The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

REPORT TO THE HEALTH AND SAFETY COMMITTEE

RESPONSIBLE DIRECTOR:	REPORT FOR:		IMPACT ON BUSINESS:		
Roy Jackson Director of finance and resources	Decision		High	Med	Low
	Discussion	✓		✓	
	Information				
LEAD MANAGER:	**REPORT TYPE:**		**BAF REFERENCES & RAG:**		
Ian Hinitt Interim deputy director of estates	Strategic				
	Operational	✓			
	Governance		**RELATED WORK: (PREVIOUS PAPERS TO COMMITTEE)**		
REPORT BY	**PEER REVIEW:**				
Mark Collins Trust Fire Safety Officer					
CQC Domain: (safe, caring, effective, responsive, well-led)	Safe, caring, effective, responsive, well-led				

Meeting Date: 28TH November 2018

Report Title: Fire Safety Officer Quarterly Report July 1st- 30th September

PURPOSE:

- To provide an update to the Trust H&S Committee on fire safety during Q2 of 2018
- To assure the Trust on actions taken during Q2 2018 to improve performance and fire safety where it fell short of the target values as well as areas of improvement and noticeable good performance
- To inform the Committee of the future plans to continue with the development of fire safety in the Trust.

SUMMARY:

- 18 Fire incidents reported on Datix.
- Mandatory training compliance at 77%, against a target of 95%, department managers have been sent emails regarding the lack of compliance and extra training sessions have been provided; I have been to wards and departments to provide fire training.
- 10 new fire wardens have been trained
- 8 new evac chair trained staff, plus 3 more staff at North Cambs
- Introduction of ski pads and bariatric ski pads, bariatric ski pads are located in the medical equipment library and ski pads are located in departments that have direct access to the external fire exits on the first floor such as Tilney, Rudham, Feltwell etc.
- 2 evacuation chairs added to the main site
- 5 persons were trained on the evacuation ski pad
- 15 Trust Fire Safety Audits were completed
- Several mitigating actions have been taken to reduce the risk of: The medical records library due to the storage issues, the lack of fire signs, not having fire evacuation drills, training be delivered for the evacuation chairs in Spencer building, introduction of ski pads and bariatric pads and oxygen compliance around the trust to HTM 02/01, medical gas pipeline systems and BCGA storage of gas cylinders

- 10 fire drills have been completed
- Sacred Space now uses electronic candles rather real candles
- Visit to James Padget Hospital (report attached in Appendix 2)
- Authorising Engineer (fire) appointed in writing
- L1 fire alarm upgrade project continues
- Various on-going projects have been authorised with guidance and instruction from the trust AE fire
- Risk Items on the risk register related to Fire Safety currently being managed by the Estates Manager.

  1)1938: fire detection and compartmentation and maintenance of fire dampers

  2) 2252: potential hydrant failure (inspected annually by the fire service)

RISK ASSESSMENT (CROSS-REFERENCE WITH RISK REGISTER WHERE APPROPRIATE):					
Strategic / External	**Operational/ Organisational**	**Financial**	**Clinical**	**Legal/ Regulatory**	**Reputational / Patient Experience**
✓	✓	✓	✓	✓	✓
RECOMMENDATION/S:					
The Board is asked to note the report					

1. Introduction

1.1 The aim of this report is to provide a summary of fire safety in the trust during quarter 2 of 2018 (July 1st – September 30th).

1.2 This report will :

- Provide an overview of the on-going development of robust Fire Safety systems within the trust.
- Provide an overview of Fire Safety for the second quarter of 2018
- Detail achievements and successes in the second quarter.
- Provide information on Fire safety issues and area to focus on for the rest of the year.

