Advisor and other Senior Staff Members and to ensure that any required Fire Investigation and Reports of such incidents are compiled.

Appendix 1

FIRE PREVENTION

5.1 The Triangle of Fire.

5.1.1 All Fire ignition requires three elements to sustain combustion: -

- Combustible Material.
- A supply of Oxygen / Air.
- A source of Ignition.

5.1.2 All three elements are readily found within any workplace and particularly in many Healthcare Premises throughout NHSL.

5.1.3 Combustible materials range from paper in domestic rubbish bins in offices, bedding, furniture and clinical waste in ward areas, flammable liquids and gases within laboratory and facilities buildings and storage areas including medical records. There is no area within Healthcare premises where the fatal combination of all three elements of the Triangle of Fire cannot be expected to arise.

5.2 Fire Behaviour

5.2.1 Once Fire ignition has occurred it utilises three methods to continue its destructive path.

- **Conduction:** - when heat is transferred directly through a solid material itself, usually metal but often wood, to cause ignition in another area.
- **Convection:** - When the smoke generated utilises air currents to rise when warm and fall in cooler areas. The smoke itself can be a source of ignition if it attains sufficient heat.
- **Radiation:** - When associated heat from Fire is transferred directly through the intervening air space to act as a further source of ignition.

5.3 Classification of Fire.

- Class A. Normal combustible solid material Fires.
(E.g. Paper, Wood etc.)
- Class B. Flammable liquid Fires
(E.g. Petrol, Alcohol etc.)
- Class C. Flammable gas Fires.
(E.g. Natural Gas, Butane, Propane etc.)
- Class D. Metallic Fires.
(E.g. Magnesium etc)
- Class F. Cooking Oil Fires.
(E.g. Cooking oil, flammable liquids etc)

5.4 Danger of Smoke

- 5.4.1 Smoke is produced at the earliest stages of combustion and is responsible for more fatalities than any other aspect of Fire. When carbonaceous materials ignite, Carbon Monoxide and Carbon Dioxide are produced and these products are both potentially lethal to humans. One asphyxiates while the other is poisonous. Modern materials and man made fabrics when ignited produce many other toxic by-products that are extremely harmful. (E.g. Hydrochloric Acid Gas, Hydrogen Cyanide etc).
- 5.4.2 When smoke is inhaled, apart from the damage done through heat affecting the bronchial passages, the human body's respiratory system is unable to cope and the victim may suffocate and die. It is therefore vital that all Fire Safety measures in place to prevent the spread of smoke are strictly enforced.

5.5 Smoking.

- 5.5.1 Smoking is a major source of Fire ignition throughout the NHSL and the NHS Lanarkshire Smoking Policy is in operation throughout all areas, which either prohibits or restricts the use of smoking materials to designated areas.
- 5.5.2 Where smoking restrictions are in place it is imperative that procedures are strictly enforced and all staff must ensure that the smoking policy is implemented.
- 5.5.3 If patients are allowed to smoke then staff must ensure that they use the designated rooms provided and supervision is available.
- 5.5.4 Staff must also ensure that suitable ashtrays are provided and all contents are safely extinguished before disposal.

5.6 Housekeeping

- 5.6.1 Housekeeping plays a major part of the NHSL Fire Strategy and plays a vital role in Fire Prevention and reduction of Fire and smoke spread should a Fire incident occur. It is therefore important that all staff are aware of the dangers of inappropriate storage and should ensure that: -
- 5.6.2 Rubbish or other combustible materials is not stored around radiators, other heating appliances, electrical equipment or obstructing the Fire Exits from the area.
- 5.6.3 Passageways and corridors comprising the means of escape from the department / building are never obstructed.
- 5.6.4 All unnecessary paper and other waste should be carefully disposed of and a tidy desk routine should be adopted to avoid paperwork piling up.
- 5.6.5 Flammable materials not in use should always be stored in metal cabinets suitable for their use.

