NHS Greater Glasgow and Clyde

FIRE SAFETY POLICY

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Approved By:	Board Health and Safety Forum
Date Approved:	28th November 2013
Date for Review:	1 year period
Version:	Five

Contents –

1. Introduction

This document shall be known as the NHS Greater Glasgow and Clyde (NHSGC&C) Fire Safety Policy and shall be applicable throughout all premises that are owned or managed by NHSGG&C or occupied or part occupied by NHSGG&C staff. The purpose of this document is to provide NHSGG&C with an unambiguous statement of fire safety policy.

NHSGG&C has a responsibility to ensure the safety in the event of fire of persons within our premises. Our obligation extends to patients, employees, visitors and others who have cause to be present within our premises e.g. contractors, students and volunteers. NHSGG&C also have a responsibility to ensure the safety from fire of staff who operate in premises which are not owned or operated by NHSGG&C.

Fire and Rescue Scotland are the enforcement authority and regularly conduct audits within NHSGG&C premises to ensure that a fire safe environment is being maintained.

Anyone who has control to any extent of premises will have some responsibilities for ensuring that those occupying premises are safe from harm caused by fire or its effects. Fire safety is not a stand-alone issue but one to be dealt with equally alongside others in the overall risk management of health and safety matters. In a healthcare setting the challenge of maintaining a fire safe environment is exacerbated by the ever changing population of patients and visitors who may be vulnerable, disabled or mobility challenged; presence of high risk activities and processes such as industrial, laboratory, and plant room operations; in addition to the presence of combustible and dangerous materials that are required in the day to day running of a site, and treatment of patients.

This Policy sets out the framework through which NHSGG&C will comply with its obligations under Part 3 of the Fire (Scotland) Act 2005 as amended and the supporting Fire Safety (Scotland) Regulations 2006 which is the primary fire safety legislation for Scotland. Supporting guidance contained within the Scottish Government 'Practical Fire Safety Guide for Healthcare Premises' has also been considered and has been used in conjunction with NHSScotland Firecode documents which provide the technical benchmarks, aligned with the Scottish Building Standards. The mandatory requirements of the Fire Safety Policy for NHSScotland (CEL 11 (2011)) will also be included within the objectives of NHSGG&C and this document will outline the arrangements that have been put in place to achieve them.

NHSGG&C actively works with Fire and Rescue Scotland to promote a culture of Fire Safety which contributes to minimising the incidence of fire. The effects of fire are reduced through a process of risk assessments, management action through the implementation of fire action plans, and fire monthly audits; the implementation of high standards of fire safety and protection, including the testing of systems and equipment; and appropriate training of our staff in general fire safety awareness and role and location specific fire safety guidance. If a fire does break out, established and well tested procedures are implemented to minimise the risk of injury and loss of life. Fire Safety Officers are available to provide fire safety advice and instruction specific to an individual risk, role, or place of work, and can be consulted with freely.

2. Statement of Policy

The main objectives of this Policy are to:

- have a clearly written, unambiguously defined Fire Safety Policy covering all the services and premises that are owned, or occupied, or managed by NHSGG&C, including community workplace activities, and their occupants;
- ensure that we assess the risk of fire in all premises and implement measures to minimise that risk via a fire risk assessment;
- ensure that patients, employees, visitors and others who have cause to be present within our premises are safe from the effects of fire, including having an appropriate emergency evacuation procedure or strategy in place, communicated via the local ward/area/department Fire Action Plans, which takes account of the Equality Act;
- ensure that Fire Safety matters are recognised and addressed within every area/ward/service/department;
- provide general fire safety awareness and role and location specific fire safety training to every staff member as per the NHSGG&C Fire Safety Training Matrix, including those tasked with specific fire safety roles;
- record all forms of fire safety training or instruction provided via a central electronic system;
- provide suitable systems for fire detection and fire alarm warning, including testing and maintenance procedures;
- provide adequate and appropriate portable fire fighting devices (which are tested and maintained regularly) to tackle small fires;
- provide adequate means of escape from a fire incident, including fire doors, fire separation and fire exits;
- provide appropriate means for assisting with the evacuation of all persons that may be present in an area in the event of a fire, including those who are disabled or mobility challenged;
- ensure that for patient care areas, arrangements are in place to ensure patients can be transferred to a place of safety without external (non NHS personnel) intervention;
- have Fire Risk Assessments carried out by competent persons and ensure they are reviewed on a regular basis or following a fire event or significant change to the area/ward/department;
- use the 3i Studio "Fire Manager" module of the NHSScotland Asset Management System as the primary means of meeting the aims of the Fire Safety Policy for NHSScotland in the context of strategic and operational management of fire safety systems and the statutory requirement to conduct fire risk assessments;
- communicate the significant findings of Fire Risk Assessments via local ward/area/service/department Fire Action Plans;
- review the operation of NHSGG&C Fire Safety Policy on an annual basis to ensure that the content remains appropriate and current.
- produce an annual NHSGG&C Fire Safety Report that reviews all elements of the Policy in addition to its application on a local level;
- provide adequate resources to ensure that the content of this Policy can be met/delivered;
- ensure that every fire alarm activation is investigated and the cause recorded;

- ensure that every fire event is investigated as soon as feasible, and a root cause analysis report is produced and circulated to relevant Managers;
- ensure that 'lessons learned' from fire incidents are communicated and acted upon where appropriate and appropriate control measures are established to reduce unwanted fire alarm signals;
- ensure central notification of all fire incidents (or issues of a fire related nature) from staff members via Datix and for them to be reviewed by the Board's Fire Safety Officer's and appropriate action taken to reduce their re-occurrence.

3. Relevant Policies

The following Policies should be referred to in conjunction with this Policy. The Fire Safety Policy therefore does not specifically cover the subject matter contained within these documents. All NHSGG&C policies can be accessed by staff via staffnet, or a hard copy can be requested from via the Site Facilities Manager.

- NHS Greater Glasgow and Clyde No Smoking Policy
- NHS Greater Glasgow and Clyde Lone Worker Policy
- NHS Greater Glasgow and Clyde Workplace Health Policy
- NHS Greater Glasgow and Clyde Volunteers Policy
- NHS Greater Glasgow and Clyde Policy on Lone Working
- NHS Greater Glasgow and Clyde Toaster or other Portable Kitchen Electrical Appliance Management Policy
- NHS Greater Glasgow and Clyde Wilful Fire Raising (Arson) Policy
- NHS Greater Glasgow and Clyde Security Policy
- NHS Greater Glasgow and Clyde Petrol/Liquid Accelerant Protocol
- NHS Greater Glasgow and Clyde Natural Gas Emergency Protocol

4. Responsibilities of Organisation

4.1 Chief Executive

The Chief Executive has ultimate responsibility/accountability for fire safety within NHSGG&C.