1.3 Fire safety support has been provided through:

- NIFES Consulting Group (with the fire engineer as a consultant) officially appointed as the Authorising Engineer
- NAHFO (National Association of Hospital Fire Officers)
- The Fire Safety Officer is awaiting confirmation on a course to gain accreditation with (IFE) Institute of Fire Engineers
- 4 evac chair trainers are now delivering training across the trust
- 9 ski pad trainers on site
- Fire and Rescue Service familiarisation visits with kings Lynn watches and retained stations
- Updated and increased the number of fire wardens and personnel trained on the use of fire extinguishers with monthly in-house fire warden courses
- The fire officer works in conjunction with the health safety compliance

manager and covers training and support as and when needed.

2. Key Fire safety during Q2 and actions

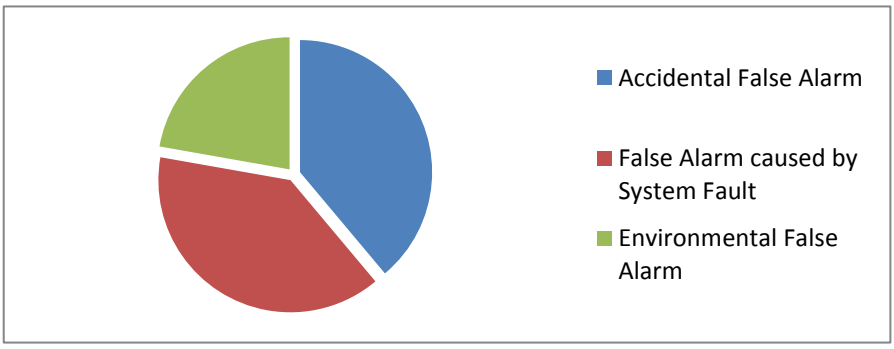
	Risks	Priorities for action	Q2 Update
1	The L1 alarm system is still required	The L1 system fire detection system.	· On-going for 2 years. ·The fire alarm system is being upgraded currently with the support of AMR, NIFES, Gent and Estates. The programme is four weeks behind schedule but problems have been addressed as the project moves forward.
2	Limited compartmentation	NIFES have been commissioned and started a full site survey to address the compartmentation issues around the trust	·Once the report has been received a plan of works can be implemented, prioritising the hazard departments and areas associated with higher risk and difficulty in patient evacuation, NIFES are currently undertaking a full site compartmentation survey
~~3~~	~~No current provisions for bariatric patients from the first floor~~	~~Ski pad business case has been sent to BIC, Med strom have provided a price which is in the ski pad case for the bariatric attachment for bed movers.~~	~~·There are 15 ski pads now in the Hospital and 2 ski pads for the bariatric patient, the bed movers is to be adjusted shortly to be able to accommodate the larger bariatric bed which means we are compliant in proving egress provisions for the bariatric patient.~~ 2 bariatric ski pads now in place and stored in the medical equipment library
4	~~The Storage of oxygen on wards which is not up to date with legislation~~	~~Being discussed at the medical gases committee to address and update~~.	~~· This has now been addressed; signs and restraints are in place for oxygen holding and transport through-out the trust. A+E is currently having its own oxygen store built due to the demands and lack of storage space. Now completed~~
5	The Ramp being the only egress from level 1 to ground	Currently being discussed and investigated through the emergency planning meetings. Fire and Rescue Service are on site in Autumn and the lifts procedures will be discussed.	The fire engineering stance is that as long as the fire is contained and more than 2 compartments away from the fire the lifts can be used if required. The fire authority is keen for the Trust to investigate the lifts being converted into evacuation lifts. Escape chute systems have been onsite to look at alternatives, this information was discussed at the emergency planning committee but was felt that this was not appropriate for the Hospital