5.7 Fire Escape Routes

- 5.7.1 Fire escape and exit routes are the means of ensuring that all staff, patients and visitors can safely evacuate from a Fire area to a place of safety away from the Fire and staff should therefore ensure that: -
- 5.7.2 Rubbish or other materials are never stored within escape routes and check that the exit provision is always available and unobstructed. A dropped match or cigarette could ignite combustible materials and render escape routes unusable.
- 5.7.3 Fire Exit doors must always be unobstructed and available for means of escape at all times.
- 5.7.4 Fire Doors and Smoke Stop Doors, except doors held in the open position and linked to the Fire Warning System, must always be kept closed and never wedged open to ensure that Fire and Smoke is contained and prevented from spreading into other Fire Compartments

5.8 Electrical Fire Safety.

- 5.8.1 Never overload electrical sockets.
- 5.8.2 Turn off lights and unplug other electrical equipment, where practical, before going off duty.
- 5.8.3 Switch off and report any faulty electrical equipment immediately to the help line or property & support services.
- 5.8.4 Do not reuse any faulty electrical equipment until a competent person has given approval.
- 5.8.5 There is a risk of fire from the overloading of circuits.

APPENDIX 2

FIRE PRECAUTIONS

6.1 Safe Means of Escape

- 6.1.1 Fire Precautions Legislation requires that all workplaces must be provided with a suitable means of escape, designed to comply with The Building Standards Agency (Scotland) Regulations 2004, NHS Scotland Firecode and The Fire (Scotland) Act 2005, taking into account any additional risk found by means of Fire Risk Assessment of the Premises. In addition the size, design, construction, layout, contents and the number of people present within the premises and their ability to respond to an alarm should also be taken into consideration.
- 6.1.2 The principle, on which a safe means of escape is based, is that people, regardless of the location of a Fire, should be able to proceed safely along a designated route, without outside assistance, to a place of safety.
- 6.1.3 A place of safety means an adjoining Fire Compartment, a Hospital Street, a Fire Protected Corridor or Passageway, a Walkway or an open space away from the building and sited to ensure that everyone involved are able to disperse safely away from the effects of Fire, Smoke, Heat and Toxic Fumes.
- 6.1.4 Within Healthcare premises the provision of a safe means of escape for Patients, Staff and Visitors is a statutory requirement. The NHS Scotland Firecode recommends that it is preferable that all occupants of a building or department should be able to turn their back to a Fire situation and escape away from it directly by way of Circulation Spaces, other Fire Compartments, Designated Escape Routes and Stairways to a place of safety. There may also be a further requirement for the provision of alternative escape routes, which lead directly to a place of safety away from the building.
- 6.1.5 Should there be any doubt regarding means of escape requirements contact the Fire Safety Advisor or NHSL Property & Support Services Department.

6.2 Criteria for assessing the required means of escape provision include: -

- 6.2.1 Other than for small workplaces or rooms of low or normal risk, an alternative means of escape should be provided.
- 6.2.2 Each exit route and final exit should be independent of the other.
- 6.2.3 Travel distances should not exceed those specified within The Building Standards Agency (Scotland) Regulations 2004 and the NHS Scotland Firecode.
- 6.2.4 Single direction of travel should not exceed a maximum of 15 metres before an alternative exit route is provided.
- 6.2.5 Maximum travel distance to a place of safety should not exceed 32 metres.

APPENDIX 3 STRUCTURAL FIRE PROTECTION

7.1 Structural Fire Protection

- 7.1.1 Structural Fire Protection comprises the major part of any Fire Strategy taking into account Structural Design Features, active and passive Fire Safety Systems or Equipment located within NHS premises and is designed to reduce the danger of Fire for all patients, staff and Visitors. Fire protections measures are designed to detect, contain, control, extinguish and provide a warning of Fire should ignition occur.
- 7.1.2 All staff should familiarise themselves with any Fire Safety Provisions provided within their building or department and report any obvious conditions that may reduce their effectiveness should a Fire situation be found.

7.2 Building Design.

- 7.2.1 All buildings throughout NHSL are designed with a view to provide adequate Fire Safety Structural Protection. The design must include Fire Safety Precautions ensuring adequate Structural Stability is maintained should a Fire occur, which is especially important for a building comprising more than one storey in height.
- 7.2.2 The most important factor is that Healthcare buildings are divided into Fire Compartments designed to ensure that a Fire will be contained and prevented from spreading into adjoining compartments both vertically and horizontally. It is therefore important to ensure that all staff are aware that in bed patient areas it is often only necessary to evacuate patients, staff and visitors into an adjacent Fire Compartment on the same floor level and not to the outside.

