



Fire Safety Policy

Lead executive	Director of Operations <input type="checkbox"/>
Authors details	Fire Advisor - 01244 397727 <input type="checkbox"/>

Type of document	Policy <input type="checkbox"/>
Target audience	All CWP staff <input type="checkbox"/>
Document purpose	To provide staff with guidance on the potential hazard that fire presents in all NHS premises, hospitals, clinics, health centres and nursing homes which are also high life risks and high fire risk areas. <input type="checkbox"/>

Approving meeting	Health Safety & Wellbeing Sub-Committee	Date 5-Nov-12
Implementation date	20/08/2018	

CWP documents to be read in conjunction with	
HR6	Mandatory Employee Learning (MEL) policy
GR26	Policy for the safe manual handling of people and loads

Document change history	
What is different?	Addition of appendix 5; Personal Emergency Evacuation Plans (PEEPs)
Appendices / electronic forms	Addition of appendix 5; Personal Emergency Evacuation Plans (PEEPs)
What is the impact of change?	Low

Training requirements	Yes - Training requirements for this policy are in accordance with the CWP Training Needs Analysis (TNA) with Education CWP.
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Document consultation	
East locality	<i>Who within this service have you spoken to?</i>
Wirral locality	<i>Who within this service have you spoken to?</i>
West locality	<i>Who within this service have you spoken to?</i>
Corporate services	<i>Who within this service have you spoken to?</i>
External agencies	<i>Who within this service have you spoken to?</i>

Financial resource implications	Low
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External references	
<ol style="list-style-type: none"> 1. Firecode – Health Technical Memorandum 05-01; 2. Managing Healthcare Fire Safety, The Regulatory Reform (Fire Safety) Order 2005; 3. The Health and Safety at Work Act 1974; 4. The Management of Health and Safety at Work Regulations 1999; 5. The Building Act 1984 and Building Regulations 1985; 6. The Building Regulations 1991 Approved Document ‘B’. 	
NB. Building Regulations are not NHS but a statutory requirement.	

Equality Impact Assessment (EIA) - Initial assessment	Yes/No	Comments
Does this document affect one group less or more favourably than another on the basis of:		
- Race	No	
- Ethnic origins (including gypsies and travellers)	No	
- Nationality	No	
- Gender	No	
- Culture	No	
- Religion or belief	No	
- Sexual orientation including lesbian, gay and bisexual people	No	
- Age	No	
- Disability - learning disabilities, physical disability, sensory impairment and mental health problems	No	
Is there any evidence that some groups are affected differently?	No	
If you have identified potential discrimination, are there any exceptions valid, legal and/or justifiable? N/A		
Is the impact of the document likely to be negative?	No	
- If so can the impact be avoided?	N/A	
- What alternatives are there to achieving the document without the impact?	N/A	
- Can we reduce the impact by taking different action?	N/A	
Where an adverse or negative impact on equality group(s) has been identified during the initial screening process a full EIA assessment should be conducted.		
If you have identified a potential discriminatory impact of this procedural document, please refer it to the human resource department together with any suggestions as to the action required to avoid / reduce this impact. For advice in respect of answering the above questions, please contact the human resource department.		
Was a full impact assessment required?	No	
What is the level of impact?	Low	

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1. Introduction

Fire is a potential hazard in all NHS premises, hospitals, clinics, health centres and nursing homes which are also high life risks and high fire risk areas.

The consequences of fire in hospitals and other health care premises can be especially serious because of the difficulties and dangers associated with the emergency evacuation of patients, many of whom may be highly dependent.

2. Content of policy

The policy contains information and strategies to ensure the Cheshire & Wirral Partnership NHS Foundation Trust complies with all current fire legislation and ensures a fire safe environment for all staff, visitors, patients and others who may be in on Trust premises.

The policy describes the management arrangements for fire safety and provides guidance to protect people from the hazards of fire.

The management framework has been designed to meet the requirements of all of our premises however large or small.

For information relating to specific guidance for sleeping risks e.g. Bowmere Hospital [click here](#).

