

POLICY TITLE: FIRE POLICY

POLICY NUMBER: 4.3

Is this a new policy: Yes No

Name of policy section lead:	Richard Hill	Job title:	Facilities and Operations Manager
Author:	Michael Bridge	Job title:	HSE Officer
To be completed if the policy has been amended/ updated	5.9 Increase in those listed to perform roles of Site Fire Marshal and Deputy. 5.12 Removed reference to roller shutters, following their removal in the refurbishment of the dining room and kitchen.		
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See also LOROS Policies:

- **Risk Management 1.14**
- **Health and Safety at Work 4.0**
- **Medical Gases 4.13**
- **Smoking 4.9**
- **Safe Working Codes of Practice & General Safety Requirements for Contracted Personnel Working on Site 4.2**

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1.0 INTRODUCTION

LOROS recognises the major threat that a fire in the hospice or LOROS Professional Development Centre (LPDC) and other LOROS properties would pose to the lives of patients, staff, volunteers and visitors. LOROS therefore is committed to minimising the risk of fire to the lowest practical level.

In the event of a fire LOROS seeks to provide an effective response through rapid detection, containment and control, supported by reliable procedures for removing staff and patients to places of safety.

LOROS has adopted the Fire Procedure laid out in this document. It must be used in conjunction with other LOROS Health and Safety Procedures. This document specifies the routine standby orders, staff duties and procedure to be taken when the fire alarm sounds.

2.0 APPLICABILITY

2.1 LEGISLATION

- The Regulatory Reform (Fire Safety) Order 2005
- Health and Safety at Work Act 1974
- Management of Health and Safety Regulations 1999

2.2 POLICY SCOPE

LOROS endeavours, to create a safe environment for its patients, visitors, contractors, staff and volunteers. It is essential that all staff are fully aware of LOROS' fire procedure, that they are trained in fire prevention and that they fully understand the action to be taken in the event of a fire.

This guide gives information and instruction to employees at the hospice site on what to do in the event of fire alarm activation inside and outside of normal working hours. All other LOROS Properties are addressed within Section 7 of this policy.

Normal working hours are classed as: 09:00 to 17:00 Monday to Friday.

Outside of normal working hours is classed as: before 09:00 and after 17:00 Monday to Friday, all day Saturday, Sunday and Bank Holidays.

In the event of the fire alarm sounding you will hear either:

Continuous Alarm – this indicates that the source of the fire alarm activation is within the immediate zone and that action should be taken to evacuate that zone in a safe manner to a place of safety.

Intermittent Alarm – this indicates that the fire alarm has been activated but the source of the alarm is not in that zone.

3.0 GENERAL FIRE PRECAUTIONS

- All corridors, stairwells and fire exits must be kept clear at all times
- Fire doors must not be fixed open or obstructed
- Fire detection sensors must not be covered
- Firefighting equipment and fire call points must not be obstructed
- Access roads and paths to and around the premises must be kept free of obstruction in order to maintain a "fire path" ready for access for the emergency services. The "fire path" is defined on the internal roadways by red lines
- All staff have a responsibility to report any fire hazards upon discovery to their line manager or the Operations Office for action
- When vacating the building, department or room at the end of the day, the area must be checked by the last person to leave. Electrical appliances should be switched off and power points should be disconnected where practicable. Doors and windows should be closed and the area left secure

4.0 ACTION TO BE TAKEN ON DISCOVERING A FIRE

The first person on discovering a fire should: -

- Make others in the vicinity aware – e.g. shout "FIRE" repeatedly;
- Activate the Fire Alarm by breaking the glass on the nearest Fire Alarm Call Point;
- Evacuate the building via the NEAREST SAFE EXIT then proceed to the designated Fire Assembly Point.

Fire extinguishers are located on all escape routes within the premises. Fire extinguishers are primarily provided as a means of escape from a building to a place of safety and should only be used by those who have received training in their use. ONLY IF IT IS SAFE AND YOU ARE TRAINED TO DO SO, tackle the fire with local fire extinguishers, without endangering yourself or others.

Take due regard of the hazards involved in the incorrect use of fire extinguishers as this could make the fire worse and put the user (and others) in danger. Any fire requiring the use of more than one extinguisher should be left for the Fire & Rescue Service to fight.

SAFETY MUST BE THE PARAMOUNT CONSIDERATION AT ALL TIMES.

4.1 DESIGNATED FIRE ASSEMBLY POINTS

There are 4 Fire Assembly Points (FAP) at the Groby Road Site:

- **FAP 1** – at the front of the Hospice on the right hand side facing the Main Entrance – this is for outpatients visitors from the waiting room, other visitors, contractors, Counselling, CNS, Catering, Volunteering staff and ward based clinical staff unable to access the ward

- **FAP 2** – at the rear of the Hospice for Day Therapy, Complimentary Therapy and Outpatients staff, other support staff and patients
- **FAP 3** – in the rear car park near the smoking shelter, next to designated visitor parking bays is for non-clinical admin staff i.e. finance, fundraising, admin corridor, SMC corridor
- **FAP 4** - to the side of the LPDC (exclusively for use by LPDC staff and users)

5.0 ACTION TO BE TAKEN ON HEARING THE ALARM SOUNDING

5.1 NON CLINICAL AREAS

On hearing the Fire Alarm sounding be it continuous or intermittent you must evacuate the building via the NEAREST SAFE EXIT and proceed, VIA AN EXTERNAL ROUTE, to THE DESIGNATED FIRE ASSEMBLY POINT and wait until the all clear has been given before re-entering the building.

DO NOT stop to collect personal items.

DO NOT loiter. Move quickly and in an orderly manner out of the building.

DO NOT enter smoke filled rooms.

DO NOT put yourself in danger or take unnecessary risks.

DO NOT re-enter the building until the Site Fire Marshal gives the all clear.

The sounders' stopping is NOT an indication that the building is safe to be re-entered.

Fire extinguishers are located on all escape routes within the premises. Fire extinguishers are primarily provided as a means of escape from a building to a place of safety. ONLY IF IT IS SAFE AND YOU ARE TRAINED TO DO SO, tackle the fire with local fire extinguishers, without endangering yourself or others.

Take due regard of the hazards involved in the incorrect use of fire extinguishers as this could make the fire worse and put the user (and others) in danger. Any fire requiring the use of more than one extinguisher should be left for the Fire & Rescue Service to fight. SAFETY MUST BE THE PARAMOUNT CONSIDERATION AT ALL TIMES.

All persons must REMAIN AT THE FIRE ASSEMBLY POINT until told to re-enter the building or moved to a different location on the direct instructions of the Site Fire Marshal or the Fire & Rescue Service.

5.2 OUTPATIENT CLINICAL AREAS

Only patients in a state of undress should remain in their treatment room with the member of staff who is treating them, ensuring that the fire door is closed properly.

The Enablement Team will go to Day Therapy to support the evacuation of patients in case of an Alarm Activation and if safe to do so.

DO NOT put yourself in danger or take unnecessary risks attempting to get back to the clinic if you are not in the immediate vicinity. If you are unable to safely return to the clinical area, report to designated Fire Assembly Point FAP2 via an external route.

If safe to do so, the "Booking In" desk operative will sweep the Out-Patients clinic rooms for fire purposes, patients from these rooms should go to FAP 2 to the rear of the hospice.

The remaining staff in the 'Booking In' desk office will sweep and support patients to evacuate the waiting area to FAP 1 outside Main Reception.

If this is not possible the Booking-In desk operative / administrator will inform the Site Fire Marshal, who will advise the Fire and Rescue Service immediately of people potentially still being in the building.

5.3 FIRE SWEEPERS

This role is only carried out during normal working hours, as detailed in section 2 of this policy, and is applicable for all staff with the exception of those working in the In-Patient Ward.

All Hospice Fire Sweepers should report to FAP 1 at the front of the Hospice and provide their completed sweeping list to the Fire Registrar. The Fire Sweeper(s) for LPDC will report to FAP 4.

ACTION TO TAKE IN THE EVENT OF THE FIRE ALARM SOUNDING

The first person to the location of their geographical area Fire Sweep List shall:

- Collect the Fire Sweep List from its designated place and wear the tabard provided (see Appendix B for map showing locations of lists);
- Carry out a sweep of their area, without endangering their life, to ensure all personnel are evacuated;
- Ensure fire doors are properly closed behind you after being swept;
- On arrival at the FAP 1 they should inform the Fire Registrar that all areas were checked and clear of personnel. If this has not been possible, advise of any areas you were unable to check.

5.4 IN-PATIENTS WARD (OAK & WILLOW WARD)

DO NOT put yourself in danger or take unnecessary risks attempting to get back to the ward if you are not in the immediate vicinity. If you are unable to safely return to the in-patient ward, report to FAP 1 at the front of the Hospice.

ACTION TO TAKE ON THE SOUNDING OF THE FIRE ALARM

- Remain on the ward
- Remain calm and reassure our patients
- Close all fire doors to ward area entrances
- Await instructions from the Nurse In Charge or Co-ordinator

5.5 PATIENT EVACUATION

Progressive horizontal evacuation:

- If they can walk, get them to walk
- If unsteady on feet and if mechanical aids are available without endangering yourself, get a wheel chair, walking frame or commode for their evacuation
- If bedbound push patients out in their beds

This form of evacuation is restricted to patients and accompanying clinical staff. All other visitors, staff volunteers and contractors should evacuate the building via the nearest safe exit and report to the designated fire assembly point.

Please refer to the fire evacuation plans in Appendix B for the escape routes for bed-bound patients.