~~6~~	~~Fire extinguishers becoming obsolete in 2018~~	~~Reps from Britannia fire, Fenland fire and assured fire and security. Fenland fire has come back with the most financeable options for this (see below for details and a decision to be made).~~	~~The fire water plus chemical fire extinguishers have been replaced by water and foam dependant on the level of risk. There has been a few moves of the extinguishers to make sure there is a safe distance to travel and the correct extinguisher is being used in the correct location. Completed~~
7	PC Fires	Morning inspections have revealed a decline in the number of pc's being left on, Friday round up and training high-lights the need for compliance.	Practice continues
~~8~~	~~The Ramp~~	~~Monitoring of the side of the ramp~~	~~The side of the ramp has been clear now for 3 months, signs have been in place to inform staff. Any breaches and storage that has taken place has been subject to Datix and cleared within the hour, this has happened only once. No incidents to report and remains clear~~
9	Mandatory Training	Fire compliance is low and improvement is required to get this to the 95% as it currently stands at 77%	Ward managers and departments leads have been contacted to arrange staff to book on training. Extra fire training sessions have been provided· Ward managers have been advised that I can come to departments to train staff of which a few managers have been in contact. This has been addressed with the mandatory training meetings. Fire Warden and evacuation chair training is advertised on the fire safety website, Friday round up, fire training and included in the fire audits which are sent to them management leads.
10	Storage	Storage in the Hospital is an increasing worry as the hospital streets are used to evacuate patients	Regular emails have been sent to staff who are storing items such as cages, chairs, beds and broken furniture·

3 Fire Safety Incidents

3.1 Datix reports and investigations

	Fire Incident	Total
Accidental False Alarm	7	7
False Alarm caused by System Fault	7	7
Environmental False Alarm	4	4
Total	18	18



- There have been 18 incidents reported on Datix in relation to Fire Safety; which have been broken down into the following areas:

3.2

No.	Type	Location
7	Accidental	1. Windsor 2. Corridors 3. A+E 4. A+E 5. Medical secretaries 6. Staff flats 7. Estates
	Comments	These incidents were due to break glass activation
7	False alarm by system fault	1. DSU 2. DSU 3. CDS 4. West Wing 5. Terrington 6. Rudham 7. ECG
	Comments	These incidents were due to fault detection heads which have been replaced
4	environmental	1. Flats 2. Flats 3. Elm 4. Inspire
	Comments	These were due to cooking fumes, this is the 3rd time that the Inspire centre has set off the alarm due to steam and have been instructed to procure a water heater, vending machine or thermos for hot water.

4 Fire Audits

4.1

Jul			
04.07.18	Waste/Recycling area	y	
09.07.18	Medical Equipment Library	Y	log book is poor, FRA out of date
	West Dereham Laundry and the linen room	y	Fire door required on make shift kitchen

17.07.18	Elm and S.A.U Ward		
24.07.18	Marham Ward and Leverington Admission unit	y	02 and drills
30.07.18	Denver ward	y	
Aug			
09.08.18	Shouldham ward	y	hoists blocking doors, drills required
14.08.18	Wolferton	y	door stay for kitchen, fridge to be moved and heater to be removed
23.08.18	Cardio-respiratory (ECG)	y	FRA out of date
28.08.18	Tilney Ground floor offices	y	ownership of area
Sept			
11.09.18	NICU	y	
TBC	Fakenham Medical Centre		Arranged for November
TBC	Littleport Medical Centre		Arranged for November
19.09.18	West Dereham Rheumatology Dept/pre-assessment and pain clinic	y	
20.09.18	hair dressers	y	
25.09.18	Anmer		
28.09.18	Roxborough centre		

Audits have been performed in conjunction with the health safety and compliance manager, audit reports and recommendations are sent to the ward lead and kept in the 'Sabs and 'estates files.

4.2 Audit Findings:

Works that are required such as signage is organised through estates and the ward leads and put in place by the fire safety officer. Any short comings are high-lighted and follow up inspections are organised.

The audits also look at the fire safety log books to ensure compliance and check if policies are included and procedures are up to date these include Roles and responsibilities

- The fire risk assessment
- The fire evacuation plan
- Warden fire equipment checks
- Fire evacuation drills
- Training requirements and compliance numbers
- Door wedges
- Gaps in doors
- Storage of flammables
- Any fire related issues
- Oxygen storage
- Staff mandatory training figures (fire only)

5 Fire Drills

5.1

breast care	11th July	full evacuation
A+E	19th July	walk through and presentation
PGMC	20th July	full evacuation (Drs not engaging)
NICU	20th July	walk through
CT SCAN	20th July	partial drill
Wolverton (sim etc)	15th August	full drill (poor)
pathology	15th august	full drill
medical secretaries	21st august	full drill
medical records	21st august	full drill
ECG	11th September	Full Drill

Some fire drills have been full evacuation drill such as

5.2
- Breast Care,
- PGMC
- Pathology

All other drills have been a table top exercise where there is a walk through drill talking to staff on the roles and responsibilities as well as knowledge testing to ensure compliance. Reports on drills are sent to the department leads and kept in both the 'sabs and estates drive'.

In some instances staff have not been forthcoming with evacuating their place of work; Wolverton took extended time to evacuate as persons thought it was a false alarm and looked for confirmation. In the PGMC I arranged that security and the fire team walked the PGMC and Drs on their breaks were found to be sitting in their rest room with their fingers in their ears.
Post drill discussions were conducted due to some of the inappropriate attitudes of staff. Other drills in areas such as Breast Care and medical records were performed with excellent efficiency and control.

West Raynham staff did a full horizontal fire evacuation In June which was well received by staff and patients, the fire team were also tested on response times and the outcome provided reassurance, as a result Shouldham ward have asked for a full drill which will be completed in October 2018. Any departments who would like to be involved in fire evacuation drills have been advised through audits and the Friday round up to contact the fire safety officer if help is required.

6 Training

6.1 Number of staff training during Q2 2018

- Training has been delivered for clinical staff and non-clinical staff
- Monthly fire warden training is provided in the Lecture theatre and covers hands on fire extinguisher training
- Training for the fire team/bleep holders is available and persons are up to date
- Figures on fire training are 77% against a target of 95%
- Number of new fire wardens for Q2 are = 10 attendance has been poor, dates are advertised on the fire safety web site, staff training, mandatory training and ward audits to encourage more staff to attend
- The training package will change bi-annually to ensure staff are engaged and include up to date with issues at the Queen Elizabeth Hospital and legislation or guidance changes
- The Staff of the Spenser building has been trained on the use of the evacuation chair, staff of the occupational therapy, physio therapy, security and porters have also started to be trained, this training will be rolled out to porters, security and is advertised on the fire safety web site and mandatory training
- Ski pad training has also been introduced
- Fire Training has been delivered in the wards and on departments training days as well as the mandatory sessions. Training has also been provided in the evenings to target night workers
- All departments with low compliance have been emailed including some individuals to get the figures improved
- Managers are being informed after the fire audit of training compliance needs to get their staff booked onto to training
- See appendix 1 for information of departments below 75%

7. Actions taken and Planned to be taken.

7.1 **Storage**

Is of concern to the trust due to the vast amount of records limited space, this has been raised and the responsible leads have been tasked with finding a solution and putting this is on the risk register. Emma Carlton (health, safety and compliance manager) and myself have risk assessed this department and have high-lighted this to the Health and safety committee.

The Hospital streets have also become a an area of concern due to multiple items being stored there, I have emailed leads of departments, porter manager, procurement manager, waste managers to help gain control. Mandatory training does include safe storage due to fire loading, evacuation of bedded patients, arson and clear hospital streets.

7.2

8. Ski Pads and Evacuation Chairs

8.1 Ski pads have now been introduced to areas with external fire exits and are to be used as a latch effort due to being cut off, if the ramp were to become blocked they can also be used on the larger internal stairs to support vertical evacuation; There are now 2 bariatric ski pads on site that are stored in the medical equipment library.

Training has been provided by Hospital aids which have provided the trust with 9 persons who can deliver this training on site; I have started this training offering multiple sessions which have been advertised through the Friday round up, mandatory training. Training on ski pads, bariatric ski pads and evacuation chairs does require manual handling and is not suitable for all persons.

2 unused evacuation chairs have been serviced and placed in main hospital; these are used to comply with the DDA act and regulatory fire safety order. These chairs are used to aid with stair assessments as there have been previous incidents of a patient losing confidence and being unable to mobilise without help and can be used in the event of evacuation.

9. L1 Fire Alarm Upgrade

9.1 Work on the L1 fire alarm upgrade continues as planned, the project has experienced issues as expected with any project of this size with the delays due to asbestos, changes to the site management team, other projects such as fire and smoke dampers. The project is being addressed at each stage moving forward to ensure that an L1 compliant system is installed and a certificate would be presented. This plan does not currently cover the alarm upgrades of the wards which will need to be included in roof project and ward full refurbishments for the issue of this L1 legislative complaint certificate.

APPENDIX 1

Department	HC Staff in Post at 31 Aug 2018 requiring Fire Training	HC attended Fire Training	% Fire attendance
Central Nurse Bank	253	162	64.03
Clinical Support Management	3	3	100.00
Operational Division 1 Management	21	13	61.90
Operational Division 2 Management	20	12	60.00
	297	**190**	63.97
Admissions	8	5	62.50
Anaesthetics	46	39	84.78
Clinical Psychology	10	10	100.00
Critical Care Outreach Team	8	5	62.50
Day Case Surgery Unit	75	71	94.67
DCSU Bank	2	1	50.00
Endoscopy Unit	29	23	79.31
ITU	69	58	84.06
ITU Medical	12	8	66.67
North Cambs Endoscopy	18	18	100.00
Resus Services	3	1	33.33
Sterile Services	35	33	94.29
Surgical Pre-assessment Clinic	8	5	62.50
Theatre Bank Nursing	4	2	50.00
Theatre General	131	106	80.92
Sub-Division Total	**458**	**385**	84.06
Denver Ward	40	29	72.50
Elm Ward	31	13	41.94
Gayton Ward	49	41	83.67
General Surgery	44	38	86.36
Marham Ward	40	27	67.50
Orthopaedic Clinic	11	7	63.64
Orthopaedics	21	15	71.43
Patients Appliances	1	1	100.00
Specialist Nurses - Elective	16	14	87.50
Surgical Assessment Unit	23	21	91.30
Urology	22	18	81.82
Sub-Division Total	**298**	**224**	75.17
Audiology	20	12	60.00
Dental Lab	8	8	100.00
Dental Specialties	6	5	83.33
Dermatology	22	14	63.64
ENT	8	5	62.50
Main Out-Patients Department	23	20	86.96
North Cambs Out Patient Dept	6	6	100.00
North Cambs Phlebotomy	9	9	100.00
Ophthalmology	29	20	68.97
Orthodontics	1	1	100.00
Phlebotomy	15	9	60.00
Sub-Division Total	**147**	**109**	74.15
Appleton Unit	3	2	66.67
Brancaster Obstetrics & Gynaecology Clinic	23	17	73.91
Castleacre Ward	42	39	92.86

Central Delivery Suite	36	28	77.78
Community & MLBU	40	38	95.00
Community Paediatrics	6	4	66.67
Day Assessment Unit	1	1	100.00
Midwifery Bank Nurses	13	5	38.46
NICU	44	31	70.45
NICU Bank Nurses	4	2	50.00
Obstetrics	19	12	63.16
Paediatric Bank Nurses	4	1	25.00
Paediatric Palliative Care	2	2	100.00
Paediatrics	27	22	81.48
Rudham Ward	53	46	86.79
Women & Children's Dir Mgmt.	16	14	87.50
Sub-Division Total	**333**	**264**	79.28
	1236	**982**	79.45
Cardiology	10	8	80.00
Cardio-Respiratory	19	18	94.74
General Medicine	39	27	69.23
Necton Ward	47	38	80.85
Specialist Nurses - Medical	8	3	37.50
Stanhoe Ward	42	41	97.62
Tilney Ward	32	21	65.63
Treatment Investigation Unit	6	6	100.00
Sub-Division Total	**203**	**162**	79.80
Care of the Elderly Medical	23	22	95.65
Dialysis Unit	2	1	50.00
Dietetic Services	18	14	77.78
Doctors Bank - Medicine & EC Division	5	0	0.00
Lev/Oxb Medical	3	2	66.67
Leverington Escalation	1	0	0.00
Neurology	6	4	66.67
Neurophysiology (EEG)	3	3	100.00
Occupational Therapy	55	45	81.82
Oxborough Ward	39	31	79.49
Physiotherapy Dept	76	68	89.47
Rheumatology	8	7	87.50
Speech & Language Therapy	9	7	77.78
West Newton Ward	49	43	87.76
West Raynham Ward	47	44	93.62
Windsor Ward	40	25	62.50
Sub-Division Total	**384**	**316**	82.29
A & E Department	83	65	78.31
A & E Medical	30	21	70.00
Ambulatory Emergency Care	12	10	83.33
Discharge Lounge	5	4	80.00
MAU/AEC Medical	21	17	80.95
Medical Assessment Unit	33	21	63.64
Ops Centre	14	5	35.71
Site Management Team	17	11	64.71
Terrington Ward	38	22	57.89
Sub-Division Total	**253**	**176**	69.57
Anti- Coagulation Services	7	2	28.57
Breast Unit	13	10	76.92
Cancer Services	13	10	76.92
Cancer Unit	31	17	54.84
Clinical Haematology	3	2	66.67
Macmillan Service	5	5	100.00
Mortuary	6	4	66.67
Oncology	3	2	66.67

Palliative Day Care	3	2	66.67
Palliative Medicine	3	2	66.67
Point of Care Testing	3	2	66.67
Radiology Dept	102	68	66.67
Shouldham Ward	23	21	91.30
Sub-Division Total	**215**	**147**	68.37
	1055	**801**	75.92
	2588	**1973**	76.24
Building Services	7	7	100.00
EBME Other	5	4	80.00
Electrical Engineering Services	8	4	50.00
Estates General	5	5	100.00
Health & Safety - Estates	4	2	50.00
Mechanical Engineering Services	10	10	100.00
Medical Equipment Library	3	2	66.67
Sub-Group Total	**42**	**34**	80.95
	42	**34**	80.95
Dining Room	15	13	86.67
Domestic Bank	18	12	66.67
Domestic Services	128	99	77.34
Hotel Services Admin	7	7	100.00
Kitchen Staff	25	23	92.00
Laundry Services	5	5	100.00
Medirest Recharge	1	1	100.00
North Cambs Catering Services	4	0	0.00
Patient Meals	49	28	57.14
Portering Services	59	41	69.49
Staff Residences	1	1	100.00
Waste Management	17	16	94.12
Sub-Division Total	**329**	**246**	74.77
	329	**246**	74.77
Finance Management	8	7	87.50
Income Costing & Commissioning	3	3	100.00
Sub-Division Total	**11**	**10**	90.91
Finance Senior Management	1	1	100.00
Sub-Division Total	**1**	**1**	100.00
Financial Accounting, Governance & Control	8	6	75.00
Sub-Division Total	**8**	**6**	75.00
Accounts Payable & Receivable	5	5	100.00
Payroll	11	10	90.91
Sub-Division Total	**16**	**15**	93.75
Printing Department	3	2	66.67
Procurement	14	12	85.71
Sub-Division Total	**17**	**14**	82.35
Restructuring Project	0	0	N/A
Sub-Division Total	**0**	**0**	N/A
	53	**46**	86.79
	424	**326**	76.89
Apprentices	0	0	N/A
Human Resources	8	8	100.00
Occupational Health	8	6	75.00
Resourcing	15	14	93.33
Staff Development	7	7	100.00
Voluntary Services	1	0	0.00
Sub-Division Total	**39**	**35**	89.74
	39	**35**	89.74
	39	**35**	89.74

Hospital Information Systems	10	10	100.00
ICT	18	18	100.00
Switchboard	15	5	33.33
Sub-Division Total	**43**	**33**	76.74
Information Services	17	13	76.47
PMO Dept	4	3	75.00
Sub-Division Total	**21**	**16**	76.19
	64	**49**	76.56
	64	**49**	76.56
Chaplains	3	3	100.00
Corporate Nursing	29	21	72.41
IPAC Nurses	4	0	0.00
Mental Health Liaison Service	4	3	75.00
NVQ Nursing	3	2	66.67
PALS	4	3	75.00
Sub Division Total	**47**	**32**	68.09
	47	**32**	68.09
	47	**32**	68.09
Clinical Audit & Effectiveness	0	0	N/A
Complaints & Litigation	4	4	100.00
Emergency Planning & Business Continuity	0	0	N/A
Library Services	2	2	100.00
Medical Staffing Revalidation	4	3	75.00
PGMDEC Doctors	9	5	55.56
PGME	8	6	75.00
Research and Development	12	12	100.00
Risk Management	15	10	66.67
Sub-Division Total	**54**	**42**	77.78
	54	**42**	77.78
	54	**42**	77.78
Pharmacy Services	57	51	89.47
Sub-Division Total	**57**	**51**	89.47
	57	**51**	89.47
	57	**51**	89.47
A&E Clerks	17	14	82.35
Business Support Dept	6	6	100.00
Clinical coding	13	12	92.31
Documentation	16	13	81.25
Information Governance & Registration Authority	2	1	50.00
Medical Records Library	29	26	89.66
Medical Secretaries	116	92	79.31
North Cambs Medical Secretaries	0	0	N/A
North Cambs Out Patients & Appointments	6	3	50.00
Out Patients & Appointments	21	18	85.71
Ward Clerks	1	1	100.00
Sub-Group Total	**227**	**186**	81.94
	227	**186**	81.94
	227	**186**	81.94
Communications	6	5	83.33
Foundation Trust Office	3	3	100.00
Fundraising Services	1	1	100.00
Trust Transition	0	0	N/A
Sub-Division Total	**10**	**9**	90.00
General Management	7	6	85.71
Trust Board	7	7	100.00
Sub-Division Total	**14**	**13**	92.86
	24	**22**	91.67

	24	**22**	91.67
	3524	**2716**	77.07

APPENDIX 2

Visit to James Paget Hospital 18th July 2018

The JPH is a best buy hospital which is of very similar design to the QEH, it serves a large community, uses tugs, has a ramp for egress and with an aging building has the same problems that we here are having; in some circumstances they are ahead of us in design and management in other areas they behind, working together with other best buy hospitals helps us share information and ease a way to mitigate and manage obstacles for the future. Mark Collins (fire safety officer) Emma Carlton (health, safety and compliance manager) and Steve Adcock (building officer) met with specialists in the hospital to discuss matters of interest and learn from each other to develop best practices.

One practice that has happened at the West Suffolk and JPH is medical records has been removed from site, medical records and medical secretary area has been made into AEC and Mau which has created greater room and a faster flow of patients, this has been discussed in the past at the QEH but no progression as of yet.

Smoking

JPH have has the same problems that our trust has regarding smoking, they have 3 smoking shelters, 2 of which are for patients and 1 for staff. These shelters were not used as they intended and illicit smoking was happening all over site, they found that the staff member approaching a smoker was often faced with verbal abuse and struggled to manage. Six months ago they installed a tanoy system with a pre-recorded message in key areas which said "smoking and vaping is only permitted in the authorised smoking shelters located at the front of the hospital, please extinguish your cigarette or move to the shelter immediately) This is monitored by the parking attendant team and cctv, when a person is witnessed to be smoking in a non-agreed location a button is pressed and the person then moves to the shelters as this is loud and causes embarrassment to the smoker.

Addressable L1 Fire alarm system

JPH have had an L1 system since 2016, part of the management of the fire alarm system, a map in switch board locates the fire alarm detector that has been activated for the ease of finding and assessing, this can also be used to control horizontal evacuation

The fire alarm is only sounded for 30 seconds to reduce the confusion and chaos during the sounding of the alarms and has been proven to be effective.

Oxygen

The hospital has fully piped oxygen which reduces the rental costs for cylinders and creates a safer environment for fire safety; cylinders are only used on resus trolleys and for emergency use only.

Dry Risers

JPH used to have 2 dry risers which supply water in the event of a fire to the 1st floor and the roof, this only allowed water to be supplied to half of the building and if used fire hoses would stop the fire doors from closing. JPH have added 2 external dry risers to the rear of the building to cover all 4 corners and reduce the risk

Roof access and security

The JPH has a fully isolated the roof with protections as seen below, there are 4 areas where the roof allows access for the fire service, this is so the fire service can pitch a ladder and gain direct access to the roof and the dry risers, this will reduce fire damage and business continuity due to ease of access. This also would prevent any falls from the roof regarding contractors or estates workers that are undertaking tasks on the roof.

Storage and Stairs

The smaller stairs in JPH have plans to be removed as they are not an emergency egress/fire exit route. The plan is to turn these into storage areas and separate the ground and first floor; the ground will be used for waste and the first floor storage

Refurbishments

When wards/departments/areas are refurbished they are fully refurbished this means that asbestos is removed, windows are fully replaced with automated closers, fire stopping and compartmentation is addressed. This ensures that the ward is updated to the required level, safety is increased which causes less disruption as the area is only disturbed the one time and with it being fully refurbished it provides reassurance.

Signage

Signage in the JPH is of the same style though they have placed by all of the internal phones which has proved useful for ease of access for porters, estates and with domestics and spills

Loading Bay and safe separation

As you can see the loading bay below at the JPH is in need of vast improvements as there are no safety rails, little segregation, poor signage and separation between vehicles and pedestrians

The front entrance is managed well with separation of ambulance and the public access as seen below with direct access to the carpark; the car park like ours is in need of repair.

Recommendations

Smoking:

- New vaping shelter provision to combat arguments of wanting to quit and not being near tobacco smoke
- Implement tanoy system outside west wing (controlled by the reception desk staff)
- Main entrance (controlled by volunteer desk staff)
- A+E entrance (controlled by reception staff)
- West Dereham exit (controlled by staff locally)
- Macmillan (controlled by reception staff)
- This can be monitored by CCTV and activated from there.

Fire alarm:

- Introduction of a new protocol that the fire alarm will be silenced after 30 seconds to reduce panic, if a fire is confirmed then the fire alarm can be re-activated.

Roof:

- When the roof is repaired, safety rails to be installed with four points of direct access for the fire service

Dry riser:

- 2 more dry risers to be added to the rear of the building, this would aid in firefighting, control of compartmentation and compliance with legislation, these can go straight to the roof and drop down to the rear 2 corners.

Storage:

- Turn the 2 sets of small stairs in the courtyards into a 60 minute compartments and separate the floor, this creates 2 areas of storage for the first floor and 2 areas for the ground floor, this can hold domestics supplies, wheel chairs and stock for theatres which is filling the upstairs streets.

Refurbishments:

- Follow the example of JPH and when refurbishments take place, remove asbestos and upgrade the compartmentation as previously planned.

Signage:

- Create signs by phones for easy access for essentials numbers such as switch board, cardiac arrest, emergency, porters etc.