FIRE SAFETY POLICY AND PROCEDURE

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1. INTRODUCTION

Fire is a potential hazard in all NHS Premises.

The aim therefore must be to ensure procedures are developed and followed to ensure outbreaks of fire do not occur, however, when fires do occur, they should be rapidly detected, effectively contained and quickly extinguished.

An involvement in fire safety is a legal duty of all staff. Personnel with management responsibilities have a more in-depth involvement, which is detailed in this policy.

2. PURPOSE

This policy has been developed in order to:

- Describe the management arrangements for the Fire Safety Procedure and provides guidance for its implementation.
- Provide for the training for all employees in fire safety and building evacuation.
- Provide and maintain fire fighting equipment
- Provide and maintain fire alarm / emergency lighting systems.
- Assess structural and other fire protection needs, to prioritise and make arrangements for the completion of the work accordingly
- Post permanent written fire instruction at all premises as guidance to staff, patients and visitors.

3. SCOPE

This policy applies to all employees of the Trust. Where Trust employees work in premises owned or managed by others the fundamental precautions will still apply, however, there will be site specific details which those employees will need to familiarise themselves with in order to co-operate with local management.

4. RESPONSIBILITIES, ACCOUNTABILITIES AND DUTIES

4.1 The Chief Executive

The Chief Executive has overall responsibility for fire safety within the Trust.

4.2 Executive Director of Business Assurance

The Executive Director for Business Assurance is the Director appointed to champion fire safety at Board level

The Executive Director of Business Assurance undertakes this role with support from the Head of Estates and Facilities.

On being informed of a fire they should:

- Proceed to the location of the fire and where necessary establish a control point in a suitable office nearby.
- Communicate with the Responsible Person to establish the current situation. Also communicate with the Fire Service Officer in charge.
- Communicate with the receiving area (if this stage has been reached) to establish the effects of the fire on hospital services.
Communicate with the on call director if necessary to establish the effects of the fire on hospital services.

Advise the Chief Executive in the event of a serious outbreak.

Determine an action plan for the next phase of the evacuation should this seem likely to be necessary, determine the resources required to achieve it and instruct all concerned accordingly.

4.3 Fire Safety Manager

The Trust Health and Safety Lead undertake this role.

The Fire Safety Manager will be responsible for the following:

- An awareness of all fire safety features and their purpose;
- Fire safety risks particular to the organisation;
- Requirements for disabled staff and patients (related to fire procedures);
- Ensuring appropriate levels of management are always available to ensure decisions can be made regardless of the time of day;
- Compliance with legislation;
- Development and implementation of the organisation’s fire safety policy;
- Development of the organisation’s fire safety strategy;
- Investigate all unwanted fire signals and fires;
- Development of an effective training programme;
- Co-operation between other employers where two or more share the premises;
- The reporting of fire incidents in accordance with current practice;
- Monitoring and mitigation of unwanted fire incidents;
- Liaison with enforcing authorities;
- Liaison with other managers;
- Monitoring of inspection and maintenance of fire safety systems;
- Undertake the annual fire safety audit;
- Providing a written annual report for the Governance Committee.

4.4 Fire Safety Advisor

The Fire Safety advisor is a competent person employed by the trust to advise on all fire safety matters in relation to The regulatory Reform (Fire Safety) Order 2005.

The Trust has appointed a Fire Safety Advisor to give advice and assist managers on all related fire matters and for monitoring of fire safety and fire procedure within the Trust premises. This will include:

- Advising and assisting in the interpretation and application of Firecode, Fire Safety Legislation and other official guidance relevant to Healthcare premises.
- Participate in the audit process in order to identify areas of concern and non-compliance, using the Risk Assessment procedure for identifying the
degrees of risk.

- Preparing an Annual Report on the current state of fire safety in all premises leading to the completion of the 'Annual Statement of Fire Safety' by the Chief Executive.

- Liaison with the appropriate Manager and project officer in the design of alteration to existing building and new buildings with consultation with Building Control and the Fire Authority

- Ensure in conjunction with Directors that a network of Fire Marshals is in place to cover all areas.

- Liaison with the Managers / Fire Marshals in preparing and participating in fire drills.

- Arranging of the annual inspection and servicing of all fire equipment.

- Ensuring all staff are aware of the fire reporting procedure (IR1)

- The Fire Safety Advisor in liaison with the Fire Brigade will carry out fire investigation following each incident. He will investigate the occurrence and make a report to the Director for Fire Safety. The report shall include details of cause, discovery, times, injuries, evacuation, action taken and recommendations to prevent further occurrence. In this respect it will be necessary for the Fire Officer to ask questions of any person involved to form an accurate account of what happened and why.

- To respond any fire incident on or off site during normal working hours.

- Ensure that all premises where Trust Staff members are employed to work are provided with the following measures,

  - Measures to reduce the risk of fire in premises and the risk of the spread of fire in premises; this is achieved through the annual fire risk assessment process.

  - Ensure that premises are provided with appropriate means of escape.

  - Ensure that the means of escape can be safely and effectively used at all times.

  - Ensure that appropriate fire fighting equipment is provided in premises.

  - Ensure that a suitable fire warning system is provided in premises where necessary.

  - Ensure premises have arrangements for action to be taken in the event of fire on the premises, including

    1. Measures relating to the instruction and training of employees; and

    2. Measures to mitigate the effects of the fire.

4.5 Managers / Heads of Departments

Managers Heads of Departments are responsible for the implementation of the fire strategy in the areas they are responsible for.

