

Fire Safety Policy

Approval Date	
Version	
Review Period	
Review date	

1 Introduction

Fire is a potential hazard in all Trust premises. The consequences of fire in any premises can be especially serious because of difficulties and dangers associated with the emergency evacuation of pupils, many of who may be dependent or have mobility impairment.

The aim of the Trust is to ensure, as far as possible, that outbreaks of fire do not occur. If an outbreak cannot be prevented it must be rapidly detected, effectively contained and quickly extinguished; with no risk to staff, pupils or visitors due to robust fire safety protection and evacuation procedures.

2 Scope

This document applies to all directly and indirectly employed staff within The Sovereign Trust and other persons working within the organisation.

This policy encompasses the management of fire safety in all Trust occupied premises.

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

3 Objectives

To ensure that:

- All appropriate fire safety measures are provided to maintain a safe environment for pupils, staff and visitors.
- All Sovereign Trust staff have access to fire training, and are able to accept responsibility for fire safety in their area of work.
- All Sovereign Trust staff and allied staff in a Sovereign Trust owned or occupied building, are aware of the action to take in the event of a fire, suspected fire or evacuation of an area or building.
- All new developments and major refurbishment works achieve full compliance with legislation and codes of practice.
- As required a programme of works is implemented to achieve standards of fire safety in accordance with current legislation and codes of practice.
- The Trust is compliant with all relevant Fire Safety Legislation and appropriate guidance that are regarded as approved codes of practice.

4 Policy Statement

- The Sovereign Trust recognizes and accepts its obligations relating to the management of fire prevention and fire safety, so far as is reasonably practicable. As such it is the Trust's intention to:
 - Minimise the risk of Fire throughout the premises and estate owned or occupied by the Trust.
 - To eliminate or to minimise the impact from Fire on life safety, health service continuity, the environment and property.
- This policy will be implemented across the Trust and is intended to safeguard all who have access to the Trust premises (either owned or occupied), including employees, pupils, visitors and contractors.
- This policy should be read in conjunction with related individual Premise Fire Procedures and the Sovereign Trust Health and Safety Policy.

5 Roles and Responsibilities

Note: Responsible Person has the duty to implement the articles and regulations of The Regulatory Reform (Fire Safety) Order 2005. The main regulatory authority is the Fire and Rescue Service who have the power to inspect premise and records, investigate, serve notice or begin lawful proceedings to responsible persons. The

Fire Authority will determine who in their opinion the responsible person/s is, when there is a need for them to do so.

The Trust Board of Directors (Responsible Persons) The Trust Board has overall accountability for the activities of the Trust. The Board should ensure they have the appropriate assurance that the requirements of current fire safety legislation are met.

The Chief Executive (Responsible Person) is responsible for ensuring that the Trust complies with current fire safety legislation and the implementation of local fire safety procedures in all the premises that it owns or occupies.

The Chief Executive may nominate an appropriate staff member with responsibility for Fire Safety issues.

It will be the responsibility of the Chief Executive in conjunction with any appointed person to ensure:

- Sovereign Trust has an effective Fire Safety Management System, an agreed programme of investments in fire safety improvements, and that they are accounted for in the Trust's business plans.
- An audit and reporting system of Fire Precautions is undertaken to advise the Trust's management board (and when required The Department of Education) on the current state of fire safety within the Trust premises.
- To ensure that all agreements for the provision of care and other services by third parties include sufficient contractual arrangements to ensure compliance with the trust's fire safety policy.

