

HEALTH & SAFETYCOMMITTEE PWYLLGOR IECHYD A DIOGELWCH

DYDDIAD Y CYFARFOD:	12 September 2022
DATE OF MEETING:	
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
	Simon Chiffi, Head of Operational Services

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate)	
Er Sicrwydd/For Assurance	

ADRODDIAD SCAA SBAR REPORT

Sefyllfa / Situation

This report provides an update to the Health and Safety Committee (HSC) 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
- Fire Safety Governance

Cefndir / Background

The HSC will recall previous updates on each of the above reports.

This report provides an update on progress on each of these areas since the previous HSC meeting held on 11th July 2022.

Asesiad / Assessment

1. Fire Enforcement Notices (FEN)/Letters of Fire Safety Matters (LoFSM)

1.1 Withybush General Hospital (WGH)

As confirmed at the last meeting the FEN for advance works has now been lifted so this reference has now been removed from this update.

▶ 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)

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As noted at the previous meeting of this Committee, the Supply Chain Partner (SCP) had requested an extension to the current programme to March 2023. This was to receive full scrutiny by the Project Manager (PM) before being accepted by the Health Board (HB).

This program has now been fully reviewed and accepted by the HB PM and fully confirmed at Project Team Meetings. The revised programme is now a completion date of February 2023, with a period of contingency running to March 2023.

The Mid and West Wales Fire and Rescue Service (MWWFRS) have formally extended the FEN at WGH to align with the above programme dates.

The financial position remains highly challenging and this has been regularly reported to the Capital Sub Committee (CSC) via the highlight reporting system and regular reporting to Welsh Government (WG) via the dashboard return.

Regular dialogue continues with MWWFRS. The Enforcing Officers continue to review regular activities on site and fully understand the challenging work required and are supportive of Hywel Dda University Health Board's (HDdUHB) actions.

Phase 2 – All departments/ ward areas/ risk rooms (FEN KS/890/04)

Phase 2 works remain on programme to be completed by April 2025.

The resource schedule needed to progress the Phase 2 Business Justification Case (BJC) has now been fully approved by WG. This capital support is in the order of £935k.

The current expectation is that the BJC work will be completed in Quarter 4 of 2022/23 financial year.

Mobilisation of works on site is anticipated in Quarter 1 of 2023/24 (subject to the due diligence work involved in the BJC development). This will also be required to be aligned closely with the completion of the Phase 1 programme works.

A programme completion date will be developed as the above BJC work is progressed to encompass the work content and complexity of this Phase 2 Project.

At this point, confidence remains that the April 2025 date can be achieved, however this will need to be reviewed when the Business Case work is completed. This matter has been discussed with MWWFRS who appreciate that a revision may be required to this programme should the nature of the works dictate that an extension to this timeline becomes necessary.

Decant Arrangements to Support Phase 2 Work

The BJC for the Decant Ward has now been completed supported by Capital Sub Committee on 28th July 2022. It was also presented to the Executive Team on the 10th August 2022.

We are currently reviewing how this BJC can be formally approved by the HB to enable it to be formally submitted to WG.

We are working to ensure that this small delay to the Decant Ward does not impact on Phase 2 works, noting that there are a number of areas in Phase 2 (X-ray etc.) which will not require decant arrangements so these works can be managed in the early programme stages.

The continuous programme of delivery through the Advanced Work Phase, Phase 1 and Phase 2 is fully supported by MWWFRS.

1.2 Glangwili General Hospital (GGH)

As confirmed at the last meeting, the FEN for advance works has now been lifted so this reference has been removed from this update.

▶ Phase 1 – All remaining horizontal escape routes at GGH (FEN KS/890/08 Completion Date July 2022)

The previously forecast completion date of April 2023 remains in place. This will need to be closely monitored and reviewed as the project progresses.

The SCP has requested a review of this programme, driven predominately by a change in assurance given by a specialist fire stopping manufacturer as to how the process is undertaken. The HB PM and technical team are reviewing this position with the specialist companies involved and are being supported by the NHS Wales Shared Services Partnership (NWSSP) in this work. This review is not completed but we expect to have a final position from the Project Team by mid-September 2022.

HDdUHB continues to keep MWWFRS fully updated with any adjustments to programme on this phase of works.

MWWFRS is fully aware of the above timescales and potential programme review and have already provided a formal interim extension to February 2023. They have also confirmed (in conversation) that they would be comfortable to extend this further when we have a better understanding of the above technical point. When due diligence work is completed, the HB will make a formal application to MWWFRS to align the FEN to the revised programme dates.

Phase 2 – All departments/ ward areas/ risk rooms (FEN KS/890/09)

Phase 2 remains on programme to be completed by April 2024 (subject to the full due diligence work needed as part of the Business Case development).

Following the approval of the Phase 1 Business Case, the Project Management Team, in conjunction with HDdUHB have reviewed the overall programme for Phases 1 and 2 to ensure there is an alignment between the end of Phase 1 and commencement of Phase 2 ensuring a continuous work programme.

The resource schedule submitted to WG to develop the BJC has now been fully approved. This capital support is in the order of £1.1m. The HB and SCP are now progressing with this Business Case.

The current expectation is that the BJC work will be completed in Quarter 4 of the 2022/23 financial year.

Based on the above, a forecast mobilisation date for Phase 2 will be in Quarter 1 of 2023/24 (subject to the due diligence work involved in the BJC development). This will also be required to align closely with the completion of the Phase 1 programme works.

It is important to note that Phase 2 works will be extremely complex given the delivery of these Fire Enforcement works to busy clinical areas. The due diligence work required during the

Business Case development will confirm both commencement dates and programme delivery dates for this work.

A formal programme completion date will be confirmed following the due diligence work undertaken as part of the project planning for technical solutions to this phase of work. It is currently envisaged that the April 2024 completion date is achievable, however this will be confirmed upon completion of the detailed Business Case work.

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

1.3 Additional Letters of Fire Safety Matters

> Tregaron Hospital

- Letter issued 12th May 2021.
- All actions, as required on the LoFSM from MWWFRS, have now been completed.
- MWWFRS has been invited to visit the site to confirm all work is satisfactory.
- Confirmed as the 29th September 2022.

Glangwili General Hospital

Letter issued 8th June 2021.

As this has now been fully completed and formally approved by MWWFRS, it will be removed from future reports.

> Bronglais General Hospital (BGH) Main Building

- Letters issued 30th June 2021, 2nd July 2021 and 7th July 2021.
- The LoFSMs have a significant number of requirements, however there is no FEN action placed on HDdUHB for BGH.

Following completion of the works to the vertical escape routes, MWWFRS has visited the BGH site and confirmed they are satisfied with the standard of work already completed.

In reviewing the remaining works necessary, the HB had already presented programme delivery dates to NWSSP and to MWWFRS.

In order to demonstrate to MWWFRS the commitment to this future works programme, a meeting was held on the 27th July 2022 with MWWFRS, WG Capital Managers and the HB team to fully brief on the needs of the overall programme. This was well received by both WG and MWWFRS and was helpful in that all parties are fully aware of the overall programme progress and when key approvals will be needed. To support this, MWWFRS have revised their LoFSM to align with the forecast delivery plan the HB has developed.

The HB is now progressing the Programme Business Case (PBC). This will be the preliminary work to fully understand the technical matters to support this programme and it is, therefore, likely that some programme dates may need to be reviewed, which is clearly understood by all parties.

As this work proceeds we, the Committee will be updated on any modifications to the current established programme.

BGH Residential Blocks

- Four individual LoFSM issued 16th June 2021 currently on programme.
- The original project was programmed to commence mid-April 2022 for completion by the end of June 2022.
- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required.
- The previous completion date for this work, reported to the last committee in May 2022, was end of July 2022. It has been necessary to undertake additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30th September 2022.

> WGH

LoFSM issued 12th December 2021.

As the works are now fully delivered to the satisfaction of the MWWFRS and the remaining work needed has been formally approved to move to WGH Phase 1, we will now remove this item from future reports.

Prince Philip Hospital (PPH)

HDdUHB has been working with MWWFRS to overcome inconsistencies in their reporting of fire safety issues to HDdUHB and following some internal personnel changes, a single LoFSM for PPH has been received.

As previously reported, we have received a consolidated LoFSM for PPH. This is aligned with the process already established with MWWFRS on all other elements of the HB Estate.

The action plan to deliver these works is now complete. This will be subject to formal sign-off from MWWFRS; we are in full agreement as to the scheduling of work and priorities established in different areas.

The initial phase for the current financial year is already supported by HB discretionary capital which can be summarised as:

 Improvements to fire doors and fire compartmentation within the PPH residential accommodation blocks 2-7, lobby areas only. Works start on site on 9th January 2023, with a completion date of 24th March 2023.

For all subsequent works remaining from the LoFSM, we now have clear scheduled programmes which include all of the appropriate Business Case development works.

Following the established process at WGH, GGH and more recently at BGH, we look to work with MWWFRS and WG Capital Teams to jointly agree a delivery programme. Our expectation at this point is that we will establish these agreements over the next few months, working closely with all parties. We have already established strong communications with MWWFRS on the PPH site and are in regular contact in developing this programme.

2. Audit Tracker (previously submitted to Capital Monitoring Group

Attached at Appendix 1 for further information, is the HDdUHB tracker developed by the Assurance and Risk Team which monitors progress on all of the above issues. Going forward

this appendix will be regularly updated and submitted with the Fire Safety Management Update Report to the HSC for completeness.

3. Fire Safety Management Update

3.1 Fire Risk Assessments (FRAs)

As of 15th August 2022, there are no overdue FRAs. A further 20 FRAs come online (up to 23 September 2022) as identified on the NHS Wales Shared Service Partnership – Specialist Estates Services (NWSSP-SES) system dashboard.

3.2 Boris Fire Risk Assessment Management System

Live Fire Risk Assessments are now being undertaken by using the new system. A full update was given to the Fire Safety Group on 6th June 2022. All fire risk assessments will transfer to the new Boris system over the next 12 months.

3.3 Fire Safety Training

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

Table 1.0 As at 21 April 2022

Competence Name	Assignment Count	Required	Achieved	Complianc e %
NHS CSTF Fire Safety - 2 Years	11,325	11,325	8,609	76.02%
100 LOCAL Fire Safety Level 2 - 1 Year General	5,283	5,283	2,560	48.46%
100 LOCAL Fire Safety Level 3 - 1 Year General	277	277	104	37.55%

Table 2.0 As at 21 June 2022

Competence Name	Assignment Count	Required	Achieved	Complianc e %
NHS CSTF Fire Safety - 2 Years	11,440	11,440	8,653	75.64%
100 LOCAL Fire Safety Level 2 - 1 Year General	5,345	5,345	2,913	54.50%
100 LOCAL Fire Safety Level 3 - 1 Year General	274	274	120	43.80%

Table 3.0 As at 15 August 2022

Competence Name	Assignment Count	Required	Achieved	Compliance %
NHS CSTF Fire Safety - 2 Years	11,440	11,440	8,710	76.14%
100 LOCAL Fire Safety Level 2 - 1 Year General	5,325	5,325	2,706	50.82%
100 LOCAL Fire Safety Level 3 - 1 Year General	275	275	1105	43.91%

As noted above:

- Level 1 fire safety training has remained stable.
- Level 2 has dropped slightly by circa 4 %.
- Level 3 fire safety training has remained stable.

Confidence remains that the required capacity for training within HDdUHB is in place, however significant reductions in staff attendance continue. 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 holding back significant improvements in fire training statistics.

In order to escalate this further, as noted in the recent Fire Governance Internal Audit Report, this will be formally reported to Senior Operations Business Meeting in order that the Director of Operations can give this additional scrutiny. In addition to this, future reports will include Level 4 and Level 5 training statistics.

4. Fire Safety Governance Update

An audit of the Fire Safety Policy to ascertain HDdUHB's compliance has been completed.

The action plan developed from this review is being managed via the Fire Safety Group with progress reported regularly to the HSC meetings.

The action plan is submitted for information at Appendix 2.

Argymhelliad / Recommendation

The Health and Safety Committee is requested to:

- Acknowledge and gain assurance from content of this report and the work achieved to strengthen fire safety compliance.
- Note that further updates will be presented at future HSC meetings.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference:	3.11 Ensure reports and factual information from
Cyfeirnod Cylch Gorchwyl y Pwyllgor:	external regulatory agencies are acted upon within achievable timescales.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol:	Estates and Facilities Risk No 813 Score 15
Datix Risk Register Reference and Score:	
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	2.1 Managing Risk and Promoting Health and Safety
Nodau Gwella Ansawdd: Quality Improvement Goal(s):	No Avoidable Deaths
Amcanion Strategol y BIP: UHB Strategic Objectives:	Not Applicable
Amcanion Cynllunio Planning Objectives	

Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report	10. Not Applicable

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

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

Enw Da: Reputational:	Potential for legal challenge if HDdUHB does not comply with requirements of Fire Enforcement Notices.
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Not Applicable

Deference No.	Data of	Financial V	Donort Issue 15	Donauk Title	Chat	Decommendation	Daigaite	Decommondation	Oniginal	Davissal	Chahira /D	Description under Description
Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Status of report	Recommendation Reference	Priority Leve	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule, Amber- on schedule, Green- complete)	Progress update/Reason overdue
BFS/KBJ/SJM/001135 73	Dec-19	2019/20	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters. St Nons (Secure EMI unitl) St Brynach's (Day Hospital) / Bro Cerwyn (Offices) BFS/KBJ/SJM/00113573	Open	BFS/KBJ/SJM/00113573_00 1	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	Dec-21 Apr-22 Dec-22 Mar-23	Amber	12/01/2021- Revised letter from MWWFRS confirmed this item is to be completed in line with the agreed advanced, first and second phase works: Stage 2 / Phase 1 works relate to all remaining escape routes at WGH and all remaining work at St Caradogs, St Nons to be completed by end April 2022. 02/03/2022- This programme now takes into account the additional complex work to undertake the "overboarding" as required by the MWWFRS. The completion date of works on site is December 2022 with a short period of contingency running into January 2023. The MWWFRS has been fully briefed on this programme adjustment, which is required to deliver the "overboarding" work. They are fully supportive of the adjustment and have provided written confirmation of their agreement. MWWFRS has advised that they will visit the site during 2022 and will formally update FEN dates when appropriate. 27/06/2022- MWWFRS have already advised that they will be extending the completion date for this FEN to December 2022, which aligns with the current agreed programme for this work. It is anticipated that this updated FEN will be received within the next few weeks. Recommendation will be turned back to amber once updated FEN letter has been received. 28/06/2022 – advised by the Director of Estates, Facilities and Capital Management that verbal updates have been received from MWWFRS that these actions have revised timescales, which will be formalised in written correspondence shortly and therefore RAG status amended from Red to Amber" 12/08/2022- MWWFRS have extended to March 2023 as they have accepted UHB presentation of the extra complexity of the work involved which requires extra time to implement. Letter dated 25/07/22 from MWWFRS confirms this.
BFS/KBJ/SJM/001135 73	Dec-19	2019/20	Mid and West Wales Fire and Rescue Service	ELETT OF FIRE SAFETY MATTERS. ST NONS (SECURE EMI unit)/ ST Brynach's (Day Hospital) / Bro Cerwyn (Offices) BFS/KBJ/SJM/00113573	Open	BFS/KBJ/SJM/00113573_00 2	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	Dec-21 Apr-22 Dec-22 Mar-23	Amber	12/01/2021- Revised letter from MWWFRS confirmed this item is to be completed in line with the agreed advanced, first and second phase works: Stage 2 / Phase 1 works relate to all remaining escape routes at WGH and all remaining work at St Caradogs, St Nons to be completed by end April 2022. 02/03/2022- This programme now takes into account the additional complex work to undertake the "overboarding" as required by the MWWFRS. The completion date of works on site is December 2022 with a short period of contingency running into January 2023. The MWWFRS has been fully briefed on this programme adjustment, which is required to deliver the "overboarding" work. They are fully supportive of the adjustment and have provided written confirmation of their agreement. MWWFRS has advised that they will visit the site during 2022 and will formally update FEN dates when appropriate. 27/06/2022- MWWFRS have already advised that they will be extending the completion date for this FEN to December 2022, which aligns with the current agreed programme for this work. It is anticipated that this updated FEN will be received within the next few weeks. Recommendation will be turned back to amber once updated FEN letter has been received. 28/06/2022 - advised by the Director of Estates, Facilities and Capital Management that verbal updates have been received from MWWFRS that these actions have revised timescales, which will be formalised in written correspondence shortly and therefore RAG status amended from Red to Amber" 12/08/2022- MWWFRS have extended to March 2023 as they have accepted UHB presentation of the extra complexity of the work involved which requires extra time to implement. Letter dated 25/07/22 from MWWFRS confirms this.
BFS/KS/SJM/0017542 4/ 00175421/00175428/ 00175426/00175425	Jan-20	2019/20	Mid and West Wales Fire and Rescue Service	ELETT OF Fire Safety Matters. Withybush General Hospital, Kensington, St Thomas, etc. BFS/KS/SJM/00175424/ 00175421/00175428/00 175426/00175425	Open	BFS.KS/SJM/00175424/ 00175421/00175428/00175 426/00175425_001	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.	Jul-20 Dec-21 Apr-22 Mar-23	Dec-21 Apr-22 Dec-22 Mar-23	Amber	12/01/2021- Revised letter from MWWFRS confirmed this item is to be completed in line with the agreed first phase works: Stage 2 / Phase 1 works relate to all remaining escape routes at WGH and all remaining work at St Caradogs, St Nons to be completed by end April 2022. 02/03/2022- This programme now takes into account the additional complex work to undertake the "overboarding" as required by the MWWFRS. The completion date of works on site is December 2022 with a short period of contingency running into January 2023. The MWWFRS has been fully briefed on this programme adjustment, which is required to deliver the "overboarding" work. They are fully supportive of the adjustment and have provided written confirmation of their agreement. MWWFRS has advised that they will visit the site during 2022 and will formally update FEN dates when appropriate. 27/06/2022- MWWFRS have already advised that they will be extending the completion date for this FEN to December 2022, which aligns with the current agreed programme for this work. It is anticipated that this updated FEN will be received within the next few weeks. Recommendation will be turned back to amber once updated FEN letter has been received. 28/06/2022 – advised by the Director of Estates, Facilities and Capital Management that verbal updates have been received from MWWFRS that these actions have revised timescales, which will be formalised in written correspondence shortly and therefore RAG status amended from Red to Amber" 12/08/2022- MWWFRS have extended to March 2023 as they have accepted UHB presentation of the extra complexity of the work involved which requires extra time to implement. Letter dated 25/07/22 from MWWFRS confirms this.
BFS/KS/SJM/0017542 4/ 00175421/00175428/ 00175426/00175425	Jan-20	2019/20	Mid and West Wales Fire and Rescue Service	k Letter of Fire Safety Matters. Withybush General Hospital, Kensington, St Thomas, etc. BFS/KS/SJM/00175424/ 00175421/00175428/00 175426/00175425		BFS.KS/SJM/00175424/ 00175421/00175428/00175 426/00175425_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 F030s 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 repaired or the door needs to be replaced so the gap is a max 3mm (Within All Blocks). • Transom lights above 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.	Apr-22 Mar-23	Dec-21 Apr-22 Dec-22 Mar-23	Amber	12/01/2021- Revised letter from MWWFRS confirmed this item is to be completed in line with the agreed first phase works: Stage 2 / Phase 1 works relate to all remaining escape routes at WGH and all remaining work at St Caradogs, St Nons to be completed by end April 2022. 02/03/2022- This programme now takes into account the additional complex work to undertake the "overboarding" as required by the MWWFRS. The completion date of works on site is December 2022 with a short period of contingency running into January 2023. The MWWFRS has been fully briefed on this programme adjustment, which is required to deliver the "overboarding" work. They are fully supportive of the adjustment and have provided written confirmation of their agreement. MWWFRS has advised that they will visit the site during 2022 and will formally update FEN dates when appropriate. 27/04/2022- MWWFRS have advised that they will be extending the completion date for this FEN to December 2022 which aligns with the current agreed programme for this work. It is anticipated that this updated FEN will be received within the next few weeks. 27/06/2022- MWWFRS have already advised that they will be extending the completion date for this FEN to December 2022, which aligns with the current agreed programme for this work. It is anticipated that this updated FEN will be received within the next few weeks. Recommendation will be turned back to amber once updated FEN letter has been received within the next few weeks. 28/06/2022 – advised by the Director of Estates, Facilities and Capital Management that verbal updates have been received from MWWFRS that these actions have revised timescales, which will be formalised in written correspondence shortly and therefore RAG status amended from Red to Amber" 12/08/2022- MWWFRS have extended to March 2023 as they have accepted UHB presentation of the extra complexity of the work involved which requires extra time to implement. Letter dated 25/07/22 from MWWFRS confirms this.

1/15

Reference Number	Date of	Financial Voca	Report Issued By	Report Title	Status of	Recommendation	Priority Lavo	Recommendation	Original	Revised	Status (Red-	Progress update/Reason overdue
Keterence Number	report	Financiai Year	Report Issued By	REPORT HUE	report	Reference	Priority Level	Recommendation	Completion Date		behind schedule, Amber- on schedule, Green- complete)	Progress update/keason overque
BFS/KS/SJM/0017542 4/ 00175421/00175428/ 00175426/00175425	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/SIM/00175424/ 00175421/00175428/00 175426/00175425	Open	BFS.KS/SJM/00175424/ 00175421/00175428/00175 426/00175425_003	High	R3. Improve Fire Detection System The detection within the means of escape from the flats and bedrooms should be changed from heat detection to smoke detection to allow the maximum amount of time between detection alert and escape. It was noted that there was heat detection in the bedrooms and entrance halls into the flats and within the lounge areas where smoke detection would be the preferred safer option, it was explained to me that this was due to the residents being able to smoke within the premises before the smoking ban to reduce the false alarm calls. • It was noted that there was a detector being covered at time of inspection within the kitchen of the Pembroke county block (First floor flat F block). You must ensure that this practice is not repeated, information must be given to the occupants explaining the severity of this action. • Due to the Server within the Means of escape an additional detector within the area of the device is required (due to the lintel between the detector and the server) noted within the Pembroke county and St Thomas block (but this should include all blocks if server is on escape route in the same way). The changes should be carried out and commissioned by a competent person.	Jul-20 Dec-21 Apr-22 Mar-23	Dec-21 Apr-22 Dec-22 Mar-23	Amber	12/01/2021- Revised letter from MWWFRS confirmed this item is to be completed in line with the agreed first phase works: Stage 2 / Phase 1 works relate to all remaining escape routes at WGH and all remaining work at St Caradogs, St Nons to be completed by end April 2022. 02/03/2022- This programme now takes into account the additional complex work to undertake the "overboarding" as required by the MWWFRS. The completion date of works on site is December 2022 with a short period of contingency running into January 2023. The MWWFRS has been fully briefed on this programme adjustment, which is required to deliver the "overboarding" work. They are fully supportive of the adjustment and have provided written confirmation of their agreement. MWWFRS has advised that they will visit the site during 2022 and will formally update FEN dates when appropriate. 27/04/2022- MWWFRS have advised that they will be extending the completion date for this FEN to December 2022 which aligns with the current agreed programme for this work. It is anticipated that this updated FEN will be received within the next few weeks. 27/06/2022- MWWFRS have already advised that they will be extending the completion date for this FEN to December 2022, which aligns with the current agreed programme for this work. It is anticipated that this updated FEN will be received within the next few weeks. Recommendation will be turned back to amber once updated FEN letter has been received. 28/06/2022 – advised by the Director of Estates, Facilities and Capital Management that verbal updates have been received from MWWFRS that these actions have revised timescales, which will be formalised in written correspondence shortly and therefore RAG status amended from Red to Amber" 12/08/2022- MWWFRS have extended to March 2023 as they have accepted UHB presentation of the extra complexity of the work involved which requires extra time to implement. Letter dated 25/07/22 from MWWFRS confirms this.
BFS/KS/SJM/0011471 9- 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	Open	BFS/KS/SJM/00114719_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.	Apr-22 Apr-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 extended to 30 April 2025 as agreed in the programme for Phase 2 Works (presented to them on the 02 October 2020). Recommendation changed back from red to amber. 05/01/2022- update being reported to Health & Safety Committee January 2022-At this point, confidence remains that the April 2025 date can be achieved, however this will be required to be reviewed when the Business Case work is completed. The matter has been discussed with MWWFRS and they appreciate that a revision may be required to this programme should the nature of the works dictate that an additional period becomes necessary. 27/04/2022- Update as above 05/01/2022 update, confidence remains that the April 2025 date can be achieved, however this will need to be reviewed when the Business Case work is completed. 27/06/2022- Phase 2 works remain on programme to be completed by April 2025. 12/08/22-unchanged- Phase 2 at WGH, WG has provided approval letter to proceed to BJC Phase 2, which is due to be submitted to UHB in early 2023 and then to WG after the scrutiny process
BFS/KS/SJM/0011471 9 - KS/890/03	Feb-20	2019/20	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: Withybush General Hospital. BFS/KS/SIM/00114719 - KS/890/03	Open	BFS/KS/SJM/00114719_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.		Dec-21 Apr-22 Dec-22 Mar-23	Amber	This work is part of the phase 1 WGH Fire Enforcement Programme. 06/05/2021- Letter from MWWFRS dated 19/03/2021 - 'Further to the conversation on the possibility of the Phase 1 works at Withybush General Hospital running over the completion date due to the complexity and capital value of this project, as we have over 12 months to the current expiry date, we would not want to review this enforcement notice until early in to 2022'. Recommendation to remain amber until contact is made to MWWFRS in March 2022 as they have requested, to update them on the progress of the works, at which point MWWFRS will discuss the extension of the notice at that date. 05/01/2022- update being reported to Health & Safety Committee January 2022- As a result of the significant additional works, the anticipated completion date for the works has been assessed by the Project Management Team as the end of December 2022. COVID-19 continues to impact on progressing the work due to the close proximity of some aspects of this fire work to clinical areas. The MWWFRS has been fully briefed on this programme adjustment required to support their decision on overboarding, and are fully supportive of the adjustment to the compliance dates and will provide written confirmation of this in early 2022. The completion date will be revised on the audit tracker following written confirmation from MWWFRS. 02/03/2022- This programme now takes into account the additional complex work to undertake the "overboarding" as required by the MWWFRS. The completion date of works on site is December 2022 with a short period of contingency running into January 2023. The MWWFRS has been fully briefed on this programme adjustment, which is required to deliver the "overboarding" work. They are fully supportive of the adjustment and have provided written confirmation of their agreement. MWWFRS has advised that they will visit the site during 2022 and will formally update FEN dates when appropriate. 05/05/2022- MWWFRS have confirmed via email they are happy to extend
K\$/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	Open	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.	Feb-21 Jul-22	Jul-22 Feb-23	Amber	13/11/2020- Letter dated 05/11/2020 from MWWFRS confirming enforcement notice KS/890/06 is withdrawn and replaced by KS/890/07, KS/890/08, KS/890/09 dated 04/11/2020. KS/890/08 to be completed by 31/07/2022 as agreed in the programme for Advanced Works (presented to them on the 02 October 2020). Original completion dates shown on tracker taken from original KS/890/06 enforcement notice. 17/01/2022- email received from MWWFRS "Thanks for the update on the phase 1 works at GGH, we understand that the BIC took considerably longer than we expected and that this has caused the completion date of this phase of the works to the start of 2023. We are happy at this time to verbally extend the EN KS 890 08 to Feb 2023, I will not be able to physically change the current Notice until it is up for review in July 2022". Completion date revised to February 2023. 02/03/2022- The current forecasted completion date is April 2023, however this will need to be closely monitored and reviewed as the project progresses. HDdUHB continues to keep MWWFRS fully up-to-date with any adjustments to programme on this phase of works. MWWFRS is fully aware of the above timescales and has advised that they are planning a site visit at an appropriate time in 2022 to confirm any extension of time that may be required. 27/04/2022- as previous progress update, MWWFRS is fully aware of the above timescales and has advised that they are planning a site visit at an appropriate time in 2022 to confirm any extension of time that may be required.

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KS/890/09	Nov-20	2020/21	Mid and West Wale Fire and Rescue Service	s Enforcement Notice Premises: West Wales General Hospital, Glangwili, Dolgwili Road, Carmarthen, Carmarthenshire, SA31 2AF KS/890/09	Open	KS/890/09_01	High			Aug-24	complete) Amber	13/11/2020- Letter dated 05/11/2020 from MWWFRS confirming enforcement notice KS/890/06 is withdrawn and replaced by KS/890/07, KS/890/09 dated 04/11/2020. KS/890/09 to be completed by 31/08/2024 as agreed in the programme for Advanced Works (presented to them on the 02 October 2020). Original completion dates shown on tracker taken from original KS/890/06 enforcement notice. 05/01/2022- update being reported to Health & Safety Committee January 2022- At this point, confidence remains that the April 2024 completion date is achievable, however this will be confirmed upon completion of the detailed Business Case work. Discussions have been undertaken with MWWFRS who appreciate that a revision may be required to the programme should the nature of the works dictate that an additional period becomes necessary. 02/03/2022- Phase 2 remains on programme to be completed by April 2024 (subject to the full due diligence work needed as part of the Business Case development). 27/04/2022-The delivery programme now indicates that the resource schedule will be submitted to WG circa May 2022 allowing the BJC to be commenced in July 2022. We would therefore expect the Phase 2 to mobilise on site circa April 2023. This will co-ordinate well with the completion of the Phase 1 programme. Phase 2 works will again be extremely complex given the delivery of these Fire Enforcement works to busy clinical areas. The due diligence work required during the Business Case development will confirm both commencement dates and programme delivery dates for this work. 12/08/22- WG has approved the funding to procced with the BJC Phase 2, which is due to be submitted to UHB in early 2023 and following that to WG after the scrutiny process.
Admin - General/00113166	Jun-21	2021/22	Mid and West Wale Fire and Rescue Service	s Letter of Fire Safety Matters Premises: Ty Teifi block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth. SY23 1ER Admin - General/00113166	Open	Admin - General/00113166_001	High	1.1. 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 that they are effectively self-closing onto their rebates. Gaps between door edge and frame are to be no more than 3mm	01/03/2022 Aug-22	Mar-22 Jun-22 Jul-22 Aug-22 Sept-22	Red	01/07/2021- Letter from MWWFRS state 'You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 05/01/2022- update being reported to Health & Safety Committee January 2022- Plans are in place to commence on site with the project in April 2022, with a forecast completion date of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 02/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some addional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 29/06/2022 – correspondence received from MWWFRS confirming the date extension to August 2022. 23/08/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.
Admin - General/00113166	Jun-21	2021/22	Mid and West Wale Fire and Rescue Service	s Letter of Fire Safety Matters Premises: Ty Teifi block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth. SY23 1ER Admin - General/00113166	Open	Admin - General/00113166_001	High	1.2. 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.	01/03/2022 Aug-22	Mar-22 Jun-22 Jul-22 Aug-22 Sept-22	Red	01/07/2021- Letter from MWWFRS state 'You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 05/01/2022- update being reported to Health & Safety Committee January 2022- Plans are in place to commence on site with the project in April 2022, with a forecast completion date of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 02/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 29/06/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.
Admin - General/00113166	Jun-21	2021/22	Mid and West Wale Fire and Rescue Service	s Letter of Fire Safety Matters Premises: Ty Teifi block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth. SY23 1ER Admin - General/00113166	Open	Admin - General/00113166_001	High	1.3. Fire doors should only be kept open by magnetic devices which release when the fire alarm operates.	01/03/2022 Aug-22	Mar-22 Jun-22 Jul-22 Aug-22 Sept-22	Red	01/07/2021- Letter from MWWFRS state 'You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 05/01/2022- update being reported to Health & Safety Committee January 2022- Plans are in place to commence on site with the project in April 2022, with a forecast completion date of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 02/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some addional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 23/08/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.
Admin - General/00113166	Jun-21	2021/22	Mid and West Wale Fire and Rescue Service	s Letter of Fire Safety Matters Premises: Ty Teifi block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth. SY23 1ER Admin - General/00113166	Open	Admin - General/00113166_001	High	1.4. All self-closing devices are to be regularly inspected and maintained.	01/03/2022 Aug-22	Mar-22 Jun-22 Jul-22 Aug-22 Sept-22	Red	01/07/2021- Letter from MWWFRS state 'You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 20/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some addional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 29/06/2022 – correspondence received from MWWFRS confirming the date extension to August 2022. 23/08/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.

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Admin - General/00113166	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Ty Teifi block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth. SY23 1ER Admin - General/00113166	Open	Admin - General/00113166_002	High	2.1. The staircases should be maintained with suitable materials to provide a fire resisting standard of at least 30 minutes.	01/03/2022 Aug-22	Mar-22 Jun-22 Jul-22 Aug-22 Sept-22	Red	01/07/2021- Letter from MWWFRS state 'You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 05/01/2022- update being reported to Health & Safety Committee January 2022- Plans are in place to commence on site with the project in April 2022, with a forecast completion date of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 02/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some addional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 29/06/2022 – correspondence received from MWWFRS confirming the date extension to August 2022. 23/08/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.
Admin - General/00113166	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Ty Teifi block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth. SY23 1ER Admin - General/00113166	Open	Admin - General/00113166_002	High	2.2. 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 bushed to at least 30-minute standard of fire resistance.	01/03/2022 Aug-22	Mar-22 Jun-22 Jul-22 Aug-22 Sept-22	Red	01/07/2021- Letter from MWWFRS state 'You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 05/01/2022- update being reported to Health & Safety Committee January 2022- Plans are in place to commence on site with the project in April 2022, with a forecast completion date of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 02/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 29/06/2022 – correspondence received from MWWFRS confirming the date extension to August 2022. 23/08/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.
Admin - General/00113166	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Ty Teifi block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth. SY23 1ER Admin - General/00113166	Open	Admin - General/00113166_003	High	3.1 The electrical fuse board within the cupboards should be boxed in by 30 minutes fire resistant OR All combustible materials should be removed from the cupboard.	01/10/2021 Aug-22	Mar-22 Jun-22 Jul-22 Aug-22 Sept-22	Red	01/07/2021- Letter from MWWFRS state 'You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 05/01/2022- update being reported to Health & Safety Committee January 2022- Plans are in place to commence on site with the project in April 2022, with a forecast completion date of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 02/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some addional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 29/06/2022 - correspondence received from MWWFRS confirming the date extension to August 2022 23/08/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.
Admin - General/00113168	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Ty Hafren block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER Admin - General/00113168	Open	Admin - General/00113168_001	High	1.1. 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	01/03/2022 Aug-22	Mar-22 Jun-22 Aug-22 Sept-22	Red	01/07/2021- Letter from MWWFRS state 'You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 05/01/2022- update being reported to Health & Safety Committee January 2022- Plans are in place to commence on site with the project in April 2022, with a forecast completion date of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 02/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some addional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 23/08/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.
Admin - General/00113168	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	ketter of Fire Safety Matters Premises: Ty Hafren block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER Admin - General/00113168	Open	Admin - General/00113168_001	High	1.2. 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.	01/03/2022 Aug-22	Mar-22 Jun-22 Aug-22 Sept-22	Red	01/07/2021- Letter from MWWFRS state 'You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 05/01/2022- update being reported to Health & Safety Committee January 2022- Plans are in place to commence on site with the project in April 2022, with a forecast completion date of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 02/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some addional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 29/06/2022- torrespondence received from MWWFRS confirming the date extension to August 2022 23/08/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.

4/15

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Admin - General/00113168	Jun-21	2021/22	Mid and West Wale: Fire and Rescue Service	s Letter of Fire Safety Matters Premises: Ty Hafren block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER Admin - General/00113168	Open	Admin - General/00113168_001	High	1.3. Fire doors should only be kept open by magnetic devices which release when the fire alarm operates.	01/03/2022 Aug-22	Mar-22 Jun-22 Aug-22 Sept-22	Red	01/07/2021- Letter from MWWFRS state 'You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 05/01/2022- update being reported to Health & Safety Committee January 2022- Plans are in place to commence on site with the project in April 2022, with a forecast completion date of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 02/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 23/08/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.
Admin - General/00113168	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	s Letter of Fire Safety Matters Premises: Ty Hafren block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER Admin - General/00113168	Open	Admin - General/00113168_001	High	1.4. All self-closing devices are to be regularly inspected and maintained.	01/03/2022 Aug-22	Mar-22 Jun-22 Aug-22 Sept-22	Red	01/07/2021- Letter from MWWFRS state 'You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 05/01/2022- update being reported to Health & Safety Committee January 2022- Plans are in place to commence on site with the project in April 2022, with a forecast completion date of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 02/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 23/08/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.
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Admin - General00295247	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Ty Aeron block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth. SY23 1ER Admin - General00295247	Open	Admin - General00295247_001	High	1.1. 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	01/03/2022 Aug-22	Mar-22 Jun-22 Aug-22 Sept-22	Red	o1/07/2021- Letter from MWWFRS state 'You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 05/01/2022- update being reported to Health & Safety Committee January 2022- Plans are in place to commence on site with the project in April 2022, with a forecast completion date of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 02/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 29/06/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.
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Admin - General00295247	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Ty Aeron block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth. SY23 1ER Admin - General00295247	Open	Admin - General00295247_001	High	1.3. Fire doors should only be kept open by magnetic devices which release when the fire alarm operates.	Mar-22 Aug-22	Mar-22 Jun-22 Aug-22 Sept-22	Red	01/07/2021- Letter from MWWFRS state 'You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 05/01/2022- update being reported to Health & Safety Committee January 2022- Plans are in place to commence on site with the project in April 2022, with a forecast completion date of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 02/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any updates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some addional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 29/06/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.
Admin - General00295247	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Ty Aeron block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth. SY23 1ER Admin - General00295247	Open	Admin - General00295247_001	High	1.4. All self-closing devices are to be regularly inspected and maintained.	01/03/2022 Aug-22	Mar -22 Jun-22 Aug -22 Sept-22	Red	01/07/2021- Letter from MWWFRS state "You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 05/01/2022- update being reported to Health & Safety Committee January 2022- Plans are in place to commence on site with the project in April 2022, with a forecast completion date of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 02/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 29/06/2022- Correspondence received from MWWFRS confirming the date extension to August 2022 23/08/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.
Admin - General00295247	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Ty Aeron block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth. SY23 1ER Admin - General00295247	Open	Admin - General00295247_002	High	2.1. The staircases should be maintained with suitable materials to provide a fire resisting standard of at least 30 minutes.	01/03/2022 Aug-22	Mar-22 Jun-22 Aug-22 Sept-22	Red	01/07/2021- Letter from MWWFRS state 'You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 05/01/2022- update being reported to Health & Safety Committee January 2022- Plans are in place to commence on site with the project in April 2022, with a forecast completion date of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 02/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some addional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 29/06/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.
Admin - General00295247	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Ty Aeron block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth. SY23 1ER Admin - General00295247	Open	Admin - General00295247_002	High	2.2. All openings in the walls, floors, partitions, and ceilings throughout the premises that are provided for the passage of service piping, ducts, or cables, are to be sealed or bushed to at least 30-minutes standard of fire resistance.	01/03/2022 Aug-22	Mar-22 Jun-22 Aug-22 Sept-22	Red	01/07/2021- Letter from MWWFRS state 'You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 05/01/2022- update being reported to Health & Safety Committee January 2022- Plans are in place to commence on site with the project in April 2022, with a forecast completion date of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 02/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some addional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 29/06/2022- correspondence received from MWWFRS confirming the date extension to August 2022 23/08/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.

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Admin - General 00295247	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Ty Aeron block of flats, Bronglais General Hospital, Caradoc Road, Aberystwyth. SY23 1ER Admin - General00295247	Open	Admin - General00295247_003	High	3.1 The electrical fuse board within the cupboards should be boxed in by 30 minutes fire resistant OR All combustible materials should be removed from the cupboard.	01/10/2021 Aug-22	Mar-22 Jun-22 Aug-22 Sept-22	Red	01/07/2021- Letter from MWWFRS state 'You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking'. Estates now reviewing and formulating action plan for completion of the work required. Action plan to be shared with Assurance and Risk Officer once finalised. 05/01/2022- update being reported to Health & Safety Committee January 2022- Plans are in place to commence on site with the project in April 2022, with a forecast completion date of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 02/03/2022- The project is programmed to commence mid-April 2022 and for completion by the end of June 2022. Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. 27/04/2022- Collaborative working is continuing with the MWWFRS in order to confirm and agree any update to delivery dates as required. Current completion date is now the end of July following a short delay appointing the contractor for the work. 27/06/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to end of Aug 22. 29/06/2022 - correspondence received from MWWFRS confirming the date extension to August 2022 23/08/2022- It has been necessary to do some additional due diligence work with the contactors to confirm accredited status of installation staff. This has meant moving the competition date to 30/09/2022.
BFS/KS/AMD/001062 .9	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	Open	BFS/KS/AMD/00106219_00 2	High	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	Oct-22	Amber	27/06/2022- The action plan to deliver these works is now nearing completion and we plan to have this finished by mid-July 2022. This will be subject to formal sign off from MWWFRS, so we are in full agreement with them as to the programming of work and the priorities established in different areas.
BFS/KS/AMD/001062 .9	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	Open	BFS/KS/AMD/00106219_00 3	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	Oct-22	Amber	27/06/2022- The action plan to deliver these works is now nearing completion and we plan to have this finished by mid-July 2022. This will be subject to formal sign off from MWWFRS, so we are in full agreement with them as to the programming of work and the priorities established in different areas.
955/KS/AMD/001062	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	Open	BFS/KS/AMD/00106219_00 5	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	Oct-22	Amber	27/06/2022- The action plan to deliver these works is now nearing completion and we plan to have this finished by mid-July 2022. This will be subject to formal sign off from MWWFRS, so we are in full agreement with them as to the programming of work and the priorities established in different areas.
FS/KS/AMD/001062 9	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	Open	BFS/KS/AMD/00106219_00 7	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	Oct-22	Amber	27/06/2022- The action plan to deliver these works is now nearing completion and we plan to have this finished by mid-July 2022. This will be subject to formal sign off from MWWFRS, so we are in full agreement with them as to the programming of work and the priorities established in different areas.
FS/KS/AMD/001062 9	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	Open	BFS/KS/AMD/00106219_00 8	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	Oct-22	Amber	27/06/2022- The action plan to deliver these works is now nearing completion and we plan to have this finished by mid-July 2022. This will b subject to formal sign off from MWWFRS, so we are in full agreement with them as to the programming of work and the priorities establishe in different areas.

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Reference Number	Date of	Financial Voor	Report Issued By	Report Title	Status of	Recommendation	Priority Level	Recommendation	Original	Revised	Status (Red-	Progress update/Reason overdue
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BFS/KS/AMD/001062 19	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	S Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	Open	BFS/KS/AMD/00106219_01 1	High	Item 7- R11. Drapes and curtains should not be provided across escape routes or exits.	Oct-22	Oct-22	Amber	27/06/2022- The action plan to deliver these works is now nearing completion and we plan to have this finished by mid-July 2022. This will be subject to formal sign off from MWWFRS, so we are in full agreement with them as to the programming of work and the priorities established in different areas.
BFS/KS/AMD/001062 19	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	s Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	Open	BFS/KS/AMD/00106219_01 3	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	Oct-22	Amber	27/06/2022- The action plan to deliver these works is now nearing completion and we plan to have this finished by mid-July 2022. This will be subject to formal sign off from MWWFRS, so we are in full agreement with them as to the programming of work and the priorities established in different areas.
BFS/KS/AMD/001062 19	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	s Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	Open	BFS/KS/AMD/00106219_01 4	High	Item 10- R14. Emergency escape routes must be indicated by adequate escape signage. Signage should be provided at: Bryngofal – Within the garden A&E/Postgrad study centre - Lecture room Signs should be designed and installed in accordance BS 5499-4:20 Compliance with this or an equivalent standard will normally satisfy the requirement.	Oct-22	Oct-22	Amber	20/05/2022- MWWFRS dated 12/05/2022 confirms Bryngofal point only is completed. 27/06/2022- The action plan to deliver these works is now nearing completion and we plan to have this finished by mid-July 2022. This will be subject to formal sign off from MWWFRS, so we are in full agreement with them as to the programming of work and the priorities established in different areas.
BFS/KS/AMD/001062 19	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	S Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	Open	BFS/KS/AMD/00106219_01 6	High	Item 11- R16. Remove all combustible items from the combi boiler rooms within the residential blocks namely block 2.	Oct-22	Oct-22	Amber	27/06/2022- The action plan to deliver these works is now nearing completion and we plan to have this finished by mid-July 2022. This will be subject to formal sign off from MWWFRS, so we are in full agreement with them as to the programming of work and the priorities established in different areas.
BFS/KS/AMD/001062	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	s Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	Open	BFS/KS/AMD/00106219_01 7	High	Item 11- R17. Consider the area used for charging battery powered trolleys within the Boiler house and Main store, to ensure that there is 1-meter clear area around these items whilst charging due to the potential hazard created by this process. The implementation of the Preventive and Protective measures must be in accordance with the principles specified in Part 3 of Schedule 1 of Regulatory Reform (Fire safety) Order 2005, the applicable principles being as follows: Avoid the risk. Evaluate the risks, which cannot be avoided. Combat the risks at source. Adapt to technical progress. Replace the dangerous by the non-dangerous or less dangerous. Develop a coherent overall prevention policy covering technology, organisation of work and the influence of factors relating to the working environment. Giving collective protective measures priority over individual protective measures. Giving appropriate instructions to employees.	Oct-22	Oct-22	Amber	27/06/2022- The action plan to deliver these works is now nearing completion and we plan to have this finished by mid-July 2022. This will be subject to formal sign off from MWWFRS, so we are in full agreement with them as to the programming of work and the priorities established in different areas.
BFS/KS/AMD/001062 19	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	s Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	Open	BFS/KS/AMD/00106219_01 8	High	R18. Further Recommendations We recommend that the evacuation strategy from the Ty Bryn Template is reviewed as at the time of the inspection it was noted that the external pathway wouldn't support evacuation of beds via this route, please refer to Chapter 3 WHTM 05-02 3.61 and 3.62.	Oct-22	Oct-22	Amber	27/06/2022- The action plan to deliver these works is now nearing completion and we plan to have this finished by mid-July 2022. This will be subject to formal sign off from MWWFRS, so we are in full agreement with them as to the programming of work and the priorities established in different areas.
BFS/KS/AMD/001062 19	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	S Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	Open	BFS/KS/AMD/00106219_02 0	High	R20. Further Recommendations The laundry room within Bryngofal is subject to regular cleaning (tumble dryers).	Oct-22	Oct-22	Amber	27/06/2022- The action plan to deliver these works is now nearing completion and we plan to have this finished by mid-July 2022. This will be subject to formal sign off from MWWFRS, so we are in full agreement with them as to the programming of work and the priorities established in different areas.
BFS/KS/AMD/001159 40	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	s Letter of Fire Safety Matters Premises: HYWEL DDA, TENBY COTTAGE HOSPITAL, GAS LANE, TENBY, SA70 8AG BFS/KS/AMD/00115940	Open	BFS/KS/AMD/00115940_00 1	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	Oct-22	Amber	08/07/2022- UHB working with MWWFRS to agree the standards appropriate for this site and to confirm actions neccessery, if any.

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Reference Number	Date of report	Financial Year	Report Issued By		Status of report	Recommendation Reference			Original Completion Date	Revised Completion Date	Status (Red- behind schedule, Amber- on schedule, Green- complete)	Progress update/Reason overdue
BFS/KS/AMD/001159 40	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	Open	BFS/KS/AMD/00115940_00 2	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 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 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	Oct-22	Amber	08/07/2022- UHB working with MWWFRS to agree the standards appropriate for this site and to confirm actions neccessery, if any.
FS/KS/AMD/001159)	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	Open	BFS/KS/AMD/00115940_00 3	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	Oct-22	Amber	08/07/2022- UHB working with MWWFRS to agree the standards appropriate for this site and to confirm actions neccessery, if any.
FS/KS/AMD/001159 0	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	Open	BFS/KS/AMD/00115940_00 4	High	R4. During the fire safety inspection evidence of tests carried out by a competent person on the emergency lighting system was not available. Evidence of such testing should be made available during a fire safety inspection to allow the responsible person to evidence that testing has taken place; the best evidence of testing being certificates of tests carried out by the said competent person.	Oct-22	Oct-22	Amber	08/07/2022- UHB working with MWWFRS to agree the standards appropriate for this site and to confirm actions neccessery, if any.
FS/KS/AMD/001062 9	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	Open	BFS/KS/AMD/00106219_02 1	High	R21. The no smoking policy is enforced to reduce the risk from fire, it was noted within the inspection that there was a build-up of spent smoking materials within the garden at Bryngofal.	Oct-22	Oct-22	Amber	
S/SM/AMD/001077	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/0010778	Open	BFS/SM/AMD/00107788_00 1	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	Nov-22	Amber	27/06/2022- Funding and timescale to be agreed following the findings of the AFT survey.
S/SM/AMD/001077 3	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/0010778	Open	BFS/SM/AMD/00107788_00 2	High	R2. Due to a number of defects found at the time of inspection. A fire door survey is required at the Cwm Seren site.	Nov-22	Nov-22	Amber	27/06/2022- Full fire door survey to be undertaken by AFT on all doors.
SS/SM/AMD/001077 3	May-22	2022/23	Mid and West Wales Fire and Rescue Service	B Letter of Fire Safety Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/0010778 8	Open	BFS/SM/AMD/00107788_00	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	Nov-22	Amber	27/06/2022- Survey by AFT been undertaken costs are due back next week.
SFS/SM/AMD/001077 88	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/0010778 8	Open	BFS/SM/AMD/00107788_00 4	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	Nov-22	Amber	27/06/2022- Survey by AFT been undertaken costs are due back next week.

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Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Status of report	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule, Amber- on schedule, Green-	Progress update/Reason overdue
BFS/SM/AMD/001077	May-22	2022/23	Mid and West Wales	Letter of Fire Safety	Open	BFS/SM/AMD/00107788_00	High	R5. The cross-corridor doors in "Picu" was missing a self-closing device. A self-	Nov-22	Nov-22	complete) Amber	27/06/2022- Survey by AFT been undertaken costs are due back next week.
88	, 22		Fire and Rescue Service	Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/0010778	ope	5		closing device is required on this door to ensure it closes fully into its rebate.				
BFS/SM/AMD/001077 88	May-22		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/0010778 8	Open	BFS/SM/AMD/00107788_00 6	High	R6. The lounge/tv room in "Picu" was jamming on the floor and would not fully close into its rebate.	Nov-22	Nov-22	Amber	27/06/2022- Survey by AFT been undertaken costs are due back next week.
BFS/SM/AMD/001077 88	May-22		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/0010778 8	Open	BFS/SM/AMD/00107788_00 8	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	Nov-22	Amber	27/06/2022- Survey by AFT been undertaken costs are due back next week.
Admin	lun 22	2022/22	Mid and Mast Malas	Latter of Fire Cafety	Onon	Admin	High	D1 A number of fire recipting deers were found to have defeate. All fire	Oat 27	Oct 27	Ambar	00/07/2022 ANNUNESS Later above the 22 constabilities in Oatoba 2027 Blood 4 will be considered in advance fabric/later
Admin - General/00329499	Jun-22		Mid and West Wales Fire and Rescue Service	Failures Red Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329499_001	півп	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
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	Open	Admin - General/00329499_002	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
Admin - General/00329499	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	<u> </u>	Open	Admin - General/00329499_003	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
Admin - General/00329499	Jun-22		Mid and West Wales Fire and Rescue Service	Failures Red Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329499_004	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
Admin - General/00329499	Jun-22		Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Red Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329499_005	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
Admin - General/00329499	Jun-22		Mid and West Wales Fire and Rescue Service		Open	Admin - General/00329499_006	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment

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Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Status of report	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule, Amber- on schedule, Green- complete)	Progress update/Reason overdue
Admin - General/00329499	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Failures Red Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329499_007	High	R7. An assessment should be undertaken to ensure there is a suitable and up to date Fire management Plan. The fire management plan should be reviewed when situations or circumstances change within the building.	Sep-22	Sep-22	Amber	
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	Open	Admin - General/00329499_008	High	R8. The responsibility for Horizontal, Vertical and Total Evacuation lies with responsible persons under The Order, and staff working for such responsible persons, and not the Fire and Rescue Service. It is essential that all staff, including agency and temporary staff, are fully trained in evacuation procedures for the premises You should ensure that staffing levels are sufficient and available at all material times to facilitate the movement of residents to safety within the determined safe evacuation time' Evidence of this training must be made available to fire safety inspecting officers when they audit your premises. It is good practise to have a live evacuation training session to ensure that the evacuation procedure is suitable and sufficient	Jan-23	Jan-23	Amber	
Admin - General/00329498	Jun-22	2022/23	Fire and Rescue Service	Failures Puple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329498_001	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	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2027. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
Admin - General/00329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Failures Puple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329498_002	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	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2027. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
Admin - General/00329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Failures Puple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329498_003	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
Admin - General/00329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Puple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329498_004	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
Admin - General/00329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Failures Puple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329498_005	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
Admin - General/00329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Eletter of Fire Safety Failures Puple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329498_006	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
Admin - General/00329498	Jun-22	2022/23	Fire and Rescue Service	Letter of Fire Safety Failures Puple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329498_007	High	R7. An assessment should be undertaken to ensure there is a suitable and up to date Fire management Plan. The fire management plan should be reviewed when situations or circumstances change within the building.		Sep-22	Amber	
Admin - General/00329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Puple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329498_008	High	R8. The responsibility for Horizontal, Vertical and Total Evacuation lies with responsible persons under The Order, and staff working for such responsible persons, and not the Fire and Rescue Service. It is essential that all staff, including agency and temporary staff, are fully trained in evacuation procedures for the premises You should ensure that staffing levels are sufficient and available at all material times to facilitate the movement of residents to safety within the determined safe evacuation time Evidence of this training must be made available to fire safety inspecting officers when they audit your premises. It is good practise to have a live evacuation training session to ensure that the evacuation procedure is suitable and sufficient	Jan-23	Jan-23	Amber	
Admin - General/00111715	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Matters Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00111715_001	High	R1. Additional electrical sockets are to be provided where trailing leads, adapters or extension leads are in use. Multi-plug adaptors can be hazardous and are not to be used.	Nov-22	Nov-22	Amber	
Admin - General/00111715	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Matters Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00111715_002	High	R2. An assessment should be able to take him to ensure that all areas have suitable and sufficient Firefighting equipment installed and in suitable location. The appropriate type, number and size of extinguisher should be provided. Further information is available in BS 5306-8.	Nov-22	Nov-22	Amber	

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Reference Number	Date of	Financial Yea	r Report Issued By	Report Title	Status of	Recommendation	Priority Level	Recommendation	Original	Revised	Status (Red-	Progress update/Reason overdue
Neteretice Number	report	Tillalicial Tea	neport issued by	neport nue	report	Reference	Priority Level	RECOMMENDATION		Completion Date	behind schedule, Amber- on schedule,	riogress apparet neeson over use
											Green- complete)	
Admin - General/00111715	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Matters of Fire Safety Matters Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00111715_003	High	R3. All combustible materials, ignition sources and obstructions should be removed from all the means of escape routes, internally and externally. Ensuring good housekeeping is maintained.	Nov-22	Nov-22	Amber	
Admin - General/00111715	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00111715_004	High	R4. A Review of signage is required throughout the property. Indicate the nearest way out (in case of fire) with fire exit signs that comply with BS 54F. Exit Signs must be visible for people that might need to refer to them.	Nov-22	Nov-22	Amber	
Admin - General/00111715	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00111715_005	High	R5. Records must be kept of events, tests, or maintenance of the following equipment / installations. Records must be made available to an inspector during an audit: •Suppression system •Boller shutter •Dampers •Automatic operated vent (AOV) linked to the fire alarm system It is recommended the records are kept in a logbook	Nov-22	Nov-22	Amber	
Admin - General/00111715	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00111715_006	High	R6. Effective systems of communication must be established with those who are responsible for all departments to ensure all relevant persons are provided with suitable and sufficient information in respect of the fire safety measures implemented. The cooperation must ensure that the shared fire safety measures protect you all.	Nov-22	Nov-22	Amber	
Admin - General/00329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329501_001	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
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	Open	Admin - General/00329501_002	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 2027. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
Admin - General/00329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Eletter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329501_003	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
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	Open	Admin - General/00329501_004	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
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	Open	Admin - General/00329501_005	High	RS. 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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
Admin - General/00329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	File Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329501_006	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: - •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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
Admin - General/00329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	ELETTER OF FIRE Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329501_007	High	R7. An assessment should be undertaken to ensure there is a suitable and up to date Fire management Plan. The fire management plan should be reviewed when situations or circumstances change within the building.	Sep-22	Sep-22	Amber	
Admin - General/00329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329501_008	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-22	Amber	
Admin - General/00329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Eletter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Open	Admin - General/00329501_009	High	R9. Records must be kept of events, tests, or maintenance of the following equipment / installations. Records must be made available to an inspector during an audit: -Suppression system -Automatic operated vent (AOV) linked to the fire alarm system It is recommended the records are kept in a logbook	Sep-22	Sep-22	Amber	

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Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Status of report	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule, Amber- on schedule, Green- complete)	Progress update/Reason overdue
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	Open	Admin - General/00329501_010	High	R10. The responsibility for Horizontal, Vertical and Total Evacuation lies with responsible persons under The Order, and staff working for such responsible persons, and not the Fire and Rescue Service. It is essential that all staff, including agency and temporary staff, are fully trained in evacuation procedures for the premises You should ensure that staffing levels are sufficient and available at all material times to facilitate the movement of residents to safety within the determined safe evacuation time! Evidence of this training must be made available to fire safety inspecting officers when they audit your premises. It is good practise to have a live evacuation training session to ensure that the evacuation procedure is suitable and sufficient	Jan-23	Jan-23	Amber	
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,	Open	Admin - General/00329500_001	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
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	Open	Admin - General/00329500_002	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
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	Open	Admin - General/00329500_003	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
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	Open	Admin - General/00329500_004	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
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	Open	Admin - General/00329500_005	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
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	Open	Admin - General/00329500_006	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. Phase 1 will be completed in advance of this (letters states January 2025)- further survey to be undertaken at BGH site due to its complex environment
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	Open	Admin - General/00329500_007	High	R7. An assessment should be undertaken to ensure there is a suitable and up to date Fire management Plan. The fire management plan should be reviewed when situations or circumstances change within the building.	Sep-22	Sep-22	Amber	
Admin - General/00329500	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service		Open	Admin - General/00329500_008	High	R8. The automatic fire alarm system does not meet the current standard. The system is to be upgraded to meet a category L1 system., As specified in the British standard: Part 1 - "Fire Detection and Alarm Systems in Buildings", or the equivalent European Standard.	Sep-22	Sep-22	Amber	
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	Open	Admin - General/00329500_009	High	R9. Records must be kept of events, tests, or maintenance of the following equipment / installations. Records must be made available to an inspector during an audit: *Dampers *Roller shutter doors It is recommended the records are kept in a logbook	Sep-22	Sep-22	Amber	

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		Fire Safety Gove licy - Self Assess					
Ref	Aspect/Objective	Compliance Status Y/N/C (C= further confirmation needed)	Action Owner	Review Date	Risk Score RAG (HML)	Completion Status RAG	Comments
HB Requirements	Statutory Duties Understood	Υ	N/A				
	HB to Minimise risk	Υ	N/A				
	HB commitment to fire safety	Υ	N/A				
	HB to set out responsibilities	Υ	N/A				
	HB to outline arrangements throughout HB	Υ	N/A				
	Policy scope to all staff	Υ	N/A				
	HB implement strong culture for fire safety	Υ	N/A				
	HB nominated BL director for fire	Υ	N/A				
	HB has appointed FSM to take the lead	Υ	N/A				
	HB has appointed FSA's for advisors/training activities	v	N/A				
	HB has nominated responsible persons and clear instructions / expectations	v	N/A				
	HB has all FRA's for its complete portfolio	v	N/A				
	HB has suitable sufficient means for raising alarm in case of fire	Y.	N/A				
	HB has suitable sufficient means for raising alarm in case of fire	Y	IN/A				
	HB has suitable and sufficient evacuation procedures in place for all areas, at all times HB premises are occupied without reliance on external services.	С	RJ	Aug-22	М		Review HB Fire Policy - acute/community/satellite/gp surgeries will have evacuation plans in place
	HB has appropriate fire safety training for all members of staff - considering risk.	Υ	N/A				
	HB has identification of fire hazards and risks associated with its estate.	Υ	N/A				
	HB has provision of appropriately funded prioritised action plans to address fire safety risks	Υ	N/A				
	HB has reporting and monitoring for unwanted fire signals.	Υ	N/A				
	HB has developed partnership initiatives with other bodies and agencies in fire safety	Y	N/A				
			N/A				
	HB to ensure that those tasked with management of fire discharge responsibilities diligently.	Y	N/A				
	HB to have clear defined management structure for the delivery control and monitoring of fire safety	Υ	N/A				
	HB to have a programme in place to review fire safety risks.	Υ	N/A				
	HB to have developed action plans to control and mitigate risk that comply with		,				
	legislation.	Υ	N/A				
				Aug 22			Review HB Fire Policy - only wards and high risk areas require specific fire evacuation plans to those outside of the sites specific fire evacuation plan
	HB to have disseminated fire emergency action plans for each department and building.	\(\cup \)	RJ	Aug-22	IVI		sites specific fire evacuation plan
	HB to have a programme of appropriate fire safety training.	Y	N/A				
	HB to have implemented monitoring and reporting mechanisms go ensure good levels of compliance.	Υ	N/A				
	HB's CEO is made aware of the accountability as defined in Article 11 RRO - all persons who have control must ensure arrangements are in place for planning and control and monitoring fire safety.	Υ	N/A				
	HB CEO to ensure that adequate resources are in place to meet statutory requirements.	Υ	N/A				
	HB CEO to nominate appropriate executive lead for fire safety This person is known as the DP.	Υ	N/A				
	HB's DP to report to board on fire safety issues proposing programmes of work relating to fire safety as part of the annual operational business plan.	Υ	N/A				
	HB's DP to be responsible for submitting HB's annual fire audit to NWSSP-SES	Υ	N/A				
	HB's DP to ensure that the HB has implemented effective organisational wide fire safety groups and sub groups.	Υ	N/A				
	HB's DP to ensure that the board are made aware of the levels of assurance for fire safety within the organisation.	Υ	N/A				
	HB's DoF to ensure adequate resources and expertise is available to formulate a fire management structure	Υ	N/A				
	HB's DoF also permitted following DPF to submit online Audit to NWSSP-SES.	Υ	N/A				

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	HB's DoF also permitted to annually prepare status of compliance report for the DPF.	Υ	N/A			
	HB's HoO to ensure adequate resources are available in supporting and maintaining HB's					
	fire infrastructure and all fire safety matters are communicated regularly to the DoF.	Υ	N/A			
ast & West Operations Managers	HB's E&W OM's to ensure day to day coordination of their team at the acute sites.	Υ	N/A			
	HB's E&W OM's to ensure sufficient resources in operational maintenance function to carry out maintenance on fire safety infrastructure on planned maintenance.	V	N/A			
	carry out maintenance on the safety infrastructure on planned maintenance.		IN/A			
	HB's E&W OM's to ensure that they will undertake periodic performance reviews on					
	maintenance and inform the HoO and HFSM of any concerns or risks of non compliance.	c	SD	Aug-22	М	Ops fire paper improvement
	HB's E&W OM's will be required to provide accurate information for fire safety audit					
	submission.	Υ	N/A			
	HB's E&W ASOM's responsible for day to day management of sites under their control.	Y	N/A			
	ASOM's also responsible for coordinating the activities of all relevant maintenance staff to					
ssistant Site Ops Managers	ensure that appropriate maintenance arrangements are in place for fire safety	ΙΥ	N/A			
	They must therefore liaise very closely with support staff, such as Operational Support Officers/Site Works Supervisors/Assistant Building Manager (GGH Only) and any					
	competent person or operational maintenance operative who is involved in any fire					
	related maintenance activity	Υ	N/A			
	Fire Detection and Alarm systems, including graphical user interfaces, are regularly		<u> </u>			
	serviced, maintained and tested in accordance with the relevant British Standard and					
	results recorded accordingly.	Υ	N/A			
	Information relating to the fire alarm infrastructure is accurate, including making					
	sure that any graphical interfaces/drawings are regularly updated.	С	SD	Aug-22	М	Review
	 Ensure that cause and effect systems are appropriate and receive regular testing/modifications/improvements. 		SD	Aug-22	l _M	Review
	Ensure that the fire alarm zones are correct and clearly displayed.	v	N/A	Aug-22	IVI	Neview
	Ensure regular testing of emergency lighting systems.	V	N/A			
	Ensure regular testing of emergency lighting systems.	v	N/A			
	Ensure regular testing of fire dampers and duct work systems.	v	N/A			
	Ensure that permits are correctly completed	v	N/A			
	That any necessary contracts are in place with external providers (Fire Extinguisher)	1	IN/A			
	Maintenance/Suppression Systems etc.)	Υ	N/A			
	Liaise closely with the Fire Safety Manager and Fire Safety Advisers and report any known		,			
	defects or concerns of non-compliance and any subsequent Statutory Capital Investments					
	that may be required.	Υ	N/A			
	Have a detailed level of awareness of all fire safety features and their purpose.	l	 			
.8 FSM responsibilities		Υ	N/A			
	Reporting non-compliance with legislation, policies and procedures to the DPF	Υ	N/A			
	 Regularly arrange, coordinate and chair the HDUHB's Estates Departmental Fire Safety Team Meetings. 	l _v	N/A			Review
	Develop regular compliance status reports for respective line managers.	Y	N/A N/A			Review
	Control statutory capital funding to address non-compliance in relation to fire	Y	N/A			
	safety.	l _Y	N/A			
	Fully recognise the fire safety risks particular to the HDUHB.	Y	N/A			
	Fully investigate incidents of fire and report findings as necessary.		N/A			
	Accurately record non-compliance aspects of fire safety on the Estates Corporate					
	Risk Register.	Υ	N/A			
	Review the effectiveness of the fire safety team and its subsequent workload, make					
	necessary work plan changes to accommodate certain activities.	Υ	N/A			
	Support and address requirements for disabled staff and patients (related to fire					
	procedures).	ΙΥ	N/A			
	Ensure the HDUHB continues to operate effective fire safety groups (FSG's), continues acute community and Montal Health agreets of fire safety.	V	I _{NI/A}			
	 capturing acute, community and Mental Health aspects of fire safety. Ensure the HDUHB complies with all fire safety legislation and guidance where 		N/A			
	• Ensure the HDOHB compiles with all fire safety legislation and guidance where necessary.	Y	N/A			
	 Ensure the HDUHB has an effective fire safety policy and subsequent fire safety 		,			
	procedures.	Υ	N/A			
	Ensure that Fire Risk Assessments are completed and that risk mitigation measures		<u> </u>			
	are implemented.	Υ	N/A			
	Ensure that all new schemes and capital developments comply with fire					FST to agree site procedures for this t
	requirements.	lc	RJ with FST	Sep-22	M	be in place - part of design process

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	• Ensure that there is continued monitoring of HDUHB's fire safety management					
	system, including the development of long term strategic investment planning for fire					
	safety.	Υ	N/A			
	Develop the HDUHB's fire safety strategy and site fire procedures.	Υ	N/A			
	 Develop an effective training programme for HDUHB staff, see Appendix 'A' (Training needs analysis). 	Υ	N/A			
	• Liaise with property landlords, specifically where HDUHB staff utilise non HDUHB premises to confirm suitable fire safety controls are in place.	٧	N/A			
	Reporting of fire incidents in accordance with current practice.	V	N/A			
	Monitoring and mitigating unwanted fire incidents.	<u> </u>	N/A			
	Liaising with enforcing authorities.	<u> </u>	<u> </u>			
	Liaising with emorcing authorities. Liaising with other key stakeholder departments and managers.	Y	N/A N/A			
	Liaising with other key stakeholder departments and managers.	<u>Y</u>	IN/A			
	 Liaising with operational maintenance management to ensure that appropriate monitoring, inspection and maintenance of fire safety systems is in place. 	Υ	N/A			
	Develop and maintain effective relationships with external bodies in relation to fire					
	safety related matters.	Υ	N/A			
			N/A			
FSA's responsibilities	 Providing expert advice on the application and interpretation of fire legislation and fire safety guidance, including Firecode. 	Υ	N/A			
	Advising on the content of HDUHB's fire safety policy.	Υ	N/A			
	Assisting with the development of HDUHB's fire precautions systems and fire safety					
	procedures.	Υ	N/A			
	Working closely with Maintenance Representatives and Fire Safety Manager.	Υ	N/A			
	Attending Fire Safety Group meetings for the areas that fall under their					
	responsibility.	Υ	N/A			
	Maintaining site specific fire management plans and manuals.	Υ	N/A			Review
	Assisting with the development of a suitable fire training programme, including delivery of training and recording staff attendance to support the Fire Safety Manager.	Υ	N/A			
	Liaising with the enforcing authorities on technical issues.	Υ	N/A			
	Liaising with managers and staff on fire safety issues.	Υ	N/A			
	Liaising with the Authorising Engineer (Fire) at NHS Welsh Shared Services		11771			
	Partnership – Specialist Estate Services (NWSSP - SES).	Υ	N/A			
	Conducting and reviewing suitable and sufficient fire risk assessments for all					
	premises within their area of responsibility and agreeing action planning with the					
	respective managers.	Υ	N/A			
	Carrying out the annual fire audit for their respective areas of responsibility and					
	agreeing action planning with the respective managers.	Υ	N/A			
	• Ensuring that fire risk assessments are undertaken and reviewed within agreed					
	timescales and that they are updated to reflect investment, infrastructure changes or change in circumstances.	V	NI/A			
	Assisting in identifying annual estate capital programmes to meet and maintain fire	Y	N/A			
	compliance requirements	v	N/A			
Fire Safety Premises Management	each premises owned or occupied by HDUHB a premises manager will be nominated in	<u> </u>	IN/A			
Responsibilities	writing to champion all necessary fire safety issues within that premises	Υ	N/A			
Departmental Managers	Appropriate levels of management are always available to ensure decisions can be		· · ·			
Responsibilities	made regardless of the time of day.	Υ	N/A			
	Effective fire safety management arrangements are encouraged throughout their					
	department.	Υ	N/A			
	 Staff have received the appropriate level of fire safety training commensurate to their role and the risks that they face. 	Y	N/A			
	They nominate a fire safety warden and if necessary, deputy wardens to be the eyes					
	and ears for the department. See section 3.12 for further info.	Υ	N/A			Lists and training dates agreed
	They have effective communication mechanisms in place to cascade fire safety information throughout the department to all staff including line managers/supervisors.					
		Υ	N/A			incompany design and the second secon
	Actions, which are within their direct control, that are identified on the Fire Risk					improved when Boris system is
	Assessment, are dealt with in a timescales stipulated. If this is not possible then the action					implemented review efficiency by July
	should be escalated to the Fire Safety team	Υ	N/A			22
	All relevant shortcomings are communicated to the Fire Safety Manager.	Υ	N/A			
	 All staff working within their designated area of control are aware of the emergency evacuation procedures for the department or area they are working in. 	c	Dept Managers	Sep-22	M	difficult to assess this - need review
	They regularly monitor the fire safety training performance within their department					
	to ensure that all staff attend training as per the TNA, including those employed from	_				liere in a
	agencies or bank staff that are required at short notice.	C	Dept Managers	Sep-22	M	difficult to assess this - need review

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	They regularly communicate fire safety issues during meetings or team briefs to all					
	staff, providing suitable means by which staff can raise or communicate concerns to line			· ·		lies in a second
	managers, which can be reported to the Fire Safety Team.		Dept Managers	Sep-22	M	difficult to assess this - need review
	All patient areas have mechanisms in place to ensure adequate staff to be available at all			· ·		
	times to provide assistance with patient evacuation in a fire emergency		Dept Managers	Sep-22	M	difficult to assess this - need review
				· ·		We have implemented FSW's but a
	implementing fire safety wardens within departments across the organisation as detailed			· ·		further review on numbers across the
Fire Safety Wardens	in paragraph 7.29 HTM 05 – 01 Managing healthcare fire safety	,	N/A	· ·		HB is needed.
	Act as the eyes and ears for the department in relation to fire safety matters.	′	N/A			
	Monitor fire safety issues within the department as identified by their training.	′	N/A	· ·		
	Regularly attend the warden refresher training when required.	′	N/A			
	Ensure that arrangements are in place for effective day-to-day monitoring to		,			
	support this Fire Safety Policy.	,	N/A	· ·		
	Maintain a log book of warden checks and make a note of issues or concerns that					
	have been identified for cascading/reporting. Standard templates are available.	,	N/A	· ·		
	If required, support the fire response team during a fire safety incident/emergency	′	N/A			
	The HDUHB must ensure it implements the appropriate mechanisms so that it can					
	respond promptly and efficiently to a fire alarm activation or fire incident within its			· ·		
Fire Response Team	premise	,	N/A	· ·		
Switchboard	The switchboard team have an integral part to play in the response to fire signals	′	N/A			
	It is essential that HDUHB promotes a strong safety culture throughout the organisation		· ·			
	that supports and promotes fire safety. All staff have a responsibility for their own safety	,		,		
	and the safety of others as detailed in the Health and safety at work etc. Act 1974. HDUHB		N/A	· ·		
	expect all staff to:			· ·		
	To analyticate to fine territorial consistency with the firm of th					
	 To participate in fire training in accordance with their own training needs, this must be discussed with the line manager to ascertain which specific level of training is required. 		N/A	· ·		
	be discussed with the line manager to ascertain which specific level of training is required.	′		· ·		
	To know what to do in the event of a fire or on hearing the fire alarm.	′	N/A	,		
	To know the location of fire alarm points and firefighting equipment.	′	N/A			
	To know how to use the fire extinguishers and their uses on different fires.	,	N/A	-		
	To make certain that they are familiar with all means of safe escape in the event of					
	fire.	,	N/A	· ·		
						Walkabouts are continually happening
	To minimise potential of fire by ensuring good housekeeping.	<i>,</i>	N/A	· ·		on the acute sites to embed this issue.
	 To ensure that any equipment used in in safe working condition and is used 		 			0.1 0.10 00000 01000 00 0111000 01110 10000
	appropriately and safely and in accordance with manufacturer's guidelines to avoid any			· ·		
	unnecessary risks.	<i>'</i>	N/A	· ·		
	To ensure that no unauthorised electrical items are used, operated or brought into		,			
	any HDUHB premises unless specifically agreed with the Fire Safety Team (FST). All			· ·		
	electrical equipment must be kept in good working condition and appropriately PAT			· ·		
	tested (Portable Appliance Testing) OR, if classified as a medical device, must be electrical			· ·		
	safety tested in accordance with MHRA DB2006(05) Chapter 4.4 and IEC – 60601-01 prior			· ·		forms part of electrical safety global e-
	to being taken back into service.	,	All staff	· ·		mail
	To report any concerns or issues to line managers.	′	N/A			
	expertise and advice will be sought from NWSSP-SES - NHS Wales Shared Services					
	Partnership – Specialist Estates Services.	,	N/A	,	1	
	HDUHB will only use Approved Competent Persons to undertake installation and/or					
I DE L'OMPETENT PERSON LEIREL	maintenance of all fire-related services	,	N/A	,	1	
	The HDUHB will ensure that an organisational wide overarching Fire Safety Group (FSG) is					
	established	,	N/A	,	1	
	Due to the scale of the organisation the HDUHB will also implement a variety of fire safety			,		
	sub groups (FSSG) also known as feeder groups	′	N/A	,		
						-
Evacuation Procedures	The FSA's will be responsible for devising suitable fire evacuation plans/strategies for all			,	1	
	areas within HDUHB, as they will differ depending upon the requirements of each area	<u> </u>	RJ	Oct-22	M	Review
	These plans will be displayed where required and will also be specifically documented			,	1	
	with the individual fire safety management plans and tested periodically.		RJ	Oct-22	M	Review
	The HDUHB will devise a rolling programme for periodically undertaking formal					
	evacuation testing to ensure that at least one high dependency area and one in-patient			,	1	
	area (or similar) is tested annually for an agreed premises.	<u>′</u>	N/A			
	The programme must be facilitated, and arranged through the respective FSSG. All staff					
	The programme must be facilitated, and arranged through the respective FSSG. All staff must be made fully aware of their individual evacuation procedures and what to do in the			i		

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	Evidence and subsequent outcomes of evacuation exercises must be discussed and					
	retained by both FSA and departmental managers.	Υ	N/A			
	suitable provisions of equipment must be made available along with the appropriate					
	number of staff trained at all times to operate them.	Υ	N/A			
	It is essential that where there are specific requirements for patient evacuation, such as plus sized (Bariatric) patients, this must be clearly identified on the patients handling					
	assessment form, completed by a qualified clinician in line with manual handling					
	procedures/policy	Υ	N/A			
	The FSA and Manual Handling Advisors must be made fully aware (by the bed manager or					
	ward manager) of the outcome of this assessment to ensure that the risks associated with					
	the transfer of plus sized patients have been fully considered, articulated and mitigated by					
	HDUHB. This may on occasions require a specific fire evacuation procedure to be	.,				
	developed by the FSA's.	Y	N/A			BCP's and RA's have been developed and
						action cards are in place - wider review
Major Incidents	departments must be able to demonstrate that suitable emergency plans are in place to deal with situations	C (y?)	RJ and PE	Oct-22	NA	needed.
Fire Risk Assessments	Only designated members of the FST will be permitted to undertake FRA's for HDUHB	v (y:)	N/A	OC1-22	IVI	needed.
FILE RISK ASSESSITIETIES	All fire risk assessments are reviewed at either a predetermined date specified within the	T	IN/A			
	fire risk assessment or when circumstances within the area change	Υ	N/A			
	The significant findings of the Fire risk assessments must be recorded and communicated		1			improved when Boris system is
	to subsequent managers for action planning.	Υ	N/A			implemented
	Departmental managers, must be made fully aware of any changes within their area of					Review - suggest global instruction for
Organisational Risk Profiling and Risk Management	control. If staff require any advice or wish to discuss changes, they must contact the fire					this to make staff aware. Forms part of
lvianagement	safety team directly	у	N/A			management training too.
	A risk assessment will determine if visual alarms are to be provided in public areas to					
	assist in warning those occupants with hearing difficulties. Vibrating pagers triggered by					
5 19 4 4 2040	the fire alarm system can also be issued to staff with hearing difficulties. This should be	v	1.1/2			
Equality Act 2010	discussed with the fire safety advisors. Evacuation - In all patient areas evacuation will be staff-assisted for both patients and	Y	N/A			
	disabled visitors alike utilising the appropriate evacuation aids as necessary.	Υ	N/A			
	HDUHB also has procedures for developing bespoke Personal Emergency Evacuation		1.4			
	Plans (PEEPS) for all disabled employees.	Υ	N/A			
	Where Building Regulations apply to these schemes, the fire strategy will form part of the					
Building Regulations	supporting information for the Building Regulation submission.	Υ	N/A			
	Extra vigilance and control must be adopted by the HDUHB to reduce the potential for					
Arson	Arson to occur. It is essential that departmental managers actively take control of their areas and report any specific concerns to the Fire Safety Team	v	N/A			Forms part of training at L2 and L5
Alson	areas and report any specific concerns to the rife sarety realif	<u> </u>	IV/A			This is not in place - desk top exercise
	It is imperative that a suitable and sufficient risk assessment be carried out by staff to					needed to determine areas where
	control the risks, where required. If there is any doubt or concerns, staff must contact the					DSEAR assessments will be needed.
(DSEAR)	Fire Safety Team and/or Health and Safety Managers for further advice and guidance.	N	PE	Oct-22	М	Compliance team action.
	HDUHB must ensure that it implements appropriate controls for contractor access for all					·
	its premises. The HDUHB has a Control of Contractors policy and any contractor who is					
	appointed by the HDUHB must comply with the policy at all times they are on HDUHB					New procedures in place - review of this
Site Control and Contractors	property	Υ	N/A			planned for mid 2022.
Unwanted Fire Signals	Records of fires, false alarms and unwanted fire signals are recorded locally by the FSM and reported to NWSSP-SES annually.	v	N/A			
Onwanted Fire Signals	The FST must analyse statistics regularly with respective managers to ensure there is	1	IN/A			
	ongoing commitment and agreed solutions in which to reduce them. Refer to WHTM 05-					
	03 part H for further information relating to reducing false alarms and unwanted fire					
	signals	Υ	N/A			
	It is essential that HDUHB has a workforce that is suitably informed, instructed and trained					
	and that they are provided with the necessary learning to support the organisation's fire					TNA in place - Global e-mails are needed
Fire safety training	safety management system	Υ	N/A			to cascade this message to all staff.
Fine Sefety Testelle - Buy	A detailed Fire Safety Training Programme has been prepared by the Fire Safety Team,	V	NI/A			
Fire Safety Training Programme	which considers the needs of the entire organisation Managers who are specifically responsible for staff must ensure that each member of staff	Υ	N/A			
	within their control is assigned to the correct training programme and encourage the need					
	for training	Υ	N/A			
	The Fire Safety Training Programme, which is periodically reviewed, broadly identifies the					
	following training: Refer to appendix A in the fire safety policy for a detailed analysis on all					
	training	Υ	N/A	1		
	All now staff startors must complete the online a learning fire and the training and					
	All new staff starters must complete the online e-learning fire safety training module as part of their induction process. All staff regardless of their role should receive a local					
Fire Safety Awareness E-Learning	induction by line management immediately on commencement of work in their workplace	Υ	N/A			
,	, , , , , , , , , , , , , , , , , , , ,		1 .	1		

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General Fire Safety Training-Level	1					
and Level 2		Υ	N/A			As part of TNA
Level 3 Advanced Specific Training		Υ	N/A			As part of TNA
Level 4 Fire Safety Warden Training		Υ	N/A			As part of TNA
Level 5 Managers Training		Υ	N/A			As part of TNA
Fire Safety Audit	Annual fire safety audits are conducted in accordance with WHC (04)010 using the intranet based Fire Audit Information System facilitated by NWSSP-SES on behalf of the Welsh Government	Y	N/A			
. He suicty Addit	Weish Government		1,47.			Other related policies are available that
Policies	Refer to other policies	Υ	N/A			are listed in the Fire Policy.
	·		•			Smoke free group established and
						measures have been implemented to
	For further information, please refer to HDUHB's Smoke Free Policy					consider this. Further meetings on this
Smoke Free Policy		Υ	N/A			planned for 2022 with PHW.
Smoking in Mental Health Areas						RJ to obtain status on this control with
Silloking in Wentai Health Aleas	How is this being controlled by ward managers	С	ward managers	Oct-22	М	ward managers
Car Parking/Roads	The designated fire roads on all HDUHB's premises must be adequately maintained, they must be clear of obstruction at all times to allow for emergency vehicle attendance	С	TRANSPORT TEAM	Oct-22	М	Review with transport team - Estates would be made aware of any site issues
Waste Management	The collection, storage and disposal of waste will be undertaken on a regular basis in accordance with the HDUHB's waste policy and procedures	Υ	N/A			Procedures in place
Furniture and Textiles	Any new or replacement furniture and textiles should be requisitioned through the Procurement Department who must ensure that they comply with the detailed guidance contained Firecode WHTM 05-03 Operational Provisions Part C – Textiles and Furniture.	Y	N/A			As part of the HB's policy
SCHEDULE OF premises SITE MANAGERS	The HDUHB has a nominated premises manager for each individual site, who will be expected to champion all fire safety issues throughout their areas of control.	С	RJ	Sep-22	М	As part of the previous item on RP list.
Procedures for Reporting Fires (Wales)	More serious outbreaks such as fires involving death, injury, large scale evacuation or damage on a large scale are to be reported immediately to the Welsh Government	Y	N/A			

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