5.6 NURSE IN CHARGE (IN-PATIENT WARD)

ACTION TO TAKE ON THE SOUNDING OF A CONTINUOUS FIRE ALARM

- If fire alarm sounds continuously within your zone, and without putting yourself in unnecessary danger investigate the source of the alarm activation
- If there is evidence of fire, either through visible smoke, the smell of smoke or the visual identification of fire, co-ordinate an immediate progressive horizontal evacuation of affected patients into the next safe zone
- Call the Fire & Rescue Service using a dect phone dial 9 999 or using a mobile phone dial 999 when the exchange operator answers ask for:

FIRE: at LOROS, Groby Road, Leicester, LE3 9QE

- Wait for the address to be read back before hanging up
- Collect a 2-way radio from the nurse's station on the main ward, ensure turned on and test to enable Communication with fire team members
- Via radio confirm the presence of fire and call to 999
- Take the fire emergency map pack and the fluorescent tabard from the fire box wearing it until after the evacuation is over
- Account for all patients and staff utilising the duty rota and patient list
- Arrange for all areas including toilets, bathrooms, relative's suites, smoker's room on Willow and quiet room, to be swept for any staff, visitors, contractors and volunteers

- Send visitors, contractors and volunteers via the nearest safe escape route, externally around the building to the designated fire assembly point
- Maintain regular communication with the Team Co-Ordinators, directing them accordingly
- Maintain regular contact with the Site Fire Marshal for further instructions
- Be prepared to isolate the piped oxygen supply to the affected zone
- Attend a debrief meeting following an evacuation

ACTION TO TAKE ON THE SOUNDING OF AN INTERMITTENT FIRE ALARM

- If fire alarm sounds intermittently within your zone proceed immediately to the fire panel located within the clinical area
- Identify the location of the fire; be in state of preparedness to evacuate
- Collect a 2-way radio from the nurse's station on the main ward, ensure turned on and test, communicating with fire team members
- Take fluorescent tabard from the fire box wearing it until after the evacuation is over
- Account for all patients and staff utilising the duty rota and patient list
- Arrange for the clinical areas as listed above to be swept

ADDITIONAL ACTIONS TO TAKE IN THE EVENT OF FIRE ALARM SOUNDING OUTSIDE OF NORMAL WORKING HOURS:

- Ensure the social area is captured on the sweep
- Take master keys and leave the ward area to go via nearest safe exit to the Main Reception entrance to meet the Fire & Rescue Service
- Collect a 2-way radio from the reception desk, ensure turned on and test, communicating with the main ward
- Be prepared for contact by the on-call Facilities officer, advise the on-call Facilities Officer of the location of fire / source of alarm activation
- Advise the Fire & Rescue Service the location of fire / source of alarm activation and of any patients unaccounted for; wait any further instructions
- Be prepared to isolate the piped oxygen supply, if required
- Wait for the Fire & Rescue Service give the all clear, silence and reset the fire alarm
- Advise staff, visitors etc. to re-enter buildings when safe to do so
- Attend a debrief meeting following an evacuation if actual fire
- If false alarm please complete incident report form

5.7 ON-CALL FACILITIES OFFICER (OUTSIDE OF NORMAL WORKING HOURS ONLY)

- Upon receipt of a call from the Alarm Receiving Centre (ARC), call the Nurse in Charge to ascertain if the alarm is genuine
- If a genuine fire, escalate to the Facilities and Operations Manager, Director of Care Services and the Chief Executive (in that order) and attend the Hospice site

- If a false alarm, maintain telephone contact with the Nurse in Charge until the fire service have attended site, given the all clear, silenced and reset the alarm

5.8 TEAM CO-ORDINATORS (IN-PATIENT WARD)

ACTION TO TAKE ON THE SOUNDING OF A CONTINUOUS FIRE ALARM

- Take instructions from Nurse in Charge
- Co-ordinate nursing staff duties
- Sweep the clinical areas
- Ensure all fire doors and windows are properly closed
- Assist with the immediate progressive horizontal evacuation to the next safe zone
- Maintain regular communication with the Nurse in Charge

In the event of an INTERMITTENT alarm, be in a state of preparedness to evacuate, taking instructions from the Nurse in Charge.

In the event of fire alarm sounding outside of normal working hours:

Collect the 2-way radio from the nurse's station on the main ward, ensure turned on and test. Use this radio to communicate with the Nurse in Charge.

5.9 SITE FIRE MARSHAL AND DEPUTY (HOSPICE ONLY DURING NORMAL WORKING HOURS)

These roles are undertaken by members of the Operations Team, the Facilities and Operations Manager or HSE Officer in the first instance. Due to the increase in remote working, the Chief Executive or the Director of Care Services are trained to undertake these roles, should the Site Fire Marshal and Deputy be unavailable.

ACTION TO TAKE IN THE EVENT OF FIRE ALARM SOUNDING

- On hearing the fire alarm sound proceed immediately to the fire panel located at Main Reception
- Collect the Fire Emergency Map Pack and Fire Marshal fluorescent tabard from the fire box wearing it until after the evacuation is over
- Collect a 2-way radio from Main Reception, turned on and test radio; communicate between other fire team members and Clinical Areas
- Read the message displayed on the Fire Alarm Panel. This will show the location of the suspected fire
- Allocate roles for Fire Team Members as per Fire Team List – see Appendix G
- Direct 2 members of the fire team to investigate the source of the alarm, all others to remain at the fire panel
- Make all Clinical Areas aware of the location of the alarm and any actions they need to take
- Maintain regular contact with the fire team members and Nurse In Charge until after the evacuation is over
- Liaise with the Fire Registrar – are all areas swept?

- If a confirmed false alarm, silence sounders but do not reset the fire panel, until after the Fire & Rescue Service has attended site and confirmed the false alarm
- If a confirmed alarm, advise the Clinical Areas and be ready with the Fire Emergency Pack and Keys to the plant rooms to isolate services
- Advise the Fire & Rescue Service of the location of the fire and of any areas not swept
- Co-ordinate and arrange if necessary, further evacuation away from the Fire Assembly Point
- Wait for the Fire & Rescue Services give the all clear and advise employees to re-enter buildings when safe to do so
- Arrange for a de-brief to take place immediately following an evacuation (false alarm or actual) with the appropriate personnel
- In the event of an actual fire contact Severn Trent Water on 0800 7834444 and the Environment Agency on 0800 807060 to inform them of fire waste water entering the surface water and foul drains

5.10 SITE FIRE TEAM (HOSPICE ONLY DURING NORMAL WORKING HOURS)

These roles are undertaken by members of the Operations Team

ACTION TO TAKE IN THE EVENT OF FIRE ALARM SOUNDING

- On hearing the fire alarm sound proceed via the nearest safe exit, externally around the building to the fire panel in Reception to identify the source of the alarm activation
- Collect Fire Team fluorescent tabard from Fire Box
- Be allocated a Fire Team Role as per Fire Team List – see Appendix G
- Where appropriate collect a 2-way radio from Main Reception, ensure turned on and test communicating between other fire team members and Clinical Areas
- Take instructions from the Site Fire Marshal or deputy, working in teams, investigate the source of the alarm activation
- Two members of the fire team with 2-way radios, will enter the area identified as the source of the activation. (Do not investigate if the fire is in the roof space or plant room, wait for the Fire & Rescue Service)
- In the event that no evidence of fire is found, make radio contact with the Fire Marshal to advise false alarm and return to Main Reception
- If there is evidence of fire, either through visible smoke, the smell of smoke or the visual identification of fire, these fire team members are to leave the building via the nearest safe exit and call the Fire & Rescue Service using a dect phone dial 9999 or mobile phone to dial 999 when the exchange operator answers ask for:

FIRE: at LOROS, Groby Road, Leicester, LE3 9QE

- Wait for the address to be read back before hanging up

- Make your way back to Main Reception to the remaining fire team members (via external route) and make them aware that a fire has been confirmed and await further instructions
- Attend a debrief meeting following an evacuation

5.11 FIRE REGISTRAR AND DEPUTIES

This role is undertaken by a member of the Fire Team during normal working hours or Volunteer or Security Guard outside of normal working hours.

ACTION TO TAKE IN THE EVENT OF THE FIRE ALARM SOUNDING

The Site Fire Registrar should:

- collect from Reception the Fire Registrar fluorescent tabard, clipboard & pen;
- collect the Site Assembly Point Muster Checklist;
- be stationed at the Designated Fire Assembly point FAP1 in the front car park;
- check all Fire Sweepers have swept their respective areas;
- advise the Site Fire Marshal of any areas which have been missed off the sweep;
- attend a debrief meeting following an evacuation.

Outside of normal working hours the Volunteer Reception Staff or Security Guard should collect the Staff and Volunteers sign in sheet and carry out a roll call. The security guard is to complete a daily occurrence book (DOB) entry of the event.

5.12 CATERING DEPARTMENT

In the event of the fire alarm sounding:

- Isolate the gas supply via the mains incoming valve in the kitchen
- Turn power off to catering equipment

5.12 LOROS Professional Development Centre (LPDC)

FIRE REGISTRAR & SWEEPER

These two roles are undertaken by designated LPDC Employees or their deputies

ACTION TO TAKE IN THE EVENT OF THE FIRE ALARM SOUNDING

The **Site Fire Registrar** should:

- inform the Facilities & Operations Manager or a Facilities Officer of the alarm activation;
- collect from Reception the Fire Registrar fluorescent tabard, clipboard and pen;
- collect the Visitor's book;
- if at any point there is evidence of fire, either through visible smoke, the smell of smoke or the visual identification of fire, leave the building via the nearest safe exit and call the Fire & Rescue Service using an internal phone dial 9999 or mobile phone to dial 999 when the exchange operator answers ask for:

FIRE: at LOROS Professional Development Centre,

- wait for the address to be read back before hanging up;
- go to the Designated Fire Assembly point in the rear car park;
- carry out a roll call;
- liaise with external event leaders to ensure all attendees are accounted for.

The **Fire Team** should:

- read the message displayed on the Fire Alarm Panel. This will show the location of the suspected fire;
- collect both 2-way fire radios from Reception ensure they are turned on and test;
- if safe to do so, with a colleague complete Fire Sweep of allocated LPDC rooms and areas as per sheet on clipboard;
- note any areas which have been missed off the sweep;
- maintain regular radio contact with other the fire team members until after the evacuation is over;
- advise the Fire & Rescue Service of the location of the fire and of any unaccounted Employees, visitors and areas not swept;
- co-ordinate and arrange if necessary, further evacuation away from the Fire Assembly Point;
- if a confirmed false alarm, silence sounders but do not reset the fire panel, until after the Fire & Rescue Service has attended site and confirmed the false alarm;
- wait for the Fire & Rescue Services give the all clear and advise employees to re-enter buildings when safe to do so;
- attend a debrief meeting with Facilities & Operations Manager following evacuation and safe re-occupation/building made safe.