- Although the Chief Executive is deemed to be the responsible Person under The Regulatory Reform (Fire Safety) Order 2005, this duty is also devolved down to managers / heads of departments and they are responsible for the following within their area of responsibilities.
• Implementation of the Fire Safety Strategy within their areas of responsibilities and areas not under their control in multi occupied premises through Co-operation and Co-ordination with other responsible persons.

• To ensure that fire procedures are brought to the attention of all their own staff by giving instruction as to the right action to take if fire breaks out and ensures all staff complete a Departmental fire induction check sheet

• Conduct and undertake 6 monthly fire drills. In which all staff must participate. All fire drills to be recorded in the fire manual.

• Managers shall ensure that all staff are aware of this Trust Fire Safety Policy.

• Supervise the effective day-to-day upkeep of the Fire Safety strategy

• Ensure all staff in their department receive the trusts biennial fire training, i.e. (3 IN 1) or fire marshal training. This training is to be recorded in the fire manual.

• Be responsible for the co-ordination and direction of staff actions in the event of a fire emergency.

• Assess, and create a Personal Emergency Evacuation Plan (PEEPs) for any disabled personnel being staff or service user within their areas.

• Advise the Fire Safety Advisor of fire incidents / false alarms, report their contents and arrange for any recommendations to be acted on through the IR1 system.

• In the event of an emergency, where practicable, take command until the Fire Brigade arrives and act as a focus for liaison purposes thereafter.

• Keep the records in all sections of the fire manual up to date.

• Assist the trusts fire safety advisors or fire brigade officers in conducting their annual fire risk assessments in their areas of responsibilities and action all deficiencies that have been identified during the audit process.

• Ensure that all fire safety facilities equipment and devices in their areas of responsibility are maintained in an efficient state, in efficient working order and in good repair. Any faulty equipment found must be reported immediately on the BackTraqFM (Estates), or maintenance company if other arrangements are in place.

• Ensure that the means of escape provided in the premises are kept clear of obstruction and can be used at all material times.

• Nominate Volunteers to under take the role for fire marshals in their areas of responsibilities to assist managers / Heads of departments discharge their duties under The regulatory Reform (Fire Safety) Order 2005. However all staff should participate in the physical carrying out of the daily, weekly and monthly checking procedure detailed in the fire manual.

• Ensure where fire equipment is key operated all on duty staff are issued with keys.

• Ensure that all staff are aware of any significant findings that have been highlighted through the fire risk assessment process carried out in the
work place.

4.6 Fire Marshals
The Fire Marshal will assist Managers/Heads of Department(s) for the Implementation of the Fire Safety Strategy for the premises and requirements under The regulatory Reform (Fire Safety) Order 2005.

- Assist Managers/ Heads of Departments in conducting six monthly Fire Drills.
- Ensure that all fire safety facilities equipment and devices in their areas are maintained in an efficient state, in efficient working order and in good repair. Any faulty equipment found must be reported immediately on the Back TraqFM (Estates)
- Ensure that the records in all sections of the fire manual are up to date on a monthly basis.
- In the absence of a Departmental manager ensure that any fire or false alarm is reported via the IR1 system.
- In the absence of a manager / departmental head, In the event of an emergency, where practicable, take command until the Fire Brigade arrives and act as a focus for liaison purposes thereafter.

4.7 Local Authority Fire Officer
Fire authority will audit Trust premises to ensure compliance with The Regulatory Reform (Fire Safety) Order 2005 on a risk base approach system.

4.8 Duty Telephonist
Is responsible for monitoring the main fire alarm panel in the switchboard, operating the paging system and implementing the fire procedures when the fire alarm system has actuated.

4.9 All Staff
All Trust employees have duties and responsibilities in respect of Regulatory Reform (Fire Safety) Order 2005 and under the Health and Safety at Work etc Act 1974

- It is essential that every member of staff: adheres to the Trusts Fire Strategies and Procedures by Being aware of the contents of the Trusts Fire Policy and Be aware of the contents of the fire risk assessment in areas applicable to your work place whether it is your temporary or permanent work location, and be familiar with the local arrangements for fire safety procedures in your work area. Ensure that you have completed the Departmental Fire Induction Check Sheet which should be kept in the rear of the fire manual.
- Ensure that you have participated in a bi-annual Fire Training (3 in 1) Fire, Health and Safety, Security or fire marshal sessions.
- Ensure that you have participated in a six monthly fire drill.
- Where areas have key operated fire Alarm call points and / or emergency Exit Door override systems i.e. green override call points, All on duty staff must carry these keys on their person at all times whilst on Duty.
- Where fire-fighting equipment is secured in cupboards All on duty staff
must carry the keys to these cupboards on their person at all times whilst on Duty.

- In the absence of a Departmental manager or fire marshal ensure that any fire or false alarm is reported via the IR1 system.

5. **PROCEDURE / IMPLEMENTATION**

5.1 **All Employees Should Promote Fire Safety By:**

- Be aware of the contents of the Trusts Fire Policy.
- Be aware of the contents of the fire risk assessment in areas applicable to your work place.
- Minimising risks e.g. Good housekeeping standards in the work place.
- Not overloading electric circuits
- Only using portable electrical appliances, which have been tested and Approved by the Trust. In accordance with the trusts electrical policy.
- As far as practicable, switching off electrical appliances when not in use and unplugging them before leaving. (This does not apply to electrical equipment that is required to be left permanently on, e.g. British Telecom terminals and computing hardware.)
- Not permitting excessive amounts of paper to clutter offices.
- Observing the Trust No Smoking Rules.
- Following instructions and taking the correct actions in the event of fire.
- Do not leave any cooking appliances / toasters unattended when in use.