Where individuals have been nominated within this framework, specific training courses are provided to meet their training needs

3. Aim

The aim of the Trust is to ensure that, if possible, outbreaks of fire do not occur, if and when outbreaks of fire do occur, they are rapidly detected, effectively contained and rapidly extinguished.

An involvement in fire precautions is therefore a basic duty of all staff and an essential obligation for all persons with managerial responsibility.

4. Duties and responsibilities

The Trust recognises its responsibilities to implement in full their fire safety duties in respect of their estate and to ensure all their employees understand and partake in fire precaution routines.

The overall responsibility for the performance of the Trust in respect of fire precautions and fire safety is delegated to the Chief Executive. The Chief Executive is therefore responsible for ensuring the implementation of the Department of Health Firecode 'Policy and Principles' and to fulfil the requirements of the Regulatory Reform Order (Fire Safety) Order 2005 in all premises owned or occupied by the Trust.

The Trust will make the following arrangements to comply with the appropriate legislation:

1. Provide for the training of all employees. The training should relate to fire hazards, precautions and fire drills. Training will be provided for people with special responsibilities. This will include all nominated personnel, Trust Fire Manager, Competent Person (Fire) and Fire Wardens. To achieve this specific training courses will be provided by the Learning & Development Department and delivered by the Trust Fire Advisors;
2. Provide and maintain fire fighting equipment;
3. Provide and maintain fire alarms;

4. Assess structural and other fire protection needs and grade them in priority order and make arrangements for the completion of the work;
5. Erect permanent written instructions at strategic locations throughout Trust premises relating to the fire procedure.

4.1 Chief Executive

The Chief Executive carries the full responsibility for the management of all fire precautions within Trust premises and under the Regulatory Reform (Fire Safety) Order 2005 and will be known as the Responsible Person.

4.2 Director Responsible For Fire – Director of Operations

A director will be nominated to have a specific responsibility for the fire precautions within the Trust.

4.3 Trust Fire Manager – Head of Capital and Property

Executive Directors will nominate a senior manager to be responsible for all aspects of fire safety within the Trust and will be known as the **Trust Fire Manager**.

The Trust Fire Manager will:

1. Ensure all Trust premises has a nominated Competent Person (Fire);
2. Supervise the effective day to day upkeep of the fire safety strategy within the Trust;
3. Ensure all incidents of fire are reported and conveyed to the Executive Director and arrange for the contents to be acted upon;
4. Prepare an annual report for the Trust Board informing them of the current state of fire precautions within the Trust premises and ensure the Annual Certificate of Firecode is completed.

4.4 Competent Person Fire

The Trust Fire Manager will ensure each Trust premise has a Competent Person (FIRE) who will have responsibility for all matters relating to fire safety within their premises. The competent Person (Fire) may be the senior person in the building or a person with sufficient training and experience or other knowledge and other qualities to be able to carry out these measures. The names of the people are to be kept in the premises Fire Log Book.

The Competent Person (Fire) will:

Assist the Trust Fire Manager in the day to day implementation of the fire safety strategy:

1. Ensure an up to date Fire Risk Assessment is kept on the premises and retained in the fire document box.
2. Ensure a Fire Log Book is kept on the premises and kept up to date and retained in the fire document box.
3. Ensure the fire alarm is tested on a weekly basis. Hospital site tests are carried out by Estates personnel, elsewhere it is the occupier.
4. Ensure that the fire fighting equipment is in place and maintained.
5. Ensure a fire evacuation drill for all areas is carried out on an annual basis and the Fire Evacuation Assessment sheet is completed and kept on site and retained in the fire document box.
6. Ensure sufficient Fire Wardens are nominated for all areas of the premises and recorded in the Fire Log Book.

