



Title	Annual Fire Safety Report 2014 - 2015
Meeting	Board of Directors
Date	29 September 2015
Executive Summary	
<p>During 2014/15 the Trust Fire Officers have continued to undertake Fire Risk Assessments (FRA) at frequencies dictated by the risk. High risk departments are assessed on an annual basis and medium risk premises every two years. The Trust annual programme of assessments are all up to date and assurance can be given to the Trust Board of Directors that the vast majority of areas have a very high standard of fire safety that complies with the requirements of the Regulatory Reform (Fire Safety) Order 2005 (RRO) and standards required by NHS Firecode.</p> <p>Any deficiencies in fire safety will be identified through the Fire Risk Assessment process and those deficiencies will continue to be added to an action plan. The deficiencies are prioritised and in the main involve either medium or low risk items. The Trust Fire Officers and the Estates Management work through the action plan making sure the risks are removed in accordance with risk priority.</p> <p>Tyne & Wear Fire & Rescue Service (TWFRS) continually audit Trust premises on a quarterly basis. Deficiencies found during their audits have been of a moderate or low risk nature and all findings have either been addressed by the department manager or placed on an action plan and prioritised for completion by the Estates Department. The Board can be reassured that no improvement notices or prohibition notices were discussed or issued as a result of audits carried out by TWFRS.</p> <p>This report also provides the Board of Directors with fire training statistics, policy updates, fire incident details and information on fire drills. In 2014/2015 the Trust achieved 71% compliance in staff attending mandatory fire training. Although this was an increase of 4% on the previous year, it still falls well short of a realistic target of around 85% for a subject that is a statutory requirement for all staff.</p>	
Recommendation	
<p>The Board is asked:</p> <p>To discuss the content of this report and the progress made in the Management of Trust Fire Safety in 2014/2015.</p>	

Report Author	Mr G Mattinson, Fire Safety & Security Manager
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Executive Director/ Sponsor	Mr Ian Frame, Executive Director of Personnel & Development		
Purpose of paper	Information		Discussion ✓
	Decision		Assurance ✓
	Specific action		
Implications	Staffing		✓
	Finance		✓
	Legal		✓
	Public engagement		
	Partnership		
	Communication		✓
	Equality & Diversity		
	Clinical		✓
	Risk assessment and mitigation (include risk register reference if appropriate)		
Link to STFT Business Plan			
Link to CQC outcome	10		
Link to Board Assurance Framework			
Link to Strategic Risk Register			



ANNUAL FIRE SAFETY REPORT 2014/15

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Report to the Executive Board

ANNUAL FIRE SAFETY REPORT 2014/15

1. Introduction

This report covers the period 01 April 2014 – 31 March 2015 and aims to update the Board of Directors on the work carried out in the management of fire safety over the last 12 months. The work undertaken helps the Trust to maintain the legislative requirements of the Regulatory Reform (Fire Safety) Order 2005 (RRO). The report covers both Acute and Community Services and includes data to identify strengths and weaknesses in fire safety processes carried out. The Fire Risk Assessment (FRA) programme covers all 3 hospital sites plus St Benedict's Hospice, Clarendon and Alexander Lodge. The Trust Fire & Security Manager combines his work in fire safety with the management of Security and a new Fire Officer was employed in December 2014 to assist in the delivery of fire safety across both the acute and locality based settings. The Fire Safety Team provide all aspects of fire safety in premises owned by the Trust and assists NHS Property Services in undertaking joint fire risk assessment inspections and evacuation drills in locality building occupied in part or full by STFT staff.

This report has been compiled by the Trust Fire Safety and Security Manager, who is responsible for advising the Trust on all matters pertaining to Fire Safety and Security.

2. Fire Safety Policies

The current Fire Safety Policy and Fire Safety Protocols and Management Procedures were recently ratified by the Board of Directors in February 2015. The latter was introduced to replace the Trust Fire Strategy to reflect guidance in the revised NHS Firecode 05-01 (Managing Healthcare Fire Safety, second edition). Both documents provide the framework for the Trust to comply with the Regulatory Reform (Fire Safety) Order 2005 (RRO), Firecode and will assist the Trust in providing assurance and compliance with the standards set by the Care Quality Commission (CQC), outcome 10; Safety & Suitability of premises.

All fire related policies and procedures are located on the fire safety Intranet page.

3. Health & Safety Committee

Fire safety continues to be an agenda item on the Trust Health and Safety Committee. The Trust Fire Safety & Security Manager reports to the Committee on all aspects of fire safety including information on subjects such as: fire incidents, false alarms, progress on staff training and significant findings identified

during the Tyne & Wear Fire & Rescue Service (TWFRS) quarterly audits and the Trust FRA programme. The Committee meet on a quarterly basis and minutes are produced to formally record all discussions.

