journey to change

NHS
Tees, Esk and Wear Valleys
NHS Foundation Trust

Public – To be published on the Trust external website

Fire Safety Policy

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Status: Ratified
Document type: Policy

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1 Introduction

This document provides a framework of core safety measures across all of the Trust's property and premises. For staff to know what they need to do, to prevent fires and in the event of a fire.

This document is critical to the delivery of OJTC and our ambition to co-create safe and personalised care that improves the lives of people with mental health needs, a learning disability or autism. It helps us deliver our three strategic goals as follows:

This document supports the Trust to co-create a great experience for our colleagues by ensuring that the workplace is safe and suitable and has adequate fire safety features and arrangements, which comply with the Regulatory Reform (Fire Safety) Order 2005 and ensures standard practice of protocols throughout all of its properties.

2 Why we need this policy

The effective management of fire safety in any organisation requires the board to clearly set out the fire safety priorities and objectives for the organisation. This is achieved by the preparation and dissemination of a fire safety policy.

2.1 Purpose

It is the policy of Tees, Esk and Wear Valleys NHS Foundation Trust (the Trust) to protect all persons on Trust premises from the hazards of fire. This policy forms part of the Trust's overall Health & Safety Policy.

2.2 Objectives

The Trust will ensure that: -

- Adequate means for escape are provided and maintained.
- Premises are maintained in a safe condition with fire protection structures.
- Systems of work minimise fire risks.
- Fire training is provided for all staff and other relevant groups (e.g. voluntary workers).
- An adequate fire warning system is provided and maintained.
- Adequate means for fighting fires are provided and maintained.
- Housekeeping standards are monitored to minimise fire risks.
- To ensure fire co-operation and communication procedures are in place for all premises including those that are shared.
- Access and resource fire protection needs on a risk prioritised basis.
- The Trust will ensure its statutory duties are met, through inspection and audit.

3 Scope

This document applies to all directly and indirectly employed staff within the Trust and other persons working within the organisation in line with the Trusts Human Rights, Equality Diversity and Inclusion Policy.
This policy encompasses the management of fire safety in all of the Trusts occupied premises.

A commitment to be aware of fire precautions and fire safety arrangements is a basic duty of all staff and an essential obligation for everyone with management responsibility.