7. Keep copies of all Fire Warden Checklists.
8. Ensure all staff in the premises attend the relevant annual Module 1, 2 or 3 Fire Training.
9. Ensure all incidents of fire are reported to the Trust Fire Advisor via email as soon after the fire as possible.
10. Ensure all unwanted signals are investigated, a Datix report completed and the Trust Fire Advisor informed via email.
11. Ensure all staff are aware of the premises emergency fire procedure. (Blue Fire Action Notice).
12. The Fire Advisor must be informed of construction working on site and take effective steps to ensure that their activities do not subvert fire precautions within the premises.
13. Ensure there is always a nominated trained person to take charge should a fire occur.
14. Organise Emergency Response Teams
15. Ensure Personal Emergency Evacuation Plans (PEEP) are in place.
16. Ensure someone has been appointed to liaise with fire service
17. Ensure personnel who are not based on site (meeting attendees, contractors etc) are made aware of the fire procedure.
18. Liaise with Fire Advisors to produce a plan to reduce unwanted fire signals (UwFS).

4.5 Fire wardens

The Competent Person (Fire) will ensure sufficient staff have been nominated and trained to carry out the role of Fire Warden within their respective building or area. Each department will have enough Fire Wardens trained to ensure at least one Warden is available at all times for each floor/area/building to carry out that role in a fire. A Fire Warden will be the eyes and ears of the Trust identifying hazards in the workplace and reporting these to their line manager or Competent Person (Fire).

The principle duties of the fire warden are to:

1. Attend appropriate training to respond to the role of the Fire Warden – courses are advertised on a regular basis by the Learning & Development Department and delivered by the Fire Advisors;
2. Take appropriate and effective action if a fire occurs;
3. Ensure that escape routes are available for use;
4. Identify hazards in the workplace;
5. Record and report their observations by completing the Fire Warden Checklist and sending a copy to the Competent Person (Fire) for their premises or area every four weeks. This copy is to be kept in the fire box near the front door of the premises (See [Appendix 3](#) Fire Wardens Checklist).

The procedure for Fire Wardens if a fire is discovered

1. Ensure that the alarm has been raised;
2. Check that manufacturing processes have been made safe;
3. Evacuate staff from the building or area involved;
4. Check that any staff or visitors with disabilities are assisted;
5. Call the reporting centre / Fire Service and give details of the location, severity and cause of the fire if known;
6. Fight the fire if safe to do so.

4.6 Fire advisor

The executive directors shall appoint a Fire Advisor to oversee the fire precaution work and provide training for all employees.

The Fire Safety Adviser will advise the Trust's Fire Manager on technical fire matters and be responsible for monitoring the state of fire precautions within the 'Trust' premises. This will include:

1. Advising and assisting in the interpretation and application of Firecode, fire safety legislation and other official guidance relevant to healthcare premises;
2. Ensure a fire risk assessment pro-forma has been completed for all departments/premises. (See [Appendix 2](#) Fire Risk Assessment Proforma);
3. Assist the Trust Fire Manager in preparing an annual report on the current state of fire safety within the Trust, to be presented to the Trust Board and in the completion of the 'Certificate of Firecode Compliance' which is sent each year to NHS Estates Leeds;
4. Liaise with staff in the Estates Department, local authority building control and the Fire Service. Liaise with the Trust Fire Manager in preparing and participating in annual training programmes;
5. Assisting managers/Competent Person (Fire) in the development of local fire procedures;
6. Monitoring the adequate provision, sitting and effective maintenance of all fire fighting equipment, alarm systems, fire safety signs, notices etc;
7. Keeping accurate records of all fire incidents, investigating fires occurring in suspicious circumstances in conjunction with local fire and police authorities and ensuring that fire reports are forwarded to NHS Estates.

4.7 All employees

The principle duties of employees are to:

1. On discovery or suspicion of a fire, operate the fire alarm without delay;
2. Report the extent and location of the fire in accordance with the instructions detailed on fire action plan notices;
3. Fight the fire if safe to do so;
4. Evacuate from the building or area;
5. Report to the designated assembly point;
6. Report any general concerns about fire safety, equipment or procedures to their manager.