At this meeting a separate paper is provided to the Committee that details the quarterly work undertaken in fire safety in both the acute and locality based premises.

4. Fire Audit

Throughout the reporting period, TWFRS have conducted a series of audits on Trust owned properties and reported their findings where necessary to the Chief Executive for action. The inspecting officers randomly audit 75% of Trust FRA's throughout the year to ensure the contents are considered suitable and sufficient to comply with the requirements of the RRO.

Deficiencies found during their audits have been classed as moderate, low or very low risk and all findings have either been addressed by the department manager or placed on an action plan and prioritised for completion by the Estates Department.

It should be noted that no improvement or prohibition notices have been issued during the reporting period.

5. Fire Risk Assessment (FRA)

FRAs are in place for all Trust premises and departments and these are all up to date. Frequency of inspections are either annually or every 2 years depending on the risk and occupancy factor. All patient care areas are reviewed annually. Deficiencies and recommendations identified during the process are passed to either Estates Department or the Department Manager for action as appropriate. To comply with the RRO the Trust must continue to regularly assess their premises. The aim of the FRA is to continually assess the risk of fire in the workplace and to introduce measures that reduce the risk to a level that is considered as low as reasonably practicable. In healthcare settings such as hospitals the risk continually changes and it's essential that those changes to the working area, whether they are structural or work process related, are continually assessed to ensure the environment is kept safe and secure from the possible outbreak of fire. All refurbishments should comply with the relevant fire safety standards and where necessary meet the requirement of Building Regulations & NHS Firecode.

The deficiencies identified and recommendations made by the Trust Fire Safety Officers throughout 2014/15 were continually added to a Trust wide action plan. Similar to 2013/2014 some constraints within the Estates resources have affected the work in fire safety for 2014/2015 and as a consequence, some low and moderate risk work has been rolled-over for completion in 2015/2016. A fire compliance group has been established between the Estates & Health Safety & Wellbeing Department, chaired by the Fire Safety & Security Manager to ensure that progress of the action plan is monitored and works are carried out in a timely manner on a risk based approach.

TWFRS review progress made on the FRA Action Plan and provide advice in terms of the risk priority where necessary.

6. Maintenance of Fire Safety Systems

The STFT Estates team continue to carry out routine maintenance on all fire related equipment in Trust owned premises and inspection records are held within the Estates Department. NHS Property Services has similar responsibilities for their premises. This regular maintenance work is a legislative requirement under the RRO.

NHS Estates & Facilities Alert (DH/2014/003) received in October 2014 placed responsibility on the Trust to ensure robust procedures were in place for the management of fire stopping and fire dampers. This was actioned by the Estates Department. The Estates Department now has a system in place to manage both fire stopping and fire dampers in accordance with the instructions contained in the Alert.

7. Fire Training

Total staff in the Trust including bank staff at end of March 2015 was 4703. Staff attending fire training over the period 1st April 2014 – 31 March 2015 was 3348, which equates to 71%. **This figure is a 4% increase on last year.**

Fire training was delivered either face to face by a competent fire safety trainer or through an on-line e-learning package.

The figures for fire training suggest that 29% of Trust staff failed to attend a form of mandatory fire training in the year and that **must be** addressed by senior management in 2015/2016. It is recognised that Trusts will never achieve 100% compliance because of long-term sickness, maternity leave etc. but a realistic target of 80-85% should be achievable. All managers must be encouraged to monitor staff attendance and report progress throughout the year so that shortfalls can be identified and rectified at an early opportunity.

Table 1 provides an area break-down of staff attending fire training 1st April 2014 – 31st March 2015. Shortfalls in directorates can be identified from the data provided.

Fire Training

Table 1

Area	Possible	Actual	Remaining	% Completed
155 Acute and Urgent Care	278	216	62	78%
155 Acute Medicine and Intermediate Care	764	567	197	74%
155 Corporate Service, Nursing AHP and Patient Safety Service	774	478	296	62%
155 Elderly, End of Life and	501	346	155	69%

Palliative Care				
155 Learning Disabilities, Mental Health and Substance Misuse	219	185	34	84%
155 Estates & Facilities Serv	482	326	156	68%
155 Planned Care	1007	748	259	74%
155 Women, Children and Families	678	482	196	71%
Grand Total	4703	3348	1355	71%

8. Fire Alarm Incidents

In total, 54 fire alarms occurred within Trust premises, of which 52 were classed as unwanted fire signals (false alarms). The 2 fires occurring, one at Palmer Community Hospital (PCH) was caused by a discarded cigarette in a waste bin and the second was caused by an overheating electrical socket in STDH Pathology. In total 36 of the incidents had a TWFRS attendance with the remaining 18 filtered by the Trust.