7.3 Managerial Responsibilities

- 7.3.1 It is vitally important that department managers, within NHSL buildings, are aware of their area of responsibility and should: -
- 7.3.2 Establish the boundaries of the Fire Compartment within their department.
- 7.3.3 Ensure that there are no obvious breaches of the Fire Compartment Walls and Ceilings, e.g. pipes, electric cables and services often breach Fire Compartments especially above false ceilings
- 7.3.4 It is essential that any openings created should be Fire Stopped with suitable materials to prevent the possibility of Fire, Heat and Smoke spread into and from adjoining compartments.
- 7.3.5 Managers should ensure that any problems found are reported to Property & Support Services Department.
- 7.3.6 Managers shall ensure that all problems are identified on their departmental 'Risk Register', are reviewed regularly and reported through NHSL risk management arrangements

7.4 Fire Doors

- 7.4.1 Although all doors can be regarded as having some Fire-resisting qualities, it is a requirement that certain door openings within NHSL premises must be fitted with Fire Resisting Doors constructed to provide a minimum of FD 30S standard and designed to assist safe means of escape and prevent the passage of Fire, Heat and Smoke into adjoining areas.
- 7.4.2 All designated Fire Doors should be maintained self closing and close fitting on to the door frame with the exception of specially designed Fire Doors which are held in the open position and will close on the operation of the Automatic Fire Detection and Alarm System.

7.5 Staff Responsibilities

- 7.5.1 To ensure compliance with *NHS Lanarkshire Fire Policy and Procedures* all staff should: -
- 7.5.2 Establish the location of all Fire Resisting Doors within their workplace or department.
- 7.5.3 Check that the required doors close effectively and if fitted with hold open devices close on the operation of the Automatic Fire Detection and Fire Alarm.
- 7.5.4 Ensure that all Fire Doors are never wedged in the open position.
- 7.5.5 It is good practice to ensure that all doors if practical are closed during the night.
- 7.5.6 It is essential that any faults found should be reported to NHSL's Property & Support Services for remedial action.

7.6 Automatic Fire Detection and Alarm Systems

- 7.6.1 To ensure compliance with the requirements for safe evacuation all premises occupied by NHSL must be provided with a method of detecting and giving a warning of Fire. All Fire Alarm systems in general should comprise of a minimum of Break Glass Call Points located at or near final exits from the building or department and sufficient sounding devices to ensure that a warning of Fire is audible to all occupants.
- 7.6.2 All Automatic Fire Detection and Alarm Systems within NHSL premises should be installed and maintained in compliance with the requirements of BS 5839, Fire Detection and Alarm Systems for Buildings and the NHS Scotland Firecode, Health Technical Memorandum HTM82.

7.7 Automatic Fire Detection

- 7.7.1 There are a number of ways in which Fire can be detected however the three principle methods involve: -
 - The presence of smoke.
 - The presence of flame.
 - The sensing of heat, either as actual temperature or rate-of-rise in temperature.

- 7.7.2 Automatic Fire Detection within NHSL premises is mainly by the detection of smoke. Heat detectors are normally fitted within plant room areas, main kitchen areas, staff tearooms and other designated area to minimise unwanted alarm signals.
- 7.7.3 All Automatic Fire Detection, provided within NHSL premises, should be powered by mains electricity and form part of an integrated Automatic Fire Detection and Alarm System.

7.8 Managerial Responsibilities

- 7.8.1 Management responsibilities should ensure that all staff are aware of: -
- 7.8.2 The type and location of all Automatic Fire Detection sited within their premises or department.
- 7.8.3 The method of raising the alarm of Fire.
- 7.8.4 The different sounds made by the Fire Alarm (continuous or intermittent).
- 7.8.5 The Fire evacuation procedures for their premises or department.
- 7.8.6 Managers should also ensure that a procedure is in place for the testing and maintenance of the Automatic Fire Detection and Alarm System and that records are kept and available for inspection.

