**Fire Safety Policy**

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**\*\* The Health, Safety and Risk Management Handbook**

**\*\*\*Life Safety Fire Risk Assessment Certificate of Conformity (Peninsula) -expiry date 21 August 2026 – copy on internal website**

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Introduction

## Policy statement

Sheerwater Health Centre is committed to providing a safe environment for its employees, contractors, visitors and members of the public. Part of this responsibility is the provision and management of fire safety systems and procedures. This policy outlines the fire safety arrangements, procedures and responsibilities in place at the organisation.

The requirements of the [Regulatory Reform (Fire Safety) Order 2005](https://www.legislation.gov.uk/uksi/2005/1541/contents/made) place duties on “responsible persons” who are those who have control over the premises and are required to:

* Assess and reduce the potential fire risks and spread of fire in and around the building
* Assess the suitability of the means of escape from the premises
* Ensure those means of escape are available to use
* Ensure the provision of a means of fire detection, fire warning and firefighting equipment
* Establish the action to be taken in the event of a fire
* Provide instruction and training to all employees

This policy should be read in conjunction with:

* **Fire marshal or warden guidance**
* **Personal and General Emergency Evacuation Plan Policy**
* CQC GP Mythbuster 67 – Reasonable adjustments for disabled people

## Status

The organisation aims to design and implement policies and procedures that meet the diverse needs of our service and workforce, ensuring that none are placed at a disadvantage over others, in accordance with the [Equality Act 2010](https://www.legislation.gov.uk/ukpga/2010/15/contents). Consideration has been given to the impact this policy might have with regard to the individual protected characteristics of those to whom it applies.

This document and any procedures contained within it are non-contractual and may be modified or withdrawn at any time. For the avoidance of doubt, it does not form part of your contract of employment.

# Definition of terms

## Responsible person

In a workplace, this is the employer and any other person who may have control of any part of the premises, e.g., the occupier, employer, building manager. The responsible person must carry out a fire risk assessment which must focus on the safety of all relevant persons in case of fire.

The nominated responsible person for overseeing fire safety systems and procedures at Sheerwater Health Centre is Nine Taylor (practice manager) and supported by Elisabeth Hawkey (Consultant).

## Fire marshal or warden

Nominated individual(s) who are responsible for enforcing fire regulation standards.

The nominated fire marshal(s) at Sheerwater Health Centre are Practice Manager and Deputy Manager who undertake an important and essential part of an organisation’s fire safety and prevention strategy. Coupled with having important duties to conduct in the event of an outbreak of fire, marshals, along with all other employees, have a day-to-day responsibility to ensure that the risks of an outbreak of fire are minimised.

Full details of the fire marshal responsibilities can be found in the **Fire Marshal or Warden Guidance** document.

## Relevant persons

Relevant persons include everyone who may be affected and those at special risk such as disabled people, those you know have special needs and children.

## Fire risk assessment

A fire risk assessment is a process involving a systematic evaluation of the factors that determine the hazard from fire, the likelihood that there will be a fire and the

consequences if one were to occur.

## Personal emergency evacuation plan (PEEP)

A PEEP is a bespoke escape plan for employees who may not be able to reach a place of safety unaided or within a satisfactory period, as determined by the fire risk assessment, in the event of an emergency.

## General emergency evacuation plan (GEEP)

A GEEP is used in premises open to members of the public and, furthermore, it is also used in places of work with a transient workforce. It focuses on visitors to the building who have a disability or mobility impairment and may not be able to evacuate unaided.

## Fire logbook

A fire logbook assists the organisation in complying with the Fire Safety Order. The fire logbook is the record of building maintenance and tests carried out on the organisation’s fire protection systems.

# Fire prevention and control

## Legislation

The following legislation supports fire safety:

* [The Health and Safety at Work etc. Act 1974](https://www.legislation.gov.uk/ukpga/1974/37/contents)
* [1989 The Electricity at Work Regulations](https://www.legislation.gov.uk/uksi/1989/635/contents/made)
* [The Management of Health and Safety at Work Regulations 1999](https://www.legislation.gov.uk/uksi/1999/3242/made)
* [The Regulatory Reform (Fire Safety) Order 2005](https://www.legislation.gov.uk/uksi/2005/1541/contents/made)
* [The Fire Act (Scotland) 2005](https://www.legislation.gov.uk/asp/2005/5/contents)
* [The Fire Safety (Scotland) Regulations 2006](https://www.legislation.gov.uk/ssi/2006/456/contents/made)
* [Fire Safety Act 2021 (Wales)](https://gov.wales/fire-safety-act-2021-html)
* [The Fire Safety Regulations (Northern Ireland) 2010](https://www.legislation.gov.uk/nisr/2010/325/contents/made)
* [Equality Act 2010](https://www.legislation.gov.uk/ukpga/2010/15/contents)

## Governance

Reference will also be made to latest guidance including:

* UK [Fire safety in the workplace](https://www.gov.uk/workplace-fire-safety-your-responsibilities)
* Scotland [Non-domestic fire safety](http://www.scotland.gov.uk/Topics/Justice/policies/police-fire-rescue/fire/FireLaw)

[NHS National Services Scotland (NSS) Fire Safety](https://www.nss.nhs.scot/health-facilities/property-and-capital-planning/fire-safety/)

* Wales [Guidance on fire](https://gov.wales/fire-rescue)
* Northern Ireland [Fire safety](https://www.hseni.gov.uk/articles/fire-safety)

## Overview

The London Fire Brigade has [specified the steps involved](https://www.london-fire.gov.uk/safety/the-workplace/fire-risk-assessments-your-responsibilities/) in the prevention and control of fire.

For the purposes of this policy, six key areas will be covered:

1. Risk assessment
2. Control measures
3. Emergency planning
4. Testing and maintenance
5. Training
6. Recording and review

# Fire risk assessment

## Requirement

The organisation has a legal requirement under the [Fire Safety Order](https://www.london-fire.gov.uk/media/4821/gn_66_london-fire-brigade-fire-safety-guidance-note.pdf) to assess its workplaces to ensure that those on the premises are not at risk of injury from the effects of fire and smoke. The order gives guidance on how such a risk assessment might be conducted.

For smaller and less complex premises, and if the responsible person is competent in fire risk assessment and has the knowledge relevant to the premises, it is possible that they will be able to carry out these steps themselves using a [Fire Risk Assessment Template](https://www.shropshirefire.gov.uk/safety-at-work/generic-fire-risk-assessment-template).

For larger or more complex premises, an assessment may be [outsourced to a competent person](https://www.london-fire.gov.uk/media/5496/fsf_guide_october_20.pdf) with comprehensive training, knowledge and experience in fire risk assessment. For Sheerwater Health Centre, Fire Risk Certificate of Conformity is provided by Peninsula.

Any significant findings will be recorded to include:

* Hazards identified
* Actions taken to remove hazard or reduce risk
* Those identified as at risk (relevant persons)
* Protective measures taken to prevent/reduce risk to those at risk
* Action needed in the event of fire
* The information and training given to those identified as at risk

Any fire risk assessment must take into account any increased risk due to disability. See [8.4](#_Personal_and_General) for further guidance.

Fire risk assessments will be reviewed annually or sooner if significant changes occur.

A simple fire safety checklist can be found at [Annex A](#_Annex_C_–) although note that this does not remove the requirement for a full risk assessment but may be a useful guide should a more frequent risk assessment be indicated.

# Control measures

## Preventions

Once the risks have been identified, HSE suggest that the following [control measures](https://www.hse.gov.uk/toolbox/fire.htm) are considered:

* Keep sources of ignition and flammable substances apart
* Avoid accidental fires, e.g., ensure heaters cannot be knocked over
* Always ensure good housekeeping, e.g., avoid build-up of rubbish
* Consider how to detect fires and how to warn people quickly if they start, e.g., installing smoke alarms and fire alarms or bells
* Have the correct firefighting equipment for putting a fire out quickly
* Always keep fire exits and escape routes clearly marked and unobstructed
* Ensure your workers receive appropriate training on procedures they need to follow, including fire drills
* Review and update your risk assessment regularly

## Employees’ responsibilities

Employees are required to:

* Evacuate on hearing a fire alarm
* Be responsible for their own safety
* Know the evacuation procedures
* Raise any specialist requirement
* Take reasonable care of others
* Co-operate with the organisation on fire safety issues
* Not interfere or misuse anything provided for fire safety
* Report any fire safety problems, e.g., blocked fire exits
* Report any accidents or near misses

## Co-operation and co-ordination

The organisation will ensure that, if there are tenants sharing the premises, co-operation and co-ordination of any significant risks and resources will be shared to ensure others are not placed at risk if there is a fire.

A coordinated emergency plan will be established to operate effectively.

## Fire detection, fire warning and firefighting equipment

The organisation has fire safety systems installed and fire protection measures throughout the premises to protect all persons, building and contents. All fire safety equipment must be kept free from obstruction and fire extinguishers must not be removed or repositioned without consultation with the responsible person. Fire extinguishers have a tamper tag added to them and all staff are to be mindful of these tags.

The location and type of all fire safety equipment will be clearly annotated on the building plan and signs have been placed throughout the premises to identify these. Any movement or damage to equipment provided for fire safety purposes must be reported immediately to the practice manager.

## Fire action signage

Fire action notices are displayed throughout the organisation and can be found on exit routes adjacent to the fire alarm call points or fire extinguishers, the location of which will be identified during the risk assessment.

The location of fire action notices will be identified through the risk assessment process and marked with HSE compliant signage.

## Fire doors, emergency lighting and means of escape

Fire doors must be kept closed at all times (unless they are doors which automatically close when the alarm is sounded) to maintain compartmentation of the building and to prevent the spread of fire, smoke and toxic fumes.

Corridors, stairways and landings are classed as escape routes and as such should be fit for purpose, kept clear and capable of safely evacuating staff, patients and visitors at any time. Any fire corridor and final exits must have suitable emergency lighting in place and be clearly marked with directional signage that highlights the exit route. Final exit doors are marked with HSE compliant signage and must be kept clear at all times to allow for egress from the building in an emergency. Any issues with means of escape must be reported immediately to the practice manager.

The location of all fire doors and emergency lights will be clearly annotated on the building plan.

## Flammable substances

Hazardous substances must be stored, used and disposed of in accordance with COSHH safety requirements, safe working practices and manufacturers’ instructions.

The location of all flammable substances will be marked with HSE compliant signage and annotated on the building plan. Any concerns with the storage or handling of flammable substances must be reported immediately to the practice manager.

Further reading on COSHH can be found in both the Safe handling of chemicals policy and the COSHH risk assessment guidance document.

# Emergency planning

## Fire safety and evacuation plans

Emergency and evacuation plans must not depend on the fire and rescue service to evacuate persons. However, the organisation will consult with the fire and rescue service when planning and determining an appropriate and effective evacuation strategy. Furthermore, the organisation will identify the most effective means for checking everyone on the premises is safely evacuated.

Guidance on the minimum requirements for such a plan can be found at the Gov.uk webpage titled [Fire Safety in the Workplace](file://C:\Users\medcomp\Desktop\The%20requirements%20of%20the%20Regulatory%20Reform%20(Fire%20Safety)%20Order%202005%20place%20duties%20on%20). Consideration will be given to persons with disability when putting together an evacuation plan and as detailed at [Section 6.4](#_Personal_and_General).

## Evacuation strategy and planning

As part of the fire planning process, the responsible person will ensure that the most effective means for evacuation have been considered and that there are routine drills to practice evacuation.

The following posters can assist the staff to understand what is required in an emergency evacuation:

* [In Case of Fire… Know the Drill](https://practiceindex.co.uk/gp/forum/resources/in-case-of-fire-poster.1436/?fromcat=75)
* [Fire Assembly Point](https://practiceindex.co.uk/gp/forum/resources/fire-assembly-point-poster.1614/?fromcat=75)

## Lifts

Should there be any fire alarm sounding, or evidence of a fire, then using the lift as a means of escape is not permitted due to both the potential delay in evacuation and the potential to be trapped inside should the lift fail during operation.

A sign to advise that the lift should not be used in the event of a fire can be found [here](https://practiceindex.co.uk/gp/forum/resources/in-case-of-fire-do-not-use-the-lift-poster.1930/).

## Personal and general emergency evacuation plans

The [Fire Safety Order 2005](https://www.legislation.gov.uk/uksi/2005/1541/contents/made) states that everyone, including those at additional risk such as the disabled, vulnerable and the mobility impaired, must be able to evacuate safely in the event of a fire or emergency evacuation.

Full guidance on developing a personal emergency evacuation plan (PEEP) and a general emergency evacuation plan (GEEP) can be found in the **Personal and General Emergency Evacuation Plan Policy.**

# Testing and maintenance

## Overview

Fire safety equipment (including detection, alarm systems, emergency lighting, fire extinguishers and signage) and fire protection measures (including fire doors, means of escape and final exit doors) are subject to regular testing, inspection and maintenance to ensure that they remain in good working order.

## In-house safety checks

Nominated individuals will carry out the following safety checks:

|  |  |
| --- | --- |
| **Frequency** | **Task** |
| Daily | Routine checks of final exit doors to ensure clear and mechanism to open is functioning, check emergency light indicators are showing, light is in working order and check fire panel is in normal mode. |
| Weekly | Fire panel test to include testing of panel (sounding alarm), check of all break call points (in rotation) and check functioning of automatic fire doors and door guards. |
| Monthly | [Emergency light “flick” test](https://www.thefpa.co.uk/news/fire-safety-advice-and-guidance/how-to-test-emergency-lighting), [visual inspection of extinguishers](https://surreyfire.co.uk/how-often-should-fire-extinguishers-be-serviced/) and fire doors. |

## External servicing and maintenance

Servicing and safety checks must be carried out by competent, approved engineers.

All periodic testing, inspections and maintenance must be recorded and retained in a fire safety logbook.

External fire safety checks and servicing will include the following:

|  |  |  |
| --- | --- | --- |
| **Equipment** | **Frequency** | **Type** |
| Emergency lighting | Annual | Full test |
| Fire extinguishers | Annual | Full test |
| Fixed wiring | 5-yearly | Full test |
| Fire panel | 6-monthly | Full test |
| Portable appliance testing | No dedicated timeframe (see below) | Full test |
|  |  |  |

## Portable appliance testing (PAT)

The [HSE](https://www.hse.gov.uk/electricity/faq-portable-appliance-testing.htm) webpage states the following:

*The Electricity at Work Regulations 1989 require that any electrical equipment that has the potential to cause injury is maintained in a safe condition.*

*However, the Regulations do not specify what needs to be done, by whom or how frequently (i.e., they don’t make inspection or testing of electrical appliances a legal requirement, nor do they make it a legal requirement to undertake this annually).*

At Sheerwater Health Centre , as we are deemed to be low risk, we will undertake portable appliance testing every 2 years.

Further reading can be sought from the **Portable Appliance Testing (PAT) and Calibration Testing Policy.**

# Training

## Requirement

All staff are required to complete fire safety training every two years. This is to include practical training by the use of regular fire evacuation drills.

All employees with an identified role, e.g., fire marshal, will receive sufficient training to ensure competency in their specific responsibilities.

The organisation will provide fire safety training for all employees.

All new employees will receive a fire safety briefing as part of their new starter induction training which will include:

* How to raise the alarm upon discovering a fire
* What action to take on hearing the fire alarm
* Walking the escape routes
* Identifying the location of fire extinguishers, fire exits, call points and assembly points
* Information on any local hazards

It should be noted that in Scotland, [The Fire (Scotland) Act 2005](https://www.legislation.gov.uk/asp/2005/5/contents) states that all employees should complete an annual course on fire training. Furthermore, under Firecode HTM 83, there is a requirement for NHS Scotland staff to undertake this training every 12 months.[[1]](#footnote-2)

Training relating to this policy is available on the **BlueStream Academy** and is also provided by in-house event:

|  |  |
| --- | --- |
|  |  |

# Record keeping and review

## Overview

The findings of any risk assessment, with those identified as at risk, control measures in place and actions taken to reduce risk to an acceptable level, must be recorded.

For larger premises, a floor plan indicating hazards and control measures can also be a useful way to present the measures in place. A simple floor plan will also be of use to any attending fire and rescue personnel.

Fire equipment which is subject to testing, inspection and maintenance must be recorded. Additionally, details of any incidents involving fire, however small, must be recorded.

Records of all fire safety training including refresher training must also be kept.

# Other considerations

## COVID-19 considerations

Should any incident occur, consideration must be given to any social distancing measures that may be in force when mustering at the fire muster point. Any fire risk assessment will be altered to reflect any local additional requirement.

## Visitors

All visitors, such as clinicians who use the premises, ARRS employees or other visitors to the organisation, should be made aware of any risks, including fire risks, and the location of fire safety equipment.

# Summary

Fire safety is the responsibility of all members of the team at Sheerwater Health Centre. Training and awareness are essential therefore, should any fire incident occur, staff members, visitors and patients can all evacuate in a safe and COVID secure manner.

# Annex A – Fire safety checklist

**Important information**

Under the [Regulatory Reform (Fire Safety) Order 2005](https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&cad=rja&uact=8&ved=2ahUKEwiaj7Xg2aX5AhXEhFwKHUs6Ad8QFnoECAcQAQ&url=https%3A%2F%2Fwww.legislation.gov.uk%2Fuksi%2F2005%2F1541%2Fcontents%2Fmade&usg=AOvVaw0Z8sTzhrv2dTazNaRA6ua8), the duty to carry out and implement a fire risk assessment lies with the responsible person.

For smaller and less complex premises, it is possible that the responsible person will be able to carry out the risk assessment themselves. However, for larger or more complex premises an assessment may need to be conducted by a person who has comprehensive training, knowledge and experience in fire risk assessment.

Therefore, the responsible person may decide, given the nature of the premises or the people involved, that they do not have the necessary competence to discharge their duties under the Fire Safety Order and may seek the help of a competent person.

It should be noted that the completion of this checklist does not result in the preparation of a fire risk assessment but gives an indication of the main areas that should be considered and can also be used to support the fire risk assessment process by carrying out regular fire safety checks.

|  |  |  |  |
| --- | --- | --- | --- |
| **No** | **Are the following satisfactory?** | **Yes** | **Action** |
| 1. | Is there a fire risk assessment for the premises? | Yes  No |  |
| 2. | Is a review date for the fire risk assessment in place? | Yes  No |  |
| 3. | Have you identified who is at risk? | Yes  No |  |
| 4. | Is the maximum occupancy monitored and controlled? | Yes  No |  |
| 5. | Has provision been made to evacuate persons identified as being especially at risk? | Yes  No |  |
| 6. | Is there provision for warning in case of fire? | Yes  No |  |
| 7. | Is the warning system tested, maintained and recorded? | Yes  No |  |
| 8. | Is the firefighting equipment provided appropriate for the risk? | Yes  No |  |
| 9. | Is the firefighting equipment tested, maintained and recorded? | Yes  No |  |
| 10. | Is escape lighting provided? | Yes  No |  |
| 11. | Is the escape lighting system tested, maintained and recorded? | Yes  No |  |
| 12. | Are all designated escape routes and doors usable, clear and unobstructed and do they lead to a place of safety? | Yes  No |  |
| 13. | Are there suitable fire escape and direction signs? | Yes  No |  |
| 14. | Are fire doors, walls, floors and ceilings in a good state of repair? | Yes  No |  |
| 15. | Are there any wall coverings or decor that could spread fire easily? | Yes  No |  |
| 16. | Are there any uses or activities of the premises that could significantly increase the risk? | Yes  No |  |
| 17. | Is good housekeeping regularly reviewed and maintained? | Yes  No |  |
| 18. | Is there a written fire emergency and evacuation plan? | Yes  No |  |
| 19. | Do employees receive induction and regular fire training including practice evacuations? | Yes  No |  |
| 20. | Are records kept confirming this training? | Yes  No |  |
| 21. | Has an assembly point been identified and informed to employees? | Yes  No |  |
| 22. | Do you have sufficient fire marshals and are they properly trained (and such training recorded)? | Yes  No |  |
| 23. | Has provision been made for contacting the emergency services both during and out of working hours? | Yes  No |  |

1. [NHS Scotland Firecode Memorandum 83](https://www.nss.nhs.scot/media/1561/shtm-83-v30-apr-2004.pdf) [↑](#footnote-ref-2)