

HEALTH & SAFETY COMMITTEE PWYLLGOR IECHYD A DIOGELWCH

DYDDIAD Y CYFARFOD: DATE OF MEETING:	09 January 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Fire Safety Management Update Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Andrew Carruthers, Director of Operations
SWYDDOG ADRODD: REPORTING OFFICER:	Rob Elliott, Director of Estates, Facilities and Capital Management

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA SBAR REPORT 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. This report provides an update on progress on each of these areas since the previous HSC Meeting held on 14th November 2022.

Asesiad / Assessment

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

1.1 Withybush General Hospital (WGH)

Phase 1

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

As noted at the previous meeting of the Health & Safety Committee, a revised completion date of July 2023 has now been accepted by the Project Management Team, following all their due diligence checks.

This programme update has been fully reported to the Mid and West Wales Fire and Rescue Service (MWWFRS) at a formal meeting held on 8th December 2022 and MWWFRS fully accept the need for this adjustment.

MWWFRS have noted that they will look to revisit the HDdUHB prior to the current proposed end date for this FEN (March 2023) so that an appropriate extension can be considered at that point.

Noting the above, the financial position has become more challenging. This will continue to be reported to the Capital Sub Committee (CSC) via the highlight reporting system and regular reporting to Welsh Government (WG) via the dashboard return. In addition, the Project Team includes members of the NHS Wales Shared Services Partnership - Specialist Estates Services (NWSSP-SES) and NWSSP - Audit and Assurance Services (NWSSP-AAS) to provide full assurance that all matters are being appropriately managed.

Regular dialogue continues with MWWFRS, the Enforcing Officers continue to review activities on site, fully understand the challenging work required and are supportive of HDdUHB actions.

Phase 2

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

The programme for completion of the Business Justification Case (BJC) remains at Quarter 4 of the 2022/23 financial year (FY).

Mobilisation of works on site is anticipated late in Quarter 1 of the 2023/24 FY (subject to the due diligence work involved in the BJC development). This will also need 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. Early indications are that, due to the multiple Decant needs of Ward areas, the programme may need to be extended as part of the due diligence work within the Business Case. As this becomes more clear, MWWFRS will be fully involved in discussions, so that appropriate changes can be made to the Phase 2 Enforcement dates.

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 the timeline becomes necessary.

Decant Arrangements to Support Phase 2 Work

At the November 2022 Committee meeting it was noted that the HDdUHB was still dealing with final scrutiny questions raised by Welsh Government (WG).

It is now possible to confirm that the project associated with this Decant Ward was fully approved by WG on 22nd November 2022, in the sum of £8.313m.

The programme for this project is now established, with design and off-site manufacture of the Ward structure now underway and a physical start on site planned for late March 2023.

Completion date is currently planned for December 2023/January 2024.

Updates can be provided as off-site manufacturing, which is a key part of the delivery programme, continues.

The impact of the above on the Phase 2 programme is currently being considered, noting that there are several areas in Phase 2 (X-ray etc.) which will not require Decant arrangements allowing these works to be managed in the early programme stages.

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

1.2 Glangwili General Hospital (GGH)

Phase 1

All remaining horizontal escape routes at GGH (FEN KS/890/08 Completion Date July 2022) (Currently extended to February 2023).

As noted at the previous meeting of the Health & Safety Committee, a revised completion date of November 2023 has now been accepted by the Project Management Team following all their due diligence checks.

This programme update has been fully reported to MWWFRS at a formal meeting held on 8th December 2022 and MWWFRS fully accept the need for this adjustment.

MWWFRS have noted that they will look to revisit the HDdUHB prior to the current proposed end date for this Enforcement Notice (February 2023), so that an appropriate extension can be considered at that point.

Regular dialogue continues with MWWFRS, the Enforcing Officers continue to review regular activities on site, fully understand the challenging work required and are supportive of HDdUHB actions.

Phase 2

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

As reported at the previous meeting of the Health & Safety Committee, due to Supply Chain capacity issues the expected completion date for the BJC would be circa August 2023. This remains the current programme.

When considering the above and the normal WG scrutiny periods etc., our expectation is that Phase 2 works will mobilise December 2023/January 2024.

Further updates will be provided as the BJC work continues.

MWWFRS have been fully briefed on this and are supportive, noting good progress on Phase 1.

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

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

1.3 Additional Letters of Fire Safety Matters

Tregaron Hospital

- All works have now been concluded to the satisfaction of MWWFRS
- The above being subject to controlled access to first floor areas for storage/maintenance access only
 We will remove this from future reports as now completed.

Glangwili General Hospital (GGH)

- As reported at the November 2022 Committee, the HDdUHB awaits the final letter on GGH
 - We will remove this from future reports as now completed.

> 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.

As noted in the previous update to the Health & Safety Committee, MWWFRS have revised their LoFSM to align with the forecast delivery plan the HDdUHB has developed.

The HDdUHB is now progressing the Programme Business Case (PBC). This will be based on the preliminary work to fully understand the technical challenges to support this programme. MWWFRS are fully aware that some programme dates may need to be reviewed.

The HDdUHB presented a revised delivery plan to MWWFRS for the PBC at the meeting held on 8th December 2022. This was well received at the meeting, and we await their comments.

Further updates to the Health & Safety Committee will be provided as the work continues.

In addition to the above Business Case work, there are a number of smaller items required which the HDdUHB are delivering via a Discretionary Capital allocation. It is expected this work will be concluded by end of March 2023, in line with MWWFRS requirements. A full action plan to provide assurance on this work has been supplied to MWWFRS.

Regular dialogue with MWWFRS and WG continues as these Business Cases are being developed.

> BGH Residential Blocks

- At the November 2022 Committee we advised that works were due to complete in mid-November 2022.
- As part of the two stage validation process (Note: No building control sign off at Ceredigion County Council) the HDdUHB independent assessor advised a number of defects in the contractor's work which are now in the process of being corrected.
- It is envisaged that these works will be completed by mid-January 2023 (noting the Christmas Holiday period)
- This information has been fully briefed to MWWFRS who will undertake their visit to sign off these works when they are complete.

