

**Trust Fire Safety Strategy and Policy WAHT-CG-483.
Supporting Document 5 –**

Fire Incident Action Plan

WORCESTERSHIRE ROYAL HOSPITAL SITE

Revision	Date	Amendment	Name
04-01	09/11/2004	Issue of new document	
06-01	04/09/2006	Amendments to the portering roles and addition of security staff roles in the New Hospital together with the removal of the Trust 202 bleep holder (old Trust Duty Manager) from the Assembly Point Coordinator role in both areas of the site being replaced solely by the Bed Manager (bleep 557)	
09/01	1/10/2009	Appendix 6b Aconbury buildings: Bed Managers ceased to perform the role of Assembly Point Coordinator in this part of the Worcester site. new corporate bleep holders introduced (bleep 144) to undertake this role during weekdays with the daytime nurse practitioners (bleep 660) covering the role by day during weekends and Bank Holidays.	
10/01	1/11/2010	Daytime nurse practitioners ceased undertaking the APC role in Aconbury. Bed Managers now undertaking this role in place of the nurse practitioners BUT ONLY at weekends and Bank Holidays ie when corporate bleep holders are not available.	Fred Roden
12/01	1/09/2012	Aconbury Buildings portering presence ceased linked to ward closures and consequently the portering/security fire incident response amended to reflect attendance from the main hospital building i.e. 432 and 899 bleep holder attendance.	Fred Roden
14/01	1/06/2014	Review and updating of ISS fire team membership roles/names to reflect ISS reorganisation.	Fred Roden
15/01	1/02/2015	Bed Managers take full time responsibility for Aconbury APC role as 144 corporate bleep holder ceased to exist following transfer of staff from Aconbury East to 3 Kings Court)	Fred Roden
16/01	25/10/2016	Comprehensive review to incorporate staff structure changes and new areas including Oncology Centre and ED Expansion. Aconbury buildings portering presence partially restored.	Fred Roden
17/01	07/02/2017	Draft re-visited to add Acute Fire Team responses to WH&CT buildings on the site following liaison between the Trusts.	Fred Roden
17/02	06/09/2017	Draft re-visited to revise Acute Fire Team responses to WH&CT buildings on the site following liaison between the Trusts.	Fred Roden
17/03	27/11/2017	Draft re-visited to add Engie fire alarm technician (Bleep 114) to the list of fire team bleep-holders. Also amended Stand-Down procedure to allow for closure of UFAS incidents by the Hospital Fire Team Incident Manager if Fire Service do not attend. Also, Malvern View Staff Residents responsible for their own 999 calls and no attendance to them by Acute Fire Team apart from ISS Security.	Fred Roden
18/01	08/02/2018	Draft re-visited to add 103 bleep holder to fire team and change IM and APC response to Day and Night. Oncology and Aconbury buildings included in main hospital Appendix A. All other buildings covered in Appendix B. Appendix C therefore removed.	Fred Roden
19/01	24/09/2018	Draft re-visited to change Engie Fire Alarm Technician response to only attend during hours of 0600hrs – 2200hrs Monday to Friday and 0600hrs – 1800hrs Saturday and Sunday. The Fire team structure reverts back to prior to 26th Nov 2017 with the ISS Shift Leader dealing with Fire Alarm	Fred Roden

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		Systems and only calling on the on-call Estates Technician if necessary. Full Acute Fire Team response to Aconbury North Evergreen Ward added. List of Team 04 and Team 50 Bleep holders added to Switchboard Action Card.	
20/01	12/03/2020	Full review of document to tie in with review period of the Trust Fire Safety Strategy and Policy WAHT-CG-483. No significant changes made.	Fred Roden
20/02	22/04/2020	Document re-designated as Supporting Document 5 of the Trust Fire Safety Strategy and Policy WAHT-CG-483. No significant changes made.	Fred Roden
22/01	12/08/2022	Fred Roden reviewed the document 2021, Further review conducted 2022 to ensure no changes, but to ensure this is a 2022 document.	Julie Noble

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1. Aim and Scope of Procedure:

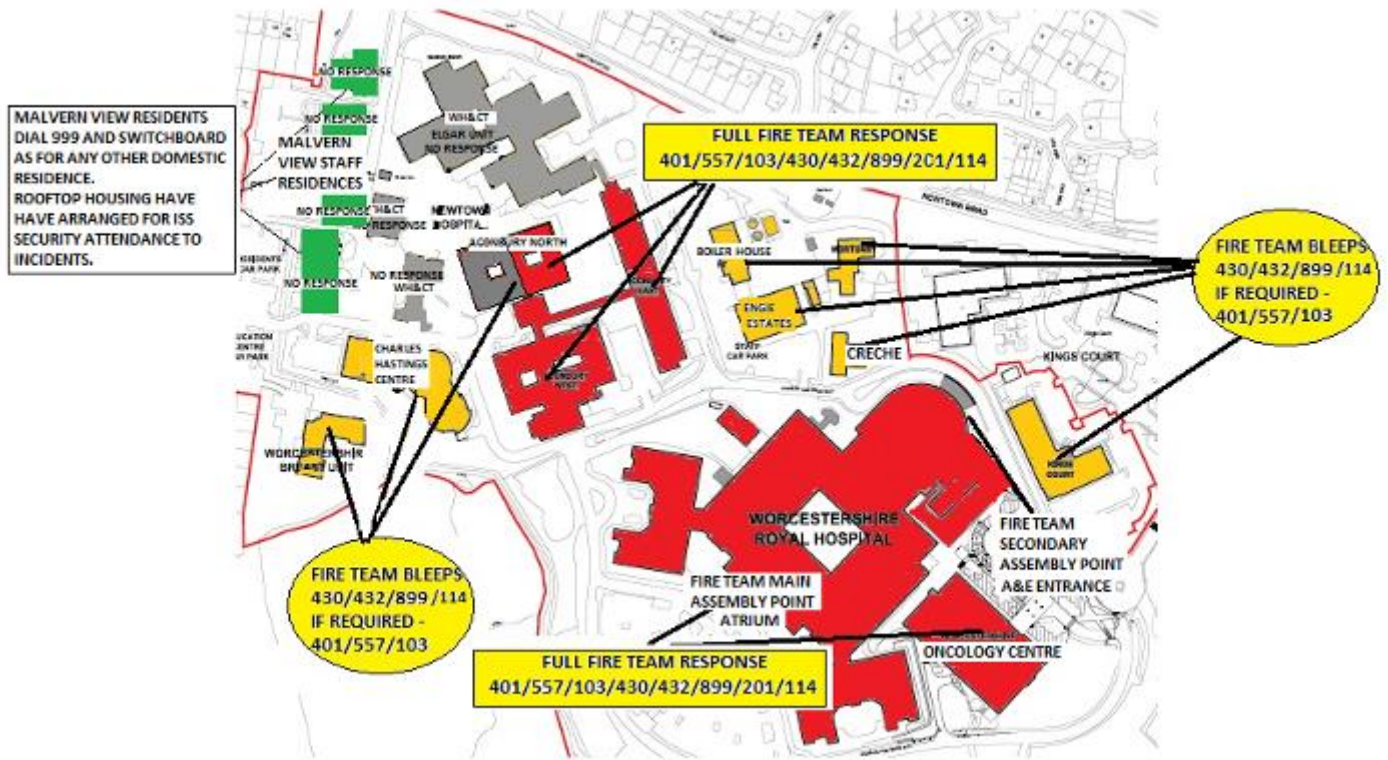
This document contains guidance for staff in the following buildings on how to respond to an alarm of fire and on the site fire team response relevant to the affected building as shown in the table below:

BUILDING	TRUST	FIRE TEAM ASSEMBLY POINT	RESPONSE	BLEEP HOLDERS
1. Worcestershire Royal Hospital	WAHT	Main WRH Atrium (alt – A&E)	Full Acute Fire Team	401/557/103/430/432/899/114
THE STAFF MAIN ASSEMBLY POINT FOR WRH IS INSIDE THE HOSPITAL MAIN ENTRANCE ATRIUM. (IN THE EVENT OF A CONTINUOUS ALARM IN THE ATRIUM THE STAFF MAIN ASSEMBLY POINT SHOULD BE MOVED TO A&E ENTRANCE).				
BUILDING	TRUST	FIRE TEAM ASSEMBLY POINT	RESPONSE	BLEEP HOLDERS
2. Oncology Centre	WAHT	Initially Main WRH Atrium then outside Oncology main entrance	Full Acute Fire Team	401/557/103/430/432/899/114
3. Aconbury East	WAHT	Building Main Entrance	Full Acute Fire Team	401/557/103/430/432/899/114
4. Aconbury West	WAHT	Building Main Entrance	Full Acute Fire Team	401/557/103/430/432/899/114
5. Aconbury North Evergreen Ward	WAHT	Link Corridor Entrance	Full Acute Fire Team	401/557/103/430/432/899/114
6. Aconbury North WHCT Areas	WHCT	Link Corridor Entrance	Acute Support Site Fire Team initially*	430/432/899/114
7. Crèche	WAHT	Building Main Entrance	Acute Support Site Fire Team initially*	430/432/899/114
8. Charles Hastings Centre	WAHT	Building Main Entrance	Acute Support Site Fire Team initially*	430/432/899/114
9. Breast Unit (ex 220 Newtown Road)	WAHT	Building Main Entrance	Acute Support Site Fire Team initially*	430/432/899/114
10. 3 Kings Court	WAHT	Building Main Entrance	Acute Support Site Fire Team initially*	430/432/899/114
11. Estates Offices	WAHT	Building Main Entrance	Acute Support Site Fire Team initially*	430/432/899/114
12. Mortuary	WAHT	Building Main Entrance	Acute Support Site Fire Team initially*	430/432/899/114
13. Boiler House	WAHT	Building Main Entrance	Acute Support Site Fire Team initially*	430/432/899/114
14. Elgar Unit	WHCT		No Response by Acute Fire Teams	WHCT RESPONSIBILITY
15. Malvern View Staff Residences	N/A		No Response by Acute Fire Teams, Residents dial 999 and also the Switchboard who in turn notify ISS security	ROOFTOP HOUSING RESPONSIBILITY IN ACCORDANCE WITH THEIR OWN MALVERN VIEW PROCEDURE

* Only the Acute Support Site Fire Team (Bleeps 430/432/899/114) will initially attend the outlying buildings and the ISS Shift Team Leader (Bleep 430) should request the Acute Incident Manager and Acute Assembly Point Coordinator to attend only if they are thought to be needed at the scene.