The Chief Executive and any person appointed for Fire Safety issues duties and responsibilities also include:

- Championing fire safety issues at board level, which for example, would include proposing agreed programmes of investment in fire precautions are accounted for in the Trust annual business plan;
- Ensuring that the Chief Executive and the Trust Board are given the appropriate assurances that requirements of fire safety legislation and any audit objectives are being met;
- That Fire Safety Policies are uniformly and correctly applied across the Trust;
- Ensuring appropriate levels of management are always available to make decisions and give instructions regardless of the time of day;
- Provide a fit for purpose reporting system for fire incidents;
- Ensure the Trust has in place a clearly defined fire safety policy and relevant supporting protocols and procedures, and this is supported by sufficient resources and staff available to implement the Trust Fire Safety Policy and procedures;
- The development, implementation and review of the Trust Academies individual fire emergency action plan;

Below is a guide of other fire responsibilities:

- Obtain expert advice on fire legislation;
- An awareness of all fire safety features in their buildings;
- Obtain expert technical advice;
- Fire safety risks particular to the organization;
- Requirements for mobility impaired pupils, staff and visitors with regard fire procedures;
- Compliance with legislation, taking into account advice from the Fire Safety Advisor or instruction from the Fire Authority;
- Co-operation between employers where two or more share the premises;
- Monitoring and the mitigation of unwanted fire incidents;
- Liaison with enforcing authorities;
- Liaison with other managers and provide a link to Trust committees;
- Monitoring the inspection and maintenance of fire safety systems and equipment to ensure it is compliant;
- Review of identified risks in fire risk assessments and if necessary place on the Trust risk register;
- Ensure the day to day implementation of the fire safety policy;
- Provide support for the Fire Safety advisor;

5.1 The Estates Manager

Accountable to the Chief Executive who has responsibility for matters of fire safety. They provide fire safety advice and will be responsible for:

- Undertaking, recording and reporting fire risk assessments.
- Providing expert advice on fire legislation.
- Providing expert technical advice on the application and interpretation of fire safety guidance
- Review of the content of the Trust's fire safety policy.
- Assist Trust Training with the development of a suitable and sufficient training programme for staff, and specialist delivery as necessary.
- The assessment of fire risks within premises owned, occupied or under the control of the Trust.
- The preparation of fire prevention and emergency action plans.
- The investigation of all fire related incidents and fire alarm actuations.
- Liaison with the enforcing authorities on technical issues.
- Liaison with managers and staff on fire safety issues.

Where specialist solutions are required to resolve fire safety issues the Fire Safety Adviser would not necessarily be expected to have the level of skill required but would know the limits of their capabilities and, when necessary, seek specialist advice

5.2 The Person-in-Charge (Responsible Person)

The local Person-in-charge **must** be of a position to be able to take charge in a fire situation. They should appoint a Deputy(s) who can cover for them in their absence. Advice and guidance can be sought from the Estates Manager.

The Person in charge at a premise or part of a premise has the following responsibilities:

- Initiating and monitoring actions to ensure the day to day maintenance of the fire precautions provided.
- To provide induction fire training to all new staff, this includes volunteers, part time and agency staff. This familiarisation training should include;
 - Local fire procedures and evacuation plan,
 - Means of escape,
 - Location of fire alarm manual call points,
 - Fire fighting equipment,
 - Any premise/site fire risks identified.
- To organise and record a fire evacuation practice at least once a year.
- Ensure records of testing and maintenance of fire alarms, emergency lighting and fire fighting equipment are being maintained.
- Ensuring staff are aware of the procedures and actions required for reporting fire safety defects.
- Ensuring written records are updated in the fire risk assessment action plan and the fire log book:-
- All fire safety defects
- Action taken to rectify those defects
- The signing off of defects when cleared
- Regularly review the premise Fire Risk Assessment
- Contact and inform the Trusts Estates Manager on the following occasions:
 - Any threat to means of escape or fire detection system
- Ensure sufficient Fire Wardens are appointed and they receive regular refresher training in their duties and responsibilities.
- All staff in the premise participates in fire safety training at least once per year.
- That on handover of responsibility to a deputy or acting person-in-charge, that person is aware of the legal duty to provide supervision of premise fire procedures in the event of a fire or false alarm situation.
- Ensuring all fire safety related records are available for inspection by the Fire Service at any reasonable

time.