APPENDIX 4 FIRE FIGHTING EQUIPMENT

8.1 Fire Fighting Equipment

- 8.1.1 To ensure compliance with the NHS Scotland Firecode and The Fire (Scotland) Act 2005, it is a requirement to provide adequate first aid Fire Fighting Equipment throughout all Healthcare buildings occupied by NHSL.
- 8.1.2 Portable Fire Extinguishers are designed to be utilised in attacking and extinguishing, containing or restricting the growth of a Fire discovered at an early stage of ignition.
- 8.1.3 Portable Fire Fighting Equipment is designed for emergency use only on small Fire incidents and should only be used by staff who have been trained in their appropriate use.

8.2 Portable Fire Extinguishers.

- 8.2.1 Portable Fire Extinguishers must be in compliance with the requirements of BS5432 and should be installed and maintained in accordance with the criteria detailed within BS5306.
- 8.2.2 In accordance with European Directives, BS EN3 dictates that all Portable Fire Extinguishers must feature a red body. In addition BS 7863 allows European Manufacturers to affix coloured identification panels and operational instructions to the outside of the extinguisher body.
- 8.2.3 Throughout all premises occupied by NHSL, a appropriate number of portable Fire Extinguishers should be provided and sited in accordance with the requirements of the Fire Safety (Scotland) Regulations 2006. The type and number of Fire Extinguishers provided will be in accordance with the associated risk involved.
- 8.2.4 Within Healthcare premises there is no longer a requirement to provide Fire Hose Reels for Fire Fighting purposes and at present they are being discontinued throughout NHSL premises.

8.3 Water Type Fire Extinguishers

- 8.3.1 **Red** in colour with a capacity of six or nine litres. The method of activation depends on the manufacturer's design.
- 8.3.2 **Suitable** for Class A Fires, which involve normal combustible materials e.g. paper, fabrics, timber and other organic materials.
- 8.3.3 **Method of Use:** - The jet or spray should be directed at the base of the flames and kept moving across the area of the Fire. Any hot spots should be dealt with after the main section of the Fire has been extinguished.
- 8.3.4 Water type Fire Extinguishers should not be used on electrical equipment Fires.

8.4 Carbon Dioxide Fire Extinguisher.

- 8.4.1 **Red** in colour with a minimum capacity of two kilograms. This type of extinguisher is fitted with a distinctive horn arrangement, attached to the discharge pipe, which other extinguishers do not have.
- 8.4.2 **Classed** as a general purpose Fire Extinguisher, it is suitable for Class B and D Fires that involve chemical, flammable liquids, burning metals as well as electrical equipment.
- 8.4.3 **Method of Use:** - The discharge horn should be directed at the base of the flames and the gas kept moving across the area of the Fire. For incidents involving electrical equipment, the gas should be directed into the casing through any vent holes available.
- 8.4.4 **Note:** - Carbon Dioxide has a limited cooling effect and care should be taken to ensure that the Fire does not re-ignite.
- 8.4.5 **Danger:** - Carbon Dioxide can be harmful when used in confined spaces. The area should therefore be ventilated as soon as possible after the Fire is extinguished.

8.5 Dry Powder Fire Extinguisher

- **Red** in colour and contains a powder similar to talc. Dry Powder is classed as a general purpose Fire extinguisher.
- **Suitable** for Class B type Fires and considered safe for use on live electrical equipment although it does not readily penetrate spaces inside electrical casings.
- **Method of Use:** - The discharge nozzle should be directed at the base of the flames and with a rapid sweeping motion the flames should be driven towards the far edge until they are extinguished. It should be noted that Dry Powder has a limited cooling effect and care should be taken to ensure that the Fire does not re-ignite.

8.6 Foam Fire Extinguisher

- **Red** in colour and generally nine litres in capacity. This type of extinguisher is not commonly found in Healthcare property however they are sometimes found in kitchen areas to cover deep fat fryer risks.
- **Suitable** for Class B type Fires where flammable liquids are involved.
- **Method of Use:** - The contents should be directed at the rear of the Fire and attempt to build up a layer of foam allowing it to flow across the burning surface of the Fire. The Fire will be extinguished by smothering the burning liquid and excluding the oxygen.

Note: - A variation of different types of foam can now be purchased and is marketed under the name of AFFF, FFFP and Foam Spray. All of these products are suitable for Class A and B type Fires.