> Prince Philip Hospital (PPH)

- At the November 2022 Committee meeting we advised the following position:
 - Capital costing work to deliver a workplan over a phased programme was already in progress
 - A meeting was planned with MWWFRS for mid November 2022 (this meeting actually occurred on 8th December 2022)
 - Priority work agreed with MWWFRS on Residential Blocks was already under way and funding approved
 - A staged approach will be needed for this Site, and this will need to be established and agreed with MWWFRS
 - Bids were being prepared for the Estates Funding Advisory Board (EFAB) established by WG
- The HDdUHB can now confirm positive progress on the above plan, and this was fully briefed to MWWFRS at the meeting on 8th December 2022
- A four Stage programme has been developed and the specific content of work within each of the four Stages has been set out for consideration for MWWFRS
- This plan is currently with MWWFRS for formal approval; however, initial comments at the above meeting were very positive in terms of the pro-active and structured manner in which the HDdUHB is approaching this work
- The Stages can be set out as follows:
 - Priority advanced works 2022/23 to Residential Blocks as noted above; £610k
 - Stage 1 EFAB funding for 2023/24 approved in the sum of; £411k
 - Stage 2 EFAB funding for 2024/25 approved in the sum of; £733k
 - Stage 3 A BJC process (similar to that developed at WGH and GGH) for all remaining works. This BJC to be submitted circa December 2024 to allow a seamless continuation of work. Whilst current estimates of this value are in the order of £3m to £4m, clearly there is a substantial amount of due diligence work needed to confirm this.

> South Pembrokeshire Hospital (SPH)

- A LoFSM has been received for SPH which we included in our bidding process for EFAB funding
- This bid was fully approved, and we now have an established 2 Year programme covering 2023/24 and 2024/25 to address all requirements of the LoFSM. EFAB funding approved at £318k and £485k respectively for the 2 Year programme

All of the above FENs/LoFSMs programmes being managed by the HDdUHB were presented to the MWWFRS at the meeting on 8th December 2022. Whilst initial comments were positive, MWWFRS have advised they require some time to consider this information. A further update can be provided at the next meeting in March 2023.

As referenced above, since the last update to the Health & Safety Committee, the HDdUHB has been successful in securing an additional circa £10m investment in Fire Safety. This brings the total approved WG Project funding for the Fire Programme to circa £40m (excluding Phase 2 WGH and GGH and future Business Cases on BGH and PPH to follow as noted above).

2. Audit Tracker

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 Health & Safety Committee for completeness.

3. Fire Safety Management Update

3.1 Fire Risk Assessments (FRAs)

As of 13th November 2022, there are no overdue FRAs. A further 19 FRAs come online (up to 9th January 2022) as identified on the 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 December 2022. All fire risk assessments will transfer to the new Boris system over the next circa 12 months. Currently 43 Fire Risk Assessments out of a total of 364 have been undertaken and transferred (12% of all FRAs; 8.5% previously reported).

The team has experienced some system issues in transferring data to the new system which has reduced the transfer percentages in the last few weeks. These issues have now been resolved and additional administrative resources have been allocated from January 2023.

The original intention was to complete all transfers by Summer 2023, which remains the target; however, progress will need to be revisited when it is understood how the additional resource accelerates the transfer process.

3.3 Fire Safety Training

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

Table 2.0 As at 26th October 2022

Competence Name	Assignment Count	Required	Achieved	Complianc e %
NHS CSTF Fire Safety - 2 Years	11,575	11,575	9,032	78.03%
100 LOCAL Fire Safety Level 2 - 1 Year General	5,381	5,381	2,516	46.76%
100 LOCAL Fire Safety Level 3 - 1 Year General	212	212	109	51.42%

Table 3.0 As at 9th November 2022

Competence Name	Assignment Count	Required	Achieved	Compliance %
NHS CSTF Fire Safety - 2 Years	11,592	11,592	9,101	78.50%
100 LOCAL Fire Safety Level 2 - 1 Year General	5,397	5,397	2,691	49.86%
100 LOCAL Fire Safety Level 3 - 1 Year General	211	211	108	51.18%

Table 3.0 As at 13th December 2022

Competence Name	Assignment Count	Required	Achieved	Compliance %
NHS CSTF Fire Safety - 2 Years	11,643	11,643	9,165	78.72%
100 LOCAL Fire Safety Level 2 - 1 Year General	5,416	5,416	2,561	47.29%
100 LOCAL Fire Safety Level 3 - 1 Year General	211	211	108	51.18%

As noted above:

• Level 1 fire safety training has remained consistent since the last report.

- Level 2 fire safety training has dropped by 2% from last month. Level 2 training covers all clinical staff that work with or have direct contact with in-patient and outpatient facilities
- Level 3 fire safety training has remained steady since last month. Acknowledging the importance of the training for these individuals we will be undertaking additional sessions on a flexible basis to bring these percentages up to circa 80% by 1st Quarter of 2023/24.

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

In order to escalate this further, as noted in the recent Fire Governance Internal Audit Report, fire training is now formally reported to the Senior Operations Business Meeting to enable the Director of Operations to give this additional scrutiny. In addition, future reports will include Level 4 (Fire Wardens) and Level 5 (Management) training statistics (February 2023 onwards in line with Audit recommendations).

4. Fire Safety Governance Update

The only remaining item is the Fire Safety Policy, which is currently being progressed via the formal consultation process. This is covered fully as a separate report to this Committee.

Argymhelliad / Recommendation

The Health and Safety Committee is requested to:

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

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.11 Ensure reports and factual information from external regulatory agencies are acted upon within achievable timescales.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Estates and Facilities Risk No 813 Score 15
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:	4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.
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

Reference Number			Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule,	Progress update/Reason overdue
BFS/KBJ/SJ M/001135 73	Dec-19	2019/20	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters. St Nons (Secure EMI unit)/ St Brynach's (Day Hospital) / Bro Cerwyn (Offices) BFS/KBJ/SJM/00113573	573_001	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 Stage 2 / Phase 1 works relate to all remaining escape routes at WG 2022. 11/11/2022- a revised completion date of March 2023 had previous MWWFRS who had formally extended the FEN dates. Following the latest update to this Committee extensive further wor requirements. This work being identified from forward look surveys The impact on programme of the above has meant that the date noi float); a period of 4-month extension. This extension has been fully a the acceptance of this programme. This programme impact has bee currently planned for mid November 2022. 20/12/2022- This programme update has been fully reported to MW adjustment. They have noted that they will look to revisit theUHB pr be given at that point.
BFS/KBJ/SJ M/001135 73	Dec-19	2019/20	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters. St Nons (Secure EMI unit)/ St Brynach's (Day Hospital) / Bro Cerwyn (Offices) BFS/KBJ/SJM/00113573	573_002	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 Stage 2 / Phase 1 works relate to all remaining escape routes at WGi 2022. 11/11/2022- a revised completion date of March 2023 had previous MWWFRS who had formally extended the FEN dates. Following the latest update to this Committee extensive further wor requirements. This work being identified from forward look surveys. The impact on programme of the above has meant that the date not float); a period of 4-month extension. This extension has been fully a the acceptance of this programme. This programme impact has been currently planned for mid November 2022. 20/12/2022- This programme update has been fully reported to MW adjustment. They have noted that they will look to revisit theUHB pr be given at that point.
BFS/KS/SJ M/001754 24/ 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/SJM/00175424/ 00175421/00175428/001754 26/00175425	BFS.KS/SJM/001754 24/ 00175421/00175428 /00175426/0017542 5_001		 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 Stage 2 / Phase 1 works relate to all remaining escape routes at WG 2022. 11/11/2022- a revised completion date of March 2023 had previous MWWFRS who had formally extended the FEN dates. Following the including additional Fire Doors and Fire Stopping requirements. This process in place with the supply chain and UHB teams. The impact on programme of the above has meant that the date nor float); a period of 4-month extension. This extension has been fully a the acceptance of this programme. This programme impact has bee currently planned for mid November 2022. 20/12/2022- This programme update has been fully reported to MW adjustment. They have noted that they will look to revisit theUHB pr
BFS/KS/SJ M/001754 24/ 00175421/ 00175428/ 00175426/ 00175425		2019/20	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters. Withybush General Hospital, Kensington, St Thomas, etc. BFS/KS/SJM/00175424/ 00175421/00175428/001754 26/00175425	BFS.KS/SJM/001754 24/ 00175421/00175428 /00175426/0017542 5_002		 R2. Fire Resisting Corridors Ensure that the means of escape is kept free from fire and smoke for a period of 30 minutes by ensuring that: Bedroom / flat doors, Kitchen, cleaners and Laundry room doors, are all to be a minimum fire resistance of FD30s with a self-closer. (Pembroke county, Springfield, St Thomas, Kensington blocks) these doors should not be wedged open and any intumescent smoke seals that is damaged (Painted over) or missing should be replaced. At the time of the inspection I noted a number of doors being held open with wedges, the use of these Wedges holding doors open in all Blocks should be prohibited as it could promote the spread of fire, if doors are required to be left open then they will have to be self-closing 30-minute fire door linked in to the fire detection system. Excessive gaps in fire doors should be replaced, 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 	Jul 20 Dec 21 A pr 22 Mar-23	Dec-21 Apr-22 Dec-22 Mar-23	Amber	be given at that point. 12/01/2021- Revised letter from MWWFRS confirmed this item is to Stage 2 / Phase 1 works relate to all remaining escape routes at WGI 2022. 11/11/2022- a revised completion date of March 2023 had previous MWWFRS who had formally extended the FEN dates. Following the l including additional Fire Doors and Fire Stopping requirements. This process in place with the supply chain and UHB teams. The impact on programme of the above has meant that the date not float); a period of 4-month extension. This extension has been fully a the acceptance of this programme. This programme impact has been currently planned for mid November 2022. 20/12/2022- This programme update has been fully reported to MW adjustment. They have noted that they will look to revisit the UHB pr be given at that point.
BFS/KS/SJ M/001147 19- KS/890/04	Feb-20	2019/20	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: Withybush General Hospital. BFS/KS/SJM/00114719- KS/890/04	BFS/KS/SJM/001147 19_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 a (presented to them on the 02 October 2020). Recommendation char 27/06/2022- Phase 2 works remain on programme to be completed 12/08/22-unchanged- Phase 2 at WGH, WG has provided approval le and then to WG after the scrutiny process 11/11/2022- unchanged, same as previous comment from 12/08/22 20/12/2022- A programme completion date will be developed as the this Phase 2 project. Early indications are that due to the multiple De due diligence work within the Business Case. As this becomes more changes can be made to the Phase 2 Enforcement dates. This matter required to this programme should the nature of the works dictate t

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e is extended to 30 April 2025 as agreed in the programme for Phase 2 Works changed back from red to amber.

ted by April 2025.

al letter to proceed to BJC Phase 2, which is due to be submitted to UHB in early 2023

/22.

: the above BJC work is progressed to encompass the work content and complexity of e Decant needs of Ward areas the programme may need to be extended as part of the ore developed, MWWFRS will be fully involved in these discussions so that appropriate itter has been discussed with MWWFRS who appreciate that a revision may be te that an extension to this timeline becomes necessary.

Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule,	Progress update/Reason overdue
BFS/KS/SJ M/001147 19 - KS/890/03	Feb-20	2019/20	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: Withybush General Hospital. BFS/KS/SJM/00114719 - KS/890/03	BFS/KS/SJM/001147 19_03_001	High	R1. Compartmentation – All Horizontal Corridor Escape Routes To undertake whatever works are necessary to ensure that any / all breaches in fire resisting compartmentation that affect the Horizontal Escape Routes within Withybush Hospital are addressed. Fire resisting structures are to continue to slab / upper floor level / roof level and pass through any false ceiling provided.	Aug 21 Dec 21 Apr 22 Dec 22 Mar-23	Dec-21 Apr-22 Dec-22 Mar-23	Amber	This work is part of the phase 1 WGH Fire Enforcement Programme 12/08/2022- MWWFRS have extended to March 2023 as they have requires extra time to implement. Letter dated 25/07/22 from MW 11/11/2022- a revised completion date of March 2023 had previou MWWFRS who had formally extended the FEN dates. Following the latest update to this Committee extensive further wo requirements. This work being identified from forward look survey: The impact on programme of the above has meant that the date not float); a period of 4-month extension. This extension has been fully the acceptance of this programme. This programme impact has been currently planned for mid November 2022. 20/12/2022- This programme update has been fully reported to MV adjustment. They have noted that they will look to revisit the UHB be given at that point.
KS/890/08	Nov-20	2020/21	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: West Wales General Hospital, Glangwili, Dolgwili Road, Carmarthen, Carmarthenshire, SA31 2AF KS/890/08	KS/890/08_01	High	R1.Compartmentation – All Horizontal Corridor Escape Routes (Agreed Phase 1 Works). To undertake whatever works are necessary to ensure that any/all breaches in fire resisting compartmentation that affect the Horizontal Escape Routes within Glangwili General Hospital are addressed as agreed in the programme for Phase 1 Works (presented to us on the 02 October 2020). Fire resisting structures are to continue to slab/upper floor level/roof level and pass through any false ceiling provided.	Oct-20 Feb-21 Jul-22 Feb-23	Jul-22 Feb-23	Amber	13/11/2020- Letter dated 05/11/2020 from MWWFRS confirming e KS/890/09 dated 04/11/2020. KS/890/08 to be completed by 31/07 02 October 2020). Original completion dates shown on tracker take 11/11/2022- a revised completion date of March 2023 had previou MWWFRS who had formally extended the FEN dates. Following the latest update to this Committee extensive further wo requirements. This work being identified from forward look surveys 20/12/2022- A revised completion date of November 2023 has now checks. This programme update has been fully reported to the MW this adjustment. MWWFRS have noted that they will look to revisit extension can be given at that point.
KS/890/09	Nov-20	2020/21	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: West Wales General Hospital, Glangwili, Dolgwili Road, Carmarthen, Carmarthenshire, SA31 2AF KS/890/09	KS/890/09_01	High	Item Number 1 - Compartmentation. (Agreed Phase 2 works). To undertake whatever works are necessary to ensure that any/all breaches in fire resisting compartmentation that affect the Wards, Theatres, Plant Rooms, Offices, Surgeries, Specialist Units and any other compartmented spaces within Glangwili General Hospital are addressed as agreed in the programme for Phase 2 works (presented to us on the 02 October 2020). Fire resisting structures are to continue to slab/upper floor level/roof level and pass through any false ceiling provided.	Oct 20 Feb 21 Aug-24	Aug-24	Amber	13/11/2020- Letter dated 05/11/2020 from MWWFRS confirming er KS/890/09 dated 04/11/2020. KS/890/09 to be completed by 31/08, 02 October 2020). Original completion dates shown on tracker takes 11/11/2022- The expectation was that the BJC would be completed that due to capacity issues and the extent and complexity of the wo clarification on this from our PM and a review of any opportunities t Phase 2 until circa November 2023. On the wider programming the programme of Phase 2. MWWFRS have already been briefed on this 2 works will be extremely complex given the delivery of these FEN w Case development will confirm both commencement dates and prog MWWFRS who appreciate that a revision may be required to the pri becomes necessary. 20/12/2022- It is important to note that Phase 2 works will be extre diligence work required during the Business Case development will Regular discussions continuen with MWWFRS, including a formal me FEN dates should the nature of the works dictate that an additional
BFS/KS/A MD/00106 219		2022/23		Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/00106 219_002	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 medica 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 Mar-23	Red	11/11/2022- A meeting is planned for mid November 2022 with MW position will be fully explained as part of this briefing. It is expected programme of prioritised works which will be undertaken over the it o adjust the investment programme to rely on Discretionary prograpproach for the majority of the work programme which will inevite discussions with MWWFRS/WG to formalise this position. It is anticic can plan accordingly in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confirm developed and the specific content of work within each of the 4 Stag MWWFRS for formal approval but initial comments at the above me the UHB is approaching this work.
BFS/KS/A MD/00106 219	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/00106 219_003	High	Item 1- R3. All doors on rooms within Block 2 housing Combi boilers are to be fitted with an air transfer grille, it should only be fitted with one that is capable of sealing both by thermal initiation and by interface with smoke sensors either directly or via a fire alarm panel(Dependant on the type of ventilation required for the appliance). The air transfer grill should conform to a relevant standard e.g.BS 8214:2016. If these appliances do not require this type of ventilation.	Oct-22	Oct-22 Mar-23	Red	11/11/2022- A meeting is planned for mid November 2022 with MW position will be fully explained as part of this briefing. It is expected programme of prioritised works which will be undertaken over the r to adjust the investment programme to rely on Discretionary progra approach for the majority of the work programme which will inevita discussions with MWWFRS/WG to formalise this position. It is antici can plan accordingly in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confirm developed and the specific content of work within each of the 4 Stay MWWFRS for formal approval but initial comments at the above me the UHB is approaching this work.

we accepted UHB presentation of the extra complexity of the work involved which IWWFRS confirms this.

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

works have been identified including additional Fire Doors and Fire Stopping reys as part of the pre planning process in place with the supply chain and UHB teams. I noted above has now been extended to July 2023 (including contractors contingency ally assessed by the PM and appropriate due diligence checks have been made prior to been communicated to the MWWFRS ahead of the next progress review with them

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

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

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

works have been identified including additional Fire Doors and Fire Stopping veys as part of the pre planning process in place with the supply chain and UHB teams. now been accepted by the Project Management Team following all their due diligence MWWFRS in a formal meeting held on 08/12/2022 and they fully accept the need for risit the UHB prior to the currently set end date (February 2023), so that an appropriate

g enforcement notice KS/890/06 is withdrawn and replaced by KS/890/07, KS/890/08, /08/2024 as agreed in the programme for Advanced Works (presented to them on the aken from original KS/890/06 enforcement notice.

eted by Quarter 4 of the 2022/23 FY. The UHB has recently been informed by the SCP e works, this date will now be circa August 2023. The UHB have asked for further ties to improve on this position. This has the potential to delay the start of works on the impact on programme of Phase 1 would in any case align well with the revised t this and this will be set out in a formal meeting with them mid November 2022. Phase EN works to busy clinical areas. The due diligence work required during the Business programme delivery dates for this work. Discussions have been undertaken with the or poramme. should the nature of the works dictate that an additional period of time

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

MWWFRS to consider all investment programmes across the UHB Estate and the PPH ted that the MWWFRS will be supportive of this approach given that we already have a the next 6 months. Should the EFAB bids be unsuccessful then the HDdUHB would need ogramme investment in the first instance. This will then require a Business Case evitably extend the timelines. If this was the case, there would need to be follow up nticipated that the EFAB position will be clear by the end of December 2022 so the UHB

firmed the positive progress on the above plan. A 4 Stage programme has been Stages has been set out for consideration for MWWFRS. This plan is currently with e meeting were very positive in terms of the pro-active and structured manner in which

MWWFRS to consider all investment programmes across the UHB Estate and the PPH ted that the MWWFRS will be supportive of this approach given that we already have a he next 6 months. Should the EFAB bids be unsuccessful then the HDdUHB would need ogramme investment in the first instance. This will then require a Business Case virtably extend the timelines. If this was the case, there would need to be follow up thicipated that the EFAB position will be clear by the end of December 2022 so the UHB

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BFS/KS/A MD/00106 219	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/00106 219_005	High	 Item 1- R5. Fire resisting doors need to be fitted with: A self-closing device including fire alarm activated Self closers. Intumescent strips and smoke seals. Three brass/steel hinges. Fire doors should conform to a relevant standard e.g. WHTM 05-02 Appendix C: Doors and doorsets 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 Mar-23	Red	11/11/2022- A meeting is planned for mid November 2022 with MV position will be fully explained as part of this briefing. It is expected programme of prioritised works which will be undertaken over the to adjust the investment programme to rely on Discretionary progr approach for the majority of the work programme which will inevit discussions with MWWFRS/WG to formalise this position. It is antic can plan accordingly in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confirm developed and the specific content of work within each of the 4 Sta MWWFRS for formal approval but initial comments at the above m the UHB is approaching this work.
BFS/KS/A MD/00106 219	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/00106 219_007	High	 Item 3- R7. The existing fire warning system must be extended as necessary to conform fully to BS 5839-1:2017 Category L1 within the following areas. Bryngofal red zone storage area main building previously a bathroom. The demountable structures. And any other room converted into a risk room within the Prince Phillip site. All work involving the fire alarm should be carried out in accordance with BS 5839-1 current edition, HTM 0503 B Section 4 and paragraph 4.6. 	Oct-22	Oct 22 Mar-23	Red	11/11/2022- A meeting is planned for mid November 2022 with MW position will be fully explained as part of this briefing. It is expected programme of prioritised works which will be undertaken over the to adjust the investment programme to rely on Discretionary prograpproach for the majority of the work programme which will inevit: discussions with MWWFRS/WG to formalise this position. It is antic can plan accordingly in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confirr developed and the specific content of work within each of the 4 Sta MWWFRS for formal approval but initial comments at the above methe UHB is approaching this work.
BFS/KS/A MD/00106 219	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/00106 219_008	High	Item 4- R8. All door release devices (Including floor pneumatic release devices) should work in accordance with the relevant British standard: BS 7273-4:2015 actuation of release mechanisms for doors and comply with WHTM 05-02 Appendix C: Door Closers and Section 6 General provisions of Approved Document B Volume 2 Buildings other than dwelling houses. • Diabetic unit • This action should be carried out over the whole site and as part of the fire door survey mentioned in item 1 Compliance with this or an equivalent standard will normally satisfy the requirement.	Oct-22	Oct 22 Mar-24	Red	11/11/2022- A meeting is planned for mid November 2022 with MW position will be fully explained as part of this briefing. It is expected programme of prioritised works which will be undertaken over the to adjust the investment programme to rely on Discretionary prograpproach for the majority of the work programme which will inevit: discussions with MWWFRS/WG to formalise this position. It is antic can plan accordingly in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confirr developed and the specific content of work within each of the 4 Sta MWWFRS for formal approval but initial comments at the above muthe UHB is approaching this work. This recommendation will be pict.
BFS/KS/A MD/00106 219	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/00106 219_013	High	Item 9- R13. The emergency lighting must be extended to cover the external exit routes and exit doors of the TY Bryn Template The system shall be installed, maintained and tested in accordance with a relevant standard. For a relevant standard please refer to BS5266-1:2016 Emergency lighting code of practice for emergency lighting of premises. Compliance with this or an equivalent standard will normally satisfy the requirement.	Oct-22	Oct 22 Aug-23	Red	11/11/2022- A meeting is planned for mid November 2022 with MW position will be fully explained as part of this briefing. It is expected programme of prioritised works which will be undertaken over the to adjust the investment programme to rely on Discretionary prograpproach for the majority of the work programme which will inevite discussions with MWWFRS/WG to formalise this position. It is anticican plan accordingly in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confirr developed and the specific content of work within each of the 4 Sta MWWFRS for formal approval but initial comments at the above method work.
BFS/KS/A MD/00115 940	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: HYWEL DDA, TENBY COTTAGE HOSPITAL, GAS LANE, TENBY, SA70 8AG BFS/KS/AMD/00115940	BFS/KS/AMD/00115 940_001	High	 R1. A fire door survey is required at the Tenby cottage hospital site due to a number of defects found at the time of inspection. The findings of this survey must be completed within the mentioned timescale. Fire resisting doors need to be fitted with: A self-closing devices including fire alarm activated Self closers. Intumescent strips and smoke seals. Three brass/steel hinges. Fire doors should conform to a relevant standard e.g. WHTM 05-02 Appendix C: Doors and doorsets 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 reagangement. 	Oct-22	Oct-22 Mar-23	Red	08/07/2022- UHB working with MWWFRS to agree the standards a 07/09/2022- Head of Estates Risk & Compliance to check with MWV 02/11/2022- The required standard has now been confirmed by MV has been set out in discussions with the MWWFRS. 20/12/2022- on track for completion by March 2023.
BFS/KS/A MD/00115 940	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: HYWEL DDA, TENBY COTTAGE HOSPITAL, GAS LANE, TENBY, SA70 8AG BFS/KS/AMD/00115940	BFS/KS/AMD/00115 940_002	High	Compliance with this or an equivalent standard will normally satisfy the requirement. 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 Mar-23	Red	08/07/2022- UHB working with MWWFRS to agree the standards a 07/09/2022- Head of Estates Risk & Compliance to check with MWN 02/11/2022- The required standard has now been confirmed by MV has been set out in discussions with the MWWFRS. 20/12/2022- on track for completion by March 2023.

MWWFRS to consider all investment programmes across the UHB Estate and the PPH ted that the MWWFRS will be supportive of this approach given that we already have a the next 6 months. Should the EFAB bids be unsuccessful then the HDdUHB would need ogramme investment in the first instance. This will then require a Business Case evitably extend the timelines. If this was the case, there would need to be follow up nticipated that the EFAB position will be clear by the end of December 2022 so the UHB

nfirmed the positive progress on the above plan. A 4 Stage programme has been I Stages has been set out for consideration for MWWFRS. This plan is currently with e meeting were very positive in terms of the pro-active and structured manner in which

MWWFRS to consider all investment programmes across the UHB Estate and the PPH cted that the MWWFRS will be supportive of this approach given that we already have a the next 6 months. Should the EFAB bids be unsuccessful then the HDdUHB would need rogramme investment in the first instance. This will then require a Business Case evitably extend the timelines. If this was the case, there would need to be follow up inticipated that the EFAB position will be clear by the end of December 2022 so the UHB

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MWWFRS to consider all investment programmes across the UHB Estate and the PPH ted that the MWWFRS will be supportive of this approach given that we already have a the next 6 months. Should the EFAB bids be unsuccessful then the HDdUHB would need rogramme investment in the first instance. This will then require a Business Case evitably extend the timelines. If this was the case, there would need to be follow up inticipated that the EFAB position will be clear by the end of December 2022 so the UHB

nfirmed the positive progress on the above plan. A 4 Stage programme has been I Stages has been set out for consideration for MWWFRS. This plan is currently with e meeting were very positive in terms of the pro-active and structured manner in which picked up in phase 1 as part of the EFAB funding for 2023/24.

MWWFRS to consider all investment programmes across the UHB Estate and the PPH ted that the MWWFRS will be supportive of this approach given that we already have a the next 6 months. Should the EFAB bids be unsuccessful then the HDdUHB would need rogramme investment in the first instance. This will then require a Business Case evitably extend the timelines. If this was the case, there would need to be follow up inticipated that the EFAB position will be clear by the end of December 2022 so the UHB

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ds appropriate for this site and to confirm actions necessary, if any. //WWFRS.

MWWFRS and funding is in place to complete these works by end of March 2023. This

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Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule,	Progress update/Reason overdue
BFS/KS/A MD/00115 940	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: HYWEL DDA, TENBY COTTAGE HOSPITAL, GAS LANE, TENBY, SA70 8AG BFS/KS/AMD/00115940	BFS/KS/AMD/00115 940_003	High	 R3. Sluice room R24 is to be upgraded to a fire hazard room. Any other room which has been changed to a fire hazard room within the premises. The fire separation between any fire hazard room and the means of escape of the building should provide a minimum 30 minutes' standard of fire resistance in accordance with WHTM 05-02 Table 6, 5.40-5.42, the fire separation should also conform to a relevant standard e.g. Appendix A (including Table A1, A2) of Approved Document B Volume 2 Buildings other than dwelling houses. Compliance with this or an equivalent standard will normally satisfy the requirement. 	Oct-22	Oct-22 Mar-23	Red	08/07/2022- UHB working with MWWFRS to agree the standards a 07/09/2022- Head of Estates Risk & Compliance to check with MWV 02/11/2022- The required standard has now been confirmed by MW has been set out in discussions with the MWWFRS. 20/12/2022- on track for completion by March 2023.
BFS/SM/A MD/00107 788	May-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/00107788	BFS/SM/AMD/00107 788_001	' High	R1. All doors to patient bedrooms are to be fitted with appropriately designed free-swing self- closing devices, as stated in (Table 6 WHTM 05-02).	Nov-22	Nov-22 Oct-23	Red	27/06/2022- Funding and timescale to be agreed following the find 07/09/2022- Head of Estates Risk & Compliance to send revised act 15/11/2022-AFT survey now completed. Detailed costs obtained fo replacements for EFAB funding. 20/12/2022- seeking clarification for door work required and priort formal meeting on 08/12/2022. Awaiting formal revised date from 1 investment being received in April 2023.
BFS/SM/A MD/00107 788	May-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/00107788	BFS/SM/AMD/00107 788_003	High	 R3. The following doors should be replaced with fire doors providing 30/60 minutes fire resistance (Dependant on the location of the door). Panels or partitions above or at the sides of the doors should provide a similar degree of fire resistance. Medication room (LSU) – this is a stable door and is not providing suitable fire resistance. 	Nov-22	Nov 22 Oct-23	Red	27/06/2022- Survey by AFT been undertaken costs are due back new 07/09/2022- Head of Estates Risk & Compliance to send revised act 20/12/2022- seeking clarification for door work required and priorti formal meeting on 08/12/2022. Awaiting formal revised date from 1 investment being received in April 2023.
BFS/SM/A MD/00107 788	May-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/00107788	BFS/SM/AMD/00107 788_004	High	R4. Throughout the site various fire doors were found to be missing smoke seals. The seals should be attended to as part of the fire door survey mentioned above.	Nov-22	Nov 22 Oct-23	Red	27/06/2022- Survey by AFT been undertaken costs are due back ne: 07/09/2022- Head of Estates Risk & Compliance to send revised act 20/12/2022- seeking clarification for door work required and priort formal meeting on 08/12/2022. Awaiting formal revised date from I investment being received in April 2023.
BFS/SM/A MD/00107 788	May-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/00107788	BFS/SM/AMD/00107 788_005	' High	R5. The cross-corridor doors in "Picu" was missing a self-closing device. A self-closing device is required on this door to ensure it closes fully into its rebate.	Nov-22	Nov-22 Oct-23	Red	27/06/2022- Survey by AFT been undertaken costs are due back ne 07/09/2022- Head of Estates Risk & Compliance to send revised act 02/11/2022- Assurance and Risk team are awaiting confirmation th 15/12/2022- Head of Estates Risk & Compliance to confirm with GG
BFS/SM/A MD/00107 788	May-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/00107788	BFS/SM/AMD/00107	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. 	Nov-22	Nov-22 Oct-23	Red	27/06/2022- Survey by AFT been undertaken costs are due back net 07/09/2022- Head of Estates Risk & Compliance to send revised act 20/12/2022- seeking clarification for door work required and priort formal meeting on 08/12/2022. Awaiting formal revised date from I investment being received in April 2023.
Admin - General/00 329499		2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Red Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329499_ 001	High	R1. A number of fire resisting doors were found to have defects. All fire resisting doors throughout 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 O January 2025)- further survey to be undertaken at BGH site 15/11/2022- MWWFRS letter dated 31/08/2022 (same refer January 2025, and Phase 2 October 2027.
Admin - General/00 329499	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Red Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329499_ 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 O January 2025)- further survey to be undertaken at BGH site o 15/11/2022- MWWFRS letter dated 31/08/2022 (same refer January 2025, and Phase 2 October 2027.
Admin - General/00 329499	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Red Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329499_ 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 O January 2025)- further survey to be undertaken at BGH site o 15/11/2022- MWWFRS letter dated 31/08/2022 (same refer January 2025, and Phase 2 October 2027.
Admin - General/00 329499	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Red Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329499_ 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 O January 2025)- further survey to be undertaken at BGH site 15/11/2022- MWWFRS letter dated 31/08/2022 (same refer January 2025, and Phase 2 October 2027.
Admin - General/00 329499	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Red Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329499_ 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 O January 2025)- further survey to be undertaken at BGH site 15/11/2022- MWWFRS letter dated 31/08/2022 (same refer January 2025, and Phase 2 October 2027.

ls appropriate for this site and to confirm actions necessary, if any. WWFRS. MWWFRS and funding is in place to complete these works by end of March 2023. This
ndings of the AFT survey.
action plan to Assurance and Risk team. I for 106 repairable doors. Site review with NWSSP-SES to agree prioritisation of door ortise work. MWWFRS aware of this work and the money required, as discussed at the m MWWFRS. Estates service has provided revised date of October 2023 based on
next week. action plan to Assurance and Risk team. ortise work. MWWFRS aware of this work and the money required, as discussed at the m MWWFRS. Estates service has provided revised date of October 2023 based on
next week. action plan to Assurance and Risk team. ortise work. MWWFRS aware of this work and the money required, as discussed at the m MWWFRS. Estates service has provided revised date of October 2023 based on
next week. action plan to Assurance and Risk team. I that all works have been completed/planned for this financial year. GGH colleagues if this recommendation is now implemented.
next week. action plan to Assurance and Risk team. ortise work. MWWFRS aware of this work and the money required, as discussed at the m MWWFRS. Estates service has provided revised date of October 2023 based on
s October 2027. Phase 1 will be completed in advance of this (letters states te due to its complex environment. ference- Admin - General/00329500) confirms date for completion Phase 1
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Admin - General/00 329499	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Red Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329499_ 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 O January 2025)- further survey to be undertaken at BGH site o 15/11/2022- MWWFRS letter dated 31/08/2022 (same refer January 2025, and Phase 2 October 2027.
Admin - General/00 329499	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Red Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329499_ 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 N/K	Red	02/11/2022- awaiting final confirmation that this has been complet 10/11/2022- Fire Management Plan has been issues to BGH Manage 20/12/2022- Estates are still awaiting a response from the BGH Man going forward by the Assurance and Risk team.
Admin - General/00 329499	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Red Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329499_ 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 t	Jan-23	Amber	15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A
Admin - General/00 329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Purple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329498_ 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	0ct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October further survey to be undertaken at BGH site due to its complex envi 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A Phase 2 October 2027.
Admin - General/00 329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Purple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329498_ 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 further survey to be undertaken at BGH site due to its complex envi 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A Phase 2 October 2027.
Admin - General/00 329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Purple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329498_ 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 further survey to be undertaken at BGH site due to its complex envi 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A Phase 2 October 2027.
Admin - General/00 329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Purple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329498_ 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 further survey to be undertaken at BGH site due to its complex envi 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A Phase 2 October 2027.
Admin - General/00 329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Purple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329498_ 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 further survey to be undertaken at BGH site due to its complex envi 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A Phase 2 October 2027.
Admin - General/00 329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Purple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329498_ 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 further survey to be undertaken at BGH site due to its complex envi 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A Phase 2 October 2027.
Admin - General/00 329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Purple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329498_ 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 N/K	Red	02/11/2022- awaiting final confirmation that this has been complete 10/11/2022- Fire Management Plan has been issues to BGH Manage 20/12/2022- Estates are still awaiting a response from the BGH Mar going forward by the Assurance and Risk team.
Admin - General/00 329498	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Purple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329498_ 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 t	Jan-23	Amber	15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A

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Reference Number		Financial Year	Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule,	Progress update/Reason overdue
Admin - General/00 111715	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	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 Jan-23	Nov 22 Jan-23	Amber	07/09/2022- Head of Estates Risk & Compliance to send revised action 15/11/2022- letter dated 31/08/2022 from MWWFRS confirms UHB
Admin - General/00 111715	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	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 Jan-23	Nov 22 Jan-23	Amber	07/09/2022- Head of Estates Risk & Compliance to send revised action 15/11/2022- letter dated 31/08/2022 from MWWFRS confirms UHB
Admin - General/00 111715	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	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 Jan-23	Amber	07/09/2022- Head of Estates Risk & Compliance to send revised acti 15/11/2022- letter dated 31/08/2022 from MWWFRS confirms UHB
Admin - General/00 111715	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	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 Jan-23	Nov 22 Jan-23	Amber	07/09/2022- Head of Estates Risk & Compliance to send revised action 15/11/2022- letter dated 31/08/2022 from MWWFRS confirms UHB
Admin - General/00 329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329501_ 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 2 further survey to be undertaken at BGH site due to its complex envir 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Au Phase 2 October 2027.
Admin - General/00 329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329501_ 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 2 further survey to be undertaken at BGH site due to its complex envir 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A Phase 2 October 2027.
Admin - General/00 329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329501_ 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 2 further survey to be undertaken at BGH site due to its complex envir 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A Phase 2 October 2027.
Admin - General/00 329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329501_ 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 3 further survey to be undertaken at BGH site due to its complex envir 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A Phase 2 October 2027.
Admin - General/00 329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329501_ 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 2 further survey to be undertaken at BGH site due to its complex envir 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A Phase 2 October 2027.
Admin - General/00 329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329501_ 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: - •IDop of the staircase from Angharad Ward All openings in the walls, floors, partitions, and ceilings throughout the premises provided for the passage of service piping ducts or cables, are to be sealed or brushed to a 30-minute standard of fire resistance. 	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is October 2 further survey to be undertaken at BGH site due to its complex envir 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A Phase 2 October 2027.
Admin - General/00 329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329501_ 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 N/K	Red	02/11/2022- awaiting final confirmation that this has been complete 10/11/2022- Fire Management Plan has been issues to BGH Manage 20/12/2022- Estates are still awaiting a response from the BGH Man going forward by the Assurance and Risk team.
Admin - General/00 329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329501_ 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	15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A
Admin - General/00 329501	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329501_ 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 N/K	Red	02/11/2022- IT have confirmed there is a contract in place for suppro Estates team. Once the evidence has been received this recommend 10/11/2022- IT dept have changed maintenance providers and are a

action plan to Assurance and Risk team. JHB has 5 months to complete recommendation by the date of the letter.
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nagement team, awaiting response. Management team. Recommendation to be included in BGH service correspondence
e- Admin - General/00329501) confirms date for completion December 2022.
uppression systems across the site. Copies of records have been requested by the nendation will be closed. Ire awaiting the visit.