A full break down of causes and locations can be found in Appendix A.

9. Fire Drills

In 2014/2015 fire evacuation drills or an alternative form of practical training was undertaken throughout Trust buildings/departments and a breakdown of those departments receiving practical evacuation training is detailed in Appendix B.

To ensure patient care areas are not disrupted, the Fire Safety Officers delivered a number of in-house department slow time fire training exercises. This supplements the generic annual update fire training and is essential to ensure staff working within in-patient care areas are fully informed of the strategy for evacuating their departments. This type of controlled training ensures patient safety is not compromised and allows the staff to choose an appropriate time to carry out this training.

The only outstanding practical training session to undertake is for staff working in the Jarrow Walk-In Centre and this will be delivered in September 2015.

10. Community Fire Safety

In 2014/15 assurance has been provided by NHS Property Services or other 3rd Party that the relevant buildings leased by the Trust for the purpose of our service provision meets with fire safety regulations. The Trust has a duty of care to staff working in the community to ensure the premises they provide are safe in respects to fire. An update was provided to the H&S Committee on a quarterly basis to provide that assurance.

On reflection and through discussion with NHS Property Services, for 2015/2016 it has been decided to undertake joint fire risk assessment inspections and fire evacuation drills of the leased properties that are occupied by our staff. Furthermore we are offering on-site fire training to teams in the community to discuss relevant fire safety issues applicable to the building they provide a service from. A programme of inspections will be devised to ensure all buildings are visited at least once in a two year period. The level of risk to premises of this nature is far less than hospital premises and therefore the frequency of inspection will be less. This additional work should help provide greater assurance to both staff and the Trust Board that fire safety arrangements are compliant and in place for community premises.

11. Conclusion

The Trust FRA programme has been kept up to date throughout the reporting period and deficiencies identified during the process were added to an action plan. The majority of the deficiencies were rectified with some items rolling over to the 2015/2016 action plan. Fire safety deficiencies will continue to be prioritised by risk through to completion.

All related fire policies were reviewed and updated to meet NHS Firecode guidance and requirements of the Care Quality Commission.

Attendance at fire training continues to be a significant concern with regards to numbers attending and more focused monitoring is required by Senior Management to improve compliance in the future.

TWFRS attended 36 incidents across the Trust providing two fire appliance and an average of eight fire-fighters at each incident. This figure is significantly lower than the previous year's total of 49 so that is very positive. The Trust working in partnership with TWFRS will continue to discuss ways of reducing the number of Unwanted Fire Signals (false alarms) on our sites.

Overall the report reflects that a high standard of fire safety has continued to be maintained throughout all Trust premises over the last 12 months. The Board of Directors can be further reassured that following fire safety audits by TWFRS, no improvement or prohibition notices have been issued.

Finally, the Trust Board can be assured that in 2015/2016 more robust systems will be introduced to ensure all community premises, leased in part or full for the purpose of Trust business, are inspected on a frequency dictated by the risk. This will provide greater assurance to the Trust Board that premises occupied by our staff out in the community are compliant and meet regulations contained in the Regulatory Reform (Fire Safety) Order 2005.

Glenn Mattinson
Fire, Safety and Security Manager
September 2015

Appendix A

Unwanted Fire Signals (UwFS)/Fires - 1 st April 2014 – 31 st March 2015			
Month	Date	Location	Cause
Apr	28	Outpatients	Steam from hot tap left running
May	18	Ingham Wing Service Riser	Steam from faulty equipment
	20	Physio Department	Site not taken off watch during testing
	22	A&E Adults	Steam from hot tap left running
	28	Pathology Corridor	System Fault
Jun	02	Nurses Home 1 st Floor	System Fault
Fire	06	Waste bin outside PCH	Discarded Cigarette
	13	Nurses Home 1 st Floor	Faulty Detector Head
July	02	Ward 2	Deliberate Activation of MCP
	04	Nurses Home 2 nd Floor	System Fault
	09	Estates Services Room	Steam from faulty equipment
	10	Bede 1 – Dirty Utility	System Fault
	12	Bede 1 - Corridor	Burnt Toast
	15	Unknown	Monitoring Station Process Fault
	20	Engineers Workshop	Very high room temp activated the heat detector
	21	Married Accom - Flat 6	System Fault
	21	Nurses Home 1 st Floor	System Fault
Aug	01	Nurses Home 3 rd Floor	Evidence of birds trapped in the room
	11	Estates Dept Stairwell PCH	Contractor drilled through water pipe
	12	Occ Therapy room G320	System Fault
	12	Occ Therapy room G320	System Fault
	15	Nurses Home 2 nd Floor	System Fault
	16	Ward 17 first floor office	System Fault
	21	Basement Boiler Room	Steam release activated the heat detector
Sep	5	Bede 1 room G123	Aerosol
	6	Bede 1 games room	System Fault
	8	Bede 1 games room	Patient Smoking
	9	Bede 1 room G140	System Fault
	9	Bede 1 room G140	Patient Smoking
	10	Nurses Home 2 nd Floor	System Fault
	13	Dr's Married Accom	System Fault
Fire	30	Pathology	Overheating of double socket
Oct	1	Pathology	Fume Cupboard Fault
	5	Estates Generator House	Equipment Fault
	16	Harton Wing - Parkdale	System Fault
Nov	6	Engineers Workshop	Steam release activated the heat detector
	7	EAU	MCP Accidentally Broken
	12	Delivery Suite	System Fault
	14	Leas East Staircase	System Fault
	14	Leas West Staircase	System Fault
	25	Estates Workshops	Monitoring Station Process Fault
	26	Nurses Home Office (G015)	Rise in temperature caused by electrical heater
Dec	8	Entrance Lobby Ward 19/20	Dust from Contractor
	11	Nurses Home Office (G017)	System Fault
	15	Nurses Home Office (G017)	System Fault
Jan	14	Nurses Home 1 st Floor	System Fault
	23	Basement Plant Room	Steam release activated the heat detector
Feb		Nil Return	
Mar	1	Estates Service Area	Faulty Detector
	3	Dr Married Accommodation	Testing of system – process fault
	4	Bede Wing Roof Void	Dust
	10	Bede Wing Roof Void	Dust
	10	Bede Wing Roof Void	Dust

	21	Nurses Home	System Fault
	28	Nurses Home	Cooking
		UwFS/Fire totals	54
		STFT - totals	42
		NMHT - totals	12

Month	Year	UwFS/Fires
April	2014	1
May	2014	4
June	2014	3
July	2014	9
August	2014	7
September	2014	8
October	2014	3
November	2014	7
December	2014	3
January	2015	2
February	2015	0
March	2015	7
STFT Total		54

Cause	2013-14 TWFRS Total	2014-15 TWFRS Total	2014-15 TWFRS Attended	2014-15 TWFRS DNA
Aerosol Sprays	8	1	0	1
Cooking/Toast	2	2	0	2
Contractors/Estates Engineers	7	3	2	1
Steam	8	5	5	0
System/detector head fault	8	24	14	10
Accidental/Deliberate actuation of MCP	9	2	2	0
Fire	3	2	2	0
Smoking	1	2	0	2
Food trolley parked under smoke detector	1	0	0	0
Water affecting detector head	2	0	0	0
Good Intent	2	0	0	0
Sprinkler system fault	3	0	0	0
Equipment overheating	0	5	4	1
Monitoring Station Procedure Failure	0	1	1	0
Dust	0	4	3	0
Environmental Factor	0	3	3	1
	54	54	36	18

Site	2014-15		
	Fire	UwFS	Total
Bede Wing	0	10	10
The Leas	0	2	2
Palmers	1	1	2
STDH	1	39	40
Grand Total			54

PRACTICAL FIRE TRAINING AND EVACUATION DRILLS (2014-15)			
Area	Status	Area	Status
Ward 5		Ward 22	
Ward 6		SCBU	
Ward 7 /CCU		Nurses Home	
Ward 8		L & D Dept	
Ward 9		Harton Wing	
Ward 10		Restaurant	
Ward 11 (OHDU)		X-Ray Department	
Ward 12		MRI Suite	
Ward 1		HSDU	
Ward 2		St Clare's Hospice	
Ward 3		Primrose Admin Block	
Ward 4		Ward 18	Closed
Theatre		Ward 19	
Clarendon		Ward 20	
EAU		Pharmacy	
Physio / OT		Moorlands Day Unit	
A&E Adults & Resus		East Block	
A&E Children		Ward 17	
Ambulatory Care		Laundry Department	
Outpatients		Edythe Brown House	
Endoscopy/Colposcopy		Joiners Shop	
Cardiology		Garden Compound	
St Benedict's Hospice		Estates Workshop	
Med Physics		Estate Offices	
Pathology		PCH - Ward 3	Closed
Med Physics		PCH - Dental	
Pathology		PCH - Physiotherapy	
ITU		PCH - Outpatients	
Cancer Services		PCH - Dowsett & Overs	
Delivery Suite		PCH - Zaidi & Salaudeen	
Ante – Natal		Jarrow Walk In Centre	
Mortuary		Primrose Hill Hospital	Closed

Table Key - Status	
Practical Fire Training - Current	
Practical Fire Training - Outstanding	
Practical Fire Evacuation Drill - Current	
Practical Fire Evacuation Drill - Outstanding	
Departments Closed and Unoccupied	