8.7 Frygard Fire Extinguishers

- **Red** in colour with a capacity of six litres.
- **Suitable** for Class F type Fires. This is a new classification for flammable liquids contained within pan and deep fat fryers.
- **Method of Use:** - This type of Fire extinguisher is provided with a long lance, which allows a chemical spray to be discharged over the surface of the Fire. On contact with burning fat or oil the chemical forms a thick impenetrable blanket and smothers the Fire.

8.8 Fire Blanket

- **Red** container and usually found in areas where there is a particular risk of Fire.
- **Suitable** for class A and B type Fires and used to smother a Fire and starve it of oxygen. Fire Blankets are normally found in kitchens, physiotherapy departments, laboratories and other areas where deep fat fryers, wax baths and flammable chemicals are in use. A Fire Blanket is also particularly useful when dealing with a person whose clothing has caught Fire.
- **Method of Use:** - The Fire Blanket should be placed carefully over the flames with hands and loose clothing shielded from the Fire. Additional care should be taken to avoid the flames being blown towards the person using the Fire Blanket.

8.9 Fire Hose Reels

- **Red** in colour and should they be installed are permanently connected to the mains water supply. Hose reels are usually located in an accessible and conspicuous position to ensure that no section of the area they are designed to cover is more than six metres from the nozzle when the Hose Reel is fully extended.
- **Suitable** for Class A type Fires and utilised for reducing the Heat from a Fire.
- **Method of Use:** - The water jet should be aimed at the base of the flames and kept moving across the area of the Fire

NOTE: - Hose Reels are not suitable for use on Fires involving electrical equipment.

There is no longer a requirement to provide Fire Hose Reels within Healthcare premises and their use is being discontinued throughout the NHSL Estate.

APPENDIX 5

FIRE INSTRUCTIONS

9.1 Fire Safety Instructions

9.1.1 It is a requirement of *NHS Lanarkshire Fire Policy and Procedures*, The Fire (Scotland) Act 2005 and The Fire Safety (Scotland) Regulations 2006 that all staff should be aware of Fire Procedures and relevant instructions applicable to their workplace.

9.1.2 It is the responsibility of Ward / Department Managers to ensure that the appropriate Fire Awareness instructions are carried out with regard to: -

9.1.3 Induction, all new staff members should be given a tour of the Workplace indicating: -

- The Means of Escape from the Ward or Department.
- The location of the Fire Alarm Break Glass Call Points.
- The local method of raising the alarm in the event of Fire.
- The location and type of the Fire Fighting Equipment available.
- The Evacuation Procedure for the Ward or Department.

9.1.4 Quarterly

Ward / Department Managers should on a quarterly basis: -

- Carry out a Fire Safety Audit of their workplace using the Health & Safety Control Book.
- Indicate any significant Fire Risks highlighted during the audit to all staff and record them in the relevant section of the Control Book.
- Report any defects found in the Fire Safety Provision to NHSL's Property & Support Services Department.
- Should any advice be required, contact the Fire Safety Advisor.

9.1.5 Annually

On an annual basis Ward / Department Managers should ensure that: -

- Each member of staff attends relevant Fire Safety Awareness training and instruction when required
- Each member of staff receives additional instruction and training regarding equipment and procedures in use within the particular Ward or Department.
- The training highlights and reinforces the local action to be taken on discovery of a Fire.

- All Staff are aware of the method of raising the alarm of Fire and confirming the alert (where appropriate).
- The procedures for the evacuation of Patients, Staff and Visitors will be carried out in accordance with the local Fire Procedures and Evacuation Plan for the particular ward or department.
- All staff are aware of any additional Fire Risk identified during a Fire Risk assessment carried out for the Ward / Department and the appropriate risk reduction and control measures implemented to reduce the risk.
- The Assembly Point location and the Roll Call Procedures are suitable and effective to ensure safe evacuation of the Ward or Department in an emergency.
- All staff are aware of the communication procedure to ensure that additional assistance, (Fire Response Team if applicable) will be alerted to attend the area.
- Fire drills are carried out annually or more frequently if considered necessary.