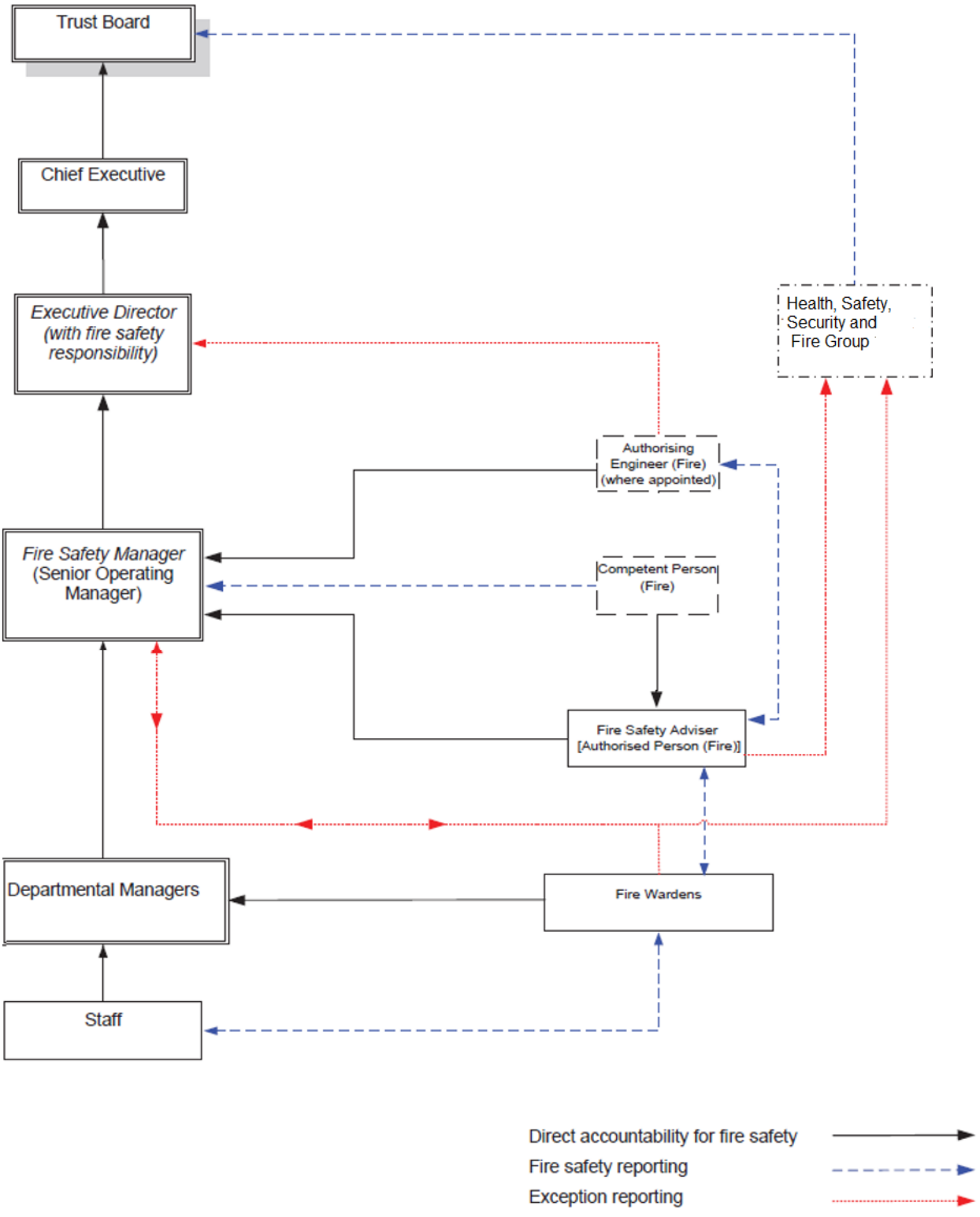
3.1 Who this policy applies to

This Policy applies to all of the Foundation Trust's premises and property and also to all staff who are directly or indirectly employed by the Trust.

3.2 Roles and responsibilities

Note: The Responsible Person has the duty to implement the articles and regulations of The Regulatory Reform (Fire Safety) Order 2005 (RRO). The main regulatory authority is the Fire and Rescue Service who have the power to inspect premise and records, investigate, serve notice or begin lawful proceedings to responsible persons. The Fire Authority will determine who in their opinion the responsible person/s is, when there is a need for them to do so under Article 3 of the Regulatory Reform (Fire Safety) Order 2005 (RRO).

MANAGEMENT STRUCTURE



Role	Responsibility
Board of Directors	• The Trust Board has overall accountability for the activities of the organisation, which include fire safety; • The Trust Board should ensure that it receives appropriate assurance that the requirements of current fire safety legislation and the objectives of DH's Firecode are being met; • The Trust Board discharges the responsibility for fire safety through the Chief Executive.
Chief Executive	• The Chief Executive will on behalf of the Board, be responsible for ensuring that current fire legislation is complied with and where appropriate, DH's Firecode guidance is implemented in all premises owned, occupied or under the control of the Trust; • The Chief Executive will ensure that all agreements for the provision of care and other services by third parties include sufficient contractual arrangements to ensure compliance with the Trust's fire safety policy; • Ensure a Director is appointed at Board level who will have the nominated responsibility for fire safety matters; • The Chief Executive discharges the day-to-day operational responsibility for the fire safety through the Board Level Director (with fire safety responsibility); • Agree and sign the Annual Fire Statement for fire safety following advice from the Board Level Director (with fire safety responsibility).
Board Level Director (with fire safety responsibility)	• The Director with fire safety responsibility is responsible for ensuring that fire safety issues are highlighted at Board Level; • The responsibility will extend to the proposal of programmes of work relating to fire safety for consideration as part of the business planning process; • This will include the management of the fire-related components of the capital programme and future allocation of funding; • At an operational level the Director with fire safety responsibility should be: • Assisting the Chief Executive with Board level responsibilities for fire safety matters;