- Ensuring any Fire or Automatic Fire Alarm is reported via the Sovereign Trust incident reporting system.
- Report to estates and keep progress records of any building or equipment defect/risk that has an effect on fire safety.
- Co-ordinate and direct staff in the event of a fire in accordance with the premise emergency procedures and evacuation plan.
- Ensure local emergency action plans are developed and brought to the attention of staff.
- Ensure that sufficient trained staffs are available at all times to implement the local emergency plan.

5.3 Responsible Person in Multiple Occupancy (Building shared)

In a building with more than one occupier Fire Safety Legislation requires that there is in place consultation and co-operation between all employers landlord over Fire Safety matters. A Responsible Person must be appointed for the building by the Host Organisation (e.g. this could be a Trust who owns, holds the lease, or is the main occupier). Each occupier should appoint a Responsible Person for the areas under their control (this would normally be the Person-in-charge of a department or manager). It is desired that Responsible Persons are based within the building they are responsible for.

The Responsible Person has a legal obligation to ensure there is a Fire Risk Assessment that covers their building or area; this document may be provided by the Host Trust or premise management/owner for the whole building, consultation with the building management will determine if this is provided. If not then each occupier must provide a Fire Risk Assessment for their area, and building management or the Host Trust must always provide the FRA for all common areas. Identified risks and remedy information must be shared with all occupiers and management of the premise.

With regards to the NHS, often the Host Trust who manage, own or lease a building will provide a whole building Fire Risk Assessment.

The Host Trust/landlord/leaseholder has responsibility for the building. However, fire procedures and policies of all organisations within the premise must be compatible with those of the Host or they should adhere to those of the Host Trust/leaseholder/landlord.

The Host Trust/leaseholder/landlord is responsible for the testing and keeping records of:

The fire alarm system.

Emergency lighting.

Firefighting equipment.

Providing annual evacuation fire training for staffs working within the building.

If occupiers fail to comply with the above requirements of 5.1 to 5.7 they may be committing an offence under Fire Safety Legislation and, if found guilty in a court of law, may receive a fine, a term of imprisonment or both.

5.8 Fire Warden

5.8.1 Fire Wardens should be appointed in all departments or buildings to give appropriate local leadership and direction in Fire Safety matters. They are not in an enforcing role but report to their line manager, and if necessary to the Trust Fire safety advisor. Fire wardens should refresh their training every 3 years.

5.8.2 The Fire Warden should:-

- Act as a focal point on fire safety issues for local staff
- Organize and assist in the fire safety regime within local areas
- Raise issues regarding local area fire safety with local management

- Assist with coordination of the response to an incident within the immediate vicinity
- Be responsible for the roll call during an incident
- Be trained to tackle fire with first aid fire fighting equipment where appropriate
- Support the local managers on regular fire safety checks
- Participate in regular fire warden training and apply the information and duties to the workplace (see 6).

5.9 **Hospital department person in charge (Post holders are normally drawn from the senior 'on duty' nursing staff)** while carrying out this role the person(s) concerned will be recognized as the person in charge. The responsibility of this position is to co-ordinate the hospital ward(s) response to an emergency and/or fire alarm situation, this person must always be in a position to **step down from their normal duties for a fire emergency**, as they are the key decision maker based on their dynamic risk assessment of the situation. They must always consider the safety of patients, visitors and staff/contractors, so can request emergency service attendance, order staged or full evacuation and control the movement of healthcare staff to achieve patient safety.

5.10 **Community, Health Visiting and Outreach Managers** should ensure that their staffs carry out a site safety risk assessment at any temporary workplace (e.g. patient home) that will take into account fire safety risks. In particular their risk assessment should pay attention to the means of escape, use and storage of oxygen, combustion risks, excessive flammable items, the capability and co- operation of the client.

Managers should ensure their staff receive induction training to consider what risks are within client homes, this training should include; the safety instructions that staff must give to clients who are using oxygen therapy, how staff can report a risk or near miss or safety concerns (Sovereign Trust incident reporting system), also that staff must always visually assess (dynamic risk assessment) the availability of exit routes in any premise they visit during the course of their duties. The Sovereign Trust Fire Safety Advisor is available to give advice on any related concerns.

5.11 **Estates staff** – Estates maintenance staff or provider should respond to requests following a Fire Risk Assessment. Estates projects staff must take particular care to ensure that any aspect of new, refurbishment or maintenance works where it is likely to affect the fire integrity of a premise that the Fire Safety Advisor is informed and becomes actively involved. Specific and sufficiently detailed instruction should be agreed to enable the works to be undertaken.

5.12 **General Duties and Responsibilities of all staff** - All Trust employees have a duty to ensure that they comply with the fire safety arrangements and procedures at their workplace and that they do not commit acts which could lead to an outbreak of fire. All employees have a duty under the Health and

Safety at Work Act, to take reasonable care of their own health and safety at work, and of other persons who may be affected by their acts or omissions.

5.13 All Trust employees are required to complete fire safety training and to familiarise themselves with the content of the premises' fire procedures plan.

5.14 Staff shall take particular care to ensure that the Fire Safety Advisor is informed and becomes actively involved with any aspect of their or others work or actions that is likely to affect the fire integrity of premises.

6. Fire Training

- 6.1 Training is an essential element of fire safety precautions.
- 6.2 All Trust **Managers must provide staff with induction fire training** (see paragraph 5.6 re induction fire training) **on or before their first day** in a new workplace (this includes part-time, volunteer and agency staff).
- 6.3 Sovereign Trust Learning and Development department provide a mandatory annual e-learning fire module and records system. Further, on request from any Trust Service/Department Senior Manager, the Trust Learning and Development will in conjunction with that Senior Manager arrange a face to face staff training day to include fire safety.
- 6.4 **All Service/Department managers** must monitor and encourage the majority of their team to attend a formal **face to face fire training as follows –**
- **Annual face to face for in-patient hospital ward based staff, especially nursing and health care staff** - this can be a mix of formal and practical instruction with a fire safety advisor or fire safety trainer.
 - **All staff, clinicians and management –** on an annual basis must successfully complete the Trust Learning and Development Fire Safety module, and in conjunction with this the majority of staff takes part in an annual premise fire evacuation drill. The majority of department/service staff should in addition receive face to face fire training every 3 years this can be booked via Learning and Development as part of a Service/Department training day. An alternative method is for a department/service senior manager to request Learning and Development or the Fire Safety Advisor to provide fire training as part of a team or premise training session.
 - **Fire Warden/Marshall –** Attend **initial course and refreshed every 3 years** (see paragraph 5.8) or sooner if the candidate or Trust require. Both the initial and refresher course are face to face with the Fire Safety Advisor or Fire Trainer.
- 6.5 Sovereign Trust Learning and Development department recognises the importance of appropriate training for staff. The key elements of fire training will be in accordance the Health Technical Memorandum (HTM) 05-01.
- 6.7 Additional, specialised training can be made available via application to the Solent NHS Trust Learning and Development department, especially for those working in specific responsibility and high-risk areas.
- 6.8 All staff have a duty to be aware of safety precautions and action to take in the event of a fire in their area of employment, and when visiting other premises in the course of their duties.

6.9 Fire training - Premise Evacuation drills

- 6.9.1 Fire evacuation practice drills must be undertaken every year; this is a legal requirement under both the Regulatory Reform Order 2005 and the Health and Safety at Work Act. The law states that responsibility for completion and records of premise evacuation practice is with the person-in-charge of the occupants or building manager. Evacuation drill co-operation should be done in conjunction with any landlord or main lease holder arrangement. The Fire Safety Advisor will inspect fire records and audit Trust compliance during fire risk assessments and other premise visits.

