

PWYLLGOR IECHYD A DIOGELWCH HEALTH & SAFETY COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	11 September 2023
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 <u>Sefyllfa / Situation</u>

This report provides an update to the Health and Safety Committee (HSC) with regard to progress in managing the following areas of Fire Safety:

- 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 10 July 2023.

Asesiad / Assessment

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

1.1 Withybush Hospital (WGH)

Phase 1

All remaining horizontal escape routes at WGH, all remaining work at St Caradogs and St Nons, all work at Kensington, St Thomas, Springfield, Sealyham, and Pembroke County Blocks (FEN KS/890/03, FEN KS/890/05 and LOFSM completion date April 2022) (Currently extended to August 2023).

As noted in the July Committee Meeting the programme has been extended to end of October 2023. This remains the current programme and the Project Team are confident that subject to new fire door deliveries this programme can be maintained.

An application has been made to the Mid and West Wales Fire and Rescue Service (MWWFRS) to extend the date of the FEN. Discussions with the MWWFRS Team have

confirmed that they are fully satisfied with our programme delivery and an extension to the FEN will be issued in due course.

The financial position remains challenging and has recently been reported to the Capital Sub Committee (CSC).

Phase 2

All departments/ ward areas/ risk rooms (FEN KS/890/04) (Current date April 2025).

As reported at the July meeting, the Health Board has submitted a detailed plan to MWWFRS setting out the proposal for a reduced scope of works. A formal presentation on this was given to MWWFRS on 19 July 2023. In attendance at this presentation were representatives of NHS Wales Shared Services Partnership -Specialist Estates Service (NWSSP-SES) and Welsh Government (WG). In addition, the Senior Fire Safety Advisor (SFSA) and the Health Board are working jointly on the detail needed to support this reduced scope of work.

Following this presentation MWWFRS have asked the Health Board to provide further detailed information working with the Supply Chain Partner (SCP) and in particular the specialist fire advisors within the SCP team. This information will then be considered by MWWFRS in order for them to formally support this approach on WGH Phase 2.

This information is well developed, and we are working towards a completion date of the week beginning 28 August 2023. This is dependent of the work of the SCP who are fully engaged in this work. The Health Board is also fully supported by NWSSP-SFSA who is working closely with the Health Board's own Fire Safety Team.

In order to progress this work at pace and to provide assurance to MWWFRS that we are working as far as is possible to achieve set enforcement dates, we are continuing to develop the Business Justification Case (BJC) which is currently programmed to be completed by late September 2023. If this programme is maintained, then this would support a start on site date as previously reported to the Committee of circa February 2024.

It is important to note that the Phase 2 completion date is currently April 2025. MWWFRS are fully satisfied with progress on Phase 1 and also on the work progressing on the Decant Ward at WGH which will be operational circa January 2024.

In addition to the above and as noted at the July meeting, work is being progressed to develop options to include fire related improvements to ward areas which are affected by Reinforced Autoclave Aerated Concrete (RAAC). The Health Board has now submitted a full estimate of costs for the RAAC programme which includes this fire related work.

Decant Arrangements to Support Phase 2 Work

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

The completion date, as noted at the July meeting, of January 2024 remains on programme.

This aligns well with the planned commencement of Phase 2 works.

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 August 2023).

As noted at the July meeting, the approved programme has been extended to May 2024 and this remains the current approved programme.

An application has been made to the MWWFRS to extend the date of the FEN. Discussions with the MWWFRS Team have confirmed that they are fully satisfied with our programme delivery and an extension to the FEN will be issued in due course.

Phase 2

All departments/ ward areas/ risk rooms (FEN KS/890/09) (Current date August 2024).

As noted at the July meeting, the Health Board will need to undertake a review of the programme for the Phase 2 BJC. Subject to the outcome of discussions with MWWFRS on the WGH Phase 2 scope of works, the Health Board is confident that the agreement at WGH will provide a consistent starting position with MWWFRS on the GGH Phase 2 scope of work.

Once a firm position on WGH Phase 2 has been determined, the Health Board will be able to present a programme for the BJC Phase 2 at GGH. At this point, we remain confident of undertaking this BJC for Phase 2 work and being able to commence on site close to the completion of Phase 1 (currently programmed for completion in May 2024).

It is important to note that Phase 2 works will be extremely complex given the delivery of these FEN works to busy clinical areas. The due diligence work required during business case development will confirm both commencement dates and programme delivery dates for this work.

Discussions have been undertaken with MWWFRS, who appreciate that a revision may be required to the FEN dates should the nature of the works dictate that an additional period of time becomes necessary.

1.3 Additional Letters of Fire Safety Matters

Bronglais Hospital (BGH) Main Building

- 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 the Health Board for BGH.

As noted in the previous update to the HSC, MWWFRS have revised their LoFSM to align with the forecast delivery plan the Health Board has developed.

The Health Board has now submitted the PBC for BGH main buildings in the sum of £29.6m, and now awaits scrutiny comments from WG. An update will be provided when these have been received.

It should be noted that this is the PBC and therefore is the initial high-level document and, subject to being endorsed by WG, the Health Board will be in the position to draw down funds necessary to progress with the BJC at that point. This business case programme currently aligns with the above programme provided previously to MWWFRS.

Following discussion around scope reduction at WGH, the Health Board has also suggested to WG that it would work in partnership with MWWFRS to further review the BGH Fire Project also. WG have welcomed this and have advised that they will consider this as part of the scrutiny process of the PBC.

Further updates to the HSC will be provided as the work continues. Regular dialogue with MWWFRS and WG continues as these business cases are being developed.

> 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 EFAB funding will commence in April 2023 and will continue into the following financial year completing in March 2025 (£411k and £733k respectively)
 - The final stage of business case development for the remaining work beyond 2025 will require a BJC to be submitted. We are currently reviewing the timeline of this and whether a 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 the Health Board has included in its bidding process for EFAB funding
- This bid was fully approved, and the Health Board now has an established 2 Year programme covering 2023/24 and 2024/25 to address all requirements of the LoFSM. EFAB funding approved at £318k and £485k respectively for the 2 Year Programme
- All of the above currently remains on programme.

As noted in the previous meeting, assurance can be provided that all fire investment plans for all requirements across the Health Board have now been fully approved by MWWFRS who we continue to meet regularly to update on progress.

1. Audit Tracker

Attached at Appendix 1 for further information, is the Health Board tracker developed by the Assurance and Risk Team which monitors progress on all of the above issues. This appendix is regularly updated and submitted with the Fire Safety Management Update Report to provide assurance to the Health & Safety Committee on the Health Board's response to FENs and LoFSMs.

2. Fire Safety Management Update

2.1 Fire Risk Assessments (FRAs)

As of 21 August, there are 4 overdue FRAs. A further 22 FRAs are scheduled prior to 30 September 2023) as identified on the NWSSP-SES system dashboard.

2.2 Boris Fire Risk Assessment Management System

All FRAs are in the process of being transferred to the new Boris system over the next circa 12 months. Currently 217 Fire Risk Assessments out of a total of 364 have been undertaken and transferred this equates to 59.61% of all FRAs (38.73% previously reported).

The original intention was to complete all transfers by Summer 2023. The resource needed to move across to the new system has impacted on the progress against this target. A more realistic position would be to finish this work by the end of Quarter 3 of 2023/24, however we will endeavour to complete this earlier.

It is important to be clear that this does not pose a risk to the Health Board as all FRAs are up to date and it is only the transition to the new system which is now slightly delayed.

2.3 Fire Safety Training

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

Table 3.0 As at 18 April 2023

Competence Name	Assignme nt Count	Require d	Achiev ed	Complian ce %
NHS CSTF Fire Safety - 2 Years	11,842	11,842	9,833	83.30%
100 LOCAL Fire Safety Level 2 - 1	5,487	5,487	3,008	54.82%
Year General				
100 LOCAL Fire Safety Level 3 - 1	190	190	124	63.26%
Year General				

Table 3.0 As at 30 May 2023

Competence Name	Assignme nt Count	Require d	Achiev ed	Complian ce %		
NHS CSTF Fire Safety - 2 Years	11,959	11,959	10,080	84.29%		
100 LOCAL Fire Safety Level 2 - 1 Year General	5,530	5,530	3,192	57.72%		
100 LOCAL Fire Safety Level 3 - 1 Year General	178	178	138	77.53%		

Table 3.0 As at 21 August 2023

Competence Name	Assignme nt Count	Require d	Achiev ed	Complian ce %
NHS CSTF Fire Safety - 2 Years	12,001	12,001	10,110	84.24%
100 LOCAL Fire Safety Level 2 - 1 Year General	5,550	5,532	3,335	60.09%
100 LOCAL Fire Safety Level 3 - 1 Year General	176	176	136	77.27%

As noted above:

- Level 1 fire safety training remains steady at circa 84%.
- Level 2 fire safety training has improved by 2% since the last report and now passes 60%. Level 2 training covers all clinical staff that work with or have direct contact with in-patient and out-patient facilities.
- Level 3 (fire response team) fire safety training remains level since the last report. Acknowledging the importance of the training for these individuals, additional sessions have been provided but staff have failed to attend despite booking on. We

will continue to undertake additional sessions on a flexible basis to continue to improve compliance.

A review of the total numbers of staff in this group (176) indicates that almost all of these staff will need refresher training with very few new starters.

- 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 30-40 names have been received. Sessions will be booked shortly for these staff to attend.
- Level 5 senior staff training (Band 8B & above) 210 staff have already attended the training out of a possible 244. This equates to circa 86% uptake.

Confidence remains that the required capacity for training within the Health Board is in place; however, fluctuations in staff attendance continue within Level 2. The pressures on clinical and management teams to attend this training at such challenging times is fully understood. This is the key issue which is preventing significant improvements in fire training statistics.

For increased governance, fire training is now formally reported to the Senior Operations Business Meeting to enable the Director of Operations to provide additional scrutiny and support. In addition, reports now include Level 4 (Fire Wardens) and Level 5 (Management) training statistics (February 2023 onwards in line with audit recommendations).

2.4 Unwanted Fire Signals (UwFS)

Attached at Appendix 2 is a full report on UwFS's throughout the Health board for the period 26 June 2023 – 21 August 2023. Sites not listed have had no false alarms within the reporting period.

Argymhelliad / Recommendation

The Health and Safety Committee is requested to:

- Acknowledge and gain 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:	6. All Apply								

Quality and Engagement Act (sharepoint.com)	
Parthau Ansawdd: Domains of Quality <u>Quality and Engagement Act</u> (sharepoint.com)	2. Safe Care1. Staying Healthy3. Effective Care
Amcanion Strategol y BIP: UHB Strategic Objectives:	5. Safe sustainable, accessible and kind care4. 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: <u>Hyperlink to HDdUHB Well-being</u> <u>Objectives Annual Report 2021-2022</u>	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	Not Applicable
ymlaen llaw y Pwyllgor Ansawdd Iechyd a Diogelwch:	
Parties / Committees consulted prior	
to Health and Safety Committee:	

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

Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Not Applicable

Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule, Amber- on schedule, Green- complete)	Progress update/Reason overdue
BFS/KBJ/SJM/0011 3573	L Dec-19	2019/20	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters. St Nons (Secure EMI unit)/ St Brynach's (Day Hospital) / Bro Cerwyn (Offices) BFS/KBJ/SJM/00113573	BFS/KBJ/SJM/0011357 3_001	7 High	 R.1. St Nons. Ensure that door sets than can resist fire and smoke for 30 minutes are provided in the following locations: Throughout Units, many doors were defective, these were on escape routes. The terms door set refers to the complete element as used in practice: The door leaf or leaves. The frame in which the door is hung. Hardware essential to the functioning of the door set, 3 x hinges. Intumescent seals and smoke sealing devices/Self closure. Self-closers to be fitted to all doors and not compromise strips and seals of fire doors. 	Mar-20 Dec-21 Apr-22 Mar-23 Jul-23 Aug-23	Dec 21 A pr 22 Dec 22 Mar 23 Jul 23 Aug 23	Amber	12/01/2021- Revised letter from MWWFRS confirmed this item is to be of Stage 2 / Phase 1 works relate to all remaining escape routes at WGH and 11/11/2022- a revised completion date of March 2023 had previously be who had formally extended the FEN dates. Following the latest update to this Committee extensive further works he This work being identified from forward look surveys as part of the prep The impact on programme of the above has meant that the date noted a a period of 4-month extension. This extension has been fully assessed by acceptance of this programme. This programme impact has been comm planned for mid November 2022. 20/12/2022- This programme update has been fully reported to MWWF adjustment. They have noted that they will look to revisit theUHB prior to given at that point. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position. Forecasted completion of 21/04/2023- communication from MWWFRS confirmed a formal extension pending request to extend.
BFS/KBJ/SJM/0011 3573	l Dec-19	2019/20	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters. St Nons (Secure EMI unit)/ St Brynach's (Day Hospital) / Bro Cerwyn (Offices) BFS/KBJ/SJM/00113573	BFS/KBJ/SJM/0011357 3_002	Y High	R2. St Nons. Reinstate the fire resistance in the following location(s): Compartmentation issues throughout unit, due to Dampers showing fault on system.	Mar 20 Dec 21 Apr 22 Mar 23 Jul 23 Aug-23	Dec 21 Apr 22 Dec 22 Mar 23 Jul 23 Aug-23	Amber	12/01/2021- Revised letter from MWWFRS confirmed this item is to be of Stage 2 / Phase 1 works relate to all remaining escape routes at WGH an 11/11/2022- a revised completion date of March 2023 had previously be who had formally extended the FEN dates. Following the latest update to this Committee extensive further works h This work being identified from forward look surveys as part of the pre p The impact on programme of the above has meant that the date noted a a period of 4-month extension. This extension has been fully assessed by acceptance of this programme. This programme impact has been comm 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position.WWFRS ahead of the new 20/12/2022- This programme update has been fully reported to MWWF adjustment. They have noted that they will look to revisit theUHB prior t given at that point. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position. Forecasted completion of 21/04/2023- Communication from MWWFRS confirmed a formal extension and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position. Forecasted completion of 21/04/2023- communication from MWWFRS confirmed a formal extension pending request to extend.
BFS/KS/SJM/0017 5424/ 00175421/001754 28/00175426/001 75425		2019/20	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters. Withybush General Hospital, Kensington, St Thomas, etc. BFS/KS/SIM/00175424/ 00175421/00175428/001 75426/00175425	BFS.KS/SJM/00175424 / 00175421/00175428/ 00175426/00175425_ 001	l High	 R1. Compartment A Compartmentation survey of all the listed blocks above including floor to roof (Loft separation between stairwell and accommodation / office areas) must be carried out to ensure that fire and smoke cannot pass. All Loft hatches are to be fire resisting to a minimum of 30 minutes. Data cables, pipes and ducting need to be fire stopped, noted within St Thomas block but to include any other area not noted within all other blocks. 	Mar 20 Dec 21 Apr 22 Mar 23 Jul 23 Aug-23	Dec 21 A pr 22 Dec 22 Mar 23 Jul 23 Aug-23	Amber	12/01/2021- Revised letter from MWWFRS confirmed this item is to be stage 2 / Phase 1 works relate to all remaining escape routes at WGH ar 11/11/2022- a revised completion date of March 2023 had previously b who had formally extended the FEN dates. Following the latest update t Fire Doors and Fire Stopping requirements. This work being identified frichain and UHB teams. The impact on programme of the above has meant that the date noted a period of 4-month extension. This extension has been fully assessed by acceptance of this programme. This programme impact has been comm planned for mid-November 2022. 20/12/2022- This programme update has been fully reported to MWWF adjustment. They have noted that they will look to revisit theUHB prior to given at that point. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards or thay are comfortable with the current position. Forecasted completion 21/04/2023- communication from MWWFRS confirmed a formal extenss pending request to extend.

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WFRS in a formal meeting held 08/12/2022, and they fully accept the need for this ior to the current set end date of March 2023 so that an appropriate extension can be

tion that the Estates service delivered to them on 08/12/22 was extremely well laid out ds current position and the agreed timeframes for completion. MWWFRS confirmed on date presented to, and agreed by, MWWFRS is July 2023. ension of six months to 31/08/2023, these will be reviewed on a six monthly basis

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9/27

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BFS/KS/SJM/0017 5424/ 00175421/001754 28/00175426/001 75425	Jan-20	2019/20	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters. Withybush General Hospital, Kensington, St Thomas, etc. BFS/KS/SJM/00175424/ 00175421/00175428/001 75426/00175425	BFS.KS/SJM/00175424 / 00175421/00175428/ 00175426/00175425_ 002	High	 R2. Fire Resisting Corridors Ensure that the means of escape is kept free from fire and smoke for a period of 30 minutes by ensuring that: Bedroom / flat doors, Kitchen, cleaners and Laundry room doors, are all to be a minimum fire resistance of FD30s with a self-closer. (Pembroke county, Springfield, St Thomas, Kensington blocks) these doors should not be wedged open and any intumescent smoke seals that is damaged (Painted over) or missing should be replaced. At the time of the inspection I noted a number of doors being held open with wedges, the use of these Wedges holding doors open in all Blocks should be prohibited as it could promote the spread of fire, if doors are required to be left open then they will have to be self-closing 30-minute fire door linked in to the fire detection system. Excessive gaps in fire doors should be replaced, they should be constructed to provide 30 minutes fire resistance to the means of escape, these were mainly noted within the Pembroke county, St Thomas, Kensington blocks but if they are present within any other block within the means of escape these need to also be addressed. Lobby doors need to be replaced in both first floor RH offices within the Springfield and Kensington blocks. 	Mar 20 Dec 21 Apr 22 Mar 23 Jul 23 Aug-23	Dec-21 Apr-22 Dec-22 Mar-23 Jul-23 Aug-23	Amber	12/01/2021- Revised letter from MWWFRS confirmed this item is to be c Stage 2 / Phase 1 works relate to all remaining escape routes at WGH and 11/11/2022- a revised completion date of March 2023 had previously be who had formally extended the FEN dates. Following the latest update to Fire Doors and Fire Stopping requirements. This work being identified fro chain and UHB teams. The impact on programme of the above has meant that the date noted a a period of 4-month extension. This extension has been fully assessed by acceptance of this programme. This programme impact has been commu planned for mid-November 2022. 20/12/2022- This programme update has been fully reported to MWWFF adjustment. They have noted that they will look to revisit the UHB prior t given at that point. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards co thay are comfortable with the current position. Forecasted completion d 21/04/2023- communication from MWWFRS confirmed a formal extension pending request to extend.
BFS/KS/SJM/0011 4719 - KS/890/03	Feb-20	2019/20	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: Withybush General Hospital. BFS/KS/SJM/00114719 - KS/890/03	BFS/KS/SJM/0011471 9_03_001	High	R1. Compartmentation – All Horizontal Corridor Escape Routes To undertake whatever works are necessary to ensure that any / all breaches in fire resisting compartmentation that affect the Horizontal Escape Routes within Withybush Hospital are addressed. Fire resisting structures are to continue to slab / upper floor level / roof level and pass through any false ceiling provided.	Aug 21 Dec 21 Apr 22 Dec 22 Mar 23 Jul 23 Aug 23 Oct-23	Dec 21 Apr 22 Dec 22 Mar 23 Jul 23 Aug 23 Oct 23	Amber	This work is part of the phase 1 WGH Fire Enforcement Programme. 12/08/2022- MWWFRS have extended to March 2023 as they have accept extra time to implement. Letter dated 25/07/22 from MWWFRS confirms 11/11/2022- a revised completion date of March 2023 had previously be who had formally extended the FEN dates. Following the latest update to this Committee extensive further works had This work being identified from forward look surveys as part of the pre pl The impact on programme of the above has meant that the date noted al a period of 4-month extension. This extension has been fully assessed by acceptance of this programme. This programme impact has been commu- planned for mid-November 2022. 20/12/2022- This programme update has been fully reported to MWWFR adjustment. They have noted that they will look to revisit the UHB prior t given at that point. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation i and provided MWWFRS with an accurate account of the health boards cu thay are comfortable with the current position. Forecasted completion da 21/04/2023- communication from MWWFRS confirmed a formal extension pending request to extend.
BFS/KS/SJM/0011 4719- KS/890/04	Feb-20	2019/20	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: Withybush General Hospital. BFS/KS/SJM/00114719- KS/890/04	BFS/KS/SJM/0011471 9_004	High	 R1. Compartmentation – All Other Compartmented Areas. To undertake whatever works are necessary to ensure that any / all breaches in fire resisting compartmentation that affect the Wards, Theatres, Plant Rooms, Offices, Surgeries, Specialist Units and any other compartmented spaces within Withybush Hospital are addressed. Fire resisting structures are to continue to slab / upper floor level / roof level and pass through any false ceiling provided. 	Арг 22 Арг-25	Dec 24 Apr-25	Amber	This work is part of the phase 2 WGH Fire Enforcement Programme. 13/11/2020 - Letter dated 05/11/2020 from MWWFRS this notice is exten them on the 02 October 2020). Recommendation changed back from red 27/06/2022 - Phase 2 works remain on programme to be completed by Ap 12/08/22-unchanged - Phase 2 at WGH, WG has provided approval letter then to WG after the scrutiny process 11/11/2022 - unchanged, same as previous comment from 12/08/22. 20/12/2022 - A programme completion date will be developed as the abo Phase 2 project. Early indications are that due to the multiple Decant nee diligence work within the Business Case. As this becomes more developer can be made to the Phase 2 Enforcement dates. This matter has been dis programme should the nature of the works dictate that an extension to t 25/01/2023 - MWWFRS letter dated 20/01/23 confirms the presentation - and provided MWWFRS with an accurate account of the health boards cu thay are comfortable with the current position of April 2025 date. 26/04/2023 - the UHB has recently presented a reduced scope of works for the second week of May 2023. Subject to this being approved, there will

e completed in line with the agreed first phase works:

and all remaining work at St Caradogs, St Nons to be completed by end April 2022. y been accepted by the Project Manager (PM) and subsequently agreed by MWWFRS e to this Committee extensive further works have been identified including additional from forward look surveys as part of the pre planning process in place with the supply

ed above has now been extended to July 2023 (including contractors contingency float); I by the PM and appropriate due diligence checks have been made prior to the municated to the MWWFRS ahead of the next progress review with them currently

VFRS in a formal meeting held 08/12/2022, and they fully accept the need for this or to the current set end date of March 2023 so that an appropriate extension can be

ion that the Estates service delivered to them on 08/12/22 was extremely well laid out is current position and the agreed timeframes for completion. MWWFRS confirmed n date presented to, and agreed by, MWWFRS is July 2023. nsion of six months to 31/08/2023, these will be reviewed on a six monthly basis

ccepted UHB presentation of the extra complexity of the work involved which requires rms this.

v been accepted by the Project Manager (PM) and subsequently agreed by MWWFRS

s have been identified including additional Fire Doors and Fire Stopping requirements. e planning process in place with the supply chain and UHB teams.

d above has now been extended to July 2023 (including contractors contingency float); by the PM and appropriate due diligence checks have been made prior to the municated to the MWWFRS ahead of the next progress review with them currently

WFRS in a formal meeting held 08/12/2022, and they fully accept the need for this ior to the current set end date of March 2023 so that an appropriate extension can be

ion that the Estates service delivered to them on 08/12/22 was extremely well laid out is current position and the agreed timeframes for completion. MWWFRS confirmed in date presented to, and agreed by, MWWFRS is July 2023.

nsion of six months to 31/08/2023, these will be reviewed on a six monthly basis

ktended to 30 April 2025 as agreed in the programme for Phase 2 Works (presented to red to amber. v April 2025.

tter to proceed to BJC Phase 2, which is due to be submitted to UHB in early 2023 and

above BJC work is progressed to encompass the work content and complexity of this needs of Ward areas the programme may need to be extended as part of the due oped, MWWFRS will be fully involved in these discussions so that appropriate changes discussed with MWWFRS who appreciate that a revision may be required to this to this timeline becomes necessary.

ion that the Estates service delivered to them on 08/12/22 was extremely well laid out is current position and the agreed timeframes for completion. MWWFRS confirmed

ks for Phase 2, which the MWWFRS are considering, with a decision likely to be received will be a significant reduction in cost.

Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule, Amber- on schedule, Green- complete)	Progress update/Reason overdue
KS/890/08	Nov-20	2020/21	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: West Wales General Hospital, Glangwili, Dolgwili Road, Carmarthen, Carmarthenshire, SA31 2AF KS/890/08	KS/890/08_01	High	R1.Compartmentation – All Horizontal Corridor Escape Routes (Agreed Phase 1 Works). To undertake whatever works are necessary to ensure that any/all breaches in fire resisting compartmentation that affect the Horizontal Escape Routes within Glangwili General Hospital are addressed as agreed in the programme for Phase 1 Works (presented to us on the 02 October 2020). Fire resisting structures are to continue to slab/upper floor level/roof level and pass through any false ceiling provided.	Oct 20 F eb 21 Jul 22 F eb 23 Aug-23	Jul 22 Feb 23 Nov-23	Amber	13/11/2020- Letter dated 05/11/2020 from MWWFRS confirming enforc KS/890/09 dated 04/11/2020. KS/890/08 to be completed by 31/07/202. October 2020). Original completion dates shown on tracker taken from or 11/11/2022- a revised completion date of March 2023 had previously be who had formally extended the FEN dates. Following the latest update to this Committee extensive further works hi This work being identified from forward look surveys as part of the pre p 20/12/2022- A revised completion date of November 2023 has now beer This programme update has been fully reported to the MWWFRS in a for MWWFRS have noted that they will look to revisit the UHB prior to the c at that point. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards c thay are comfortable with the current position. Forecasted completion d 21/04/2023- communication from MWWFRS confirmed a formal extensi pending request to extend.
к5/890/09	Nov-20	2020/21	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: West Wales General Hospital, Glangwili, Dolgwili Road, Carmarthen, Carmarthenshire, SA31 2AF KS/890/09	KS/890/09_01	High	Item Number 1 - Compartmentation. (Agreed Phase 2 works). To undertake whatever works are necessary to ensure that any/all breaches in fire resisting compartmentation that affect the Wards, Theatres, Plant Rooms, Offices, Surgeries, Specialist Units and any other compartmented spaces within Glangwili General Hospital are addressed as agreed in the programme for Phase 2 works (presented to us on the 02 October 2020). Fire resisting structures are to continue to slab/upper floor level/roof level and pass through any false ceiling provided.	Οct-20 Feb-21 Aug-24	Aug-24	Amber	13/11/2020- Letter dated 05/11/2020 from MWWFRS confirming enforc KS/890/09 dated 04/11/2020. KS/890/09 to be completed by 31/08/202 October 2020). Original completion dates shown on tracker taken from or 11/11/2022- The expectation was that the BJC would be completed by O to capacity issues and the extent and complexity of the works, this date of from our PM and a review of any opportunities to improve on this positiv 2023. On the wider programming the impact on programme of Phase 1 to already been briefed on this and this will be set out in a formal meeting of delivery of these FEN works to busy clinical areas. The due diligence wor dates and programme delivery dates for this work. Discussions have been programme, should the nature of the works dictate that an additional pe 20/12/2022- It is important to note that Phase 2 works will be extremely diligence work required during the Business Case development will confi Regular discussions continue with MWWFRS, including a formal meeting dates should the nature of the works dictate that an additional period of 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards c thay are comfortable with the current position of April 2024. 26/04/2023- it is unlikely this works will be completed by August 2024 di the UHB position and will consider an official extension when the works
BFS/KS/AMD/001 6219			West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/001062 19_002		 Item 1- R2. The following door should be replaced with fire doors providing 30/60 minutes fire resistance (Dependant on the location of the door). Panels or partitions above or at the sides of the doors should provide a similar degree of fire resistance. Bryngofal – door 690, door from main corridor to command area and the cut door in the medical infirmary. Residential blocks (2 to 7) - a number of flat / bedroom doors within these residences (for this action refer to point 1 fire door survey). 		Oct 22 Mar 23 Mar-25	Amber	11/11/2022- A meeting is planned for mid November 2022 with MWWFF position will be fully explained as part of this briefing. It is expected that programme of prioritised works which will be undertaken over the next adjust the investment programme to rely on Discretionary programme in the majority of the work programme which will inevitably extend the tin MWWFRS/WG to formalise this position. It is anticipated that the EFAB p in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confirmed t and the specific content of work within each of the 4 Stages has been se approval but initial comments at the above meeting were very positive in this work. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position. Works to Residential blo Overarching delivey plan for the site is to March 2025.There is a further for the remaining works. Recommendation moved back from red to amb
BFS/KS/AMD/001 6219	0 Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/001062 19_003	High	Item 1- R3. All doors on rooms within Block 2 housing Combi boilers are to be fitted with an air transfer grille, it should only be fitted with one that is capable of sealing both by thermal initiation and by interface with smoke sensors either directly or via a fire alarm panel(Dependant on the type of ventilation required for the appliance). The air transfer grill should conform to a relevant standard e.g.BS 8214:2016. If these appliances do not require this type of ventilation.	Oct-22 Mar-25	Oct-22 Mar-23 Mar-25	Amber	11/11/2022- A meeting is planned for mid-November 2022 with MWWF position will be fully explained as part of this briefing. It is expected that programme of prioritised works which will be undertaken over the next adjust the investment programme to rely on Discretionary programme in the majority of the work programme which will inevitably extend the tim MWWFRS/WG to formalise this position. It is anticipated that the EFAB p in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confirmed t and the specific content of work within each of the 4 Stages has been set approval but initial comments at the above meeting were very positive in this work. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards c thay are comfortable with the current position. Works to Residential blo Overarching delivey plan for the site is to March 2025. There is a further for the remaining works. Recommendation moved back from red to amb

forcement notice KS/890/06 is withdrawn and replaced by KS/890/07, KS/890/08, 2022 as agreed in the programme for Advanced Works (presented to them on the 02 m original KS/890/06 enforcement notice.

v been accepted by the Project Manager (PM) and subsequently agreed by MWWFRS

s have been identified including additional Fire Doors and Fire Stopping requirements. e planning process in place with the supply chain and UHB teams. een accepted by the Project Management Team following all their due diligence check:

formal meeting held on 08/12/2022 and they fully accept the need for this adjustment. e currently set end date (February 2023), so that an appropriate extension can be given

ion that the Estates service delivered to them on 08/12/22 was extremely well laid out is current position and the agreed timeframes for completion. MWWFRS confirmed in date presented to, and agreed by, MWWFRS is November 2023.

nsion of six months to 31/08/2023, these will be reviewed on a six monthly basis

orcement notice KS/890/06 is withdrawn and replaced by KS/890/07, KS/890/08, 024 as agreed in the programme for Advanced Works (presented to them on the 02 m original KS/890/06 enforcement notice.

wy Quarter 4 of the 2022/23 FY. The UHB has recently been informed by the SCP that due the will now be circa August 2023. The UHB have asked for further clarification on this sition. This has the potential to delay the start of works on Phase 2 until circa November 2 would in any case align well with the revised programme of Phase 2. MWWFRS have ng with them mid-November 2022. Phase 2 works will be extremely complex given the work required during the Business Case development will confirm both commencement been undertaken with MWWFRS who appreciate that a revision may be required to the l period of time becomes necessary.

ely complex given the delivery of these FEN works to busy clinical areas. The due onfirm both commencement dates and programme delivery dates for this work. ing held on 08/12/2022, who appreciate that a revision may be required to the FEN I of time becomes necessary.

ion that the Estates service delivered to them on 08/12/22 was extremely well laid out is current position and the agreed timeframes for completion. MWWFRS confirmed

4 due to the scope reduction and complexity of the works. MWWFRS are fully briefed on rks programme is presented to them. The business case is currently being drafted.

WFRS to consider all investment programmes across the UHB Estate and the PPH hat the MWWFRS will be supportive of this approach given that we already have a ext 6 months. Should the EFAB bids be unsuccessful then the HDdUHB would need to he investment in the first instance. This will then require a Business Case approach for timelines. If this was the case, there would need to be follow up discussions with AB position will be clear by the end of December 2022 so the UHB can plan accordingly

ed the positive progress on the above plan. A 4 Stage programme has been developed a set out for consideration for MWWFRS. This plan is currently with MWWFRS for formal ve in terms of the pro-active and structured manner in which the UHB is approaching

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WFRS to consider all investment programmes across the UHB Estate and the PPH hat the MWWFRS will be supportive of this approach given that we already have a ext 6 months. Should the EFAB bids be unsuccessful then the HDdUHB would need to be investment in the first instance. This will then require a Business Case approach for timelines. If this was the case, there would need to be follow up discussions with AB position will be clear by the end of December 2022 so the UHB can plan accordingly

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BFS/KS/AMD/0010 6219	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/001062 19_005	High	Item 1- R5. Fire resisting doors need to be fitted with: • A self-closing device including fire alarm activated Self closers. • Intumescent strips and smoke seals. • Three brass/steel hinges. Fire doors should conform to a relevant standard e.g. WHTM 05-02 Appendix C: Doors and door-sets Appendix B (including Appendix C Table B1) of Approved Document B Volume 2 Buildings other than dwelling houses. BS 7273-4:2015 Actuation of release mechanisms for doors BS 8214:2016 - timber-based fire door assemblies – Code of Practice. Compliance with this or an equivalent standard will normally satisfy the requirement.	Oct 22 Mar-25	Oct-22 Mar-23 Mar-25	Amber	11/11/2022- A meeting is planned for mid-November 2022 with MWWFI position will be fully explained as part of this briefing. It is expected that i programme of prioritised works which will be undertaken over the next of adjust the investment programme to rely on Discretionary programme in the majority of the work programme which will inevitably extend the tim MWWFRS/WG to formalise this position. It is anticipated that the EFAB p in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confirmed t and the specific content of work within each of the 4 Stages has been set approval but initial comments at the above meeting were very positive in this work. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position. All remaining doors under 2025.Recommendation moved back from red to amber.
BFS/KS/AMD/0010 6219	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/001062 19_007	High	Item 3- R7. The existing fire warning system must be extended as necessary to conform fully to BS 5839-1:2017 Category L1 within the following areas. •Bryngofal red zone storage area main building previously a bathroom. • The demountable structures. • And any other room converted into a risk room within the Prince Phillip site. All work involving the fire alarm should be carried out in accordance with BS 5839-1 current edition, HTM 0503 B Section 4 and paragraph 4.6.	Oct 22 Mar-25	Oct 22 Mar-23 Mar-25	Amber	11/11/2022- A meeting is planned for mid-November 2022 with MWWFI position will be fully explained as part of this briefing. It is expected that programme of prioritised works which will be undertaken over the next i adjust the investment programme to rely on Discretionary programme ir the majority of the work programme which will inevitably extend the tim MWWFRS/WG to formalise this position. It is anticipated that the EFAB p in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confirmed t and the specific content of work within each of the 4 Stages has been set approval but initial comments at the above meeting were very positive in this work. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards c thay are comfortable with the current position. Overarching delivey plan
BFS/KS/AMD/0010 6219	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/001062 19_008	High	Item 4- R8. All door release devices (Including floor pneumatic release devices) should work in accordance with the relevant British standard: BS 7273-4:2015 actuation of release mechanisms for doors and comply with WHTM 05-02 Appendix C: Door Closers and Section 6 General provisions of Approved Document B Volume 2 Buildings other than dwelling houses. • Diabetic unit • This action should be carried out over the whole site and as part of the fire door survey mentioned in item 1 Compliance with this or an equivalent standard will normally satisfy the requirement.	Oct-22 Mar-24	Oct.22 Mar-24	Amber	11/11/2022- A meeting is planned for mid-November 2022 with MWWF position will be fully explained as part of this briefing. It is expected that programme of prioritised works which will be undertaken over the next adjust the investment programme to rely on Discretionary programme ir the majority of the work programme which will inevitably extend the tim MWWFRS/WG to formalise this position. It is anticipated that the EFAB p in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confirmed t and the specific content of work within each of the 4 Stages has been set approval but initial comments at the above meeting were very positive in this work. This recommendation will be picked up in phase 1 as part of the 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards c thay are comfortable with the current position. Will be addressed in Pha
BFS/KS/AMD/0010 6219	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/001062 19_013	High	Item 9- R13. The emergency lighting must be extended to cover the external exit routes and exit doors of the TY Bryn Template The system shall be installed, maintained and tested in accordance with a relevant standard. For a relevant standard please refer to BS5266-1:2016 Emergency lighting code of practice for emergency lighting of premises. Compliance with this or an equivalent standard will normally satisfy the requirement.	Oct 22 Mar-25	Oct 22 Aug 23 Mar-25	Amber	11/11/2022- A meeting is planned for mid-November 2022 with MWWFF position will be fully explained as part of this briefing. It is expected that programme of prioritised works which will be undertaken over the next i adjust the investment programme to rely on Discretionary programme in the majority of the work programme which will inevitably extend the tim MWWFRS/WG to formalise this position. It is anticipated that the EFAB p in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confirmed t and the specific content of work within each of the 4 Stages has been set approval but initial comments at the above meeting were very positive in this work. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position.Overarching delivey plan

WFRS to consider all investment programmes across the UHB Estate and the PPH at the MWWFRS will be supportive of this approach given that we already have a xt 6 months. Should the EFAB bids be unsuccessful then the HDdUHB would need to e investment in the first instance. This will then require a Business Case approach for timelines. If this was the case, there would need to be follow up discussions with B position will be clear by the end of December 2022 so the UHB can plan accordingly

d the positive progress on the above plan. A 4 Stage programme has been developed set out for consideration for MWWFRS. This plan is currently with MWWFRS for formal e in terms of the pro-active and structured manner in which the UHB is approaching

on that the Estates service delivered to them on 08/12/22 was extremely well laid out s current position and the agreed timeframes for completion. MWWFRS confirmed ider future phasing Overarching delivey plan for the site is to March

WFRS to consider all investment programmes across the UHB Estate and the PPH at the MWWFRS will be supportive of this approach given that we already have a xt 6 months. Should the EFAB bids be unsuccessful then the HDdUHB would need to e investment in the first instance. This will then require a Business Case approach for timelines. If this was the case, there would need to be follow up discussions with B position will be clear by the end of December 2022 so the UHB can plan accordingly

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WFRS to consider all investment programmes across the UHB Estate and the PPH at the MWWFRS will be supportive of this approach given that we already have a xt 6 months. Should the EFAB bids be unsuccessful then the HDdUHB would need to e investment in the first instance. This will then require a Business Case approach for timelines. If this was the case, there would need to be follow up discussions with B position will be clear by the end of December 2022 so the UHB can plan accordingly

It the positive progress on the above plan. A 4 Stage programme has been developed set out for consideration for MWWFRS. This plan is currently with MWWFRS for formal e in terms of the pro-active and structured manner in which the UHB is approaching f the EFAB funding for 2023/24.

ion that the Estates service delivered to them on 08/12/22 was extremely well laid out s current position and the agreed timeframes for completion. MWWFRS confirmed Phase 1. Completion date March 2024.

WFRS to consider all investment programmes across the UHB Estate and the PPH at the MWWFRS will be supportive of this approach given that we already have a xt 6 months. Should the EFAB bids be unsuccessful then the HDdUHB would need to e investment in the first instance. This will then require a Business Case approach for timelines. If this was the case, there would need to be follow up discussions with B position will be clear by the end of December 2022 so the UHB can plan accordingly

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12/27

Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule, Amber- on schedule, Green- complete)	Progress update/Reason overdue
BFS/KS/AMD/0011 5940	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: HYWEL DDA, TENBY COTTAGE HOSPITAL, GAS LANE, TENBY, SA70 8AG BFS/KS/AMD/00115940	BFS/KS/AMD/001159 40_001	High	 R1. A fire door survey is required at the Tenby cottage hospital site due to a number of defects found at the time of inspection. The findings of this survey must be completed within the mentioned timescale. Fire resisting doors need to be fitted with: A self-closing devices including fire alarm activated Self closers. Intumescent strips and smoke seals. Three brass/steel hinges. Fire doors should conform to a relevant standard e.g. WHTM 05-02 Appendix C: Doors and door-sets Appendix B (including Appendix C Table B1) of Approved Document B Volume 2 Buildings other than dwelling houses. BS 7273-4:2015 Actuation of release mechanisms for doors BS 8214:2016 - timber-based fire door assemblies – Code of practice Compliance with this or an equivalent standard will normally satisfy the requirement. 	Oct 22 Mar 23 Mar-24	Oct 22 Mar-23 Mar-24	Amber	08/07/2022- UHB working with MWWFRS to agree the standards appro 07/09/2022- Head of Estates Risk & Compliance to check with MWWFRS 02/11/2022- The required standard has now been confirmed by MWWF been set out in discussions with the MWWFRS. 20/12/2022- on track for completion by March 2023. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards c thay are comfortable with the current position of completion by March 2 25/04/2023- EFAB funding now secured to address this. Date of complet December 2022, following the meeting MWWFRS wrote to the UHB on 2
BFS/KS/AMD/0011 5940	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: HYWEL DDA, TENBY COTTAGE HOSPITAL, GAS LANE, TENBY, SA70 8AG BFS/KS/AMD/00115940	BFS/KS/AMD/001159 40_002	High	 R2. During the inspection of the site breaches in compartmentation were identified. The breaches in compartmentation would not support the existing evacuation strategy (please see paragraph above). In the event of fire, breaches in compartmentation, will allow fire and smoke to spread unchecked throughout the building. This would have an impact on the means of escape and render the evacuation strategy of the building ineffective. All breaches in accordance with building regulations. The fire resistance should conform to a relevant standard e.g. WHTM 05-02 Chapter 5 and paragraph 5.12. Appendix A (including Table A1, A2) of Approved Document B Volume 2 Buildings Other Than Dwelling Houses. Compliance with this or an equivalent standard will normally satisfy the requirement. 	Oct 22 Mar 23 Mar-24	Oct-22 Mar-23 Mar-24	Amber	08/07/2022- UHB working with MWWFRS to agree the standards appro 07/09/2022- Head of Estates Risk & Compliance to check with MWWFRS 02/11/2022- The required standard has now been confirmed by MWWF been set out in discussions with the MWWFRS. 20/12/2022- on track for completion by March 2023. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position of completion by March 2 25/04/2023- EFAB funding now secured to address this. Date of complet December 2022, following the meeting MWWFRS wrote to the UHB on 2
BFS/KS/AMD/0011 5940	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: HYWEL DDA, TENBY COTTAGE HOSPITAL, GAS LANE, TENBY, SA70 8AG BFS/KS/AMD/00115940	BFS/KS/AMD/001159 40_003	High	 R3. Sluice room R24 is to be upgraded to a fire hazard room. Any other room which has been changed to a fire hazard room within the premises. The fire separation between any fire hazard room and the means of escape of the building should provide a minimum 30 minutes' standard of fire resistance in accordance with WHTM 05-02 Table 6, 5.40-5.42, the fire separation should also conform to a relevant standard e.g. Appendix A (including Table A1, A2) of Approved Document B Volume 2 Buildings other than dwelling houses. Compliance with this or an equivalent standard will normally satisfy the requirement. 	Oct-22 Mar-24	Oct 22 Mar-23 Mar-24	Amber	08/07/2022- UHB working with MWWFRS to agree the standards appro 07/09/2022- Head of Estates Risk & Compliance to check with MWWFRS 02/11/2022- The required standard has now been confirmed by MWWF been set out in discussions with the MWWFRS. 20/12/2022- on track for completion by March 2023. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards c thay are comfortable with the current position. Revised date of March 20 amber.
BFS/SM/AMD/001 07788	May-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/00107788	BFS/SM/AMD/001077 88_001	High	R1. All doors to patient bedrooms are to be fitted with appropriately designed free-swing self-closing devices, as stated in (Table 6 WHTM 05-02).	Nov-22 Mar-24	Nov-22 Oct-23 Mar-24	Amber	27/06/2022- Funding and timescale to be agreed following the findings of 07/09/2022- Head of Estates Risk & Compliance to send revised action prevised action
BFS/SM/AMD/001 07788	May-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/00107788	BFS/SM/AMD/001077 88_003	High	 R3. The following doors should be replaced with fire doors providing 30/60 minutes fire resistance (Dependant on the location of the door). Panels or partitions above or at the sides of the doors should provide a similar degree of fire resistance. Medication room (LSU) – this is a stable door and is not providing suitable fire resistance. 	Nov 22 Mar-24	Nov-22 Oct-23 Mar-24	Amber	27/06/2022- Survey by AFT been undertaken costs are due back next we 07/09/2022- Head of Estates Risk & Compliance to send revised action p 20/12/2022- seeking clarification for door work required and prioritise w formal meeting on 08/12/2022. Awaiting formal revised date from MWV investment being received in April 2023. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards c thay are comfortable with the current position and the revised date of N
BFS/SM/AMD/001 07788	May-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/00107788	BFS/SM/AMD/001077 88_004	High	R4. Throughout the site various fire doors were found to be missing smoke seals. The seals should be attended to as part of the fire door survey mentioned above.	Nov 22 Mar-24	Nov 22 Oct 23 Mar-24	Amber	27/06/2022- Survey by AFT been undertaken costs are due back next we 07/09/2022- Head of Estates Risk & Compliance to send revised action p 20/12/2022- seeking clarification for door work required and prioritise w formal meeting on 08/12/2022. Awaiting formal revised date from MWV investment being received in April 2023. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position and the revised date of N

propriate for this site and to confirm actions necessary, if any.
WFRS and funding is in place to complete these works by end of March 2023. This has
ion that the Estates service delivered to them on 08/12/22 was extremely well laid out Is current position and the agreed timeframes for completion. MWWFRS confirmed ch 2023. Recommendation moved back from red to amber. Poletion is March 2024. This date was included in the presentation to MWWFRS in on 20/01/2023 to confirm they agreed with the timeframes presented.
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gs of the AFT survey.
n plan to Assurance and Risk team. 106 repairable doors. Site review with NWSSP-SES to agree prioritisation of door
e work. MWWFRS aware of this work and the money required, as discussed at the WWFRS. Estates service has provided revised date of October 2023 based on
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BFS/SM/AMD/001 07788	. May-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/00107788	BFS/SM/AMD/001077 88_005	High	R5. The cross-corridor doors in "Picu" was missing a self-closing device. A self-closing device is required on this door to ensure it closes fully into its rebate.	Nov-22 Mar-24	Nov-22 Oct-23 Mar-24	Amber	27/06/2022- Survey by AFT been undertaken costs are due back next we 07/09/2022- Head of Estates Risk & Compliance to send revised action p 02/11/2022- Assurance and Risk team are awaiting confirmation that all 15/12/2022- Head of Estates Risk & Compliance to confirm with GGH col 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards c thay are comfortable with the current position and the revised date of N
BFS/SM/AMD/001 07788	May-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/00107788	BFS/SM/AMD/001077 88_008	High	 8. A hold open device (or alternative solution) is required on the "Step Down" kitchen door. Fire resisting doors need to be fitted with: A self-closing device including fire alarm activated Self closers. Intumescent strips and smoke seals. Three brass/steel hinges. Fire doors should conform to a relevant standard e.g. WHTM 05-02 Appendix C: Doors and door-sets Appendix B (including Appendix C Table B1) of Approved Document B Volume 2 Buildings other than dwelling houses. BS 7273-4:2015 Actuation of release mechanisms for doors BS 8214:2016 - timber-based fire door assemblies – Code of Practice. Compliance with this or an equivalent standard will normally satisfy the requirement. 	Nov 22 Mar-24	Nov 22 Oct 23 Mar-24	Amber	27/06/2022- Survey by AFT been undertaken costs are due back next we 07/09/2022- Head of Estates Risk & Compliance to send revised action p 20/12/2022- seeking clarification for door work required and prioritise w formal meeting on 08/12/2022. Awaiting formal revised date from MWV investment being received in April 2023. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position and the revised date of N
Admin - General/0032950(Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Blue Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329500_00 1	High	R1. A number of fire resisting doors were found to have defects. All fire resisting doors throughout the premises are to be examined and repaired or replaced to ensure they are effectively self-closing onto their rebates. Gaps between door edge and frame are to be no more than 3 mm	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2027 survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admi Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position with the timescale to Oct 26/04/2023- The Programme Business Case has been submitted to WG,
Admin - General/0032950(Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Blue Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329500_00 2	High)	R2. Self-closing devices on all fire resisting doors are to be checked and if required be adjusted, repaired, or replaced so the doors close completely into their rebates.	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2027 survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admi Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position with the timescale to Oct 26/04/2023- The Programme Business Case has been submitted to WG,
Admin - General/00329500	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Blue Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329500_00 3	High	R3. All self-closing devices are to be regularly inspected and maintained.	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2027 survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admi Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position with the timescale to Oct 26/04/2023- The Programme Business Case has been submitted to WG,
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Admin - General/00329500		2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Blue Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329500_00 5	High	R5. All fire door vents should be designed in accordance with the required British Standard.	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2027 survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admi Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position with the timescale to Oct 26/04/2023- The Programme Business Case has been submitted to WG,
Admin - General/00329500		2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Blue Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329500_00 6	High	R6. An assessment should be undertaken to ensure that there is suitable 30-minute fire resistance sub compartments and 60 minutes fire resistant compartmentation throughout blue block. For example: - •Top of the staircase from Angharad Ward All openings in the walls, floors, partitions, and ceilings throughout the premises provided for the passage of service piping ducts or cables, are to be sealed or brushed to a 30-minute standard of fire resistance.	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2027 survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admin Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position with the timescale to Oct 26/04/2023- The Programme Business Case has been submitted to WG,

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27. Phase 1 will be completed in advance of this (letters states January 2025)- further
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Admin - General/00329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329501_00 1	High	R1.A number of fire resisting doors were found to have defects. All fire resisting doors throughout the premises are to be examined and repaired or replaced to ensure they are effectively self-closing onto their rebates. Gaps between door edge and frame are to be no more than 3 mm	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2027 survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admi Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position with the timescale to Oct 26/04/2023- The Programme Business Case has been submitted to WG,
Admin - General/00329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329501_00 2	High	R2. Self-closing devices on all fire resisting doors are to be checked and if required, adjusted, repaired, or replaced so the doors close completely into their rebates.	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 202 survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admi Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position with the timescale to Oc 26/04/2023- The Programme Business Case has been submitted to WG,
Admin - General/00329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329501_00 3	High	R3. All self-closing devices are to be regularly inspected and maintained.	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2023 survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admi Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position with the timescale to Oc 26/04/2023- The Programme Business Case has been submitted to WG,
Admin - General/00329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329501_00 4	High	R4.All fire doors should have intumescent strips and smoke seals	Oct-27	Oct-27	Amber	08/07/2022 - MWWFRS letter states phase 2 completion is October 202 survey to be undertaken at BGH site due to its complex environment. 15/11/2022 - MWWFRS letter dated 31/08/2022 (same reference- Admi Phase 2 October 2027. 25/01/2023 - MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position with the timescale to Oc 26/04/2023 - The Programme Business Case has been submitted to WG,
Admin - General/00329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329501_00 5	High	R5. All fire door vents should be designed in accordance with the required British Standard.	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 202' survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admi Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position with the timescale to Oc 26/04/2023- The Programme Business Case has been submitted to WG,
Admin - General/00329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 IER	Admin - General/00329501_00 6	High	R6. An assessment should be undertaken to ensure there is suitable 30-minute fire resistance sub compartments and 60 minutes fire resistant compartmentation throughout blue block. For example: - •IDop of the staircase from Angharad Ward All openings in the walls, floors, partitions, and ceilings throughout the premises provided for the passage of service piping ducts or cables, are to be sealed or brushed to a 30-minute standard of fire resistance.	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 202 survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admi Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position with the timescale to Oc 26/04/2023- The Programme Business Case has been submitted to WG,
Admin - General/00329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329501_00 8	High	R8. An assessment should be undertaken to ensure all Internal and external escape routes are illuminated by emergency lighting that with operate if the local lighting circuit fail. The system should conform to BS 5266.	Dec-22	Dec-25	Amber	15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admi 10/01/2023- Head of Estates Risk & Compliance to check if this has been 13/01/2023- A scheme has been completed to address all vertical escap considered as part of the main firecode scheme as agreed with MWWFF 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position with the timescale to De 26/04/2023- The Programme Business Case has been submitted to WG,
Admin - General/00329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Purple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329498_00 1	High	R1. A number of fire resisting doors were found to have defects. All fire resisting doors throughout the premises are to be examined and repaired or replaced to ensure they are effectively self-closing onto their rebates. Gaps between door edge and frame are to be no more than 3 mm	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2022 survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admi Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position of October 2027. 26/04/2023- The Programme Business Case has been submitted to WG,
Admin - General/00329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Purple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329498_00 2	High	R2. Self-closing devices on all fire resisting doors are to be checked and if required be adjusted, repaired, or replaced so the doors close completely into their rebates.	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2023 survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admi Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position of October 2027. 26/04/2023- The Programme Business Case has been submitted to WG,

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cape routes with new emergency lighting, all remaining areas of the block will be VFRS. Revised date of December 2025 provided to encompass all works at the BGH site. ion that the Estates service delivered to them on 08/12/22 was extremely well laid out ds current position and the agreed timeframes for completion. MWWFRS confirmed December 2025.

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Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Recommendation Reference	Priority Level		Original Completion Date	Revised Completion Date	Status (Red- behind schedule, Amber- on schedule, Green- complete)	Progress update/Reason overdue
Admin - General/00329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Purple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329498_00 3	High	R3. All self-closing devices are to be regularly inspected and maintained.	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2027 survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admi Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position of October 2027. 26/04/2023- The Programme Business Case has been submitted to WG,
Admin - General/00329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Purple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329498_00 4	High	R4. All fire doors should have intumescent strips and smoke seals	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2027 survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admi Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position of October 2027. 26/04/2023- The Programme Business Case has been submitted to WG,
Admin - General/00329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Purple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329498_00 5	High	R5. All fire door vents should be designed in accordance with the required British Standard.	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2027 survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admin Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position of October 2027. 26/04/2023- The Programme Business Case has been submitted to WG,
Admin - General/00329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Purple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329498_00 6	High	R6. An assessment should be undertaken to ensure that there is suitable 30-minute fire resistance sub compartments and 60 minutes fire resistant compartmentation throughout the block. All openings in the walls, floors, partitions, and ceilings throughout the premises provided for the passage of service piping ducts or cables, are to be sealed or brushed to a 30- minute standard of fire resistance.	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2027 survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admin Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position of October 2027. 26/04/2023- The Programme Business Case has been submitted to WG,
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Admin - General/00329499	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Red Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329499_00 6	High	 R6. An assessment should be undertaken to ensure that there is suitable 30-minute fire resistance sub compartments and 60 minutes fire resistant compartmentation throughout Blue Block. For example: - • Top of the staircase from Angharad Ward All openings in the walls, floors, partitions, and ceilings throughout the premises provided for the passage of service piping ducts or cables, are to be sealed or brushed to a 30-minute standard of fire resistance. 	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2027 survey to be undertaken at BGH site due to its complex environment. 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Admin Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position of October 2027. 26/04/2023- The Programme Business Case has been submitted to WG,
BFS/KS/JEL/00115 068	Sep-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: SOUTH PEMBS HOSPITAL, FORT ROAD, PEMBROKE DOCK, SA72 6FY	BFS/KS/JEL/00115068 _001	High	 R1. It was noted whilst carrying out the inspection that there were a number of faults found with a high number of the fire doors at this premises. These doors should be repaired or replaced. Any panels or partitions above or at the sides of the doors should provide a similar degree of fire resistance as the door installed. All doors mentioned within the fire door survey carried out in September 2021. Fire doors should conform to a relevant standard e.g. Appendix C and Table 6 WHTM 0502, Appendix B (including Appendix C Table B1) of Approved Document B Volume 2 Buildings other than dwelling houses. 	Mar-23 Mar-25	Mər-23 Mar-25	Amber	25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position to be implemented by M 25/04/2023- EFAB funding now secured to address these defects – sche presentation to MWWFRS in December 2022, following the meeting MV presented.
BFS/KS/JEL/00115 068	Sep-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: SOUTH PEMBS HOSPITAL, FORT ROAD, PEMBROKE DOCK, SA72 6FY	BFS/KS/JEL/00115068 _002	High	 R2. During the inspection breaches in compartmentation were identified throughout the premises. The breaches in compartmentation would not support the existing evacuation strategy. In the event of fire, breaches in compartmentation, will allow fire and smoke to spread unchecked throughout the building. This would have an impact on the means of escape and render the evacuation strategy of the building ineffective. All breaches in compartmentation should be fire stopped to provide the appropriate fire resistance in accordance with building regulations. All compartmentation breaches identified within the compartmentation survey carried out in November 2021 & February 2022. Smoke hoods within the attic area need to be installed correctly. Broken and missing ceiling tiles need to be replaced. Confirm the fire resistance of the various roller shutters which open onto the means of escape within the premises. 	Mar-23 Mar-25	Mar-23 Mar-25	Amber	25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position to be implemented by M 25/04/2023- EFAB funding now secured to address these defects – sche presentation to MWWFRS in December 2022, following the meeting MV presented.
BFS/KS/JEL/00115 068	Sep-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: SOUTH PEMBS HOSPITAL, FORT ROAD, PEMBROKE DOCK, SA72 6FY	BFS/KS/JEL/00115068 _003	High	 R3. It was noted that the stairs within G124 were not protected as per paragraph 3.48 WHTM 05-02 - Stairways should always be remote from each other so that in the event of fire at least one is available for evacuation purposes. Install a Fire Door set to comply with the above statement. Within the old Cleddau ward a set of doors are to be installed either within the partition or within the external glazed wall. This is due to the extended travel distance from the ward to the closest exit. Final exit door to courtyard GF1 area needs replacing. Doors between G14 & G22 marked as D57 needs replacing. 	Mar 23 Mar-25	Mar-23 Mar-25	Amber	25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position to be implemented by M 25/04/2023- EFAB funding now secured to address these defects – sche presentation to MWWFRS in December 2022, following the meeting MV presented.
BFS/KS/JEL/00115 068	Sep-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: SOUTH PEMBS HOSPITAL, FORT ROAD, PEMBROKE DOCK, SA72 6FY	BFS/KS/JEL/00115068 _005	High	 R5. Extend the existing fire detection and warning system by providing automatic smoke/heat detection in the following areas: X-ray Dept . Remote indicator lights must be provided for detectors in concealed spaces e.g., roof voids, heads of lift shafts. It was noted that these devices were missing in various locations around the premises. Confirm the roller shutters in various locations of the premises automatically close on the activation of the fire alarm system and or comply with the cause and effect strategy. Confirm that there is a suitable cause and effect strategy for the premises. 	Mar 23 Mar-25	Mar-23 Mar-25	Amber	25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position to be implemented by M 25/04/2023- EFAB funding now secured to address this. Date of complet December 2022, following the meeting MWWFRS wrote to the UHB on 2
BFS/KS/JEL/00115 068	Sep-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: SOUTH PEMBS HOSPITAL, FORT ROAD, PEMBROKE DOCK, SA72 6FY	BFS/KS/JEL/00115068 _006		 R6. Emergency escape routes must be indicated by adequate escape signage. Signage should be provided at; All external escape routes Signs should be designed and installed in accordance BS 5499-4:20 	Mar-23 Mar-25	Mar-23 Mar-25	Amber	25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position to be implemented by M 25/04/2023- EFAB funding now secured to address this. Date of comple December 2022, following the meeting MWWFRS wrote to the UHB on
BFS/KS/JEL/00115 068	Sep-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: SOUTH PEMBS HOSPITAL, FORT ROAD, PEMBROKE DOCK, SA72 6FY	BFS/KS/JEL/00115068 _007	High	 R7. It was noted in the inspection that the emergency lighting installed may not be to the standard of BS5266–1:2016 Provide an emergency lighting system (which is to be independent of all other systems), to illuminate: In all Internal and External escape routes. On completion of the emergency lighting system, the commission certificate is to be completed by a competent person and a copy made available to the Fire and Rescue Authority. 	Mar 23 Mar-25	Mar-23 Mar-25	Amber	25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position to be implemented by M 25/04/2023- EFAB funding now secured to address this. Date of complet December 2022, following the meeting MWWFRS wrote to the UHB on 2
BFS/KS/JEL/00115 068	Sep-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: SOUTH PEMBS HOSPITAL, FORT ROAD, PEMBROKE DOCK, SA72 6FY	BFS/KS/JEL/00115068 _008	High	R8. Locate the solar PV isolator in a position away from the roof area or add a device that would allow isolation away from an area of risk.	Mar-23 Mar-25	Mar-23 Mar-25	Amber	25/01/2023- MWWFRS letter dated 20/01/23 confirms the presentation and provided MWWFRS with an accurate account of the health boards of thay are comfortable with the current position to be implemented by M 25/04/2023- EFAB funding now secured to address this. Date of complet December 2022, following the meeting MWWFRS wrote to the UHB on 2

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Number	report		Report Issued By	Report Title		Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule, Amber- on schedule, Green- complete)	Progress update/Reason overdue
NE/BFS/00173907	Apr-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 26, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00173907	NE/BFS/00173907_00 2	High	 R2. During the inspection breaches in compartmentation were identified: •Electrical Cupboard G37a The breaches in compartmentation would not support the existing evacuation strategy. In the event of fire, breaches in compartmentation, will allow fire and smoke to spread unchecked throughout the building. This would have an impact on the means of escape and render the evacuation strategy of the building ineffective. All breaches in compartmentation should be fire stopped to provide the appropriate fire resistance in accordance with building regulations. The fire resistance should conform to a relevant standard e.g. Appendix A (including Table A1, A2) of Approved Document B Volume 2 Buildings Other Than Dwelling Houses. Compliance with this or an equivalent standard will normally satisfy the requirement. 	Mar-24	Mar-24	Amber	
NE/BFS/00173907	Apr-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 26, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00173907	NE/BFS/00173907_00 3	High	R3. Doors leading to Wards R45 & R53 and Cross corridor doors separating Nurse space from circulation area to be inspected as part of a PPM survey. The fire separation should conform to a relevant standard e.g. HTMW – 5 - 2 Compliance with this or an equivalent standard will normally satisfy the requirement.	Sep-23	Sep-23	Amber	
NE/BFS/00173907	Apr-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 26, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00173907	NE/BFS/00173907_00 4	High	R4. The following fire resisting doors were found to be damaged/defective. These doors must be repaired/replaced. • Ed 1164a & 1164b • Ed 1170a & 1170b Fire doors should conform to a relevant standard e.g. BS 8214:2016 - Timber-based fire door assemblies – Code of Practice Compliance with this or an equivalent standard will normally satisfy the requirement	Sep-23	Sep-23	Amber	
NE/BFS/00173908	Apr-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 27, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00173908	NE/BFS/00173908_00 2	High	 R2. The opening in the ceiling located in Switchgear Room should be in filled to achieve the same fire resistance as the rest of the floor/ceiling. The fire separation should conform to a relevant standard e.g. WHTM – 05-02 Compliance with this or an equivalent standard will normally satisfy the requirement. 	Mar-24	Mar-24	Amber	
NE/BFS/00173908			Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 27, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00173908	NE/BFS/00173908_00 3		R3. Provide an emergency lighting system (which is to be independent of all other systems), to illuminate •External escape route On completion of the emergency lighting system, the commission certificate is to be completed by a competent person and a copy made available to the Fire and Rescue Authority. This system is to be designed and installed in accordance BS5266-1:2016 Compliance with this or an equivalent standard will normally satisfy the requirement.	Aug-23	Aug-23	Amber	
NE/BFS/00173908	Apr-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 27, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00173908	NE/BFS/00173908_00 4	High	 R4. The doorstops fitted to the frames of the following fire resisting doors were found to be missing and require installing Door id 0042. The door stops and frames should conform to a relevant standard e.g. BS 8214:2016 - Timber-based fire door assemblies – Code of Practice Compliance with this or an equivalent standard will normally satisfy the requirement 	Sep-23	Sep-23	Amber	

Initial Initial <thinitial< th=""> <thinitial< th=""> <thinitial< th=""></thinitial<></thinitial<></thinitial<>	Reference	Date of	Financial	Report	Report Title	Recommendation	Priority	Recommendation	Original	Revised	Status	Progress update/Reason overdue
Ref. 2012 Ref.									Date	Date	behind schedule, Amber- on schedule, Green- complete)	
No. 10. No. 1	NE/BFS/00173908	Apr-23	2023/24			NE/BFS/00173908_00	High	R5. The gap between the door frame and the wall located	Sep-23	Sep-23	Amber	
Image: Section of the section of t				Fire and	Prince Philip Hospital,			•Door id 0053				
No. NUMPFORTION No.												
NUMBER NUMBER<								The fire separation should conform to a relevant standard e.g., WHTM – 05-02				
NUM Number Number <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Compliance with this or an equivalent standard will normally satisfy the requirement.</td> <td></td> <td></td> <td></td> <td></td>								Compliance with this or an equivalent standard will normally satisfy the requirement.				
Number Note: Note: Filter Strate Note: Filter Strate Number Note: Strate Strate Number Note: Strate	NE/BFS/00173908	Apr-23	2023/24			NE/BFS/00173908_00	High		Jul-23		Red	
Image: Note: Note: Note: Note: No				Fire and	Prince Philip Hospital,	-						
No. 1 No. 1 No. 1 Marce Manuscription 20, 20, 20, 20, 20, 20, 20, 20, 20, 20,												
Image: Instant Statistics Image:	NE/BFS/00173908	Apr-23	2023/24			NE/BFS/00173908_00	High		Sep-23	Sep-23	Amber	
Image: Note: Note: Note: Note: Note: Note: Note: Note: MIREY0017900 Apr.25 Mires Mire				Fire and	Prince Philip Hospital,	,						
Write Value Water Value Writer Timple 77, Writer Filty for Units of Filty Units Value B door must be repared (replaced. H								Oxygen Cylinders should be stored in accordance with HTM 02 - 01				
Image: Proceeding for controls Proceeding for cont	NE/BFS/00173908	Apr-23	2023/24			NE/BFS/00173908_00	High		Sep-23	Sep-23	Amber	
Nr./BFS/0017308 Nr./SFS/0017308 Nr./BFS/0017308				Fire and	Prince Philip Hospital,	0						
Image: Note: Note												
Image: Note Note:								Fire doors should conform to a relevant standard e.g.				
NE/RES/00173908 Apr. 23 2023/24 Mid and West Wale heread records Interfer Sifety west Wale barling Landling LSLS SUP barling LSLS S								BS 8214:2016 - Timber-based fire door assemblies – Code of Practice				
NE/RFY/0017308 Apr - 2 Vest Vulke Mutters Template 27, reprint in Noplit, Noplit, James, Statis Bup Rescue Ne/RFY/0017308, Dates, Lames, Statis Bup Rescue Image: Statis Bup Rescue<								Compliance with this or an equivalent standard will normally satisfy the requirement				
NE/BFS/00173908 Apr-23 202/24 Mid and NE/BFS/00173908 Latter of Fire Safety Prince Philip Propints NE/BFS/00173908 Ne/BFS/00173	NE/BFS/00173908	Apr-23	2023/24	West Wales	Matters Template 27,	NE/BFS/00173908_00 9	High	found to be damaged/missing. The strips and seals should be replaced in order to prevent	Sep-23	Sep-23	Amber	
NE/8F5/00173908 Apr 23 Q22/24 Mid and West Wales Letter of Fire Safety West Wales NE/8F5/00173908. Q P/8								• Ed 0048				
Image: NE/BFS/00173908 Apr-23 2023/24 Mid and Rescue Service Letter of Fire Safety Prince Philip Mospital, Rescue Service NE/BFS/00173908,01 Prince Philip Mospital, Rescue Service NE/BFS/00173908,01 Net Prince Philip Mospital, Rescue Service NE/BFS/00173908,01 Net Prince Philip Mospital, Rescue Service Net/BFS/00173908,01 Net Prince Philip Mospital, Rescue Service Net Prince Philip Mospital,					, , , , , , , , , , , , , , , , , , , ,			•₪ 0076				
Image: Service Image: Service Image: Service NE/BFS/00173908 Apr-23 Q23/24 Mid and Rescue Service NE/BFS/00173908 Mid product in order to prevent the passage of smoke and flame. Service Service Amber NE/BFS/00173908 Apr-23 Q23/24 Mid and Rescue Service NE/BFS/00173908 Night product in order to prevent the passage of smoke and flame. Service Service Amber NE/BFS/00173908 Apr-23 Q23/24 Mid and Rescue Service NE/BFS/00173908 Night product in order to prevent the passage of smoke and flame. Service Service Amber NE/BFS/00173908 Apr-23 Q23/24 Mid and Rescue Service NE/BFS/00173908.01 Night product in order to prevent the passage of smoke and flame. Service Amber NE/BFS/00173908 Niver Service Niver Service Niver Service Niver Service Service Service Service Amber Service Service Service Niveri								The intumescent strips and cold smoke seals should conform to a relevant standard e.g.				
LImage: Normal SectionImage: Nor								BS 8214:2016 - Timber-based fire door assemblies – Code of Practice				
West Wales Fire and Rescue ServiceWest Wales Fire and Rescue ServiceMatters Template 27, Prince Philip Hospital, Dafen, Llanelli. SAIS 80F, NE/BFS/001739080repaired in order to prevent the passage of smoke and flame. •id 0046 •id 0046 •id 0046 •id 0046 •id 0046 •id 0046is passage of smoke and flame. •id 0046 •id 0046								Compliance with this or an equivalent standard will normally satisfy the requirement				
LetRescue ServiceDafen, Llanelli. SA15 8QF NE/BF5/00173908Ne/BF5/00173908 </td <td>NE/BFS/00173908</td> <td>Apr-23</td> <td>2023/24</td> <td>West Wales</td> <td>Matters Template 27,</td> <td>NE/BFS/00173908_01 0</td> <td>High</td> <td></td> <td>Sep-23</td> <td>Sep-23</td> <td>Amber</td> <td></td>	NE/BFS/00173908	Apr-23	2023/24	West Wales	Matters Template 27,	NE/BFS/00173908_01 0	High		Sep-23	Sep-23	Amber	
Image: New Synthetic Syntheteric Synthetic Synthetic Synthetic Synthetic Sy		1		Rescue	Dafen, Llanelli. SA15 8QF							
NE/BFS/00173908Apr-232023/24Mid and West Wales Fire and ServiceLetter of Fire Safety Matters Template 27, Prince Philip Hospital, Dafen, Llanelli. SA15 8QFNE/BFS/00173908_0High Pince doi replaced to provide or reinstated to provide the same standard of fire resistance as the rest of the ceiling. •W34Aug-23Aug-23Aug-23Aug-23Amber				Service	1112/ DF3/ UU1/3908							
Image: Normal ScienceImage: Normal Scienc								BS 8214:2016 - Timber-based fire door assemblies – Code of Practice				
West WalesMatters Template 27, Fire and1repaired or replaced to provide or reinstated to provide the same standard of fire resistance as the rest of the ceiling.RescueDafen, Llanelli. SA15 8QF NE/BFS/00173908• 1000000000000000000000000000000000000								Compliance with this or an equivalent standard will normally satisfy the requirement				
Fire and Prince Philip Hospital, Rescue Dafen, Llanelli. SA15 8QF Service NE/BFS/00173908	NE/BFS/00173908	Apr-23	2023/24			NE/BFS/00173908_01	High		Aug-23	Aug-23	Amber	
Service NE/BFS/00173908		1		Fire and	Prince Philip Hospital,							
The fire resistance should conform to a relevant standard e.g. MTMW -05 - 02								•₩34				
								The fire resistance should conform to a relevant standard e.g. MTMW -05 - 02				

								1			
Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule, Amber- on schedule, Green- complete)	Progress update/Reason overdue
NE/BFS/00173908	Apr-23	2023/24	Mid and West Wales	Letter of Fire Safety Matters Template 27,	NE/BFS/00173908_01 2	High	R12. Remove existing lock fastenings from door(s) indicated/located	Aug-23	Aug-23	Amber	
			Fire and Rescue	Prince Philip Hospital, Dafen, Llanelli. SA15 8QF			•Einal exit Occ Therapy Room				
			Service	NE/BFS/00173908			If the door(s) is/are required to be kept locked it/they should be fitted with an approved type of emergency security fastening that can be operated from the escape side of the door(s) without the use of a key, which is conspicuously indicated as to its method of operation.				
							This work should be done to conform to a relevant standard e.g.				
							Section 6 General provisions of Approved Document B Volume 2 Buildings other than dwelling houses.				
							Compliance with this or an equivalent standard will normally satisfy the requirement.				
NE/BFS/00337255	May-23	2023/24	Mid and West Wales	Letter of Fire Safety Matters Surgical Day unit,	NE/BFS/00337255_00	High	R2. During the inspection breaches in compartmentation were identified:	Mar-24	Mar-24	Amber	
			Fire and	Prince Philip Hospital, Dafen, Llanelli. SA15 8QF.	-		•Water Plant room. (Transportation Weep Hole pipes still in situ in floor).				
			Service	NE/BFS/00337255			In the event of fire, breaches in compartmentation, will allow fire and smoke to spread unchecked throughout the building. This would have an impact on the means of escape and render the evacuation strategy of the building ineffective.				
							All breaches in compartmentation should be fire stopped to provide the appropriate fire resistance in accordance with building regulations.				
							The fire resistance should conform to a relevant standard e.g. WHTM -05-02				
							Compliance with this or an equivalent standard will normally satisfy the requirement.				
NE/BFS/00337255	May-23	2023/24		Letter of Fire Safety	NE/BFS/00337255_00	High	R4. Wedges, hooks and any other devices in use at the present time as a means of holding	Mar-24	Mar-24	Amber	06/07/2023- Service to check if this has been implemented.
			Fire and	Matters Surgical Day unit, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF. NE/BFS/00337255	4		the self-closing doors in the open position shall be removed to ensure that the doors are effectively self-closing.				
NE/BFS/00337255	May-23	2023/24	Mid and	Letter of Fire Safety	NE/BFS/00337255_00	High	R6. The following 30-minute fire resisting doors were found to be damaged/defective.	Mar-24	Mar-24	Amber	
			Fire and	Matters Surgical Day unit, Prince Philip Hospital,	6		These doors must be repaired/replaced.				
				Dafen, Llanelli. SA15 8QF. NE/BFS/00337255			•6F55				
							Fire doors should conform to a relevant standard e.g. Appendix B (including Appendix C Table B1) of Approved Document B Volume 2 Buildings other than dwelling houses.				
							BS 8214:2016 - Timber-based fire door assemblies – Code of Practice				
							Compliance with this or an equivalent standard will normally satisfy the requirement				
NE/BFS/00337255	May-23	2023/24	Mid and West Wales	Letter of Fire Safety Matters Surgical Day unit,	NE/BFS/00337255_00	High	R7. During the inspection the self-closing devices on the doors located at;	Mar-24	Mar-24	Amber	
			Fire and Rescue	Prince Philip Hospital, Dafen, Llanelli. SA15 8QF.			•GF 06 •GF 01				
			Service	NE/BFS/00337255			•6F 15 •6F 22				
							Were found to be ineffective and should therefore be checked and maintained to a satisfactory standard so that the doors close completely into the rebate.				
							Self-closing devices should conform to a relevant standard e.g.				
							BS 8214:2016 - Timber-based fire door assemblies – Code of Practice.				
							Compliance with this or an equivalent standard will normally satisfy the requirement.				
NE/BFS/00141802	May-23	2023/24	Mid and West Wales Fire and	Letter of Fire Safety Matters Templates 8 & 9, Prince Philip Hospital,	NE/BFS/00141802_00 1	High	R1. The fire safety measures evaluated in the fire risk assessment must be implemented.	Mar-24	Mar-24	Amber	
			Rescue Service	Dafen, Llanelli. SA15 8QF NE/BFS/00141802							

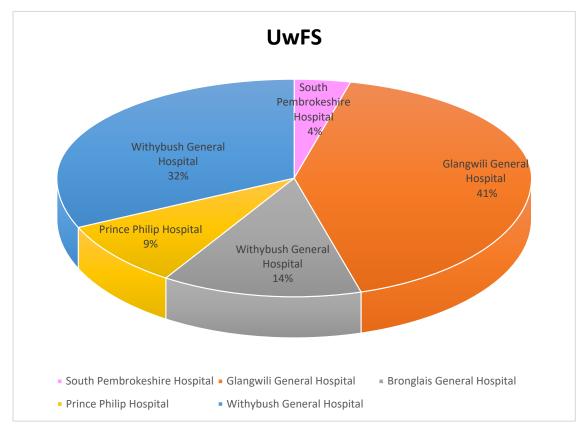
Reference		Financial	Report	Report Title		Priority	Recommendation	Original	Revised	Status	Progress update/Reason overdue
Number	report	Year	Issued By		Reference	Level		Completion Date	Completion Date	(Red- behind	
										schedule, Amber- on	
										schedule, Green-	
										complete)	
NE/BFS/00141802	May-23	2023/24	Mid and West Wales	Letter of Fire Safety Matters Templates 8 & 9,	NE/BFS/00141802_00 2	High	R2. During the inspection breaches in compartmentation were identified:	Sep-23	Sep-23	Amber	
			Fire and Rescue	Prince Philip Hospital, Dafen, Llanelli. SA15 8QF			•Switchgear Room – ward 3 •B40				
			Service	NE/BFS/00141802			The breaches in compartmentation would not support the existing evacuation strategy.				
							In the event of fire, breaches in compartmentation, will allow fire and smoke to spread				
							unchecked throughout the building. This would have an impact on the means of escape and render the evacuation strategy of the building ineffective.				
							All breaches in compartmentation should be fire stopped to provide the appropriate fire				
							resistance in accordance with building regulations.				
							The fire resistance should conform to a relevant standard e.g. Appendix A (including Table A1, A2) of Approved Document B Volume 2 Buildings Other Than Dwelling Houses.				
							Compliance with this or an equivalent standard will normally satisfy the requirement.				
NE/BFS/00141802	May-23	2023/24	Mid and West Wales	Letter of Fire Safety	NE/BFS/00141802_00	High	R4. The following doors should be replaced with fire doors providing 30 minutes fire	Mar-24	Mar-24	Amber	
			Fire and	Matters Templates 8 & 9, Prince Philip Hospital,	4		resistance. Panels or partitions above or at the sides of the doors should provide a similar degree of fire resistance.				
			Rescue Service	Dafen, Llanelli. SA15 8QF NE/BFS/00141802			•835				
							Fire resisting doors need to be fitted with				
							 A self-closing device Intumescent strips and smoke seals. 				
							•Three brass/steel hinges.				
							Fire doors should conform to a relevant standard e.g. Appendix B (including Appendix C Table B1) of Approved Document B Volume 2 Buildings other than dwelling houses.				
							BS 8214:2016 - timber-based fire door assemblies – Code of practice				
							Compliance with this or an equivalent standard will normally satisfy the requirement				
NE/BFS/00141802	May-23	2023/24		Letter of Fire Safety	NE/BFS/00141802_00	High	R5. A fire warning system must be extended. The scope and extent of the fire alarm	Sep-23	Sep-23	Amber	
				Matters Templates 8 & 9, Prince Philip Hospital,	5		system should be informed by the significant findings of your fire risk assessment				
			Rescue Service	Dafen, Llanelli. SA15 8QF NE/BFS/00141802			•Storeroom R35				
							All work involving the fire alarm should be carried out in accordance with the relevant standard e.g., BS5839				
NE/BFS/00141802	May-23	2023/24	Mid and West Wales	Letter of Fire Safety Matters Templates 8 & 9,	NE/BFS/00141802_00 6	High	R6. The following fire resisting doors were found to be damaged/defective. These doors must be repaired/replaced.	Mar-24	Mar-24	Amber	
			Fire and Rescue	Prince Philip Hospital, Dafen, Llanelli. SA15 8QF			•2241				
			Service	NE/BFS/00141802			Fire doors should conform to a relevant standard e.g.				
							BS 8214:2016 - Timber-based fire door assemblies – Code of Practice				
							Compliance with this or an equivalent standard will normally satisfy the requirement				
NE/BFS/00141802	May-23	2023/24	Mid and West Wales	Letter of Fire Safety Matters Templates 8 & 9,	NE/BFS/00141802_00	High	R7. The intumescent strips and cold smoke seals on the following fire resisting doors were found to be damaged/missing. The strips and seals should be replaced in order to prevent	Sep-23	Sep-23	Amber	
			Fire and Rescue	Prince Philip Hospital, Dafen, Llanelli. SA15 8QF	, ·		to be damaged/missing. The strips and seals should be replaced in order to prevent the passage of smoke and flame.				
			Service	NE/BFS/00141802			•2160				
							•2176 •2170				
							The intumescent strips and cold smoke seals should conform to a relevant standard e.g.				
							BS 8214:2016 - Timber-based fire door assemblies – Code of Practice				
							Compliance with this or an equivalent standard will normally satisfy the requirement				

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		Financial Year	Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule, Amber- on schedule, Green- complete)	Progress update/Reason overdue
NE/BFS/00141802	May-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Templates 8 & 9, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00141802	NE/BFS/00141802_00 8	High	 R8. During the inspection the self-closing devices on the doors located at; Z243A Z231 Z172 A/B Were found to be ineffective and should therefore be checked and maintained to a satisfactory standard so that the doors close completely into the rebate. Self-closing devices should conform to a relevant standard e.g. BS 8214:2016 - Timber-based fire door assemblies – Code of Practice. Compliance with this or an equivalent standard will normally satisfy the requirement. 	Sep-23	Sep-23	Amber	
BFS/NE/jel/00173 901	May-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters TEMPLATES 10 & 12, PRINCE PHILIP HOSPITAL, DAFEN ROAD, DAFEN, LLANELLI. SA14 8QF BFS/NE/jel/00173901	BFS/NE/jel/00173901 _001	High	R1. Wedges, hooks and any other devices in use at the present time as a means of holding the self-closing doors in the open position shall be removed to ensure that the doors are effectively self-closing.	Jul-23	Jul 23 N/K	Red	
BFS/NE/jel/00173 901	May-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters TEMPLATES 10 & 12, PRINCE PHILIP HOSPITAL, DAFEN ROAD, DAFEN, LLANELLI. SA14 8QF BFS/NE/jel/00173901	BFS/NE/jel/00173901 _002	High	 R2. Fire doors fitted with automatic hold open devices should conform to a relevant standard e.g. BS 7273-4:2015 - Actuation of release mechanisms for doors Fire doors should conform to a relevant standard e.g., Appendix B (including Appendix C Table B1) of Approved Document B Volume 2 Buildings other than dwelling houses. BS 8214:2016 - timber-based fire door assemblies – Code of practice Compliance with this or an equivalent standard will normally satisfy the requirement 	Sep-23	Sep-23	Amber	
BFS/NE/jel/00173 901	May-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters TEMPLATES 10 & 12, PRINCE PHILIP HOSPITAL, DAFEN ROAD, DAFEN, LLANELLI. SA14 8QF BFS/NE/jel/00173901	BFS/NE/jel/00173901 _003	High	R3. 'Fire Door - Keep Shut' signs should be provided on the outside face of each fire door located • 2090 A/B • 2091 A/B	Sep-23	Sep-23	Amber	
BFS/NE/jel/00173 901	May-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters TEMPLATES 10 & 12, PRINCE PHILIP HOSPITAL, DAFEN ROAD, DAFEN, LLANELLI. SA14 8QF BFS/NE/jel/00173901	BFS/NE/jel/00173901 _004	High	 R4. The existing windows located in the 30-minute Sub-compartment wall located between: R45 and R51 should be re-glazed with fire resisting glazing to a minimum period of 30 minutes fire resisting in accordance with the manufacturer's instructions. The glazing should conform to a relevant standard e.g. WHTM – 05 – 02. BS 476-22:1987 Fire tests on building materials and structures. Methods for determination of the fire resistance of non-loadbearing elements of construction, in terms of integrity for a period of minutes, Compliance with these standards will normally satisfy the requirement 	Sep-23	Sep-23	Amber	
BFS/NE/jel/00173 901	Məy-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters TEMPLATES 10 & 12, PRINCE PHILIP HOSPITAL, DAFEN ROAD, DAFEN, LLANELLI. SA14 8QF BFS/NE/jel/00173901	BFS/NE/jel/00173901 _005	High	 Compliance with these standards will normally satisfy the requirement. R5. During the inspection the self-closing devices on the doors located at; 2119 Were found to be missing and should therefore be checked and maintained to a satisfactory standard so that the doors close completely into the rebate. Self-closing devices should conform to a relevant standard e.g. BS 8214:2016 - Timber-based fire door assemblies – Code of Practice. Compliance with this or an equivalent standard will normally satisfy the requirement. 	Sep-23	Sep-23	Amber	

	Date of report	Financial Year	Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule, Amber- on schedule, Green- complete)	Progress update/Reason overdue
BFS/NE/jel/00173 901	May-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters TEMPLATES 10 & 12, PRINCE PHILIP HOSPITAL, DAFEN ROAD, DAFEN, LLANELLI. SA14 8QF BFS/NE/jel/00173901	BFS/NE/jel/00173901 _006	High	 R6. During the inspection the self-closing devices on the doors located at; 2074 2080 A 2100 Were found to be ineffective and should therefore be checked and maintained to a satisfactory standard so that the doors close completely into the rebate. Self-closing devices should conform to a relevant standard e.g. BS 8214:2016 - Timber-based fire door assemblies – Code of Practice. Compliance with this or an equivalent standard will normally satisfy the requirement. 	Sep-23	Sep-23	Amber	
BFS/NE/jel/00173 901	May-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters TEMPLATES 10 & 12, PRINCE PHILIP HOSPITAL, DAFEN ROAD, DAFEN, LLANELLI. SA14 8QF BFS/NE/jel/00173901	BFS/NE/jel/00173901 _007	High	 R7. The intumescent strips and cold smoke seals on the following fire resisting doors were found to be damaged/missing. The strips and seals should be replaced in order to prevent the passage of smoke and flame. 2075 2076 2089 2097 The intumescent strips and cold smoke seals should conform to a relevant standard e.g. BS 8214:2016 - Timber-based fire door assemblies – Code of Practice Compliance with this or an equivalent standard will normally satisfy the requirement 	Sep-23	Sep-23	Amber	
BFS/NE/jel/00334 401	Jun-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 2, PRINCE PHILIP HOSPITAL, DAFEN, LLANELLI. SA15 8QF BFS/NE/jel/00334401	BFS/NE/jel/00334401 _001	High	 R1. The following rooms are to be cleared of all storage R04 This work is necessary to reduce the risk of spread of fire. 	Sep-23	Sep-23	Amber	
BFS/NE/jel/00334 401		2023/24	Fire and Rescue Service	Letter of Fire Safety Matters Template 2, PRINCE PHILIP HOSPITAL, DAFEN, LLANELLI. SA15 8QF BFS/NE/jel/00334401	BFS/NE/jel/00334401 _002		 R2. During the inspection breaches in compartmentation were identified: R28 – W.A.S.T storeroom R03 The breaches in compartmentation would not support the existing evacuation strategy. In the event of fire, breaches in compartmentation, will allow fire and smoke to spread unchecked throughout the building. This would have an impact on the means of escape and render the evacuation strategy of the building ineffective. All breaches in compartmentation should be fire stopped to provide the appropriate fire resistance in accordance with building regulations. The fire resistance should conform to a relevant standard: WHTM 05-02 Compliance with this or an equivalent standard will normally satisfy the requirement. 	Aug-23	Aug-23	Amber	
BFS/NE/jel/00334 401	Jun-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 2, PRINCE PHILIP HOSPITAL, DAFEN, LLANELLI. SA15 8QF BFS/NE/jel/00334401	BFS/NE/jel/00334401 _003	High	R3. 'Fire Door - Keep Shut' signs should be provided on the outside face of each fire door located • 1115B	Sep-23	Sep-23	Amber	
BFS/NE/jel/00334 401	Jun-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 2, PRINCE PHILIP HOSPITAL, DAFEN, LLANELLI. SA15 8QF BFS/NE/jel/00334401	BFS/NE/jel/00334401 _004	High	 R4. The existing fire warning system must be extended to the following locations: R28 - W.A.S.T Storeroom as necessary to conform fully to BS 5839-1:2017 Category L1. All work involving the fire alarm should be carried out in accordance with BS 5839-1:2017. 	Aug-23	Aug-23	Amber	

		Year	Report Issued By	Report Title	Reference	Priority Level		Original Completion Date	Revised Completion Date	Status (Red- behind schedule, Amber- on schedule, Green- complete)	Progress update/Reason overdue
BFS/NE/jel/00334 401	Jun-23		Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 2, PRINCE PHILIP HOSPITAL, DAFEN, LLANELLI. SA15 8QF BFS/NE/jel/00334401	BFS/NE/jel/00334401 _005	High	R5. During the inspection the self-closing devices on the doors located at. • 1112 A/B Were found to be missing. Self-closing devices should conform to a relevant standard e.g. BS 8214:2016 - Timber-based fire door assemblies – Code of Practice. Compliance with this or an equivalent standard will normally satisfy the requirement.	Sep-23	Sep-23	Amber	
BFS/NE/jel/00334 401	Jun-23		Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 2, PRINCE PHILIP HOSPITAL, DAFEN, LLANELLI. SA15 8QF BFS/NE/jel/00334401	BFS/NE/jel/00334401 _006	High	 R6. The intumescent strips and cold smoke seals on the following fire resisting doors were found to be damaged/missing. The strips and seals should be replaced in order to prevent the passage of smoke and flame. 1112 A/B The intumescent strips and cold smoke seals should conform to a relevant standard e.g. BS 8214:2016 - Timber-based fire door assemblies – Code of Practice Compliance with this or an equivalent standard will normally satisfy the requirement. 	Sep-23	Sep-23	Amber	



Comparison of fire incidents and Unwanted Fire Signals (UwFS) on a site-bysite basis for the period 26 June 2023 to August 21 2023 (inclusive)

Site	Fire	UwFS
Glangwili Hospital	0	9
Prince Philip Hospital	0	2
South Pembrokeshire Hospital	0	1
Bronglais Hospital	0	3
Withybush Hospital	0	7

Cause of alarm signal

UwFS incidents between 26 June 2023 and 21 August 2023 (inclusive)

Site: Glangwili Hospital

Item	Value	%
Dust - contractors work (drilling/grinding etc)	3	33.3%
Detector faulty/damaged	2	22.2%
Other	1	11.1%

MCP broken by accidental impact	3	33.3%
Grand total	9	100%

Cause of alarm signal

UwFS incidents

between 26 June 2023 and 21 August 2023 (inclusive)

Site: Prince Philip Hospital

Item	Value	%
Cooking - burnt toast	2	100%
Grand total	2	100%

Cause of alarm signal

UwFS incidents between 26 June 2023 and 21 August 2023 (inclusive)

Site: South Pembrokeshire Hospital

ltem	Value	%
Excessive build-up of heat	1	100%
Grand total	1	100%

Cause of alarm signal

UwFS incidents between 26 June 2023 and 21 August 2023 (inclusive)

Site: Withybush Hospital

Item	Value	%
Cooking - unattended	2	28.6%
Other	1	14. 2 %
System Fault	1	14.2%
Other environmental effect	1	14.2%
MCP broken by accidental impact	2	28.6.%

Grand total	3	100%

Cause of alarm signal

UwFS incidents

between 26 June 2023 and 21 August 2023 (inclusive)

Site: South Pembrokeshire Hospital

Item	Value	%
Cooking unattended	1	33.3%
MCP broken by accidental impact	1	33.3%
Steam	1	33.3%
Grand total	3	100%

RICHARD JUPP, HEAD OF FIRE SAFETY 21 AUGUST 2023