The responsibilities of the Chief Executive include:
- responsibility for the implementation of the relevant mandatory elements contained within the 'Fire (Scotland) Act 2005 as amended', the Fire Safety (Scotland) Regulations 2006, and the Fire Safety Policy for NHSScotland (CEL 11 (2011));
- ensuring that adequate resources are provided to meet the Fire Safety requirements of the NHSGG&C estate;
- ensuring that the Fire Safety Policy is being implemented at all levels;
- reviewing the operation of the Fire Safety Policy through the Board Corporate Management Team and ensuring that clear guidelines are provided for those tasked with compliance of legislative and statutory standards;
- appointing a Nominated Officer (Fire) to assist in the execution of these responsibilities, who for NHSGG&C is the Director of Facilities.

4.2 The Corporate Management Team

The responsibilities of the Corporate Management Team include:
- implementing the Board's overall Fire Safety Policy including compliance with legislative and statutory standards;
- liaising with the Director of Facilities (Nominated Officer, Fire) to ensure the Board's Fire Safety Policy is understood and applied across all areas of the Board;
- formulating with the Director of Facilities (Nominated Officer, Fire) a fire strategy compliance programme for both passive and active measures in both existing buildings and new projects;
- performing a governance responsibility for reviewing the performance of the Board in all matters of Fire Safety. The Corporate Management Team will be advised on this by the Board's Health and Safety Forum with contributions from the Director of Facilities (Nominated Officer, Fire);
- ensuring the production of an Annual Fire Report.

4.3 Director of Facilities:- Nominated Officer (Fire)

The Director of Facilities is the Nominated Officer (Fire). The Nominated Officer (Fire) is directly responsible for the day to day management of fire safety at the highest strategic level throughout NHSGG&C, providing updates and information to the Corporate Management Team and Chief Executive as appropriate. The Nominated Officer (Fire) is a mandated position stipulated within the Fire Safety Policy for NHSScotland.

The responsibilities of the Nominated Officer (Fire) are multiple and include:
- ensuring that sufficient training is undertaken to enable them to undertake their fire safety duties and fully understand the extent of their responsibilities;
- developing the Board's overall strategy response on all matters relating to fire safety;
- contributing to the content of the Fire Safety Policy and all associated procedures, ensuring that a regular review is carried out;
- appointing a number of Deputy Nominated Officer (Fire) positions and informing and involving them in fire safety matters within their area of responsibility;
- managing the Fire Safety Officers who advice on fire safety matters;
- monitoring fire related performance of the Board including fire safety training provision for all staff (including frequency, suitability, and training records that are kept), the number and cause of unwanted fire alarm signals that each site generates (false alarms), recording compliance of monthly fire audit returns, ensuring that local Fire Action Plans (including the local evacuation plan) is visible in all areas, testing and maintenance records are retained for fire safety systems and equipment, fire drills are recorded, and ensuring that suitable and efficient fire risk assessments are undertaken within all areas and they are regularly reviewed, and that all findings are appropriately acted upon and followed;
- reviewing fire incidences via the root cause analysis reports that are produced, circulating Board wide any recommendations that could avoid a

similar occurrence and take action when appropriate in the interest of fire safety within NHSGG&C;

- ensuring that appropriate fire emergency procedures are in place for all areas and this is communicated via a Fire Action Plan;
- ensuring that emergency fire response team/s and fire wardens are appointed (where appropriate), and that training is delivered as per the training matrix, including outlining their duties and responsibilities in the event of a fire;
- producing an annual report on fire safety that will be presented to the Corporate Management Team identifying the fire safety performance of the preceding year and a summary of fire safety targets for the year ahead;
- liaising with colleagues including Fire Safety Officer's, Chief Executive, Chief Operating Officer and NHSGG&C Directors in regard to the above responsibilities and any other relevant fire safety issues;
- liaising with Fire and Rescue Scotland colleagues (where appropriate) on all issues related to fire safety.

The responsibilities of the Nominated Officer (Fire) as listed above does not replace the duty holder responsibilities of others specified in the Fire (Scotland) Act 2005 as amended, and additional supporting regulations.

Additionally, in relation to major Acute Hospital Sites, the Director of Facilities is responsible via his management structure for directing the operation of Site/Sector Facilities meetings which have Fire Safety management as an agenda item. Within Partnerships, site specific senior officers are responsible for ensuring that fire safety is considered within the terms of reference of Partnership and CHP / CHCP Health & Safety Meetings. These groups include representatives from the Facilities Directorate who feedback to the Director of Facilities via the governance structure.

4.4 Deputy Nominated Officer (Fire)

NHSGG&C is the largest health board within Scotland and therefore the role of the Nominated Officer (Fire) is supplemented by multiple Deputy Nominated Officer (Fire) positions, all of which are nominated by the Nominated Officer (Fire).

The responsibilities of the Deputy Nominated Officer (Fire) include:

- liaising with the Nominated Officer (Fire) and maintain an awareness of the duties and responsibilities of the position so assistance can be provided as required;
- assuming the responsibilities of the Nominated Officer (Fire) when the post holder is absent;
- organising and attending fire safety training appropriate to their position and area of responsibility as directed.

4.5 Fire Safety Officers

The Fire Safety Officers provide technical knowledge, training, guidance and advice relating to all aspects of Fire Safety.

The responsibilities of the Fire Safety Officers are multiple and include:

- liaising with, and supporting, the Nominated Officer (Fire), providing technical support in the interpretation of the statutory and mandatory requirements for NHSGG&C, and ensuring that the Nominated Officer (Fire) is informed of all fire related activities within the Board;
- ensuring all areas have a current fire risk assessment and that this is reviewed once every two years, or after a fire incident or significant change of function or physical layout;
- provide guidance, including recommending priorities for improvements identified as a result of the Fire Risk Assessment non compliance;
- providing training advice and preparing and presenting training programmes as per the training matrix;
- recording attendance at fire safety training electronically via the Empower software (due to migrate to e:ESS within the lifetime of this Policy), and retain the paper copies of the training records for a period of three years;
- organise and facilitate regular fire drills (in conjunction with the duty holder/s) and witness the effectiveness (or otherwise) of the drills, recording their occurrence centrally;
- liaise and co-operate with external agencies including planning and design teams, Local Authority Building Control Departments and the Fire Authorities, and represent the interests of NHSGG&C on the fire safety aspects of design;
- support the development of the fire strategy in relevant premises including providing ad hoc input to the design and development of new premises (where required) or refurbishment or redesign;
- provide advice on the appropriate Fire Safety measures during the design of premises or renovations, maintaining records of the process;
- investigating all fire alarm activations to determine the cause;
- reviewing the Monthly Fire Safety Audits with the Site Facilities Manager, making recommendations as appropriate;
- advising upon suitable and adequate provision of fire fighting equipment, signs and notices, and ensuring that all fire fighting equipment is appropriately maintained in consultation with Estates and Site Facilities Manager/Site Responsible Manager;
- liaise with contractors on site via the Estates Department, Capital Department and Heads of Service to ensure that all work carried out on site has the appropriate risk assessments in place to prevent unnecessary risks and to ensure contractors comply with the statutory and mandatory obligations of NHS Greater Glasgow and Clyde;
- investigating all fire incidents and producing a root cause analysis report to be circulated to the Nominated Officer (Fire). Co-operate with Police, Fire or Health and Safety Executive authorities as appropriate and ensure that all serious fire incidents are reported promptly to the Nominated Officer (Fire) and NHS Scotland Health Department as defined within the Fire Safety Policy for NHSScotland.

4.6   Acute Services Directors, CH(C)P Directors and Corporate Division Directors

As Senior Managers, NHSGG&C Directors play an intrinsic role in ensuring that fire safety is embedded within the culture of the organisation.

The responsibilities of Directors include:
- supporting the Nominated Officer (Fire) in the development of the Board's overall strategy in relation to fire safety and for ensuring implementation within their areas of responsibility;
- ensuring that all staff are made aware of their requirement to attend Fire Safety training at the appropriate frequency, as per the NHSGG&C Fire Safety Training Matrix, and facilitate their release from duties to attend training;
- support action to discipline staff who continue to breach the Fire Safety Policy, or their actions or omissions put themselves and/or others at risk from a real or potential fire incident;

4.7   Heads of Service, Departmental Managers, Clinical Managers, Senior Charge Nurse's

All managers who have a responsibility for the day to day management of facilities, staff or services, and/or premises, have fire safety responsibilities that include:
- familiarise themselves with the NHSGG&C Fire Safety Policy and local control measures including emergency fire action plans for their area(s) of responsibility;
- ensuring that persons in the department, clinic or ward are fully aware of their responsibilities and duties in respect of Fire Safety, in particular, the action required of them should they discover a fire or hear a fire alarm;
- ensure that persons in the department, clinic or ward are fully aware of the contents of the Fire Action Plan, in particular the evacuation procedures that have been documented;
- actively promoting Fire Safety within the department or ward by maintaining good housekeeping within the department or ward at all times, ensuring that fire doors and exit routes are free from obstruction, and actively discouraging accumulations of waste materials, wedging open of fire doors or the inappropriate use of fire equipment;
- responding appropriately to any fire safety concerns that persons in the department, clinic or ward have;
- nominating a responsible person to complete the Monthly Fire Safety Audit for each area, forwarding a copy to the Site Facilities Manager, thereby assisting NHSGG&C to meet its statutory and mandatory requirements;
- liaising with the Fire Safety Officer to ensure that their staff receive the fire safety training as per the NHSGG&C Fire Safety Training Matrix;
- locally hold a record of annual Fire Safety Training undertaken by staff;
- completing fire safety induction for all staff, volunteers and contractors and maintaining a record of this induction locally (see Appendix C);

- liaising with staff that require assistance to evacuate in the production of a Personal Emergency Evacuation Plan (PEEP) (see section D and Appendix D);
- ensuring that all fire related incidents, fire alarm activations, or any near miss events are reported via Datix (accessed via the staff intranet (Applications>Datix));
- accompanying the Fire Safety Officers, nominated Manager(s) or representative from the Fire Authority on inspections of their departments, clinics or wards and co-operate fully on fire safety matters;
- ensure that staff working in non-NHSGG&C premises are covered by fire safety arrangements that are no less favourable than staff who work within NHSGG&C premises.

4.8   Site Facilities Managers/Site Responsible Managers

All Acute sites within NHSGG&C have an identified Site Facilities Manager. Within Partnerships, there are two identified Site Facilities Managers who provide cover to all premises. Every Partnerships property has a designated Site Responsible Manager who is named by the relevant CH(C)P Director and has overall charge of the relevant premises. In relation to Fire Safety, the Site Responsible Manager co-operates with Senior Managers, Fire Safety Officers, representatives from the Fire and Rescue Services, and acts as the primary person for implementation of the Fire Safety Policy within that property. In the absence of a designated Site Responsible Manager, the CH(C)P Director shall assume the role.

A list of all Site Responsible Managers shall be notified to the Partnership Site Facilities Managers to ensure that full liaison on fire safety matters occurs.

4.9   All staff members

All staff (including those employed by other agencies but who are based within NHSGG&C premises) have a responsibility to:
- complete the appropriate fire safety training at the appropriate frequency, as per the NHSGG&C Fire Safety Training Matrix;
- be familiar with the actions required of them in the event of a fire alarm actuation or fire incident; in particular, they must know:
    o how to raise the fire alarm;
    o how to contact the Fire and Rescue Services;
    o the fire evacuation procedure or strategy for their area;
    o the contents of the Fire Action Plan;
- familiarise themselves with the associated NHSGG&C policies listed in Section 3;
- make themselves familiar with and conform to the Fire Safety Policy and local procedures and arrangements at all times;
- conform to all instructions given by their line manager or others with a responsibility for fire safety;
- observe all fire and security rules at all times;
- not misuse or interfere with any items of fire safety equipment and report any fire safety equipment that is faulty or has been misused to their manager for action;
- inform their manager if they notice a new risk, or the potential for a situation to become a risk, and log the incident on Datix if appropriate;

- shall not wilfully negate any fire safety measures e.g. wedge open or obstruct fire doors, extinguishers or break glass points or store combustibles in stairway enclosures or corridors.
- treat all fire alarms as an actual fire event and immediately evoke/follow the fire evacuation procedure for the area.

5.   Fire Safety Procedures

5.1   Fire Risk Assessments

The Fire (Scotland) Act 2005 requires that all premises that are occupied (or owned) by NHSGG&C staff or patients, are required to have a suitable and sufficient Fire Risk Assessment conducted to ensure that all fire risks are assessed in relation to the applicable regulatory standards. The assessment includes identifying factors that may contribute to the growth or spread of a fire, potential ignition sources, the adequacy or otherwise of the means of escape provision, and attributing each factor to who would be at risk.

All NHSGG&C premises require to have up to date Fire Risk Assessments in place which are regularly reviewed and updated to reflect any modification or change to an area.

Currently, NHSGG&C Fire Risk Assessments are retained by the Site Facilities Managers but can be released electronically to duty holders. The content of Fire Risk Assessments is technically complex and as such, the elements that require to be known or taken into consideration as part of the fire strategy for the area, are included within the local Fire Action Plan (see below).

5.2   Fire Action Plan

A detailed location specific Fire Action Plan has been prepared for each ward/clinic/department/area that contains relevant fire information including:

- General Information
  - Who is the responsible person for the area
  - Layout of area
  - Number of patients/staff present at core/out of hours times
- Designated person(s) responsible for fire safety for site
- Fire Safety Officer details
- Fire Warden details (if non clinical)
- Estates contact details
- Fire Risk Assessment information
  - Where the risk assessment can be found
  - Items from the risk assessment that require to be taken into consideration
- Fire Alarm information
- What to do if a fire is suspected or present
  - How to Raise the Alarm
  - How to Contact the Fire and Rescue Services (either via Contact Centre or direct to 999)
- Procedure for Evacuation the area

- o Location of any isolation switches (if appropriate)
- o Assembly Points
- Procedure for evacuating person with limited/no mobility
- Procedure for checking that all areas have been evacuated
- Location of portable Fire Fighting Equipment
- Fire Response Team/arrangements for passing information to Fire and Rescue Services
- What to do if the Fire Alarm is known to be a False Alarm
- Incident Reporting
- Floor plan of ward/clinic/area/department showing location of fire panel, extinguishers, fire doors, fire exits etc.

The content of the Fire Action Plan must be familiar to all staff and a full copy must be displayed in areas for all relevant persons (including the public) to inspect. Location specific training will be based on the contents on this document and reviews/revisions will be made following a significant change/modification to the area, a change in use, a fire event, and/or modifications being made to the fire risk assessment findings.

If there are any queries regarding the contents of the fire action plan, or additional clarification is required, the Fire Safety Officer should be contacted in the first instance.

An example copy of a Fire Action Plan is displayed within Appendix A.

5.3   Fire Safety Training

NHSGG&C has developed a Fire Safety Training Strategy based on a risk approach to frequency and type of training. As noted within Section 4.9, all staff have a responsibility to complete fire safety training at the appropriate frequency.

A copy of the NHSGG&C Fire Safety Training Matrix is displayed within Appendix B.

5.4   Recording of Fire Safety Training

NHSGG&C record and hold all fire safety training records centrally for reporting or auditing purposes. Local records should also be held to allow Managers to be able to identify staff who require fire safety training (see Section 4.7).

Participants attending Fire Safety Training are required to complete a sign-in sheet detailing their name, payroll number or date of birth, Directorate and signature.

5.5   Fire Drills and Exercises

It is not always possible to perform fire drills within clinical settings due to the associated risk to patients. As part of the Evacuation Training that is provided to clinical staff, a fire drill exercise is conducted whereby the staff consider the actions that would be required of them in an emergency scenario and then

'walk through' the evacuation that would be performed. Staff are advised to reflect on the actions that they conducted following fire alarm activations to review whether they were appropriate to the situation. Every alarm activation provides the opportunity to rehearse the procedures that have been developed for that area and gain experience of what 'worked well' and why, and what requires to be improved upon, and to review the operational effectiveness of those arrangements.

In non clinical buildings, or non clinical areas where a fire drill would not affect clinical areas, fire drills should be routinely conducted at a frequency of at least once every year. The fire drill will be organised and facilitated by the Fire Safety Officer who would witness the effectiveness of the exercise. If the Fire Safety Officer had serious concerns about the effectiveness of the exercise, a further drill would be carried out as soon as is practically possible. Additionally, if there are appreciable changes to occupancy of an area, major building works or alterations to a premises or means of escape provision, the drill exercise would be repeated.

Records of fire drills undertaken are recorded locally by the Fire Safety Officer with accompanying notes of its success or any recommendations made to the occupants. This information will be shared with the Site Facilities Manager/Site Responsible Manager.

6.   Personal Emergency Evacuation Plan (PEEP)

The aim of a PEEP is to provide people who are unable to get themselves out of a building unaided with the necessary information to enable them to manage their own evacuation.

The extent of assistance required will vary per individual but may include mobility issues associated with a physical disability (including wheelchair users), visual impairment, dexterity problems, asthma or other breathing of health issues, hearing impairment, orientation disorders, learning difficulties or autism, or mental health problems.

The plan will outline what additional measures or assistance is likely to be needed by the individual in order for them to evacuate safely with their colleagues if the fire alarm sounds.

As identified in Section 1, NHSGG&C has a responsibility to ensure the safety in the event of fire for all persons present within our premises (including staff, volunteers and students). As such, it is mandatory for a PEEP to be completed for all persons who require assistance and for details to be made known to the appropriate persons. Appendix D provides further guidance information including a questionnaire that can be used to gather the required information, and a PEEP template.

7.   Monthly Fire Safety Audit

Fire Safety Audits should be completed at least monthly by the Head of Service, Departmental Manager, Senior Charge Nurse or their designated Responsible Person. These audits address a range of practical measures which require to be assessed on an

ongoing basis to inform Fire Safety actions. These audits are also required to assist in NHSGG&C meeting its statutory and mandatory obligations. Monthly Fire Safety Audits are completed in all areas, including in premises that are not owned by NHSGG&C but where NHSGG&C staff are based.

The checklist should be completed and actions taken where appropriate to correct any deficiencies in the area.

Completed forms require to be returned to the Site Facilities Manager/Site Responsible Manager by the 15th of each month for the preceding month. The Site Facilities Manager/Site Responsible Manager reviews the returns in association with the Fire Safety Officer and communicates any action taken back to the Responsible Person. If action can not be taken for any reason, this is also communicated back to the Responsible Person.

Exception reports will be produced by the Site Facilities Manager identifying areas on each site where Monthly Fire Safety Audits have not been completed. These reports will be circulated to Directors so they are aware of non conformation, and the statistics will be summarised and presented to the Board Health & Safety Group.

A blank copy of the Monthly Fire Safety Audit is displayed within Appendix E.

8   Reporting of Fire Alarm Activations

All Fire Alarm Activations and Fire Events are to be recorded on the Datix incident reporting system on the NHSGG&C intranet (click on Applications>Datix>New Incident) with sufficient detail included about the event including contributing factors and timeline of events. The Datix should be completed by any person/s who took any form of fire related action (e.g. broke glass call point, assisted in extinguishing a fire) or witnessed anything in relation to the incident (e.g. witnessed patient accidentally break glass point). All Fire related Datix alerts are sent automatically to the site based Fire Safety Officer for review.

9.   Fire Investigations

All fire events within NHSGG&C are investigated by a Fire Safety Officer and a Route Cause Analysis report is completed which includes the incident findings and any recommendations that should be considered/applied to prevent a re-occurrence of a similar event from happening. The report is circulated to the Nominated Officer (Fire) for their information and action if appropriate.

10.   Automatic Fire Detection and Alarm Systems

All premises occupied or owned by NHSGG&C have a method of detecting and providing a warning that fire may be present. Additionally, break glass points are fitted at or near to final exits to the building or department to alert others to the existence of fire.

The main method of fire detection within NHSGG&C premises is via smoke alarms (detection of smoke particles). Heat detectors are usually fitted within plant rooms, kitchen areas, and other areas where the presence of smoke detectors would not be appropriate to minimise unwanted alarm signals. Both smoke and heat detectors are powered by mains electricity and form part of an integrated Automatic Fire Detection

and Alarm System. All detector heads are installed and maintained in compliance with BS 5839, and the appropriate Firecode suite of documents. Testing records are held within the Estates Department of each site or locally for non-Acute sites.

Although the activation of the automated system alerts the NHSGG&C Contact Centre or another remote monitoring station that there has been an activation, a follow up call to the Contact Centre is required to provide additional details, if safe to do so. For Partnership premises, this secondary call should be made direct to the Emergency Services (999).

11.   Fire Fighting Equipment

Fire Fighting Equipment is provided within all sites and is designed to attack or extinguish, contain or restrict the growth of a fire discovered at an early stage of ignition. Fire Fighting Equipment is only intended to be used on small fire incidents (e.g. contained within one area and has not spread or travelled).

The type and number of pieces of equipment provided will vary depending upon the risks present, and the use of the area. The number of units and location of them are as per the requirements of the Fire (Scotland) Act 2005 and the NHS Scotland Firecode suite of documents.

Fire Fighting Equipment includes sprinkler systems, however, within NHSGG&C, the most common types of equipment are portable devices such as Fire Extinguishers and Fire Blankets. Within Healthcare premises there is no longer a requirement to provide Fire Hose Reels for fire fighting purposes and in many sites these have been decommissioned with appropriate signs displayed advising people that are not to be used to fight fires.

Additional information on Portable Fire Fighting Equipment is displayed within Appendix F.

12.   Emergency Lighting Provision

Emergency lighting is present within the majority of NHSGG&C premises. In the event of a power failure its purpose is to provide adequate illumination of stairways, corridors, exit routes and final exit doors that form part of the means of escape in an emergency situation.

Emergency Lighting is installed and maintained in compliance with BS 5266, with testing records held within the Estates Department of each site.

13.   Fire Safety Signage and Notices

Fire Safety Signage and Notices within NHSGG&C premises is required to comply with BS 5499. Signage and notices are normally provided in positions that are recommended by the Fire Safety Officer to provide clear instructions as to actions that are required to be followed, or to indicate the presence of a fire related piece of equipment. A Fire Safety Officer should be consulted if there are any queries relating to fire signs or notices.

NHS
Greater Glasgow and Clyde

Date Fire Action Plan completed:
Prepared by:
Date Fire Action Plan to be reviewed:

HOSPITAL/SITE NAME – Area/Ward/Dept, Floor, Building

FIRE ACTION PLAN

GENERAL INFORMATION:		
Bed / Area Holding Directorate:		
Name and position of Responsible Person/Dutyholder present within area:	Name: Position:	
If Responsible Person/Dutyholder is not present within area, state position of person with designated responsibility:	Position:	
Name of person that completes the Monthly Fire Safety Audit:	Name:	
Location of Area:		
Layout of Area:		
Type of Patient / Occupant:		
Number of Staff on duty (core hours):	Max:	Min:
Number of Staff on duty (out of hours):	Max:	Min:
Number of Patients present (core hours):	Max:	Min:
Number of Patients present (out of hours):	Max:	Min:
Number of Other persons present (inc. visitors):	Max:	Min:
Date of last evacuation drill/rehearsed evacuation scenario:		
Date of next evacuation drill/rehearsed evacuation scenario:		
DESIGNATED PERSON RESPONSIBLE FOR FIRE SAFETY FOR THE WHOLE SITE		
Monday to Friday (time periods): Saturday to Sunday (time periods):		
FIRE SAFETY OFFICER:		
Name:		Phone:	
FIRE WARDEN DETAILS FOR AREA:		
Name(s):		Phone:	

ALL FIRE SAFETY MAINTENANCE RECORDS, INCLUDING PORTABLE APPLIANCE TESTING (PAT) RECORDS ARE HELD BY THE ESTATES TEAM:			
Name:		Phone:	
THE FIRE RISK ASSESSMENT FOR THIS AREA IS HELD BY THE SITE FACILITIES MANAGER AND CAN BE PROVIDED IN FULL ON REQUEST:			
Name:		Phone:	
Fire Risk Assessment Reference Number:			
Items from Fire Risk Assessment to be taken into consideration:			

FIRE ALARM		
The fire alarm test is held on:	Day:	Time:
The fire alarm is: (Delete as applicable)	Audible – Continuous/Intermittent and continuous Visual - Strobe	
Type of fire alarm detector head in area (Delete as applicable):	Smoke Heat	

WHAT TO DO IF FIRE IS SUSPECTED OR PRESENT

1) Raise the Alarm
Immediately raise the alarm by breaking a red Fire Alarm Call Point.

2) Contact the Fire Service
Within Acute sites
If able to get to internal phone without endangering self, dial **x2222** (emergency fire number) and provide clear details of location (*Area/Ward/Dept, Floor, Building, Site, Site Address*) to contact centre staff. **Clearly state whether there is a real fire or whether a fire is suspected**. The contact centre staff will contact the Emergency Services on your behalf. If unable to get to internal phone, dial **999** direct and provide clear details of location of fire direct to Emergency Services. When safe to do so, call x2222 informing them of your actions if possible.

Within Non-Acute sites
If able to get to phone without endangering self, dial **999** and provide clear details of location to Emergency Services Operator. Clearly state whether there is a real fire or whether a fire is suspected. If unable to get to a phone, on evacuating the area, call 999 as soon as possible.

3) Proceed to Evacuate the area (see below)

PROCEDURE FOR EVACUATING THE AREA

Clinical Areas: *Include: procedure for isolating medical gases etc, visitor evacuation, staff evacuation, patient evacuation, if progressive horizontal evacuation is to be used – how is this achieved and what to do when last compartment is reached, what wards/areas/departments can be called upon to assist with an emergency (inc. how they will be contacted to seek assistance)*

Example for Non Clinical Areas: Proceed in a calm, orderly manner to the nearest fire exit, closing all window's/doors in the process (if safe to do so). On exiting the building, proceed to the assembly point and remain there until further instruction is provided. Do not re-enter the building.

Nearest Assembly Point is located:	
Location of isolation switch for medical gas/oxygen etc (Delete as applicable):	

PROCEDURE FOR EVACUATING PERSONS WITH LIMITED/NO MOBILITY

PROCEDURE FOR CHECKING THAT ALL AREAS HAVE BEEN EVACUATED

PORTABLE FIRE FIGHTING EQUIPMENT (FIRE EXTINGUISHERS)

The location of portable fire fighting equipment (fire extinguishers) are noted on the below plan. Staff are required to familiarise themselves with the location of the equipment, the type of fire it can be used to fight and note the instruction of operation. Staff are reminded that they should only attempt to extinguish the smallest of fires, and only if appropriate training has been received.