6.9.2 An evacuation practice drill should be done in consultation with the Fire Safety Advisor who can provide advise and agree the method plan used. Whenever available the Fire Safety Advisor will observe the fire drill, provide advice and evacuation drill debrief.

6.9.3 All evacuation drills must be recorded in the premise fire logbook by the manager, fire records are required to be legally compliant.

6.9.4 All staff involved with the fire evacuation practice shall be mindful of safe handling techniques and shall avoid manual handling tasks that they have not been trained for during the exercise, staff have a responsibility to carry out the evacuation drill in a safe manner so as not to cause injury to other occupants, clients and visitors e.g. do not carrying hot drinks, or to use excessive speed on stairs.

7 The Fire Risk Assessment (FRA) will give detailed and specific Recommendations to:

7.1 Minimise the incidence of Fire throughout the premises.
Minimise the impact from Fire on life safety, delivery of service, the environment and property.

7.2 The Fire Safety Advisor – will undertake Fire Risk assessment (FRA) to ensure that the appropriate fire safety standards are being maintained and that the appropriate management systems are in place. Fire Risk Assessments produced will be copied to the person(s)-in-charge or in control of the premise, also to Solent Estates Officers and Compliance Officer.

7.3 At the discretion of Head of Estates and the Fire Safety Advisor the FRA document may be shared with maintenance providers, or contractors working for Solent NHS Trust.

7.4 Sovereign Trust properties or leased properties will be subject to a Fire Risk Assessment (FRA) **this document must be subject to a regular Review by the Premise Manager or Person(s)-in-Charge**, they must record the progress of the identified fire risk remedial work in the FRA Action Plan (usually situated on the rear pages of the document) and have space to add any further identified minor items.

7.5 The Fire Safety Advisor will provide an FRA for all premises on a realistic periodic basis balanced by their Trust duties and manpower availability. The table below shows our maximum fire risk assessment time period intentions for:-

High risk premise, e.g. in-patient sleeping risks	Within each calendar year period a Fire Risk Assessment document by the Fire Safety Advisor
Medium risk, e.g. client areas, health centre's	FRA document every 2 years by the Fire Safety Advisor
Low risk, e.g. non-client area, offices, low risk stores	FRA document produced at least every 3 years by the Fire Safety Advisor, and for empty properties an FRA as required but no less than every 5 years

- 7.6 Changes to buildings and plant, or medical equipment, may require independent Fire Risk Assessments to ensure that the fire risk has been considered, the Trust Fire Safety Advisor is available for this advice or task.
- 7.7 Specific fire risks must be considered when procuring new medical devices.

8 Hot Works at Trust premise and whole leased building

- 8.1 Any planned hot works on or in Trust owned, or Trust controlled premise, the contractor or maintenance staff must provide the Trust Fire Safety Advisor and the Trust Estates management with a written scheme of work that includes the safety precautions for the intended work, at least 5 days in advance. The hot work should not be permitted to start until Estates management have agreed the contractor's safety precautions are sufficient and that this has been put in writing. In the absence of the Trust Estates management being available, then written agreement should be sought from the Sovereign Trust Health and Safety manager.
- 8.2 Hot works includes; hot bitumen roof repair or laying, welding, gas flame metal cutting.
- 8.3 For emergency work/repairs contractors and maintenance staff should always check with the Sovereign Trust Estates management (if not available then the Trust Health and Safety Manager) for agreement of Hot Work precautions.