APPENDIX 6

FIRE DRILLS & EVACUATION

10.1 Fire Drills

10.1.1 A Fire Drill or Exercise should be regarded as a simulation of a Fire Emergency and utilised to: -

Test the efficiency and effectiveness of the NHSL Fire Policy & Procedures.

To provide an opportunity to practice the procedures required in an emergency.

10.1.2 To provide a systematic method of assessing the implemented Procedures, Fire Action Plans and successful conclusion of the Fire Drill or exercise.

10.1.3 Fire Drills should be carried out within premises or departments annually or more frequently if considered necessary.

10.1.4 Prior to the Fire Drill taking place the Ward or Department Manager should consider: -

- The type and mobility of Patients, Staff and Visitors within the location.
- That any movement of Patients will not lead to further injury of any Patient or member of Staff taking part in the drill.
- Should one of the Fire Exits be declared unavailable monitor whether all Staff are aware of the location of alternative Exit Routes.
- If applicable account should be taken of any Structural Fire Protection available and the provision of lateral evacuation encouraged when necessary.
- Those evacuation aides, where provided, are utilised during all Fire Drills to ensure that all Staff are proficient in their use and their application is quick and effective.

Note: - a risk assessment of the task involved must be taken before any evacuation aides are utilised in training sessions to ensure the safety of Patients and Staff will not be compromised.

10.2 Fire Action Notices

10.2.1 Throughout NHSL Premises sufficient Fire Action Notices should be displayed to ensure that all Staff and Visitors are provided with coherent instruction regarding: -

- The action to be taken on discovery of a Fire.
- The action to be taken on hearing the particular Fire Alarm Sound.
- Where the Fire Assembly points are located.
- General operating instructions on the use of Portable Fire Fighting Equipment.

10.2.2 The use of Fire Fighting Equipment should only be considered when the Fire is small enough to tackle and staff have been trained in the use of the equipment.

10.3 Evacuation Procedures

10.3.1 The Primary Aims of NHSL's Fire Evacuation Procedures are to provide guidance and assistance for all Staff on how: -

- To remove Patients, Staff and Visitors safely and efficiently away from the immediate danger and effects of Fire, Smoke and Toxic Fumes.
- To ensure that all Staff are aware of the Structural Fire Protection, the Fire Safety Systems and the Safe Evacuation Routes available within the premises or department.
- To ensure that the evacuation routes and the travel distance involved will be as short as possible.
- To ensure where possible that routes, which may be required by Fire Fighters attacking the Fire, are not obstructed.
- To identify an area remote from a Fire which may be suitable for roll call procedures and, if necessary, the continued treatment of Patients.
- To ensure when possible that lateral evacuation of Patients can be promoted and practiced when required.
- To ensure that, where evacuation aids have been provided, on going training in their use should be encouraged and records kept of all staff taking part.

10.3.2 When Fire Evacuation is being considered Staff should also take into account: -

- The number of Patients, Staff and Visitors who may require to be immediately evacuated.
- Any physical constraints within the area e.g. stairs, narrow doorways, ramps, location of Fire Doors etc.
- Staff availability and capabilities.
- How to communicate should additional assistance be required.
- Patient mobility
- Patient characteristics.
- The use of lifts should not be considered unless they have been designed and designated for use in a Fire Emergency.

APPENDIX 7

ARSON PREVENTION

11.1 Arson Prevention

11.1.1 The legal term for Arson in Scotland is Wilful Fire Raising and is known to have been the cause of around 20% of Fires within Healthcare Premises. Many factors provide the motivation for Wilful Fire Raising including Mental Instability, Grievances and Related Criminal Activities such as Theft.

11.1.2 Minimising the risk of Wilful Fire Raising is mainly down to the security arrangements within each individual premises or department including challenging unauthorised access or visitors found in any location throughout NHSL. In addition good housekeeping procedures ensure that there are limited combustible materials available for a source of ignition.

11.2 High Risk Areas

11.2.1 Areas at High Risk of Wilful Fire Raising include: -

- Rear Entrances to Healthcare property.
- Basement Corridors.
- Lift Areas.
- Public Toilets.
- All areas where access is readily available.
- Staff Residencies.
- Unsecured Plant Rooms.
- Domestic and Clinical Waste areas.