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2. Key Staff Responsibilities – Acute Full Site Fire Team:

Post	Responsibilities
401 Bleep Holder Senior Nurse	Incident Manager (Day) APC (Night)
103 Bleep Holder Clinical Nurse Practitioner	Incident Manager (Night)
557 Bleep Holder Bed Manager	Assembly Point Co-ordinator (Day)
401 Bleep Holder Senior Nurse	Assembly Point Co-ordinator (Night)
430 Bleep Holder ISS Shift Leader	Fire Team response
432 Bleep Holder Porter	Fire Team response Incident Porter
114 Bleep Holder Engie Fire Alarm Technician	Fire Team response (W/Days 0600 to 2200 W/End 0600 to 1800)
899 Bleep Holder Security	Fire Team response Security 1
Aconbury Porter	Assist when available (Day only)

Key Staff Responsibilities – Acute Support Site Fire Team:

Post	Responsibilities
430 Bleep Holder ISS Shift Leader	Fire Team response
432 Bleep Holder Porter	Fire Team response Incident Porter
114 Bleep Holder Engie Fire Alarm Technician	Fire Team response (W/Days 0600 to 2200 W/End 0600 to 1800)
899 Bleep Holder Security	Fire Team response Security 1
Aconbury Porter	Assist when available (Day only)

1. References:

<u>Internal Documents:</u>	<u>Code:</u>
Trust Fire Safety Strategy & Policy	Estates Dept.
<u>External Documents:</u>	<u>Where held:</u>
NHS FIRECODE HTM 05-03 Part A	Estates Dept.
Regulatory Reform (Fire Safety) Reform Order 2005	Estates Dept.

2. INTRODUCTION

The Worcestershire Acute Hospitals NHS Trust attaches the greatest importance to Fire Precautions and Fire Safety Procedures in the Hospital. Patients and visitors require constant assistance and observation to ensure their health and safety and in particular it is necessary for management and staff to work together positively to achieve and maintain a high standard of Fire Safety.

It is expected that the managers of the buildings on the site will do all possible in the field of construction, operation and maintenance of buildings, plant, equipment and facilities to achieve a fire safe environment and to manage the fire risks.

With regard to the preparedness of staff to deal correctly with a fire incident, Management are required by law to ensure that persons employed to work in the premises receive appropriate instruction or training in what to do in case of fire, and that records are kept of instruction or training given for that purpose. Accordingly, the Worcestershire Acute Hospitals NHS Trust requires that **all** employees of **all** disciplines attend fire instructions and training periods on the basis of at least one per year, and that records of such attendances should kept by heads of departments and the Trust Training Department.

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APPENDIX 1

FIRE INCIDENT ACTION PLAN **WORCESTERSHIRE ROYAL HOSPITAL SITE** **STRUCTURAL**

- a Buildings.
- b Access Driveway.
- c Fire Separation and Means of Escape.

a **BUILDINGS**

Worcestershire Royal Hospital site consists of a range of hospital buildings occupied by various organizations including the Worcestershire Acute Hospitals NHS Trust and the Worcestershire Health and Care NHS Trust.

b **ACCESS DRIVEWAYS**

The Fire Service will attend the site to initially view the relevant fire alarm indicator panel:

- i. WRH Building – Staircase Enclosure by A&E Ambulance Entrance
- ii. Aconbury Buildings – Switchboard Ground Floor Aconbury East
- iii. 3 Kings Court – Main Entrance

They will be directed to the incident by a Porter and to be briefed by the Incident Manager/Assembly Point Coordinator.

The entrances and roads on the site must be maintained clear at all times and drivers of delivery vehicles must be immediately available during loading and unloading.

c **FIRE SEPARATION AND MEANS OF ESCAPE**

The buildings on site have fire resisting separating doors, fire compartments, sub fire compartments and fire alarm zones that are designed to support safe evacuation of occupants away from the fire. All corridors and stairways are fire protected and doors must be kept shut or automatically self-closing at all times. Fire alarm indicator panels are sited strategically in each building.

APPENDIX 2

FIRE INCIDENT ACTION PLAN **WORCESTERSHIRE ROYAL HOSPITAL SITE** **FIREFIGHTING EQUIPMENT**

Firefighting equipment as considered appropriate for the risk involved is provided and sited throughout the building on the site. This may be in fixed locations or portable extinguishers that are additional to the fixed equipment.

FIXED EQUIPMENT

DRY RISER FIRE HYDRANTS

These can be connected to the water main and enable the Fire Service to quickly produce main water jets within the building. Additional sub-surface public hydrants are provided throughout the site.

DO NOT DIRECT WATER ONTO LIVE ELECTRIC SWITCHES, PLUGS, EQUIPMENT OR CIRCUITS.

PORTABLE EQUIPMENT

Effort and consideration have been given to standardization in order to reduce the number of different types necessary. Those provided are: -

RED\BLACK LABEL - CARBON DIOXIDE EXTINGUISHERS

Use safely on electrical equipment, small spillages of flammable liquids and ordinary combustibles.

RED\CREAM LABEL - FOAM EXTINGUISHERS

Use on flammable liquids and ordinary combustibles. (**Do not use on electrical equipment**).

RED\BLUE LABEL - DRY POWDER EXTINGUISHERS

Use on flammable liquids, electrical equipment and ordinary combustibles.

RED\WHITE LABEL - WATER EXTINGUISHERS

Use on ordinary combustibles. (**Do not use on electrical equipment or flammable liquid fires**).

FIRE BLANKETS

Use to smother a fire by covering.

ONLY USE FIRE EXTINGUISHERS IF YOU KNOW HOW TO SAFELY OPERATE THEM ONTO THAT PARTICULAR TYPE OF FIRE. BEFORE FIGHTING THE FIRE ENSURE THAT THE FIRE ALARM HAS BEEN SOUNDED, THE FIRE SERVICE HAS BEEN CALLED AND EVERYONE IN DANGER FROM THE FIRE AND SMOKE HAS BEEN SAFELY EVACUATED. IF IN ANY DOUBT ABOUT YOUR OWN SAFETY OR THE SAFETY OF USING A FIRE EXTINGUISHER DO NOT USE IT. CLOSE ALL DOORS TO CONTAIN THE FIRE AND SMOKE AND LEAVE THE BUILDING UNTIL THE FIRE SERVICE ARRIVES.

APPENDIX 3

FIRE INCIDENT ACTION PLAN **WORCESTERSHIRE ROYAL HOSPITAL SITE** **FIRE ALARM** **MANUAL AND AUTOMATIC**

The buildings are covered by Fire Alarm systems with indicator panels and repeater panels strategically sited within each building. Main indicator panels are also fitted within the Switchboard/Helpdesk room and the operators will immediately call the fire Service to all fire alerts on site.

The WRH building fire alarm is also linked to an external fire alarm receiving centre who will also alert the fire service to an incident.

In some of the smaller buildings there will be a continuous sounding "Fire" signal that signifies immediate total evacuation of the whole building.

In the larger buildings there are three possible alarm sounds:

1. **Continuous sounding "Fire" signal.**
2. **Intermittent sounding "Alert" signal.**
3. **Nurse Base Alarm (WRH new hospital building only)**

1. The continuous "fire" signal will sound within the affected Zone and the intermittent "alert" signal will sound in the immediately adjacent zones. In the Worcestershire Royal new Hospital building there are also Nurse Base Alarms that will sound in the non-adjacent zones. The fire Service are called automatically by Switchboard.
2. The intermittent "alert" signal will change to the continuous "fire" signal in the following circumstances:
 4. Someone operates a break glass point in the zone.
or
 5. Smoke activates a sensor in the zone.
3. A continuous "Fire" signal for any chosen building or zone can also usually be activated from the Main indicator panel of the building's fire alarm system.

APPENDIX 4

FIRE INCIDENT ACTION PLAN **WORCESTERSHIRE ROYAL HOSPITAL SITE** **ELECTRICAL**

1. MAINS POWER
 2. ESSENTIAL POWER
 3. EMERGENCY LIGHTING
 4. LIFTS
-

1. MAINS POWER

Electricity Board supplied.

2. ESSENTIAL POWER

Standby Generator supplied for some buildings.

3. EMERGENCY LIGHTING

In the event of failure of electricity supply from the mains or circuit failure, battery operated lighting units come into operation, in all escape routes and corridor areas. The lighting units provide a minimum standard of illumination for up to three hours.

4. LIFTS

UNDER NO CIRCUMSTANCES should lifts be used when a fire alarm has been activated. A possible failure of electrical circuits or the spread of smoke and fire could make the use of lifts very dangerous.

Only when the Fire Officer in charge of the fire has given permission can lifts be used.

A key switch is installed within each lift to allow operation of the individual lifts with a preference key by the fire Service during an incident.