FIRE RESPONSE TEAM/MEETING THE FIRE EMERGENCY SERVICES

(Acute Sites) – Once the contact centre has been contacted (x2222), they will page the Fire Response Team who will report immediately to the incident area. A Fire Response Team member will meet the Fire Emergency Services and convey details of whether all persons have been accounted for and communicate any dangers that are present in the area. It is therefore essential that clear and precise information is communicated to the Fire Response Team by staff during the process of evacuation.

(Non Acute Sites) – Fire Response Teams? – who contacts them?

WHAT TO DO IF FIRE ALARM IS KNOWN TO BE A FALSE ALARM

If the fire alarm is known to be a false alarm e.g. staff member has activated break glass point in error, please call x2222 immediately, confirm your location (*Area/Ward/Dept, Floor, Building, Site, Site Address*), and notify the contact centre that **"the alarm is believed to be a false alarm due to ……".** The contact centre will contact the Emergency Services and pass through this information.

INCIDENT REPORTING

All fire related incidents (including false fire alarm activations) are to be reported on the Datix system on Staffnet (Applications>Datix>New Incidents).

PLAN OF AREA/WARD/DEPT to be displayed here (showing location of fire panel, extinguishers, fire doors, fire exits etc)

Appendix B

NHSGG&C Fire Safety Training Frequency Matrix

Clinical Staff: Staff with medical/ clinical interaction with patients	Induction Training	General Awareness Fire Safety Training	Evacuation Training	Extinguisher Training	High Risk Specialist training	Fire Response Team Training
Training Type	Mandatory	Mandatory	Mandatory	Optional	Role Specific	Role Specific
Frequency and details	Once - Staff should receive local induction to every area that they work	Every Second Year (alternating with Evacuation Training)	Every Second Year (alternating with General Awareness Safety Training)	General practical training sessions are communicated centrally per site and are available on an annual basis.	Annual for High Risk groups of staff including Theatre staff and some Laboratory staff. Please note – staff and Managers will be informed if they require this specialist training.	Annual for identified staff that may be required to carry the Fire Pager. Extinguisher training is included in this training package.
How to access training	Line Manager delivers training	E-Learning via Learn Pro or watching training content from DVD	Fire Safety Officer delivers training and circulates training dates/times widely in advance. They can be contacted directly to request training or to answer any fire related enquiry.			
Training record information	NHSGG&C Fire Safety Induction Proforma completed and retained locally	Sign In sheet completed during training (including Name, Directorate, Payroll number or Date of Birth and signature). Training information recorded on Empower (Board's training recording system) and hard copies retained centrally for 2 years. A monthly report highlighting all training (year to date) is collated and circulated to Directors, Heads of Nursing, Heads of Administration, Heads of HR for their information. Learn Pro records all e-learning activity and training numbers are included in monthly circulation.				

Non Clinical Staff: Staff with no medical/ clinical interaction with patients	Induction Training	General Awareness Fire Safety Training	Extinguisher Training	High Risk Specialist training	Fire Response Team Training	Fire Warden Training
Training Type	Mandatory	Mandatory	Optional	Role Specific	Role Specific	Role Specific
Frequency and details	Once - Staff should receive local induction to every area that they work	Every Second Year	General practical training sessions are communicated centrally per site and are available on an annual basis.	Annual for High Risk groups of staff including some Catering and Estates staff. Please note – staff and Managers will be informed if they require this specialist training.	Annual for identified staff that may be required to carry the Fire Pager	Annual for identified staff who carry out fire warden duties
How to access training	Line Manager delivers training	E-Learning via Learn Pro or watching training content from DVD	Fire Safety Officer delivers training and circulates training dates/times widely in advance. They can be contacted directly to request training or to answer any fire related enquiry.			
Training record information	NHSGG&C Fire Safety Induction Proforma completed and retained locally (refer Appendix D)	Sign In sheet completed during training (including Name, Directorate, Payroll number or Date of Birth and signature). Training information recorded on Empower (Board's training recording system) and hard copies retained centrally for 2 years. A monthly report highlighting all training (year to date) is collated and circulated to Directors, Heads of Nursing, Heads of Administration, Heads of HR for their information. Learn Pro records all e-learning activity and training numbers are included in monthly circulation.				

Appendix C
NHSGG&C Fire Safety Induction Proforma

As noted within the NHSGG&C Fire Safety Policy, managers are responsible for completing fire safety induction for all staff, volunteers and long term contractors and maintaining a record of this induction locally.

This proforma has been developed to identify the points that require to be covered during the Fire Safety Induction process, and also to record the training activity for local retention.

Points to be covered during Induction:	
Inductee to be:	
1	Shown a copy (and allowed time to read through) the NHSGG&C Fire Safety Policy, NHSGG&C Wilful Fire Raising Policy, and NHSGG&C Toaster and Kitchen Electrical Appliances Management Policy (displayed on Staffnet – Acute>Facilities>Fire Safety).
2	Shown (and allowed time to read through) the displayed and laminated Fire Action Plan for the ward/area/department *Note: These are still in the process of being rolled out to all areas. If this is not present within your area, the below information requires to be cascaded to the new staff member:* • Name(s) of Fire Safety Officer for site • Name(s) of Fire Warden for area • Items from the Fire Risk Assessment that require to be taken into consideration • Fire Alarm information including test day/time (if applicable), whether alarm is intermittent/continuous/strobes present, type of detection present (smoke or heat) • What to do if a fire is present or fire is suspected: *1) Raise the Alarm* *Immediately raise the alarm by breaking a red Fire Alarm Call Point.* *2) Contact the Fire Service* *Within Acute sites* *If able to get to internal phone without endangering self, dial x2222 (emergency fire number) and provide clear details of location (site, address, building, floor, ward/area/dept) to contact centre staff in addition to letting them know if any persons are involved (i.e. being evacuated) and what is on fire (if known) or whether fire is suspected. The contact centre staff will contact the Emergency Services on your behalf. If unable to get to internal phone, dial 999 direct and provide clear details of location of fire direct to Emergency Services. When safe to do so, call x2222 informing them of your actions if possible.* *Within Non-Acute sites* *If able to get to phone without endangering self, dial 999 and provide clear details of location to Emergency Services Operator. Clearly state whether there is a real fire or whether a fire is suspected. If unable to get to a phone, on evacuating the area, call 999 as soon as possible.* *3) Proceed to Evacuate the area (see below)* • Procedure for evacuating the area and checking all areas have been evacuated • Role of Fire Response Team • What to do if fire alarm is known to be a false alarm • Reminded never to wedge open a Fire Door, and never to block/obstruct a Fire Exit
3	Shown the location of: • Fire Exits • Break Glass Point boxes • Any evacuation aids that are present • Any portable fire fighting devices (including the operating instructions displayed on the appliance) • Fire Assembly Point • Fire detection devices • Fire Panel • Isolation devices (if applicable, with separate instruction to be provided)

