

Paper G

Meeting title:	Trust Board (public)					
Date of the meeting:	6 October 2022					
Title:	Annual Fire Report 2021/22					
Report presented by:	Michael Simpson – Interim Director of Estates and Facilities					
Report written by:	Michael Blair – Head of Compliance					
Action – this paper is for:	Decision/Approval		Assurance	X	Update	X
Where this report has been discussed previously	Endorsed by the following Groups, Committees; UHL Fire Safety Group (Committee) UHL Health and Safety Committee UHL E&F SMT UHL Executive Quality Board UHL Quality Committee					

To your knowledge, does the report provide assurance or mitigate any significant risks? If yes, please detail which
This report provides assurance that suitable and sufficient arrangements are in place, as required by the Regulatory Reform (Fire Safety) Order 2005 (FSO), to meet the duties placed upon it with regards the management of fire safety, to enable the Annual Fire Statement to be signed off and to advise of the priorities for the forthcoming year

Impact assessment
<p>Failing to ensure suitable fire safety arrangement and not addressing identified significant findings potentially could lead to specific impacts including but not limited to</p> <p>Harm (Patient/Non Patients):</p> <ul style="list-style-type: none"> ▪ Minor / Major / Sever injuries or death brought about by smoke / fire related incidents ▪ Post-traumatic stress disorder <p>Reputation / Legal:</p> <ul style="list-style-type: none"> ▪ Unfavourable investigation by enforcement authorities due to reported incident or notification of concern. ▪ Lack of confidence in service provision by media, local community, service users and Board members ▪ Single / multiple breaches of regulatory duties leading to improvement / prohibition notices / enforcement ▪ Poor staff fire safety perception / provision / low morale <p>Service Disruption:</p> <ul style="list-style-type: none"> ▪ Impact on multiple CMG / Clinical areas requiring rectification works / demolition ▪ Potential decant required to enable corrective works ▪ Loss of services for prolonged periods of time (outside current BCP timescales) <p>Financial:</p> <ul style="list-style-type: none"> ▪ Staff losses /recruitment / retention ▪ Capital investment to rectify deficient / non-compliant infrastructure, plant and equipment

<p>Acronyms used:</p> <ul style="list-style-type: none"> ▪ BCP Business Continuity Planning ▪ CMG Clinical Management Group ▪ FSO Fire Safety Order ▪ FRA Fire Risk Assessment
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- LFRS Leicester Fire and Rescue Service
- UwFS Unwanted Fire Signal (False Alarm)

Purpose of the Report

The purpose of this report is to inform Trust Board of the current level of Fire Safety provisions across the Trust portfolio, highlight where improvements have been made and indicate where further Fire Safety related improvements and investments are necessary.

Recommendation

The Board should be assured that the Fire Safety continues to be proactively managed and to accept this paper as an update on the outputs from last year, to recognise the progress being made in relation to Fire Safety across the Trust and request that the report is endorsed to enable the annual fire statement to be signed

Summary

This report provides a summary of the Trust's fire safety performance in the last twelve (12) months and details key deliverables such as Fire Risk Assessment, Fire Safety Training, Management of Unwanted Fire Signals (False Alarms), supporting design specification and install of capital schemes, advising on fire strategy, responding to reactive call outs, investigating fire related incidents (including real fire events), supporting clinical staff in exercising their duties under Fire Legislation and identifying required improvements through the exercising of their daily duties

Main report detail

The impact from COVID restrictions within the Reporting Period 2021/22 has lessened leading to a period of restoration in delivering "business and usual" Fire Safety provision with an expected return to "normal" status with fire risk assessment (FRA) and training commitments as we enter the new reporting period.

2022/23 should see a return to the pre-covid returns while recognising that resources may be redirected to support the Capital Works Team around Business as Usual and Reconfiguration schemes once they recommence.

The significant findings being recorded within FRA remain consistent with previous but the Fire Safety team main concerns relate to the ever increasing amount of combustible storage and waste being located within the means of escape and circulations spaces. If this is to improve there needs to be a change in behaviour within all the teams that will be reinforced once the face to face training recommences in Q2 or 2022.

Fire Training compliance remains high and at the end of the reporting year was at 85% compliant; this is a small reduction in last year's figures. The reason for this reduction is not clear as all staff expected to complete online whilst face to face training was suspended. The aim over the forthcoming year is to attain the Trust benchmark of 95%.

Face to face training has been sporadic over the last twelve (12) months due to COVID restrictions however a number of successful evacuation exercise have been completed on site with clinical colleagues. This, together with the evacuation drills planned pre-covid, will

recommence in Q2 of this year. Both are far more effective and pertinent to localised evacuation strategy that annual refresher training on the key principles of fire safety and offer a practical application of the theory.

The Unwanted Fire Signals (UwFS) have reduced significantly; reducing from 254 to 180; a reduction of 30%. The Fire Service attended 51 false alarms with over half being at the Glenfield Hospital; the Glenfield had 26 with the LGH having 20 and the LRI only 5 attendances for false alarms. The reduction in UwFS at the LRI due to the new systems implemented last year. A similar approach at the other sites has been considered but not rolled out as reliant on resources to respond that are not readily available.

The Trust is currently embarking on an extended period of large Capital Works Schemes (Reconfiguration); the Fire Safety Team has provided a large amount advice and guidance on numerous schemes across all three acute sites and continues to support the Projects team to ensure compliance is paramount to the design considerations. A list is provided within the appended report.

The Backlog Capital plan for 2022/23 remains fluid and dependent on what final budget allocation is received; a list will be compiled and for Capital works in regards to the prioritisation of required Fire rectification/improvement works. The demand outstrips the funding provision.

Four (4) Fire Incidents were recorded in 2021/22, fully investigated and reported to the Fire Safety Group and UHL H&S Committees. Full details provided in the appended report but are summarised below. Only two (2) of these were subject to Fire Service attendance.