11.3 Wilful Fire Raising Prevention

11.3.1 The following points are essential in preventing Wilful Fire Raising attacks throughout NHSL's organisation: -

- Security arrangements should be in place to ensure that unauthorised persons are unable to access vulnerable locations.
- Intruders should be immediately detected and a culture developed amongst all staff to ensure that any unauthorised persons are challenged.

11.4 Fire Safety Arrangements

- Wilful Fire Raising can be prevented by ensuring that all Fire Safety Provisions are in place for the detection of Fire.
- All Fire Safety Systems for the containment and extinguishments of Fire are maintained and available for immediate use.
- Good Housekeeping is essential for the prevention of Wilful Fire Raising Attack.
- Staff must ensure that any combustible material including domestic and clinical waste is deposited in the appropriate containers and that the removal of waste products regularly takes place.

11.4.1 It is vitally important therefore that the Fire Strategy based on the avoidance of Fire detailed within this NHSL Fire Policy and Procedures document are strictly adhered to and thoroughly rehearsed.

11.4.2 Incident Reporting.

It is essential that all security incidents relating to Fire or Wilful Fire Raising are reported and recorded using the Datix system or an NHSL IR1 form where appropriate

APPENDIX 8 FIRE PRECAUTIONS LEGISLATION

12.1 Government Legislation

12.1.1 Government Legislation has been introduced under The Regulatory Reform (Fire Safety) Order, and has repealed all previous requirements effectively altering the Fire Safety Regulatory requirements throughout the NHS. This new legislation introduces a National Framework setting out Government expectations of the Fire & Rescue Service enforcement regarding Fire Safety Provision required for all premises.

12.1.2 Within Scotland the Fire (Scotland) Act, introduced during 2005 and the Fire Safety (Scotland) Regulations 2006 have now been fully implemented effectively removing the requirement for Fire Certification for NHS Premises. The enforcement for Fire Safety Regulations now falls within the scope of Fire Risk Assessment and Integrated Risk Management Planning with the onus for legislative compliance remaining with NHSL Managers who should ensure that the required documented Fire Risk assessments are carried out. Failure to carry out the required assessments could result in legislative prosecution by the Fire & Rescue Service who are the enforcing authority for the new regulations.

12.1.3 The legislation contained within the Fire (Scotland) Act and The Fire Safety (Scotland) Regulations, repealed the existing requirements of the Fire Precautions Act 1971 which are no longer in force, however the contents of any previously issued Fire Certificate will form the basis of any Fire Risk Assessment carried out in individual premises within the NHSL Estate.

12.2 Fire Safety (Scotland) Regulations 2006

12.2.1 All Healthcare establishments, premises or parts of buildings, which because of the type of work carried out and the number of staff at work, require a Fire Risk Assessment to be compiled for each individual workplace.

12.2.2 It is imperative that these areas are registered and a Fire Risk Assessment fully documented. The Fire Safety Advisor will monitor the NHSL Estate and advise the Nominated Officer (Fire) which premises currently require upgrading works to ensure compliance with the requirements of the legislation.

12.2.3 Ward or Department Managers within buildings are responsible for ensuring that the Fire Safety Conditions recommended by the Fire Risk Assessment document are being complied with.

12.2.4 Fire Risk Assessment conditions include: -

- Advising the Fire Safety Advisor of any structural alterations carried out within the premises that may materially change the conditions detailed in the Assessment document. Following receipt of such advice, The Fire Safety Advisor will consult with the Fire Authority, Local Authority and Site Responsible Managers to ensure that the proposed alterations are acceptable before any work begins.
- Ensuring that all Staff attends appropriate Fire Safety Awareness Training
- Ensure that all staff, within their Ward or Department, participate in arranged Fire Drills or Evacuation Exercises.

- Ensure that documented records of all Fire Safety Training are kept and available for inspection.
- Encourage all Staff to maintain a high standard of housekeeping throughout the Premises or Department.
- Ensure that the means of escape from the building, as detailed in the Fire Risk Assessment Document, is maintained and available at all times and that all escape routes are clear and unobstructed.
- Ensure that the Emergency Lighting provision where fitted complies with the requirements of the Fire Risk Assessment and the system is tested and maintained to BS 5266.
- Ensure that adequate and sufficient Portable Fire Fighting Equipment is available and is being maintained in compliance with the requirements of BS5306.
- Ensuring that the Automatic Fire Detection and Alarm System is audible throughout the area and is tested on a regular basis and maintained in compliance with the requirements of BS 5839.

12.2.5 It is also a requirement of Fire Safety Regulations that a record of all tests, maintenance of equipment, Staff Fire Awareness Training and Fire Drills are recorded in a Fire Log Book to ensure compliance with the contents of the Fire Risk Assessment.

12.3 Special Factors

12.3.1 Managers within Laundries, Hospital Kitchens and Laboratories will require to take account of the additional requirements contained in the relevant Fire Practice Notes forming part of in the NHS Scotland Firecode documents, which may also be included as conditions identified within the contents of the Fire Risk Assessment for the individual premises. The Fire Risk Assessment may include a clear commitment that the procedures for the storage and use of flammable liquids and other flammable materials has been taken into account and implemented.

12.3.2 Further advice on the requirements for Staff Training and compliance with the relevant NHSScotland Firecode and Fire Practice Notes can be obtained from the Specialist Fire Safety Advisor who is based at Property & Support Services in Wishaw General Hospital

Appendix 9

Fire Precautions Legislation

13.1 Fire Safety (Scotland) Regulations 2006.

13.1.1 The Fire Safety (Scotland) Regulations 2006 which came into force as part of The Framework Directive issued by the European Commission and are now incorporated into The Fire (Scotland) Act 2005, place a statutory requirement on an employer to carry out Fire Risk Assessment for all premises and buildings occupied by NHS. The regulations also require that if five or more employees are at work within the premises, the Fire Risk Assessment when completed must be documented and kept available for inspection by the Fire & Rescue Service who are responsible for the enforcement of the regulations.

13.2 Aim of Fire Safety Legislation

13.2.1 The aim of the Fire Safety (Scotland) Regulations 2006 through the process of Risk Assessment is to protect all Patients, Staff and Visitors to NHS Premises from the effects of Fire, Heat and Smoke and to require necessary and reasonable improvements to be made in the Fire Safety Provision and Procedures within the individual premises. The legislation is also intended to minimise hazards and reduce the risk should Fire occur.

13.2.2 The responsibility for compliance with the requirements of the legislation rests with the employer who can appoint a suitably qualified and trained employee to compile the Fire Risk Assessment and ensure compliance with the regulations.

13.2.3 Managers are responsible for ensuring that the required Fire Risk Assessments are compiled and where any risks are highlighted every effort must be made to eliminate or reduce them to an acceptable level.

13.2.4 Where the identified risk is of a nature that cannot be eliminated, additional Policy, Procedures and any additional Control Measures must be documented, implemented and all Staff trained in any further procedures to be followed should evacuation of the area become necessary.

13.2.5 Emergency Evacuation Plans detailing all Emergency Escape Routes and Exit Provision (in colour) should be provided along with the location of Automatic Fire Detection, Fire Alarm Break Glass Call Points and Portable Fire Fighting Equipment. The Emergency Evacuation Plan may also be utilised as a teaching aid for new Staff and should be located in a conspicuous position within the Ward or Department.

13.2.6 The Fire Risk Assessment when completed should be regularly monitored and amended whenever alterations have taken place. Fire Risk Assessments should be reviewed and the results documented on an annual basis.

NHS LANARKSHIRE
FIRE POLICY & PROCEDURES
UPDATES & AMENDMENTS

DATE	VERSION	UPDATE / AMENDMENT
Sept 2006	Issue New Policy	New Policy & Procedures Document Issued
Sept 2007	Updated Amendment No 1	Policy Updated to Take Account of new Fire Safety Legislation Fire Scotland Act and Fire Safety (Scotland) Regulations
Sept 2008	Amendment No 2	Policy amended to take account of updated Firecode Health Technical Memorandums SHTM 81,SHTM 85,SHTM 86 and new Scottish Government Fire Policy CEL 25 (2008)
Mar 2010	Updated Amendment No 3	Policy amended and updated to take account of Fire Responsibilities being transferred from Director of HR to Director of Strategic Implementation performance and Planning and transfer of Fire Safety from Salus to PSSD