In the event of an actual fire contact Severn Trent Water on 0800 7834444 and the Environment Agency on 0800 807060 to inform them of fire waste water entering the surface water and foul drains

6.0 DUTIES OF OFFICIALS AND EMPLOYEES

6.1 CHIEF EXECUTIVE OFFICER

The Chief Executive Officer is responsible for ensuring that the position of Site Fire Marshal and their deputies are filled.

6.2 FACILITIES & OPERATIONS MANAGER

GENERAL DESCRIPTION OF RESPONSIBILITIES AND DUTIES

- Ensure that the fire procedures, evacuation and statutory records are maintained and reviewed regularly and complied with at all times; and liaise with the Fire Extinguisher and Fire Alarm system providers

- Ensure the Fire Alarm system is tested weekly and that a twice-yearly evacuation takes place (one within normal working hours and one outside normal working hours)
- Co-ordinate appropriate fire training with the Education Department, HR and relevant Heads of Department; ensuring that there are always appropriate numbers of employees trained in the fire roles. Training records to be held with the Education Department
- Creating and reviewing annually of Fire Risk Assessments for all LOROS sites. Risk assessments must be reviewed regularly so as to keep it up to date and particularly if —
 - there is reason to suspect that it is no longer valid; or
 - there has been a significant change in the matters to which it relates including when the premises, special, technical and organisational measures, or organisation of the work undergo significant changes, extensions, or conversions
- Advising in the interpretation and application of the provisions of legislation, fire codes and other official guidance in respect of fire safety in LOROS' premises
- Provision of Fire Safety Audits reviewing the state of fire precautions in LOROS
- Management & control of contracted personnel working on site
- Liaising with local building control and fire authorities in the specification of fire precautions in new and existing premises
- Investigating fires occurring in suspicious circumstances in conjunction with local fire and police authorities

6.3 HEADS OF DEPARTMENT

General description of Responsibilities

- Ensure that the Fire Procedures are implemented in their geographical area of responsibility
- Ensure all persons in the department especially new starters are fully conversant with the Fire Procedures together with actions to be taken in an emergency
- Ensure that there is a Personal Emergency Evacuation Plan (PEEP) in place to evacuate people with disabilities from their area

6.4 SITE FIRE MARSHAL AND DEPUTY

This role is only carried out within normal working hours, as detailed in section 2 of this policy. The Site Fire Marshal or their Deputy has overall responsibility for dealing with any incident, taking any action felt necessary to protect personnel and property.

Only the Site Fire Marshal or their Deputy may give the instruction that the emergency is over and the building may be re-occupied or direct persons to an alternative assembly point in the event of a further evacuation being required.

GENERAL DESCRIPTION OF RESPONSIBILITIES AND DUTIES

- Be fully conversant with the fire procedures

- Ensure sufficient fire team members are in place to investigate the source of the alarm
- Be aware of the layout of the premises, locations of firefighting equipment and escape routes
- Be trained in the use of the fire panel, firefighting equipment and radios
- Act as a point of contact with the Fire & Rescue Service and other Emergency Services
- Give the all clear to allow staff back into the buildings once all evacuation procedures have been completed as far as reasonably practicable

6.5 SITE FIRE TEAM

This role is only carried out within normal working hours, as detailed in section 2 of this policy. The Site Fire Team will:

- be fully conversant with the fire procedures;
- be aware of the layout of the premises, locations of firefighting equipment and escape routes;
- be trained in the use of the fire panel, firefighting equipment and radios.

6.6 NURSE IN CHARGE (IN-PATIENTS WARD)

GENERAL DESCRIPTION OF RESPONSIBILITIES AND DUTIES

- Be fully conversant with the fire procedures
- Be aware of the layout of the premises, locations of firefighting equipment and escape routes
- Be trained in the use of the fire panel, firefighting equipment and radios
- Be trained in patient progressive horizontal evacuation and Medical Gases Pipeline Systems training as a Designated Nursing Officer (MGPS)
- Ensure sufficient co-ordinators are trained to assist in the event of the alarm sounding
- Outside of normal working hours assume the role of Site Fire Marshal, acting as point of contact for the Fire & Rescue Service and other emergency services outside of normal working hours

6.7 ON-CALL FACILITIES OFFICER

General description of Responsibilities

- Outside of normal working hours be a point of contact for the alarm receiving centre (ARC)
- Contact and support the Nurse in Charge by telephone and be prepared to attend site and escalate to senior management if a confirmed fire

6.8 TEAM CO-ORDINATORS (IN-PATIENT WARD)

The Co-Ordinators will:

- Be fully conversant with the fire procedures

- Be aware of the layout of the premises, locations of firefighting equipment and escape routes
- Be trained in the use of the fire panel, firefighting equipment, and patient progressive horizontal evacuation

6.9 CLINICAL STAFF

- Be fully conversant with the fire procedures
- Familiarise yourself with your working area i.e. escape routes, fire alarm call points, location of fire extinguishers and fire assembly point
- Report any fire hazards immediately to the Operations Team for rectification
- Attend the LOROS fire safety lecture annually as part of your mandatory training
- Be trained in the use of firefighting equipment
- In-patient Ward staff to be trained in patient progressive horizontal evacuation

6.10 EMPLOYEES / VOLUNTEERS

- Be fully conversant with the fire procedures
- Familiarise yourself with your working area i.e. escape routes, fire alarm call points, location of fire extinguishers and fire assembly point
- Be prepared to act as fire sweeper for your geographical area of work
- Report any fire hazards immediately to the Operations Team or Head of Department for rectification
- Complete the e-learning module Fire Awareness every year, as part of your mandatory training
- If working outside of normal working hours, staff and volunteers at the hospice must sign in the register at Main Reception as this will be used as a fire register in the event of an evacuation

6.10 FIRE SWEEPERS

This role is only carried out within normal working hours, as detailed in section 2 of this policy, and is applicable for all non-clinical staff. Staff should:

- familiarise themselves with their geographical area;
- know the location of their fire sweep list.

6.11 FIRE REGISTRAR AND DEPUTIES

The Fire Team will undertake this role during normal working hours. Outside of these hours staff that undertake this role are the Main Reception volunteers and night security guard.

7.0 ENTERPRISE HOUSE, CHARITY SHOPS & CAFÉS

GENERAL DESCRIPTION OF RESPONSIBILITIES AND DUTIES

- Ensure that all equipment provided in the interests of fire protection are maintained by competent sub-contractors in line with current legislation
- The Manager or deputy is to carry out regular inspections of the workplace including the completion of fire safety records, to ensure legal compliance

- Ensure the Fire Alarm system is tested weekly and that a twice-yearly evacuation takes place
- In the event of the fire alarm sounding evacuate the building as detailed in section 5.1
- Appointed staff will sweep their area, without endangering their lives, to ensure all personnel are evacuated
- Collect the fire register and carry out a roll call (where applicable)

7.1 ENTERPRISE HOUSE

- All staff and volunteers are to gather at the designated fire assembly point
- Call the Fire & Rescue Service dialling 999 when the exchange operator answers ask for:

FIRE: LOROS, 1 Station Road, Glenfield, Leicester, LE3 8BT.

- Wait for the address to be read back before hanging up
- Only the Fire & Rescue Service give the all clear, to silence and reset the fire alarm. Allowing staff and volunteers back into the building

7.2 CHARITY SHOPS

- Shop Managers are to ensure that local arrangements are in place at each shop for the safe evacuation of staff, volunteers and members of the public
- Shop Managers are responsible for ensuring staff and volunteers know the location of the fire assembly point and what to do in the event of a fire
- Call the Fire & Rescue Service dialling 999, giving the address of the shop, wait for the operator to read back the address before hanging up
- Only the Fire & Rescue Service give the all clear, to silence and reset the fire alarm. Allowing staff and volunteers back into the building

7.3 CAFES

- Café Managers are to ensure that local arrangements are in place at each café for the safe evacuation of staff, volunteers and members of the public
- Café Managers are responsible for ensuring staff and volunteers know the location of the fire assembly point and what to do in the event of a fire
- Call the Fire & Rescue Service dialling 999, giving the address of the café, wait for the operator to read back the address before hanging up
- Only the Fire & Rescue Service give the all clear, to silence and reset the fire alarm. Allowing staff and volunteers back into the building

8.0 FOLLOW UP ACTION

Immediately following any evacuation a verbal debrief will take place with a written incident report from the Site Fire Marshal being compiled. In the event of an actual

fire the debrief will consist of the Site Fire Marshal, Fire Team, Fire Registrar, Nurse In Charge, and a member of the Senior Management Committee.

9.0 PERSONAL EMERGENCY EVACUATION PLAN (PEEP)

Each Head of Department has a responsibility to put a strategy in place to evacuate people with a temporary or permanent impairment from their area. They must identify staff that require a Personal Emergency Evacuation Plan at work, and develop that plan with the person, implement it and test it. (See Appendix E)

9.1 NOTES ON DISABILITIES

- There is a vast range of people who fit into this category. Issues relating to this group of people may also be relevant for people who have heart disease, asthma or heart conditions
- This group of people is considered most at risk in terms of escape. However, in some instances, a person who frequently uses a wheelchair may be able to walk slightly and therefore be able to assist with their own escape or even facilitate independent escape. It is essential that the disabled person is asked the relevant questions tactfully and in a way that produces the best escape plan
- Electrically powered wheel chair users may have less mobility than people who use manual chairs. It is wise to allow the escape of all other groups of disabled people in the building to ensure that is sufficient staff to assist this group
- People who are visually impaired are helped to escape by the provision of good signage and other orientation clues. It should be noted that most visually impaired people have some sight and that they will be able to use this during the escape in order to make their own way out of the building. The provision of a high powered torch may be useful. If the "Buddy System" is used" it is recommended that the vision impaired person grasps their "Buddy's" elbow as this will enable the person being assisted to walk half a step behind and thereby gain information about doors and steps
- Hearing impaired and deaf people need to know that there is an escape in progress

9.2 BUDDY SYSTEM

The 'Buddy System' is a procedure whereby a colleague or staff member is allocated the responsibility of ensuring that the person, who may require assistance, is alerted of the need to evacuate a building and may assist that person in the evacuation.

