

**Annual Fire Safety Report to the Board
31st March 2022**

Presented for:	Information
Presented by:	Blue box
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Previous Committees	¼ report to the RMC

Please copy and paste ✓ against the relevant goal(s)

Trust Goals	
The best for patient safety, quality and experience	✓
The best place to work	
A centre for excellence for research, education and innovation	✓
Seamless integrated care across organisational boundaries	✓
Financial sustainability	✓

Trust Risks (Type & Category)				
Level 1 Risk	(✓)	Level 2 Risks	(Risk Appetite Scale)	Risk
Workforce Risk	✓	We will deliver safe and effective patient care, through the deployment of resources with the right mix of skills and capacity to do what is required. health and well-being of our staff to retain the appropriate level of resource to continue to meet the	Cautious	↔ (same)
Operational Risk	✓	We will protect the health and well-being of our patients and workforce by delivering services in line with or in excess of the minimum health & safety laws and guidelines	Cautious	↔ (same)
Clinical Risk	✓	We will provide high quality services to patients and manage risks that could limit the ability to achieve safe and effective care to our patients	Cautious	↔ (same)
Financial Risk	N/A	Not applicable to this paper	Minimal	↔ (same)
External Risk	✓	We will comply with or exceed all regulations, retain CQC registration and always operate within the law	Cautious	↔ (same)

Key points	
1. This paper is presented to the Board to provide assurance that fire safety is being managed in accordance with the Trusts statutory responsibilities under the Regulatory Reform (Fire Safety) Order 2005. This paper acts as the Annual Statement of Fire Safety compliance in accordance with NHS Firecode.	For information

1. Summary

This paper is presented to the Board to provide assurance that fire safety is being managed in accordance with the Trusts statutory responsibilities under the Regulatory Reform (Fire Safety) Order 2005. This paper acts as the Annual Statement of Fire Safety compliance in accordance with NHS Firecode. The Board are requested to consider the paper and recommend it for signature by the CEO. Where there are deficiencies to articles in the Fire Safety Order, or requirements of Firecode, assurance is provided that action plans are in place to mitigate and reduce the risks identified. These reports are shared with West Yorkshire Fire and Rescue Service as the statutory enforcers of the Fire Safety Order.

There is no requirement to submit the Annual Certificate of Fire Safety Compliance to the NHSE, however, Firecode recommends as part of corporate governance arrangements, an Annual Fire Safety Statement of Compliance is still prepared locally.

The Associate Director of Estates Operations (who acts as Trust Fire Safety Manager) declares;

“All premises that the LTHT owns, occupies or manages have fire risk assessments that comply with the Regulatory Reform (Fire Safety) Order 2005 and that the organisation has developed a programme of work to eliminate or reduce as low as reasonably practicable the significant fire risks identified by the fire risk assessment process”.

During the period covered by this statement, the Trust has not been subject to any enforcement action by the Fire & Rescue Authority.

During the period covered by this report there have been no statutory audits by West Yorkshire Fire and Rescue Authority (WYFRA), however the Trust and WYFRA do meet and share information.

2. Background

The paper provides a high level summary of fire safety activity across the organisation to provide assurance that the Trust is discharging its statutory responsibilities. Having a robust fire safety management plan supports the Trust in achieving its aims and ambitions in the key areas of;

- The best for patient safety, quality and experience
- The best place to work
- A centre for excellence for research, education and innovation
- Seamless integrated care across organisational boundaries
- Financial sustainability

3. Assurance Information

Fire safety policy – an approved policy is in place, this was last approved in 2021.

Fire Safety Strategy – a 3 year fire safety strategy that supports the other strategic visions and strategies such as BtLW, the Estate Strategy and Security Strategy was approved in December 2021 and is distributed with this report. The link here is to the Trust Fire Safety Strategy for 2021 - 2024 <http://flipbooks.leedsth.nhs.uk/20211022004/>

Fire Safety Department Operational Plan and Strategic Leadership Plan – see detail of these at Appendix A and B. These plans are linked to the Trust vision and values, LIM and CQC KLOE.

Assurance – Appendix C provides assurance / compliance information on:

- Fire alarm activity
- Fire safety training
- Fire risk assessment

Risk Register – the fire related risks on the Estates and Facilities Risk Register have been reviewed in the last month and updated as appropriate. These risks influence the capital allocation for fire safety.

Capital programme – the 2021/22 capital programme had an allocation for works associated with fire risk assessment. There has also be other fire safety works carried out as part of other capital schemes where improvements are made to areas; such as ward refurbishments and during other relevant schemes, this would include upgrades for fire alarm and detection systems and fire compartmentation. Capital has been invested in fire alarm and detection systems, emergency lighting and compartmentation. The 2022/23 is being prepared at this time.

The risks below are on the E&F Risk Register.

Risk ID	Score	Risk
7518	9	FIRE SAFETY COMPARTMENTATION INTEGRITY- There is a risk that some locations do not meet fire compartmentation standards and guidance. This is due to more stringent requirements introduced since the buildings were originally constructed, condition of dampers in ventilation ducts and legacy issues from the installation of IT infrastructure. In the event of a fire, smoke & flames could spread more easily to adjacent areas increasing property damage, risks to occupants & potential interruption to patient care. As stated in a previous section under capital - investment from, the 2021/22 will address some of these risks
7248	9	There is a risk of fire alarm systems, emergency lighting and gas suppressant systems becoming less reliable or failing due to pressures on capital funding for periodic replacement & upgrading works. This could result in limitations in the use on those areas for delivery of clinical services which would impact on patient care. As stated in a previous section under capital - investment from, the 2021/22 will address some of these risks

Fire safety risk assessment (FRA) – a rolling programme of review of FRA’s continues with findings being recorded and where necessary remedial actions being put into place. Compliance is detailed Appendix C.

Fire incidents – there have been no significant fire incidents during the last 12 months. There have been three minor fires in a particular type of DIT charging cable and whilst the consequences of these incidents have been low, the Fire Team are working with DIT colleagues to reduce this risk. Other minor incidents have included an endoscope wash tube and a UPS battery pack.

False alarms activity – false alarm activity is monitored by the Fire Team and up to date detail of cause, locations, trends and other data is available from the Fire Team. Meetings with the Fire

Authority to discuss false alarm activity occur as required, the last one being in March 2022. The weekly and monthly reporting system continues to detail trends and causes of fire alarm activations. This weekly/monthly report is a focus at the weekly Fire Safety Huddles so reductions can be sought. An example of the monthly reporting / data is in Appendix C.

Fire safety training – compliance is at 88%¹. This figure is an increase of 4% on the previous report. This report includes analysis of CSU compliance and the Fire Team targets these areas to increase compliance, see Appendix D.

West Yorkshire Fire Service (WYFRS) – the working relationship between the two organisations continues to be positive. There are no outstanding issues of discussion to report. As both organisation recover from COVID the Memorandum of Understanding between the two organisations will be discussed with a view to resigning. The Trust is also discussing some live exercises after COVID restrictions are fully lifted.

PFI premises – this report includes fire safety provisions in PFI buildings that form part of Trust occupied premises. Good working relations are in place between the Trust Fire Team and PFI Partners.

External partnership working – Leeds and York Partnership Foundation Trust (LYPFT) - the Trust is providing a full service of fire safety provision to our colleagues at LYPFT. This is being delivered via an SLA. During the last 12 months The Fire Team has been the expert reference for the Elland Road Vaccination HUB, NHS Nightingale Yorkshire and the Humber and the Surge HUB at SJUH.

NHS Nightingale Surge HUB – as host Trust overseeing the build for the NE&Y Regional Surge Hub, the Trust Fire Safety Team acted on behalf of the Trust and local partners as expert reference on the Surge Hub at SJUH. As part of the review of the Hub and the nationally developed fire strategy, concern was raised with regards to the patient category for occupancy and the general fire safety arrangements. These concerns were raised with Trust colleagues and to NHSE. A full document of concerns and derogations is available and a locally produced fire risk assessment.

COVID – as part of the Trust recovery from COVID, the Fire Team continue to assess the impact on fire safety by the measures being implemented to deal with the reset and recovery. The Fire Team continue to carry out dynamic risk assessments, examples of this are:

- Where screens have been provided to divide areas for social distancing and separation
- Opening up of areas for varied use to support COVID activity recovery
- Waste bin locations for PPE
- Supporting Surge Plans - especially around oxygen enriched atmospheres
- Oxygen – the Trust Fire Team has produced an SBAR on fire safety and oxygen and submitted it to the Trust Med Gas Group for action / discussion in July 2021. An action plans for any issues will be completed. Oxygen monitors are being risk assessed and provided as required with supporting action cards.

Regulatory Reform (Fire Safety) Order 2005 - Appendix E references the Fire Safety Articles of compliance and the Trusts compliance against each statutory requirement

¹ The figure at Appendix D is 4% lower as it represents the position in December 2021 for the Q3 fire performance report. The figure in the paragraph is the latest compliance at the time of writing the report

Hospitals of the Future and BtLW and Pathology – the Fire Safety Team have been fully engaged in the enabling works, demolition and planning phases of both these projects. The work includes;

- Involvement in the relocation of services prior to demolition, i.e. fire alarms and other fire safety systems and re-routing of means of escape
- Fire safety impacts of asbestos removal and fire safety impacts of demolition
- Fire Brigade access during demolition phases
- Changes to fire alarm call procedures in affected areas
- Reviewing design proposals and design standards with regards fire for new buildings.

Top six priorities for the fire Safety Team - 2022 - 2023 - derived from Fire Safety Huddles²

Q4 Priority Objectives	Link to Leeds Way/CQC/LIM/People Priorities
Review of the fire safety - oxygen SBAR produced - work with colleagues to implement any actions and evolving issues from the pandemic	Safe Effective
Fire risk assessment action tracker - ensure it is an accurate reflection of current status and maximise the electronic data capture	LIM
Peripheral fire procedures being reviewed and changes implemented as required	LIM Safe
Continue to interpret the changes coming out of the National fire Safety review after Grenfell ³ and the new Fire Safety Bill to assess changes to the NHS / Trust. SBAR to be produced	Safe Effective
Continued use data sets - such as weekly/monthly fire alarm activity reports to drive sustainable improvements	LIM Most informed workforce
Whole floor, block, site evacuation plans - work with EP colleagues on the DRAFT strategy and look at practical testing / procedures associated with the guidance document	Safe Effective

Training - Training for the Fire Team has included;

2021/22 Training	Link to Leeds Way/CQC/LIM/People Priorities
In October 21 the Team completed a table top exercise that dealt with a persons reported car fire in the multi storey car park at SJUH	Safe Effective
In November 21 the Team took part in a fire scenario exercise run by Emergency Preparedness colleagues that address oxygen supplies / capacities during evacuations	Safe Effective
Each month, the Fire Team completes three tool box talks	Effective Well Led
In November 21 the Team facilitated a Seacroft Heads of Service / Users table top exercise dealing with evacuation	Safe Effective

² These continue from Q3 as they are on-going service developments or improvements

³ KLOE after COVID have seen these national inquiries restart

4. Proposal

Associate Director Estates Ops, Fire and Security will continue to provide regular reports to the Risk Management Committee and Board as requested.

5. Financial Implications and Risk

Cost improvements will continue to be delivered through best value on 2022/23 maintenance contracts, reducing risk of litigation and enforcement.

6. Communication and Involvement

Staff involvement and the communication of fire safety information is a requirement of the Fire Safety Order. Fire safety evacuation plans and fire action cards are in place across Trust premises. The fire safety training programme delivers key messages and encourages staff involvement in terms of them taking ownership of fire safety. In 2021/2 the Team have started including regular updates for staff on fire safety matters as part of the "taking ownership agenda", these are include monthly in the Trust updates.

7. Equality Analysis

This paper has been assessed for its impact upon equality. The Leeds Teaching Hospitals NHS Trust is committed to ensuring that the way that we provide services and the way we recruit and treat staff reflects individual needs, promotes equality and does not discriminate unfairly against any particular individual or group.

8. Publication under Freedom of Information Act

This paper has been made available under the Freedom of Information Act 2000

9. Recommendation

This paper has been presented for information and assurance.

10. Supporting Information

See Appendices at end of this report. Any further clarification or evidence is available from the Associate Director Estates Ops, Fire and Security.

Appendix A - Fire Safety Operational Plan 2021/22 (Financial Year)

This plan is linked to the Trusts values and the vision by protecting all those who resort to our premises and our assets.

Fire Operational Plan 2021 - 2022				
CQC:	Objective:	Detail:	Milestones:	Expected Completion:
12 MONTH PLAN:				
Fire Safety				
Well Led	Review of fire alarm contractors working procedures, fire alarm isolations and fire stopping	Permit to work, tool box talks, audits some contractors	permit to work	Completed
Effective	Increase use of BORIS	Have all FRA's on BORIS and start generating a risk register automatically out of BORIS finding	All FRA's on BORIS and can be sent back to users	On-going
Responsive	E - learning for specific user groups and "face to face e-learning drop in sessions "	We have been using the same fire videos for almost a decade now and it needs updating.	Start zoom sessions for staff	On-going
Caring	Understand stress faced by staff and work on reduction where possible	Undertake a stress survey following staff sickness	When survey completed and results found	Apr-21 & on-going
Safe	Compliance with FRA	Ensure that the trust is 100% compliant with fire risk assessment	FRA 100% end of march then programme for moving forwards	Apr-21 & on-going
CQC:	Objective:	Detail:	Milestones:	Expected Completion:
5 YEAR PLAN:				
Fire Safety				
Safe	Have a fire training facility to enable hands on fire training and practical fire evacuation training, both horizontal and vertical	Ward and block based practical fire training is not regularly practiced. Have an area which could be set-up like a ward and be able to practice vertically evacuation	1) Buy in from stakeholders, 2) Area identified, 3) area being used for fire training	Feb-26
Well Led	Gain control of disused building and areas around the Trust and ensure they are secure and of minimal fire risk.	As the Trust rationalises its estate, the use of areas is changing. Where areas are becoming vacant they need to be completely vacated including all furnishings and waste, secures and regular patrols/ visits initiated.	This will be an on-going process.	on-going over at least the duration of BtLW

Appendix B - Strategic Leadership Plan - 2021/22

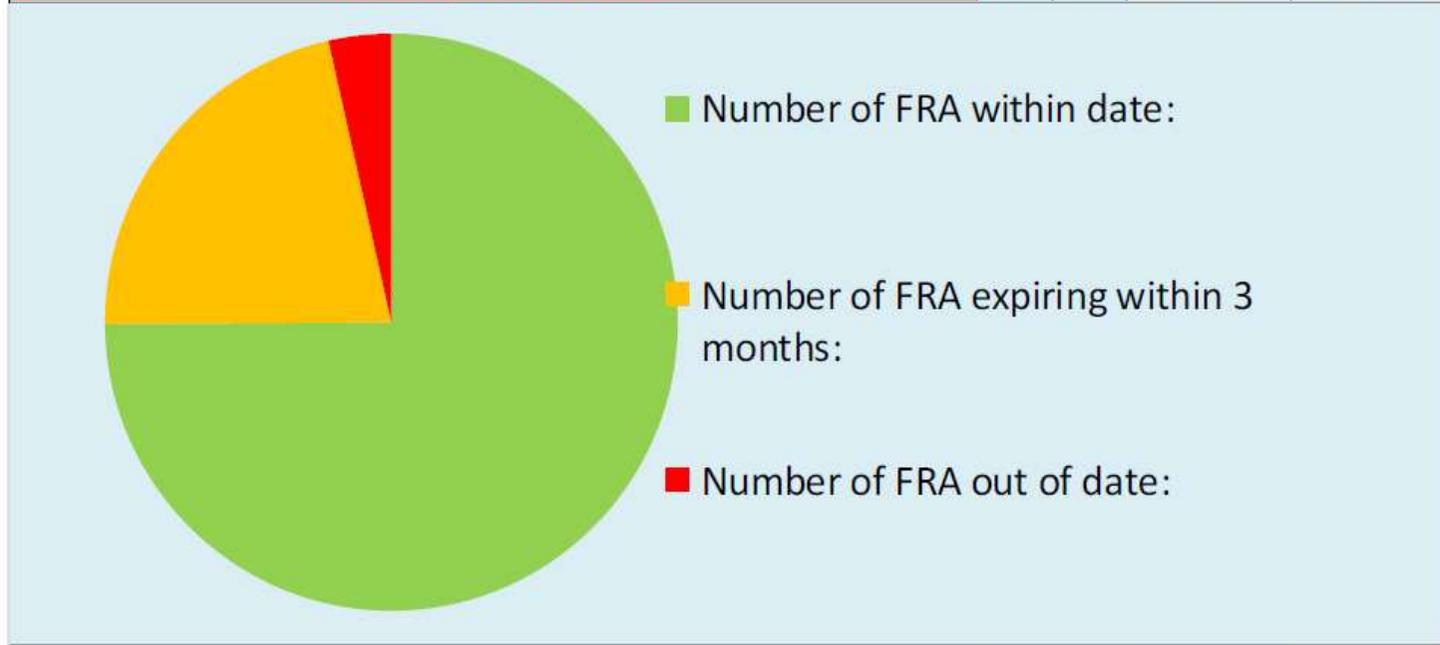
Estates, Fire, Security and Car Parking Operational Plan 2021 - 2022							
CQC / Trust ⁴	Objective	Detail	Milestones	Expected completion	SRO	Comments	Completed
Well Led (Financial sustainability)	Complete WRP as predicted and provide regular updates on progress as required	Provide monthly updates as part of performance report to PA	WRP on target month by month	Mar-22	Heads of Services - Estates, Fire, Security	WRP progressing and under review	Completed
Effective (Staff engagement / sustainability)	Complete Fire Safety Management Plan / Strategy	Complete the strategy and any consultation and Exec sign off	DRAFT Sign off Launch Implementation	Mar-22	GM, Mark Cox	DRAFT expected Sept 21	Completed
Responsive (Staff engagement)	GAP analysis on fire safety training and reflect best learning suggestions from staff	Carry out survey Of "what makes staff learn and remember" - best methods	DRAFT Sign off Launch Implementation	Mar-22	Mark Cox	Work on-going and various comms and ideas being drafted	
Caring (People priorities)	Meaningful and measurable staff engagement	Have the most engaged staff in E&F	Staff feel engaged Decisions we make are explained	April 21 and on-going	Heads of Services - Estates, Fire, Security	Staff engagement forum established and supported with an action plan	Completed but on-going
Responsive (Financial sustainability)	Know are business	DRAFT Performance DATA Submission dates Launch Implementation	First performance DATA completed by 30/04/21	April 21 and on-going	Heads of Services - Estates, Fire, Security	Performance report in place, supported by weekly fire safety huddle and report out monthly	Completed but on-going
Effective (Accountable)	Implement and maintain performance standards across all services	Provide monthly performance report to PA	DRAFT Performance DATA Submission dates Launch Implementation	April 21 and on-going	Heads of Services - Estates, Fire, Security	As above - the two objectives are linked	Completed but on-going

⁴ These are linked to the CQC 5 key themes and wider Trust objectives and / or Leeds Way Values

FIRE RISK ASSESSMENTS - Update - February 2022

FIRE RISK ASSESSMENTS - Update:

TOTAL Number of LTHT Fire Risk Assessments:	482			Last Month
Number of FRA within date:	361	75%	96.47%	95.23%
Number of FRA expiring within 3 months:	104	22%		
Number of FRA out of date:	17	4%	01/02/2022	01/01/2022



FIRE RISK ASSESSMENTS - Update - February 2022

Fire Risk Assessments Update - continued:

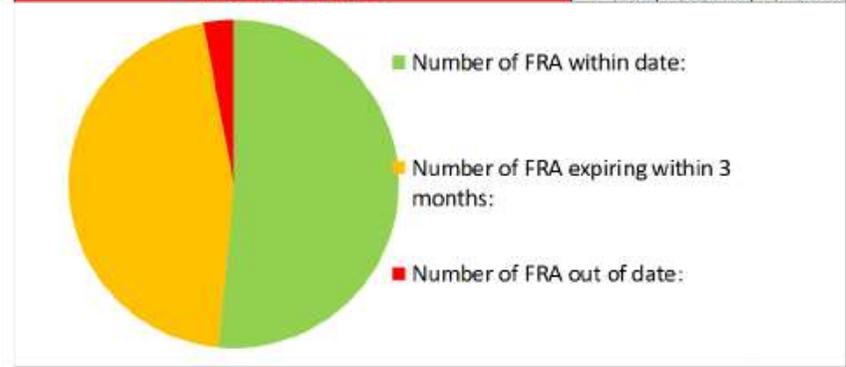
• SJUH:

TOTAL Number of SJUH Fire Risk Assessments:	212		Last Month
Number of FRA within date:	199	94%	99.53%
Number of FRA expiring within 3 months:	12	6%	
Number of FRA out of date:	1	0%	



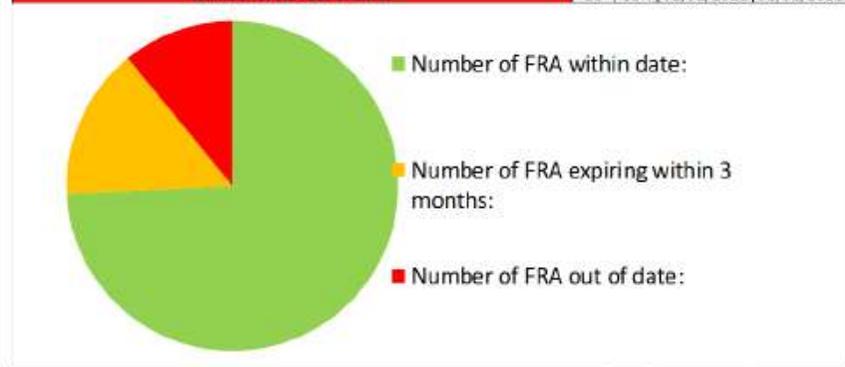
• LGI:

TOTAL Number of LGI Fire Risk Assessments:	169		Last Month
Number of FRA within date:	87	51%	97.04%
Number of FRA expiring within 3 months:	77	46%	
Number of FRA out of date:	5	3%	



• Peripheral Sites:

TOTAL Number of Peripheral Sites Fire Risk Assessments:	101		Last Month
Number of FRA within date:	75	74%	89.11%
Number of FRA expiring within 3 months:	15	15%	
Number of FRA out of date:	11	11%	



• External Properties:

TOTAL Number of External Properties Fire Risk Assessments:	12		Last Month
Number of FRA within date:	4	33%	75.00%
Number of FRA expiring within 3 months:	5	42%	
Number of FRA out of date:	3	25%	



Appendix D - Assurance information re fire safety training

FIRE TRAINING COMPETENCY - Update:

Compliance by CSU		TOTAL No. of Staff Out of Date
Training Grade Doctors	50%	516
Abdominal Medicine & Surgery	67%	204
Pathology	81%	155
Leeds Dental Institute	83%	77
Medical Directorate	83%	21
Management Executive	83%	10
Risk & Compliance	83%	4
Childrens	84%	255
Centre for Neurosciences	84%	83
Estates & Facilities	85%	523
Trauma and Related Services	86%	76
Directorate of Research & Innovation	86%	54
Adult Critical Care	87%	269
Oncology	87%	184
Womens	87%	109
Radiology	88%	106
Cardio-Respiratory	88%	100
Urgent Care	88%	88
Medicines Management & Pharmacy Services	88%	85
Specialty and Integrated Medicine	88%	84
Chapel Allerton	88%	57
Chief Operating Officer	88%	13
Theatres & Anaesthesia	89%	135
Outpatients	89%	58
Head & Neck	89%	31
Chief Nurse	89%	17
Adult Therapies	90%	85
Human Resources	90%	21
Informatics	92%	34
Finance	94%	19



Annex E Regulatory Reform (Fire Safety) Order 2005 - LTHT Compliance against Articles set out in the Order

Article	Actions Taken	Compliance Achieved	Actions Required
8 – Duty to take general fire precautions	Where risks are identified in risk assessments or by other means steps are taken to remove, reduce or mitigate them. Where risk cannot be removed they are recorded and as necessary placed on the risk register	Yes	Ensure risk register is kept up to date
9 – Risk Assessment	The Trust holds over 500 fire risk assessments. These are on a rolling programme of review and update. Recruit a fire safety officer to concentrate on the fire risk assessment programme	Yes	Risk assessments - as an expected response to Grenfell all FRA's to be reviewed in a 12 month period. As such LTH programme has seen an increase in numbers required in year. Programme of review in place and on-going. All areas will off been reviewed by Dec 2020.
10 – Principles of prevention to be applied	Where risks are identified actions are taken. Information is shared with staff and staff involvement is encouraged	Yes	Continue staff involvement and responsibilities in fire training sessions. Capital programmed is influenced by risks. RMC report
11 – Fire Safety Arrangements	The Trust has designated a Fire Manager and staff to assist the position (Fire Engineer and Fire Training Officer)	Yes	None
12 – Elimination or reduction of risks from dangerous substances	Substances on site are monitored and where possible removed or replaced with less dangerous ones. Where they can't be replaced they are kept to a minimum and identified in risk assessment e.g. Acetylene	Yes	Continue to monitor remove where possible.
13 – Fire-fighting and fire detection	Fire alarms are provided in all buildings with the majority achieving L1 standard. Some systems are becoming older and more prone to faults. These have been placed on the risk register. Fire extinguishers are provided in accordance with the HTM's and are accessible to staff and visitors.	Yes	Continue with fire alarm upgrades and replacement where necessary. Capital programme informed, risk register populated
14 – Emergency routes and exits	Exit routes are routinely checked to ensure they are clear. Staff report where obstructions are found.	Yes	Identify where doors are locked on the fire alarm and implement a PPM to ensure they unlock in the event of a fire. % check carried out no issues identified. Fire doors on escape routes are checked on a regular PPM by the joiners. Some door security devices on fire exits are not routinely checked to ensure they unlock on activation of the fire alarm