5. Evacuation of patients, disabled staff and visitors in a fire emergency

As a result of relevant fire legislation and in particular the Disability Discrimination Act a plan must be produced to ensure people with disabilities can be evacuated safely from any Trust premises:

1. Each patient has to be risk assessed as to what level of assistance may be required to evacuate in an emergency (see Cheshire & Wirral Partnership NHS Foundation Trust Policy for the Safe Manual Handling of People and Loads – including safe use of bed rails) and a Personal Emergency Evacuation Plan should be prepared;
2. In the majority of cases in a hospital situation horizontal evacuation would take place, only requiring vertical evacuation in extreme circumstances;
3. Staff or visitors with hearing or visual disability can be assisted downstairs by members of staff;
4. Staff or visitors requiring the use of wheelchairs may be allowed to be assisted down stairs or transferred to an evacuation chair;
5. The only type of Specialist Evacuation Equipment recommended to be used would be evacuation chairs. These would only be used in limited areas where a risk assessment indicates the need for them and where adequate training can be achieved. The Manual Handling Officer, the Fire Advisor and the Building Department Manager together will carry out the assessment;

6. Discussion with each disabled member of staff, visitor or patient is paramount to discover what level of assistance may be required. People with disabilities will offer vital information regarding their own evacuation;
7. Use of special equipment other than evacuation chairs is not recommended. It is recommended that evacuation chairs be used for vertical evacuation, bed hoists and beds only should be used for horizontal evacuation;
8. Lifts should not be used for Fire Evacuation;
9. Evacuation plans cannot include the Fire Services as part of those plan;
10. Refuges cannot be used for disabled people to wait until rescued by the Fire Service.

6. Training

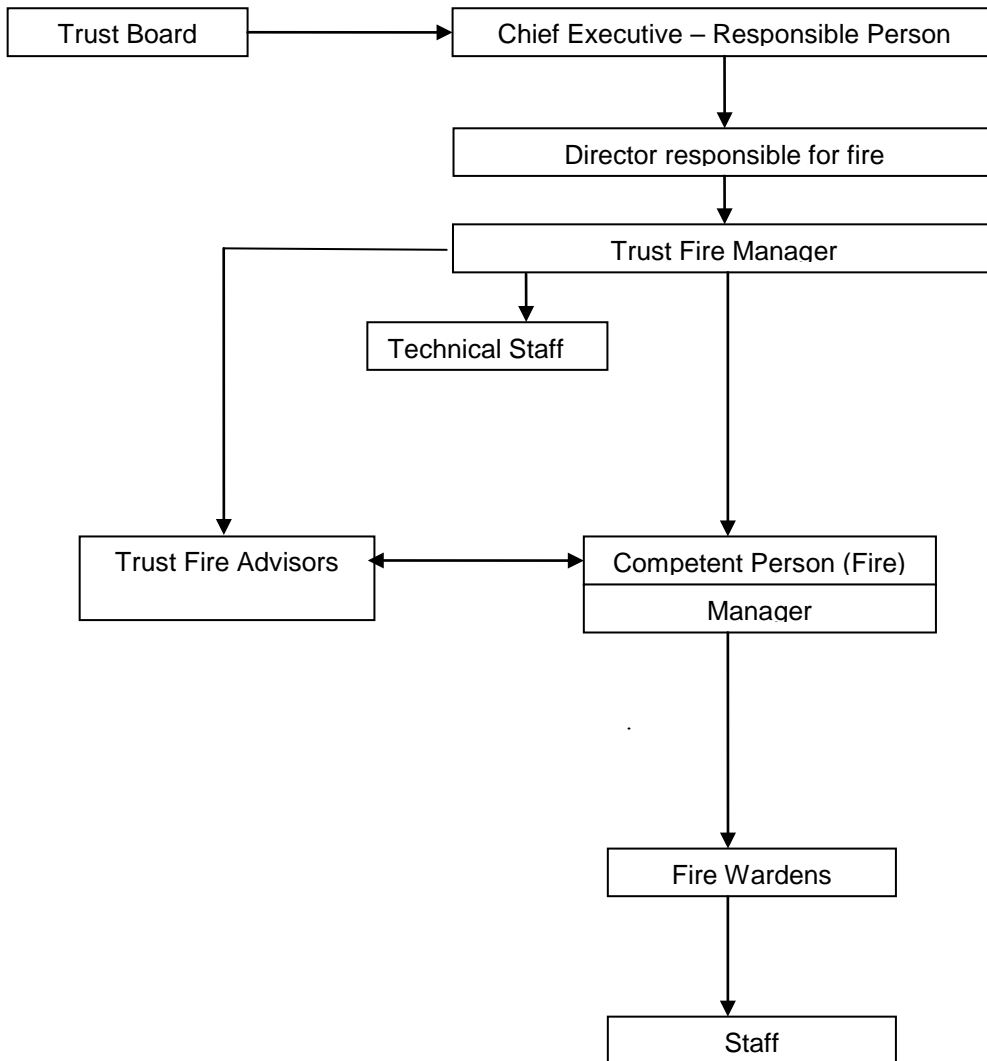
Every new member of staff must be given basic fire precaution instructions relating to their own work place by their head of department, line manager or Competent Person (Fire) during their first days of work. They should be aware of the sitting of fire procedure notices, fire alarms, fire exit routes, fire fighting equipment and fire assembly points.

It is mandatory for all staff to attend fire training upon induction and then annually. This consists of the following:

1. The action to take in the event of fire;
2. Fire hazards;
3. Use of fire equipment;
4. Evacuation procedure;
5. Fire Drills.

Managers/Competent Persons (Fire) are responsible for the accurate recording of staff attendance at fire lectures and fire training sessions. This information may be called for at any time by the Trust Fire Manager, the Fire Safety Adviser or a Fire Service Officer. The training record should be completed and retained by the Competent Person.

Appendix 1 - Fire Management Structure



Appendix 2 - The regulatory reform (fire safety) order 2005

Fire risk assessment

Date of assessment	
Address	
Premises telephone No	
Competent person	
Post held	

Number of persons employed in premises									
Ground Floor		1 st Floor		2 nd Floor		3 rd Floor		Total	

Number of patients / clients / visitors in premises (approximate maximum)									
Ground Floor		1 st Floor		2 nd Floor		3 rd Floor		Total	

Is there a fire document box on the wall containing?

- Log Book – Up to date and all tests recorded
 Fire Risk Assessment
 Fire Warden's Checklist
 Alarm Keys
 Premises Drawings

		Yes	No	N/A	Notes
Stage 1 Identify fire hazards					
1.1	Are all combustible materials & flammable liquids & gases stored safely?				
1.2	Are all flammables substances stored in fire resisting stores away from ignition sources?				
1.3	Are any combustibles materials adjacent to any flammable substances?				
1.4	Are there any rubbish bins or skips sited where they can interfere with the means of escape, or pose a fire hazard to the building?				
1.5	Are there any potential hazards outside the building susceptible to an arson attack that could affect the building?				
1.6	Are there large notice boards on escape routes with bundles of loose papers hanging from them?				
1.7	Are combustibles artificial foliage or plants used to decorate the workplace?				
1.8	Are all heaters fitted with suitable guards & fixed in position away from combustible materials?				
1.9	Are portable heaters used?				
1.10	Are all items of portable electrical equipment inspected regularly e.g. PAT tested?				
1.11	Are there any signs of overheating?				
1.12	Is the use of extension leads & multi-point adapters kept to a minimum?				
1.13	Are electrical extension leads plugged into adapters or other extension leads?				
1.14	Are flexes run in a safe place where they will not be damaged?				

		Yes	No	N/A	Notes
1.15	Are there fluorescent light tubes & fittings, or light bulbs near combustible materials?				
1.16	Is the upholstery of furniture in good condition?				
1.17	Is the workplace free of rubbish & combustible waste materials?				
1.18	Are satisfactory arrangement made for the collection of rubbish?				
1.19	Are satisfactory arrangement made for the disposal of rubbish?				
1.20	Are there any other features that could lead to the spread of flames or smoke in the event of fire?				
1.21	Are there any obvious faults with the electrical socket outlets?				
1.22	Is the smoking policy being adhered to?				
1.23	Do procedures and practices avoid the use of combustible materials or processes that use heat (incineration – cooking – welding etc)?				
Stage 2 Identifying people at risk					
2.1	If there is a large number of people present, particularly members of the public, is there a sufficient number of trained staff to ensure speedy and orderly evacuation?				
2.2	If the workplace is used regularly by people with Impaired mobility:				
	• Is the number of trained staff adequate to ensure evacuation?				
	• Are the escape routes suitable for the people who have to use them?				
	• Are refuges used for non-ambulant people?				
	• Have persons been nominated to assist in evacuations?				
	• Is there a Personal Emergency Evaluation Plan (PEEP) in place for any staff with a disability?				Responsibility of Competent Person (Fire)
• Are there plans in place to carry out a dynamic PEEP for visitors?				Responsibility of Competent Person (Fire)	
Stage 3 Evaluate, remove reduce and protect from risk					
3.1	Are there a sufficient number of exits of suitable width for the people present?				
3.2	Are internal fire doors labelled as such and normally kept closed?				
3.3	Are the self-closers on fire doors operating correctly?				
3.4	Do the doors on escape routes open in the direction of travel?				
3.5	Do the exits lead to place of safety?				
3.6	Are corridors free from obstruction?				
3.7	Are the stairways & escape routes used for means of escape clear of combustible materials and storage?				
3.8	Are the escape routes free from tripping & slipping				

		Yes	No	N/A	Notes
	hazards?				
3.9	Are steps, stairs & ramps in a good state of repair?				
3.10	Are all stair handrails (where fitted) of sound fixing & conditions?				
3.11	Are devices securing final exits capable of being opened immediately and easily without the aid of a key?				
3.12	Is the area outside the final exit kept clear from obstruction?				
3.13	Are doors on escape routes provided with a vision panel if they open both ways?				
3.14	Do any office / room doors open outwards onto a main means of escape?				
3.15	Can the amounts of combustibile materials stored in the premises be reduced?				
3.16	Can the amounts of materials that are being displayed be reduced?				
3.17	Can damaged furniture be replaced?				
3.18	Can housekeeping & the arrangements for the disposal of waste and rubbish be improved?				
3.19	Can rubbish bins and skips be relocated away from building?				
3.20	Can the size of displays be limited, & sited away from the main escape routes?				
3.21	Can the size of notice boards & the amount of paper hanging be reduced?				
3.22	Can the hanging of combustibile decorations, especially near light fittings be prohibited?				
3.23	Can light units be re-positioned to reduce the risk of contact with combustibile materials?				
3.24	Can flammable materials in the workplace be reduced to a minimum?				
3.25	Can secure storage be provided for flammable materials & LPG cylinders, remote from the building?				
3.26	Are compressed gas cylinders stored correctly?				
3.27	Are escape routes clearly signed?				
3.28	Are the exit signs visible from all parts of the work areas?				
3.29	Are pictogram signs for fire exits & routes provided, incorporating directional arrows e.g. running man?				
3.30	Are the exit signs adequately illuminated by natural & emergency escape lighting?				
3.31	Are flammable materials appropriately signed?				
3.32	Are containers marked correctly with appropriate signs?				
3.33	If the layout & the escape routes may not be familiar to the people present: <ul style="list-style-type: none"> • Are the escape routes adequately signed? • Is the number of trained staff adequate to ensure safe evacuation? 				
3.34	Are fire extinguishers easily accessible within the workplace and suitable for the risk?				
3.35	Are all fire extinguishers unobstructed?				

		Yes	No	N/A	Notes
3.36	Are all extinguishers wall mounted?				
3.37	Do extinguishers appear to be free from damage (visual check)				
3.38	Have the fire extinguishers been tested within the last 12 months				
3.39	Are evacuation chairs in place and in working order?				
3.40	Have sufficient staff been trained on the evacuation chairs and suitable rehearsals carried out?				
3.41	Is the fire alarm system in working order?				
3.42	Is the fire alarm tested in accordance with the current regulations?				
3.43	Is there an automatic fire detection system in the premises?				
3.44	Can the fire alarm be raised without placing anyone in danger?				
3.45	Are the fire alarm call points clearly visible and unobstructed?				
3.46	Is the travel distance to the nearest call point 45m or less?				
Stage 4 Record, plan, inform, instruct and train					
4.1	Have the findings in this assessment been recorded?				
4.2	Have the findings in this assessment been reported to the estates department?				
4.3	Has your workplace a system in place to ensure that this assessment is amended accordingly once deficiencies have been fixed/resolved				See appendix of Findings & Assessment
4.4	Has your workplace a system in place to ensure that this assessment is reviewed annually?				Fire Advisors
4.5	You must give clear and relevant information and appropriate instructions to your staff and the employers of other people working in your premises, such as contractors, about how to prevent fires and what they should do if there is a fire. In some premises you may also want to give information to patients and visitors. All other relevant persons should be given information about the safety arrangements as soon as possible e.g. contractors when they start work.				Responsibility of Competent Person (Fire)
4.6	Have staff received annual statutory fire lectures?				Essential Learning
4.7	Have staff received annual statutory on-site fire evacuation drill training?				
4.8	Are records kept for all staff evacuation drill training with staff signed attendance registers in place?				
4.9	Are there procedures & systems for calling out key staff during emergencies?				
4.10	Do staff know what action to take if the fire alarm sounds?				
4.11	Are Fire Routine Plan Action Notices (blue poster) displayed prominently throughout the workplace?				
4.12	If the workplace is shared with others you must liaise with them regarding matters of fire safety and the risks that you have identified.				
4.13	If you do NOT have direct control over the				

		Yes	No	N/A	Notes
	workplace have you made your findings known to the other occupiers within the building?				
Stage 5 Review – to be completed by the competent person (fire)					
5.1	You should constantly monitor what you are doing to implement the fire risk assessment to assess how effectively the risk is being controlled.				
5.2	If you have any reason to suspect that your fire risk assessment is no longer valid or there has been a significant change in your premises that has affected your fire precautions, you will need to review your assessment and if necessary revise it. Reasons for review could include:				Contact Fire Advisor
5.3	Changes to work processes or the way that you organise them, including the introduction of new equipment.				Inform Fire Advisor
5.4	Alterations to the building, including the internal layout.				Inform Fire Advisor
5.5	Substantial changes to furniture and fixings.				Inform Fire Advisor
5.6	The introduction, change of use or increase in the storage of hazardous substances.				Inform Fire Advisor
5.7	The failure of fire precautions, e.g. fire-detection systems and alarm systems, life safety sprinklers or ventilation systems.				Inform Fire Advisor
5.8	Significant changes to type and quantities of stock.				Inform Fire Advisor
5.9	A significant increase in the number of people present.				Inform Fire Advisor
5.10	The presence of people with some different of specific form of disability.				PEEP Required

Risk assessor		Title	Fire Advisor
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Appendix 3 - Fire Wardens Checklist

Please complete and sign the form on a 4 weekly basis an ensure the Competent Person (Fire) is aware of any faults and keep a copy within the Fire Log Book/Box

Premises	Department:	
Date:	Checked by:	
	YES	NO
MEANS OF ESCAPE		
Are the Fire Doors unobstructed		
Are corridors unobstructed		
Are Fire Resisting Doors (marked "Fire Door keep closed") kept closed, not wedged open		
Do all Fire Doors fully close (6 second rule applies)		
Are they in good conditions		
FIRE FIGHTING EQUIPMENT (appropriate to your department)		
Are the Fire Extinguishers in position and wall mounted		
Are they in apparent good condition		
Check test label, has extinguisher been tested in last 12 months		
Are Fire Blankets in good condition		
SIGNS AND NOTICES		
Are Fire Procedure notices in place		
Are Fire Procedure notices in good condition and legible		
Are Fire Door – Keep Shut signs in place and in good condition		
Are Emergency Opening Instructions signs (on Fire Exit Doors) in place and in good condition		
Are Fire Exit Signs in place and in good condition		
FIRE ALARM		
Are you aware of regular tests being carried out		

Is the alarm audible throughout the premises		
Have all faults been inputted on Estates Helpdesk System		
Signature:		

Appendix 4 - Fire evacuation assessment

Ward / department		Date	
Location		Time	

Type of evacuation:

- Full evacuation of premises
 Part evacuation of premises
 Walk through
 Table top exercise

Please file this report with the Fire Log Book

Action taken	Yes	No
Was the fire procedure followed correctly?	<input type="checkbox"/>	<input type="checkbox"/>
Comments		