5. DOOR LOCKS AND SELF CLOSERS

Electronic security door locks may be fitted that will release within and to the boundary of the fire zone where the fire is detected, and the alarm raised. Within the fire zone any corridor fire doors that are normally held open by door magnets will be released and self closed by the actuation of any fire detector or manual call point. All door hold-open devices should normally incorporate a manual release button adjacent to each door to facilitate closure and allow testing.

6. VENTILATION SYSTEM/SMOKE DAMPERS

The buildings' ventilation systems may be protected by fire dampers and shut down controls that operate automatically in the event of a fire. There are also override control panels for use by the fire Service. Staff should be aware that the system protection operates on different principles depending upon the area being served and the controls must only be operated by trained engineers or the fire Service.

APPENDIX 5

FIRE INCIDENT ACTION PLAN **WORCESTERSHIRE ROYAL HOSPITAL SITE**

Each separate building/department will have a fire action and evacuation procedure designed specifically for that area. However, there are sufficient standard elements within each procedure to enable a Site Fire Action Plan to provide a coordinated "site fire team" response to each building.

SECTIONS

1. The responsibilities of individual members of staff.
2. The response of Staff throughout the affected building on discovering a fire (or suspected fire) or on hearing the alarm.
3. The Site Fire Team.
4. The roles of members of the Site Fire Team.
5. The arrangements for "stand down" from the incident.
6. The post "stand down" arrangements that may need to be made.
7. The reporting and debrief arrangements and responsibilities.
8. Assembly point for spare staff.
9. Control and Safety of Patients and Visitors.

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1. RESPONSIBILITIES OF INDIVIDUAL MEMBERS OF STAFF

All Staff must attend fire training of the type and frequency required in the Trust Fire Safety Strategy and Policy document. Staff must know what to do in case of fire and understand the basic principles of fire precautions in their workplace.

All Staff must: -

- KNOW** - The location of fire alarm operating points.
- KNOW** - The means of escape, exit doors and routes by corridors and staircases.
- KNOW** - The fire resisting doors between one compartment and the next and be aware of the protection afforded by these doors.
- KNOW** - The location of fire appliances and how to use them.
- KNOW** - The fire routine and study the notices that are displayed at fire alarm points.
- UNDERTAKE** Fire Training on Induction and thereafter annually.

2. STAFF RESPONSE: -

(A) ANYONE DISCOVERING OR SUSPECTING A FIRE

- 1 Break the glass in the nearest fire alarm point - The fire alarm will sound continuously in your zone and the site fire team and the Fire Service will be called automatically.
- 2 The location of the fire will also be displayed on the building's fire alarm indicator panels.
- 3 The staff from your building and the site fire team will assemble to provide you with "back-up" support. Liaise with the Incident Manager as soon as possible if you need help.
- 4 Evacuate any patients in immediate danger away from the fire, through the fire doors and fire exits, to adjacent unaffected areas.
- 5 If possible, ring the switchboard on 2222 and tell them the exact location of the fire and any relevant information.
- 6 Tackle the fire only if safe to do so, otherwise close doors to contain it.

(B) IF YOU HEAR THE CONTINUOUS FIRE ALARM SOUND IN YOUR AREA

The continuous sound indicates that there is a fire in your immediate area: -

- The senior nurse/manager or designated fire warden for the ward or department must take immediate charge of the area.
- In a Day Unit or Department – Evacuate immediately to adjacent safe areas.
- In an Inpatient unit or Theatre – Search the area for signs of fire or smoke and evacuate only if there is potential danger to patients.
- Send a member of staff to check the nearest fire panel for the location of the fire. If there are no obvious signs of a fire look for the broken fire alarm point or any activated smoke sensors and liaise with the Incident Manager and fire Service when they arrive.
- If at any time fire or smoke is found immediately evacuate patients away from the fire through the fire doors to adjacent unaffected areas.
- Tackle the fire only if safe to do so, otherwise close doors to contain it.
- Create a departmental/ward assembly point in an adjacent safe area and take a roll call.
- Liaise with the Incident Manager and the Fire Service and follow their instructions.

(C) IF YOU HEAR THE INTERMITTENT FIRE ALARM SOUND IN YOUR AREA

There is a fire in an adjacent zone.

- The senior nurse/manager or designated fire warden for the ward or department must take immediate charge of the area.
- They should send a member of staff to check the nearest fire panel for the location of the affected area.
- Send as many spare **CARE STAFF** as possible to form a support team:
- In WRH new hospital building only the staff should go directly to the continuous sounding zone and report to the Nurse in Charge or Incident Manager.
- In all other buildings they should go to the staff fire assembly point for that building and report to the Assembly Point Coordinator.
- Make a safety announcement to your ward / department.
- Keep patients and visitors under close control
- Prepare to receive evacuated patients and visitors.
- Prepare for possible evacuation of your area.

NB: If your Fire Alarm changes to a continuous sound this may indicate a spreading fire. Take action as for a Continuous Fire Alarm Sound.

(D) IF YOU HEAR A NURSE BASE ALARM (WRH NEW HOSPITAL BUILDING ONLY)

There is a fire alert elsewhere in the hospital.

- The senior person should send a member of staff to check the nearest fire panel for the location of the affected area.
- Send all spare staff to the main entrance to form the support team. If the fire affects the main entrance use the A&E entrance to assemble.
- Do not allow staff, patients or visitors to move to Continuous or Intermittent sounding areas.
- Wait for the "Official Stand-down" before allowing normal movement to continue.

(E) SWITCHBOARD

On receipt of a fire alarm either from the fire panels, the 2222 telephone or any other means, the switchboard will: -

- Immediately call the Fire Service.
- Notify the relevant Site Fire Team via Bleeps.
- If a real fire is reported make a second call to the Fire Service.
- Receive additional information regarding the nature of the incident from the 2222 line and the Fire Team and pass this to the Fire Service Control.
- Notify the relevant Managers according to duty list.

Switchboard staff should pass all relevant information to the fire Service and site fire team immediately it becomes available e.g. the name of the affected building, the best site entrance, affected zone, known fire or automatic alarm activation, any persons reported trapped etc.

3. THE FIRE TEAM

Depending upon the location of the incident and the organisation occupying the affected building the Fire Team may consist of some or all of the staff detailed below: -

Fire Warden – for the affected Ward/Department

Incident Manager – Day (0800-2000) Bleep 401 Senior Nurse on Duty
Night (2000-0800) Bleep 103 Nurse Practitioner

Assembly Point Coordinator – Day (0800-2000) Bleep 557 Day Bed Manager
Night (2000-0800) Bleep 401 Senior Nurse on Duty

ISS Shift Leader 430 Bleep.

Engie Fire Alarm Technician 114 Bleep Holder (W/Day 0600 to 2200. W/Ends 0600 to 1800) Note: The Engie on-call engineer manager can be called if required to provide emergency support and deal with technical issues when the Engie Technician is not on site.

Porters –Bleep 432 plus assigned Porters according to Duty Roster.

Security Staff 899 Bleep

Aconbury Porter when available during daytime only.

All persons on these rosters **MUST** receive appropriate training.

To avoid Clinical Staff being unnecessarily disrupted from their roles within the main hospital by Unwanted Fire Alarm Signals the Acute Support Site Fire Team (Bleeps 430/432/899/114) only will initially attend the outlying buildings identified on Page 3. The ISS Shift Team Leader (Bleep 430) should request the Acute Incident Manager and Acute Assembly Point Coordinator to attend only if they are thought to be needed at the scene due to any Patient or Staff implications. Otherwise the ISS Shift Leader will act as Incident Manager and liaise with the Fire Service as necessary.

4. THE ROLES OF MEMBERS OF THE HOSPITAL FIRE TEAM

FIRE WARDEN

To take initial charge of the affected area until the arrival of the Incident Manager.

Assess the incident and initiate immediate actions to contain the fire and evacuate patients and visitors.

INCIDENT MANAGER – Day (0800-2000) Bleep 401 Senior Nurse on Duty

Night (2000-0800) Bleep 103 Nurse Practitioner

To control and co-ordinate the incident at the affected zone until arrival of the Fire Service.

If a real fire is occurring, ask APC to get Switchboard to make a second call to the Fire Service.

Assess, supervise and control the evacuation of patients, visitors and staff from the affected areas.

Ensure any disabled occupants with Personal Evacuation Plans are evacuated safely.

Keep the Assembly Point Coordinator informed of the situation as it develops and to identify additional support requirements.

Liaise with the fire Service on their arrival at the affected area and brief the officer in charge.

ASSEMBLY POINT COORDINATOR – Day (0800-2000) Bleep 557 Day Bed Manager

Night (2000-0800) Bleep 401 Senior Nurse on Duty

Control and co-ordinate the incident on a site wide basis.

If a real fire is occurring, ask Switchboard to make a second call to the Fire Service.

Support the staff at the incident site by arranging additional staff support as requested by the Incident Manager.

Make arrangements throughout the Hospital site for continuing action relating to the incident.

Ensure Fire Service are met, briefed and directed to the affected area.

Liaise closely with the ISS Shift Leader.

Stand-down staff in accordance with STAND-DOWN procedures.

INCIDENT PORTER 432 Bleep Holder

Ensure that the Fire Service are met and directed to the affected zone via the best access route.

Assist the ISS Shift Leader and the Incident Manager as required.

SECURITY STAFF 1 899 Bleep Holder

Unlock the Fire Team Cupboard in WRH main entrance and take the ISS Shift Leader Tabard to the Incident.

Then assist the ISS Shift Leader and the Incident Manager as required.