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Admin - General/00 329500	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Blue Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329500_ 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 further survey to be undertaken at BGH site due to its complex envi 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A Phase 2 October 2027.
Admin - General/00 329500	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Blue Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329500_ 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 further survey to be undertaken at BGH site due to its complex envi 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A Phase 2 October 2027.
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Admin - General/00 329500	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Blue Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329500_ 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 further survey to be undertaken at BGH site due to its complex envi 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- # Phase 2 October 2027.
Admin - General/00 329500	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Blue Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329500_ 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 further survey to be undertaken at BGH site due to its complex envi 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A Phase 2 October 2027.
Admin - General/00 329500	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Blue Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329500_ 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 further survey to be undertaken at BGH site due to its complex envi 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- A Phase 2 October 2027.

e- Admin - General/00329501) confirms date for completion January 2023. ber 2027. Phase 1 will be completed in advance of this (letters states January 2025)nvironment. e- Admin - General/00329500) confirms date for completion Phase 1 January 2025, and ber 2027. Phase 1 will be completed in advance of this (letters states January 2025)environment. e- Admin - General/00329500) confirms date for completion Phase 1 January 2025, and ber 2027. Phase 1 will be completed in advance of this (letters states January 2025)environment. e- Admin - General/00329500) confirms date for completion Phase 1 January 2025, and ber 2027. Phase 1 will be completed in advance of this (letters states January 2025)environment. e- Admin - General/00329500) confirms date for completion Phase 1 January 2025, and ber 2027. Phase 1 will be completed in advance of this (letters states January 2025)environment. e- Admin - General/00329500) confirms date for completion Phase 1 January 2025, and

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Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule,	Progress update/Reason overdue
Admin - General/00 329500	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Blue Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329500_ 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 N/K	Red	02/11/2022- awaiting final confirmation that this has been complet 10/11/2022- Fire Management Plan has been issues to BGH Manag 20/12/2022- Estates are still awaiting a response from the BGH Man going forward by the Assurance and Risk team.
BFS/KS/JEL /00115068	Sep-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: SOUTH PEMBS HOSPITAL, FORT ROAD, PEMBROKE DOCK, SA72 6FY	BFS/KS/JEL/0011506 8_001	High	 R1. It was noted whilst carrying out the inspection that there were a number of faults found with a high number of the fire doors at this premises. These doors should be repaired or replaced. Any panels or partitions above or at the sides of the doors should provide a similar degree of fire resistance as the door installed. All doors mentioned within the fire door survey carried out in September 2021. Fire doors should conform to a relevant standard e.g. Appendix C and Table 6 WHTM 0502, Appendix B (including Appendix C Table B1) of Approved Document B Volume 2 Buildings other than dwelling houses. 	Mar-23	Mar-23	Amber	
BFS/KS/JEL /00115068	Sep-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: SOUTH PEMBS HOSPITAL, FORT ROAD, PEMBROKE DOCK, SA72 6FY	BFS/KS/JEL/0011506 8_002	High	 R2. During the inspection breaches in compartmentation were identified throughout the premises. The breaches in compartmentation would not support the existing evacuation strategy. In the event of fire, breaches in compartmentation, will allow fire and smoke to spread unchecked throughout the building. This would have an impact on the means of escape and render the evacuation strategy of the building ineffective. All breaches in compartmentation should be fire stopped to provide the appropriate fire resistance in accordance with building regulations. 1. All compartmentation breaches identified within the compartmentation survey carried out in November 2021 & February 2022. 2. Smoke hoods within the attic area need to be installed correctly. 3. Broken and missing ceiling tiles need to be replaced. 4. Confirm the fire resistance of the various roller shutters which open onto the means of escape within the premises. 	Mar-23	Mar-23	Amber	
BFS/KS/JEL /00115068	Sep-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: SOUTH PEMBS HOSPITAL, FORT ROAD, PEMBROKE DOCK, SA72 6FY	BFS/KS/JEL/0011506 8_003	High	 R3. It was noted that the stairs within G124 were not protected as per paragraph 3.48 WHTM 05-02 - Stairways should always be remote from each other so that in the event of fire at least one is available for evacuation purposes. Install a Fire Door set to comply with the above statement. Within the old Cleddau ward a set of doors are to be installed either within the partition or within the external glazed wall. This is due to the extended travel distance from the ward to the closest exit. Final exit door to courtyard GF1 area needs replacing. Doors between G14 & G22 marked as D57 needs replacing. 	Mar-23	Mar-23	Amber	
BFS/KS/JEL /00115068	Sep-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: SOUTH PEMBS HOSPITAL, FORT ROAD, PEMBROKE DOCK, SA72 6FY	BFS/KS/JEL/0011506 8_004	High	R4. Remove the printer photocopier from within the area F84. This appliance should be located within a hazard room.	Mar-23	Mar-23	Amber	
BFS/KS/JEL /00115068	Sep-22	2022/23		Letter of Fire Safety Matters Premises: SOUTH PEMBS HOSPITAL, FORT ROAD, PEMBROKE DOCK, SA72 6FY	BFS/KS/JEL/0011506 8_005	High	 R5. Extend the existing fire detection and warning system by providing automatic smoke/heat detection in the following areas: X-ray Dept . Remote indicator lights must be provided for detectors in concealed spaces e.g., roof voids, heads of lift shafts. It was noted that these devices were missing in various locations around the premises. Confirm the roller shutters in various locations of the premises automatically close on the activation of the fire alarm system and or comply with the cause and effect strategy. Confirm that there is a suitable cause and effect strategy for the premises. 	Mar-23	Mar-23	Amber	
BFS/KS/JEL /00115068	Sep-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: SOUTH PEMBS HOSPITAL, FORT ROAD, PEMBROKE DOCK, SA72 6FY	BFS/KS/JEL/0011506 8_006	High	 R6. Emergency escape routes must be indicated by adequate escape signage. Signage should be provided at; All external escape routes Signs should be designed and installed in accordance BS 5499-4:20 	Mar-23	Mar-23	Amber	
BFS/KS/JEL /00115068	Sep-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: SOUTH PEMBS HOSPITAL, FORT ROAD, PEMBROKE DOCK, SA72 6FY	BFS/KS/JEL/0011506 8_007	High	 R7. It was noted in the inspection that the emergency lighting installed may not be to the standard of BS5266–1:2016 Provide an emergency lighting system (which is to be independent of all other systems), to illuminate: In all Internal and External escape routes. On completion of the emergency lighting system, the commission certificate is to be completed by a competent person and a copy made available to the Fire and Rescue Authority. 		Mar-23	Amber	
BFS/KS/JEL /00115068	Sep-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: SOUTH PEMBS HOSPITAL, FORT ROAD, PEMBROKE DOCK, SA72 6FY	BFS/KS/JEL/0011506 8_008	High	R8. Locate the solar PV isolator in a position away from the roof area or add a device that would allow isolation away from an area of risk.	Mar-23	Mar-23	Amber	

oleted. nagement team, awaiting response. Management team. Recommendation to be included in BGH service correspondence