- 2021 04 21 GH – Ivy Dene – Faulty domestic electrical appliance (kettle) / removed and disposed of
- 2021 09 26 LGH – Wakerley lodge – Wilful fire raising (arson) of unoccupied building / minor localised damage. LFRS attendance
- 2021 10 09 LRI – ED – Overheating of Uninterrupted Power Supply (UPS) causing smoke generation. Equipment isolated. LFRS attendance recorded. No firefighting required but area checked / monitored by thermal camera. UPS
- 2021 12 15 LRI – Balmoral – Minor Injuries – use of Trephining Pen following the application of a flammable freeze spray. The fire was extinguished immediately by Staff. No injuries or property damage

A new fire alarm system has been installed in the Balmoral Building along with a graphics package to assist staff in investigating and responding to incidents. Due to the changes localised training has been provided to the building occupants. Moving forward, as systems are replaced / upgraded, the strategy is to adopt throughout our building portfolio. A description of the changes can be seen in Appendix 'B' at the end of this report.

The Leicester Fire and Rescue Service (LFRS) have completed eleven (11) routine visits across the sites for training, Risk Reviews and to provide advice on future Capital Schemes. The Balmoral Building was subject to a Fire Service Audit in December 2021 and was found to be Broadly Compliant.(highest status provided)

No improvement or prohibition notes have been received this year and no concerns raised by the enforcing authority requiring an action plan of improvement

There are a number of priority areas that are to be focused on in the coming year within the Fire Safety Team including but not limited to:

- Review and Revise the UHL Fire Safety Policy and Supporting protocols;
- Review and Revise the Fire Risk Assessment and supporting Documentation;
- Extend the FRA Review Inspection output in order to ensure compliance.
- Development and improvement of documented local evacuation procedures.
- Increase the number of suitably training Fire Wardens across the Trust.
- Reintroduce 'face to face' annual fire training sessions.
- Reinstate Fire Evacuation Procedure Training.
- Reinstate Fire Evacuation Drills programme

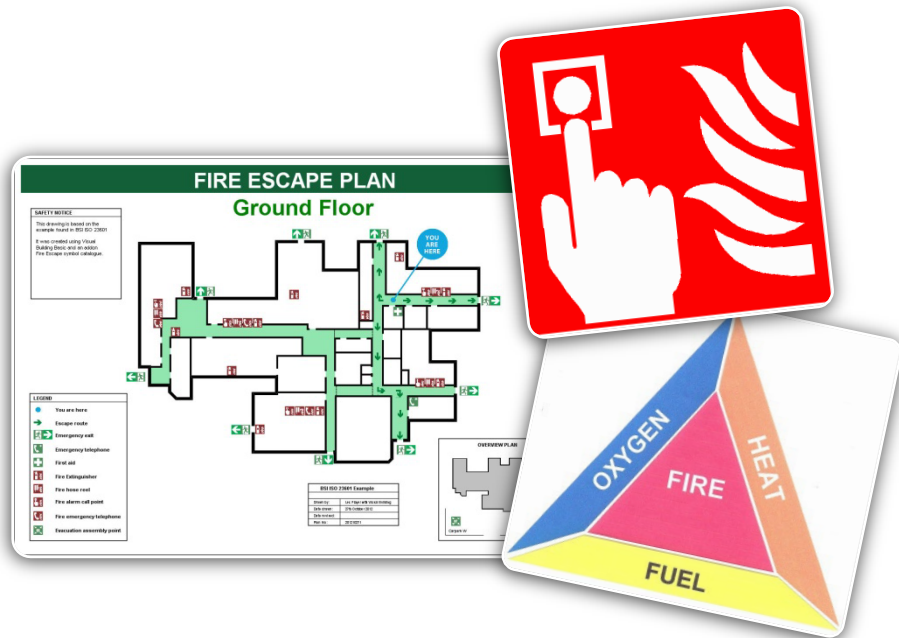
Supporting documentation

2021/22 Annual Fire Report (and Statement)

Annual Fire Report

University Hospitals of Leicester
2021/22

University Hospitals of Leicester NHS Trust
Michael Blair – Head of QSHE Compliance



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1.0 Introduction

- 1.1 The University Hospitals of Leicester (UHL) NHS Trust has a statutory duty to ensure that all of the premises owned and operated by the Trust comply with current fire safety legislation. This is achieved by following Department of Health Guidance.
- 1.2 The Trust must ensure that effective arrangements are in place for the management of fire safety and implement any necessary improvements or adjustments required which relate to an increased potential risk of fire.
- 1.3 The purpose of this report is to inform the Trust Board, all other stakeholders and interested parties of the current state of fire safety provision in all Trust premises, and indicates where further fire safety related improvements are necessary.

2.0 Executive summary

- 2.1 The impact from COVID restrictions within the Reporting Period 2021/22 has lessened leading to a period of restoration in delivering “business and usual” Fire Safety provision with an expected return to “normal” status with fire risk assessment (FRA) and training commitments as we enter the new fiscal year.
- 2.2 There was a reduction in the FRAs undertaken during the reporting period primarily due to the movement of the due date for the Glenfield Residencies Fire Risk Assessments and the increased involvement with the Capital Works Team around the Reconfiguration.
- 2.3 Significant findings within the FRA completed this year remain consistent with previous years however; the Fire Safety Team are growing increasingly concerned with the amount of storage and waste being located within the Means of Escape.
- 2.4 Fire Training compliance remains high and at the end of the reporting year was at 85% compliant; this is a small reduction in last year’s figures. The aim over the forthcoming year is to attain the Trust benchmark of 95%.
- 2.5 The Unwanted Fire Signals (UwFS) have reduced significantly; reducing from 254 to 180; a reduction of 30%. The Fire Service attended 51 false alarms with over half being at the Glenfield Hospital; the Glenfield had 26 with the LGH having 20 and the LRI only 5 attendances for false alarms.
- 2.6 The Trust is currently embarking on an extended period of large Capital Works Schemes (Reconfiguration); the Fire Safety Team has provided a large amount advice and guidance on numerous schemes across all three acute sites.
- 2.7 The Fire Safety Team were heavily involved with all elements around the construction of the Surge Hub that was erected in the LGH Car Park.
- 2.8 There were 4 reported fires within the reporting period; there were two at the LRI and one at both the LGH and Glenfield. All four fires were provided with a full investigation and report; the reports are held by the Fire Safety Team and shared during the quarterly Fire Committee Meetings and UHL H&S Committee. Only two of these fires were subject to Fire Service attendance.