SECURITY STAFF 2

Assist the Assembly Point Coordinator at the staff fire assembly point as required.

ISS SHIFT LEADER 430 Bleep Holder

Lead the Acute Support Site Fire Team (Bleeps 430/432/899/114) in the initial response to outlying buildings and in supporting the Acute Incident Manager and Acute Assembly Point Coordinator at all incidents where the full Acute Fire Team is deployed. Also provide technical support in controlling fire alarm systems. Silence alarms **ONLY** on authority of Fire Service (or Incident Manager under strict STAND-DOWN criteria). Take all necessary actions to restore the building to normal working.

ENGIE FIRE ALARM TECHNICIAN 114 Bleep Holder (W/Day 0600 to 2200. W/Ends 0600 to 1800)

Give such technical support as is required by the Hospital Fire Team and the Fire Service.

Inform the Incident Manager and Assembly Point Coordinator of any problems with equipment following the incident. Note: The Engie on-call engineer manager can be called if required to provide emergency support and deal with technical issues when the Engie Technician is not on site.

ACONBURY PORTER (When available during daytime only)

To give such support as is required by the Incident Manager, Assembly Point Coordinator and the Fire Service at any incident in the Aconbury buildings.

5. STAND DOWN PROCEDURES

The Fire Service must be called to any real fire however small and authority to silence or re-set fire alarms and to "Stand Down" staff in any real fire incident should ONLY be given by the Senior Fire Service Officer attending the incident. On receipt of such authority, the Incident Manager will stand down Staff and return the hospital to normal operation as appropriate given any ongoing issues.

However, in the rare event of a delayed Fire Service attendance to an automatic fire alarm activation, the Incident Manager may give authority to **silence** the fire alarms but only in the following circumstances: -

- * The alarm point /sensor that has been activated has been clearly identified
- * AND the incident has been clearly confirmed as an **Unwanted Fire Alarm Signal (UFAS)**.
- * AND there has been a thorough search of the template that has not revealed any other cause for concern
- * AND the Incident Manager, the Assembly Point Coordinator and the Fire Alarm Technician all agree.

Under these rare circumstances only, the Incident Manager may give authority to **silence** the fire alarms to reduce distress to patients.

If after a suitable re-assessment of the situation it is clear that the Fire Service are not going to attend the incident and that it was definitely caused by an **Unwanted Fire Alarm Signal**, then the Incident Manager may give authority for the fire alarm system to be **Reset**.

When the fire alarm system has been satisfactorily reset the "Stand Down" order can be given by the Incident Manager so that the affected zone can be re-occupied and normal duties resumed.

6. POST "STAND DOWN"

After a significant incident there may still be many issues that may need to be addressed by the hospital fire team and the senior staff on duty depending on the particular situation.

For Example:

- Relocation of patients.
- Notifying relatives.
- Reporting to higher/statutory authorities.
- Press release.
- Security of Area.
- Recovery area for staff.
- Replacement of Staff.
- Debrief arrangements.
- Bed situation and admissions state.
- Transport arrangements for staff.
- Forward planning.

7. DEBRIEFING

A Debrief Meeting should be held following all exercises, significant UFAS or actual Fire incidents. These meetings may include: -

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- Hospital Fire Team members.
- Trust Fire Safety Manager.
- PFI Representatives
- Service Provider Representatives
- Trust Estates & Facilities Managers.
- Representatives of Staff involved at site of Fire.

The Incident Manager is responsible for completing a Trust Incident Record form within 24hrs for each fire or “near miss” that they attend.

8. BUILDING FIRE TEAM ASSEMBLY POINTS FOR SPARE STAFF

For WRH hospital building the fire team assembly point is in the main WRH entrance atrium. **(In the event of fire affecting the atrium the staff fire assembly point should be moved to A&E entrance).**

For the Oncology Centre the initial fire team assembly point should be the main WRH entrance atrium then if support is required move to the Oncology Centre main entrance.

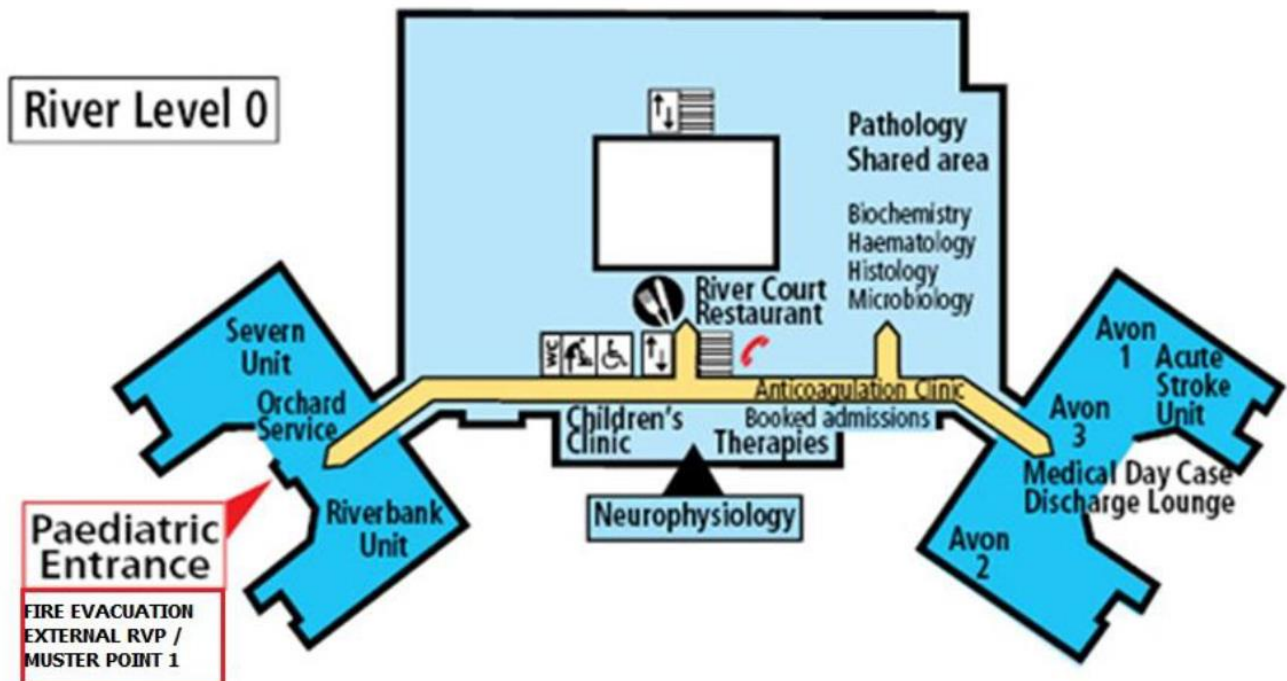
For all other buildings the staff fire team assembly point is the main entrance of the affected building.

PROGRESSIVE EVACUATION OF PATIENTS

In addition, there should be a pre-determined ward/department evacuation procedure with identified first assembly and second assembly areas for patients and visitors. These areas should be detailed within the ward / department’s own fire action procedures.

