



PWYLLGOR IECHYD A DIOGELWCH HEALTH & SAFETY COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	07 May 2024
TEITL YR ADRODDIAD: TITLE OF REPORT:	Fire Safety Management Update Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Andrew Carruthers, Director of Operations
SWYDDOG ADRODD: REPORTING OFFICER:	Rob Elliott, Director of Estates, Facilities and Capital Management

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

This report provides an update to the Health and Safety Committee (HSC) regarding progress in managing Fire Safety and to give assurance on the following matters:

- Fire Enforcement Notices (FENs)/Letters of Fire Safety Matters (LoFSM)
- Fire Safety Management

Cefndir / Background

The HSC will recall previous updates on each of the above. This report provides an update on progress on each of these areas since the previous HSC Meeting held on 4 March 2024.

Asesiad / Assessment

1. Fire Enforcement Notices (FENs)/Letters of Fire Safety Matters (LoFSMs)

1.1 Withybush Hospital (WGH)

Phase 2

All departments/ ward areas/ risk rooms (linen stores, battery charging areas, etc) **(FEN KS/890/04) (Current date April 2025).**

Formal notification has now received from the Mid and West Wales Fire and Rescue Service (MWWFRS) that they agree to the proposed scope of work set out by Hywel Dda University Health Board (HDdUHB). This was significantly supported during the process by NHS Wales Shared Services Partnership (NWSSP) Senior Fire Safety Advisor. The HDdUHB have also kept Welsh Government (WG) Capital Estates Teams fully briefed on the progress of this work.

The Business Justification Case (BJC) has now been submitted to WG week commencing 1 April 2024.

As previously noted, WG wish us to review the procurement approach for this Phase. We are now undertaking this jointly with NHS Wales Shared Services Partnership Specialist Estates Services (NWSSP–SES) and expect this work to be undertaken as part of the scrutiny process following the submission of the BJC to WG.

This work is currently continuing as part of a workshop approach jointly with NWSSP-SES which we would hope will be concluded by circa mid to late May. It is difficult to forecast a specific timeline at this stage given that the conclusion of this workshop is likely to involve using alternative contractor framework and procurement processes. Our best estimate today is a start on site circa December 2024, we will be able to update this programme at future Committee Meetings.

We have now met with MWWFRS jointly with the Deputy Director NHS Capital, Estates & Facilities of WG on the 18 April 2024 to present this refreshed approach and revised timescale.

MWWFRS remain entirely satisfied with this position and fully understand the reasons for a refreshed approach and will work closely with us on managing the revised timelines which will be necessary.

Decant Arrangements to Support Phase 2 Work

As noted at the previous Committee this project is fully approved to proceed in the sum of £8.313m.

This project was handed over on 10 April 2024 and is now proceeding within the HDdUHB commissioning programme in readiness for patients.

1.2 Glangwili Hospital (GGH)

Phase 1

All remaining horizontal escape routes at GGH (**FEN KS/890/08 Completion Date July 2022**) (**Currently extended to 31 July 2024**).

The HDdUHB has now received an updated programme from the supply chain partner which confirms a completion date at the end of November 2024. The programme has now been accepted by the project management team. The established management approach with MWWFRS is for them to visit the site to check progress prior to the enforcement date set and issue further extensions as necessary. This is normally in 6-month phases.

The HDdUHB has formally advised WG of the cost pressures of this project noting the disruption and programming challenges within the acute hospital setting. WG have asked for additional assurances on this funding application to provide further detail on how the HDdUHB is managing this programme to achieve this completion date. We have advised WG that we have built in some contingency to this programme to allow an extension to January 2025 or later if further unforeseen disruptions were to occur.

The MWWFRS have now formally extended the FEN to 31 July 2024. Further extensions will be necessary, and we will work closely with MWWFRS to manage this process as the works proceed.

This revised programme was presented to MWWFRS at the meeting of 18 April 2024, and they also accepted this refreshed timeline.

MWWFRS regularly visit the works in progress and are fully satisfied with the current status and regular dialogue which is continued while work proceeds. MWWFRS were also highly complementary on both the standards of workmanship in place and also the expertise within the HDdUHB in managing such a challenging project.

Phase 2

All departments/ ward areas/ risk rooms **(FEN KS/890/09) (Current date August 2024) (Currently extended to 30 June 2025)**

As we are now clear on the agreement at WGH on the proposed scope of works. We are now undertaking a similar exercise on GGH and discussing this closely with MWWFRS.

In addition, we are now commencing the Phase 2 BJC development at GGH in line with this assumption. We will be limited as to how far we can go with this work until we receive a formal approval from MWWFRS.

The MWWFRS have now formally extended the FEN to 30 June 2025. Further extensions will be necessary, and we will work closely with MWWFRS to manage this process as the works proceed.

Noting the value for money check being requested on Phase 2 at WGH we expect a similar requirement on Phase 2 GGH. We will be discussing how best to approach that with NWSSP in advance of this BJC being completed and will involve MWWFRS at each stage of this process.

We briefed the MWWFRS on GGH Phase 2 programme uncertainty given the revised approach which will be necessary. We agreed to keep in close contact on this as the project develops to keep MWWFRS fully informed.

Further updates on likely programme times for this BJC will be available as part of future Committee papers as work is progressed.

1.3 Additional Letters of Fire Safety Matters (LoFSMs)

➤ Bronglais Hospital (BGH) Main Building

There is no update from the previous report in March 2024.

- The current revised letters issued dated 31 August 2022.
- The LoFSMs have a significant number of requirements, however there is no FEN action placed on HDdUHB for BGH.

As noted previously the BGH phased programme is contained fully in the briefing presented to MWWFRS on 10 November 2023. This has now been formally supported by MWWFRS. Further updates on a BJC programme for BGH will follow in future Committee briefings.

➤ Prince Philip Hospital (PPH)

- All priority work including the independent quality review has now been completed.
- Future investment plans for this site are as follows:
 - The initial stage of Estates and Facilities Advisory Board (EFAB) funding for 2023/24 has now been completed and we are now commencing the 2024/25 plan.
 - The final stage of Business Case development for the remaining work beyond 2025 will require a BJC to be submitted. A review of the timeline of this is

currently underway and whether a Programme Business Case (PBC) is required in advance of a BJC.

- All of the above currently remains on programme.

➤ **South Pembrokeshire Hospital (SPH)**

A LoFSM has been received for SPH which was included in the bidding process for EFAB funding.

- The initial stage of EFAB funding for 2023/24 has now been completed and we are now commencing the 2024/25 plan.
- All of the above currently remains on programme.

1. Fire Safety Management Update

1.1 Fire Risk Assessment System (FRA) (Boris)

As of 16 April 2024, all Fire Risk Assessments have been transferred over from the NWSSP-SES site to the new Boris system.

We are fully up to date with Fire Risk Assessments with 0 overdue currently with 25 FRA's due to be completed by 31 May 2024.

At the previous update on the 4 March 2024, we were at 78% completion for transferring Risk Assessments onto the Boris system. Now that this has been concluded in the last week or so, we are now obtaining initial reports from the Boris system and developing dashboards to provide the information needed e.g.

- Total number of risks in the system.
- Separation of managerial type items to those requiring physical improvements to the Estate.
- An assessment of the risk level of each individual item contained in the system.
- Information on planned completion dates for Capital/Managerial items:
 - Already completed since the audit was undertaken.
 - Within current fire investment programmes with outline dates
 - A new programme needed to confirm delivery of the item
- Confirmation of all actions assigned to an individual responsible manager.

The analysis of the system has proved challenging for a number of reasons including:

- Tracking risk items in the system which have already been concluded or are included in future agreed Fire Programme Projects.
- Recent agreements with the MWWFRS on a significant reduction in scope needed in Major Fire Projects. This reduction in scope has not yet been factored into our Risk Assessment process internally.

It is important to note also that we have regular inspections by MWWFRS on all of our Estate and any issues raised are held within the tracking system managed by the HDdUHB Risk Team.

The regular reporting of this information will give assurance to this Committee.

We propose to provide an initial update on the statistics to the next Committee which is on the 9 July 2024.

1.2 Fire Safety Training

Performance, in terms of delivery of fire safety training, is identified in tables below:

Table as of 24 November 2023

Competence Name	Assignment Count	Required	Achieved	Compliance %
NHS CSTF Fire Safety - 2 Years	12,257	12,257	10,283	83.89%
100 LOCAL Fire Safety Level 2 - 1 Year General	5,711	5,711	3,160	55.33%
100 LOCAL Fire Safety Level 3 - 1 Year General	159	159	122	76.73%

Table as at 1 February 2024

Competence Name	Assignment Count	Required	Achieved	Compliance %
NHS CSTF Fire Safety - 2 Years	12,295	12,295	10,453	85.02%
100 LOCAL Fire Safety Level 2 - 1 Year General	5,716	5,716	3,404	59.55%
100 LOCAL Fire Safety Level 3 - 1 Year General	153	153	135	88.24%

Table as of 16 April 2024

Competence Name	Assignment Count	Required	Achieved	Compliance %
NHS CSTF Fire Safety - 2 Years	12,266	12,266	10,504	85.64%
100 LOCAL Fire Safety Level 2 - 1 Year General	5,715	5,715	3,649	63.85%
100 LOCAL Fire Safety Level 3 - 1 Year General	152	152	119	78.29%

As noted above:

- Level 1 fire safety training remains steady at circa 85%.
- Level 2 fire safety training has increased by circa 4.3% since the last report. A significant effort has been made to encourage our staff to attend Level 2 training with regular emails being sent out by the Executive Director of Operations. This includes emails to managers listing individual staff who have not yet completed their Level 2 training. In addition is also raised at Operational Planning Governance and Programme Meeting so that the senior team are fully apprised of the importance of improving this training figure up to the 85% target.

(Level 2 training covers all clinical staff that work with or have direct contact with in-patient and out-patient facilities. As noted later in this paper we understand the pressure of clinical teams to attend training during such challenging periods).

- Level 3 fire safety training (Fire Response Team members) has dropped by circa 10% since the last report. This is now being picked up by the Head of Operational Services so this is corrected in the next update provided to the July Committee we are confident this will be achieved.
- Level 4 fire warden training – 6 sessions facilitated by an external accredited contractor have taken place with a total number of 92 volunteers being trained. Following a new drive to encourage volunteers to come forward, a further 30+ names

have been received and 4 dates have been booked in the coming months. 10 volunteer staff attended the recent session held at PPH.

- Level 4 (Fire Warden Training) is a voluntary role; it is not mandatory or statutory to undertake this role. It is purely “good practice” recognised by the HDdUHB. It is not benchmarked and there is no ESR requirement to complete the training.
- Level 5 senior staff training (Band 8B and above) – 224 staff have already attended the training out of a possible 244. This equates to circa 92% uptake.

Confidence remains that the required capacity for training within HDdUHB is in place and additional sessions are being delivered on a flexible basis now to continue to support the improvement in L2 training statistics.

For additional information we have included an All-Wales update on L1 training statistics at Appendix 1.

1.3 Unwanted Fire Signals (UwFS)

Attached at Appendix 2 is a full report on UwFS’s throughout the HDdUHB for the period 3rd February 2024 to 16th April 2024. Any sites not listed have had no false alarms within the reporting period.

Argymhelliad / Recommendation

The Health and Safety Committee is requested to:

- **NOTE** and **TAKE ASSURANCE** from the content of this report and the work achieved to strengthen Fire Safety Compliance.
- **NOTE** that further updates will be presented at future Health & Safety Committee meetings.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.11 Ensure reports and factual information from external regulatory agencies are acted upon within achievable timescales.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Estates and Facilities Risk No 813 Score 15
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	2. Safe Care 1. Staying Healthy 3. Effective Care

Amcanion Strategol y BIP: UHB Strategic Objectives:	5. Safe sustainable, accessible and kind care 4. The best health and wellbeing for our individuals, families and communities
Amcanion Cynllunio Planning Objectives	2a Staff health and wellbeing 5a Estates Strategies 7a Population Health
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	10. Not Applicable

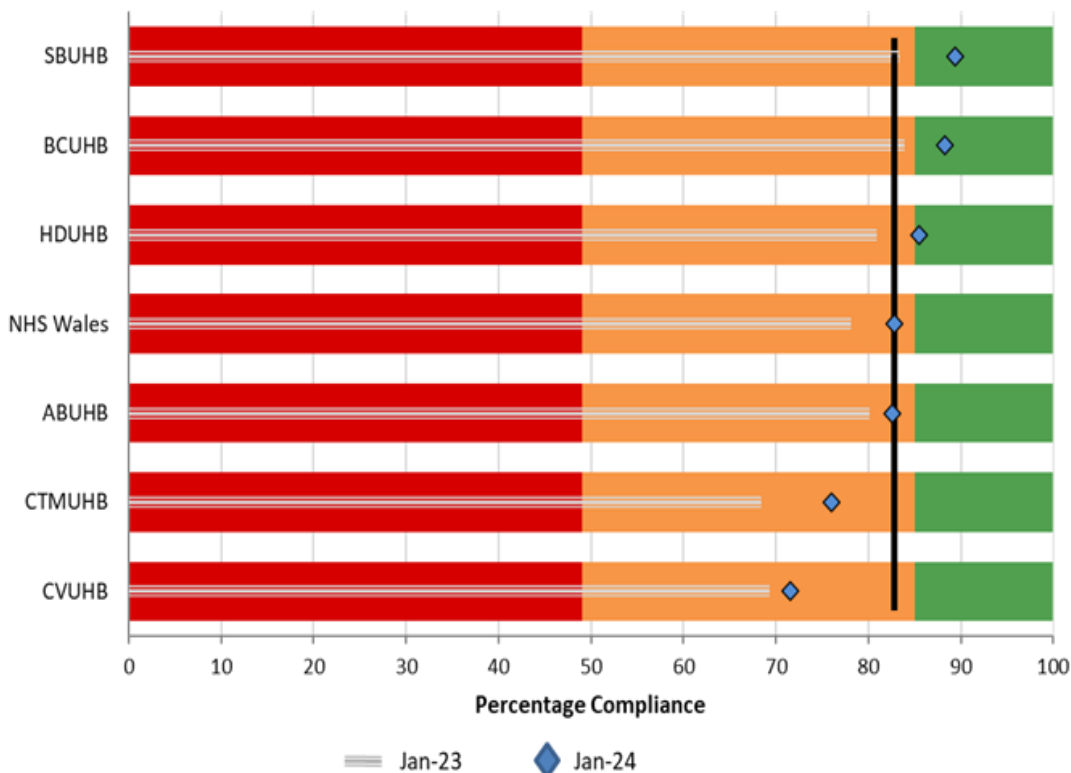
Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	MWWFRS and extensive site-based survey information.
Rhestr Termau: Glossary of Terms:	Contained within the body of the report.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd Iechyd a Diogelwch: Parties / Committees consulted prior to Health and Safety Committee:	Not Applicable

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Funding sought from Welsh Government.
Ansawdd / Gofal Claf: Quality / Patient Care:	Not Applicable
Gweithlu: Workforce:	Delivering a safe working environment
Risg: Risk:	Estates and Facilities Risk No 813
Cyfreithiol: Legal:	Potential for legal challenge if HDdUHB does not comply with requirements of Fire Enforcement Notices.
Enw Da: Reputational:	Potential for legal challenge if HDdUHB does not comply with requirements of Fire Enforcement Notices.
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Not Applicable

All Wales Comparison of Fire Safety Training Compliance

This graph shows the compliance rates for the selected Statutory & Mandatory Training course by Organisation. The **GREY** horizontal lines shows the historic rate, the **BLUE** diamond shows the most current rate and the vertical **BLACK** line shows the rate for NHS Wales. The graph is split into three sections indicating the **RAG** rating for the performance target.

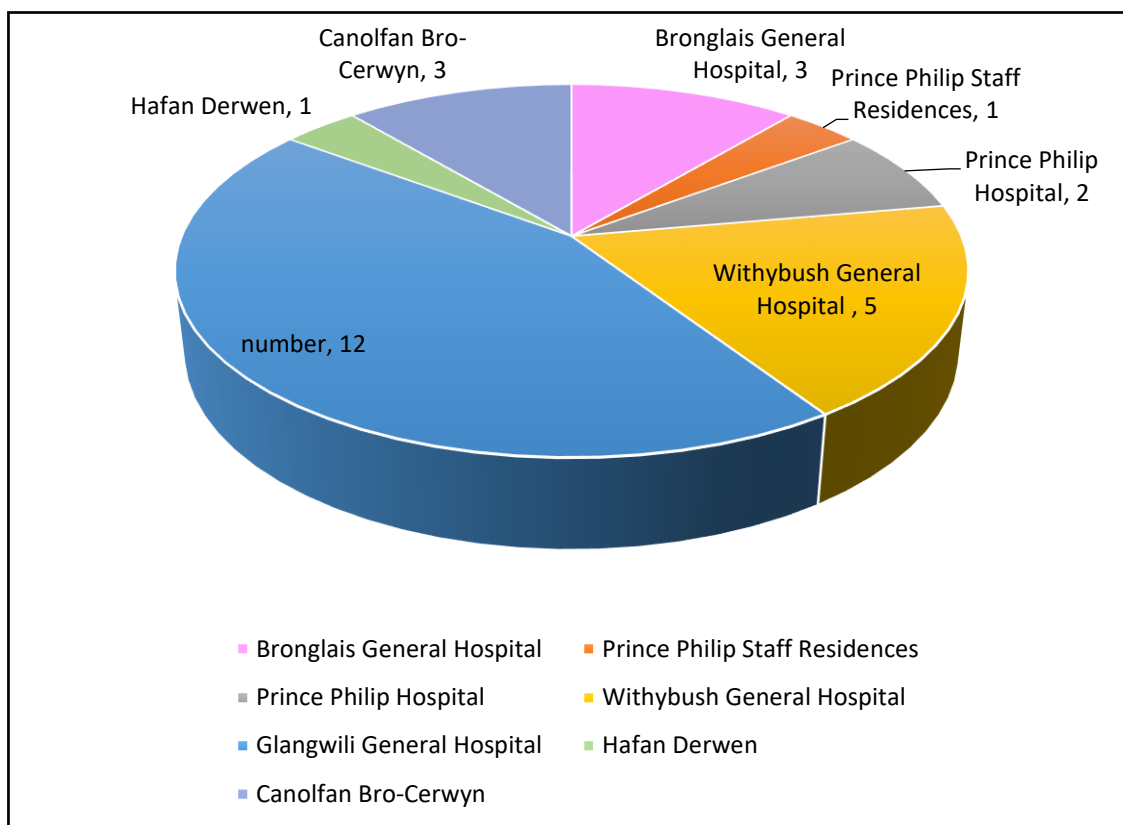
Fire Safety Compliance by Organisation for All Staff Groups



Key
■ Greater 85%
■ Between 50% - 85%
■ Less than 50%
— NHS Wales

The January 2024 rates represented by the blue diamonds were:

Swansea Bay	89.39%
Betsi	88.22%
Hywel Dda	85.50%
<i>NHS Wales</i>	<i>82.86%</i>
Aneurin Bevan	82.63%
Cwm Taf	75.99%
Cardiff & Vale	71.56%



Comparison of Fire Incidents and Unwanted Fire Signals (UwFS) on a site-by-site basis for the period 3 February 2024 to 16 April 2024 (inclusive).

Standard Report

Comparison of fire incidents and UwFS on a site-by-site basis, for the period 3 February 2024 to 15 April 2024 (inclusive)

27 incidents found

Site	Fire	UwFS
Bronglais General Hospital	0	3
Glangwili General Hospital	0	12
Canolfan Bro Cerwyn	0	3
Prince Philip Hospital	0	2
Prince Philip Residences	0	1
Witybush General Hospital	0	5
Hafan Derwen	0	1

UwFS incidents
between 3 February 2024 and 16 April 2024 inclusive
Site: Bronglais General Hospital

Item	Value	%
Steam from mechanical plant	1	33.3%
MCP Broken by accidental impact	2	66.7%
Grand total	3	100%

UwFS incidents
between 3 February and 16 April 2024 inclusive
Site: Canolfan Bro-Cerwyn

Item	Value	%
Faulty detector	1	33.3%
Vaping	2	66.7%
Grand total	3	100%

UwFS incidents
between 3 February 2024 and 16 April 2024 inclusive
Site: Glangwili General Hospital

Item	Value	%
Faulty detector	2	16.7%
Steam from mechanical plant	2	16.7%
MCP broken by accidental impact	3	25%
MCP activation by confused patient	2	16.7%
Cooking- unattended	1	8.3%
Cooking- burnt toast	1	8.3%
MCP Broken in error	1	8.3%
Grand total	12	100%

UwFS incidents
between 3 February and 16 April 2024 inclusive
Site: Prince Philip Hospital

Item	Value	%
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Appendix 2

Excessive build-up of heat	1	50%
Steam from shower/ bath	1	50%
Grand total	2	100%

UwFS incidents**between 3 February 2024 and 16 April 2024 inclusive****Site: Prince Philip Hospital Residences**

Item	Value	%
Fumes- Contractors hot works	1	100%
Grand total	1	100%

UwFS incidents**between 3 February 2024 and 16 April 2024 inclusive****Site: Withybush General Hospital**

Item	Value	%
Dust- Contractors work	2	40%
Detector contaminated	1	20%
MCP- activated by confused patients	1	20%
Cooking – inappropriate location	1	20%
Grand total	5	100%

UwFS incidents**between 3 February 2024 and 16 April 2024 inclusive****Site: Hafan Derwen**

Appendix 2

Item	Value	%
Detector faulty	1	100%
Grand total	1	100%