- 2.9 A new fire alarm system has been installed in the Balmoral Building along with a graphics package to assist staff in investigating incidents. This currently impacts the Balmoral building however the strategy moving forward, as systems are replaced / upgraded, is to adopt throughout out building portfolio. A description of the changes can be seen in Appendix 'B' at the end of this report.
- 2,10 The Leicester Fire and Rescue Service (LFRS) has completed 11 routine visits to the three acute sites for training, Risk Reviews and to provide advice on future Capital Schemes. The Balmoral Building was subject to a Fire Service Audit in December 2021 and was found to be Broadly Compliant.

3.0 COVID Response

- 3.1 Due to COVID there has been no significant 'face to face' fire training provided other than small on-site Fire Warden Training. This is expected to change in the next reporting year.
- 3.2 Due to Infection Control measures significant amounts of screening has been added to numerous clinical areas across all three Hospitals. The location of the screening was originally inspected by the Fire Safety Team to ensure it did not elevate any risk above what was reasonable. This screening is slowly being removed and we are advising Staff to inspect for damage on its removal so that it can be 'made good'.
- 3.3 The FRA Review process was extended by 6 months due to the issues around access into a high majority of clinical areas. The aim is to increase the FRA Review process to return the process back to its original condition. It should be noted that all areas are subject to a suitable and sufficient Fire Risk Assessment.
- 3.4 The evacuation training that was arranged prior to the COVID Pandemic is being re-assessed for a re-start in the next reporting period.

4.0 Fire Safety Group

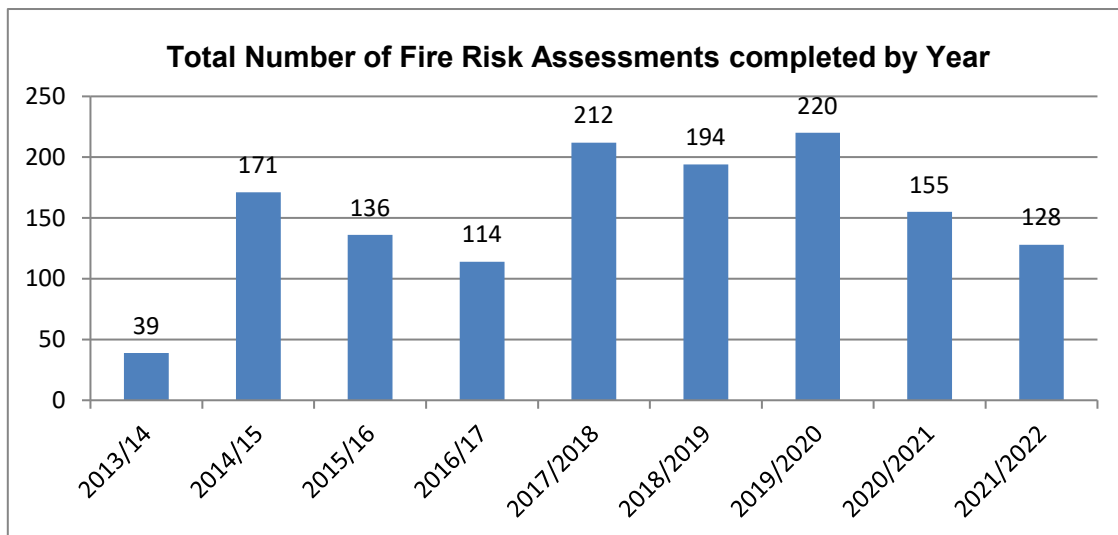
- 4.1 The UHL Fire Safety Group (Committee) continues to act as a subcommittee to the UHL Health and Safety Committee chaired by the Deputy Director Quality Governance / Safety / Risk /Dep Chief Nurse for the Trust.
- 4.2 The Fire Group is chaired by UHL's Head of Compliance and meet quarterly to enable any issues raised to be escalated to the Health and Safety Committee in a timely manner. Following the promotion of the Group at the Quality and Safety Boards, there has been an increase in Clinical CMG attendance.
- 4.3 Following the requirement of social distancing; all meetings this reporting year have been carried out virtually via Microsoft Teams. The approach has enabled greater engagement as easier to attend when members work across the three sites

5.0 Fire Risk Assessment (FRA)

5.1 In 2021/2022 a total 128 Fire Risk Assessments (FRAs) and FRA Reviews were completed.

5.2 In addition there were 31 FRA Review inspections cancelled with no notice; majority of which were cancelled due to reduced Staffing around COVID.

5.3 Chart 01: Fire Risk Assessments completed



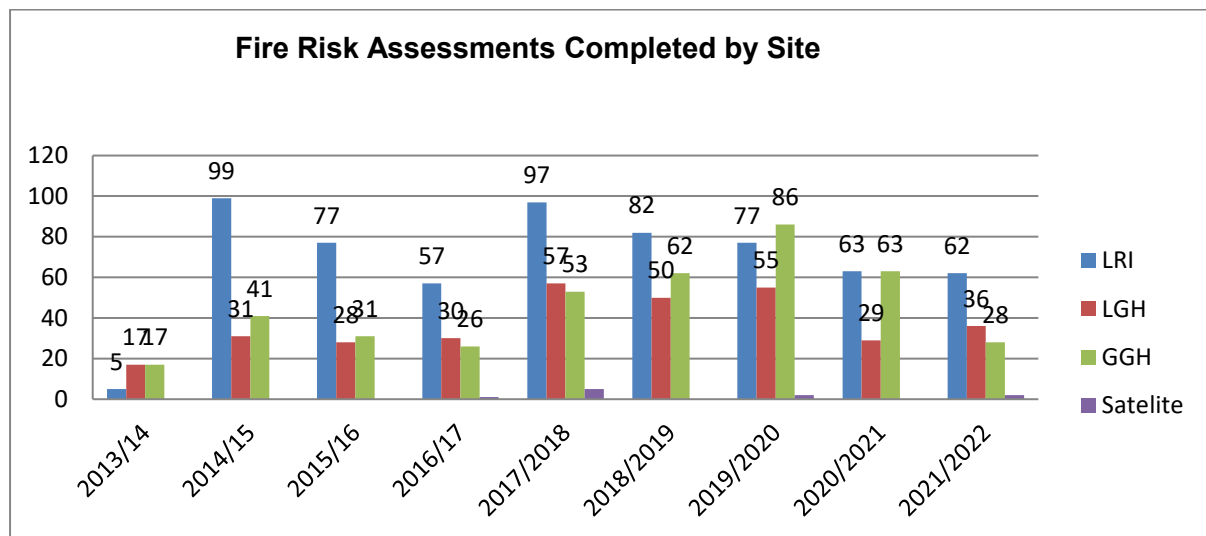
5.4 The graph above identifies the reduction in FRAs over the reporting year however; this is mostly due to increased cancellations and the delay in inspecting the Residencies at the Glenfield Hospital. The Glenfield Residencies include 31 FRAs and have been pre-booked for inspection in the first quarter of 2022

5.5 The FRA Programme has also been adversely affected by the increased Fire Safety demand to support Reconfiguration Enabling Works and the erecting of the Surge Hub at the LGH.

5.6 The Fire Risk Assessment audit is only one part of the process to ensure that the Trust has robust Fire Safety Procedures, and in some cases it is only the first step in identifying what needs to be addressed, rectified and in some cases replaced. It also drives both backlog maintenance and capital expenditure. It also identifies training needs and drives policy development and implementation.

5.7 Due to the issues created around COVID, the Fire Safety Team originally added 6 months to the FRA Review dates; the aim during the next reporting period is to return the Review process back to its original schedule.

5.8 Chart 02: Fire Risk Assessments Completed by Site



6.0 Common Themes from Fire Risk Assessments

6.1 The main issues identified within the FRA Significant Findings are listed below and what is being done in order to address them

Observations and Actions:

6.2 Fire resisting door sets; damaged doors and frames, damaged or missing heat and smoke seals, doors failing to close into frame, insufficient fire resisting potential. Also doors to hazard rooms that are not fire resisting doors. Final exit doors not checked as part of PPM on any site.

- a) The Fire Safety Team is requesting the implementation of a new ppm (planned preventative maintenance) inspection of all fire resisting door sets; fire resisting door sets are to be inspected every 6 months.
- b) On the resumption of 'face to face' fire training; Staff will be told the risks regarding fire doors and asked to report any identified defects.
- c) During Capital Planning Meetings, the Fire Safety Team will stress the importance of ensuring that the door sets are appropriate for their location and all door furniture is suitable for that door set.

6.3 Fire resisting doors into hazard rooms wedged or held open by irregular means.

- a) On the resumption of 'face to face' fire training; Staff will be informed of the risks involved with wedging fire resisting doors open.
- b) A way of preventing the wedging of doors would also be to repair and improve the air conditioning systems where required as the door wedging tends to increase during the summer months.

6.4 The lack of fire alarm mimic/display/repeater panels within specific areas but mostly the Glenfield Hospital site.

- a) This has been raised through the Capital Team and progression to be made during new Capital Projects. Safe investigation techniques are provided to all trained Fire Wardens.
 - b) Level 2 of the Balmoral Building had been a major issue with regards to mimic panels however; the installation of the new fire alarm system has allowed us to rectify this issue.
- 6.5 Departments with no Fire Wardens and not carrying out monthly inspections.
- a) This is identified during Fire Risk Assessment visits/reports. The situation is taking an up-turn with Departments taking up the offer of on-site Departmental Fire warden Training from the Fire Safety Team.
- 6.6 No suitable Emergency Evacuation Plans.
- a) A standardised 'Fire Evacuation Procedure' template is sent to Responsible Persons on request and was also provided to staff during the Fire Warden training courses. The Responsible Persons are informed of their requirement to create and complete the template. They are then required to inform all local team members, by visually displaying the procedure in prominent areas and cascading through local team meetings. A copy of the Fire Evacuation Procedure is contained within the Fire Safety Policy (Appendix C) and the Fire Risk Assessment template.
 - b) The current Fire Evacuation Procedure Template is to be reviewed in the next reporting year.
 - c) Where assistance is required; the Fire Safety Team provides on-site advice to the Responsible Persons and assists in the creation of the procedure.
- 6.7 Storage and waste located within the Means of Escape (MOE).
- a) This issue is of significant concern to the Fire Safety Team as the situation appears to be escalating rather than diminishing.
 - b) This issue has increased over the last reporting period due to the increased deliveries for COVID, lack of storage facilities and constant movement of beds/trolleys. Contractors are also responsible for storing materials and waste in the means of escape and not clearing waste on completion of the project. The Fire Safety Team has conducted numerous visits throughout the common parts of all three Hospitals and reported each issue through the CSC or bed management services.
 - c) Staff have been informed and are fully aware of the risks however; the lack of available storage space as left them attempting to manage the issue without any permanent solution available to them.

7.0 Capital Works

- 7.1 The Fire Safety input into Capital Works Programmes has increased over the reporting period; the Reconfiguration Enabling Works and erecting of the Surge Hub at the LGH has taken up a significant amount of resource from the Fire Safety Officers. A list of all schemes that advice and recommendations has been provided on is listed below:-

Glenfield Hospital

- a) GH - Interventional Radiology (this is a completion of the original project that took place in the last reporting year).
- b) GH – PMO large refurbishment (planning and completion).
- c) GH – Old Recreation Hall (completed in quarter 1).
- d) GH – Baldwin Lodge refurbishment (planning stage).
- e) GH – Old Chapel (planning and completion).
- f) GH – Ward 30 major refurbishment (planning and still under CDM Phase).
- g) GH – Ward 27 minor refurbishment (planning).
- h) GH – Ward 17 refurbishment (planning and completion).
- i) GH - New Vanguard Theatres (planning to completion and training of staff).
- j) GH – New Decontamination Building (planning and still under CDM Phase)

Leicester Royal Infirmary

- a) LRI – Kensington EMCHC Level 5 (completed).
- b) LRI – Kensington EMCHC (completed).
- c) LRI – Balmoral Fire Alarm Installation (planning and in commissioning phase).
- d) LRI – Osborne Brachytherapy Extension (planning stage).
- e) LRI – Windsor 5/6 storey extension (planning).
- f) LRI – Windsor, Angiography (completed).
- g) LRI – Phlebotomy Cabin (completed).
- h) LRI – Potential raised theatres (x3) at front of Balmoral Building (planning stage).
- i) LRI – Victoria Basement compartmentation works (completion of works).
- j) LRI- Sandringham building level 5 refurbishment and new lab areas (planning and still under CDM phase).
- k) LRI – Sandringham level 4 refurbishment (planning and still under CDM phase).
- l) All Reconfiguration Enabling Works including Victoria Building and Jarvis Building (planning stage only).

Leicester General Hospital

- a) LGH – Wakerley Lodge upgrade as the new Hearing Services Building (initial planning stage).
- b) LGH – Surge Hub and corrective works to Brandon Building to ensure compliance for transit of Patients (planning through to completion and removal).
- c) LGH – Ward 15 enabling works for Ward reconfiguration move (planning).
- d) LGH – Ward 17 enabling works for Ward reconfiguration move (planning).
- e) LGH – Dream Academy in Radiology first floor (planning to completion).
- f) LGH – External Reporting Room by OPD 2/3 (planning to completion).
- g) LGH- Brandon Unit full refurbishment and construction of theatres for elective treatment unit (planning).

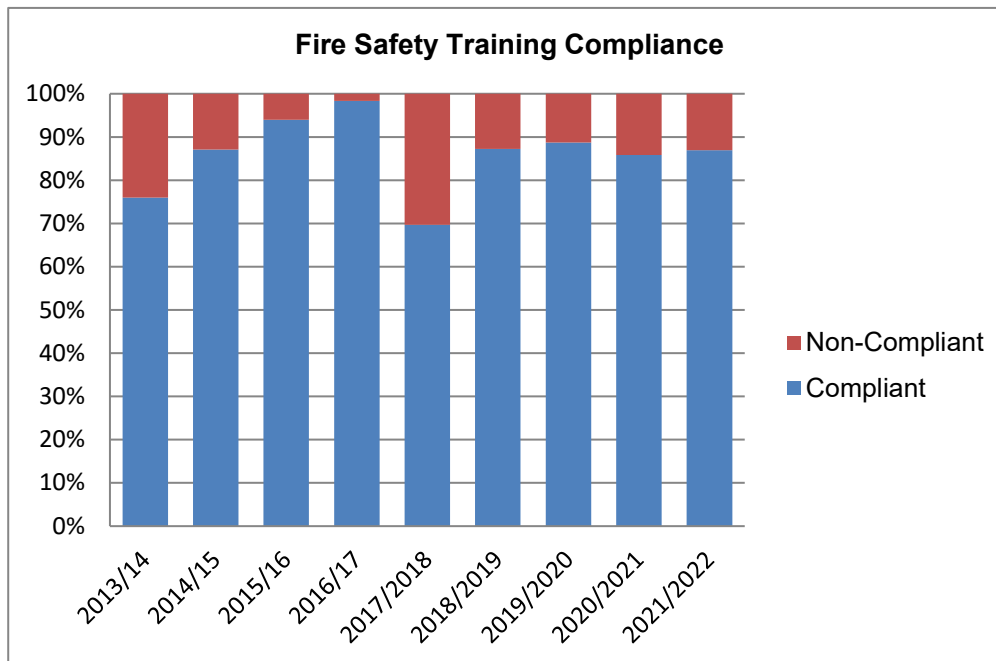
Renal Satellite Sites

- a) Lincoln Renal Unit (arrangement of FRA works to completion).

- 7.2 The high majority of the schemes require Fire Safety input at planning, build and completion stages. The input is provided on request and at times it is required at short notice.
- 7.3 There has been no official Fire Prioritisation meeting however; the Fire Safety Team has been provided with a member of the Capital Team to oversee any Fire Budget. A priority list was provided in line with risk.
- 7.4 A large amount of compartmentation works has been identified at the Glenfield Hospital following a previous full survey of the compartmentation adjacent to the main hospital streets; due to the large scope of works required the works are to be carried out over a number of years. The first stage of the works was carried out this year and incorporates the corridor running from Theatres towards Wards 31 and 34. The works consists of fire door replacements and above ceiling compartmentation works, addressing all breaches.
- 7.5 The current number one priority in regards to Fire Prioritisation works is the installation of new fire detection in the Main Theatres at LGH and the migration of Panel 123, also at LGH. We have received a quote for this works and it currently sits with the Capital Team.
- 7.6 We have installed a new Fire Alarm System in the Balmoral Building; the system is currently under a commissioning stage. Improved technology has allowed us to add graphic repeater panels and also change the process in how the fire alarm system works. Appendix 'B' of this report contains further and more complete information on the system.
- 7.7 The Trust has been preparing extensively for a major reconfiguration in the near future; the Fire safety Team has provided extensive advice on the high majority of enabling schemes.
- 7.8 Following the Grenfell Fire many changes have been made in regards to Fire Safety design around buildings in excess of 18 metres. The Trust has employed 'Tenos' a Fire Engineering company to assist the Architects with the design of the reconfiguration new buildings. The Fire Safety Team have provided information and direction to 'Tenos' so that they can provide new Fire Strategy documents and Impact assessments for these new buildings and any adjacent buildings that would be affected by any new build construction.
- 7.9 In December 2021 a decision was made to erect a large Surge Hub in the main LGH Car Park adjacent to the Brandon Building. The Tent was erected throughout January and into February 2022. The Fire Safety Team spent many hours addressing design concerns and attempting to make the large tented structure as safe as possible for use of inpatients due to the potential rise in COVID infections. In order to achieve a safe outcome the Fire Safety Team worked closely with the Capital Project Lead, Tilbury Douglas an ESG Site management.

8.0 Training

- 8.1 All 'Face to Face' Annual Refresher Fire Training was suspended until further notice due to the COVID Pandemic; the decision when to reinstate 'Face to Face' Annual Refresher Training will be made on a month by month basis and take into account the COVID Pandemic and potential occupancy levels of the Lecture Theatres. It should be noted that the E-Learning is available to all staff and they are expected to complete this training in a period not to exceed one year. Current statistics indicate that Staff are using the E-Learning as the compliancy figures are still high despite the cancelation of courses.
- 8.2 During the reporting period all group Fire Warden Training sessions were cancelled however; the Fire Safety Team has begun to carryout small, on site, face to face sessions towards the end of the reporting year. The sessions came off the back of FRA Reviews; 20 sessions were provided training 62 persons.
- 8.3 Chart 04 – HELM Training figures.



- 8.4 Following the installation of the new Fire Alarm system in Balmoral; the Fire Safety Team has provided training on the new system to each area located in the Balmoral Building. The training was carried out over a two week period.
- 8.5 In July 2021 an evacuation exercise was carried out in Ward 17 at the Glenfield Hospital; the Ward was empty at the time as it was under refurbishment. The exercise was carried out by a mix of Hospital Staff including the Fire Response Team and also involved Leicester Fire & Rescue attendance. The exercise was hugely beneficial and any learning outcomes were recorded within the exercise report.
- 8.6 A number of table top evacuation scenario training sessions have been carried out at Ward level at the LRI; we are expecting for further evacuation training to be carried out in the next reporting period.

9.0 Unwanted Fire Signals (UwFS)

- 9.1 The occurrence of an unwanted fire signal is detrimental to the operation of any healthcare establishment. Such instances can lead to disruption of service and patient care, increased costs and unnecessary risk to those required to respond to the alarm raised; therefore no unwanted fire signal is considered acceptable.
- 9.2 There has been very little variation in the amount of UwFS over the previous 4 years however; this reporting period has seen a decrease of 30% (74 less occurrences than 2020/21). See Table 02.
- 9.3 Fire Service attendance has also continued to reduce, with only 51 attendances in this reporting year. We believe that this can be significantly reduced further as a number of the attendances are avoidable.
- 9.4 In order to reduce the Fire Service attendance we would like to introduce the current LRI Procedure to the Glenfield and Leicester General sites; this procedure involves a 5 minute investigation period and has had a dramatic impact on the call-outs to the LRI. The issues in implementing this procedure is around the available Fire Response Staff on the two sites and we will re-assess the situation in line with changes around the Reconfiguration Schemes.

Table 02 - UwFS vs LFRS attendance last 5 years

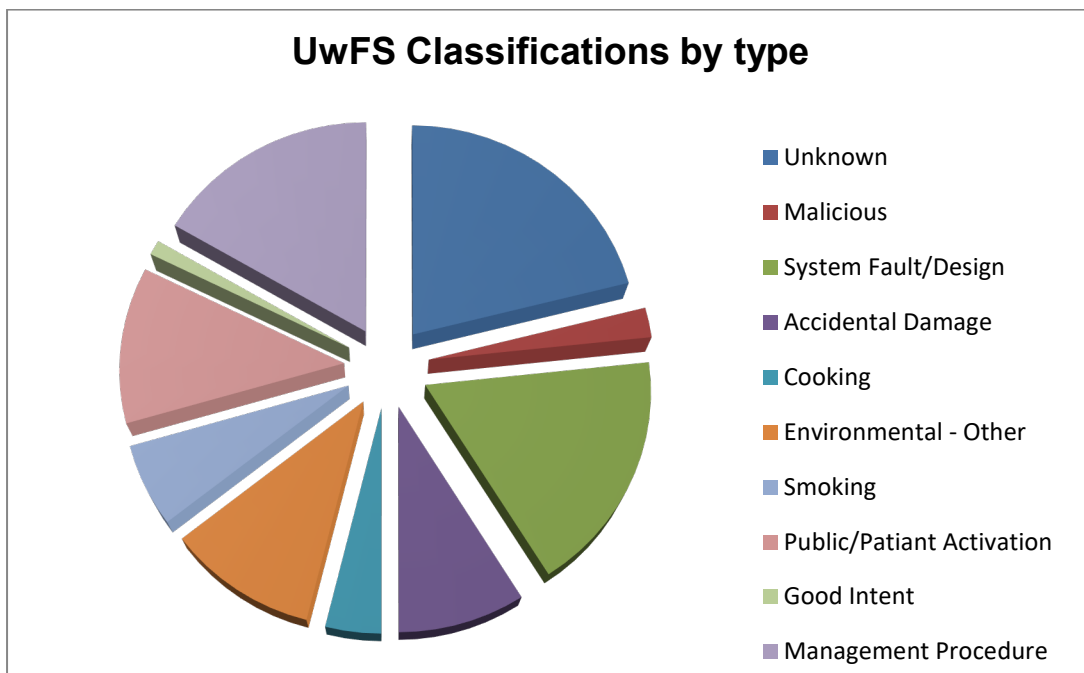
Year	UwFS	Attended	%
2017/2018	246	163	66
2018/2019	221	108	49
2019/2020	252	69	27
2020/2021	254	54	21
2021/2022	180	51	28

Table 03 – Fire Service Attendances per Site

Site	UwFS Attendances	Fire Attendances	Special Service Attendances
LRI	5	1	12
LGH	20	1	1
GH	26	0	0

- 9.5 Table 03 demonstrates the positive affect that the 5 minute investigation period has had on Fire Service attendance to the LRI.
- 9.6 Unwanted fire signals should be categorised in order to identify their causes, record and report their occurrence, and allow appropriate actions to be decided on for their reduction. Following any UwFS an investigation should take place to identify the cause. The table below (Chart 04) shows the identified causes of UwFs across all three sites.

9.7 Chart 04 – UwFS by classification type



9.8 The total UwFS across the UHL sites in this reporting period totalled 180 with the highest percentage originating from the LRI site. It is however worth relating this figure to the number of detectors (c.6000) located at this site and the very low Fire Service required attendance.

9.9 The reporting of the UwFS has improved and the Fire Safety Team now receive notifications from the Switchboard via email and a form created by the Compliance Team in conjunction with Fire Safety; previously all records were hand written and posted via internal mail.

9.10 The Fire Safety Team assess all false alarms received for patterns so that any issues can be addressed at the earliest opportunity; there are no significant patterns in regards to locations and type of cause.

10.0 Fires

10.1 There were four reported fires in this reporting year; all the fires were minor however; two required Fire Service Attendance. The fire incidents are listed below:-

- 21 April 2021 – Glenfield Hospital - Ivydene

At approximately 15:00 on the 21st April 2021, the kettle in the Ivydene Kitchen was turned on by a staff member. After turning on the kettle the staff member left the kitchen and went up the adjacent staircase for a brief period of time. When returning back down the staircase, there was a faint smell of burning. The staff member immediately entered the kitchen and identified that the smell was emanating from the kettle; Staff member immediately isolated the kettle by switching off at the wall and removing the plug from its socket. Damage was evident around the base of the kettle and the On/Off switch. Once isolated, any smoke emanating from the device stopped and the item was left in a safe area to cool off.

- 26 September 2021 – Leicester General Hospital – Wakerley Lodge

The fire was a result of arson at the unoccupied Wakerley Lodge and was attended by LFRS and Leicestershire Police. Unidentified youths broke into the building and set a very small fire in the centre of a room. No significant damage occurred.

- 15th December 2021 – Leicester Royal Infirmary – Balmoral Building – Minor Injuries

The fire resulted from the use of a Trephining Pen following the application of a flammable freeze spray. The fire was extinguished almost immediately by Staff and no further injury to the patient or damage to the room occurred.

- 09 October 2021 – Leicester Royal Infirmary – Emergency Department

Investigations found that an Uninterrupted Power Supply (UPS) in the hot lab had overheated and caused a large amount of smoke; the incoming supply circuit breaker tripped and disconnected the supply to the UPS. The Fire Service did attend however; no firefighting was required by the Fire Service and the area was checked and monitored using a thermal imaging camera.

10.2 Each reported fire is fully investigated to gain an understanding of the immediate, underlying and root causes and where improvements can be implemented in order to prevent a reoccurrence.

10.3 The findings of the reports are shared at the Executive Meetings by the Director of Estates and Facilities as a “hot topic” item and submitted for inclusion in the Health and Safety Committee meeting.

10.4 Any lessons learned are shared with staff via the members of the Fire Safety Committee.

11.0 Freedom of information requests

11.1 There has been no freedom of information requests within the reporting period.

12.0 Enforcement

12.1 No Enforcement notices were issued to the Trust in the reporting period.

12.2 Leicestershire Fire and Rescue Service (LFRS) have conducted the following visits across all three sites:-

- 9 April 2021 – Risk Visit at LRI; Kensington & Osborne Buildings.
- 28 May 2021 – Exercise Planning visit at Glenfield Hospital.
- 4 June 2021 - Exercise Planning visit at Glenfield Hospital.
- 15 June 2021 – Dry Riser inspections at the LRI.
- 6 July – Evacuation Training Exercise at Ward 17 Glenfield Hospital.
- 20 July – Dry Riser Inspections of Balmoral and Sandringham Buildings at the LRI.
- 19th October – Risk Review of Balmoral Building at the LRI.
- 19th November - Review of UFS with LFRS Fire Safety Officers.

- 10th December – Fire Service Audit of Balmoral Building at the LRI.
- 7th January - LRI Windsor - Dry riser and smoke vents positioning in Windsor Building.

12.3 A risk review visit was scheduled for the 17th December but it was cancelled without notice due to Fire Service Response commitments.

13.0 Estates Return Information Collection (ERIC)

13.1 The ERIC report is a mandatory information return required by the Department of Health for all NHS Trusts including Ambulance Trusts. It comprises information relating to the costs of providing and maintaining the NHS Estate including buildings, maintaining and equipping hospitals, the provision of service e.g. laundry and food, and the costs and consumption of utilities.

13.2 The ERIC data relating to Fire Safety for 2021/22 has been submitted as outlined below:

13.3 Table 05 UHL ERIC Return for FIRE 2021/22

Ref	Field	Definition	Unit(s)
01	Fires recorded	Total number of fires recorded as required by HTM 05-01: Managing healthcare fire safety. https://www.gov.uk/government/publications/managing-healthcare-fire-safety	4
02	False alarms – No call out	Total number of false alarms that were dealt with by the organisation, without the fire and rescue service being called out.	129
03	False alarms – Call out	Total number of fire alarms that were attended by the fire and rescue service, but which the cause was a false alarm.	51
04	Number of deaths resulting from fire(s)	Total number of deaths of patients, visitors and staff resulting from fire(s).	0
05	Number of people injured resulting from fire(s)	Total number of patients, visitors and staff injured resulting from fire(s).	0
06	Number of patients	Total number of patients injured during evacuations, caused by fires or false alarms.	0

	sustaining injuries during evacuation		
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14.0 Fire Safety Resources

- 14.1 The Fire Safety Team currently employs four Fire Safety Officers equating to 3.1 full-time equivalent posts.
- 14.2 The roles are required to support University Hospital of Leicester NHS Trust (UHL) and Leicester Partnership Trust (LPT) across multiple premises in Leicester, Leicestershire and Rutland.
- 14.3 UHL are supported by two full-time Fire Safety Officers.
- 14.4 LPT are supported by two part-time Fire Safety Officers.

15.0 Fire Safety Work Plan / Priorities for 2022/23

- 15.1 There are a number of priority areas that are to be focused on in the coming year within the Fire Safety Team including:
 - a) Develop Building Fire Risk Assessment Documents to support the current Department FRA's in place.
 - b) Increase the FRA Review Inspection output in order to ensure compliance.
 - c) Development and improvement of documented local evacuation procedures.
 - d) Continue to increase the number of suitably training Fire Wardens across the Trust.
 - e) Assess the potential for re-starting 'face to face' annual fire training sessions.
 - f) Continuation of the development and implementation of local Fire Log books.
 - g) Implement the new Fire Evacuation Procedure Training.
 - h) Provide Fire Evacuation Drills to all stand-alone buildings and Clinical Education Centres.
 - i) Provide the Capital Team with advice and assistance on all Capital Works including all Reconfiguration Schemes.
- 15.2 The Backlog Capital plan for 2022/23 remains fluid and dependent on what final budget allocation is received; a list will be compiled and for Capital works in regards to the prioritisation of required Fire rectification/improvement works.

16.0 Appendix A – Annual Fire Statement

Annual Fire Safety Statement: 2021/22

NHS Organisation: University Hospitals of Leicester NHS Trust (UHL)		
I confirm that for the period 1 st April 2021 to 31 st March 2022, all premises which the organisations owns, occupies or manages have had Fire Risk Assessments undertaken in compliance with the Regulatory Reform (Fire Safety) Order 2005, and (please 'check' the appropriate boxes)		
1	There are no significant risks arising from the fire risk assessments.	<input type="checkbox"/>
2	The organisation has developed a programme of work to eliminate or reduce to a reasonably practicable level the significant risks identified by the risk assessment. (limitations / cuts on available budgets may place constraints on what risks can be targeted / prioritised / rectified)	<input checked="" type="checkbox"/>
3	The organisation has identified significant risks, but does not have a programme of work to mitigate those significant risks.	<input type="checkbox"/>
4	Where a programme to mitigate significant risks has not been developed, please insert the date by which such a programme will be available, taking account of the degree of risk.	<input type="checkbox"/>
5	During the period covered by this statement, the organisation has not been subject to any enforcement action by the fire and rescue authority. Please outline details of enforcement action in Annex A Part 1.	<input checked="" type="checkbox"/>
6	The organisation does not have any on-going enforcement action pre-dating this Statement. Please outline details of on-going enforcement action in Annex A Part 2.	<input checked="" type="checkbox"/>
7	The organisation achieves compliance with the Department of Health's fire safety policy by the application of HTM 05 or some other suitable method.	<input checked="" type="checkbox"/>
Chief Executive		Richard Mitchell
Signature:		
Date:		
Director of Estates and Facilities:		Mike Simpson
Signature:		
Date		
Fire Safety Manager:		Michael Blair
Signature:		<i>MBlair</i>
Date:		
Completed Statement to be retained for future audit.		

ANNEX A

Part 1 – Outline any enforcement action taken during the past 12 months and the action taken or intended by the organisation. Include, where possible, an indication of the cost to comply.

No enforcement action taken in the last 12 months

Part 2 – Outline any enforcement action on-going from previous years and the action the organisation has taken so far. Include any proposed action needed. Include an indication of the cost incurred so far and, where possible, an indication of costs to fully comply.

Not Applicable – no on-going enforcement from previous years.

16.0 Appendix B – Balmoral Fire Alarm

The Need

The Fire Alarm in the Balmoral Building was beginning to develop significant issues and was due replacement due to its age and the concern that a minor failing could provide long term major issues. The decision was made to install a new fire alarm system before the old system became problematic to a point that repair was unachievable.

The New System and Changes Applied

The decision was made to use the same hardware that had been installed within the Windsor Building; Advance Fire Alarm Panels and Apollo Fire Detection.

In order to move the Trust forward in regards to both technology and procedures around preventing unnecessary disruption the following steps were taken:-

- A Graphics Package has been installed using Trust Data provision; graphic tablets are located within Departments throughout the Balmoral Building; these tablets allow for a rapid identification of the location of any fire detector activation.
- A 'double knock' procedure has been adopted with the following changes made to the fire alarm activations:-
 - A Single Fire Detector Activation – An intermittent alarm will sound in the Department of activation; no other alarms will sound. Single fire detector activation normally indicates a false alarm. Staff will investigate the alarm following the use of the graphics panel; if a fire is discovered they will activate a 'Break Glass Manual Call Point'.
 - Two or More Fire Detector Activation – No Change to the original procedure. There will be a continuous alarm in the Department of activation and intermittent alarms in all adjoining areas (to the side, above and below).
 - Break Glass Manual Call Point Activation – No Change to the original procedure. There will be a continuous alarm in the Department of activation and intermittent alarms in all adjoining areas (to the side, above and below).

The Aim of the Changes

Graphics Panels – to provide Staff with a tool that allows them to identify the location of activation quickly and thus speeding up the time for investigation. In a clinical environment, the speed of inspection and identification of the potential fire is paramount in order to facilitate a safe and effective evacuation.

The 'Double Knock' Procedure – this is all about reducing the impact on Staff, Patients and Services without increasing risk; it also works well in conjunction with

the graphics panels due to the increased speed of inspection. Once in place, false alarms will not indirectly affect those adjoining areas, often creating significant disruption in clinical areas that may contain high dependency patients. The double knock also works with critical services which include air handling units; allowing the units to continue to work when only a single fire detector is activated.

The Future

The Fire Safety Team will monitor the success of the new system and the aim is to mirror this system across the entire Trust. The mirroring will include all procedures and the same hardware which provide the following benefits:-

- Staff will be able to move between Departments, Buildings and sites and be familiar with equipment (graphics panels) and procedures.
- The consistency of hardware will assist Estates in the maintenance of the system with regards to competency and availability of spares across all three sites.
- The hardware used is widely available and there will be a greater level of competition around the maintenance of the system and potentially reducing costs.