Staff response	Yes	No
Did the staff respond appropriately?	<input type="checkbox"/>	<input type="checkbox"/>
Were the appropriate fire extinguishers selected correctly (if applicable)?	<input type="checkbox"/>	<input type="checkbox"/>
Comments		

Fire Exits	Yes	No
Did staff evacuate via exits logically e.g. the nearest?	<input type="checkbox"/>	<input type="checkbox"/>
Did staff close doors and windows during the evacuation?	<input type="checkbox"/>	<input type="checkbox"/>
Were staff familiar with fire exit locations?	<input type="checkbox"/>	<input type="checkbox"/>
Comments		

Assembly points	Yes	No
Did staff proceed to their designated assembly points?	<input type="checkbox"/>	<input type="checkbox"/>
Was there a nominal role carried out?	<input type="checkbox"/>	<input type="checkbox"/>
Comments		

Overall Observations	Yes	No
Was the overall objective achieved?	<input type="checkbox"/>	<input type="checkbox"/>
Did all staff respond to the practice fire evacuation appropriately?	<input type="checkbox"/>	<input type="checkbox"/>
Were staff generally familiar with the procedures required?	<input type="checkbox"/>	<input type="checkbox"/>
Comments		

General Comments
<ul style="list-style-type: none"> - Please comment on any unsatisfactory issues which may require addressing with the relevant personnel. - Please also comment on any positive issues that you might have observed which have benefited staff from a training prospective
Comments

Satisfactory	Unsatisfactory
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This assessment was carried out by		Contact Number	
	(print name)		
Job title			
	(print name)		
Assessors Signature			

Appendix 5 – Personal Emergency Evacuation Plans (PEEPs)

Fire Safety Policy – Personal Emergency Evacuation Plans (PEEPs)

All staff, patients and visitors who have difficulties evacuating Trust buildings independently in the case of an emergency should have a personal emergency evacuation plan, known as a PEEP.

What is a PEEP?

The main purpose is to ensure the safety, in a building evacuation situation, of the named person that the PEEP concerns. The PEEP will also record and communicate the suitable method of evacuation, identify those people who will assist, and any training or practice needs. The Competent Person (Fire) for each building should produce a PEEP when they are aware that staff, patients or visitors may experience difficulties in responding to a building evacuation alarm.

Who is involved in creating a PEEP?

The PEEP is a personal plan and so must be drawn up with the active participation of the person concerned. The Competent Person (Fire) is responsible for reviewing the risk assessments for the activities of the individual. They will need to do this in consultation with the Trust Fire Safety Advisors.

Visitors to Trust premises that may require assistance during an evacuation will require a 'dynamic' PEEP which will require the local manager making reasonable adjustments, e.g. meeting on ground floor locations, providing assistance etc.

The Competent Persons (Fire) will receive specific guidance on the production of PEEP as part of their training.

Using a PEEP

All staff who could be expected to aid the evacuation of a disabled person should receive a copy of the relevant PEEP at the time it is prepared. A PEEP should be activated immediately when the alarm is raised.

Creating a PEEP

Guidance to the process for creating a personal emergency evacuation plan (PEEP) can be found of the [Fire Safety intranet page](#).

Personal Emergency Evacuation Plan for Fire Evacuation for Staff and Visitors

For Visitors Information:

We operate a system of assisted escape for any visitors who require assistance in the event of an emergency. Please advise the Nurse in Charge if you have any specific requirements and staff will be identified to assist you with this.

For Staff Information

We operate a system of assisted escape for any staff who require assistance in the event of an emergency. Please discuss any individual requirements with your line manager who will complete a Personal Emergency Evacuation Plan with you.

INDIVIDUAL STAFF PERSONAL EMERGENCY EVACUATION PLAN (PEEP)

We operate an evacuation system that included Personal Emergency Evacuation Plans (PEEPs) for any staff who have disabilities or who may need assistance in the event of an emergency evacuation situation.

Please discuss your requirements with your line manager who will record them on your individual plan below.

Requirement:

Escape Procedure:

Please indicate whether assistance from Fire Wardens or other staff is required.

Any Specific Equipment Requirements:
