



HEALTH & SAFETY COMMITTEE PWYLLGOR IECHYD A DIOGELWCH

DYDDIAD Y CYFARFOD: DATE OF MEETING:	09 May 2022
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 & 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 14th March 2022.

Asesiad / Assessment

1. Fire Enforcement Notices/Letters of Fire Safety Matters

1.1 Withybush General Hospital (WGH)

- **Advanced works** – Vertical escape routes at WGH and priority work at St Caradog's (KS/890/02 and LoFSMs dated 12th January 2021)

In the report presented to the March 2022 meeting of the HSC, Hywel Dda University Health Board (HDdUHB) was awaiting the final inspection from the Mid and West Wales Fire and Rescue Service (MWWFRS) in order to have this FEN removed.

The inspection has been successfully completed and awaiting formal correspondence from MWWFRS that all the requirements of the above FEN have been satisfied prior to removal..

- **Phase 1** – All remaining horizontal escape routes at WGH, all remaining work at St Caradog's 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**)

As noted at the meeting of the HSC in March 2022, the completion date of December 2022 for site based works, with a short period of contingency running into January 2023, remains the currently approved programme for these works.

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

MWWFRS has 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.

Regular dialogue continues with MWWFRS to update any adjustments to programme on this Phase of works. The Enforcing Officers who have personally viewed the activities on site, fully understand the challenging work required and are supportive of HDdUHB's 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) work has now been submitted to WG for consideration and approval.

Queries on the resource schedule are being reviewed to satisfy NWSSP-SES with the aim to conclude this stage in the next week.

Mobilisation of works on site is anticipated in late 2022/early 2023 (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, as this will need to consider 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. 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 extension to this timeline becomes necessary.

- **Decant Arrangements to support Phase 2 Work**

The BJC submission is concluded and final evaluation is now underway prior to submission for internal approval and onward submission to WG. It is anticipated that the submission date will be May 2022, which would support the Decant ward being available to HDdUHB circa March/April 2023 and will align closely with the revised completion date for Phase 1, which is currently envisaged as December 2022.

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)

➤ **Advanced works** – All vertical escape routes at GGH (**FEN KS/890/07**)

As reported to the meeting of the HSC in March 2022, HDdUHB was awaiting the final inspection from MWWFRS in order to have this FEN removed. This inspection has now been successfully completed and correspondence received from MWWFRS stating that all of the requirements on the FEN have been satisfied and the FEN will be removed.

The three doorsets which remain outstanding at GGH will now be undertaken as part of the Phase I works which have recently commenced. This has been confirmed in writing by MWWFRS.

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

Forward look planning has been completed and site works commenced in April 2022.

The current forecast 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.

➤ **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 has 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 to ensure a continuous work programme.

The delivery programme indicates that the resource schedule will be submitted to WG circa May 2022 allowing the BJC to be commenced in July 2022. It is therefore expected that Phase 2 will mobilise on site circa April 2023. This will co-ordinate with the completion of the Phase 1 programme.

It is important to note that the 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
 - Letter issued 12th May 2021.
 - All actions, as required on the LoFSM from MWWFRS have now been completed.
 - MWWFRS have been invited to visit the site to confirm all work is satisfactory and a confirmation date is awaited.
 - await a date from MWWFRS for this visit.

- GGH
 - Letter issued 8th June 2021.
 - All actions, as required on the LoFSM from MWWFRS have now been completed.
 - The MWWFRS have been invited to inspect the completed work. However, MWWFRS have advised that they will not need to visit site to validate this work and will be signing off completion shortly.

- Bronglais General Hospital (BGH) Main Building
 - Letters issued 30th June 2021, 2nd July 2021 and 7th July 2021.
 - The LoFSM have a significant number of requirements, however there is no FEN action placed on HDdUHB for BGH.

The project to complete works on all Fire Doors and Compartmentation in vertical escape areas has been completed on site with some minor checks and inspections to complete, including independent assessment of standards. HDdUHB has also completed a wide range of other improvements required on the LoFSM received from MWWFRS.

HDdUHB has met formally with the inspection team of Ceredigion MWWFRS and they are planning to visit the site between 12th and 24th May 2022 to ensure that all of the work which HDdUHB has confirmed completed is to the appropriate standard. Subject to this inspection, the above elements will be removed from the current LoFSM.

As noted at previous meetings of the HSC there remains a substantial amount of work to complete in the future. The scale of this work is likely to involve Business Case development and Capital support from WG.

HDdUHB has presented programmed dates to both NWSSP and MWWFRS setting out timelines for this Business Case process. NWSSP has confirmed that this is an appropriate timeline for the work involved. MWWFRS are considering this timeline and a response which is likely to be received following the date of their visit..

NWSSP and WG have granted HDdUHB approval to progress with the Programme Business Case element of this work, however, have noted that any approval for future funding would need to be considered on the merits of the Business Case.

HDdUHB is seeking an early scoping meeting with WG to fully consider this approach and a date is awaited.

➤ BGH Residential Blocks

- 4 individual LoFSM issued 16th June 2021 – currently on programme.
- The original project was 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.
- Current completion date is now the end of July following a short delay appointing the contractor for the work.

➤ WGH

- LoFSM issued 12th December 2021.
- An action plan has been developed to address the small number of items identified in this LoFSM.
- MWWFRS are considering how they will approach this work in terms of whether a site visit is needed.
- There are specific areas of Compartmentation and Fire Door replacement from this LoFSM which MWWFRS have confirmed can be completed under Phase I of the main works. Formal confirmation of this agreement is pending.

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.

A full action plan is being developed setting out specific dates of delivery for each item listed, which is anticipated to be completed by June 2022. A meeting with MWWFRS will be held to confirm their agreement to a multiphased approach at PPH which is aligned to previous agreements on acute HDdUHB sites.

2. Audit Tracker (previously submitted to CPM)

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 at 21st April 2022, there are 0 overdue FRAs and a further 44 FRAs coming online (up to 9th June 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 - Following an update on the software required for the system, the Boris Team will update all members of the Fire Safety Team on its use during a training day on 28 April 22. Live Fire Risk Assessments using the new system will take place from May 2022.

At the next Fire Safety Group on 6th June 2022, the first iteration of detailed items contained in the Boris Fire Risk Assessments will be reviewed with clinical managers. All fire risk assessments will gradually transfer into the new Boris system in the next 12 months.

3.3 Fire Safety Training - The performance in terms of delivery of fire safety training is identified in tables below.

Table 1.0 As at 31 December 2021

Competence Name	Assignment Count	Required	Achieved	Compliance %
NHS CSTF Fire Safety - 2 Years	11,283	11,283	8,659	76.74%
100 LOCAL Fire Safety Level 2 - 1 Year General	5,270	5,270	2,300	43.64%
100 LOCAL Fire Safety Level 3 - 1 Year General	282	282	98	34.75%

Table 2.0 As at 31 January 2022

Competence Name	Assignment Count	Required	Achieved	Compliance %
NHS CSTF Fire Safety - 2 Years	11,313	11,313	8,675	76.68%
100 LOCAL Fire Safety Level 2 - 1 Year General	5,281	5,281	2,372	44.92%
100 LOCAL Fire Safety Level 3 - 1 Year General	289	289	96	33.22%

Table 3.0 As at 21 April 2022

Competence Name	Assignment Count	Required	Achieved	Compliance %
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%

During the COVID-19 pandemic and the inability to safely deliver face to face training, there was a significant negative effect on the performance at Level 2. However, since December 2021 and the introduction of Level 2 training on Microsoft Teams, there has been a steady increase on Level 2 and Level 3 training.

Confidence remains that the required capacity for training within HDdUHB is in place, however significant reductions in staff attendance are continuing. 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.

3.4 Key Fire Safety Risks - Elizabeth Williams Clinic and Brynmair Clinic

The FRAs for these sites have identified some urgent fire improvement works to reduce the risk to staff and patients.

Brynmair Clinic is completed.

Elizabeth Williams Clinic is completed.

4. Fire Safety Governance Update

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

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

Attached at Appendix 2 is the current Action Plan for information.

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

Gwybodaeth Ychwanegol: Further Information:

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

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

**Cydraddoldeb:
Equality:**

Not Applicable

Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Status of report	Recommendation Reference	Priority Level	Recommendation	Management Response	Original Completion Date	Revised Completion Date	Status (Red-behind schedule, Amber-on schedule, Green-complete)	Progress update/Reason overdue
BFS/KBI/SJM/00113573	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/KBI/SJM/00113573	Open	BFS/KBI/SJM/00113573_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: <ul style="list-style-type: none"> 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. 	Full action plan held by Estates.	Mar-20 Dec-21 Apr-22	Dec-21 Apr-22	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. 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. 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.
BFS/KBI/SJM/00113573	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/KBI/SJM/00113573	Open	BFS/KBI/SJM/00113573_002	High	R.2. St Nons. Reinstate the fire resistance in the following location(s): Compartmentation issues throughout unit, due to Dampers showing fault on system.	Full action plan held by Estates.	Mar-20 Dec-21 Apr-22	Dec-21 Apr-22	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. 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. 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.
BFS/KS/SJM/00175424/00175421/00175428/00175426/00175425	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/00175424/00175421/00175428/00175426/00175425	Open	BFS/KS/SJM/00175424/00175421/00175428/00175426/00175425_001	High	R1. Compartment <ul style="list-style-type: none"> 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. 	Full action plan held by Estates.	Jul-20 Dec-21 Apr-22	Dec-21 Apr-22	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. 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. 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.
BFS/KS/SJM/00175424/00175421/00175428/00175426/00175425	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/00175424/00175421/00175428/00175426/00175425	Open	BFS/KS/SJM/00175424/00175421/00175428/00175426/00175425_002	High	R2. Fire Resisting Corridors Ensure that the means of escape is kept free from fire and smoke for a period of 30 minutes by ensuring that: <ul style="list-style-type: none"> 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 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. 	Full action plan held by Estates.	Jul-20 Dec-21 Apr-22	Dec-21 Apr-22	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. 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. 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.

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BFS/KS/SJM/00175424/ 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/ 00175421/00175428/00175426/00175425	Open	BFS.KS/SJM/00175424/ 00175421/00175428/00175426/00175425_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.	Full action plan held by Estates.	Jul-20 Dec-21 Apr-22	Dec-21 Apr-22	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. 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. 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.
BFS/KS/SJM/00113573- KS/890/05	Feb-20	2020/21	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: St Caradogs, Bro Cerwyn, Fishguard Road, Haverfordwest, SA61 2PG BFS/KS/SJM/00113573- KS/890/05 (supersedes EN/262/08)	Open	BFS/KS/SJM/00113573_003	High	R3. Compartmentation / Dampers Reinstate the fire resistance in the following location: • The ventilation system will need to be inspected and repaired as necessary to ensure all its inherent fire safety devices are functioning in line with its design specifications and manufacturer's instructions. According to the action plan dated 02 December 2019 V2 these ongoing works are to be completed in the timescale of this Enforcement Notice	Full action plan held by Estates.	Oct-20 Feb-21 Dec-21 Apr-22	Dec-21 Apr-22	Amber	03/02/2021- MWWFRS confirmed that this enforcement notice now runs in line with the agreed completion dates of: Stage 1 Jan 2021 & Stage 2 April 2022. Recommendation turned back to amber. 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- 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.
BFS/KS/SJM/00114719- 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.	Full action plan held by Estates.	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. 04/03/2021-on track as per agreed programme of work. 06/05/2021-still on track, UHB meeting with WG 07/05/2021 to establish when to start the work on ward areas. 18/11/2021- update to Health & Safety Committee 15/11/2021- At the current time, HddUHB remains confident that the April 2025 date can be achieved, however this will be reviewed upon completion of the Business Case work. The 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 additional period becomes necessary. 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.
BFS/KS/SJM/00114719- 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	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.	Full action plan held by Estates.	Aug-21 Dec-21 Apr-22	Dec-21 Apr-22	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. 21/03/2022- Head of Assurance and Risk awaiting copy of written confirmation from MWWFRS before adjusting the revised completion date for this recommendation. 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.
BFS/KS/SJM/00114719- 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	Open	BFS/KS/SJM/00114719_03_002	High	R2. Compartmentation – All Vertical Breaches and / or Penetrations To undertake whatever works are necessary to ensure that any / all breaches in fire resisting compartmentation that affect the intermediate floors between levels 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.	Full action plan held by Estates.	Aug-21 Dec-21 Apr-22	Dec-21 Apr-22	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. 21/03/2022- Head of Assurance and Risk awaiting copy of written confirmation from MWWFRS before adjusting the revised completion date for this recommendation. 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.

Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Status of report	Recommendation Reference	Priority Level	Recommendation	Management Response	Original Completion Date	Revised Completion Date	Status (Red-behind schedule, Amber-on schedule, Green-complete)	Progress update/Reason overdue
KS/890/08	Nov-20	2020/21	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: West Wales General Hospital, Glangwili, Dolgwilli 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.	Full action plan held by Estates.	Oct-20 Feb-21 Jul-22 Feb-23	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 BJC 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.
KS/890/08	Nov-20	2020/21	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: West Wales General Hospital, Glangwili, Dolgwilli Road, Carmarthen, Carmarthenshire, SA31 2AF KS/890/08	Open	KS/890/08_02	High	R2.Compartmentation – All Vertical Breaches and / or Penetrations. To undertake whatever works are necessary to ensure that any/all breaches in fire resisting compartmentation that affect the intermediate floors between levels within Glangwili Hospital are addressed as agreed in the programme for Phase 1 Works (presented to us on the 2nd Oct 2020). Fire resisting structures are to continue to slab/ upper floor level/roof level and pass through any false ceiling provided.	Full action plan held by Estates.	Oct-20 Feb-21 Jul-22 Feb-23	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 BJC 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.
KS/890/09	Nov-20	2020/21	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: West Wales General Hospital, Glangwili, Dolgwilli Road, Carmarthen, Carmarthenshire, SA31 2AF KS/890/09	Open	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.	Full action plan held by Estates.	Oct-20 Feb-21 Aug-24	Aug-24	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/890/09 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.
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_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	Full action plan held by Estates.	Mar-22	Mar-22 Jun-22 Jul-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. 18/08/2021- Action plan from Head of Operations confirms survey work will be completed by end of September 2021. Costs and timescales to be confirmed post survey. 15/11/2021- Action plan provided shows completion of work by June 2022. Report to Health & Safety Committee 15/11/2021- Action plan provided shows completion date of work revised to June 2022. Report to Health & Safety Committee 15/11/2021 - Whilst the original programme for this element of work indicated completion by February 2022, it has needed to be revised due to the extent of the work (circa 97 doors to be either replaced or repaired) and the usual challenges relating to fire door delivery timescales. When the overall programme is finalised, a meeting will be convened to formally agree this with the MWWFRS. HDDUHB continues to work in close contact with the MWWFRS in order to confirm and agree any update to delivery dates as required. 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.
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Admin - General/00329501	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Green Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER Admin - General/00329501	Open	Admin - General/00329501_005	High	Article 11, Item 1 Fire Safety Management - An assessment should be undertaken to ensure there is a suitable and up to date Fire defence plan. The fire defence plan should be reviewed when situations or circumstances change within the building.	Full action plan held by Estates.	Sep-21	Sep-21 Nov-21 Feb-22 N/K	Red	Letter 30/06/2021 states all recommendations to be completed within 3 months of date of letter (i.e. 30/09/2021). 24/08/2021- Action plan submitted to Health & Safety Committee provides target date of end August 2021. 15/11/2021- Revised action plan dated 09/11/2021 confirms documents have been completed and issues, with ratification to take place by end of November 2021, at which time the recommendation can be closed. 10/01/2022- Fire defence plan issued to site management team requesting response by end of November 2021. No response received therefore chaser to be sent, assuming if no response received plan will be agreed by February 2022. 07/03/2022- UHB meeting with MWWFRS on 10/03/2022 to set out a full programme of delivery for remaining elements of work. Head of Assurance and Risk has requested update following this meeting. 27/04/2022-Fire Defence plan has been written and shared with hospital site senior management team for sign off, awaiting response.
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	Full action plan held by Estates.	Mar-22	Mar-22 Jun-22 Jul-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. 18/08/2021- Action plan from Head of Operations confirms survey work will be completed by end of September 2021. Costs and timescales to be confirmed post survey. 23/09/2021-Action plan submitted to Fire Plans meeting shows works programmed to be completed end March 2022. 15/11/2021- Action plan provided shows completion date of work revised to June 2022. Report to Health & Safety Committee 15/11/2021 - Whilst the original programme for this element of work indicated completion by February 2022, it has needed to be revised due to the extent of the work (circa 97 doors to be either replaced or repaired) and the usual challenges relating to fire door delivery timescales. When the overall programme is finalised, a meeting will be convened to formally agree this with the MWWFRS. HDdUHB continues to work in close contact with the MWWFRS in order to confirm and agree any update to delivery dates as required. 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.
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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_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.	Full action plan held by Estates.	Mar-22	Mar-22 Jun-22 Jul-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. 18/08/2021- Action plan from Head of Operations confirms survey work will be completed by end of September 2021. Costs and timescales to be confirmed post survey. 23/09/2021-Action plan submitted to Fire Plans meeting shows works programmed to be completed end March 2022. 15/11/2021- Action plan provided shows completion date of work revised to June 2022. Report to Health & Safety Committee 15/11/2021 - Whilst the original programme for this element of work indicated completion by February 2022, it has needed to be revised due to the extent of the work (circa 97 doors to be either replaced or repaired) and the usual challenges relating to fire door delivery timescales. When the overall programme is finalised, a meeting will be convened to formally agree this with the MWWFRS. HDdUHB continues to work in close contact with the MWWFRS in order to confirm and agree any update to delivery dates as required. 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.
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_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.	Full action plan held by Estates.	Oct-21	Oct-21 Nov-21 Jun-22 Jul-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. 18/08/2021- Action plan shared by Head of Operations provides target date of October 2021. 15/11/2021- Revised timescale of November 2021 provided. 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.
BFS/KS/SJM/00107739-02	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters - GLANGWILLI GENERAL HOSPITAL, DOLGWILLI ROAD, CARMARTHEN, SA31 2AF BFS/KS/SJM/00107739-02	Open	BFS/KS/SJM/00107739_001	High	1.1 The areas visited in this inspection should be included into the current Compartmentation survey (areas listed at end of schedule)	Full action plan held by Estates.	Aug-24	Aug-24	Amber	01/07/2021- Letter dated 08/06/2021 from MWWFRS states 'To be completed in line with the agreed advanced, first and second phase works as mentioned within the document: Fire Precaution Upgrade Works Glangwili General Hospital, presented to us on the 6th Jan 2021'. Timescale of August 2024 added to tracker as this aligns with Phase 2 works completion date. 18/11/2021- Assistant Head of Operational Facilities Management confirmed residents have been written to and contractor has been confirmed to carry out work from end of November 2021 to March 2022. 10/01/2022- Survey work to be completed by March 2022.

Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Status of report	Recommendation Reference	Priority Level	Recommendation	Management Response	Original Completion Date	Revised Completion Date	Status (Red- behind schedule, Amber- on schedule, Green- complete)	Progress update/Reason overdue
BFS/KS/SJM/00115877	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: GREVILLE COURT, ALBION SQUARE, PEMBROKE DOCK, SA72 6XF BFS/KS/SJM/00115877	Open	BFS/KS/SJM/00115877_001	High	Item number 1 Alternative Escape Route (Distances). Provide an alternative means of escape as the overall travel distance from Lizzy's and Norma's Rooms is excessive. This new exit would need to be constructed within one of the rooms mentioned, the LABC and Planning department need to be contacted prior to any works undertaken (follow the recommendations within items 2 & 3 and this item will then no longer be required to be undertaken as we will accept item 2 and 3 as a compensatory feature for this situation).	Full action plan held by Estates.	Mar-22	Mar-22	External	24/08/2021- Action plan submitted to Health & Safety Committee does not include a timescale against this recommendation. To be clarified with the team. No time limit associated with letter from MWWFRS. 18/11/2021- Report to Health & Safety Committee 15/11/2021 confirms property owner, ATEB, are fully responsible for completing all of these required works and are committed to doing so by March 2022. 05/01/2022- update being reported to Health & Safety Committee January 2022- Remaining items are fully the responsibility of ATEB (Housing Association). MWWFRS are fully aware of the above, and formal visits are awaited from MWWFRS and formal sign off is expected early in 2022. 02/03/2022- Remaining items are fully the responsibility of ATEB (Housing Association). Awaiting a response from MWWFRS on whether any further inspection is planned. MWWFRS has already confirmed that all of the HDdUHB works are completed. 27/04/2022- UHB to liaise with Housing Association for confirmation the work has been completed.
BFS/KS/SJM/00115877	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: GREVILLE COURT, ALBION SQUARE, PEMBROKE DOCK, SA72 6XF BFS/KS/SJM/00115877	Open	BFS/KS/SJM/00115877_003	High	3.1 Item number 3 Fire Resisting Doors The fire doors in the following locations require : 1. Cold smoke seals to be repaired on a number of doors within the premises	Full action plan held by Estates.	Nov-21	Nov-21	External	24/08/2021- Action plan submitted to Health & Safety Committee shows timescale of November 2021. No time limit associated with letter from MWWFRS. 18/11/2021- Report to Health & Safety Committee 15/11/2021 confirms property owner, ATEB, are fully responsible for completing all of these required works and are committed to doing so by March 2022. 05/01/2022- update being reported to Health & Safety Committee January 2022- Remaining items are fully the responsibility of ATEB (Housing Association). MWWFRS are fully aware of the above, and formal visits are awaited from MWWFRS and formal sign off is expected early in 2022. 02/03/2022- Remaining items are fully the responsibility of ATEB (Housing Association). Awaiting a response from MWWFRS on whether any further inspection is planned. MWWFRS has already confirmed that all of the HDdUHB works are completed. 27/04/2022- UHB to liaise with Housing Association for confirmation the work has been completed.
BFS/KS/SJM/00115877	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: GREVILLE COURT, ALBION SQUARE, PEMBROKE DOCK, SA72 6XF BFS/KS/SJM/00115877	Open	BFS/KS/SJM/00115877_003	High	3.2 Item number 3 Fire Resisting Doors The fire doors in the following locations require : 2. The hinges are to be upgraded Twin Ball Bearing Fire Door Hinge BS EN Grade 14 or to an equivalent standard.	Full action plan held by Estates.	Nov-21	Nov-21 Mar-22	External	24/08/2021- Action plan submitted to Health & Safety Committee shows timescale of November 2021. No time limit associated with letter from MWWFRS. 18/11/2021- Report to Health & Safety Committee 15/11/2021 confirms property owner, ATEB, are fully responsible for completing all of these required works and are committed to doing so by March 2022. 05/01/2022- update being reported to Health & Safety Committee January 2022- Remaining items are fully the responsibility of ATEB (Housing Association). MWWFRS are fully aware of the above, and formal visits are awaited from MWWFRS and formal sign off is expected early in 2022. 02/03/2022- Remaining items are fully the responsibility of ATEB (Housing Association). Awaiting a response from MWWFRS on whether any further inspection is planned. MWWFRS has already confirmed that all of the HDdUHB works are completed. 27/04/2022- UHB to liaise with Housing Association for confirmation the work has been completed.
BFS/KS/SJM/00115877	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: GREVILLE COURT, ALBION SQUARE, PEMBROKE DOCK, SA72 6XF BFS/KS/SJM/00115877	Open	BFS/KS/SJM/00115877_003	High	3.3 Item number 3 Fire Resisting Doors The fire doors in the following locations require :3. Self-closing devices need to be fitted to the doors mentioned below and linked into the fire detection system to ensure that in the event of a fire all doors close fully into their frames when required. The sonic door guards installed are not practical in this type of premises.	Full action plan held by Estates.	Nov-21	Nov-21 Mar-22	External	24/08/2021- Action plan submitted to Health & Safety Committee shows timescale of November 2021. No time limit associated with letter from MWWFRS. 18/11/2021- Report to Health & Safety Committee 15/11/2021 confirms property owner, ATEB, are fully responsible for completing all of these required works and are committed to doing so by March 2022. 05/01/2022- update being reported to Health & Safety Committee January 2022- Remaining items are fully the responsibility of ATEB (Housing Association). MWWFRS are fully aware of the above, and formal visits are awaited from MWWFRS and formal sign off is expected early in 2022. 02/03/2022- Remaining items are fully the responsibility of ATEB (Housing Association). Awaiting a response from MWWFRS on whether any further inspection is planned. MWWFRS has already confirmed that all of the HDdUHB works are completed. 27/04/2022- UHB to liaise with Housing Association for confirmation the work has been completed.
BFS/KS/SJM/00115877	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: GREVILLE COURT, ALBION SQUARE, PEMBROKE DOCK, SA72 6XF BFS/KS/SJM/00115877	Open	BFS/KS/SJM/00115877_003	High	3.4 Item number 3 Fire Resisting Doors The sonic door guards installed are not practical in this type of premises. We recommend the installation of a free swing self-closing device within this type of residential care facility as the occupants may not be able to open a door fitted with a self-closer, also the non-ambulant residents are moved around on special equipment therefore having this type of closer assists staff with the movement of the resident. You must ensure that all fire doors are closed during the period between 2300 hours and 0700 hours, or when staffing levels are reduced to a minimum. • Kitchen door • Lounge Door • Office Door • All bedroom Doors • Utility room Door (this door does not require free swing only a standard self-closer) • Boiler room (this door does not require Free swing only a standard self-closer)	Full action plan held by Estates.	Nov-21	Nov-21 Mar-22	External	24/08/2021- Action plan submitted to Health & Safety Committee shows timescale of November 2021. No time limit associated with letter from MWWFRS. 18/11/2021- Report to Health & Safety Committee 15/11/2021 confirms property owner, ATEB, are fully responsible for completing all of these required works and are committed to doing so by March 2022. 05/01/2022- update being reported to Health & Safety Committee January 2022- Remaining items are fully the responsibility of ATEB (Housing Association). MWWFRS are fully aware of the above, and formal visits are awaited from MWWFRS and formal sign off is expected early in 2022. 02/03/2022- Remaining items are fully the responsibility of ATEB (Housing Association). Awaiting a response from MWWFRS on whether any further inspection is planned. MWWFRS has already confirmed that all of the HDdUHB works are completed. 27/04/2022- UHB to liaise with Housing Association for confirmation the work has been completed.
BFS/KS/SJM/00115877	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: GREVILLE COURT, ALBION SQUARE, PEMBROKE DOCK, SA72 6XF BFS/KS/SJM/00115877	Open	BFS/KS/SJM/00115877_003	High	3.5 Item number 3 Fire Resisting Doors The term '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 doorset. • Intumescent seals and smoke sealing devices. In the case of double doors, you should ensure that they close without affecting the operation of the seals.	Full action plan held by Estates.	Nov-21	Nov-21 Mar-22	External	24/08/2021- Action plan submitted to Health & Safety Committee shows timescale of November 2021. No time limit associated with letter from MWWFRS. 18/11/2021- Report to Health & Safety Committee 15/11/2021 confirms property owner, ATEB, are fully responsible for completing all of these required works and are committed to doing so by March 2022. 05/01/2022- update being reported to Health & Safety Committee January 2022- Remaining items are fully the responsibility of ATEB (Housing Association). MWWFRS are fully aware of the above, and formal visits are awaited from MWWFRS and formal sign off is expected early in 2022. 02/03/2022- Remaining items are fully the responsibility of ATEB (Housing Association). Awaiting a response from MWWFRS on whether any further inspection is planned. MWWFRS has already confirmed that all of the HDdUHB works are completed. 27/04/2022- UHB to liaise with Housing Association for confirmation the work has been completed.
BFS/KS/SJM/00115877	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: GREVILLE COURT, ALBION SQUARE, PEMBROKE DOCK, SA72 6XF BFS/KS/SJM/00115877	Open	BFS/KS/SJM/00115877_004	High	4.1 Item number 4 Doors Difficult to Open Ensure that all doors on exit routes are available and can be easily and immediately opened, without the use of a key, by anyone who might need to use them in an emergency.	Full action plan held by Estates.	Mar-22	Nov-21 Mar-22	External	24/08/2021- Action plan submitted to Health & Safety Committee does not include a timescale against this recommendation. To be clarified with the team. No time limit associated with letter from MWWFRS. 18/11/2021- Report to Health & Safety Committee 15/11/2021 confirms property owner, ATEB, are fully responsible for completing all of these required works and are committed to doing so by March 2022. 05/01/2022- update being reported to Health & Safety Committee January 2022- Remaining items are fully the responsibility of ATEB (Housing Association). MWWFRS are fully aware of the above, and formal visits are awaited from MWWFRS and formal sign off is expected early in 2022. 02/03/2022- Remaining items are fully the responsibility of ATEB (Housing Association). Awaiting a response from MWWFRS on whether any further inspection is planned. MWWFRS has already confirmed that all of the HDdUHB works are completed. 27/04/2022- UHB to liaise with Housing Association for confirmation the work has been completed.
BFS/KS/SJM/00115877	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: GREVILLE COURT, ALBION SQUARE, PEMBROKE DOCK, SA72 6XF BFS/KS/SJM/00115877	Open	BFS/KS/SJM/00115877_004	High	4.2 Item number 4 Doors Difficult to Open Change the key lock to a thumb turn type lock on the following doors: 1. Double doors within the living room to patio area	Full action plan held by Estates.	Mar-22	Nov-21 Mar-22	External	24/08/2021- Action plan submitted to Health & Safety Committee does not include a timescale against this recommendation. To be clarified with the team. No time limit associated with letter from MWWFRS. 18/11/2021- Report to Health & Safety Committee 15/11/2021 confirms property owner, ATEB, are fully responsible for completing all of these required works and are committed to doing so by March 2022. 05/01/2022- update being reported to Health & Safety Committee January 2022- Remaining items are fully the responsibility of ATEB (Housing Association). MWWFRS are fully aware of the above, and formal visits are awaited from MWWFRS and formal sign off is expected early in 2022. 02/03/2022- Remaining items are fully the responsibility of ATEB (Housing Association). Awaiting a response from MWWFRS on whether any further inspection is planned. MWWFRS has already confirmed that all of the HDdUHB works are completed. 27/04/2022- UHB to liaise with Housing Association for confirmation the work has been completed.

Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Status of report	Recommendation Reference	Priority Level	Recommendation	Management Response	Original Completion Date	Revised Completion Date	Status (Red-behind schedule, Amber-on schedule, Green-completed)	Progress update/Reason overdue
BFS/KS/SJM/00115877	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: GREVILLE COURT, ALBION SQUARE, PEMBROKE DOCK, SA72 6XF BFS/KS/SJM/00115877	Open	BFS/KS/SJM/00115877_004	High	4.3 Item number 4 Doors Difficult to Open Change the key lock to a thumb turn type lock on the following doors: 2. Final doors within the conservatory	Full action plan held by Estates.	Mar-22	Nov-21 Mar-22	External	24/08/2021- Action plan submitted to Health & Safety Committee does not include a timescale against this recommendation. To be clarified with the team. No time limit associated with letter from MWWFRS. 18/11/2021- Report to Health & Safety Committee 15/11/2021 confirms property owner, ATEB, are fully responsible for completing all of these required works and are committed to doing so by March 2022. 05/01/2022- update being reported to Health & Safety Committee January 2022- Remaining items are fully the responsibility of ATEB (Housing Association). MWWFRS are fully aware of the above, and formal visits are awaited from MWWFRS and formal sign off is expected early in 2022. 02/03/2022- Remaining items are fully the responsibility of ATEB (Housing Association). Awaiting a response from MWWFRS on whether any further inspection is planned. MWWFRS has already confirmed that all of the HddUHB works are completed. 27/04/2022- UHB to liaise with Housing Association for confirmation the work has been completed.
BFS/KS/SJM/00115877	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: GREVILLE COURT, ALBION SQUARE, PEMBROKE DOCK, SA72 6XF BFS/KS/SJM/00115877	Open	BFS/KS/SJM/00115877_006	High	Item number 6 Alternative Escape Route (Distance) Continue the path from the conservatory to the other side of the premises as if residents and staff are forced to evacuate in this direction it would be difficult meaning they may become trapped.	Full action plan held by Estates.	Mar-22	Nov-21 Mar-22	External	24/08/2021- Action plan submitted to Health & Safety Committee does not include a timescale against this recommendation. To be clarified with the team. No time limit associated with letter from MWWFRS. 18/11/2021- Report to Health & Safety Committee 15/11/2021 confirms property owner, ATEB, are fully responsible for completing all of these required works and are committed to doing so by March 2022. 05/01/2022- update being reported to Health & Safety Committee January 2022- Remaining items are fully the responsibility of ATEB (Housing Association). MWWFRS are fully aware of the above, and formal visits are awaited from MWWFRS and formal sign off is expected early in 2022. 02/03/2022- Remaining items are fully the responsibility of ATEB (Housing Association). Awaiting a response from MWWFRS on whether any further inspection is planned. MWWFRS has already confirmed that all of the HddUHB works are completed. 27/04/2022- UHB to liaise with Housing Association for confirmation the work has been completed.
BFS/KS/SJM/00115877	Jun-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: GREVILLE COURT, ALBION SQUARE, PEMBROKE DOCK, SA72 6XF BFS/KS/SJM/00115877	Open	BFS/KS/SJM/00115877_007	High	Item number 7 Maintenance Ensure that Emergency lighting and the fire extinguisher are properly tested and maintained.	Full action plan held by Estates.	Mar-22	Nov-21 Mar-22	External	24/08/2021- Action plan submitted to Health & Safety Committee does not include a timescale against this recommendation. To be clarified with the team. No time limit associated with letter from MWWFRS. 18/11/2021- Report to Health & Safety Committee 15/11/2021 confirms property owner, ATEB, are fully responsible for completing all of these required works and are committed to doing so by March 2022. 05/01/2022- update being reported to Health & Safety Committee January 2022- Remaining items are fully the responsibility of ATEB (Housing Association). MWWFRS are fully aware of the above, and formal visits are awaited from MWWFRS and formal sign off is expected early in 2022. 02/03/2022- Remaining items are fully the responsibility of ATEB (Housing Association). Awaiting a response from MWWFRS on whether any further inspection is planned. MWWFRS has already confirmed that all of the HddUHB works are completed. 27/04/2022- UHB to liaise with Housing Association for confirmation the work has been completed.
Admin - General/00329498	Jul-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Purple Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER Admin - General/00329498	Open	Admin - General/00329498_004	High	Article 11, Item 1 Fire Safety Management - An assessment should be undertaken to ensure there is a suitable and up to date Fire defence plan. The fire defence plan should be reviewed when situations or circumstances change within the building.	Full action plan held by Estates.	Oct-21	Sep-21 Nov-21 Feb-22 N/K	Red	Letter 02/07/2021 states all recommendations to be completed within 3 months of date of letter (i.e. 02/10/2021). 15/11/2021- Revised action plan dated 09/11/2021 confirms documents have been completed and issues, with ratification to take place by end of November 2021, at which time the recommendation can be closed. 10/01/2022- Fire defence plan issued to site management team requesting response by end of November 2021. No response received therefore chaser to be sent, assuming if no response received plan will be agreed by February 2022. 07/03/2022- requested confirmation if this recommendation has now been implemented, awaiting response. 27/04/2022-Fire Defence plan has been written and shared with hospital site senior management team for sign off, awaiting response.
Admin - General/00329499	Jul-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Red Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER Admin - General/00329499	Open	Admin - General/00329499_005	High	Article 11, Item 1 Fire Safety Management - An assessment should be undertaken to ensure there is a suitable and up to date Fire defence plan. The fire defence plan should be reviewed when situations or circumstances change within the building.	Full action plan held by Estates.	Oct-21	Sep-21 Nov-21 Feb-22 N/K	Red	15/11/2021- Revised action plan dated 09/11/2021 confirms documents have been completed and issues, with ratification to take place by end of November 2021, at which time the recommendation can be closed. 10/01/2022- Fire defence plan issued to site management team requesting response by end of November 2021. No response received therefore chaser to be sent, assuming if no response received plan will be agreed by February 2022. 07/03/2022- requested confirmation if this recommendation has now been implemented, awaiting response. 27/04/2022-Fire Defence plan has been written and shared with hospital site senior management team for sign off, awaiting response.
Admin - General/00329500	Jul-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Blue Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER Admin - General/00329500	Open	Admin - General/00329500_005	High	Article 11, Item 1 Fire Safety Management - An assessment should be undertaken to ensure there is a suitable and up to date Fire Defence Plan. The fire defence plan should be reviewed when situations or circumstances change within the building.	Full action plan held by Estates.	Oct-21	Sep-21 Nov-21 Feb-22 N/K	Red	Letter 30/06/2021 states all recommendations to be completed within 3 months of date of letter (i.e. 30/09/2021). 24/08/2021- Action plan submitted to Health & Safety Committee provides target date of end August 2021. 15/11/2021- Revised action plan dated 09/11/2021 confirms documents have been completed and issues, with ratification to take place by end of November 2021, at which time the recommendation can be closed. 10/01/2022- Fire defence plan issued to site management team requesting response by end of November 2021. No response received therefore chaser to be sent, assuming if no response received plan will be agreed by February 2022. 07/03/2022- UHB meeting with MWWFRS on 10/03/2022 to set out a full programme of delivery for remaining elements of work. Head of Assurance and Risk has requested update following this meeting. 27/04/2022-Fire Defence plan has been written and shared with hospital site senior management team for sign off, awaiting response.
BFS/KS/SJM/00114719	Dec-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: WITHBUSH HOSPITAL, WITHBUSH, FISHGUARD ROAD, HAVERFORDWEST, SA61 2PZ BFS/KS/SJM/00114719	Open	BFS/KS/SJM/00114719_001	High	Item number 1 Doors: Ensure that all doors on exit routes are available and can be easily and immediately opened, without the use of a key, by anyone who might need to use them in an emergency. Door from stairwell to EBME requires to have a locking device linked into the fire alarm system.	Management response being prepared by the Estates & Facilities Directorate	Mar-22	Mar-22 Jun-22	Red	16/12/2021- Letter dated 13/12/2021 states the MWWFRS will visit approx. 3 months from date of letter to arrange visit. The UHB should complete the actions and outcomes before that visit. 05/01/2022- update being reported to Health & Safety Committee January 2022- An action plan is currently being developed to address the small number of items identified in the LOFSM and will be discussed with the MWWFRS in the New Year. 02/03/2022- An action plan has been developed to address the small number of items identified in this LOFSM. We have already secured funds in the 2022/23 financial year to complete this work by circa June 2022. 27/04/2022- An action plan has been developed to address the small number of items identified in this LOFSM. MWWFRS are considering how they will approach this work in terms of whether a site visit is needed. There are specific areas of Compartmentation and Fire Door replacement from this LoFSM which MWWFRS have confirmed can be completed under Phase 1 of the main works. We await formal confirmation of this agreement.
BFS/KS/SJM/00114719	Dec-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: WITHBUSH HOSPITAL, WITHBUSH, FISHGUARD ROAD, HAVERFORDWEST, SA61 2PZ BFS/KS/SJM/00114719	Open	BFS/KS/SJM/00114719_002	High	Item number 2 Fire Resisting Corridors and Stairs: Ensure that all escape routes are kept free from fire and smoke at all material times by Moving the server unit from the staircase between the EBME and the access to hospital care and coordination (as mentioned in the previous FSM letter).	Management response being prepared by the Estates & Facilities Directorate	Mar-22	Mar-22 Jun-22	Red	16/12/2021- Letter dated 13/12/2021 states the MWWFRS will visit approx. 3 months from date of letter to arrange visit. The UHB should complete the actions and outcomes before that visit. 05/01/2022- update being reported to Health & Safety Committee January 2022- An action plan is currently being developed to address the small number of items identified in the LOFSM and will be discussed with the MWWFRS in the New Year. 02/03/2022- An action plan has been developed to address the small number of items identified in this LOFSM. We have already secured funds in the 2022/23 financial year to complete this work by circa June 2022. 27/04/2022- An action plan has been developed to address the small number of items identified in this LOFSM. MWWFRS are considering how they will approach this work in terms of whether a site visit is needed. There are specific areas of Compartmentation and Fire Door replacement from this LoFSM which MWWFRS have confirmed can be completed under Phase 1 of the main works. We await formal confirmation of this agreement.
BFS/KS/SJM/00114719	Dec-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: WITHBUSH HOSPITAL, WITHBUSH, FISHGUARD ROAD, HAVERFORDWEST, SA61 2PZ BFS/KS/SJM/00114719	Open	BFS/KS/SJM/00114719_003	High	Item number 3 Compartment: Reinstate the fire resistance in the following location(s) insert details so that fire and smoke cannot pass. • Electrical room within the plant rooms for both A+E and Theatres. • All under stairs cupboards (witnessed in Post grad to wd1 stairs, this includes the transom light and door to this cupboard (ADV Works??) and the cupboard under the stairs within the EBME).	Management response being prepared by the Estates & Facilities Directorate	Mar-22	Mar-22 Jun-22	Red	16/12/2021- Letter dated 13/12/2021 states the MWWFRS will visit approx. 3 months from date of letter to arrange visit. The UHB should complete the actions and outcomes before that visit. 05/01/2022- update being reported to Health & Safety Committee January 2022- An action plan is currently being developed to address the small number of items identified in the LOFSM and will be discussed with the MWWFRS in the New Year. 02/03/2022- An action plan has been developed to address the small number of items identified in this LOFSM. We have already secured funds in the 2022/23 financial year to complete this work by circa June 2022. 27/04/2022- An action plan has been developed to address the small number of items identified in this LOFSM. MWWFRS are considering how they will approach this work in terms of whether a site visit is needed. There are specific areas of Compartmentation and Fire Door replacement from this LoFSM which MWWFRS have confirmed can be completed under Phase 1 of the main works. We await formal confirmation of this agreement.

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BFS/KS/SJM/00114719	Dec-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: WITBYBUSH HOSPITAL, WITBYBUSH, FISHGUARD ROAD, HAVERFORDWEST, SA61 2PZ BFS/KS/SJM/00114719	Open	BFS/KS/SJM/00114719_004	High	Item number 4 Combustibles near Heat Source: General housekeeping within the room LGF049 was to a poor standard due to combustible items stored close to a source of ignition.	Management response being prepared by the Estates & Facilities Directorate	Mar-22	Mar-22 Jun-22	Red	16/12/2021- Letter dated 13/12/2021 states the MWWFRS will visit approx. 3 months from date of letter to arrange visit. The UHB should complete the actions and outcomes before that visit. 05/01/2022- update being reported to Health & Safety Committee January 2022- An action plan is currently being developed to address the small number of items identified in the LOFSM and will be discussed with the MWWFRS in the New Year. 02/03/2022- An action plan have been developed to address the small number of items identified in this LOFSM. We have already secured funds in the 2022/23 financial year to complete this work by circa June 2022. 27/04/2022- An action plan has been developed to address the small number of items identified in this LoFSM. MWWFRS are considering how they will approach this work in terms of whether a site visit is needed. There are specific areas of Compartmentation and Fire Door replacement from this LoFSM which MWWFRS have confirmed can be completed under Phase 1 of the main works. We await formal confirmation of this agreement.
BFS/KS/SJM/00114719	Dec-21	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: WITBYBUSH HOSPITAL, WITBYBUSH, FISHGUARD ROAD, HAVERFORDWEST, SA61 2PZ BFS/KS/SJM/00114719	Open	BFS/KS/SJM/00114719_005	High	Item number 5 Add Device to Alarm: Provide detection complying with BS 5839 part 1 – L1 linked to the existing fire alarm system in all under stair store cupboards. The changes should be carried out and commissioned by a competent person.	Management response being prepared by the Estates & Facilities Directorate	Mar-22	Mar-22 Jun-22	Red	16/12/2021- Letter dated 13/12/2021 states the MWWFRS will visit approx. 3 months from date of letter to arrange visit. The UHB should complete the actions and outcomes before that visit. 05/01/2022- update being reported to Health & Safety Committee January 2022- An action plan is currently being developed to address the small number of items identified in the LOFSM and will be discussed with the MWWFRS in the New Year. 02/03/2022- An action plan have been developed to address the small number of items identified in this LOFSM. We have already secured funds in the 2022/23 financial year to complete this work by circa June 2022. 27/04/2022- An action plan has been developed to address the small number of items identified in this LoFSM. MWWFRS are considering how they will approach this work in terms of whether a site visit is needed. There are specific areas of Compartmentation and Fire Door replacement from this LoFSM which MWWFRS have confirmed can be completed under Phase 1 of the main works. We await formal confirmation of this agreement.
RJD/KLI/00106219	Jan-22	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Prince Philip Hospital, Dafen Road, Llanelli, SA14 8QF RJD/KLI/00106219	Open	RJD/KLI/00106219_001	High	Breaches in Compartmentation During the inspection breaches in compartmentation were identified above cross corridor doors and from services riser cupboard to protected means of escape. The breaches in compartmentation would not appear to 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. Information held on the compartmentation within the premises is to be shared with the fire authority and the proposed schedule for	Management response being prepared by the Estates & Facilities Directorate	N/K	N/K	Amber	02/03/2022- A different approach from MWWFRS from elsewhere in the HddUHB. On this site, the inspector is issuing individual notices on each area of the hospital visited. This is likely to involve 15 or more individual LoFSM. No indication of any escalation above LoFSM on this site. HddUHB have met with the inspector to agree a pragmatic approach to the development of an action plan given that it is unlikely to receive all of the letters until circa end March 2022. MWWFRS are in agreement with this approach and a full action plan will be submitted following the receipt of all the LoFSM.
RJD/KLI/00106219	Jan-22	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Prince Philip Hospital, Dafen Road, Llanelli, SA14 8QF RJD/KLI/00106219	Open	RJD/KLI/00106219_002	High	Fire resisting doors The following fire resisting doors were found to be damaged/defective. These doors must be repaired/replaced. Main Kitchen trolley doors Street Doors to Wards three & four Door 20857 Door 20727 Fire doors should conform to a relevant standard e.g. Appendix B (including Appendix C Table B1) of Approved Document B volume 2 Buildings other than dwelling houses. BS 8214:2016 - Timber-based fire door assemblies - Code of Practice. Compliance with this or an equivalent standard will normally satisfy the requirement.	Management response being prepared by the Estates & Facilities Directorate	N/K	N/K	Amber	02/03/2022- A different approach from MWWFRS from elsewhere in the HddUHB. On this site, the inspector is issuing individual notices on each area of the hospital visited. This is likely to involve 15 or more individual LoFSM. No indication of any escalation above LoFSM on this site. HddUHB have met with the inspector to agree a pragmatic approach to the development of an action plan given that it is unlikely to receive all of the letters until circa end March 2022. MWWFRS are in agreement with this approach and a full action plan will be submitted following the receipt of all the LoFSM.
459/VEM/BFS/00335079	Feb-22	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Prince Philip Hospital Diabetic Unit Template 13 Dafen Llanelli 459/VEM/BFS/00335079	Open	459/VEM/BFS/00335079_001	High	Electromagnetic locking devices on a fire escape door may be acceptable on the proviso that the door will be released on actuation of the fire warning and/or detection system of the premises and is backed up by the provision of a manually operated break glass point (typically coloured green) guaranteed to interrupt the electrical current and sited adjacent to the fire escape door. Electromagnetic devices are to be regularly tested and the results recorded.	Management response being prepared by the Estates & Facilities Directorate	N/K	N/K	Amber	02/03/2022- A different approach from MWWFRS from elsewhere in the HddUHB. On this site, the inspector is issuing individual notices on each area of the hospital visited. This is likely to involve 15 or more individual LoFSM. No indication of any escalation above LoFSM on this site. HddUHB have met with the inspector to agree a pragmatic approach to the development of an action plan given that it is unlikely to receive all of the letters until circa end March 2022. MWWFRS are in agreement with this approach and a full action plan will be submitted following the receipt of all the LoFSM.
459/VEM/BFS/00335079	Feb-22	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Prince Philip Hospital Diabetic Unit Template 13 Dafen Llanelli 459/VEM/BFS/00335079	Open	459/VEM/BFS/00335079_002	High	Drapes and curtains should not be provided across escape routes or exits.	Management response being prepared by the Estates & Facilities Directorate	N/K	N/K	Amber	02/03/2022- A different approach from MWWFRS from elsewhere in the HddUHB. On this site, the inspector is issuing individual notices on each area of the hospital visited. This is likely to involve 15 or more individual LoFSM. No indication of any escalation above LoFSM on this site. HddUHB have met with the inspector to agree a pragmatic approach to the development of an action plan given that it is unlikely to receive all of the letters until circa end March 2022. MWWFRS are in agreement with this approach and a full action plan will be submitted following the receipt of all the LoFSM.
459/VEM/BFS/00335079	Feb-22	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Prince Philip Hospital Diabetic Unit Template 13 Dafen Llanelli 459/VEM/BFS/00335079	Open	459/VEM/BFS/00335079_003	High	Ensure Gardening teams are clearing final exits of leaves and gardening waste.	Management response being prepared by the Estates & Facilities Directorate	N/K	N/K	Amber	02/03/2022- A different approach from MWWFRS from elsewhere in the HddUHB. On this site, the inspector is issuing individual notices on each area of the hospital visited. This is likely to involve 15 or more individual LoFSM. No indication of any escalation above LoFSM on this site. HddUHB have met with the inspector to agree a pragmatic approach to the development of an action plan given that it is unlikely to receive all of the letters until circa end March 2022. MWWFRS are in agreement with this approach and a full action plan will be submitted following the receipt of all the LoFSM.
459/VEM/BFS/00094205	Feb-22	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Ty Bryn Template 25 Prince Philip Hospital Dafen Llanelli SA14 8RZ 459/VEM/BFS/00094205	Open	459/VEM/BFS/00094205_001	High	During the inspection breaches in compartmentation were identified from the following areas •Corridors to attic area •From vertical access ladder to attic •Glazed area from day services •From Server room to attic The breaches in compartmentation would not support the existing evacuation strategy. In the event of fire , breaches in compartmentation, will allow fire and smoke to spread unchecked throughout the building. This would have an impact on the means of escape and render the evacuation strategy of the building ineffective. All breaches in compartmentation should be fire stopped to provide the appropriate fire resistance in accordance with building regulations. The fire resistance should conform to a relevant standard e.g. Appendix A (including Table A1, A2) of Approved Document B Volume 2 Buildings Other Than Dwelling Houses. Compliance with this or an equivalent standard will normally satisfy the requirement.	Management response being prepared by the Estates & Facilities Directorate	N/K	N/K	Amber	02/03/2022- A different approach from MWWFRS from elsewhere in the HddUHB. On this site, the inspector is issuing individual notices on each area of the hospital visited. This is likely to involve 15 or more individual LoFSM. No indication of any escalation above LoFSM on this site. HddUHB have met with the inspector to agree a pragmatic approach to the development of an action plan given that it is unlikely to receive all of the letters until circa end March 2022. MWWFRS are in agreement with this approach and a full action plan will be submitted following the receipt of all the LoFSM.

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459/VEM/BFS/00094205	Feb-22	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Ty Bryn Template 25 Prince Philip Hospital Dafen Llanelli SA14 8RZ 459/VEM/BFS/00094205	Open	459/VEM/BFS/00094205_002	High	Emergency routes and exits must lead as directly as possible to a place of safety. The routes from patient bedrooms to the garden area does not support the safe evacuation of persons due to the pathway not allowing being wide enough to allow free travel of hospital beds. The evacuation strategy for the premises is to be immediately reviewed and the findings shared with staff within. This is to allow persons to evacuate the premises as quickly and safely as possible.	Management response being prepared by the Estates & Facilities Directorate	N/K	N/K	Amber	02/03/2022- A different approach from MWWFRS from elsewhere in the HddUHB. On this site, the inspector is issuing individual notices on each area of the hospital visited. This is likely to involve 15 or more individual LoFSM. No indication of any escalation above LoFSM on this site. HddUHB have met with the inspector to agree a pragmatic approach to the development of an action plan given that it is unlikely to receive all of the letters until circa end March 2022. MWWFRS are in agreement with this approach and a full action plan will be submitted following the receipt of all the LoFSM.
459/VEM/BFS/00094205	Feb-22	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Ty Bryn Template 25 Prince Philip Hospital Dafen Llanelli SA14 8RZ 459/VEM/BFS/00094205	Open	459/VEM/BFS/00094205_003	High	The findings of the premises fire door survey are to be implemented. Fire doors should conform to a relevant standard e.g. Appendix B (including Appendix C Table B1) of Approved Document B volume 2 Buildings other than dwelling houses. BS 8214:2016 - timber-based fire door assemblies - Code of practice Compliance with this or an equivalent standard will normally satisfy the requirement.	Management response being prepared by the Estates & Facilities Directorate	N/K	N/K	Amber	02/03/2022- A different approach from MWWFRS from elsewhere in the HddUHB. On this site, the inspector is issuing individual notices on each area of the hospital visited. This is likely to involve 15 or more individual LoFSM. No indication of any escalation above LoFSM on this site. HddUHB have met with the inspector to agree a pragmatic approach to the development of an action plan given that it is unlikely to receive all of the letters until circa end March 2022. MWWFRS are in agreement with this approach and a full action plan will be submitted following the receipt of all the LoFSM.
459/VEM/BFS/00094205	Feb-22	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Ty Bryn Template 25 Prince Philip Hospital Dafen Llanelli SA14 8RZ 459/VEM/BFS/00094205	Open	459/VEM/BFS/00094205_004	High	Where it is necessary to use dangerous substances , such as, gas cylinders, they must be stored in a secure and safe location, for example, a properly ventilated fire-resisting storeroom. The CO2 and propane storage areas are to be included within the premises fire assessment (A3.4)	Management response being prepared by the Estates & Facilities Directorate	N/K	N/K	Amber	02/03/2022- A different approach from MWWFRS from elsewhere in the HddUHB. On this site, the inspector is issuing individual notices on each area of the hospital visited. This is likely to involve 15 or more individual LoFSM. No indication of any escalation above LoFSM on this site. HddUHB have met with the inspector to agree a pragmatic approach to the development of an action plan given that it is unlikely to receive all of the letters until circa end March 2022. MWWFRS are in agreement with this approach and a full action plan will be submitted following the receipt of all the LoFSM.
459/VEM/BFS/00094205	Feb-22	2021/22	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: Ty Bryn Template 25 Prince Philip Hospital Dafen Llanelli SA14 8RZ 459/VEM/BFS/00094205	Open	459/VEM/BFS/00094205_005	High	An immediate inspection of the external parts of the premises is to be undertaken by a competent person to ensure the external areas are adequately lit in an emergency situation. The findings of this inspection are to be recorded within the significant findings of the premises fire assessment and acted upon.	Management response being prepared by the Estates & Facilities Directorate	N/K	N/K	Amber	02/03/2022- A different approach from MWWFRS from elsewhere in the HddUHB. On this site, the inspector is issuing individual notices on each area of the hospital visited. This is likely to involve 15 or more individual LoFSM. No indication of any escalation above LoFSM on this site. HddUHB have met with the inspector to agree a pragmatic approach to the development of an action plan given that it is unlikely to receive all of the letters until circa end March 2022. MWWFRS are in agreement with this approach and a full action plan will be submitted following the receipt of all the LoFSM.