	• Ensuring that the Trust has in place a clearly defined fire safety policy and relevant supporting protocols and procedures; • Ensuring that all work that has implications for fire precautions in new and existing Trust buildings is carried out to a satisfactory technical standard and conforms to all prevailing statutory and mandatory fire safety requirements (including DH's Firecode); • Ensuring that all proposals for new buildings and alterations to existing buildings are referred to the Fire Safety Manager before building control approval is sought; • Ensuring that all passive and active fire safety measures and equipment are maintained and tested in accordance with the latest relevant legislation/standards, and that comprehensive records are kept; • Ensuring cooperation between other employers where two or more share premises; • Ensuring through senior management and line management structures that full staff participation in fire training and fire evacuation drills is maintained; • Ensuring that agreed programmes of fire precautions are properly accounted for in the Trust's Annual Business Plan; • Ensuring that an annual audit of fire safety and fire safety management is undertaken, and the outcomes communicated to the Trust Board; • Fully support the Fire Safety Manager function; • In line with delegated authority, the Director with fire safety responsibility devolves day-to-day fire safety duties to the Fire Safety Manager.
Fire Safety Manager	• The Fire Safety Manager is tasked with developing and managing the fire safety management system, and will be responsible for: • The day-to-day implementation of the fire safety policy; • Reporting of non-compliance with legislation, policies and procedures to the Director with fire safety responsibility; • Obtaining expert advice on fire legislation; • Obtaining expert technical advice on the application and interpretation of fire safety guidance, including DH's Firecode;

	• Raising awareness of all fire safety features and their purpose throughout the Trust; • The development, implementation, monitoring and review of the organisation's fire safety management system; • The development, implementation and review of the organisation's fire safety policy and protocols; • Ensuring that the fire risks identified in the fire risk assessments are included in the Trust's risk register as appropriate; • The operational management of fire safety risks identified by the risk assessments; • The development, implementation and review of the organisations fire emergency action plan; • Ensuring that requirements related to fire procedures for less able staff, patients and visitors are in place; • The development, delivery and audit of an effective fire safety-training programme; • The reporting of fire incidents in accordance with Trust policy and external requirements; • Monitoring, reporting and initialising measures to reduce false alarms and unwanted fire signals; • Liaison with external enforcing authorities; • Liaison with Trust managers; • Monitoring the inspection and maintenance of fire safety systems to ensure it is carried out; • Ensuring that suitable fire safety audits are undertaken, and the outcomes suitably reported; • Providing a link to the relevant Trust committees; • Presenting the Annual Fire Statement to the Director with fire safety responsibility.
Fire Safety Advisor (Authorised Person (Fire))	• The Fire Safety Advisor will be accountable to the Fire Safety Manager for matters of fire safety. They provide competent fire safety advice and will be responsible for: • Undertaking, recording and reporting fire risk assessments; • Providing expert advice on fire legislation; • Providing expert technical advice on the application and interpretation of fire safety guidance, including DH's Firecode; • Assisting with the development and delivery of a suitable and sufficient training programme for staff; • The assessment of fire risks within premises owned, occupied or under the control of the Trust;

	• The preparation of fire prevention and emergency action plans; • The investigation of all fire related incidents and fire alarm activations; • Liaison with the enforcing authorities on technical issues; • Liaison with managers and staff on fire safety issues; • Liaison with the Authorising Engineer (Fire) where necessary; • Compile the Annual Fire Statement for the Fire Safety Manager; • Developing Personal Emergency Evacuation Plans where required; • Monitor unwanted fire signals and false alarms to ensure necessary action is taken to prevent re-occurrence to reduce the number of incidents within the Trust.
Authorising Engineer (Fire) [External Specialist] [Where appointed]	• An Authorising Engineer (Fire) will be commissioned by the Fire Safety Manager to provide specialist fire safety support as deemed appropriate. • When commissioning an Authorising Engineer (Fire), the trust will ensure that the appointed Authorising Engineer (Fire) is a chartered engineer and member of the Institution of Fire Engineers or a chartered member of a similar professional body or that these specialist organisations are contacted for further guidance and/or information; • The Authorising Engineer (Fire) will be required to demonstrate competence in their particular field of expertise.
Competent Person (Fire)	• Installers and maintainers of fire safety equipment will be commissioned by the Trust and must be able to demonstrate a sound knowledge and specific skills in the specialist service being provided. This may include the installation and/or maintenance of related fire safety equipment/services such as: • Fire alarm and detection systems; • Portable firefighting equipment; • Fire suppression systems; • Fire dampers; • Fire-fighting hydrants etc.; • Fire compartmentation.
Local Management	• Matrons, General Managers of services and departmental managers have responsibility for:

	• Monitoring fire safety within their respective workplaces and ensuring that contraventions of fire safety precautions do not take place; • Ensuring local fire risk assessments are undertaken and maintained up-to-date; • Notifying the Fire Safety Adviser of any proposals for "change of use", including temporary works that may impact on the risk assessment, within their area; • Reporting any defects in the fire precautions and equipment in their area and ensuring that appropriate remedial action is taken; • Ensuring that local fire evacuation plans are developed and brought to the attention of staff and adequately rehearsed to ensure emergency preparedness; • Ensuring the local fire evacuation plan is revised in response to changes, including temporary works, which may affect response procedures; • Ensuring the availability of a sufficient number of appropriately trained staff at all times to implement the local fire evacuation plan; • Ensuring that fire evacuation routes and fire exits remain clear and fire doors are not wedged open; • Ensuring that the duties outlined in this document and relevant fire safety instructions are brought to the attention of staff through induction and on-going staff briefings; • Ensuring that every member of their staff attends fire safety training as set out in the Trust's fire safety training matrix; • Ensuring that all new staff, on their first day in the ward/department, are given basic familiarisation training within their workplace, to include; • Local fire procedures and evacuation plan; • Means of escape; • Location of fire alarm manual call points; • Fire-fighting equipment; • Assembly points; • Any fire risks identified; • Keeping a record of staff induction and attendance at fire safety training; • Ensuring staff at all levels understand the need to report all fire alarm actuations and fire incidents as detailed in the fire safety protocols;

	• Ensuring that sufficient Fire Wardens are identified, and appointed, where necessary for their specific areas of responsibility; • Ensure patients are assessed by staff on entry to wards and departments and where necessary, put measures in place to ensure persons with disabilities can evacuate safely from the premises; • Ensure If anyone (staff, service user or visitor) needs extra help to follow the evacuation plan, a Personal Emergency Evacuation Plan (PEEP) should be completed. (PEEPs are required for all staff, requiring assistance.) A PEEP may be needed for someone with an impairment or disability such as: ▪ Mobility impairment ▪ Sight impairment ▪ Hearing impairment ▪ Cognitive impairment ▪ A medical condition or injury which might cause them to need assistance to evacuate safely. This is not an exhaustive list and other disabilities may come under this remit.
All Employees	• All staff have a duty to exercise reasonable care in relation to fire safety and in particular to:- • Complete fire training annually; • Bring to the attention of their manager any perceived fault in fire precautions; • Take part in evacuation drills when required to do so; • Ensure their activities do not impede fire evacuation routes; • Follow closely any specific fire procedures drawn up for their safety, particularly with regard to evacuation procedures on hearing the fire warning system alarm; • Raise the alarm if they detect or suspect a fire; • Ensure necessary fire exit routes are kept clear and not obstructed; • Ensure fire doors are kept closed and not wedged open, or if on magnetic catches, not obstructed; • In the event of a fire sound the alarm, evacuate the area and close all doors, in accordance with the laid down evacuation procedure Following this if it is safe to do so, without taking personal risks, attempt to extinguish the fire using the appropriate fire fighting equipment; • Assist other wards and departments with evacuations as and when called upon to assist;