9 Smoking plus Electrically Charged Cigarettes

- 9.1 Sovereign Trust follows the guidelines of the Department of Health and has a zero tolerance protocol against smoking inside or immediately next to Trust controlled buildings, it is recognised that smoking materials are a fire risk and that they are discouraged in Trust owned or controlled properties.
- 9.2 For in-patient long stay areas, if necessary local staff control of patient smoking materials may be instigated, this is for the safety of all in the premise. These smoking materials will only be released back to the patient when they are leaving the building on a temporary or permanent basis. Staff can seek advice from our Local Security Management Service (LSMS) provider and the Fire Safety Advisor.
- 9.3 **Electronic/Vapour Cigarettes** - current advice gathered from NHS organisations and the Department of Health is that electronic cigarettes would mask the control of the smoking ban and are also considered a form of smoking material. Sovereign Trust will not allow any smoking items or material to be used inside or immediately next to Sovereign Trust owned or controlled buildings and departments. Staff can also refer to any current Sovereign Trust Smoking Policy for further information.
- 9.4 Sovereign Trust is aware of a number of serious fires and injury/near miss incidents within the UK where electronic/vapour cigarettes have been connected to a computer via a charge lead. In the interest of safety for all within Trust owned or controlled premise, or Trust departments, **the charging of electronic cigarettes via any computer is banned.**
- 9.5 Only at in-patient areas (sleeping risk) may the charging of electronic/vapour cigarettes via direct connection to a wall plug socket be considered for admitted in-patients, and is only allowed if it is proved to the manager or person-in-charge, that the e-cigarette and the charging lead bear the same manufacturers name, also that the manager can see a British Standard or European safety kite mark on the products. The electronic cigarette can then only be issued to the patient for outdoor use and is to be handed into staff on return to the building.
- 9.6 If the manager or person-in-charge of an in-patient area agrees to the recharge of an e-cigarette via direct connection to a normal wall socket, this should be done in an area that is under staff control, and that this room is not populated while the charge is in process, however the room should be checked regularly to ensure the charging process has not developed a fire fault. The charging of an e-cigarette should never take place in a room that contains other fire hazards e.g. oxygen, flammable liquids/chemicals, storage of combustible items, or near a fire exit.

10 Reporting of Fire and False Alarms

- 10.1 The collection of data for fire incidents and the requirement for investigation of incidents, in healthcare premises is important. Lessons can be learned from routine reports as well as from the comparatively few serious fires experienced in the NHS.
- 10.2 Managers and staff who at the time of an incident would be deemed as the lead person of a department or building, or their job position makes them the responsible person, then they must report fire incidents, false alarms or evacuations, to the Sovereign Trust Fire Safety Advisor via the Trust incident reporting system. Further information may be sought from the Reporting of Adverse Events Policy. If a building has a serious fire then an additional initial report to the Trust Fire Advisor should be sent as soon as possible either by telephone message or e-mail (see 14).

11 Search and Calling the Fire Service

- 11.1 A Government directive to the Fire Service is to encourage and ensure that in all non-domestic premises with a fire alarm activating, the staff should carry out a search of the building to ascertain if a fire situation exists before calling as an emergency to the Fire Service. When an emergency call is made to the Fire Services if an actual fire situation cannot be confirmed or genuinely suspected, and a premise search has not been completed, then the Fire and Rescue Service operator may carry out a 'call challenge' and give instruction to search before any response will be mobilised. Any alarm activation that is a false alarm is **not** to be called to the Fire Service, but is to be dealt with by the Trust staff or the maintenance provider.
- 11.2 Staff should first read the fire panel to gain information of the zone and location of the activation. Staff should never place themselves in danger when searching, if signs of fire or smoke are seen, smell, cracking sounds within a room or void space are heard, or heat can be felt on an approach to an area or on the outside of the entrance door or the door handle, then they should halt the search, ensure evacuation of all, and immediately report their findings as an emergency to the Fire Service.

Note: Fire warden training is available via application to the Training and Development.

12 Reference Documentation

- 12.1 To enable the organisation to meet its legal obligation and achieve standards concerning fire safety as defined by all current legislation and codes of practice, including:
- Regulatory Reform (Fire Safety) Order 2005
 - Fire Safety (Employees Capability) Reg. 2010
 - HM Government Fire Safety Risk Assessment Guides
 - Firecode HTM 05-01 Managing Healthcare Fire Safety
 - Firecode HTM 05-02 New Build and Alterations
 - Building Regulations 2010: Approved Document B: volume 2
 - The Health and Safety at Work Act 1974
 - The Management of Health and Safety at Work Regulations 1999
 - Physical Security Management Policy
 - Disciplinary Policy

- Health & Safety Policy
 - Induction & Mandatory Training Policy
 - Reporting of Adverse Events Policy
 - Department of Health Memorandums and advice
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13 Review and Audit

- 13.1 This document will automatically be reviewed on a three yearly basis unless organisational changes, legislation, guidance or non-compliance prompt an earlier review.
- 13.2 The effectiveness of the physical requirements of this Trust policy are audited via the Learning and Development training records, and a fire risk assessment programme that provides a audit and review report to the Health and Safety sub committee.

14 Fire Safety Advisor

- 14.1 The Trust Fire Safety Advisor can be contacted as follows; Messages and non-urgent enquiries then e-mail – steve.abraham@solent.nhs.uk
 Phone for urgent messages/calls – 0790 1105410

6 Appendix A

Equality Impact Assessment

Step 1 – Scoping; identify the policies aims	Answer
1. What are the main aims and objectives of the document?	To ensure, as far as possible that an outbreak of fire is a minimal possibility. If a fire cannot be prevented it must be rapidly detected, effectively contained and quickly extinguished without risk to staff, clients or visitors.
2. Who will be affected by it?	All employees of Solent NHS Trust
3. What are the existing performance indicators/measures for this? What are the outcomes you want to achieve?	Safer workforce, Safe patients and visitors, compliance with HTM and statutory Fire and H&S legislation
4. What information do you already have on the equality impact of this document?	The previous policy and its impact assessment statement
5. Are there demographic changes or trends locally to be considered?	The policy applies to all staff groups
6. What other information do you need?	N/A

Step 2 - Assessing the Impact; consider the data and research	Yes	No	Answer (Evidence)
1. Could the document unlawfully against any group?		x	The policy applies to all staff groups
2. Can any group benefit or be excluded?		x	The policy applies to all staff groups
3. Can any group be denied fair & equal access to or treatment as a result of this document?		x	The policy applies to all staff groups

4. Can this actively promote good relations with and between different groups?	x		The policy applies to all staff groups
5. Have you carried out any consultation internally/externally with relevant individual groups?	x		Policy Steering Group members and the health and safety subcommittee consulted and Professional Leadership Clinical
6. Have you used a variety of different methods of consultation/involvement	x		Via email and face to face meetings
Mental Capacity Act implications		x	The policy applies to all staff groups
7. Will this document require a decision to be made by or about a service user? (Refer to the Mental Capacity Act document for further information)		x	

If there is no negative impact – end the Impact Assessment here.

Step 3 - Recommendations and Action Plans	Answer
1. Is the impact low, medium or high?	Low
2. What action/modification needs to be taken to minimise or eliminate the negative impact?	N/A
3. Are there likely to be different outcomes with any	

modifications? Explain these? N/A



Step 4- Implementation, Monitoring and Review	Answer
1. What are the implementation and monitoring arrangements, including timescales?	This policy will be reviewed every 3 years, where there has been a significant change in the matter to which it relates, or it is believed to be no longer valid, then appropriate amendments will be made.
2. Who within the Department/Team will be responsible for monitoring and regular review of the document?	Fire safety advisor

Step 5 - Publishing the Results	Answer
How will the results of this assessment be published and where? (It is essential that there is documented evidence of why decisions were made).	Trust Safety Committee Minutes Board Minutes, Trust intranet

7 EQUALITY IMPACT ASSESSMENT AND MENTAL CAPACITY

In accordance with the Equality Act 2010 equality and diversity issues have been considered in the development of this policy and no equality issues were identified. This policy has been assessed against the requirements of the Mental Capacity Act (MCA) 2005 during policy development.