* For highlighted rows above these will be closed following receipt of the new single LoFSM for PPH.

Fire Safety Governance Review
Fire Safety Policy - Self Assessment of Compliance April 22 (VER1)

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	Y	N/A				
	HB to Minimise risk	Y	N/A				
	HB commitment to fire safety	Y	N/A				
	HB to set out responsibilities	Y	N/A				
	HB to outline arrangements throughout HB	Y	N/A				
	Policy scope to all staff	Y	N/A				
	HB implement strong culture for fire safety	Y	N/A				
	HB nominated BL director for fire	Y	N/A				
	HB has appointed FSM to take the lead	Y	N/A				
	HB has appointed FSA's for advisors/training activities	Y	N/A				
	HB has nominated responsible persons and clear instructions / expectations	Y	N/A				
	HB has all FRA's for its complete portfolio	Y	N/A				
	HB has suitable sufficient means for raising alarm in case of fire	Y	N/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.	C	RJ	Aug-22	M		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.	Y	N/A				
	HB has identification of fire hazards and risks associated with its estate.	Y	N/A				
	HB has provision of appropriately funded prioritised action plans to address fire safety risks	Y	N/A				
	HB has reporting and monitoring for unwanted fire signals.	Y	N/A				
	HB has developed partnership initiatives with other bodies and agencies in fire safety	Y	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	Y	N/A				
	HB to have a programme in place to review fire safety risks.	Y	N/A				
	HB to have developed action plans to control and mitigate risk that comply with legislation.	Y	N/A				
	HB to have disseminated fire emergency action plans for each department and building.	C	RJ	Aug-22	M		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 a programme of appropriate fire safety training.	Y	N/A				
	HB to have implemented monitoring and reporting mechanisms go ensure good levels of compliance.	Y	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.	Y	N/A				
	HB CEO to ensure that adequate resources are in place to meet statutory requirements.	Y	N/A				
	HB CEO to nominate appropriate executive lead for fire safety This person is known as the DP.	Y	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.	Y	N/A				
	HB's DP to be responsible for submitting HB's annual fire audit to NWSSP-SES	Y	N/A				
	HB's DP to ensure that the HB has implemented effective organisational wide fire safety groups and sub groups.	Y	N/A				
	HB's DP to ensure that the board are made aware of the levels of assurance for fire safety within the organisation.	Y	N/A				
	HB's DoF to ensure adequate resources and expertise is available to formulate a fire management structure	Y	N/A				
	HB's DoF also permitted following DPF to submit online Audit to NWSSP-SES.	Y	N/A				
	HB's DoF also permitted to annually prepare status of compliance report for the DPF.	Y	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.	Y	N/A				
East & West Operations Managers	HB's E&W OM's to ensure day to day coordination of their team at the acute sites.	Y	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.	Y	N/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	M		Ops fire paper improvement
	HB's E&W OM's will be required to provide accurate information for fire safety audit submission.	Y	N/A				

	HB's E&W ASOM's responsible for day to day management of sites under their control.	Y	N/A				
Assistant Site Ops Managers	ASOM's also responsible for coordinating the activities of all relevant maintenance staff to ensure that appropriate maintenance arrangements are in place for fire safety	Y	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	Y	N/A				
	• Fire Detection and Alarm systems, including graphical user interfaces, are regularly serviced, maintained and tested in accordance with the relevant British Standard and results recorded accordingly.	Y	N/A				
	• Information relating to the fire alarm infrastructure is accurate, including making sure that any graphical interfaces/drawings are regularly updated.	C	SD	Aug-22	M		Review
	• Ensure that cause and effect systems are appropriate and receive regular testing/modifications/improvements.	C	SD	Aug-22	M		Review
	• Ensure that the fire alarm zones are correct and clearly displayed.	Y	N/A				
	• Ensure regular testing of emergency lighting systems.	Y	N/A				
	• Ensure regular testing of lightning protection systems.	Y	N/A				
	• Ensure regular testing of fire dampers and duct work systems.	Y	N/A				
	• Ensure that permits are correctly completed	Y	N/A				
	• That any necessary contracts are in place with external providers (Fire Extinguisher Maintenance/Suppression Systems etc.)	Y	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.	Y	N/A				
3.8 FSM responsibilities	• Have a detailed level of awareness of all fire safety features and their purpose.	Y	N/A				
	• Reporting non-compliance with legislation, policies and procedures to the DPF	Y	N/A				
	• Regularly arrange, coordinate and chair the HDUHB's Estates Departmental Fire Safety Team Meetings.	C	RJ	Jul-22	L		Review
	• Develop regular compliance status reports for respective line managers.	Y	N/A				
	• Control statutory capital funding to address non-compliance in relation to fire safety.	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.	Y	N/A				
	• Accurately record non-compliance aspects of fire safety on the Estates Corporate Risk Register.	Y	N/A				
	• Review the effectiveness of the fire safety team and its subsequent workload, make necessary work plan changes to accommodate certain activities.	Y	N/A				
	• Support and address requirements for disabled staff and patients (related to fire procedures).	Y	N/A				
	• Ensure the HDUHB continues to operate effective fire safety groups (FSG's), capturing acute, community and Mental Health aspects of fire safety.	Y	N/A				
	• Ensure the HDUHB complies 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.	Y	N/A				
	• Ensure that Fire Risk Assessments are completed and that risk mitigation measures are implemented.	Y	N/A				
	• Ensure that all new schemes and capital developments comply with fire requirements.	C	RJ with FST	Sep-22	M		FST to agree site procedures for this to be in place - part of design process
	• 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.	Y	N/A				
	• Develop the HDUHB's fire safety strategy and site fire procedures.	Y	N/A				
	• Develop an effective training programme for HDUHB staff, see Appendix 'A' (Training needs analysis).	Y	N/A				
	• Liaise with property landlords, specifically where HDUHB staff utilise non HDUHB premises to confirm suitable fire safety controls are in place.	Y	N/A				
	• Reporting of fire incidents in accordance with current practice.	Y	N/A				
	• Monitoring and mitigating unwanted fire incidents.	Y	N/A				
	• Liaising with enforcing authorities.	Y	N/A				
	• Liaising with other key stakeholder departments and managers.	Y	N/A				
	• Liaising with operational maintenance management to ensure that appropriate monitoring, inspection and maintenance of fire safety systems is in place.	Y	N/A				
	• Develop and maintain effective relationships with external bodies in relation to fire safety related matters.	Y	N/A				
			N/A				
FSA's responsibilities	• Providing expert advice on the application and interpretation of fire legislation and fire safety guidance, including Firecode.	Y	N/A				
	• Advising on the content of HDUHB's fire safety policy.	Y	N/A				
	• Assisting with the development of HDUHB's fire precautions systems and fire safety procedures.	Y	N/A				
	• Working closely with Maintenance Representatives and Fire Safety Manager.	Y	N/A				

	• Attending Fire Safety Group meetings for the areas that fall under their responsibility.	Y	N/A				
	• Maintaining site specific fire management plans and manuals.	Y	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.	Y	N/A				
	• Liaising with the enforcing authorities on technical issues.	Y	N/A				
	• Liaising with managers and staff on fire safety issues.	Y	N/A				
	• Liaising with the Authorising Engineer (Fire) at NHS Welsh Shared Services Partnership – Specialist Estate Services (NWSSP - SES).	Y	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.	Y	N/A				
	• Carrying out the annual fire audit for their respective areas of responsibility and agreeing action planning with the respective managers.	Y	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.	Y	N/A				
	• Assisting in identifying annual estate capital programmes to meet and maintain fire compliance requirements	Y	N/A				
Fire Safety Premises Management Responsibilities	each premises owned or occupied by HDUHB a premises manager will be nominated in writing to champion all necessary fire safety issues within that premises	C	RJ		Jul-22	M	this needs to be further reviewed and all RP's to sign
Departmental Managers Responsibilities	• Appropriate levels of management are always available to ensure decisions can be made regardless of the time of day.	Y	N/A				
	• Effective fire safety management arrangements are encouraged throughout their department.	Y	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.	C	NOT RJ responsibility		Jun-22	M	Needs further review, RJ to raise profile of this, responsibility with managers
	• They have effective communication mechanisms in place to cascade fire safety information throughout the department to all staff including line managers/supervisors.	Y	N/A				
	• Actions, which are within their direct control, that are identified on the Fire Risk Assessment, are dealt with in a timescales stipulated. If this is not possible then the action should be escalated to the Fire Safety team	C	RJ		Jul-22	M	improved when Boris system is implemented review efficiency by July 22
	• All relevant shortcomings are communicated to the Fire Safety Manager.	Y	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	NOT RJ responsibility		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 agencies or bank staff that are required at short notice.	C	NOT RJ responsibility		Sep-22	M	difficult to assess this - need review
	• 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 managers, which can be reported to the Fire Safety Team.	C	NOT RJ responsibility		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	C	NOT RJ responsibility		Sep-22	M	difficult to assess this - need review
Fire Safety Wardens	implementing fire safety wardens within departments across the organisation as detailed in paragraph 7.29 HTM 05 – 01 Managing healthcare fire safety	Y	N/A				We have implemented FSW's but a further review on numbers across the HB is needed.
	• Act as the eyes and ears for the department in relation to fire safety matters.	Y	N/A				
	• Monitor fire safety issues within the department as identified by their training.	Y	N/A				
	• Regularly attend the warden refresher training when required.	Y	N/A				
	• Ensure that arrangements are in place for effective day-to-day monitoring to support this Fire Safety Policy.	Y	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.	Y	N/A				
	If required, support the fire response team during a fire safety incident/emergency	Y	N/A				
Fire Response Team	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 premise	Y	N/A				
Switchboard	The switchboard team have an integral part to play in the response to fire signals	Y	N/A				
Duties & Responsibilities for all Staff	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 expect all staff to:	Y	N/A				
	• 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.	Y	N/A				
	• To know what to do in the event of a fire or on hearing the fire alarm.	Y	N/A				
	• To know the location of fire alarm points and firefighting equipment.	Y	N/A				

	• To know how to use the fire extinguishers and their uses on different fires.	Y	N/A				
	• To make certain that they are familiar with all means of safe escape in the event of fire.	Y	N/A				
	• To minimise potential of fire by ensuring good housekeeping	C	All staff	Jul-22	M		HB Fire Group to decide outcome
	• To ensure that any equipment used in in safe working condition and is used appropriately and safely and in accordance with manufacturer's guidelines to avoid any unnecessary risks.	Y	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 to being taken back into service.	Y	All staff				forms part of electrical safety global e-mail
	To report any concerns or issues to line managers.	Y	N/A				
The Authorising Engineer (Fire)	expertise and advice will be sought from NWSPP-SES - NHS Wales Shared Services Partnership - Specialist Estates Services.	Y	N/A				
The Competent Person (Fire)	HDUHB will only use Approved Competent Persons to undertake installation and/or maintenance of all fire-related services	Y	N/A				
Fire Safety Groups	The HDUHB will ensure that an organisational wide overarching Fire Safety Group (FSG) is established	Y	N/A				
Fire Safety Sub Groups	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	Y	N/A				
Evacuation Procedures	The FSA's will be responsible for devising suitable fire evacuation plans/strategies for all areas within HDUHB, as they will differ depending upon the requirements of each area	C	RJ	Oct-22	M		Review
	These plans will be displayed where required and will also be specifically documented with the individual fire safety management plans and tested periodically.	C	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 area (or similar) is tested annually for an agreed premises.	C	RJ	May-22	M		Review and agree programme for future exercises
	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 event of an emergency	Y	N/A				
	Evidence and subsequent outcomes of evacuation exercises must be discussed and retained by both FSA and departmental managers.	Y	N/A				
	suitable provisions of equipment must be made available along with the appropriate number of staff trained at all times to operate them.	Y	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	Y	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.	C	RJ and MH	Jul-22	M		Task and finish group on this issue being established
Major Incidents	departments must be able to demonstrate that suitable emergency plans are in place to deal with situations	C (y7)	RJ and PE	Oct-22	M		BCP's and RA's have been developed and action cards are in place - wider review needed.
Fire Risk Assessments	Only designated members of the FST will be permitted to undertake FRA's for HDUHB	Y	N/A				
	All fire risk assessments are reviewed at either a predetermined date specified within the fire risk assessment or when circumstances within the area change	Y	N/A				
	The significant findings of the Fire risk assessments must be recorded and communicated to subsequent managers for action planning.	Y	N/A				improved when Boris system is implemented
Organisational Risk Profiling and Risk Management	Departmental managers, must be made fully aware of any changes within their area of control. If staff require any advice or wish to discuss changes, they must contact the fire safety team directly	Y	N/A				Review - suggest global instruction for this to make staff aware. Forms part of management training too.
Equality Act 2010	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 the fire alarm system can also be issued to staff with hearing difficulties. This should be discussed with the fire safety advisors.	Y	N/A				
	Evacuation - In all patient areas evacuation will be staff-assisted for both patients and disabled visitors alike utilising the appropriate evacuation aids as necessary.	Y	N/A				
	HDUHB also has procedures for developing bespoke Personal Emergency Evacuation Plans (PEEPS) for all disabled employees.	Y	N/A				
Building Regulations	Where Building Regulations apply to these schemes, the fire strategy will form part of the supporting information for the Building Regulation submission.	Y	N/A				
Arson	Extra vigilance and control must be adopted by the HDUHB to reduce the potential for 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	Y	N/A				Forms part of training at L2 and L5
(DSEAR)	It is imperative that a suitable and sufficient risk assessment be carried out by staff to control the risks, where required. If there is any doubt or concerns, staff must contact the Fire Safety Team and/or Health and Safety Managers for further advice and guidance.	N	PE	Oct-22	M		This is not in place - desk top exercise needed to determine areas where DSEAR assessments will be needed. Compliance team action.

Site Control and Contractors	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 property	Y	N/A						New procedures in place - review of this 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.	Y	N/A						
	The FST must analyse statistics regularly with respective managers to ensure there is 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	Y	N/A						
Fire safety training	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 safety management system	Y	N/A						TNA in place - Global e-mails are needed to cascade this message to all staff.
Fire Safety Training Programme	A detailed Fire Safety Training Programme has been prepared by the Fire Safety Team, which considers the needs of the entire organisation	Y	N/A						
	Managers who are specifically responsible for staff must ensure that each member of staff within their control is assigned to the correct training programme and encourage the need for training	Y	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	Y	N/A						
Fire Safety Awareness E-Learning	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 induction by line management immediately on commencement of work in their workplace	Y	N/A						
General Fire Safety Training-Level 1 and Level 2		Y	N/A						As part of TNA
Level 3 Advanced Specific Training		Y	N/A						As part of TNA
Level 4 Fire Safety Warden Training		Y	N/A						As part of TNA
Level 5 Managers Training		Y	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						
Policies	Refer to other policies	Y	N/A						Other related policies are available that are listed in the Fire Policy.
Smoke Free Policy	For further information, please refer to HDUHB's Smoke Free Policy	Y	N/A						Smoke free group established and measures have been implemented to consider this. Further meetings on this planned for 2022 with PHW.
Smoking in Mental Health Areas	How is this being controlled by ward managers	C	ward managers		Oct-22	M			RJ to obtain status on this control with 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	C	TRANSPORT TEAM		Oct-22	M			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	Y	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.	C	Not RJ responsibility		Jul-22	M			Review Needed - RJ to check procurement standards for orders
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.	C	RJ		Sep-22	M			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						