Normally the person allocated this responsibility will be employed within the vicinity or work area of the person requiring assistance. In order to maintain the continuity of the evacuation procedures, persons should be nominated to deputise for those allocated the responsibility in their absence.

10.0 OPERATIONAL INFORMATION – INCL. BUILDING INFORMATION

10.1 FIRE PANEL LOCATIONS

Switchgear Room (main panel)
Main reception (repeater panel)
Head of link corridor from Main reception (repeater panel)
Oak ward between bays 2 and 3 (repeater panel)
Day Therapy (repeater panel)
Willow ward nursing station (repeater panel)
LPDC (repeater panel)

10.2 FIRE BOX LOCATIONS

Main Reception (repeater panel)
Main Ward nurses station (repeater panel)
LPDC (repeater panel)

10.3 GSM REDCARE

The hospice is connected via GSM RedCare to a central monitoring station; as soon as the fire alarm sounds they automatically contact the Fire & Rescue Service, they will then contact the on-call Facilities Officer

The GSM RedCare is only stood down for the weekly fire alarm tests carried out on Tuesdays and when the fire system is being maintained.

10.4 LEICESTERSHIRE FIRE & RESCUE SERVICE – ATTENDANCE POLICY (AFA)

The hospice is classed as "life risk". All AFA signalled backed up by a 999 call reporting a fire will attract the usual and full predetermined response.

In the event that an AFA call only is received, the following will apply:

Between 0800 and 2100 – one emergency fire vehicle is despatched
Between 2100 and 0800 – full predetermined response

If the AFA call is confirmed by LOROS as a fault, LFRS will send one emergency vehicle at normal road speed in order to confirm the fault. If the AFA call is confirmed as a fault by a 3rd party (for example an alarm company) LFRS will send an emergency fire vehicle at emergency speed.

Fire crews will initially respond at the Hospice Main Entrance for information at the fire alarm repeater panel. The Fire & Rescue Service will be met by the Site Fire Marshal / Nurse in Charge who will direct them to the fire / source of alarm.

10.5 FIRE EXTINGUISHERS & FIRE FIGHTING EQUIPMENT

The following information is provided as a reminder for trained personnel and should not be construed as a substitute for practical training. There are four types of fire extinguisher provided: -

Water is suitable for paper and wood fires. Do NOT use on electrical or flammable liquid fires. The colour code for this type of extinguisher is Red.

CO2 (Carbon Dioxide) is suitable for electrical and flammable liquid fires. The colour code for this type of extinguisher is Black.

AFFF/Foam is suitable for flammable liquid fires and fires in wood, paper, textiles and similar substances. The colour code for this type of extinguisher is Cream.

Dry Powder is suitable for all fires. Always check that the fire is out. Paper and wood fires must not continue to smoulder. The colour code for this type of extinguisher is Blue.

Extinguishers must not be removed from their normal positions except in an emergency. Staff who have had training in the use of fire extinguishers must regularly familiarise themselves with the types of extinguishers in their area.

Extinguishers will normally have a tag or equivalent device to prevent an extinguisher from being tampered with. If the tag is missing the fire extinguisher must be removed and replaced with a full one. The Operations Department should be contacted to arrange this as a matter of urgency.

10.6 BUILDING STRUCTURE

The premises are divided into a number of fire-tight compartments (or fire zones) on the ground floor, first floor and in the roof space.

The process of progressive horizontal evacuation relies on parts of the building being separated into smaller sub-compartments called protected areas (zones). These are areas separated from each other on the same level by walls and doors that provide at least 30 minutes of fire resistance. If a fire occurs, patients can be moved away from the affected area to the adjoining protected area. The occupants may remain there until the fire is dealt with or await further evacuation to another similar adjoining area or down a protected route to total safety.

When an evacuation of a fire compartment by patients, their visitors and clinical staff is necessary, patients will be moved speedily and as safely as possible to adjacent fire zones.

10.7 FIRE DOORS

Fire doors are easily recognisable, and are signed "Fire Door". These complete the fire-resisting enclosure of the fire-tight compartments (fire zones) and protect escape routes (for example staircases and corridors).

Electromagnetic releases are fitted to the fire resisting doors in certain areas to facilitate easy movement. These doors will automatically close upon fire alarm activation. It is important that these doors are not obstructed or restrained open by other means.

11.0 POTENTIAL FIRE HAZARDS

11.1 PIPED MEDICAL GASES AND GAS CYLINDERS

The hospice has a 600 liquid litre piped oxygen system to the wards which when expanded turns into approximately 505,000 litres of oxygen. (See Appendix D for schematic of the piped oxygen system)

There are localised isolation valves within the ward areas, with the main cut of valves located within the Oxygen Store Room. There are also portable oxygen gas cylinders located within the following areas:

- | | |
|---------------|---------------------------|
| ➤ Oak Ward | ➤ Outpatients |
| ➤ Willow Ward | ➤ Oxygen Store Room |
| ➤ Day Therapy | ➤ Enablement Therapy Room |

FIRE HAZARDS FROM OXYGEN ENRICHMENT

Oxygen reacts with most elements. The initiation, speed, vigour and extent of these reactions depend in particular upon:

- concentration, temperature and pressure of the reactants
- ignition energy
- mode of ignition

To reduce the possibility of ignition, the following precautions should be taken:

- Turn off the oxygen when not in use to reduce risk of oxygen enrichment, and where possible use pipeline supplies to minimise cylinders on ward
- Control the number of cylinders on the ward, especially those brought in by patients – advise patient relatives/carers to take own supply back home
- Entonox nor any other gases are permitted on site without prior approval from the Director of Care Services
- Naked flames and spark producing equipment must be avoided and precautions should be taken to avoid static electricity
- Smoking is strictly forbidden
- The use of cosmetic oil and grease should be strictly forbidden
- Gas cylinders should when in use be protected against being knocked or dropped; and when not in use they should be stored in appropriate racking and be protected against being knocked over

COMBUSTIBILITY OF MATERIALS

Oxygen enrichment of the atmosphere, even by a few percent, considerably increases the risk of fire. Sparks which would normally be regarded as harmless can cause fires. Materials which do not burn in air, including fireproofing materials, may burn vigorously or even spontaneously in oxygen-enriched air.

11.2 SMOKING, INCLUDING E-CIGARETTES

There is a designated smoking room at the hospice for our resident in-patients only, this is restricted to those who are not bed bound and are assessed as being able to safely smoke without a fire risk to themselves or others.

Staff, volunteers, visitors, patients and contractors are only permitted to smoke at the designated smoking area signposted in the rear car park.

11.3 ELECTRICAL HAZARDS

- Equipment belonging to and used by persons visiting the Hospice must be in an electrically safe condition. LOROS reserves the right to prohibit the use of any electrical equipment which does not appear to meet this requirement
- Portable Appliance Testing (PAT) is carried out every 12 months. All new electrical items brought to site must be Portable Appliance Tested (PAT) before use
- Staff should inspect the integrity of plugs and cables before plugging items in, any signs of damage should be reported to the Operations Office and not used until checked and tested
- Do keep electrical devices and cords away from water
- Portable heaters are not permitted on site without the expressed permission from the Facilities & Operations Manager or Facilities Team Leader
- Do not cover electrical items

11.4 CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH (COSHH)

- Flammable liquids must be stored only under approved conditions (for example in locked external flammable liquids storage). When in use, such liquid should be limited to the quantity essential for one days needs and be kept in fire resisting containers with secure lids and be labelled accordingly
- Wherever possible we source low/no risk COSHH products
- Minimum quantities of aerosol containers are to be held in departments. Cans should not be exposed to excessive heat or be sprayed near naked flames or sources of ignition

11.5 LAUNDRY, BOILER HOUSE, KITCHEN

Regular planned maintenance is carried out on equipment within the above high risk areas to ensure operating correctly. Other ways we reduce the risk of fire hazards are, for example, the daily cleaning of the lint filters in the tumble dryers, fitted gas

emergency cut off valves to the laundry and kitchen, and good housekeeping standards ensuring areas are free of combustible materials.

11.6 CANDLES

Lighted candles/tea lights are not be used within the hospice, with the exception of the chapel/prayer room. Once lit, they should be placed within the dedicated metal candle tray at all times whilst lit.

11.7 FURNISHINGS

All furniture and furnishings are to be of reduced fire hazard level materials. It is the policy of the hospice to install furniture and furnishings only to these standards.

11.8 STORAGE

Combustible materials (for example linen, paper, cardboard etc) should be stored in an orderly manner in defined storage areas. Where kept outside of the building containers must be lockable and kept away from the building. Staff are not permitted to store items where they pose a risk of fire or a risk of restricting safe passage out of the building.

ESCAPE ROUTES should be kept clear at all times and not be used for temporary storage purposes.

11.9 FESTIVE DECORATIONS

- Only artificial, non-flammable Christmas trees are to be used, be secured into position away from any sources of heat
- Fairy lights must conform to British Standards and be CE marked. These are to be PAT tested prior to use. When not in use they are to be switched off and unplugged from the wall
- Decorations should be kept clear of light fittings and electrical wiring

12.0 ROUTINE PROCEDURES FOR THE OPERATIONS DEPARTMENT

The following fire duties are part of the site planned preventative maintenance procedures.

12.1 FIRE ALARM TESTS – HOSPICE SITES

The fire alarm sounder tests will be carried out every Tuesday

LPDC – test will take place at 10am

Main Hospice – will be tested twice at approximately 10.30am.