Manager: I confirm that the above items on the proforma have been covered as part of the Fire Safety Induction Process. Name: Signature: Date	**Inductee:** I confirm that the above items on the proforma have been explained to me as part of the Fire Safety Induction Process, and all elements are understood. Name: Signature: Date

<div align="center">

Personal Emergency Evacuation Plan (PEEP)
Guidance and PEEP Proforma

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A PEEP should be completed for any staff member (including volunteers and students) who for any reason can not evacuate their workplace unassisted. It should be noted that NHSGG&C has a responsibility for the safe evacuation of all persons that they employ or have cause to be present within their buildings. Whilst the Fire and Rescue services are able to assist in an emergency or rescue setting, there primary focus is not to assist in the evacuation of personnel.

Responsibilities
It is the responsibility of the line manager (or equivalent) to liaise with staff (including volunteers and students) to identify whether any assistance is required in the event of a fire incident. If assistance is required, the PEEP questionnaire (see Appendix Di) should be completed by the person who requires assistance in conjunction with their line manager (or equivalent), and the Fire Safety Officer if required.

Guidance for writing the PEEP
Given that the extent of assistance required, and the characteristics of each building/location that the person is based in will differ, the following considerations should be used to guide the formulation of the PEEP (see Appendix Dii). The PEEP should be initially drafted by the line manager in association with the user. The Fire Safety Officer should review the PEEP to 'sign off' the contents and to log that an active PEEP is in place.

The plan should have regard to:

- Horizontal evacuation/safe routes

Wherever possible, clear, unobstructed horizontal evacuation routes should be sought out so that people that require assistance are able to travel freely into an adjacent area without needed to negotiate stairs or other barriers to movement. Alternative safe routes should also be mapped or made known to the users, where possible, that are not excessively long in distance. If there are locks, doors or other devices present along the route that require to be passed through, it is important to ensure that the user is aware of these and they can operate them.

- Lifts

Most lifts are not suitable to be used during a fire incident unless they are categorised as a "Fire Fighting Lift" or "Evacuation Lift". The Fire Safety Officer will be able to advise whether there are any suitable lifts that could be used.

- Temporary waiting spaces

A temporary waiting space is an area that is separated from a fire by fire resisting construction and provides a safe route to a final exit place e.g. the head of a protected stairway where there is sufficient space to remain in situ without obstructing others to evacuate.
Temporary waiting spaces require to be clearly signed and should only be defined as being suitable for use after consultation with the site Fire Safety Officer.
Temporary waiting spaces can be used if there is a specific procedure in place to carry out a staged evacuation whereby users are able to be assisted to a secondary area. Temporary waiting spaces often 'house' Evac-Chairs or a similar evacuation aid device.

- Evac-Chair

An Evac-Chair (or similar evacuation aid device) is used to assist people with limited mobility downstairs. The number of people required to assist in the use of a Evac-Chair should be considered,

in addition to the type of evacuation aid that would be required, and the appropriate positioning and number of the device if there are multiple exit routes, or multiple people that require assistance.

- Training and Communication

The contents of the PEEP must be fully understood by the person that it has been written for and this should be communicated in an appropriate manner (including via audio tape of Braille if required).

If assistance is required from named individuals as part of the PEEP, the contents requires to be shared with them so that they are aware of their level of involvement, and can confirm that they will assist as has been described.

Additionally, Fire Wardens present on the floor should be informed of the contents of the Plan so that they can assist by communicating to the Fire Response Team or Fire and Rescue Service that an emergency evacuation plan is being effected i.e. that a temporary refuge area is in use, or whether a staged evacuation is taking place.

If any evacuation aids require to be used as part of the evacuation process, the Fire Safety Officer will be able to advise of the training requirements and frequency of re-training that is required.

The PEEP should include details of any training that is required, including noting down the frequency for practice dates or drills to be performed.

- Review date

A review date should be included on the PEEP to take cognisance in any applicable changes including any modifications to the areas, any changes in personnel that will support the evacuation process, and any improvements/deteriorations in mobility that require to be reflected in the plan.

Personal Emergency Evacuation Plan (PEEP)
Questionnaire

To be completed by person who requires assistance in conjunction with Line Manager, and Fire Safety Officer (if required)

Name:		**Job Title:**	
Department:		**Line Manager:**	
Shift pattern/ Days worked			
Work Location:	(Site, Building, Floor and Room)		
Other areas in building that you frequently visit:	(e.g. Kitchen, Reception, Changing Room – continue on separate sheet if required)		
Other buildings/sites that you frequently visit:	(Continue on separate sheet if required)		

(please tick)	YES	NO or DON'T KNOW
Emergency Procedures		
Are you aware of the emergency evacuation procedures that operate in the building(s) you attend?		
Do you require written emergency evacuation procedures or details provided in another format? Provide details:		
Are the signs that mark emergency routes, exits, break glass points, fire action plans, extinguishers etc. clear enough for you?		
Fire Alarm / Raising the Alarm		
Can you hear the fire alarm(s) in your place(s) of work?		
Could you raise the alarm if you discovered a fire?		
Assistance		
Is anyone currently designated to assist you in an emergency? If yes, please provide names/locations and note if this is a formal/informal arrangement:		
Are you always in easy contact with those designated to help you?		

Do they work the same shifts/days of the week as you?		
If required, could you contact other people not designated to help you, for assistance?		

Please describe the type of assistance that you would require, including any considerations to be applied (i.e. can not open door handles/doors without assistance, can not access stairs etc.- continue on separate sheet if required)

Please detail any other considerations:

Date of completion:

Next step is to draft PEEP and get 'sign off' by Fire Safety Officer.

Appendix Dii

Personal Emergency Evacuation Plan (PEEP)
Proforma

Name:		Job Title:	
Department:		Line Manager:	
Shift pattern/ Days worked			
Work Location:	(Site, Building, Floor and Room)		
Other areas in building that you frequently visit:	(e.g. Kitchen, Reception, Changing Room)		
Other buildings/sites that you frequently visit:	Are PEEPs required for these locations?: Have they been created?		

Reason why a PEEP is required:				
Method of alert:	(i.e. existing alarm, visual alarm etc.)	**Awareness of procedure:**	Fully discussed?	Electronic copy issued:
Names of Fire Wardens present on floor:	(Wardens will require a copy of PEEP)			
Names of any designated persons that will be required to assist	**Names**	**Signature and Date**		
		(By signing the above you are acknowledging your involvement in the below Personal Emergency Evacuation Plan for person named on this form)		

Please provide a step by step account of the evacuation procedure, including any evacuation aids that are required, methods of communication, alternative safe routes to be taken etc.:

Date PEEP created:		Date PEEP to be reviewed:	
PEEP practice completed on:		Frequency that PEEP practice/drill to be conducted:	

THE CONTENTS OF THE ABOVE PEEP HAS BEEN AGREED BY:			
Sign off process:	Name	Signature	Date
User			
Line Manager			
Fire Safety Officer			

Monthly Fire Safety Audit

**Completed forms to be submitted to the Site Facilities Manager by 15th
of every month for preceding month.**

HOSPITAL/UNIT		
Ward/Department:	Site:	
Completed by (Name):		
Date:	Time:	

PLEASE ANSWER ALL QUESTIONS		YES	NO	N/A	COMMENT
1.	**STAFFING**				
	Have all staff on duty:				
a	Received Fire Safety Induction Training?				
b	Received Fire Safety Training as per training matrix in Fire Safety Policy?				
c	Aware of means of escape?				
d	Know of the location of fire extinguishers?				
e	Know how to use fire extinguishers?				
f	Familiar with procedure to be adopted in the event of a fire?				
2.	**EQUIPMENT**				
a	Are all fire extinguishers in place and appear in working order?				
b	Are all fire alarm call points (break glass) unobstructed and clearly signed or indicated?				
c	If emergency evacuation equipment is present, does it appear to be in good order (i.e no wear/tear/damage) and have staff been trained to use it?				
3	**GENERAL**				
a	Have there been any significant modifications made to the area/department that require the Fire Risk Assessment to be modified?				
b	Are all escape routes free from obstruction?				
c	Are all directional signs and fire action notices in place and easily seen?				
d	Do all fire escape doors open and close correctly?				**Nb. Please notify Estates of issue in usual manner and state details below (if applicable): Ref. No:**
e	Are all fire doors in the area in a good state of repair?				**Date reported:**
f	Do the fire strips on doors (intumescent strips) appear to be in good order (i.e. no wear/tear/damage)?				
g	Have all fire alerts/incidents been recorded on DATIX?				**Datix Web No:**
Deficiencies found in area		**Action taken by Responsible person**			

Facilities Directorate
Form received:
Checked by:
Actions taken:

<u>**Appendix F**</u>
<u>**Portable Fire Fighting Equipment Detail**</u>

It is important to know the correct type of fire fighting equipment to use on a fire as using the wrong type of extinguisher on the incorrect fire can fuel it further and pose a life risk to the user.

Fires are identified according to one or more fire classes. Each class designates the fuel involved in the fire. Fire extinguishers display the classes of fire they can be used on and therefore allow the most effective and safest extinguishing agent to be used.

The main fire classes are displayed below:

- **Class A** extinguishers are for ordinary combustible materials such as paper, wood, cardboard, and most plastics.
- **Class B** fires involve flammable or combustible liquids such as gasoline, kerosene, grease and oil.
- **Class C** fires are for flammable gases such as butane and propane.
- **Class D** fire extinguishers are commonly found in a chemical laboratory. They are for fires that involve combustible metals, such as magnesium, titanium, potassium and sodium.
- **Class F** fire extinguishers are for fires that involve cooking oils, trans-fats, or fats in cooking appliances and are typically found in restaurant and cafeteria kitchens
- There is no classification for electrical related fires.

Some fires may involve a combination of these classifications e.g. Class AB.

There are four common types of fire extinguisher agent – water, dry powder, foam and Carbon Dioxide (CO_2).

- **Water** extinguishers or APW (air-pressurized water) extinguishers are suitable for Class A fires only. They should never be used on grease fires, or class D fires as the flames will spread and make the fire bigger. Water extinguishers should never be used on electrical fires (Class C) as the risk of electrocution is high.
- **Carbon Dioxide (CO_2)** extinguishers are used for class A and B fires. CO_2 extinguishers contain carbon dioxide, a non-flammable gas, and are highly pressurized therefore emitting a noisy bang on activation. The pressure is so great that it is not uncommon for bits of dry ice to shoot out the nozzle. They don't work very well on class A fires because they may not be able to displace enough oxygen to put the fire out, causing it to re-ignite.
- **Dry powder** extinguishers come in a variety of types and are suitable for a combination of class A, B and C fires. There effectiveness in outside environments can be diminished by the presence of any wind as the dry powder agent is exceptionally fine. Although considered safe to use on electrical fires there effectiveness is limited as the dry powder can not readily penetrate spaces within the electrical casing (if required).
- **Foam** extinguishers come in a variety of types and are suitable for a combination of class A, B and C fires. As the foam product is water based, it should not be used on electrical fires due to the possibility of electrocution.

All fire extinguishers within NHSGG&C have clear and simple instructions printed on the side of the unit and all operate in a similar manner. The acronym 'PASS' can be used to remember the general instructions of use but please always refer to the instructions displayed on the unit:

- **Pull the Pin** at the top of the extinguisher. The pin releases a locking mechanism and will allow you to discharge the extinguisher.

- **Aim at the base of the fire**, **not the flames**. This is important - in order to put out the fire, you must extinguish the fuel.
- **Squeeze the lever slowly**. This will release the extinguishing agent in the extinguisher. If the handle is released, the discharge will stop.
- **Sweep from side to side**. Using a sweeping motion, move the fire extinguisher back and forth until the fire is completely out. Operate the extinguisher from a safe distance, several meters away if possible (or as per the distance instructions on the canister, if displayed) and with a door or exit route available to you at all times. Only move towards the fire once it has started to diminish.

It is important to ensure that the any extinguisher that is used in either re-filled or replaced. This can be arranged by contacting your Fire Safety Officer or Site Facilities Manager.

Fire Blankets are contained within a red sleeve and are suitable for Class A and B fires. They are commonly located in kitchen and laboratory areas to smother fire caused by fats or oils, or flammable chemicals. They can be particularly useful when trying to extinguish a person whose clothing has caught fire as they can be wrapped in the blanket. Instructions for use are displayed on the sleeve casing. The blanket should be placed carefully over the flames with hands and any loose clothing shielded from the fire. After use, the Fire Blanket should be inspected by the Fire Safety Officer to see if it is able to be re-used or whether a replacement needs to be provided.

It is important to remember, if you discover a fire, or suspect a fire is present:

- Raise the Alarm
- Contact the Emergency Services (either via Contact Centre or direct to 999)
- Follow the evacuation strategy outlined within your Fire Action Plan

Staff should only ever attempt to extinguish the smallest of fires, and a fire exit route should be free and available to use at all times (not impinged by the fire). Formal training is not required to use a portable fire fighting device – this is why portable fire fighting devices are located in public access areas, and contain simple instructions.