5.2 **Fire Risk Assessment And Fire Strategy**

Any premises where Trust staffs are employed to work shall be subject to an annual fire risk assessment carried out by the trusts fire safety advisor. The fire safety strategy for these premises will comply with The Regulatory Reform (Fire Safety) Order 2005.

If during the fire risk assessment any deficiencies that are identified will be highlighted in the Action required page of the fire risk assessment proforma. All deficiencies that have been identified should be actioned by Managers / Head of Departments in the time period agreed upon. If on a follow up inspection these deficiencies have not been actioned or it is identified there are repeated deficiencies from previous fire risk assessments an internal notice for (Fire Risk Assessments) will be issued to the Assistant Director of the area concerned informing them that the deficiencies identified by the fire risk assessment have not been dealt with. The Corrective Action Fire Safety Notice is detailed in appendix C of this policy.

Any building that occupies RDASH service users for either treatment or care must comply with the relevant Codes Of Practice / Approved Documents applicable to that particular type of premise purpose group.

These Codes Of Practice / Approved Documents are,

(a) Building Regulations Approved Document B.
(b) Fire Code Hospital Technical Memorandum.
(c) Approved Codes Of Practice for premises in relation to Fire Risk
5.3 **Alterations & Adaptations To Buildings**

Any alteration to a building's structure or alterations to a building's fixtures and fittings must first be approved by the safety team via the form Building Development Fire Safety Check List. The form should be submitted via Estates Department and the Safety Team prior to any work commencing in the building. Unapproved alterations may result in the fire strategy for the building being severely compromised.

The Building Fire Safety Check List is detailed in appendix E of this policy.

5.4 **Non Compliance With The Trusts Fire Policies And Procedures**

Where a failure has been identified by the fire safety advisor of any issue related to the trust's fire policies or procedures, an Internal Notice (Trust Fire Procedures) will be issued to manager's department heads identifying the deficiencies and the actions required to rectify them. The Corrective Action Fire Safety Notice (Trust Fire Procedures) is detailed in appendix C or D of this policy.

5.5 **Annual Statement of Fire Safety**

The Chief Executive will complete ‘the Annual Statement of Fire Safety’, which will be submitted to the Director of Policy, NHS Estates, Leeds by 31st January annually.

5.6 **Procedures For The Switchboard**

5.6.1 **Telephonist Fire Alarm Procedure**

The Duty Telephonist is responsible for the monitoring of the main fire alarm control panel located in the switchboard. And operating the Scope pager system along with implementing the fire procedures.

If the main fire alarm panel indicates a fire or pre alarm signal the duty telephonist will,

- Confirm To the monitoring Station the fire service is required if switchboard have not received any information from the effected Fire alarm activation area.
- Make a back-up phone call on the 999-telephone system reporting all details of the fire incident to the fire service.
- If the Fire signal is a confirmed false alarm contact the monitoring centre and confirm the fire signal is a false alarm and the fire service is not required.
- Operate the scope paging system to mobilise nominated staff members who will attend the fire incident.
- Contact estates or BAM to mobilise the duty craftsman to attend the incident.
- For confirmed fires, inform the Executive Director of Business Assurance and the Head of Estates and Facilities of the fire incident or the Duty Director if out of hours.
- Switchboard staff may **silence** the alarm on instruction from a
• If the fire brigade is in attendance, they may wish to see the fire alarm system before it is reset. In cases where the fire brigade is not in attendance, switchboard staff may reset the fire alarm system on instruction from a member of maintenance or fire safety advisor.

5.6.2 **Testing Of scope Paging System**

• A test of the Scope system is undertaken at approximately 2.00pm on Tuesday afternoon. A record of tests, faults etc. will be entered in the Scope Paging system log book.

• Any fault or malfunction of the radio paging (bleep) system should be reported immediately. Arrangements will be made through the Maintenance Contract for the repair.

5.6.3 **Switchboard Miscellaneous**

• No Contractor should work on the fire alarm system without prior arrangements having been made with the Estates Maintenance Engineer. The Estates Maintenance Engineer will inform the Duty Telephonist of any arrangements for works to be carried out.

• Any occurrence on the fire alarm system shall be entered in the occurrence logbook

5.7 **Emergency procedure if there is a power failure or fire to the switch telecoms rooms**

In the event of switchboard having to be evacuated in the event of a fire or other emergency refer to the Trust policy Estates Business Continuity Plan.

5.8 **Action by Person Discovering a Fire**

• Firstly operate the fire alarm system by breaking the glass of the nearest break glass fire alarm point or operate the key operated fire alarm call point if not already activated.

• For the Tickhill / St Catherine’s site dial the emergency number 2222 and give the switchboard operator the exact location of the fire. For other premises contact the emergency services on 9-999 giving details of the fire incident and provide the full postal address of the premises.

• Evacuate all persons from the fire area via the nearest fire exit to an adjoining safe fire compartment or assembly point. Do not collect personnel belongings, Where possible close all doors and windows in the fire area if safe to do so. Ensure all persons are accounted for.

• If a fire can be fought without risk to self or patients, tackle it with the appropriate fire appliance.

• As soon as practicable for other premises contact switchboard to mobilise the on call craftsman to reset fire alarm and ancillary equipment.

5.9 **Action by Staff in Unaffected Zone**

The Unaffected fire zones will a have an audible intermittent fire alarm signal sounding; this means that the fire is presently elsewhere and so staff can stay within their present zone, but make preparations for evacuation if necessary. Where staffing permits additional staff to be sent to the effected fire zone to
render assistance.

5.10 Action by Managers Heads Of Departments / Fire Marshal

- Proceed to the location of the fire and assume control at the scene.
- Don high visibility fire marshals surcoat on route.
- Ensure that the emergency telephone call on the 2222 or 9-999 system has been made.
- If a fire can be fought without risk to self or patients, tackle it with the appropriate fire appliance.
- Evacuate all persons from the fire area to an adjoining safe fire compartment or assembly point. Where possible close all doors and windows in the fire area if safe to do so. Ensure all persons are accounted for.
- On arrival of assistance, direct them to help in the evacuation.
- Ensure that the latest ward bed state / department register record is available and check if everyone is accounted for. If patient movement is rapid and continuous, then two members of staff should do a sweep of the Ward / Department checking every room, including toilets.
- On the arrival of a more senior person, advise of the action taken.
- Ward senior person or deputy on duty shall be trained in the operation of isolating the main oxygen supply in the entrance area of the wards/departments. All staff handling oxygen and/or oxygen supply equipment must have training on an annual basis in oxygen safety for mains supply and portable cylinders and hold a certificate of competence and training records kept in the fire Manual.
- On the arrival of the Fire Service the Responsible Person for the situation should inform the officer-in-charge of the following: -
  A location and type of fire
  B whether or not all persons have been accounted for
  C if the area has been searched
  D if any hazards are present in the location of the fire, i.e. medical gas cylinders, radio-active sources, flammable liquids, etc.
- When control has been handed over to the Fire Service, go to the Evacuation Area and assume control there.
- Post fire incident complete the IR1 form.

5.11 Fire Alarm Activation In Premises On The Tickhill Road / St Catherine’s Site

- If the fire alarm system operates in your premise / area, the following action must be taken,
- Proceed to the fire alarm panel to ascertain what zone has been activated.
- Proceed to the affected zone and search thoroughly
- If a fire is discovered the procedure in section 5.8 should be followed.
• If there is no fire and it is confirmed that the actuation was caused by accidental actuation of the system i.e. dust trips burnt toast, contractors, etc. Then switchboard should be informed immediately on 2222 verifying this is a false alarm.

• Switchboard will contact estates or BAM to reset the fire alarm system.

• Complete IR1 with all relevant information as to the cause of the fire alarm activation.

5.12 Fire Alarm Activation In Premises Off Of The Tickhill Road / St Catherine’s Site.

• If the fire alarm system operates in your premise / area the following action must be taken,

• Proceed to the fire alarm panel to ascertain what zone has been activated.

• Proceed to the affected zone and search thoroughly

• If a fire is discovered the procedure in section 5.8 should be followed.

• If there is no fire and it is confirmed that actuation was caused by accidental actuation of the system i.e. dust trips burnt toast, contractors, act. (If the fire alarm system is connected to a monitoring station contact the monitoring station and inform them that the fire alarm actuation was due to a confirmed false alarm).

• The fire alarm system maybe reset at this stage.

• Tickhill Road Switchboard should be informed of any fire situation as soon as practically possible

• Complete IR1 with all relevant information as to the cause of the fire alarm activation.

• In the Premises listed below staff must contact their Monitoring Centres if their fire alarm actuates and it is a false alarm
  o Swallownest Court is monitored by ADT call centre.
  o PFI buildings at Bentley are monitored by Swift.
  o Windsor Road / Danescourt are monitored by Red Care.
  o Great Oaks is monitored by Chubb.

• Contractors must adhere to the Trusts Contractors Policy which is accessed through estates department.

5.13 Hot Work Permission

Any hot working processes carried out in trust premises must conform to the policy for the control of contractors. All Contractors should receive fire safety training at the start of the contract.

5.14 Means Of Escape In Case Of Fire

All workplaces must provide adequate means of escape in case of fire. Escape routes must be free from combustible materials and obstruction’s at all times.

5.15 Fire Resisting Doors

Fire doors are easily recognised by the identification label “Fire Door Keep
Closed”, “Fire Door Keep Locked” or “Automatic Fire Doors Keep Clear” fixed to both sides of the door.

Fire doors are designed to resist the spread of heat and smoke for at least 30 minutes. The means of escape from fire is only protected with these doors SHUT. Such doors must not, at any time, be held open by any restricting device other than automatic releases.

5.16 **Automatic Fire Doors**

As implied these doors will close automatically when the fire alarm system is activated.

In some areas of the hospital, on corridors and wards for example, it is not always possible to have fire doors, which are always closed. These doors have magnetic devices, which hold the doors open until a fire alarm is activated. When the fire alarm is activated the magnet devices release and the doors close.

Automatic Fire Doors are for your safety and must NEVER be wedged open or blocked.

5.17 **Emergency Exits**

Doors on exit routes must only be fitted with simple fastenings that are simple to operate without the use of a key. If for security reasons any other type of locking mechanism’s are proposed these type of locks must first be approved by the safety team prior to installation.

5.18 **Mag Locks On Exit Doors**

Any electrical mag lock access control equipment that is proposed to be installed on any exit or exit route door must first be approved by the safety team prior to its installation. The mag lock door system must be fitted with either, (1) Emergency door override break glass call point (green call point) or (2) Fire alarm call point on the escape side of the door.

5.19 **Emergency Lighting**

Emergency lighting is provided in premises to aid occupants of a building involved in a fire to escape unhindered where the lighting circuits of that building have failed.

5.20 **Fire Alarm System**

Fire alarm systems are provided in buildings to warn occupants of a fire situation. The fire alarm can either be operated by breaking a fire alarm call point or if automatic detection is provided the heat or smoke detectors detect a fire these will automatically operate the fire alarm system. The audible warning of a fire alarm system can be;

**Single stage fire alarm system.** Operate a fire alarm call point or a smoke or heat detector detects a fire the fire alarm will trigger a continuous warning sound throughout the premise.

**Two Stage Fire Alarm System.** Operate a fire alarm call point or a smoke or heat detector detects a fire the fire alarm will trigger a continuous warning sound in the affected fire zone and a intermittent sound in adjacent fire zones.

5.21 **Rescue Equipment**

Any rescue equipment provided such as evacuation chairs ski pad’s ski sheets
etc. should be tested in accordance with the manufacturers instructions and staff must be trained on any rescue equipment provided. Where rescue equipment is required on a temporary or permanent basis for the evacuation of either service users or staff trained personnel in the use of that equipment must be available throughout the period the rescue equipment is required for. Safety Team must be consulted on any proposed use or purchase of rescue equipment prior to its implementation.

5.22 Stages of Evacuation

Phase 1
Horizontal movement to a place of safety behind 2 sets of fire doors (if possible). Ambulant patients and patients in greater danger should be moved first, then bed patients.

Phase 2
Where appropriate horizontal evacuation of the affected area to a safe place.
Where a ground floor is affected, evacuation should be to a further fire sub-compartment.

Phase 3
Movement out of the building through the fire exit doors, or to another part of the hospital or to another hospital

5.23 Smoking
The trust operates a non-smoking policy However Only patients and clients will be allowed to smoke within approved areas provided and monitored by staff members at all times

5.24 Portable Oxygen Cylinders
- Store oxygen cylinders in approved storage areas with valve caps in place. Make sure cylinders are secured in the upright position on the trolley.
- Ensure valves, hose connectors and regulators do not leaks
- Ensure greases, oils or hand creams do not come into contact with oxygen connections.
- Do not operate cylinders in the vicinity of naked flames.

5.25 Flammable Liquids and Gases
- Flammable liquids should only be contained in approved type containers for that substance.
- Flammable liquids or gases should only be stored in approved storage areas approved by the safety team.
- All storage cupboards or stores should be kept locked shut.
- The store or cupboard should be utilised for the storage of flammable liquids or gases only.
- The store or cupboard should display the flammable liquids / gases symbol.

5.26 Aerosols
• Keep only the number of aerosol cans that you need for immediate use.
• Do not expose aerosols to direct sunlight, radiators or other sources of heat
• Always read the manufacturer’s instructions on the can and follow them carefully
• Dispose of empty cans safely and according to the Trust Waste Disposal policy
• Do not use aerosols in the vicinity of Smoke detectors.

5.27 Portable Electrical Equipment
Any electrical brought or used in trust premises must adhere to the Trusts Electrical Policy.

5.28 Arson
• To reduce the risk, keep rubbish to a minimum.
• Ensure that waste is placed in external waste bins and kept locked and the bins secured in a location away from the building.
• Report any suspicious persons or activities to security personnel promptly.
• Ensure that the building is secure from intruders.
• Unattended waste should not be left or stored in staircase enclosures, corridors unattended areas. This is an easy target for would be fire raisers
• For further guidance on arson intervention refer to appendix A.

5.29 Good Housekeeping
• All areas of the working environment should have good house keeping standards. Good house keeping standards will promote a safer working environment. Remembering that housekeeping is everybody’s responsibility.

5.30 Refuse and Combustible Materials
Refuse and combustible materials must be stored in properly designated areas, i.e. not in plant rooms, etc.
Staff should break down cardboard containers as small as possible and place in officially provided stores or containers at designated collection points. Fire doors and shutters to these areas should be kept closed at all times when not in use.

5.31 Access for Emergency Vehicles
Vehicle parking and vehicle waiting restrictions must be observed in order to leave free access for emergency vehicles.

5.32 Maintenance of Equipment
• Any defects in fire fighting equipment, fire doors, exit doors or fire alarms and emergency exit signs, etc., must be reported to the Estates Department on the BackTraqFM (Estates), or maintenance company if other arrangements are in place.
• Fire fighting equipment is inspected and serviced by Contractors every 12 months, but any equipment used, missing or found to be defective must
be reported immediately.

- Fire equipment availability and serviceability should be checked and signed for on the frequencies indicated in the fire manual's visual inspection's and check's record.

- The Head of Estates and Facilities is responsible for all planned preventative maintenance (PPM) in relation to fire safety installations in premises controlled by the Trust.

- The Department Manager must be informed of any defects found, and the appropriate remedial action must be taken, a copy of the defect report must be kept within the fire Manual.

5.33 Cooking

It is the duty of all members of staff to remain in attendance whilst using cooking / toasting appliances. The fire door to the area containing the cooking / toasting appliances must not be wedged open.

5.34 Seasonal Decorations

All seasonal decorations should be inherently flame retardant and should be checked by the Fire Marshal who should liaise with the Fire Safety Manager.

Any electrical decoration's used should be PAT tested, Low voltage and be approved by Estates.

5.35 Moisturisers

When a patient is being treated with a greased-based moisturiser, such as white soft/liquid paraffin, then members of staff should be aware of the dangers of the patient’s dressings or clothing coming into contact with naked flames or an Oxygen supply.

The patient should be warned not to smoke and not to allow others to smoke or have naked flames near to them.

5.36 Naked Flames/Candles

The use of candles or any naked flame is prohibited within Trust Buildings.

5.37 Special Risks In Patient Areas

Bedcovers are of a significant risk in patient areas. As a result the standards of bedcovers used by the Trust will be as follows:

- High Risk In-patient areas will have bedcovers to a standard of Crib 7 fire retardancy i.e. Great oaks HICU, Amber Lodge, Jubilee Court, Swallownest Court PICU and Skelbrooke.

- Registered Homes will have bedcovers to a level of Crib 5 fire retardancy

- Supported Living accommodation will require managers to undertake assessment and select the most appropriate level.

The Safety Section recommends that bedding and covers are obtained from a reputable source.

5.38 Disabled Staff And Patients

Any Person with a disability staff or service User a Personal Emergency Evacuation Plan (PEEP) must be made for that person. It is the responsibility of the manager to complete a risk assessment with the individual and create a
6. TRAINING IMPLICATIONS

The Training Needs Analysis (TNA) for this policy is required to be monitored for the NHS Litigation Authority. The TNA can be found in the Training Needs Analysis documentation which is part of the Mandatory Risk Management Training Policy in the Trust Extranet publications section.

6.1 Training Specifics

Fire safety training will be carried out at regular intervals to ensure that all staff / voluntary workers receive formal Fire training at least once every two years. (Training sessions can be arranged in consultation with the Red Centre Tickhill Road.)

Employee attendance at biennial fire training is the responsibility of Line Managers. The Red Centre will provide an annual schedule of training sessions and managers must ensure all staff receive biennial training. Additional training sessions can be organised in cases of specific need. This training requires to be recorded in the fire manual.

The fire training sessions given by the fire safety advisor are;

Induction Fire Lecture

This fire training session is designed for all new employees joining the trust. This training is given as near to the employee’s appointment date as practically possible.

Fire Training (3 in 1)

This fire training session is designed for all trust employees and is delivered in various venues throughout the trust on a rolling programme.

Fire Marshal Induction

This specific training is designed for employees volunteering for the role of fire marshal.

Fire Marshal Update (3 in 1)

This training is designed to up-date existing fire marshals of new developments / legislation and a general refresher in fire policies and procedures.

Departmental Fire Induction Training

Managers; Heads of departments or Fire Marshals under take this training to all new, temporary or permanent Trust employees immediately on joining the department. This training should cover all the points identified on the Departmental Fire Induction Check Sheet and signed for. This form should be kept in the fire manual. The Departmental Fire Induction Check sheet is detailed in appendix B of this policy.

Fire Drills

The effectiveness of procedures for dealing with a fire outbreak and of various aspects of the fire precautions training should be tested by conducting fire evacuation drills.

Managers / Heads of Departments or Fire Marshals are responsible for conducting fire drills in their areas of responsibilities. Fire drills will be recorded in the fire manual also identifying the staffs who has participated in the drill.
When fire drills are conducted on the Tickhill Road Site involving the activation of the fire alarm system the fire safety advisor must be involved in the planning of the fire drill.

Fire drills should be conducted on a six monthly basis.

A fire drill can consist of a Talk through fire drill which can be undertaken during a team meeting. Talk through fire drill can not be undertaken every six months. Fire drills must alternate between a talk through drill and an evacuation drill on a rolling programme.

7. **MONITORING ARRANGEMENTS**

<table>
<thead>
<tr>
<th>AREA FOR MONITORING</th>
<th>HOW</th>
<th>WHO BY</th>
<th>REPORTED TO</th>
<th>FREQUENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td>All reported fire related incidents, including near misses and actual fires</td>
<td>Investigated by the Fire Safety Advisor and any identified preventative action is taken</td>
<td>Fire Safety Advisor and relevant managers</td>
<td>Health, Safety and Security Forum on a bi-monthly basis</td>
<td>Each Incident</td>
</tr>
<tr>
<td></td>
<td>Summary report</td>
<td>Fire Safety Advisor / Health and Safety Lead</td>
<td></td>
<td>Bi-monthly</td>
</tr>
<tr>
<td>Compliance with the Regulatory Reform (Fire Safety) Order 2005 and the Trust Fire Policy.</td>
<td>Fire Safety advisor will complete an inspection of all trust premises, with the manager of the area.</td>
<td>Fire Safety Advisor / area manager</td>
<td>Health, Safety &amp; Security Forum.</td>
<td>Bi-monthly</td>
</tr>
<tr>
<td>Compliance with the training and update requirements for fire safety</td>
<td>Attendance records analysis</td>
<td>Health and Safety Lead / Fire Safety Advisor, Head of Learning and Development</td>
<td>Health, Safety &amp; Security Forum.</td>
<td>Bi-monthly</td>
</tr>
<tr>
<td>Completion of fire Manuals</td>
<td>Audit by Fire safety advisor and/or Safety Team Members Annually or un-announced visit</td>
<td>Fire Safety Advisor</td>
<td>Health, Safety &amp; Security Forum</td>
<td>Bi-monthly</td>
</tr>
</tbody>
</table>
8. EQUALITY IMPACT ASSESSMENT SCREENING
The completed Equality Impact Assessment for this Policy has been published on the Equality and Diversity webpage of the RDaSH website click here.

8.1 Privacy Dignity And Respect

| The NHS Constitution states that all patients should feel that their privacy and dignity are respected while they are in hospital. High Quality Care for All (2008), Lord Darzi's review of the NHS, identifies the need to organise care around the individual, 'not just clinically but in terms of dignity and respect'. As a consequence the Trust is required to articulate its intent to deliver care with privacy and dignity that treats all service users with respect. Therefore, all procedural documents will be considered, if relevant, to reflect the requirement to treat everyone with privacy, dignity and respect, (when appropriate this should also include how same sex accommodation is provided). | Indicate how this will be met
| There are no effects on the provision of privacy and dignity or respect within this policy. |

8.2 Mental Capacity Act Statement

| Central to any aspect of care delivered to adults and young people aged 16 years or over will be the consideration of the individuals capacity to participate in the decision making process. Consequently, no intervention should be carried out without either the individuals informed consent, or the powers included in a legal framework, or by order of the Court

Therefore, the Trust is required to make sure that all staff working with individuals who use our service are familiar with the provisions within the Mental Capacity Act. For this reason all procedural documents will be considered, if relevant to reflect the provisions of the Mental Capacity Act 2005 to ensure that the interests of an individual whose capacity is in question can continue to make as many decisions for themselves as possible. | Indicate How This Will Be Achieved.
| All individuals involved in the implementation of this policy should do so in accordance with the Guiding Principles of the Mental Capacity Act 2005. (Section 1) |

9. LINKS TO ANY ASSOCIATED DOCUMENTS

None
10. REFERENCES

- The Health and Safety at Work Act 1974
- The Management of Health and Safety at Work Regulations 1999
- The Building Regulations 2010

11. APPENDICES

Appendix A  Arson Guidance Note
Appendix B  Departmental Fire Induction Check Sheet
Appendix C  Corrective Action Notice
Appendix D  Corrective Action Notice
Appendix E  Alterations Adoptions To Buildings
ARSON GUIDANCE NOTE

The Arson Guidance Note aims to minimise the impact of fire on life safety, delivery of service, the environment and property. It should be read in conjunction with the Firecode Guidance.

INTRODUCTION

Recent studies indicate that over 3,500 deliberately started fires, resulting in two deaths, 50 injuries and at a cost to society of at least £25 million, occur every week.

This form of malicious fire-setting is a particular hazard in hospitals for people with mental illness. However, the nature of the occupants means that they may not be fully aware of the consequences of their actions.

In the past, arsonists have set fire to hospitals without regard to the safety of the occupants.

Fires started deliberately can be particularly dangerous because they generally develop much faster and may be intentionally started in escape routes.

RISK REDUCTION MEASURES

Measures to reduce arson may include the following:

- Challenge any intruders if safe to do so and report anyone acting suspiciously to switchboard on 2222, then switchboard bleep Security.
- If very concerned about the actions of an individual or group, contact the police on 999.
- Make sure that all buildings, including all windows and the access to the basement and roof, are secure, especially at night. However, make sure that staff still working have adequate escape routes in case of fire.
- Combustible waste should not be allowed to accumulate especially under staircases or in circulation areas.
- Rubbish skips, pallets, etc., should not be placed adjacent to buildings.
- Safe storage of flammable substances so that intruders cannot use them to start a fire.
- Gas cylinders should be secured in a caged compound.
- Remain vigilant at all times.
- Any openings, i.e. louvers and ventilation grilles, should be covered with fire mesh to prevent ignited items being pushed into buildings.
- Report any defects with external lighting, CCTV cameras to the help desks in Estates by using the online reporting system, or by telephone on 01302.
Prevent unauthorised entry to site compounds.

Reduce the subsequent losses and disruption resulting from a fire by preparing a Business Continuity Plan.

Maintain security of the main access door in the event of a fire.

Remove entry rights from staff that have left or been dismissed.

Fit secure metal letter boxes or fire resisting types on the insides of letter flaps to contain any burning materials that may be pushed through.

Part F: The Prevention and Control of Arson in NHS Healthcare Premises
Safer Communities: Towards Effective Arson Control

** The Report of the Arson Scoping Study
DEPARTMENTAL FIRE INDUCTION CHECK SHEET

(To be completed by ALL staff on the first day of employment or when transferred to a new Department / Section or Premises).

Please use block capitals

Name…………………………………………………………………………………………………………………………..

Job Title…………………………………………………………………………………………………………………………..

Place of Work………………………………………………………………………………………………………………

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Signature</th>
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</thead>
<tbody>
<tr>
<td>1. I have an awareness of the Trust fire policy</td>
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<tr>
<td>2. I have been shown the location of fire call points for my area of work.</td>
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<tr>
<td>3. I am aware of my Fire Procedures and Fire Assembly Points for the building</td>
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<td>4. I have been made aware of the fire exits and Escape routes in my work area</td>
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<td>5. I am aware that the Trust operates a &quot;No Smoking &quot; policy</td>
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<td>6. I have been instructed on the procedure to call the Fire brigade i.e. 2222 or 9-999</td>
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<tr>
<td>7. I have been shown the location of fire Extinguishers</td>
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<td>8. I have been informed of the contents of the fire Risk Assessment</td>
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<td>9. I have been informed of the services isolation procedure applicable To my work area.</td>
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Date ………………………

This document is to be held in the Fire manual
CORRECTIVE ACTION NOTICE FOLLOWING FIRE RISK ASSESSMENT

Requirement for immediate Action to Maintain Effective Fire Procedures

The purpose of this notice is to bring to the attention of the relevant manager that through the Fire Risk Assessment process, deficiencies have been identified which require immediate action to be taken and reported back to the Fire Safety Advisor.

Date issued: 
Issued to: Assistant Director 
Business Division/ Directorate 
Premises: 
Date Response required by: 

<table>
<thead>
<tr>
<th>RISK ASSESSMENT:</th>
<th>ISSUES IDENTIFIED</th>
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<tbody>
<tr>
<td>1 Naked Flames/Hot Surfaces</td>
<td></td>
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<tr>
<td>2 Smoking</td>
<td></td>
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<tr>
<td>3 Portable Electrical Equipment and fixed Installation Equipment</td>
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<tr>
<td>4 Wilful Fire Raising (Arson)</td>
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<tr>
<td>5 Fuel in the Workplace</td>
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<td>6 Structural Features</td>
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<td>7 Piped medical Oxygen</td>
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<tr>
<td>8 Persons Especially at Risk</td>
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<tr>
<td>9 Fire Alarm System</td>
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<td>10 Fire Fighting Equipment</td>
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<tr>
<td>11 Escape Routes</td>
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<tr>
<td>12 Fire Training All Employees</td>
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<tr>
<td>13 Fire Marshal</td>
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<tr>
<td>14 Fire manual</td>
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</table>

IF YOU REQUIRE ANY ASSISTANCE IN COMPLETING THE ACTION PLEASE CONTACT THE FIRE SAFETY ADVISORS ON (01302) 796197

Copies to: Health and Safety Lead
Head Of Health Safety & Security
Responsible Director
INTERNAL NOTICE OF IMMEDIATE ACTION REQUIRED TO MAINTAIN EFFECTIVE FIRE PROCEDURES ACTION PLAN

<table>
<thead>
<tr>
<th>No.</th>
<th>ISSUE IDENTIFIED</th>
<th>ACTIONS REQUIRED</th>
<th>DATE ACTION COMPLETED</th>
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A copy of this notice is to be returned to the Fire Safety Advisor once all actions are completed.
CORRECTIVE ACTION NOTICE FOR FIRE PROCEDURES

Requirement for immediate Action to Maintain Effective Fire Procedures

The purpose of this notice is to bring to the attention of the relevant manager that during a recent fire alarm activation, the Trust fire safety policy and procedures were not carried out.

Date issued: 
Issued to: Assistant Director
Business Division/ Directorate
Premises: 
Date Response required by: 

DEFFICIENCY OF TRUST FIRE PROCEDURES:

Actions Required

All members of staff must be made aware of the Trust Fire Safety Policy and procedures.

**Action by Person Discovering a Fire (Summary)**

- Firstly operate the fire alarm system by breaking the glass of the nearest break glass fire alarm point or operate the key operated fire alarm call point if not already activated.
- For Tickhill Hospital site Dial the emergency number 2222. For Off-site premises contact the emergency services on 9-999
- Evacuate all persons from the fire area via the nearest fire exit to an adjoining safe fire compartment or assembly point
- If a fire can be fought without risk to self or patients, tackle it with the appropriate fire appliance.
- As soon as practicable for off-site premises contact switchboard

Copies to: Health and Safety Lead
Head Of Health Safety & Security
Responsible Director
## Alterations Adoptions To Buildings

<table>
<thead>
<tr>
<th>Number:</th>
<th>Date Raised:</th>
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<tbody>
<tr>
<td>Building:</td>
<td>Room:</td>
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</table>

**Works required:**

**Key dates associated with the required works:**

### Trust Approval

<table>
<thead>
<tr>
<th>Department</th>
<th>Signature</th>
<th>Remarks</th>
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<tbody>
<tr>
<td><strong>Project Lead (scope of works approved and agreed)</strong></td>
<td></td>
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<tr>
<td>Please indicate Y/N if required and if appropriate have department sign and give remarks that they have been consulted.</td>
<td></td>
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<tr>
<td>Consult with:</td>
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<tr>
<td>Security (risks assessed and addressed)</td>
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<td>Y / N</td>
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<tr>
<td>Fire Officer (risks assessed and addressed)</td>
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<tr>
<td>Y / N</td>
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<td></td>
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<tr>
<td>H &amp; S (risks assessed and addressed)</td>
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<td>Y / N</td>
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<tr>
<td><strong>Clinicians (works meet clinical needs)</strong></td>
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<tr>
<td>Please indicate Y/N if required and if appropriate have department sign and give remarks that they have been consulted.</td>
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<tr>
<td>Consult with:</td>
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<tr>
<td>Work meets clinical needs</td>
<td></td>
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<tr>
<td>Y / N</td>
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<tr>
<td>Infection Control</td>
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<tr>
<td>Y / N</td>
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<tr>
<td>Back Care Advisory Service</td>
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<td>Y / N</td>
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<tr>
<td>Other (Specify)</td>
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<tr>
<td>Y / N</td>
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**Enquiry raised by:**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Position:</th>
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<td>Tel No:</td>
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### Authorisation Completed and Accepted

<table>
<thead>
<tr>
<th>Name:</th>
<th>Name:</th>
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<tbody>
<tr>
<td>Signed:</td>
<td>Signed:</td>
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