15 – Procedures for serious and imminent danger and for danger areas	<p>The Trust has engineers on site 24/7 at LGI and SJUH who attend fire calls.</p> <p>The peripheral sites have on call engineers and manager who attend 24/7 along with Security however they may not be on site at the time. This can lead to delays in meeting the Fire Service and in fire alarms being silenced and reset.</p>	Yes	Review fire calls and attendance to peripheral sites. This is on-going as the profile of occupancy changes on peripheral sites. Main issue is timely attendance on site by first responders to reset systems, provide professional advice. They travel from main sites. Evacuation not delayed due to this as this would be on site teams in occupied areas.
16 – Additional emergency measures in respect of dangerous substances	The Trust has an Emergency Preparedness Team that runs a number of exercises each year to test the MAJAX plan.	Yes	None
17 – Maintenance	<p>Maintenance contracts are in place for all fire equipment such as fire alarms extinguisher and fixed fire fighting systems, heli deck equipment and fire dampers. These are tested by external companies and are tested in line with the British Standards.</p> <p>Fire doors have PPMs for routine maintenance, frequency of these has been risk assessed. Some areas are still requiring new PPM's to be written. This is predominantly the old site at the LGI.</p> <p>Structural fire resistance and fire compartmentation has been checked in some blocks as part of scheme works however there is no routine inspection or maintenance programme in place.</p>	<p>Yes for fire fighting equipment</p> <p>Not fully for fire doors - old site.</p> <p>Not fully for structural fire resistance and compartmentation.</p>	<p>Complete fire doors PPM's for old site</p> <p>Fire compartmentation and structural fire resistance has had a rolling programme in place and continues and checks on a regular basis must continue. Write a risk assessment and look at implementing a rolling programme of inspections after schemes complete. Full compliance is assessed as challenging due to huge requirements of labour, disruption to departments, infection prevention issues and cost involved. This must continue to be supported by capital programme.</p>
18 – Safety assistance	This is provided to the Fire Safety Manager in the form of the Fire Engineer and Fire Training Officer, along with good cooperation from Estates and facilities and out PFI partners	Yes	None
19 – Provision of information to employees	<p>Risk assessments are available upon request and are sent to departments when significant issues are found.</p> <p>Fire action notices, fire action cards and fire evacuation plans are on the walls in departments.</p>	Yes	None
20 – Provision of information to employers and the self-employed from outside undertakings	Regular fire training sessions are provided to non-Trust employees working within the Trust. Hazard signs are provided alerting the Fire Service to the presence of acetylene and oxygen on the outside of buildings. Co-operation with WYFRS ensures they are familiar with the buildings and the risk within them.	Yes	None

21 – Training	<p>All staff are required to undertake annual fire training.</p> <p>Training is available to all staff who work in the Trust, be them directly employed, contractors or volunteers.</p> <p>Training is provided either by face to face sessions or via e-learning. For staff with no patient contact this can take the form of a fire evacuation of the building.</p> <p>The current status is 87% of staff are in date for fire training. Trust target is 85%, but fire safety team target is 100%</p>	Yes	<p>Continue to push fire training and look for innovative ways to keep training specific and interesting to staff to encourage attendance.</p> <p>TNA in terms of electronic training options to reviewed with a year of face to face for clinical teams to be evaluated,</p>
22 – Co-operation and co-ordination	<p>The Trust has a Concordat with WYFRS which shows a close working relationship. We also hold over 30 joint exercises per year based on the SJUH Site with them.</p> <p>The Trust works closely with our PFI providers, liaising on schemes, offering advice and providing risk assessments.</p> <p>The Trust works closely with several external organisations including the Leeds University and Leeds Beckett University, YAA, LCC, Yorkshire Water, WYP and WYFRS exchanging information which may impact on each other’s service and providing training to staff.</p>	Yes	None
23 – General duties of employees at work	Staff regularly contact the Fire Safety Team to raise potential issues or to ask questions	Yes	Continue with Staff training