	• Report all fires to their managers and on the Trust's Incident Reporting System, no matter how minor.
Fire Wardens	• All Fire Wardens – within community and appointed premises: • Act as focal point on fire safety issues for local staff; • Organise and assist in the fire safety regime within local areas; • Raise issues regarding local area fire safety with line management. Assist with co-ordination of the response to an incident within the immediate vicinity; • Be responsible for roll-call during an incident; • Be trained to tackle with first aid firefighting equipment where appropriate; • Support line managers and the Fire Safety Advisor on fire safety issues.
Shared/Multi Occupancy/Disciplinary Teams and Premises Not Owned By The Trust	• Managers have a responsibility to ensure the safety of their staff working in buildings owned by a third party. Managers must therefore discuss fire safety issues with the relevant organisation and gain assurance that appropriate fire safety systems are in place and that staff have access to, for example relevant information and training. This should include: • Instruction and information before occupying the building on fire safety issues and procedures; • How to raise the alarm; • Access/egress routes; • Position of fire extinguishers and "information" on their use; • Information on any fire prevention measures in place; • Any responsibilities staff have e.g. to ring 999, or to aid in the evacuation of other people, e.g. patients; • Access to Fire Safety training at the location if available; • Access to any risk assessments that have been undertaken.
Fire Safety Group	• Meets every 2 months and reports to the Health, Safety, Security, and Fire Group; • The Fire Safety Group will receive regular reports on fire related issues including fires, unwanted fire signals and implications for the Trust following changes to legislation and/or Codes of Practice.

Health, Safety, Security and Fire Group	• Receives reports from the Fire Safety Group; • Monitors the Fire Safety Group work plan.

4 Policy

4.1 Executive Statement

The Trust Board recognizes its responsibilities as 'responsible person' under the Regulatory Reform (Fire Safety) Order 2005 (RRO). It is the intention and objective of the Chief Executive Officer and the Management Group to ensure that this policy is actively implemented and that there are continual improvements in fire safety performance. Our staff are the Trust's main assets and will be afforded the necessary health and safety standards to meet legislative requirements, within the scope of the Trusts budget and business objectives. These standards include fire safety.

4.2 Fire Safety Management System

The Trusts Fire safety management system: is a robust framework of protocols and processes used to ensure that an organisation can fulfil all tasks required to achieve the fire safety objectives set out by this fire safety policy and the processes laid down in the fire safety protocol document (HS-0008-0001.v1.1).

Effective fire safety management ensures that the incidence of fire is minimised, the physical fire precautions are maintained in an operational state, the organisation is able to respond effectively should a fire occur, and that the impact of a fire incident is minimised.

The current legislation in the form of the Regulatory Reform (Fire Safety) Order 2005 (RRO) requires a managed risk approach to fire safety. The process of fire risk assessment, mitigation and review requires a robust system of management capable of identifying hazards, qualifying their impact, devising appropriate mitigation and continual monitoring.

The Trust has decided to use the fire safety management system which is recommended in the Healthcare Technical Memorandum HTM 05-01 Managing healthcare fire safety. The PLAN DO CHECK ACT model.

4.2.1 Explanation of PLAN DO CHECK ACT model.

Term	Explanation
PLAN (Establish)	Establish fire safety policy, objectives, targets, controls, protocols and procedures relevant to improving fire safety management in order to deliver results that align with the organisation's overall policies and objectives.
DO (Implement and operate)	Implement and operate the fire safety policy, controls, processes and procedures.
CHECK (Monitor and review)	Monitor and review performance against fire safety policy and objectives. Report results to management for review, and determine and authorise actions for remediation and improvement.
ACT (Maintain and improve)	Maintain and improve the fire safety management system by taking corrective action based on the results of the management review and fire safety audit. Reappraise the scope of the fire safety management system, the fire safety policy and objectives.

5 Definitions

Term	Definition
Annual Fire Statement	An annual statement of fire safety to provide a clear indication in respect of the status of fire safety management within the organisation and a statement of assurance that adequate fire safety measures are in place.
Assembly point	A pre-determined area of safety where persons should assemble in the event of an emergency.
Authorising Engineer (Fire):	a chartered fire engineer, or a chartered member of an appropriate professional body, with extensive experience in healthcare fire safety or nominated contractor
Competence:	Where a person is required to be competent, they must be able to demonstrate through training and experience or knowledge and other qualities that they have the ability to properly assist in undertaking the preventative and protective measures.
Competent Person (Fire)	A person who can provide skilled installation and/or maintenance of fire-related services (both passive and active fire safety systems).