Staff should report any instances of poor audibility to the Operations Department.

12.2 FIRE ALARM CALL POINTS

All call points are to be tested within a 12 month period, and be checked for integrity, ease of access and applicable signage.

12.3 FIRE ZONE/ADDRESSABLE POINT ISOLATION

If a fire zone or addressable point is required to be isolated, a permit to work must be issued by the Facilities & Operations Manager, or the Facilities Team Leader prior to work commencing. These times should be recorded in the Fire Log Book.

12.4 PRACTICE EVACUATIONS

Fire evacuation alarm tests for both the Hospice and the LPDC will take place twice-yearly (one within normal working hours and one outside normal working hours).

12.5 FIRE EXTINGUISHERS/FIRE DOORS/EMERGENCY ESCAPE ROUTES/FIRE ASSEMBLY POINT SIGNS

Are maintained using planned preventative maintenance procedures, any deficiencies identified will be remedied by the Operations Team. Ensure that sufficient copies of the fire sweep lists are available at their respective locations.

12.6 FIRE SIGNAGE

Fire signage is regularly reviewed using planned preventative maintenance procedures, to check the correct signage is in place, any deficiencies identified will be remedied by the Operations Team.

12.7 FIRE WARNING SYSTEM/EMERGENCY LIGHTING

Competent contractors are appointed to maintain the addressable fire detection system to BS 5839-1:2002; and emergency lighting is tested to BS5266-1:1999.

12.8 FIRE EMERGENCY PACK

The Operations team will annually review and update the Emergency Packs held within the fire boxes. This pack will contain a site schematic showing the location of fire hydrants, location of piped oxygen system, gas cylinders and COSHH information.

12.9 FIRE BOXES

Manage the contents of the fire boxes under a planned preventative maintenance schedule. Each box should consist of: Site fire procedure, fire tabards, plant room keys, fire panel key and emergency map pack.

12.10 FAP MUSTER CHECKLIST

Operations team will ensure an up to date Site Assembly Point Muster Checklist is maintained and kept on Main Reception.

12.11 CONTROL OF CONTRACTORS

Contractors are to be managed when working on site, via the Safe Working Codes of Practice & General Safety Requirements for Contracted Personnel Working on Site Policy 4.2.

Permits to work are used for all hot works and a 2 hour fire watch is imposed to ensure risks of ignition are reduced.

All contractors must be trained and competent for the task being undertaken, work to their risk assessment, method statement, COSHH risk assessments, and hold suitable liability insurance.

All contractors will be inducted to the site prior to starting work.

13.0 IMPAIRMENT MANAGEMENT PROCEDURES

In accordance with the Company Insurers and to ensure that the impairment of fire protection installations is properly handled, it is necessary to:

- prepare works to minimise the duration of the impairment;
- inform Group insurers;
- strengthen fire safety precautions to avoid the occurrence of an accident during impaired times;
- be sure that the installations are restored properly once works are over;
- All downtime should be notified with the exception of:-
- Fire detection system - impairment of less than one 8 hour shift
- It is the responsibility of the Facilities & Operations Manager to ensure these procedures are activated when required.

14.0 KEYHOLDERS (SENIOR MANAGERS) Outside Of Normal Working Hours

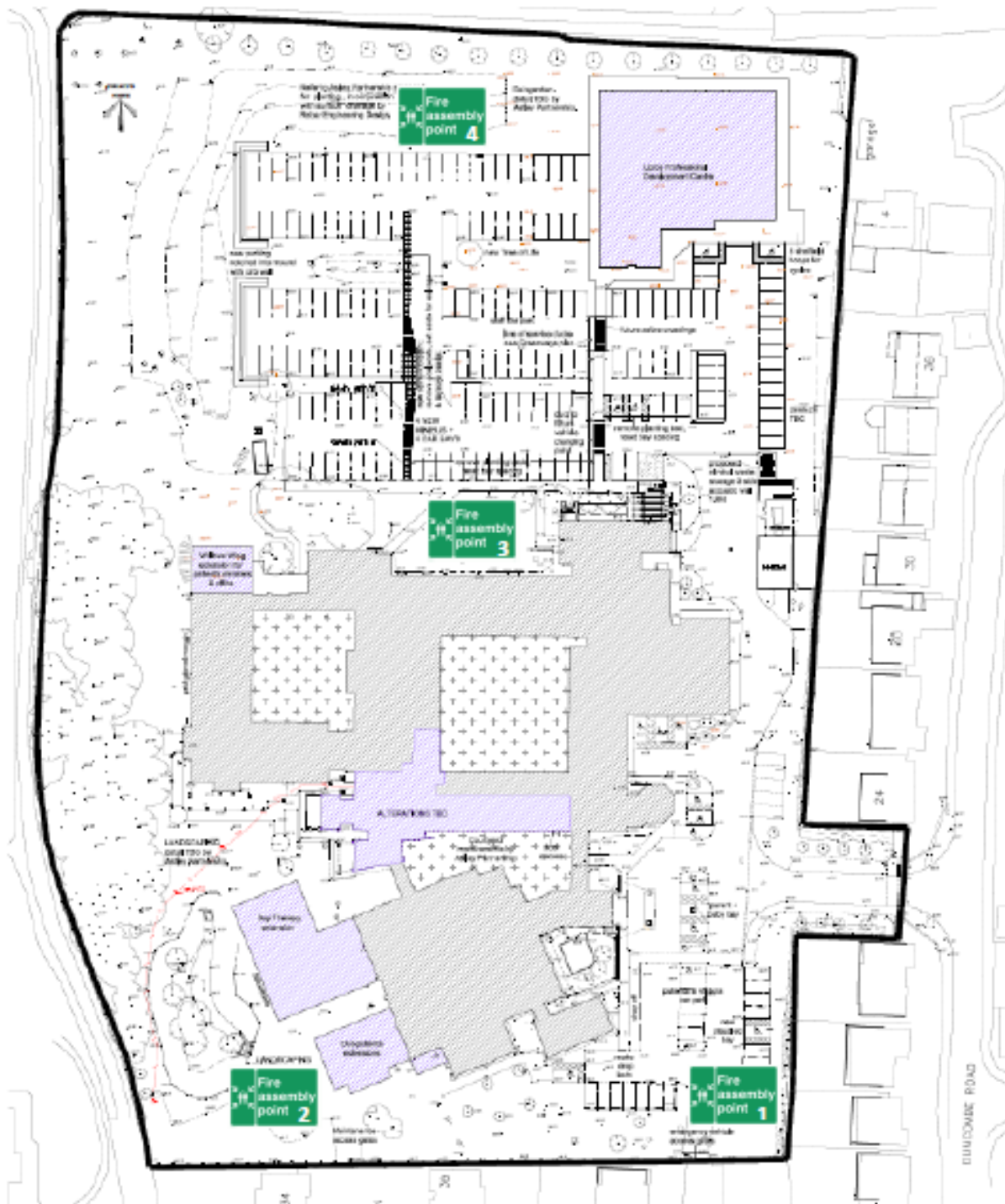
The monitoring station will, by telephone call one of the key holders (Facilities & Operations Manager, Chief Executive, or Director of Care Services) to advise that the fire alarm has been activated and that the Fire & Rescue Service are on their way.

Immediately upon being contacted the key holder will contact the Ward by telephone to ascertain whether there is a real fire or false alarm. In the event of there being a real fire the other key holders are to be informed. At least one key holder will attend the incident depending upon the severity of the fire.

15.0 DUE REGARD

As part of its development, this policy and its impact on equality have been reviewed in line with the Equality Act (2010). The purpose of the Equality Impact Assessment is to ensure that there has been due regard given to the protected characteristics to minimise and wherever possible, remove any disproportionate impact on individuals. The protected characteristics are as follows; age, disability, gender reassignment, marriage or civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation.




APPENDIX A LOCATION OF THE FIRE ASSEMBLY POINTS (FAP)