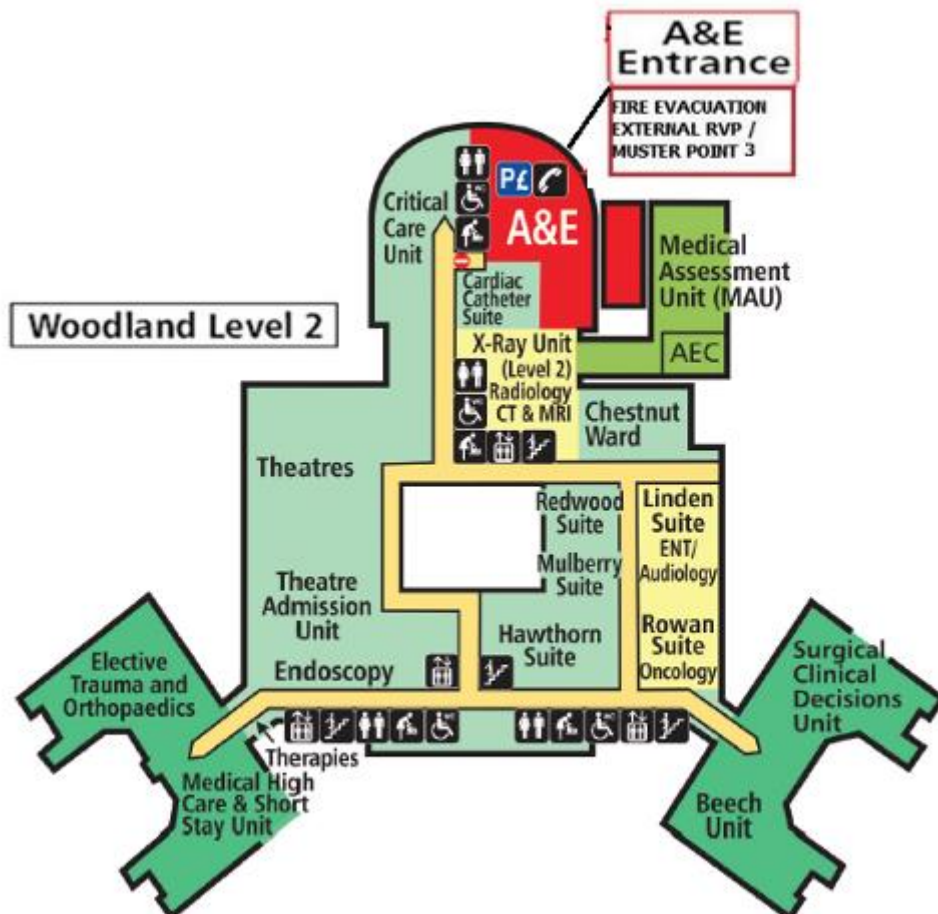
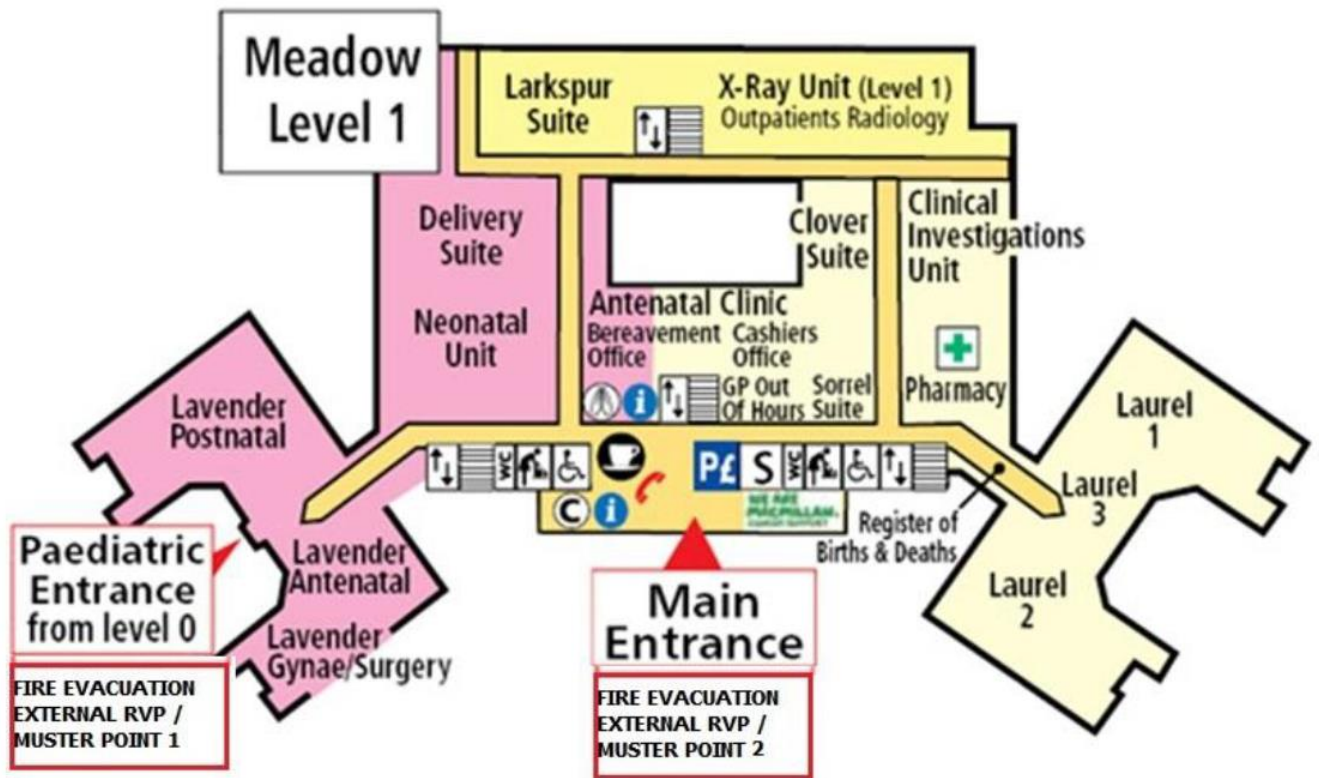
In the event of a **Major Evacuation** of the WRH building the Trust’s Major Incident Plan identifies the following external RVP / Muster points for Patients and Staff:

WRH SITE EXTERNAL FIRE EVACUATION MUSTER POINTS FOR PATIENTS AND STAFF IN THE EVENT OF MAJOR BUILDING EVACUATION



Fire Incident Action Plan

Worcestershire Royal Hospital Site



9. CONTROL AND SAFETY OF PATIENTS AND VISITORS

In all instances when the fire alarm has been actuated: -

- Day Units/Departments where the fire alarm is continuous must be completely cleared of patients and visitors ensuring that any disabled occupants with Personal Evacuation Plans are evacuated safely.
- Inpatient units where the fire alarm is continuous should be cleared of visitors, but patients need not be moved out unless there is a real threat to the area from smoke or fire.
- Patients and Visitors are to remain in intermittent sounding and unaffected wards/departments under the strict control of staff.
- Circulation areas such as main corridors, lift links and the staircases that may be needed by the Fire Service should be cleared of visitors.
- If Patients and Visitors are required to leave the building, they should be directed to the relevant pre-determined second assembly area or nearest external fire evacuation muster point.
- Staff, Patients and Visitors may only re-enter the building when approved by the Fire Service or the Incident Manager.

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APPENDIX 6A

WORCESTERSHIRE ROYAL HOSPITAL (including Oncology Centre, Aconbury - North(Evergreen Ward), East and West) .

**FIRE AREA
(CONSTANT SOUNDING ALARM)**

SENIOR NURSE/FIRE WARDEN TAKES CHARGE
DAY WARD/DEPT

- EVACUATE IMMEDIATELY TO ADJACENT INTERMITTENT SOUNDING SUB COMPARTMENT.

BEDDED WARD/THEATRE

- STAFF BEGIN SEARCH
- EVACUATE TO ADJACENT INTERMITTENT SOUNDING SUB COMPARTMENT ONLY IF NECESSARY

**ALERTED AREAS
(INTERMITTENT ALARM SOUND)**

- SENIOR NURSE/FIRE WARDEN TAKES CHARGE
- CHECK FIRE PANEL FOR LOCATION OF FIRE
- IF ADJACENT OFFER IMMEDIATE HELP.
- IF NOT ADJACENT SEND SPARE STAFF TO THE RELEVANT STAFF MAIN ASSEMBLY POINT
- RESTRICT PATIENT/STAFF MOVEMENTS.
- MAKE SAFETY ANNOUNCEMENT.
- PREPARE TO RECEIVE EVACUEES.
PREPARE FOR POSSIBLE EVACUATION

**(NURSE BASE ALARM SOUND)
WRH BUILDING ONLY**

- CHECK FIRE PANEL FOR LOCATION OF FIRE
- SEND SPARE STAFF TO ATRIUM ASSEMBLY POINT

INCIDENT MANAGER

**DAY (0800-2000) BLEEP 401 SENIOR NURSE ON DUTY
NIGHT (2000-0800) BLEEP 103 NURSE PRACTITIONER**

- TAKE CHARGE AT THE AFFECTED ZONE.
- ESTABLISH RADIO CONTACT WITH APC ON CHANNEL 1
- IF A REAL FIRE IS OCCURRING ASK APC TO GET SWITCHBOARD TO MAKE A SECOND CALL TO THE FIRE SERVICE.
- CHECK FIRE PANEL TO CONFIRM LOCATION OF FIRE.
- LIAISE WITH THE WARD/DEPT. FIRE WARDEN.
- COORDINATE THE EVACUATION OF THE AFFECTED AREA INCLUDING ANY OCCUPANTS WITH PEPS.
- LIAISE WITH ASSEMBLY POINT COORDINATOR FOR ADDITIONAL RESOURCES.
- LIAISE WITH FIRE SERVICE ON ARRIVAL.
- SUPPORT THE FIRE SERVICE AS REQUIRED.
- CO-ORDINATE ALL STAFF ACTIONS IN THE AFFECTED AREA.
- INITIATE SILENCE AND RESET OF ALARMS AND EVENTUAL STAND DOWN ONLY ON APPROVAL BY THE FIRE SERVICE.

ASSEMBLY POINT COORDINATOR

**DAY (0800-2000) BLEEP 557 BED MANAGER
NIGHT (2000-0800) BLEEP 401 SENIOR NURSE ON DUTY**

- WHEN BLEEPED ATTEND THE MAIN ENTRANCE STAFF ASSEMBLY POINT.
- IF A REAL FIRE IS OCCURRING ADVISE SWITCHBOARD TO MAKE A SECOND CALL TO THE FIRE SERVICE.
- ESTABLISH RADIO CONTACT WITH THE INCIDENT MANAGER ON CHANNEL 1.
- ASSESS THE INCIDENT.
- FORM STAFF INTO TEAMS AND DEPLOY AS NECESSARY.
- IF FIRE IS CONFIRMED SEND STAFF TO CONTROL ALL ENTRANCES.
- ENSURE FIRE SERVICE IS MET, BRIEFED & GUIDED TO THE AFFECTED AREA.
- KEEP SWITCHBOARD WELL INFORMED OF SITUATION.
- MAINTAIN CONTROL OVER THE WHOLE BUILDING.

ISS SHIFT LEADER(430 Bleep Holder)

- ATTEND AFFECTED ZONE.
- SUPPORT INCIDENT MANAGER AND ASSEMBLY POINT COORDINATOR
- LIAISE WITH FIRE SERVICE.
- ESTABLISH CONTROL OVER SYSTEMS.
- SILENCE & RE-SET FIRE ALARM WHEN APPROVED BY FIRE SERVICE AND INCIDENT MANAGER.
- TAKE ALL NECESSARY ACTIONS TO RESTORE THE BUILDING TO NORMAL WORKING

ENGIE FIRE ALARM TECHNICIAN 114 Bleep Holder

- PROVIDE TECHNICAL SUPPORT TO THE FIRE TEAM AND FIRE SERVICE AS NECESSARY.
(0600hrs – 2200hrs Monday to Friday
0600hrs – 1800hrs Saturday and Sunday)

PORTERS/SECURITY

(INCIDENT PORTER (432 Bleep Holder)

- ENSURE THAT THE FIRE SERVICE ARE DIRECTED TO THE AFFECTED ZONE VIA THE BEST ACCESS ROUTE.
- RESPOND TO THE AFFECTED ZONE TO ASSIST THE INCIDENT MANAGER AS REQUIRED.

