



**Nottingham and
Nottinghamshire**
Integrated Care Board

Fire Safety Policy

July 2023 - July 2026

CONTROL RECORD			
Reference Number H&S-002	Version 2.0	Status Final	Author Head of Corporate Assurance
			Sponsor Associate Director of Governance
			Team Corporate Assurance Team Estates Team
Title	Fire Safety Policy		
Amendments	Office bases updated within section 6 and Appendix A. Personal Emergency Evacuation Plans (PEEP) proforma included at section 7. Updated format for Equality Impact Assessment (EIA) at section 20.		
Purpose	To ensure that the ICB is compliant with fire safety legislation and ensure good practice in relation to fire safety in the organisation.		
Superseded Documents	Fire Safety Policy v1.1		
Audience	All employees and appointees of NHS Nottingham and Nottinghamshire ICB and individuals working within the organisation in a temporary capacity.		
Consulted with	Staff Engagement Group		
Equality Impact Assessment	Complete (see section 20)		
Approving Body	Audit and Risk Committee	Date approved	June 2023
Date of Issue	July 2023		
Review Date	July 2026		
<p>This is a controlled document and whilst this policy may be printed, the electronic version available on the ICB's document management system is the only true copy. As a controlled document, this document should not be saved onto local or network drives.</p>			

NHS Nottingham and Nottinghamshire Integrated Care Board (ICB)'s policies can be made available on request in a range of languages, large print, Braille, audio, electronic and other accessible formats from the Engagement and Communications Team at nnicb-nn.comms@nhs.net.

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1. Introduction

- 1.1. This policy applies to the NHS Nottingham and Nottinghamshire Integrated Care Board, hereafter referred to as 'the ICB'.
- 1.2. It is the policy of NHS Nottingham and Nottinghamshire (ICB) to ensure, as far as is reasonably practicable, that all steps are taken by the organisation to prevent and minimise the effects of fire.
- 1.3. The ICB recognises its responsibility in ensuring the safety of its workforce and others working in or visiting its premises and to have a written policy under the:
 - Regulatory Reform (Fire Safety) Order 2005;
 - Health Technical Memorandum 05-01: Managing Healthcare Fire Safety (Fire Code);
 - The Health and Safety at Work Act 1974; and
 - The Building Act 1984 and Building Regulations 2010.
- 1.4. This Fire Safety Policy outlines the responsibilities, procedures and guidelines that form the organisation's fire safety framework.

2. Purpose

- 2.1 The purpose of this policy is to provide an unambiguous statement of the ICB's intent in relation to fire safety.

3. Scope

- 3.1 This policy relates to all employees of the ICB and others working within the organisation in a temporary capacity. These are collectively referred to as 'individuals' hereafter.
- 3.2 Whilst this policy applies to all individuals, ICB staff who are based in other buildings are to comply with the fire safety policy of those premises and should make themselves familiar with local evacuation procedures.
- 3.3 Each of the ICB's sites must have co-ordinated local fire safety management activities which are managed on a day-to-day basis by the Fire Safety Manager and the Fire Warden; these include being a focal point on fire safety issues and ensuring that individuals are adhering to the best practice detailed in this policy.
- 3.4 Fire safety concerns may be raised during the tenants' meetings at the individual sites to ensure that the fire safety management activities undertaken by individual tenants complement each other and all reasonable steps to co-operate and co-ordinate with other tenants within the premises have been taken.

4. Policy Statement

- 4.1 The safety of individuals in the event of a fire is an issue of fundamental importance and will receive the same managerial focus as any other business activity. The ICB aims to ensure that the working administrative environment is as safe from fire as can reasonably be achieved and that if a fire did occur, members of staff are trained in routine procedures for safe evacuation.
- 4.2 The ICB is committed to ensuring individual's safety at work. It aims to do this by:
- Providing a safe working environment which, as far as is reasonably practicable, removes or reduces the fire hazards present on site.
 - Implementing a proactive approach to fire risk assessment to identify where risks need to be controlled.
 - Developing preventive and protective measures to mitigate the impact of fire on life safety, the delivery of service, property and assets.
 - Providing guidance to management and staff on operational requirements relating to fire safety i.e., instructions, training, evacuation drills, plans etc.

5. Fire Safety Management Roles and Responsibilities

Roles	Responsibilities
Integrated Care Board	The Integrated Care Board (ICB) has overall accountability for the activities of the organisation, which includes fire safety. The ICB should ensure it has appropriate assurance that the requirements of current fire safety legislation and the objectives of the Department of Health's Fire Code are being met.
Audit and Risk Committee	To oversee the delivery of all statutory and mandatory requirements relating to health, safety, security and fire.
Health, Safety and Security Steering Group	The Health, Safety and Security Steering Group exists to develop and oversee the implementation of comprehensive and effective health and safety (including fire and security management) arrangements within the ICB, in line with legislative and regulatory requirements outlined within the Health & Safety at Work Act 1974.

Roles	Responsibilities
<p>Chief Executive</p>	<p>The Chief Executive will, on behalf of the Board, be responsible for ensuring that current fire legislation is complied with. This includes:</p> <ul style="list-style-type: none"> • Demonstrating commitment to the promotion of fire safety within the ICB. • Ensuring sufficient resources are available to implement the Fire Safety Policy and its supporting procedures. <p>The Chief Executive discharges the day-to-day operational responsibility for fire safety to the Fire Safety Manager (Head of Corporate Assurance).</p>
<p>Executive Lead with Fire Safety Responsibility (Associate Director of Governance)</p>	<p>The Associate Director of Governance has been designated as the Executive Lead with fire safety responsibility and is responsible for ensuring that fire safety issues are highlighted at ICB level.</p>
<p>Fire Safety Manager (Head of Corporate Assurance)</p>	<p>The Head of Corporate Assurance has been designated as the Fire Safety Manager and acts as a focus for all fire safety matters in the organisation. In general, the Fire Safety Manager is responsible for:</p> <ul style="list-style-type: none"> • Ensuring that the organisation has a fire safety policy in place and any relevant supporting procedures. • Reporting of non-compliance with legislation, policies and procedures to the Executive Lead with fire safety responsibility. • Ensuring the organisation has designated Fire Wardens in place and that they have received sufficient training to enable them to undertake this role. • Obtaining expert advice on fire legislation and expert technical advice on the application and interpretation of fire safety guidance. • The development, implementation, monitoring and review of the ICB's fire safety management system and supporting policies and guidance. • Ensuring that fire risk assessments are undertaken, recorded and suitable action plans devised (see section 6).

Roles	Responsibilities
	<ul style="list-style-type: none"> • Ensuring that any risks identified in the fire risk assessment are included in the ICB's risk register (as appropriate). • Ensuring that requirements related to fire procedures for less able staff and visitors are in place. • Liaison with external enforcing authorities. • Ensuring, through senior management and line management, that full staff participation in fire training and fire evacuation drills is maintained. <p>There may be occasions where specialist solutions are necessary to resolve fire safety issues, for example fire engineering. The Fire Safety Manager has sufficient knowledge to realise when specialised skills are required and where they can be obtained.</p> <p>See Appendix A for the responsibilities of the ICB's Fire Safety Manager upon activation of a fire alarm.</p>
<p>Fire Safety Advisor</p>	<p>All NHS organisations are required to have access to a Fire Safety Advisor, either directly or indirectly, who is familiar with the NHS Fire Code.</p> <p>Fire Safety Advisors must be competent to undertake the role and be able to provide technical expertise to the Fire Safety Manager in order for them to be able to fulfill their duties effectively. Therefore, the Fire Safety Advisor is responsible for the following:</p> <ul style="list-style-type: none"> • Providing expert advice on the application and interpretation of fire legislation and fire safety guidance, including the NHS Fire Code. • Undertaking, recording and reporting fire risk assessments. • Assisting with the development and delivery of a suitable and sufficient training programme for staff. • The preparation of fire prevention and emergency action plans. • The investigation of all fire-related incidents and fire alarm activations; and • Liaising with enforcing authorities on technical issues. <p><i>This role may be fulfilled by different personnel within the Nottinghamshire Integrated Care System or</i></p>

Roles	Responsibilities
	<p><i>Nottinghamshire Fire and Rescue service where appropriate and the Fire Safety Manager is responsible for ensuring that a Fire Safety Advisor is utilised where required.</i></p>
<p>Fire Wardens</p>	<p>The organisation has appointed Fire Wardens, under the supervision of the Fire Safety Manager, to act as the fire safety 'eyes and ears' within their local area.</p> <p>The Fire Wardens should:</p> <ul style="list-style-type: none"> ● Act as a focal point on fire safety issues for local staff. ● Assist in the fire safety regime within local areas. ● Raise issues regarding local area fire safety either with the Fire Safety Manager or their Line Manager. ● Act as the lead during an evacuation within their assigned area of responsibility, co-ordinating the exit of staff (and others who may be in the area) to the designated safety point; and ● Be aware of any personal emergency evacuation plans for individuals within their designated area. <p><i>See Appendix B for the responsibilities of the ICB's Fire Wardens upon activation of a fire alarm.</i></p>
<p>Individuals</p>	<p>All individuals should:</p> <ul style="list-style-type: none"> ● Comply with the organisation's fire safety policy and procedures. ● Participate in fire safety training and fire evacuation exercises. ● Report deficiencies in fire safety precautions (e.g., wedging open of fire doors, blocking of escape routes, faulty equipment etc.) to either their Line Manager, the Fire Safety Manager or a Fire Warden. ● Ensure the promotion of fire safety at all times to help reduce the occurrence of fire and unwanted fire alarm signals. ● Set a high standard of fire safety by personal example.

6. Fire Risk Assessment

- 6.1 The Regulatory Reform (Fire Safety) Order 2005 requires that fire risk assessments should be undertaken regularly by a competent person. The ICB has adopted the approach advised by NHS Property Services, in that this is necessary once every three years for administrative buildings.
- 6.2 The fire risk assessment should be reviewed annually (in light of any structural changes and following any test evacuation procedure).
- 6.3 The fire risk assessment will be complemented by an annual tenant's fire risk assessment, which will consider the specific working environment of the ICB; and the generic health and safety risk assessment, which will consider the work-related activities of the organisation. Fire Risk Assessments will be undertaken by:
- Community Health Partnership (for Stapleford Care Centre and Balderton Primary Care Centre).
 - Nottingham City Council (for Trent Bridge House and Loxley House).
 - Gedling Borough Council (for Arnold Civic Centre).
 - Nottinghamshire County Council (for Sir John Robinson House).
 - NHS Property Services (for Retford Hospital, Ashfield Health Village and Wollaton Vale).

7. Personal Emergency Evacuation Plan (PEEP)

- 7.1 When planning evacuation procedures and assessing the adequacy of fire precautions, consideration must be given to the requirements of people who cannot get themselves out of a building unaided. The aim of a PEEP is to provide the person with the necessary information and assistance to be able to manage their escape to a place of safety and to ensure that the correct level of assistance is always available.
- 7.2 Some common forms of disability that may need to be considered include:
- Mobility impairment, which can limit speed of evacuation.
 - Hearing impairment, which can limit the response to an alarm.
 - Visual impairment, which can limit the ability to escape.
 - Cognitive impairment, which can limit understanding of evacuation procedures.
- 7.3 Where people with special needs (individuals and visitors) work in or use the premises, their needs should, so far as is practicable, be discussed with them. These will often be modest and may require only changes or modifications to

existing procedures. However, in some cases, more individual arrangements involving the development of 'personal emergency evacuation plan' (PEEP) may need to be considered. The PEEP proforma can be accessed [here](#).

- 7.4 The PEEP should be reviewed annually and ideally following any evacuation procedure.
- 7.5 Individuals requiring a PEEP should be involved in all aspects of this process. No assumptions should be made that a disabled person cannot leave the premises independently.
- 7.6 Line Managers are responsible for highlighting where other members of their staff, e.g., pregnant women or staff with an injury, may require extra consideration if an evacuation was to occur. The Fire Safety Manager (Head of Corporate Assurance) should be alerted to this so an appropriate risk assessment can be undertaken and appropriate advice obtained.

8. Requirements for Young People

- 8.1. Under the Management of Health and Safety at Work Regulations 1999, organisations also have a responsibility to ensure that any young people employed (under the age of 18) are not exposed to risk due to:
 - Lack of experience.
 - Being unaware of existing or potential risks.
 - Lack of maturity.
- 8.2. Whilst the ICB is recognised as a 'low-risk' environment and therefore the arrangements in place are considered adequate for all staff, a more specific induction in relation to fire safety will be given to young people who are either employees or participating in a work experience placement.

9. Fire Safety Training Requirements

- 9.1. It is a statutory requirement for all staff to attend fire safety training. Staff need to have an understanding of fire risks and know what to do in the event of a fire so that the fire safety procedures can be applied effectively.
- 9.2. All staff should receive regular updated training and instruction, determined by the outcomes of the fire risk assessment. In accordance with Fire Code Guidance, all employees should receive annual training.
- 9.3. Fire safety training should be undertaken within one month of joining the organisation. Line Managers are responsible for ensuring that every new member of staff is given basic fire precaution instruction relating to their

workplace (fire tick sheet, evacuation procedure etc.) on or before their first day at work.

- 9.4. Fire Wardens will receive separate Fire Warden training on a triennial basis.

10. Evacuation Procedures and People's preferred options for Escape

- 10.1. All buildings are legally required to have an evacuation procedure and all staff will be trained on this and have the ability to access it at any time.
- 10.2. The effectiveness of the evacuation procedure will be tested via drills, which must be undertaken at least once a year.
- 10.3. On hearing the alarm, all individuals (and visitors) must promptly leave the building using their nearest and safest fire exit. Any socially distancing protocols do not apply during an emergency evacuation and individuals should ensure that they evacuate the building in a prompt and safe manner. Individuals should not make their way back to their office/teams if they are in another area of the building, they should meet them at the assembly point.
- 10.4. Individuals should stand with their colleagues (as per the fire tick sheets) so that the Fire Wardens can account for their presence. Visitors should be directed to the Fire Warden who will use the visitor's book to check that all visitors are safely outside.
- 10.5. Any further instructions will be disseminated by the Fire Safety Managers, including when it is safe to go back into the building. The Fire Safety Managers will assess how the process was performed and feedback to staff on any learning points.
- 10.6. The arrangements put in place will be in line with national guidance. The following are examples of the guidance:

10.6.1. People with Health Conditions

There is a wide range of people who fit into this category (including those with limited mobility, heart disease, asthma or heart conditions). Those people who require only limited assistance should evacuate the building using the nearest exit, as per the standard evacuation procedure. If it is necessary to move at a slower pace, it is important that they are aware of all escape routes out of the building, which routes have a degree of fire and smoke resistance and how the building is compartmented and where the call points and emergency meeting points are located.

10.6.2. New and Expectant Women and People

Following the completion of the New and Expectant Women and People Risk Assessment which can be found in the Health, Safety and Security Policy, a PEEP may be required for new and expectant women and people, especially during their third trimester. It may be necessary to move at a slower pace and it is important that they are aware of all escape routes out of the building, which routes have a degree of fire and smoke resistance and how the building is compartmented and where the call points and emergency meeting points are located.

10.6.3. Wheelchair Users

Wheelchair users are considered to be most at risk in terms of escape, in some instances, a person who frequently uses a wheelchair may be able to walk slightly and therefore be able to assist with their own escape or escape independently. The use of the emergency patient evacuation ski-Pad and 'carry down techniques' may be deployed (following a risk assessment and training for the staff involved in this) if an individual wishes to use one of these methods to aid their exit from the building.

10.6.4. Blind and Partially Sighted People

Most visually impaired people have some sight and will be able to use this during the evacuation to make their own way out of the building as part of the general exodus. In other cases, a visual disability will usually require the assistance of one person. Where this is necessary, the person providing the assistance should descend down any staircases first, with the person's hand on their shoulder. On level surfaces they should take the helper's arm and follow them. Where a person is assisted by a guide dog, it might not be necessary to have this additional support.

10.6.5. Hearing Impaired and Deaf People

As the ICB relies on an audible alarm system, hearing impaired and deaf people need to be made aware when an evacuation is in progress. In these cases, a member of staff will be nominated to ensure that they are alerted to the fire alarm (by way of a pre-prepared written instruction) and to accompany them out of the building.

10.6.6. People with Cognitive Impairment

People with a cognitive impairment may have difficulty comprehending what is happening in an evacuation, and may not be aware of their own needs and may not have the same perception of risk as non-disabled people. The most effective assistance is to have someone to help and in some cases a support worker/nominated member of staff may be in place who can help with the evacuation process. The most appropriate way forward would be to determine what the person understands themselves and then put in place a process whereby the support worker/nominated member of staff can ensure their safe evacuation.

11. Assisted Evacuations for Visitors

- 11.1 Where possible, the ICB's Fire Safety Manager(s) should be informed in advance of any visitors who may require assistance to safely evacuate the building and in ensuring that a process is in place should an evacuation be necessary. This will include providing advice to visitors on the options available and ensuring that assistance by way of a nominated person is in place should this be necessary. No assumptions will be made around the abilities of people with special needs and individuals will be involved in agreeing any arrangements.

12. Use of Fire Extinguishers

- 12.1 Fire-fighting equipment can reduce the risk of a small fire, e.g., a fire in a waste-paper bin, developing into a large one. The safe use of an appropriate fire extinguisher to control a fire in its early stages can also significantly reduce the risk to other people in the premises by allowing people to assist others who are at risk.
- 12.2 In simple premises, having one or two portable extinguishers of the appropriate type, readily available for use, may be all that is necessary. In more complex premises, a number of portable extinguishers may be required and they should be sited in suitable locations, e.g., on the escape routes at each floor level. It may also be necessary to indicate the location of extinguishers by suitable signs.
- 12.3 People with no training should not be expected to attempt to extinguish a fire. However, all staff should be familiar with the location and basic operating procedures for the equipment provided in case they need to use it. Extinguishers should primarily be used to protect life and facilitate safe escape. They should otherwise only be used if they can be used safely and without risk of trapping the user.

- 12.4 If a fire is discovered and it is considered safe to tackle it with a fire extinguisher, the following rules should be considered first:
- The first priority in all events is to raise the alarm.
 - The full evacuation of the area/premises is carried out.
 - Appropriate training has been undertaken in the use of fire extinguishers.
 - A fire should never be tackled alone; there should be a minimum of two people on hand to provide assistance should anyone get into difficulties.
 - The contents of one extinguisher only should be used; and
 - When the extinguisher is empty or staff feel at risk, they should leave the building whether the fire is extinguished or not and proceed to the assembly point. Inform the Fire Safety Manager(s) of any actions and findings.
- 12.5 A competent service engineer will be engaged for regular servicing and maintenance of these facilities.

13. Fire Doors

- 13.1 Fire exit notices e.g., all fire doors are marked as a fire door and should be kept closed at all times. The use of wedges and other items to hold open devices is not permitted within any premises and must be positively discouraged. Fire doors may be left open where 'automatic release' fire doors are installed as these will close when the fire alarm sounds. The automatic release mechanisms are tested during the weekly fire alarm tests at each site.
- 13.2 All exit routes are indicated by signage. To ensure exit routes are not compromised, no equipment or materials may be accommodated or stored within any protected exit route or protected stair enclosure. All exits must be maintained clear, free from any obstruction and all final exit doors are required to be easily and immediately openable from the direction of travel.

14. Reporting of Fire Incidents and Unwanted Fire Signals

- 14.1 Once all initial, necessary actions have been undertaken, the tenant manager at each site must be informed as soon as possible of any fire or unwanted fire signal.
- 14.2 Swift reporting of any incident is vital so remedial action can be taken as soon as possible to prevent reoccurrence. This is particularly relevant to false alarms where the number of false alarms received to a premise can affect the future attendance of the fire service to automatic fire alarm activations.

- 14.3 The incident must also be reported internally using the ICB's Incident Reporting and Management Policy.

15. Equality and Diversity Statement

- 15.1 Nottingham and Nottinghamshire ICB pays due regard to the requirements of the Public Sector Equality Duty (PSED) of the Equality Act 2010 in policy development and implementation as a commissioner and provider of services, as well as an employer.
- 15.2 The ICB is committed to ensuring that the way we provide services to the public and the experiences of our staff does not discriminate against any individuals or groups on the basis of their age, disability, gender identity (trans, non-binary), marriage or civil partnership status, pregnancy or maternity, race, religion or belief, gender or sexual orientation.
- 15.3 We are committed to ensuring that our activities also consider the disadvantages that some people in our diverse population experience when accessing health services. Such disadvantaged groups include people experiencing economic and social deprivation, carers, refugees and asylum seekers, people who are homeless, workers in stigmatised occupations, people who are geographically isolated, gypsies, Roma and travellers.
- 15.4 As an employer, we are committed to promoting equality of opportunity in recruitment, training and career progression and to valuing and increasing diversity within our workforce.
- 15.5 To help ensure that these commitments are embedded in our day-to-day working practices, an Equality Impact Assessment has been completed for, and is attached to, this policy.

16. Communication, Monitoring and Review

- 16.1 The ICB will establish effective arrangements for communicating the requirements of this policy and will provide guidance and support to line management in relation to their responsibilities.
- 16.2 The Head of Corporate Assurance will be responsible for monitoring the use of this policy on an ongoing basis and updating the policy in accordance with any legislative changes.
- 16.3 The Audit and Risk Committee will review the effectiveness and implementation of this policy on an annual basis through receipt of the ICB's Health, Safety and Fire Annual Report.
- 16.4 This policy will be reviewed by the Health and Safety Steering Group every three years or in light of any legislative changes.

17. Staff Training

- 17.1 Fire Safety training will be performed as part of the organisation's mandatory and statutory training and induction matrix to include annual fire training (online).
- 17.2 Any individual who has queries regarding the content of this policy or has difficulty understanding how this policy relates to their role, should contact the ICB's Corporate Assurance Team by email at notts.corporateassurance@nhs.net.

18. Interaction with other Policies

- 18.1 This policy should be read in conjunction the following ICB policies:
- Health, Safety and Security Policy.
 - Learning, Education and Development Policy; and
 - Incident Reporting and Management Policy.

19. References

- Department of Health (2013) Health Technical Memorandum 05-01: *Managing Healthcare Fire Safety* (2nd Edition).
- Health and Safety Executive (2013) *Young People and Work Experience – A Brief Guide to Health and Safety for employers*.
- Department of Health, Social Services and Public Safety (2011) *Fire Safety Law: The Evacuation of Disabled People from Buildings*.
- Fire Safety Law and Guidance Documents for Business:-
<https://www.gov.uk/government/collections/fire-safety-law-and-guidance-documents-for-business>
- Health and Safety Executive Fire Safety:
<http://www.hse.gov.uk/toolbox/fire.htm>

20. Equality Impact Assessment

Overall Impact on: Equality, Inclusion and Human Rights [Select one option]	Positive <input type="checkbox"/> Neutral <input checked="" type="checkbox"/> Negative <input type="checkbox"/> Undetermined <input type="checkbox"/>
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Name of Policy, Process, Strategy or Service Change	Fire Safety Policy	Date of Completion	May 2023
EIA Responsible Person Include name, job role and contact details.	Siân Gascoigne, Head of Corporate Assurance Email: siân.gascoigne@nhs.net		
EIA Group Include the name and position of all members of the EIA Group.			
Wider Consultation Undertaken State who, outside of the project team, has been consulted around the EIA.	ICB's Corporate Assurance Team Staff Engagement Group		
Summary of Evidence Provide an overview of any evidence (both internal and external) that you utilised to formulate the EIA. E.g., other policies, Acts, patient feedback, etc.	Equality Act 2010		

For the policy, process, strategy or service change, and its implementation, please answer the following questions against each of the Protected Characteristics, Human Rights and health groups:	What are the actual, expected or potential positive impacts of the policy, process, strategy or service change?	What are the actual, expected or potential negative impacts of the policy, process, strategy or service change?	What actions have been taken to address the actual or potential positive and negative impacts of the policy, process, strategy or service change?	What, if any, additional actions should be considered to ensure the policy, process, strategy or service change is as inclusive as possible? Include the name and contact details of the person responsible for the actions.	Impact Score
Age	The Policy is designed to have a positive impact across all protected characteristics.	The Policy will have no expected negative impact on the protected characteristic of Age.	None.	This policy is aimed at all staff, and they should follow the procedures set out in the policy to enable them to work in a safe and secure environment.	3
Disability¹ (Including: mental, physical, learning, intellectual and neurodivergent)	The Policy is designed to have a positive impact across all protected characteristics. The Policy will have an expected positive impact around disability status as it specifically considers this in the workplace.	The Policy will have no expected negative impact on the protected characteristic of Disability.	Any necessary adaptations to the working environment and/or equipment will be agreed and actioned.	Each staff member in this group will have their own personal Risk Assessment and Action Plan.	4
Gender² (Including: trans, non-binary and gender reassignment)	There are no actual or expected positive impacts on the protected characteristic of Gender.	The Policy will have no expected negative impact on the protected characteristic of Gender.	None.	None.	3

Marriage and Civil Partnership	There are no actual or expected positive impacts on the protected characteristic of Marriage and Civil Partnership.	The Policy will have no expected negative impact on the protected characteristic of Marriage and Civil Partnership.	None.	None.	3
Pregnancy and Maternity Status	<p>The Policy is designed to have a positive impact across all protected characteristics.</p> <p>The Policy will have an expected positive impact around pregnancy and maternity status as it specifically considers this in the workplace.</p>	The Policy will have no expected negative impact on the protected characteristic of Pregnancy and Maternity Status	Individual Risk Assessments and PEEPs will be undertaken, and best outcome actions agreed with individuals in relation to fire evacuation.	Each staff member in this group will have their own personal Risk assessment and action plan.	4
Race³	The Policy is designed to have a positive impact across all protected characteristics.	The Policy will have no expected negative impact on the protected characteristic of Race.	None.	None.	3
Religion and Belief⁴	The Policy is designed to have a positive impact across all protected characteristics.	The Policy will have no expected negative impact on the protected characteristic of Religion and Belief.	None.	None.	3

Sex⁵	The Policy is designed to have a positive impact across all protected characteristics.	The Policy will have no expected negative impact on the protected characteristic of Sex.	None.	None.	3
Sexual Orientation⁶	The Policy is designed to have a positive impact across all protected characteristics.	The Policy will have no expected negative impact on the protected characteristic of Sexual Orientation.	None.	None.	3
Human Rights⁷	The Policy is designed to have a positive impact across all protected characteristics.	The Policy will have no expected negative impact on Human Rights.	None.	None.	3
Community Cohesion and Social Inclusion⁸	The Policy is designed to have a positive impact across all protected characteristics.	The Policy will have no expected negative impact on Community Cohesion and Social Inclusion.	None.	None.	3
Safeguarding⁹ (Including: adults, children, Looked After Children and adults at risk or who lack capacity)	The Policy is designed to have a positive impact across all protected characteristics.	The Policy will have no expected negative impact on Safeguarding.	None.	None.	3
Other Groups at Risk¹⁰ of Stigmatisation, Discrimination or Disadvantage	The Policy is designed to have a positive impact across all protected characteristics.	The Policy will have no expected negative impact on Other Groups at Risk.	None.	None.	3

<p>Additional Narrative</p> <p>Provide additional evidence and narrative about the positive, negative, and neutral impacts of the proposal on the equality, inclusion and human rights elements detailed above.</p> <p>You should consider:</p> <ul style="list-style-type: none"> • Three elements of Quality (safety, experience and effectiveness) • Intersectionality • Impact of COVID-19 • Access to Services <ul style="list-style-type: none"> ○ Physical ○ Written communication ○ Verbal communication • Digital Poverty • Safeguarding • Dignity and Respect • Person-centred Care 	<p>The Policy is expected to have a positive impact on all aspects of the health and safety of the ICBs employees demonstrates the ICB's commitment to the health, safety and welfare of its workforce and that of anyone who may come into contact with the organisation's activities.</p>	
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Positive Impact	Neutral Impact	Negative Impact	Undetermined Impact	Equality Impact Score Total	41
56 to 50	49 to 36	35 to 22	21 to 14		

Positive	Neutral	Negative	Undetermined
4	3	2	1

1. **Disability** refers to anyone who has: "...a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities..." (Equality Act 2010 definition). This includes, but is not limited to: mental health conditions, learning disabilities, intellectual disabilities, neurodivergent conditions (such as dyslexia, dyspraxia and dyscalculia), autism, many physical conditions (including HIV, AIDS and cancer), and communication difficulties (including d/Deaf and blind people).
2. **Gender**, in terms of a Protected Characteristic within the Equality Act 2010, refers to: "A person has the protected characteristic of gender reassignment if the person is proposing to undergo, is undergoing or has undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attributes of sex."
3. **Race**, in terms of a Protected Characteristic within the Equality Act 2010, refers to: A person's colour, nationality, or ethnic or national origins. This also includes people whose first spoken language is not English, and/or those who have a limited understanding of written and spoken English due to English not being their first language.
4. **Religion and Belief**, in terms of a Protected Characteristic within the Equality Act 2010, refers to: Religion means any religion and a reference to religion includes a reference to a lack of religion. Belief means any religious or philosophical belief and a reference to belief includes a reference to a lack of belief.
5. **Sex**, in terms of a Protected Characteristic within the Equality Act 2010, refers to: A reference to a person who has a particular protected characteristic and is a reference to a man or to a woman.
6. **Sexual Orientation**, in terms of a Protected Characteristic within the Equality Act 2010, refers to: Sexual orientation means a person's sexual orientation towards persons of the same sex, persons of the opposite sex or persons of either sex.
7. The **Human Rights Act 1998** sets out the fundamental areas that everyone and every organisation must adhere to. In relation to health and care, the most commonly applicable of the Articles within the Human Rights Act 1998 include: Article 2 Right to Life, Article 5 Right to Liberty and Security, Article 8 Right to Respect of Private and Family Life, and Article 9 Freedom of Thought, Conscience and Religion.
8. **Community Cohesion** is having a shared sense of belonging for all groups in society. It relies on criteria such as: the presence of a shared vision, inclusion of those with diverse backgrounds, equal opportunity, and supportive relationships between individuals. **Social Inclusion** is defined as the process of improving the terms of participation in society, particularly for people who are disadvantaged, through enhancing opportunities, access to resources, voice and respect for rights (United Nations definition). For the EQIA process, we should note any positive or negative impacts on certain groups being excluded or not included within a community or societal area. For example, people who are homeless, those from different socioeconomic groups, people of colour or those from certain age groups.
9. **Safeguarding** means: "...protecting a citizen's health, wellbeing and human rights; enabling them to live free from harm, abuse and neglect. It is an integral part of providing high-quality health care. Safeguarding children, young people and adults is a collective responsibility" (NHS England definition). Those most in need of protection are children, looked after children, and adults at risk (such as those receiving care, those under a DoLS or LPS Order, and those with a mental, intellectual or physical disability). In addition to the ten types of abuse set out in the Health and Care Act 2022, this section of the EQIA should also consider PREVENT, radicalisation and counterterrorism.
10. **Other Groups** refers to anyone else that could be positively or negatively impacted by the policy, process, strategy or service change. This could include, but is not limited to: carers, refugees and asylum seekers, people who are homeless, gypsy, Roma and traveller communities, people living with an addiction (e.g., alcohol, drugs or gambling), people experiencing social or economic deprivation, and people in stigmatised occupations (e.g., sex workers).

Appendix A:

Responsibilities of the ICB's Fire Safety Managers upon activation of a fire alarm

- 1) The Fire Safety Managers for the ICB's sites are:
 - Nottingham County Council (for Sir John Robinson House).
 - Community Health Partnerships (for Stapleford Care Centre and Balderton Primary Care Centre).
 - Nottingham City Council (for Trent Bridge House and Loxley House).
 - Gedling Borough Council (for Arnold Civic Centre).
 - NHS Property Services (for Retford Hospital, Ashfield Health Village and Wollaton Vale).

- 2) The Fire Safety Managers will undertake the following action on activation of the fire alarm:
 - Check the location on the fire alarm panel.
 - For known false alarm, the Fire Safety Manager will cancel the call with the monitoring station (if applicable).
 - For a known fire, the Fire Safety Manager will immediately call 999.

- 3) The ICB's Fire Safety Managers will collate information (regarding staff lists or any other pertinent information) from the ICB's Fire Wardens. Any relevant information will be passed to the emergency services on arrival.

- 4) The Fire Safety Managers will:
 - Issue instruction so that no one re-enters the affected zone/building until the emergency services declare that it is safe to return.
 - Inform the emergency services of the full situation, passing the premises plan to the officer, with any information which may be of assistance, or relate to the incident, especially the possible location of missing persons, fire at time of discovery, or suspicious packages.
 - Inform the emergency services of the specific locations of any disabled persons who have been left in the building in places of safe refuge.
 - Pass on other helpful information such as the position of fire alarm panel, gas and electric intake points, internal door digital lock numbers.

Appendix B:

Responsibilities of the ICB's Fire Wardens upon activation of a fire alarm

- 1) There are numerous Fire Wardens (and Deputies) across the ICB sites that are managed by the Corporate Assurance Team. (For details, email notts.corporateassurance@nhs.net).
- 2) The ICB's Fire Safety Manager(s) will nominate the appropriate number of Fire Wardens to ensure respective buildings are thoroughly searched and deputies will be identified to cover any absences.
- 3) In the event that the Fire Wardens are absent, the ICB's Fire Safety Advisors must be informed in advance.
- 4) The Fire Wardens will take the following action on activation of the fire alarm:
 - Proceed to their area of responsibility and check it (using the fire tick sheet) to ensure all personnel/visitors/members of the public are evacuating the building.
 - Inform anyone found during this search to leave the area immediately.
 - Stop the search if there is any sign of smoke. Under no circumstances should any door be opened where a fire is suspected on the other side.
 - Close all windows and doors (if safe to do so).
 - Proceed to the assembly point when the search is completed and perform a check of all staff within their area of responsibility (using the fire tick sheet).
 - Report findings to the ICB's Fire Safety Managers.
 - Report the exact numbers and locations of disabled persons left in the building in places of safe refuge.