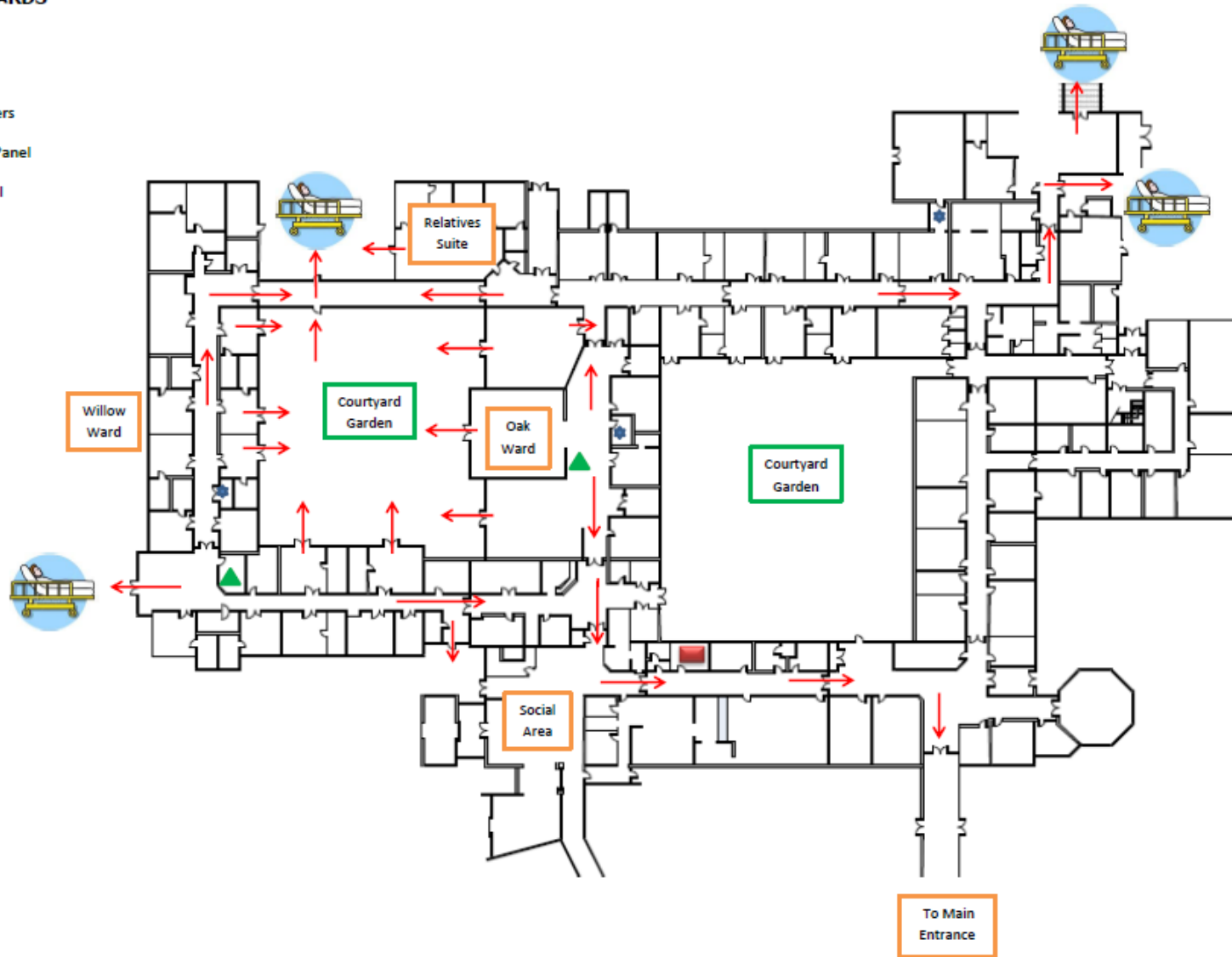


APPENDIX B – SITE FIRE EVACUATION PLANS

INPATIENT WARDS



Key:

-  Oxygen Cylinders
-  Fire Repeater Panel
-  Main Fire Panel



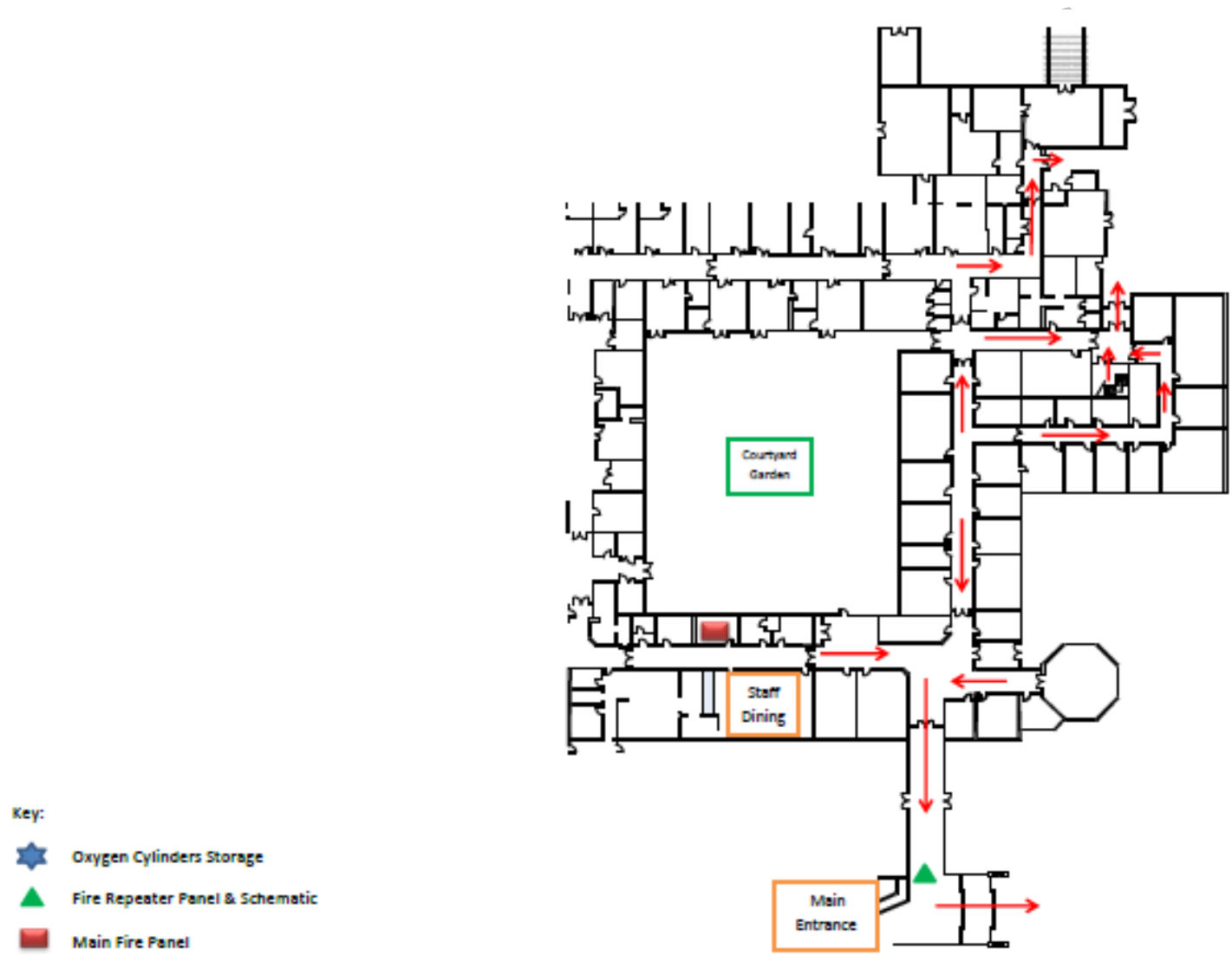
APPENDIX B – SITE FIRE EVACUATION PLANS DAY THERAPY AND OUTPATIENTS

Key:

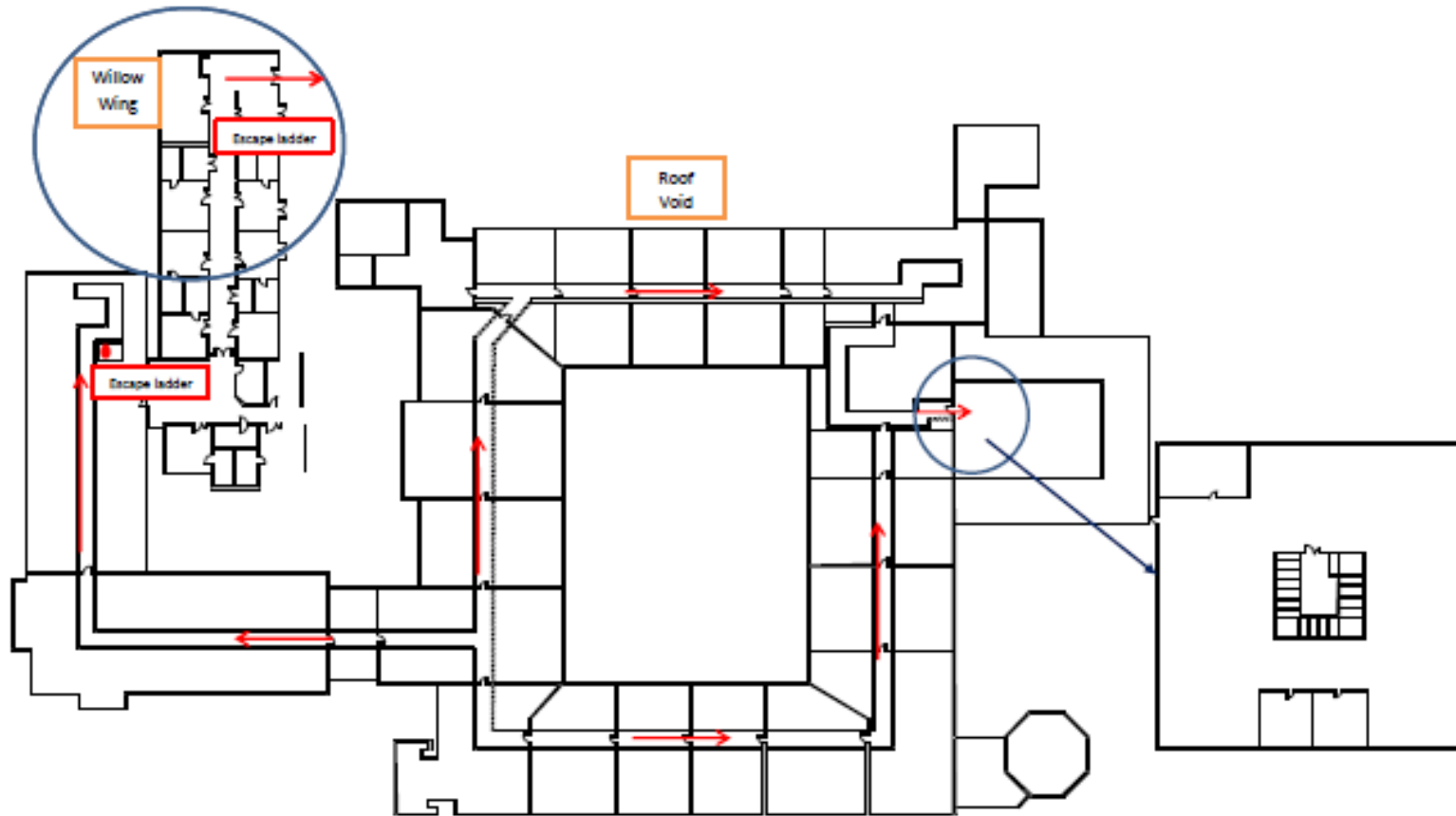
-  Oxygen Cylinders
-  Fire Repeater Panel



APPENDIX B – SITE FIRE EVACUATION PLANS OFFICE AREAS




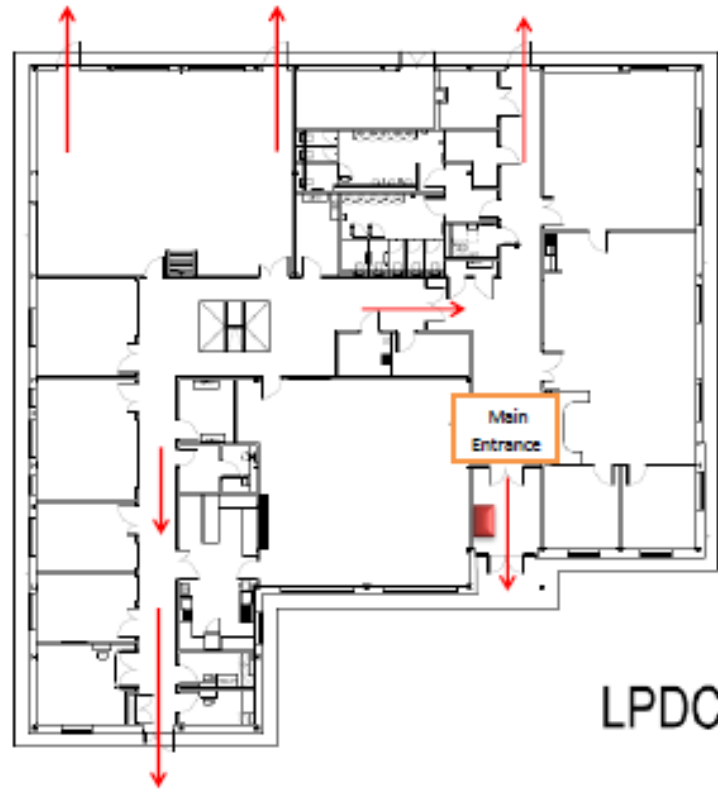
**APPENDIX B – SITE FIRE EVACUATION PLANS
FINANCE, LOTTERIES AND ROOF VOID**



APPENDIX B – SITE FIRE EVACUATION PLANS LOROS PROFESSIONAL DEVELOPMENT CENTRE

Key:

 Main Fire Panel

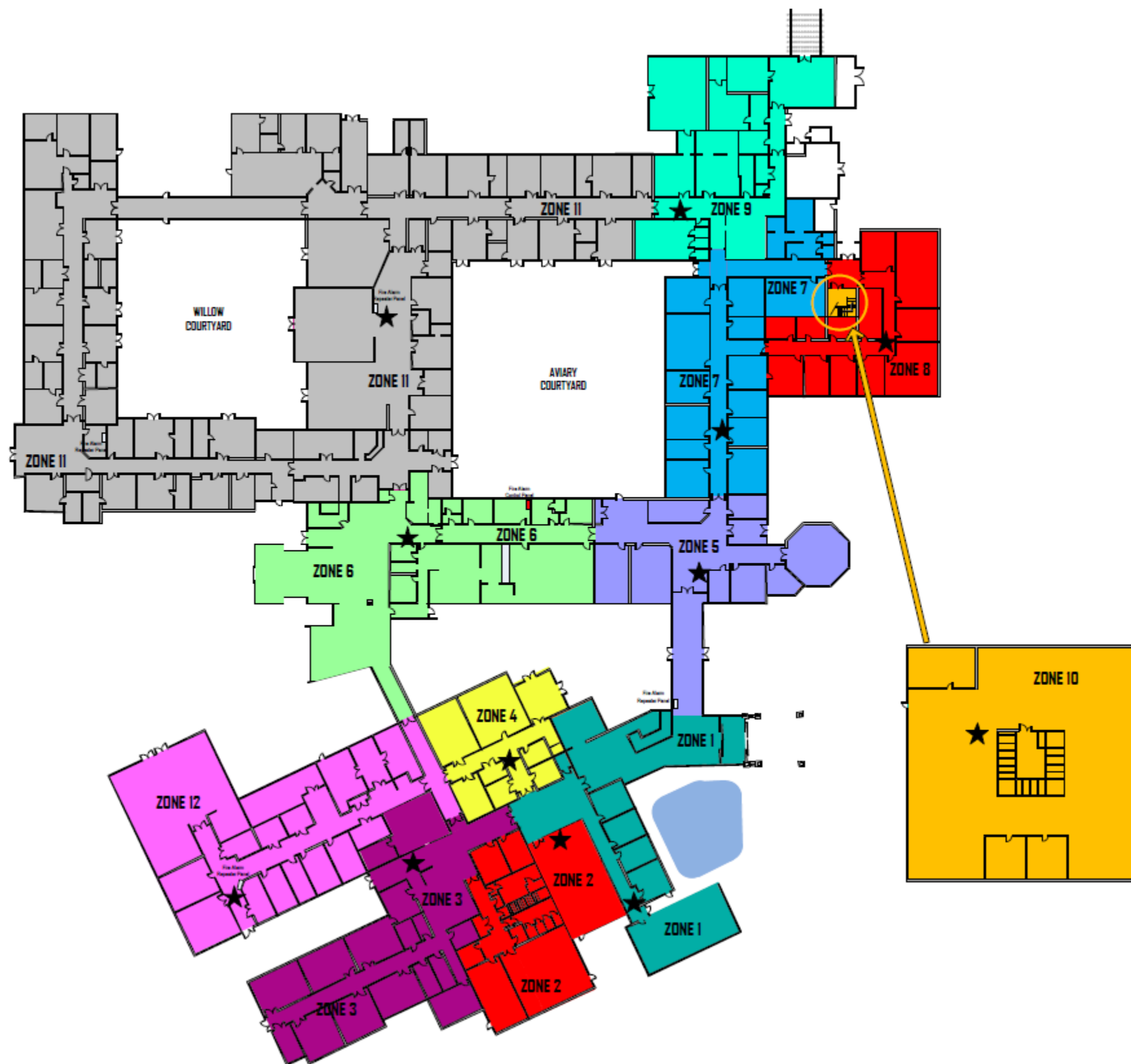


APPENDIX C - FIRE SWEEPER LISTS AND LOCATIONS

LOROS Hospice, Fire Sweepers Map

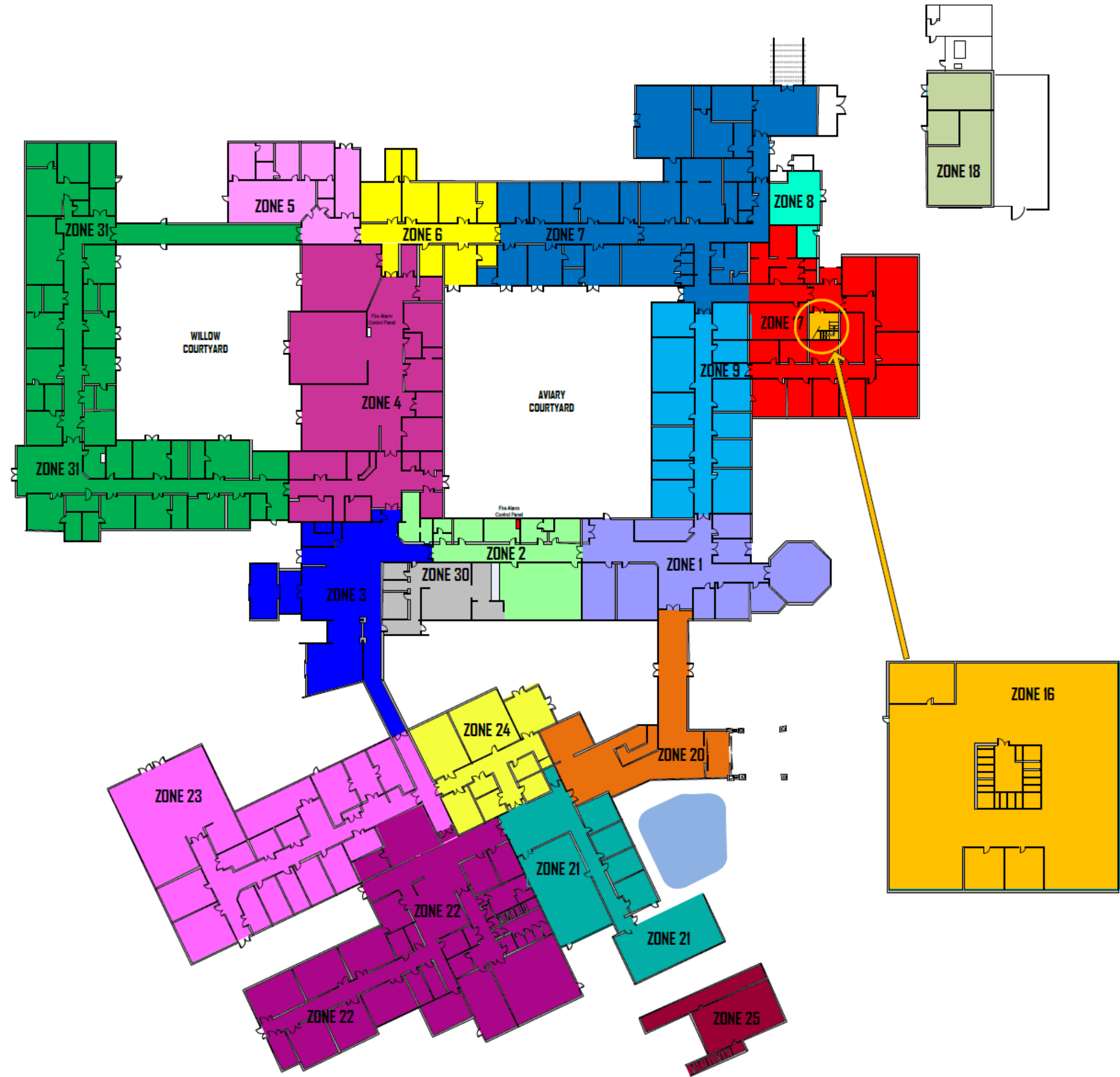
Key:

-  Zone 1 – CNS, Counselling, Disabled WC, Shop and Main Reception
-  Zone 2 – Offices 2.06, 2.12 & 2.13; Public Toilets, Kitchenette, Seminar Rooms 1 & 2
-  Zone 3 – Outpatients Waiting Room and Outpatient Clinic Rooms
-  Zone 4 – Enablement
-  Zone 5 – Chapel, Offices and Ritual Absolutions WC
-  Zone 6 – Public toilets, Kitchen, Dining Room, Snack Bar and Social Area
-  Zone 7 – SMC Corridor, Marketing Office and Ladies WC
-  Zone 8 – Admin Corridor
-  Zone 9 – Housekeeping, Ladies Changing Room, Gents WC, Laundry and Mortuary
-  Zone 10 – Finance & Fundraising
-  Zone 11 – Willow Ward, Willow Smokers Room, Relatives Suite & Oak Ward
-  Zone 12 – Day Therapy & Complementary Therapy

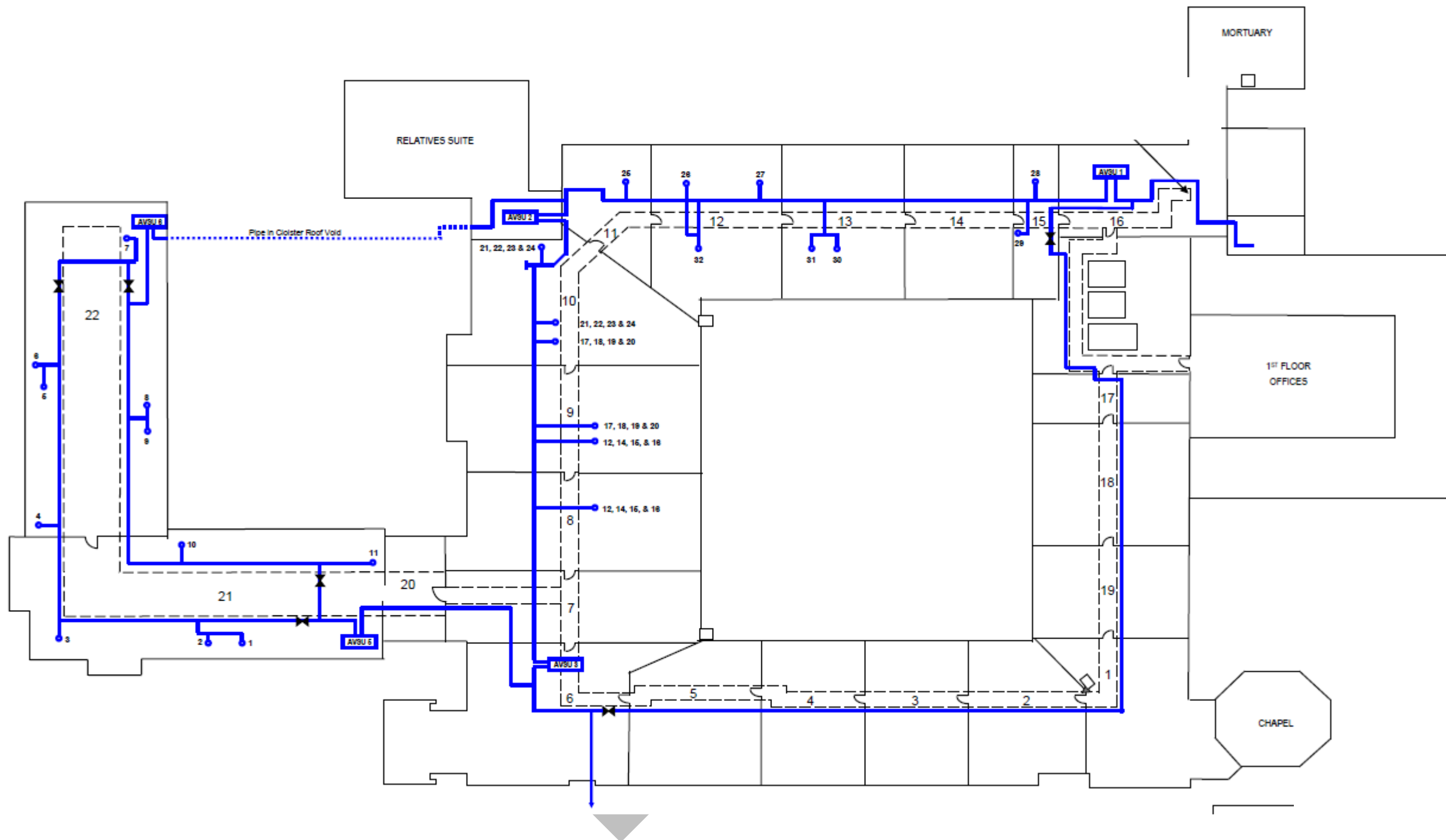


APPENDIX D - FIRE ZONES WITHIN THE HOSPICE

ZONE 1	CHAPEL & OFFICES
ZONE 2	STAFF & VOLUNTEER DINING ROOM & PUBLIC TOILETS
ZONE 3	SOCIAL AREA & SNACK BAR
ZONE 4	OAK WARD - BAYS A, B, C & WARD OFFICE
ZONE 5	RELATIVES SUITE ROOMS
ZONE 6	OAK WARD - PATIENT BEDROOMS 25, 26, 27 & 32
ZONE 7	OAK WARD - PATIENT BEDROOMS 28 - 31, LAUNDRY, MORTUARY & FEMALE CHANGE
ZONE 8	BOILER ROOM & OXYGEN STORE
ZONE 9	CHIEF EXEC. DIRECTOR OF CARE SERVICES, CONSULTANTS & DOCTORS OFFICES
ZONE 10	ROOF VOIDS 1 - 6
ZONE 11	ROOF VOIDS 7 - 12
ZONE 12	RELATIVES ROOMS ROOF VOID
ZONE 13	ROOF VOIDS 13 - 16 & TANK ROOM
ZONE 14	ROOF VOIDS 17 - 19
ZONE 15	ROOF VOID MORTUARY
ZONE 16	FINANCE & FUNDRAISING
ZONE 17	OPERATIONS, IT, HR, ADMIN, MARKETING, CASH ROOM, POST ROOM & LADIES WC
ZONE 18	GENERATOR ROOM, GARAGE, & ARCHIVE STORE
ZONE 19	WILLOW ROOF VOID
ZONE 20	MAIN RECEPTION & SHOP
ZONE 21	COUNSELLING & CNS
ZONE 22	OUTPATIENTS WAITING AREA, CONFERENCE ROOMS & PUBLIC TOILETS, & OUTPATIENTS CLINIC ROOMS
ZONE 23	DAY THERAPY AND COMPLEMENTARY THERAPY
ZONE 24	ENABLEMENT
ZONE 25	FRIZELLE PLANT ROOM
ZONE 26	ROOF VOID - DAY THERAPY
ZONE 27	ROOF VOID - OUTPATIENTS
ZONE 28	NOT IN USE
ZONE 29	NOT IN USE
ZONE 30	KITCHEN
ZONE 31	WILLOW WING



APPENDIX E – SCHEMATIC OF THE PIPED OXYGEN SYSTEM



APPENDIX F – PERSONAL EMERGENCY EVACUATION PLAN (PEEP) FORM



Personal Emergency Evacuation Plan (PEEP)

To be completed by the Manager

PERSONAL EMERGENCY EVACUATION PLAN			
Name			
Department			
Room Number			
Ext			
AWARENESS OF PROCEDURE			
DESIGNATED ASSISTANCE			
The following staff have been designated to give _____ assistance to get out of the building in an emergency			
Name			
Contact Details (Rm No and Ext)			
Name			
Contact Details (Rm No and Ext)			
METHODS OF ASSISTANCE (e.g. Transfer procedures, methods of guidance etc.)			
EQUIPMENT PROVIDED (including means of communication)			
PERSONALISED EVACUATION PROCEDURE (A step by step account beginning with the first alarm)			
1			
2			
3			
4			
Monitor and Review			
Signed by Manager		Date	
Signed by Individual		Date	

APPENDIX G - SITE FIRE TEAM – ROLE LIST

The following roles will need to be undertaken:

Role	Task	Radio Y/N
Site Fire Marshal or Deputy	They will take the lead in the fire team and allocate tasks, they will remain at Main Reception to meet fire and rescue service, they will also give further instructions depending on the type of emergency. They will maintain regular contact via radio with the Nurse In Charge and members of the Fire Team as listed below. Liaise with the Fire Registrar to ensure all sweep lists received. The all clear to re-occupy the Building will only be given by the Fire Marshal where applicable under the advice of Fire Service in attendance.	Y
Fire Registrar	Will collate the fire sweep lists and act as a point of contact for staff, volunteers and patients evacuating the building. They will advise the Site Fire Marshal or Deputy of any areas that have not been swept. They will remain at Fire Assembly Point 1 (FAP1) until the all clear is given.	N
Alarm Investigators x 2	As a minimum one Facilities Officer along with another member of the Operations team will go to source of activation (unless it is in the roof space or plant room) to ascertain cause of the alarm. If a fire is discovered, leave by the nearest safe route, ensuring doors are closed and call 999 to confirm fire. Make way to main reception Radio findings through to Fire Marshal and rest of fire team.	Y
Remaining Fire Team Members		
Traffic Control @ Entrance	This person will go to the entrance from Duncombe Road, and will provide information to visiting drivers and temporarily redirect traffic for the duration of the alarm and until authorisation for the building to be re-occupied.	N
Ward Support	This person will go to the Automatic Doors into the ward from the social area and ensure that staff, volunteers, patients and visitors go to the correct locations during the alarm situation. They will stay there for duration of alarm & receive instruction via the ward radio.	N
Day Therapy Support	This person will go externally to Fire Assembly Point 2 (FAP2) and ensure that staff, volunteers, patients are all ok. They will remain at FAP2 for the duration of alarm & receive instruction via the Day Therapy radio until the all clear is given and everyone can go back inside.	N
Staff FAP	This person will take a fire radio and go externally to Fire Assembly Point 3 (FAP3). They will remain at FAP3 until the all clear is given and then advise everyone they can go back inside.	Y