SECURITY 1 (899 Bleep Holder)

- ASSIST THE ASSEMBLY POINT COORDINATOR AS REQUIRED.

SECURITY 2

- TAKE THE INCIDENT BAG AND ISSUE FIRE TEAM EQUIPMENT TO ASSEMBLY POINT COORDINATOR AND INCIDENT MANAGER.
- ASSIST THE INCIDENT MANAGER AS REQUIRED.

APPENDIX 6B

<p>Aconbury North(WHCT) / Crèche / Charles Hastings Centre Breast Unit (ex 220 Newtown Road) 3 Kings Court / Estates Offices / Mortuary / Boiler House</p>	<p>ACUTE FIRE TEAM HAS MAIN RESPONSIBILITY. ATTENDANCE RESTRICTED INITIALLY TO ACUTE SUPPORT SITE FIRE TEAM ONLY WITH ACUTE INCIDENT MANAGER AND ASSEMBLY POINT COORDINATOR REQUESTED BY THE ISS SHIFT LEADER TO ATTEND ONLY IF NEEDED.</p>
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- BUILDING AFFECTED**
- Senior Manager / Fire Warden to take charge.
 - Assess the incident
 - If a real fire is reported ensure second call is made to fire service.
 - Check fire panel to confirm location of fire.
 - Coordinate the evacuation of the affected area or building.
 - Liaise with Hospital Fire Team for additional resources.
 - Liaise with fire service on arrival.
 - Support the fire service as required.
 - Co-ordinate all staff actions in the affected area

- ISS SHIFT LEADER**
430 Bleep Holder
- WHEN BLEEPED ATTEND AFFECTED BUILDING.
 - LIAISE WITH THE BUILDING'S SENIOR MANAGER / FIRE WARDEN
 - IF A REAL FIRE IS OCCURRING ADVISE SWITCHBOARD TO MAKE A SECOND CALL TO THE FIRE SERVICE.
 - IF YOU THINK THE FULL ACUTE FIRE TEAM SHOULD ATTEND ASK SWITCHBOARD TO BLEEP TO REQUEST IMMEDIATE ATTENDANCE AT THE INCIDENT.
 - LIAISE WITH FIRE SERVICE.
 - ESTABLISH CONTROL OVER RELEVANT SYSTEMS.
 - SILENCE & RE-SET FIRE ALARM WHEN APPROVED BY FIRE SERVICE AND INCIDENT MANAGER.
 - TAKE ALL NECESSARY ACTIONS TO RESTORE THE BUILDING TO NORMAL WORKING

- PORTERS/SECURITY**
INCIDENT PORTER (432 Bleep Holder)
- ENSURE THAT THE FIRE SERVICE ARE DIRECTED TO THE AFFECTED BUILDING AND ZONE VIA THE BEST ACCESS ROUTE.
 - RESPOND TO THE AFFECTED BUILDING AND ZONE TO ASSIST THE ISS SHIFT LEADER AS REQUIRED.
- SECURITY 1 (899 Bleep Holder)**
- COLLECT THE INCIDENT BAG FROM ACONBURY SWITCHBOARD AND ISSUE FIRE TEAM EQUIPMENT TO ASSEMBLY POINT COORDINATOR AND INCIDENT MANAGER IF THEY ATTEND.
 - ASSIST THE ISS SHIFT LEADER AS REQUIRED.
- ACONBURY PORTER**
- DAYTIME ONLY - WHEN AVAILABLE WILL ALSO ASSIST AT INCIDENTS IN ACONBURY OR ELGAR UNIT.

- DAY (0800-2000) BLEEP 401 SENIOR NURSE ON DUTY**
NIGHT (2000-0800) BLEEP 103 NURSE PRACTITIONER
N.B. ONLY ATTENDS IF REQUESTED TO VIA SWITCHBOARD.
- TAKES CHARGE AT THE AFFECTED ZONE / BUILDING.
 - IF A REAL FIRE IS REPORTED ENSURE SECOND CALL IS MADE TO FIRE SERVICE.
 - CHECK FIRE PANEL TO CONFIRM LOCATION OF FIRE.
 - LIAISE WITH THE ISS SHIFT LEADER AND BUILDING'S FIRE WARDEN.
 - COORDINATE THE EVACUATION OF THE AFFECTED AREA INCLUDING ANY OCCUPANTS WITH PEPS.
 - LIAISE WITH ASSEMBLY POINT COORDINATOR FOR ADDITIONAL RESOURCES.
 - LIAISE WITH FIRE SERVICE ON ARRIVAL.
 - SUPPORT THE FIRE SERVICE AS REQUIRED.
 - CO-ORDINATE ALL STAFF ACTIONS IN THE AFFECTED AREA.

ENGIE FIRE ALARM
TECHNICIAN 114 Bleep
Holder
PROVIDE TECHNICAL SUPPORT TO THE FIRE TEAM AND FIRE SERVICE AS NECESSARY.
(0600hrs – 2200hrs Monday to Friday
0600hrs – 1800hrs Saturday and Sunday)

- ASSEMBLY POINT COORDINATOR**
DAY (0800-2000) BLEEP 557 BED MANAGER
NIGHT (2000-0800) BLEEP 401 SENIOR NURSE ON DUTY
N.B. ONLY ATTENDS IF REQUESTED TO VIA SWITCHBOARD
- WHEN BLEEPED ATTEND THE MAIN ENTRANCE STAFF ASSEMBLY POINT OF THE AFFECTED BUILDING.
 - IF A REAL FIRE IS OCCURRING ADVISE SWITCHBOARD TO MAKE A SECOND CALL TO THE FIRE SERVICE.
 - ESTABLISH CONTACT WITH THE INCIDENT MANAGER AND ISS SHIFT LEADER.
 - ASSESS THE INCIDENT.
 - FORM STAFF INTO TEAMS AND DEPLOY AS NECESSARY.
 - IF FIRE IS CONFIRMED SEND STAFF TO CONTROL ALL ENTRANCES.
 - ENSURE FIRE SERVICE ARE MET, BRIEFED & GUIDED TO THE AFFECTED AREA.
 - KEEP ALL KEY WARDS/DEPTS. INFORMED OF SITUATION.
 - MAINTAIN CONTROL OVER THE WHOLE BUILDING.

WORCESTERSHIRE ROYAL HOSPITAL SITE

SWITCHBOARD OPERATORS

UPON RECEIVING A FIRE ALARM SIGNAL, A 2222 TELEPHONE REPORT OF FIRE OR ANY OTHER NOTIFICATION OF POSSIBLE FIRE ON SITE:-

- 1 Record all relevant information with regard to the exact location and nature of the incident.
- 2 Call to the Fire Brigade via 999. Pass on any additional information received from the 2222 system. If a real fire is reported ensure second call is made to the fire service and the Trust on-call senior manager.
- 3 Notify the relevant Site Fire Team for the building or area affected via "Voice Messaging" Bleeps. (See fire team bleep holder lists below).
- 4 The responded Site Fire Team will keep switchboard informed about the incident.
- 5 If the Acute Support Site Fire Team requires assistance, they will request Switchboard to contact the Acute Fire Team Incident Manager (Bleep Bleep 401/103) and Assembly Point Coordinator (Bleep 557/103) and ask them to attend the incident.
- 6 For real fires in WH&CT buildings on site - If requested by WH&CT Site Fire Team contact Acute Fire Team Incident Manager (Bleep 401/103) and Assembly Point Coordinator (Bleep 557/401) and ask them to attend the incident.
- 7 Residents of Malvern View should contact Switchboard and ring the Fire Service directly via 999. Switchboard will immediately notify or provide a back up call to the fire brigade and also advise ISS.
- 8 Contact senior managers as requested by the Site Fire Team.
- 9 Advise Site Fire Team and on call Duty Managers of all media enquiries.

IF FIRE\SMOKE AFFECTS THE SWITCHBOARD ROOM

- (A) Sound the fire alarm
- (B) Tackle the fire only if safe to do so using the appropriate fire extinguishers.
- (C) If evacuation is required put consoles into NIGHT mode.
- (D) Leave area by the nearest available route and relocate to the back-up switchboard on WRH River Level.
- (E) Make a back-up 999 call to the fire brigade from the nearest available telephone.
- (F) Liaise with the Fire Team Incident Manager, Assembly Point Coordinator and Porters.
- (G) Contact all senior and other relevant Trust staff via the bleep system and advise them of the situation.
- (H) Inform the on-call senior manager that switchboard has been compromised.