Term	Definition
Equality Analysis	Equality Analysis involves assessing, (insofar as is reasonable and proportionate) the impact NHS organisations can have on health equality in our society.
Fire Authority	The Fire and Rescue Service
Firecode	Guidance documents from the Department of Health regarding fire safety in healthcare premises.
Fire evacuation plan	The pre-determined plan that describes the actions necessary in the event of a fire to protect relevant persons and facilitate their safe evacuation.
Fire-fighting equipment	The fire extinguishers, fire blankets and other equipment made available to trained personnel for the purpose of fighting fire.
Fire resistance	The ability of an element of building construction, component or structure to fulfil, for a stated period of time, the required load-bearing capacity, fire integrity and/or thermal insulation and/or other expected duty in a standard fire resistance test.
Fire risk assessment	The process of identifying fire hazards and evaluating the risks to people, property, assets and the environment arising from them, taking into account the adequacy of existing fire precautions, and deciding whether the fire risk is acceptable without further fire precautions.
Fire Safety Adviser (Authorised Person (Fire))	A person who has sufficient training and experience or knowledge and other qualities to enable them to properly assist in undertaking preventative and protective measures.
Fire Safety Manager	The person within the organisation tasked with coordinating fire safety issues throughout the organisation's activities.
Fire safety management system	A robust framework of protocols and processes used to ensure that an organisation can fulfil all tasks required to achieve the fire safety objectives set out in the fire safety policy.
Preventative and protective measures	The measures which have been identified by the responsible person in consequence of a risk assessment as the general fire precautions necessary to comply with the requirements and prohibitions imposed by the Regulatory Reform (Fire Safety) Order (RRO).
Protocol	Section of the policy providing guidance on a specific issue.

Responsible person	The employer of persons working at the premises, a person who has control of the premises, or the owner of the premises.
Personnel Emergency Evacuation Plan (PEEP)	Ensures the safety and assistance of staff, service users or visitors who require extra help, to follow the evacuation plan.
Quality Assurance	Part of quality management focused on providing confidence that quality requirements will be fulfilled.

6 Related documents

- Health and Safety Policy Ref: HS-0001-v10.1.
- Fire Safety Protocol Document Ref HS-0008-001.v1.
- Local area fire safety procedures and fire action notices.

7 How this policy will be implemented

- The Chief Executive has ultimate accountability for this policy. Specific responsibility for policy implementation is delegated to respective Directors and General Managers / Heads of Service etc. A Senior Manager within the Estates Department will adopt responsibility for controlling and managing any identified fire risks within the Trust.
- This policy will be published on the Trust's intranet and external website.
- Line managers will disseminate this policy to all Trust employees through line management arrangements.

7.1 Training needs analysis

Fire safety training is described in the Fire Safety Protocol Document Ref HS-0008-001, protocol 5.

8 How the implementation of this policy will be monitored

Number	Auditable Standard/Key Performance Indicators	Frequency/ Method/ Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group).
1	Performance will be monitored by incidents. Incidents include: - • Incidents of Actual Fire. • False alarms • Unwanted Fire Signals. Targets for Unwanted fire signals, will be set as per those identified in the Performance level grading chart of HTM 05-03 Part H. Reducing false alarms in healthcare premises p20	All fire Incidents will be investigated by the Trusts Fire Safety Advisors. All incidents will be logged, and information provided to relevant Governance Groups. All incidents and Fire Reports will be discussed at both the Fire Safety Advisors monthly meeting and at the Health Safety Security and Fire Group on a two-monthly basis. The Incident and Fire Report documents will form part of the Authorising Engineer (Fire) (were appointed) or the Estates Compliance Teams audit process.	Relevant Governance Group. Fire Reports to Health Safety Security and Fire Group on a two-monthly basis.
2	The Trust will produce an Annual Fire Statement of fire safety to provide a clear indication in respect of the status of fire safety management within the organisation and a statement of assurance that adequate fire safety measures are in place.	The Annual Fire Statement will be produced in April, by a Trusts Fire Safety Advisor.	The Trust will produce an Annual Fire Statement of fire safety to provide a clear indication in respect of the status of fire safety management within the organisation and a statement of assurance that adequate fire safety measures are in place.

3	The Trust will produce Fire risk assessments and identify hazards to evaluate the risks to people, property, assets and the environment. considering the adequacy of existing fire precautions and deciding whether the fire risk is acceptable without further fire precautions. As identified in Article 14 of the Regulatory Reform Fire (Safety Order) 2005 (RRO)	All Fire Risk Assessments will be completed by the Trusts Fire Safety Advisors as required by building type (1-3 years depending on risk). All significant findings will be identified and logged on the fire safety database within the Estates Department, and brought to the attention of the Fire Safety Manager.	Fire Risk Assessments will be monitored at the Fire Safety Advisors Group on a Monthly basis.

9 References

- Regulatory Reform (Fire Safety) Order 2005 (RRO).
- Fire Safety Protocol Document Ref HS-0008-001-v1.1.
- Building regulations 2010 approved document B, volume 2.
- Electrical Safety policy Ref HS-0007-v4.
- BS5266-1:2016 Code of practice for the emergency lighting of premises.
- BS EN50172:2004 Emergency Escape Lighting Systems.
- BS8214:2016 Code of Practice for Timber based fire door assemblies.
- BS7273-4:2015 +A2.2023 Code of Practice for the operation of fire protection measures - Actuation of release mechanisms for doors.
- BS5306-3:2017 Fire extinguishing installations and equipment on premises. Commissioning and maintenance of portable fire extinguishers.
- HTM06-01 Electrical services supply and distribution.
- BS 9999:2017 Fire safety in the design, management and use of buildings - code of practice.
- BSEN12845+A1:2019 Automatic sprinkler systems.
- BS5839 part 1:2017 Fire detection and fire alarm systems for buildings.
- HTM05-01 Managing Healthcare Fire Safety.
- HTM05-02 Guidance in support of functional provisions (Fire safety in the design of healthcare premises.

- HTM05-03 Part A. General fire safety.
- HTM05-03 Operational provisions Part B Fire detection and alarm systems.
- HTM05-03 Part C Textiles and Furnishings.
- HTM05-03 Part D. Commercial enterprises on healthcare premises.
- HTM05-03 Part F Arson prevention in NHS premises.
- HTM05-03 Part H. Reducing false alarms in healthcare premises.
- HTM05-03 Part J. Guidance on fire engineering of healthcare premises.
- HTM05-03 Part K. Guidance on fire risk assessments in complex healthcare premises.
- Fire Safety department local document Personal Emergency Evacuation Plan (PEEP).
- Fire Safety Department Local Document Fire Risk Assessment.

10 Document control (external)

To be recorded on the policy register by Policy Coordinator

Date of approval	20 December 2023
Next review date	20 December 2026
This document replaces	HS-0008-v4
This document was approved by	Health safety security and fire working group EFM DMT
This document was approved	HSSFG – 22 September 2023 EFM DMT – 09 November 2023
This document was ratified by	Management Group
This document was ratified	20 December 2023
An equality analysis was completed on this policy on	18 August 2023
Document type	Public
FOI Clause (Private documents only)	N/A

Change record

Version	Date	Amendment details	Status
v4.1	20 Dec 2023	Full review with minor changes, includes: • Updated into new template. • Added OJTC • Removed non accessible diagram. • References updated. • Objectives amended. • Updated implementation monitoring	Ratified

Appendix 1 - Equality Analysis Screening Form

Please note: The Equality Analysis Policy and Equality Analysis Guidance can be found on the policy pages of the intranet

Section 1	Scope
Name of service area/directorate/department	Estates
Title	Fire Safety policy
Type	Policy
Geographical area covered	Trust Wide
Aims and objectives	The purpose of this policy is to ensure that the potential risk from fire is managed and a safe environment exists, whilst complying with relevant guidance and legislative requirements.
Start date of Equality Analysis Screening	28 March 2023
End date of Equality Analysis Screening	18 August 2023

Section 2	Impacts
Who does the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?	This document benefits all employees, patients, visitors and contractors of the Trust
Will the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups?	• **Race** (including Gypsy and Traveller) **NO** • **Disability** (includes physical, learning, mental health, sensory and medical disabilities) **NO** • **Sex** (Men, women and gender neutral etc.)**NO** • **Gender reassignment** (Transgender and gender identity) **NO** • **Sexual Orientation** (Lesbian, Gay, Bisexual and Heterosexual etc.) **NO**

	• **Age** (includes, young people, older people – people of all ages) **NO** • **Religion or Belief** (includes faith groups, atheism and philosophical beliefs) **NO** • **Pregnancy and Maternity** (includes pregnancy, women who are breastfeeding and women on maternity leave) **NO** • **Marriage and Civil Partnership** (includes opposite and same sex couples who are married or civil partners) **NO** • **Armed Forces** (includes serving armed forces personnel, reservists, veterans and their families **NO**
Describe any negative impacts	None
Describe any positive impacts	This document provides a framework of core safety measures across all of the Trust's property and premises with the function to provide guidance to all staff. The policy also ensures that the necessary assessment and measures are put in place to ensure people with disabilities or individual needs are supported to evacuate premises safely, by performing assessment and personnel emergency evacuation plans for the individuals at risk.

Section 3	**Research and involvement**
What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.)	See reference section 9
Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	Previous version was developed with engagement with the fire service, fire safety advisors, estates staff. This version only has minor changes.
If you answered Yes above, describe the engagement and involvement that has taken place	This document has been discussed within the Estates department at managerial level, it is to be presented to various committees including the Fire Safety group and the Health Safety Security and Fire group

	.
If you answered No above, describe future plans that you may have to engage and involve people from different groups	

Section 4	Training needs
As part of this equality analysis have any training needs/service needs been identified?	No
Describe any training needs for Trust staff	There are no training arrangements identified to assist in the implementation of this protocol document. Fire safety training is described in this document Protocol 5, there is a pre-programmed plan to train staff on fire safety via the learning and development department.
Describe any training needs for patients	Not Applicable all fire safety arrangements are conducted by staff including evacuation decisions.
Describe any training needs for contractors or other outside agencies	Control of Contractors Procedure CORP-0049. Contractor induction given by Estates. All contractors are approved before working on any of the trust Estates or sites.

Check the information you have provided and ensure additional evidence can be provided if asked

Appendix 2 – Approval checklist

To be completed by lead and attached to any document which guides practice when submitted to the appropriate committee/group for consideration and approval.

	Title of document being reviewed:	Yes / No / Not applicable	Comments
1.	**Title**		
	Is the title clear and unambiguous?	YES	
	Is it clear whether the document is a guideline, policy, protocol or standard?	YES	Policy
2.	**Rationale**		
	Are reasons for development of the document stated?	YES	
3.	**Development Process**		
	Are people involved in the development identified?	YES	
	Has relevant expertise has been sought / used?	YES	
	Is there evidence of consultation with stakeholders and users?	YES	
	Have any related documents or documents that are impacted by this change been identified and updated?	YES	
4.	**Content**		
	Is the objective of the document clear?	YES	
	Is the target population clear and unambiguous?	YES	
	Are the intended outcomes described?	YES	
	Are the statements clear and unambiguous?	YES	
5.	**Evidence Base**		
	Is the type of evidence to support the document identified explicitly?	YES	
	Are key references cited?	YES	
	Are supporting documents referenced?	YES	
6.	**Training**		
	Have training needs been considered?	YES	
	Are training needs included in the document?	YES	

	Title of document being reviewed:	Yes / No / Not applicable	Comments
7.	**Implementation and monitoring**		
	Does the document identify how it will be implemented and monitored?	YES	
8.	**Equality analysis**		
	Has an equality analysis been completed for the document?	YES	
	Have Equality and Diversity reviewed and approved the equality analysis?	Yes	18 Aug 2023 AH
9.	**Approval**		
	Does the document identify which committee / group will approve it?	YES	
10.	**Publication**		
	Has the policy been reviewed for harm?	YES	
	Does the document identify whether it is private or public?	YES	
	If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	N/A	