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Ymddiriedolaeth GIG
Prifysgol Felindre
Velindre University
NHS Trust

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FIRE SAFETY POLICY

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1. Policy Statement

- 1.1. To provide an unequivocal statement of fire safety policy applicable in any premises owned, managed or under the control of Velindre University NHS Trust (hereby referred to as “the Trust”) or its hosted services excluding a single private dwelling.

2. Purpose

- 2.1. To ensure that the Trust and its hosted services comply with their Statutory duties under the *Regulatory Reform (Fire Safety) Order 2005 (as amended by the Fire Safety Act 2021) (the Order)* and their Mandatory duties under the Welsh Assembly Government’s *NHS Wales Fire Safety Policy* (issued under cover of WHC (2006)74) and *(W)HTM 05 – Fire safety in the NHS (Firecode)*.
- 2.2. This policy outlines the roles and responsibilities at all levels for the prevention of fire and, if a fire occurs, the need for early detection/alert, containment and evacuation of those at risk to a place of safety in preference to attempting to tackle the fire.

3. Scope

- 3.1 This policy applies wherever The Trust or its hosted services have a duty of care to service users, staff or other individuals.

4. Aims and Objectives

- 4.1. This policy aims to minimise the incident of fire throughout all activities provided by or on behalf of The Trust or its hosted services.
- 4.2. Where fire occurs, this policy aims to minimise the impact of fire and unnecessary fire alarm activations on building users, the delivery of services, the environment and assets.
- 4.3. This policy also aims to, so far as reasonably practicable reduce the number of unnecessary fire alarm activations in premises owned, managed or under the control of the Trust or its hosted services.

5. Roles and Responsibilities

- 5.1. *All staff, contract staff and volunteers (including contractors, bank staff and staff from other organisations)*

- 5.1.1. Whilst on premises owned, managed or under the control of the Trust or its hosted organisations, all staff, contractors and volunteers should:

- make sure they are aware of and understand their role and responsibilities regarding the prevention of fire and response to fire;
- take reasonable care for themselves and others who may be affected by their acts or omissions at work;
- comply with the Trust’s fire safety protocols and fire procedures and those set by others such as landlords etc;

- participate in fire safety training and fire evacuation exercises in accordance with section 7;
- inform their manager of any work situation, defect or other failing that represents a serious or imminent danger.

Where necessary, report deficiencies and/or shortcomings in fire safety arrangements to the appropriate person(s) such as line manager, Fire Wardens, estates/facilities etc;

- report fire incidents and false alarm signals in accordance with Trust's protocols and procedures;
- always ensure the promotion of fire safety to help reduce the occurrence of fire and unwanted fire alarm signals;
- set a high standard of fire safety by personal example so that members of the public, visitors and students when leaving Trust premises take with them an attitude of mind that accepts good fire safety practice as normal.

5.2. *Trust Board*

5.2.1. The Trust Board holds overall accountability for fire safety and discharges the responsibility for fire safety through the Chief Executive.

5.2.2. The Board must assure itself that the requirements of current fire safety legislation, the Welsh Government's fire safety policy for the NHS in Wales and the objectives of relevant fire safety guidance including, where appropriate, Welsh Health Technical Memorandum ((W)HTM) 05 ["Firecode"] are being met.

5.2.3. The Trust Board will:

- discharge its responsibilities as a provider of healthcare to ensure that suitable and sufficient governance arrangements are in place to manage fire-related matters;
- provide appropriate levels of investment in the estate and personnel to facilitate the implementation of suitable fire safety precautions;
- facilitate the development of partnership initiatives with stakeholders and other appropriate bodies in the provision of fire safety where reasonably practicable.

5.3. *Chief Executive*

5.3.1. On behalf of the Board, the Chief Executive is responsible for ensuring that current legislation relating to fire and/or general building safety is complied with and appropriate, fire safety guidance is implemented in all premises owned, occupied or under the control of the Trust.

5.3.2. The Chief Executive discharges the day-to-day operational responsibility for fire safety through the Board Level Director (FIRE).

5.4. *Board Level Director (FIRE) - Director of Place, Portfolio and Partnerships*

5.4.1. The Board Level Director (FIRE) is responsible for ensuring that fire safety issues are highlighted at Board level; this responsibility extends to the proposal

of programmes of work relating to fire safety for consideration as part of the business planning process and the management of the fire-related components of the capital programme and future allocation of funding.