APPENDIX 7 (FIRE ACTION CARD 1- CONTINUED)

**WORCESTERSHIRE ROYAL HOSPITAL SITE
SWITCHBOARD OPERATORS**

FIRE TEAM BLEEP HOLDERS RESPONSE LIST

Team 04 ACUTE SUPPORT SITE FIRE TEAM Aconbury North (WHCT) / Crèche / Charles Hastings Centre, Breast Unit (ex 220 Newtown Road) 3 Kings Court / Estates Offices / Mortuary / Boiler House		ORGANISATION
103	Nurse Practitioner (If Requested)	ACUTE
114	Engie Bleep Holder	ENGIE
401	Senior Nurse (If Requested)	ACUTE
430	ISS Shift Leader	ISS
432	Charge Hand Porter	ISS
545	Porter WHCT (WHCT areas only)	WHCT
557	Bed Manager (If Requested)	ACUTE
899	Security	ISS

Team 50 Worcestershire Royal Hospital (including Oncology Centre, Aconbury - North(Evergreen Ward), East and West) .		ORGANISATION
114	Engie Bleep Holder	ENGIE
401	Senior Nurse	ACUTE
430	ISS Shift Leader	ISS
432	Chargehand Porter	ISS
557	Bed Manager	ACUTE
899	Security	ISS
103	Nurse Practitioner	ACUTE

**TEAM 04 IS ACTIVATED IN THE EVENT OF FIRES IN THE NON PFI/WHCT BUILDINGS.
TEAM 50 IS ACTIVATED FOR FIRES IN MAIN PFI BUILDINGS.**

Note: The Engie on-call Engineer Manager can be called if required to provide emergency support and deal with technical issues when the Engie Technician is not on site.

APPENDIX 8 (FIRE ACTION CARD 2)

INCIDENT MANAGER (401/103 BLEEP)

DAY (0800-2000) BLEEP 401 SENIOR NURSE ON DUTY
NIGHT (2000-0800) BLEEP 103 NURSE PRACTITIONER

WRH (including Oncology Centre)	Acute IM to respond immediately
Aconbury - North (Evergreen), East & West	Acute IM to respond immediately
Aconbury North (WHCT) / Crèche / Charles Hastings Centre Breast Unit (ex 220 Newtown Road) 3 Kings Court / Estates Offices / Mortuary / Boiler House	Acute Fire Team have main responsibility but attendance restricted initially to Acute Support Site Fire Team only with Acute IM and APC to respond only if requested via Switchboard.
Elgar Unit - Old Management Block - WHCT workshop / former RVS building.	WH&CT have responsibility. No Response by Acute Fire Teams
Malvern View Staff Residences	RESIDENTS have responsibility. No Response by Acute Fire Teams ISS Security response only following switchboard notification.

UPON FIRE ALARM SOUNDING (OR BLEEP OPERATING)

- (1) PUT ON INCIDENT MANAGER TABARD. GO IMMEDIATELY TO THE AFFECTED AREA, ESTABLISH CONTACT WITH THE STAFF AND OBTAIN BRIEFING. YOU ARE RESPONSIBLE FOR THE EFFECTIVE CONTROL AND CO-ORDINATION OF EVACUATION.
- (3) SWITCH RADIO TO CHANNEL 1 AND ESTABLISH RADIO CONTACT WITH ASSEMBLY POINT COORDINATOR
- (4) ASSESS THE INCIDENT: -
 - A) CHECK YOU ARE AT THE CORRECT SITE!
 - B) IS THERE FIRE OR SMOKE?
 - C) ARE PEOPLE TRAPPED?
 - D) IS EVACUATION IN PROGRESS OR NEEDED?
 - E) ARE ADDITIONAL RESOURCES NEEDED (STAFF, EQUIPMENT ETC)?
 - F) ARE ANY OCCUPANTS SUBJECT TO PERSONAL EVACUATION PLANS?
- (5) IF A REAL FIRE IS REPORTED ENSURE THAT A SECOND CALL IS MADE TO THE SWITCHBOARD TO INFORM THE FIRE SERVICE AND THE TRUST ON-CALL SENIOR MANAGER.
- (6) REQUEST ANY ADDITIONAL RESOURCES IMMEDIATELY FROM THE ASSEMBLY POINT COORDINATOR THEN BRIEF THEM ABOUT THE DETAILS OF THE INCIDENT.
- (7) DEPLOY STAFF INTO AND AROUND THE INCIDENT AS NECESSARY - KEEP STRICT CONTROL.
- (8) LIAISE WITH THE ISS SHIFT LEADER AND ENGIE TECHNICIAN RE: OPERATION OF FIRE ALARM CONTROLS, SMOKE EXTRACTION, VENTILATION, OXYGEN, ELECTRICITY, GASES AND OTHER TECHNICAL ASPECTS.
- (9) BRIEF THE FIRE SERVICE AND CONTINUE TO ASSIST THE FIRE OFFICER AS NECESSARY AT THE SCENE.
- (10) INITIATE SILENCE AND RESET OF ALARMS AND EVENTUAL STAND DOWN ONLY ON APPROVAL BY THE FIRE SERVICE.

APPENDIX 9A (FIRE ACTION CARD 3a)
PORTERS & SECURITY STAFF

WRH INCLUDING ONCOLOGY CENTRE

UPON Bleeps OPERATING

**ALL FIRE TEAM MEMBERS TO PUT ON RELEVANT TABARDS AND SWITCH
RADIO TO CHANNEL 1.**

**(IF RADIOS FAIL USE TELEPHONES OR RUNNERS TO MAINTAIN CONTACT WITH
INCIDENT MANAGER, ASSEMBLY POINT COORDINATOR AND SWITCHBOARD).**

INCIDENT PORTER (Chargehand Porter 432 Bleep Holder)

Ensure Fire Service are met and guided to the affected area via the best route.

1. Go to the Fire Control Panel located in the A & E Ambulance Bay.
2. The Fire panel will highlight the Fire zone in red. Press print button in the lower right of the screen.
3. Press "Zoom in" button in upper right of the screen, then press print button.
4. Press "Zoom in" button again to select specific Fire alarm, press print button.
5. Collect the printouts from the printer, the key is in the red case on the wall by the door. Lift plastic front out.
6. Await the arrival of the Fire Service and hand the printouts to the leading Fire Officer.
7. Accompany the Fire Service to the Main Entrance unless the Fire is in A & E, ITU, X-Ray Level 2, MAU or TSSU in which case take them straight there.
8. Advise rest of Fire Team of the arrival of the Fire Service on site.

SECURITY STAFF 1 (899 Bleep Holder)

1. **ATTEND THE MAIN ENTRANCE ASSEMBLY AND REPORT TO THE ASSEMBLY
POINT COORDINATOR.**

SECURITY STAFF 2

1. **UNLOCK FIRE TEAM CUPBOARD IN MAIN ENTRANCE & TAKE ISS SHIFT LEADER
TABARD TO THE INCIDENT.**
2. **MEET WITH INCIDENT MANAGER AT THE AFFECTED ZONE AND HELP TO
ESTABLISH CONTROL POINT.**
3. **SUPPORT INCIDENT MANAGER BY: -**
 - A) **GATHERING INFORMATION ON TYPE OF INCIDENT.**
 - B) **CONTROLLING STAFF, VISITORS AND PATIENTS.**
 - C) **SECURING ALL ENTRANCES TO THE AFFECTED AREA.**
 - D) **LIAISE WITH ISS SHIFT LEADER.**

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APPENDIX 9(B) (FIRE ACTION CARD 3b)
PORTERS & SECURITY STAFF

ACONBURY - NORTH (EVERGREEN), EAST & WEST

UPON Bleeps OPERATING

ALL FIRE TEAM MEMBERS TO PUT ON RELEVANT TABARDS AND SWITCH RADIOS TO CHANNEL 1.

(IF RADIOS FAIL USE TELEPHONES OR RUNNERS TO MAINTAIN CONTACT WITH INCIDENT MANAGER, ASSEMBLY POINT COORDINATOR AND SWITCHBOARD).

SECURITY 1 (899 Bleep Holder)

- **COLLECT THE INCIDENT BAG FROM ACONBURY SWITCHBOARD AND ISSUE FIRE TEAM EQUIPMENT TO ASSEMBLY POINT COORDINATOR AND INCIDENT MANAGER.**
- **ASSIST THE ASSEMBLY POINT COORDINATOR AS REQUIRED.**

INCIDENT PORTER (432 Bleep Holder)

- **ENSURE THAT THE FIRE SERVICE IS DIRECTED TO THE AFFECTED BUILDING AND ZONE VIA THE BEST ACCESS ROUTE.**
- **RESPOND TO THE AFFECTED BUILDING AND ZONE TO ASSIST THE INCIDENT MANAGER AS REQUIRED.**

ACONBURY PORTER

- **DAYTIME ONLY - WHEN AVAILABLE WILL ALSO ASSIST.**

APPENDIX 9(C) (FIRE ACTION CARD 3c)
PORTERS & SECURITY STAFF

<p>Aconbury North (WHCT) / Crèche / Charles Hastings Centre Breast Unit (ex 220 Newtown Road) 3 Kings Court / Estates Offices / Mortuary / Boiler House</p>	<p>ACUTE FIRE TEAM HAS MAIN RESPONSIBILITY. BUT ATTENDANCE RESTRICTED INITIALLY TO ACUTE SUPPORT SITE FIRE TEAM WITH ACUTE INCIDENT MANAGER AND ASSEMBLY POINT COORDINATOR ONLY REQUESTED IF NEEDED.</p>
<p>Elgar Unit - Old Management Block - WHCT workshop / former RVS building</p>	<p>WH&CT have responsibility. No Response by Acute Fire Teams</p>
<p>Malvern View Staff Residences</p>	<p>RESIDENTS have responsibility. No Response by Acute Fire Teams ISS Security response only following switchboard notification.</p>

UPON BLEEPS OPERATING

**ALL FIRE TEAM MEMBERS TO PUT ON RELEVANT TABARDS AND SWITCH RADIOS TO CHANNEL 1.
(IF RADIOS FAIL USE TELEPHONES OR RUNNERS TO MAINTAIN CONTACT WITH INCIDENT MANAGER, ASSEMBLY POINT COORDINATOR AND SWITCHBOARD).**

SECURITY 1 (899 Bleep Holder)

- **COLLECT THE INCIDENT BAG FROM ACONBURY SWITCHBOARD AND IF ACUTE TEAM ASSEMBLY POINT COORDINATOR AND INCIDENT MANAGER ARE REQUESTED TO ATTEND ISSUE THEIR FIRE TEAM EQUIPMENT.**
- **ASSIST THE ASSEMBLY POINT COORDINATOR AS REQUIRED.**

INCIDENT PORTER (432 Bleep Holder)

- **ENSURE THAT THE FIRE SERVICE IS DIRECTED TO THE AFFECTED BUILDING AND ZONE VIA THE BEST ACCESS ROUTE.**
- **RESPOND TO THE AFFECTED BUILDING AND ZONE TO ASSIST THE INCIDENT MANAGER AS REQUIRED.**

ACONBURY PORTER

DAYTIME ONLY - WHEN AVAILABLE WILL ALSO ASSIST.

APPENDIX 10 (FIRE ACTION CARD 4)

ASSEMBLY POINT COORDINATOR
BLEEP HOLDERS 557 & 103

WRH (including Oncology Centre)	Acute APC to respond immediately
Aconbury - North (Evergreen) East & West	Acute APC to respond immediately
Aconbury North (WHCT) Crèche / Charles Hastings Centre Breast Unit (ex 220 Newtown Road) 3 Kings Court / Estates Offices / Mortuary / Boiler House	Acute Fire Team have responsibility but attendance restricted initially to Acute Support Site Fire Team only with Acute IM and APC to respond only if requested via Switchboard.
Elgar Unit - Old Management Block - WHCT workshop / former RVS building	WH&CT have responsibility. No Response by Acute Fire Teams
Malvern View Staff Residences	RESIDENTS have responsibility. No Response by Acute Fire Teams ISS Security response only following switchboard notification.

UPON FIRE ALARM SOUNDING (OR BLEEP OPERATING)

- (1) GO IMMEDIATELY TO THE MAIN ENTRANCE OF THE AFFECTED BUILDING. PUT ON "ASSEMBLY POINT COORDINATOR" TABARD. YOU ARE RESPONSIBLE FOR THE EFFECTIVE CONTROL AND CO-ORDINATION OF THE WHOLE INCIDENT SITE.
- (2) SWITCH RADIO TO CHANNEL 1 AND ESTABLISH RADIO CONTACT WITH THE INCIDENT MANAGER IN THE AFFECTED AREA AND OBTAIN BRIEFING.
- (3) ASSESS THE INCIDENT: -
 - A) CHECK YOU ARE AT THE CORRECT SITE!
 - B) IS THERE FIRE OR SMOKE?
 - C) ARE PEOPLE TRAPPED?
 - D) ARE ANY PEOPLE SUBJECT TO PERSONAL EVACUATION PLANS STILL REQUIRING EVACUATION?
 - E) IS SUFFICIENT EVACUATION IN PROGRESS OR IS MORE NEEDED?
 - F) ARE ADDITIONAL RESOURCES NEEDED?
- (4) IF A REAL FIRE IS REPORTED ENSURE THAT A SECOND CALL IS MADE TO THE SWITCHBOARD TO INFORM THE FIRE SERVICE AND THE TRUST ON-CALL SENIOR MANAGER.
- (5) DEPLOY STAFF INTO AND AROUND THE INCIDENT AS REQUESTED BY THE INCIDENT MANAGER AND AS YOU THINK NECESSARY. KEEP STRICT CONTROL.
- (6) LIAISE WITH THE ISS SHIFT LEADER RE: OPERATION OF FIRE ALARM CONTROLS, SMOKE EXTRACTION, VENTILATION, OXYGEN, ELECTRICITY, GASES AND OTHER TECHNICAL ASPECTS.
- (7) BRIEF FIRE SERVICE AND CONTINUE TO ASSIST THE FIRE OFFICER AS NECESSARY AT THE SCENE.
- (8) KEEP SWITCHBOARD INFORMED AND WELL BRIEFED.
- (9) DEPLOY STAFF TO CONTROL ALL ENTRANCES INTO THE BUILDING.
- (10) ALLOW STAFF TO STAND DOWN ONLY WHEN APPROVED BY THE INCIDENT MANAGER AND FIRE SERVICE.

APPENDIX 11 (FIRE ACTION CARD 5)

ISS SHIFT LEADER

430 Bleep Holder

UPON HEARING THE FIRE ALARM (OR BLEEP OPERATING)

WRH (including Oncology Centre)	Respond immediately
Aconbury – North (Evergreen), East & West	Respond immediately
Aconbury North (WHCT) Crèche / Charles Hastings Centre Breast Unit (ex 220 Newtown Road) 3 Kings Court / Estates Offices / Mortuary / Boiler House	Respond Immediately. Attendance restricted initially to Acute Support Site Fire Team. Request Acute APC & IM to respond via Switchboard if you think they are needed. Otherwise act as Incident Manager and liaise with the Fire Service as necessary.
Elgar Unit - Old Management Block - WHCT workshop / former RVS building	WH&CT have responsibility. No Response by Acute Fire Teams
Malvern View Staff Residences	RESIDENTS have responsibility. No Response by Acute Fire Teams ISS Security response only following switchboard notification.

- (1) GO TO AFFECTED BUILDING:
 - a) IF FULL FIRE TEAM RESPONSE REPORT TO THE INCIDENT MANAGER.
 - b) IF RESTRICTED FIRE TEAM RESPONSE ACT AS INCIDENT MANAGER.
- (2) PUT ON ORANGE “ISS SHIFT LEADER” TABARD. SWITCH RADIO TO CHANNEL 1.
- (3) LIAISE WITH THE INCIDENT MANAGER AND ENGIE TECHNICIAN RE: OPERATION OF FIRE ALARM CONTROLS, SMOKE EXTRACTION, VENTILATION, OXYGEN, ELECTRICITY, GASES AND OTHER TECHNICAL ASPECTS.
- (4) ADVISE INCIDENT MANAGER AND ASSEMBLY POINT COORDINATOR OF ALL SIGNIFICANT ASPECTS OF THE SYSTEMS.
- (5) LIAISE WITH FIRE SERVICE AND ADVISE AND SUPPORT THEM IN OPERATING ANY SYSTEMS.
- (6) ONLY SILENCE AND RESET THE ALARM SYSTEM WHEN THE FIRE SERVICE ARE SATISFIED AND AGREE.
- (7) ONLY ALLOW STAND DOWN WHEN THE FIRE SERVICE ARE SATISFIED AND AGREE TO A FULL STAND DOWN. IF THE FIRE SERVICE HAS NOT ATTENDED THEN STAND DOWN ONLY IN ACCORDANCE WITH THE STRICT CRITERIA OF THE STAND DOWN PROCEDURES.
- (8) TAKE ALL NECESSARY ACTIONS TO RESTORE THE BUILDING TO NORMAL WORKING.
- 9) IN THE ABSENCE OF AN INCIDENT MANAGER ASSUME ALL RELEVANT DUTIES UNTIL HE/SHE ARRIVES

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APPENDIX 12 (FIRE ACTION CARD 6)

ENGIE FIRE ALARM TECHNICIAN (114 BLEEP)
(W/DAYS 0600 to 2200 / W/ENDS 0600 to 1800)

WRH (including Oncology Centre)	Respond immediately
Aconbury – North (Evergreen), East & West	Respond immediately
Aconbury North (WHCT) Crèche / Charles Hastings Centre Breast Unit (ex 220 Newtown Road) 3 Kings Court / Estates Offices / Mortuary / Boiler House	Respond immediately. Acute Fire Team have main responsibility but attendance restricted initially to Acute Support Site Fire Team only. Liaise with ISS Shift Leader as Acute IM and APC will respond only if requested by ISS Shift Leader via Switchboard.
Elgar Unit - Old Management Block - WHCT workshop / former RVS building	WH&CT have responsibility. No Response by Acute Fire Teams
Malvern View Staff Residences	RESIDENTS have responsibility. No Response by Acute Fire Teams ISS Security response only following switchboard notification.

UPON FIRE ALARM SOUNDING
(OR BLEEP OPERATING)

- (1) GO IMMEDIATELY TO THE AFFECTED FIRE ALARM PANEL, ESTABLISH CONTACT WITH THE REST OF THE HOSPITAL FIRE TEAM AND OBTAIN BRIEFING. YOU ARE RESPONSIBLE FOR THE EFFECTIVE CONTROL OF THE FIRE ALARM SYSTEM.
- (2) PUT ON FIRE TEAM TABARD.
- (3) ESTABLISH RADIO CONTACT WITH INCIDENT MANAGER (IM). NOTE THAT ISS SHIFT LEADER WILL BE ACTING AS IM IF ONLY THE ACUTE SUPPORT SITE FIRE TEAM IS INVOLVED.
- (4) ASSESS THE FIRE ALARM SYSTEM CONDITION AND AVAILABLE INFORMATION: -
 - A) CHECK YOU ARE AT THE CORRECT SITE / PANEL!
 - B) BRIEF THE INCIDENT MANAGER AND FIRE SERVICE AS REQUIRED.
 - C) MONITOR THE PANEL FOR ANY INDICATIONS OF A SPREADING FIRE.
- (5) LIAISE WITH THE INCIDENT MANAGER AND ISS SHIFT LEADER RE: OPERATION OF FIRE ALARM CONTROLS, SMOKE EXTRACTION, VENTILATION, OXYGEN, ELECTRICITY, GASES AND OTHER TECHNICAL ASPECTS.
- (6) CONTINUE TO ASSIST THE FIRE OFFICER AND HOSPITAL FIRE TEAM AS NECESSARY AT THE SCENE.



NOTES: