



National Association of Healthcare Fire Officers

**Peter Aldridge
General Secretary
National Association of Healthcare Fire Officers
Estates Dept
St James's University Hospital
Beckett Street
LS9 7TF**

peter.aldridge@leedsth.nhs.uk

**0113 2064693
07900 223417**

7th January 2010

Dear Sir,

National Association of Healthcare Fire Officers (NAHFO)

The purpose of this letter is to highlight concerns that we, as an Association have, with regards to recent changes to central fire safety advice and policy lead at the Department of Health. The four principle objectives of NAHFO are:

- 1,** To promote and encourage the furtherance of the highest standards of fire safety in healthcare premises,
- 2,** To improve the status and prospects of the Health Service Fire Officers, including a career structure,
- 3,** To afford facilities for training and the collation and dissemination of information to members,
- 4,** To establish liaison with other bodies on matters of common interest where this is consistent with the objectives of the Association.

To best achieve its objectives, NAHFO works very closely with other UK fire safety organisations and is considered as an authority in healthcare fire safety; such organisations include:

- Department of Health - Fire Policy Lead
- Chief Fire Officers Association (CFOA),
- Loughborough University,

- Institution of Fire Engineers,
- Fire Protection Association.

NAHFO is represented on various committees and as such has significant input into the development of DOH guidance documents pertinent to the delivery of fire safety within healthcare.

A key strand that has continually run through our ability to keep healthcare fire safety high on the agendas on CFOA and other relevant bodies is the close working relationship we have had with the Fire Policy Lead at the Department. Working, often in collaboration with the Fire Policy Lead at the Department, we hold regional seminars, sign protocols of mutual understanding and undertake to promote open debate and discussions with Fire and Rescue Services. At many of these the DOH has presented for us and this shows real commitment from Department level to the UK Fire Services that Fire Safety is high on the agenda.

We are at present organising a joint event between a Fire and Rescue Service and the NHS where Senior Officers from the Brigade will be speaking. They suggested we approach the Department for the Fire Policy Lead to speak, but as this is no longer seen as a Department function it sends out entirely the wrong message to the Fire Service.

The recent “5 London Fires Report” and a recent CFOA Circular that was critical to the approach to fire safety within the NHS. The loss of the Fire Policy Lead in the light of these documents is seen by almost all in the fire safety arena as a backwards step, especially as fire safety seems to be ever more than before under public scrutiny due to very high profile fires in the NHS over the past 2 years.

One of the key challenges that NAHFO, and indeed the NHS, has had to face in the last 3 years is the implementation of the Regulatory Reform (Fire Safety) Order 2005 and the Fire Scotland Act. These two pieces of legislation have changed significantly the emphasis that the Fire and Rescue Services (FRS) have put on the NHS with regard to Audit of premises. Healthcare premises have been identified as the highest risk premises within any FRS area, as such the time dedicated by Inspectors Officers and the in depth detail of audit has significantly raised the profile of fire safety.

A recurring issue from these Audits and Inspections are the differences that appear across the UK in terms of interpretation and understanding of healthcare premises. The Fire Policy Lead has without doubt helped immensely to maintain and co-ordinate matters coming out of Audits and Inspections by working closely between the NHS, CFOA and Fire Rescue Services. Through this approach resolution to many issues has been agreed without the need for enforcement action, as such the role of Fire Policy Lead is seen as essential.

Through this letter it is hoped that the central position of Fire Policy Lead can be retained and used to continue to support NAHFO and the NHS. It is seen as an essential function by those on the ground within NHS premises to promote nationally good working

relationships with the UK Fire and Rescue Services, CFOA and other fire safety bodies. Within NHS organisations Fire Safety Advisors are often a unique function with specialists and individual knowledge. Whilst NAHFO promotes networking and best practice and sharing such information, that link to someone central is essential, where will this central function now be replicated. Suggestion is that it will be at SHA level from Estates Advisors, but what fire safety specific detailed knowledge will these advisors have and how will this relate to the national picture if they are dealing only regionally?

There are a few other issues that some clarity would be useful on:

- The Department worked extensively with CFOA on writing a HTM 05-03: Part K, Fire Risk Assessment, a guide that CFOA agreed would take away inconsistent interpretation and formulate a standard approach to Fire Risk Assessment in complex healthcare premises. CFOA agreed this if it was revised in 2 years, otherwise the agreement could be withdrawn, and who will now lead this from DOH? (Part K is due review in April 2010),
- NAHFO has been well represented and included on working groups formulating or re-writing firecode, who will co-ordinate this in future?
- Fire Policy Lead has introduced 1 day training on firecode, as its author on Loughborough University Courses for new Fire Safety Advisors coming into the NHS. This is the only such university course in the UK dedicated to healthcare fire safety. This has been seen and evaluated as an essential requirement for staff to do their job, where will this be sourced in future,
- Who will be the intermediary with very specialist advice to the NHS and Trusts for reporting of fires, disputes with Fire Authorities, and investigating fires of interest, fatal fires, injuries and other such matters?
- If there is no central Policy Lead this sends out the wrong message to the UK Fire and Rescue Services, when asked who do NHS Fire Advisors tell them to contact.

Your response to this letter will be very much appreciated. This letter is based on the fact that as a group of individuals, and as an Association, we very much care about fire safety in the NHS and in turn the continued patient, staff and visitor safety this brings.

I am happy to discuss these issues with anyone

Yours faithfully

Peter Aldridge

Peter Aldridge