5.4.2. At an operational level the Board Level Director (FIRE) will:

- ensure that the Trust has in place a clearly defined fire safety policy and relevant supporting protocols and procedures;
- seek assurance that all work that has implications for fire precautions in new and existing Trust buildings is carried out to a satisfactory technical standard and conforms to all prevailing statutory and mandatory fire safety requirements (including Firecode);
- seek assurance that all proposals for new buildings and alterations to existing buildings are referred to the Fire Safety Manager before building control approval is sought;
- seek assurance that all passive and active fire safety measures and equipment are maintained and tested in accordance with the latest relevant legislation/standards, and that comprehensive records are kept;
- seek assurance that suitable arrangements are in place regarding cooperation between other employers where two or more share Trust premises;
- seek assurance through senior management and line management structures that full staff participation in fire training and fire evacuation drills is maintained;
- ensure that agreed programmes of investment in fire precautions are properly accounted for in the Trust's annual business plan;
- ensure that an annual audit of fire safety and fire safety management is undertaken, and the outcomes communicated to the Trust Board;
- fully support the Fire Safety Manager function.

5.4.3. In line with delegated authority, the Board Level Director (FIRE) devolves day-to-day fire safety duties to the Fire Safety Manager.

5.5. *Fire Safety Manager*

5.5.1. The Trust Fire Safety Manager is responsible for developing and implementing an effective fire safety management system on behalf of the Trust and acting as the focus for all fire safety matters across the Trust.

5.5.2. At an operational level the Fire Safety Manager is responsible for:

- the development, implementation, monitoring and review of the organisation's fire safety management system;
- the development, implementation and review of the organisation's fire safety policy and protocols;
- reporting of non-compliance with legislation, policies and procedures to the Board Level Director (FIRE);
- raising awareness of all fire safety features and their purpose throughout the Trust;

- providing expert advice on fire legislation;
- providing expert technical advice on the application and interpretation of fire safety guidance, including Firecode;
- the assessment of fire risks within premises owned, occupied or under the control of the Trust including the undertaking and recording and of fire risk assessments and development of action plans;
- ensuring that risks identified in the fire risk assessments are included in the Trust's risk register as appropriate;
- the operational management of fire safety risks identified by the risk assessments;
- the development, implementation and review of the organisation's fire emergency action plan including the preparation of fire prevention and emergency action plans where appropriate and integration with Major Incident Plan(s) developed by divisions;
- ensuring that requirements related to fire procedures for less-able staff, patients and visitors are in place;
- the development, delivery and audit of an effective fire safety training programme;
- the investigation and reporting of all fire-related incidents and fire alarm actuations in accordance with Trust policy and external requirements;
- monitoring, reporting and initiating measures to reduce false alarms and unwanted fire signals;
- liaison with the enforcing authorities on technical issues;
- liaison with managers and staff on fire safety issues;
- liaison with NHS Wales Shared Services Partnership (NWSSP) – Specialist Estates Service who act as the Trust's Authorising Engineer (Fire);
- monitoring the inspection and maintenance of fire safety systems to ensure it is carried out;
- ensuring that suitable fire safety audits are undertaken, recorded and the outcomes suitably reported;
- providing a link to the relevant Trust committees;
- ensuring an appropriate level of management is always available by the establishment of Emergency Response Teams for Trust sites or premises.

5.6. *Local Management*

5.6.1. Heads of service and departmental managers have responsibility for:

- monitoring fire safety within their respective workplaces and ensuring that contraventions of fire safety precautions do not take place;
- ensuring local fire risk assessments are maintained up to date and where identified as the risk owner, ensure that risks identified in the fire risk

assessments are included in Divisional and/or Departmental risk registers as appropriate.

- notifying the Fire Safety Manager and others of any proposals for “change of use”, including temporary works that may impact on the risk assessment, within their area;
- reporting any defects in the fire precautions and equipment in their area and ensuring that appropriate remedial action is taken;
- ensuring that local emergency action plans are developed, brought to the attention of staff and adequately rehearsed to ensure sufficient emergency preparedness.
- This duty includes the identification of any staff or regular visitors who may require additional resources and/or support in the event of evacuation and where necessary, ensure that a personal emergency evacuation plan (PEEP) is discussed and developed.
- ensuring that local emergency action plans are revised in response to changes, including temporary works, which may affect response procedures;
- ensuring the availability of a sufficient number of appropriately trained staff at all times to implement the local fire emergency action plan;
- ensuring that the duties outlined in this document and relevant fire safety instructions are brought to the attention of staff through local induction and ongoing staff briefings;
- ensuring that every member of their staff attends fire safety training and the opportunity to participate in emergency drills and exercises as set out in the Trust’s fire safety training matrix.

This duty includes making sure that staff receive other specialist training relevant to their general role and responsibilities including medical gas training; evacuation aid training; patient manual handling training; incident reporting training etc.

- ensuring that all new staff, on their first day in the ward/department, are given basic familiarisation training within their workplace, to include:
 - local fire procedures and evacuation plan
 - means of escape
 - location of fire alarm manual call points
 - fire-fighting equipment
 - any fire risks identified;
- keeping a record of staff induction and attendance at fire safety training;
- ensuring staff at all levels understand the need to report all fire alarm actuations and fire incidents as detailed in the fire safety protocols;
- ensuring that the staff record is completed and returned denoting how this document has been brought to the attention of staff;
- where appropriate, ensuring that sufficient Evacuation Wardens (named persons) and/or Evacuation Coordinators (nominated persons) are identified and appointed for their specific areas of responsibility.

This duty includes considering if an individual needs additional support as part of their PEEP.

5.7. *Evacuation / Fire Wardens and Evacuation Coordinators*

5.7.1. Based on the size and complexity of the building, an appropriate number of Fire / Evacuation Wardens (named persons) for non-clinical areas or Evacuation Coordinators (nominated persons) for clinical areas and areas using hybrid working should be appointed. Although they do not have an enforcing role, the Wardens/Coordinators will report issues or concerns regarding local fire safety to their head of service or departmental managers and if necessary, to the Fire Safety Manager.

5.7.2. In order to maintain safe environments, protect people and services, wardens/evacuation coordinators will:

- act as the focal point on fire safety issues for the local staff;
- organise and assist in the fire safety regime within local areas;
- raise issues regarding local fire safety with their line management;
- support line managers in their fire safety issues.

5.7.3. In the event of fire or other emergency, the warden/coordinator will

- take initial control of the incident and direct the local response;
- ensure that that staff and others in the area are aware of the incident;
- determine whether evacuation is necessary and commence the evacuation if/when appropriate;
- ensure that the fire alarm system has been activated and that the response team have been notified;
- initiate the local emergency action and evacuation plans;
- where applicable, liaise with the site Response Team on their arrival and inform them of actions taken.
- support with post-incident investigations.

6. Equality

6.1. The Trust is committed to ensuring that, as far as is reasonably practicable, the way it provides services to the public and the way it treats its employees reflects their individual needs and does not discriminate against protected characteristics [age, disability, sex/gender, sexual orientation, gender reassignment, marriage/civil partnership, pregnancy/maternity, race, religion, socio-economic and Welsh language].

6.2. The Trust has undertaken an Equality Impact Assessment [EQIA] and received feedback on this policy and the way it operates. The Trust wanted to know of any possible or actual impact that this procedure may have on any protected characteristics identified within the Equality Act 2010.

- 6.3. The assessment found that there was **no impact** to the equality groups mentioned. Where appropriate the Trust will make plans for the necessary actions required to minimise any stated impact to ensure that it meets its responsibilities under the equalities and human rights legislation.

With regard to fire safety, the Trust recognises that during some religious festivals, there is a use of candles and lights, therefore naked flames, i.e. Advent/Christmas and Diwali, the Trust would recommend that staff, patients, donors and visitors, that wish to celebrate use electronic (battery powered) candles; additionally, any electronic main adapter lights are subject to PAT [Portable Appliance Testing] testing.

7. Training – (Full guidance is provided in the fire safety training protocol)

- 7.1. All staff must receive fire safety training appropriate to their role and responsibilities. The Trust has undertaken a Training Needs Analysis for fire safety which requires:

- All new starters receive essential fire safety information as part of their local induction and attend VUNHST Croeso training;
- All new starters undertake essential fire safety training *within 1 month* of their start date;
- Staff undertake the appropriate refresher training as follows:
 - VCS Clinical staff and WBS Blood Collection Team staff - *Annually*
 - Non-clinical staff – *3-yearly*
 - Evacuation/Fire Wardens (named persons), Evacuation Co-ordinators (nominated persons) and Fire/Emergency Response Team members - *Annually*

- 7.2. In support of fire safety training, all staff should participate in a fire evacuation drill/exercise once every *12 months as a minimum*.

8. Resources

- 8.1. The implementation and management arrangements associated with this policy do not present any significant resource implications to the Trust.

9. Implementation

- 9.1. The Trust Board expects those tasked with managing aspects of fire safety to:
- diligently discharge their fire safety responsibilities as benefits their position;
 - have in place a clearly defined management structure for the delivery, control and monitoring of fire safety measures;
 - have in place a programme for the assessment and review of fire risks;
 - develop and implement appropriate protocols, procedures, action plans and control measures to mitigate fire risks, comply with relevant legislation and, where practicable, codes of practice and guidance;

- develop and disseminate appropriate fire emergency action plans pertinent to each department/building/area to ensure the safety of occupants, protect the delivery of service and, as far as reasonably practicable, defend the property and environment;
- develop and implement a programme of appropriate fire safety training for all relevant staff.
- Require all staff to complete their fire safety training (including participation in emergency drills and exercises) as outlined under section 7; and
- develop and implement monitoring and reporting mechanisms appropriate to the management of fire safety.

10. Audit and Monitoring

- 10.1. The Trust Board will monitor the implementation of this policy through:
- periodic review of fire and Unwanted Fire Signal (UwFS) reports;
 - periodic reviews of fire safety training records;
 - periodic review of fire service notices and communications;
 - receipt of annual fire safety audit report;
 - periodic independent reviews of fire safety by NWSSP – Specialist Estates Services.

11. Policy Conformance / Non-Compliance

- 11.1. If any Trust employee fails to comply with this policy, the matter may be dealt with in accordance with the Trusts Disciplinary Policy. The action taken will depend on the individual circumstances and will be in accordance with the appropriate disciplinary procedures. Under some circumstances failure to follow this policy could be considered to be gross misconduct.

12. Distribution

- 12.1. The policy will be available via the Trust Intranet site. Where staff do not have access to the intranet their line manager must ensure that they have access to a copy of this policy.

13. Review

- 13.1. The Fire Safety Manager and Trust Health, Safety and Fire Safety Management Board will review the operation of the policy as necessary; at least once every **12 months**.

14. Legislation

- 14.1. The main Acts and Regulations, which relate to premises owned, managed or under the control of the Trust or its hosted organisations are:
- The Regulatory Reform (Fire Safety) Order 2005
 - The Fire Safety Act 2021

- The Building Safety Act 2022
- The Health and Safety at Work etc Act 1974
- The Building Act 1984
- The Housing Act 2004
- The Equality Act 2005
- The Fire and Rescue Services Act 2004
- The Construction (Design and Management) Regulations 2015
- The Smoke-Free Premises etc. (Wales) Regulations 2007
- The Management of Health and Safety at Work Regulations 1999 (as amended)
- The Dangerous Substances and Explosive Atmospheres Regulations 2002

15. Further Information

15.1. *Contact*

Further information and support is available from the Trust Fire Safety Manager (robin.weaver@wales.nhs.uk) on 07976 417285.

15.2. *Key guidance*

The Firecode suite of documents (Health Technical Memorandum 05 - fire safety in the NHS) builds upon the Welsh Assembly Government's Fire Safety Policy statement. Firecode comprises:

- 05-01: Managing healthcare fire safety (Welsh Edition).
- 05-02: Guidance in support of functional provisions for healthcare premises
- 05-03: Operational provisions (Parts A to L)

The Trust will also implement:

- Other Health Technical Memorandums
- Relevant Department of Health and NWSSP - Facilities Services Health Building Notes

Firecode relates mainly to premises classified as 'healthcare' buildings (such as premises where patients are provided with medical care by a clinician.) and a majority of the premises that the Trust manage, occupy or use fall outside this definition. Therefore, the Trust will also adopt the relevant HM Government Fire Risk Assessment Guidance document relevant for the property type, including:

- Offices & Shops
- Places of Assembly (small)
- Places of Assembly (large)
- Sleeping Accommodation

Additionally, the Trust will also adopt the necessary Health and Safety Executive Approved Codes of Practice and Guidance Documents and other Approved Codes of Practice (i.e. British Standards).

15.3. *Supporting Documents*

In support of this policy, a number of fire safety protocols have been developed that support implementation of this policy, including:

- Fire Safety and Risk Management System
- Fire prevention including the management of arson
- Fire risk assessment/audit strategy
- Emergency planning and procedures
- Fire safety training including training needs analysis and strategy for delivery
- Development of local fire safety information including fire strategies, fire manuals, fire drawings and information for attending fire crews
- Fire safety during construction and refurbishment projects
- Unnecessary fire alarm activations
- Passive fire protection
- Maintenance of fire safety systems and equipment.

16. References

- 16.1. HEALTH TECHNICAL MEMORANDUM 05-01 FIRECODE: Guidance in support of functional provisions for healthcare premises (Various publication dates) - Wales edition.