

PWYLLGOR IECHYD A DIOGELWCH HEALTH & SAFETY COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	10 July 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Fire Safety Management Update Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Andrew Carruthers, Director of Operations
SWYDDOG ADRODD: REPORTING OFFICER:	Rob Elliott, Director of Estates, Facilities and Capital Management

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

ADRODDIAD SCAA SBAR REPORT <u>Sefyllfa / Situation</u>

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

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

Cefndir / Background

The HSC will recall previous updates on each of the above. This report provides an update on progress on each of these areas since the previous HSC Meeting held on 9 May 2023.

Asesiad / Assessment

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

1.1 Withybush General Hospital (WGH)

Phase 1

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

As noted in the May Committee Meeting an application had been received from the Supply Chain Partner (SPC) to extend the programme for 2 months to the end of October 2023. This extension has now been fully considered by the Project Manager with a revised completion now set at the end of October 2023.

This remains a complex project and programme management continues to be a challenge. The Mid and West Wales Fire and Rescue Service (MWWFRS) have already extended the FEN to August 2023 and will revisit the Hywel Dda University Health Board (HDdUHB) prior to the October date in order to consider a further extension to align with the above timelines.

The HDdUHB continues to enjoy excellent working relationships with MWWFRS who remain highly satisfied with the progress we are making on such a challenging project in a live hospital.

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

Phase 2

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

At the last Committee meeting the programme date for completing the Business Justification Case (BJC) was noted as requiring an extension of circa 4 months to August 2023. This requirement is to accommodate the work necessary in developing a reduced scope following the initial indication of Capital costs. This reduced scope would need to be fully agreed with MWWFRS.

Following the previous Committee, we have worked in partnership with NHS Wales Shared Services Partnership–Senior Fire Safety Advisor (NWSSP-SFSA) to develop a number of options to reduce scope on Phase 2 and therefore reduce Capital requirement from the All-Wales Capital Programme.

The preferred HDdUHB option was presented to MWWFRS at a meeting held on Friday 14 April 2023. This initial presentation was well received and the HDdUHB have now also submitted additional supporting documents for consideration.

The MWWFRS have advised that they now have all the information they need but following a presentation of our reduced scope to their executive officers they are seeking specialist advice and a final decision on the reduced scope will now be made by the end of May 2023.

This decision was originally anticipated in early May and discussions have taken place with MWWFRS to explain that this will have an implication on the previously advised August 2023 date for BJC completion.

Taking account of the additional time needed by MWWFRS we would anticipate that the Business Case process which will follow this decision would allow a start on site date of circa February 2024. We will be able to update this further once this decision has been confirmed.

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

In addition to the above we are reviewing opportunities with WG (subject to agreement with MWWFRS to reduce scope) to undertake all Fire related work in second floor Wards at WGH whilst empty for RAAC surveys. This would allow a further contract programme reduction on Phase 2 and a subsequent reduction in capital expenditure and will also avoid a second disruption to Ward capacity and operational services later in 2024.

These discussions with WG have been well received and we have been asked to make a formal request for funding once the MWWFRS have confirmed their decision.

Decant Arrangements to Support Phase 2 Work

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

The project is now in progress on site and the completion date remains on target for the Decant Ward to be operational by January 2024.

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

1.2 Glangwili General Hospital (GGH)

Phase 1

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

As noted at the May Committee the approved programme has now been extended to late January 2024 and remains the current approved programme.

The HDdUHB and Project Managers are still awaiting the detail of the request to further extend the programme and, despite regularly pressing for an update, this has not yet been forthcoming from the SCP. The HDdUHB will take up this issue when it meets again shortly with the SCP Directors.

Phase 2

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

As noted at the previous Committee the completion date for the Phase 2 BJC is programmed to be August 2023.

Noting the work on the scope review being undertaken at WGH we have also advised MWWFRS that we will wish to take a similar approach at GGH.

We are not yet at this stage but given the additional work necessary it is likely that the August 2023 date will require review. We will update this further when we are at the appropriate stage.

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

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

1.3 Additional Letters of Fire Safety Matters

Bronglais General Hospital (BGH) Main Building

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

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

The HDdUHB has now submitted the Programme Business Case (PBC) for BGH main buildings in the sum of £29.6m. We now await scrutiny comments from WG and will be able to update further when these are received.

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

Following discussion around scope reduction at WGH we have also suggested to WG that we would work in partnership with MWWFRS to further review the BGH Fire Project also. WG have welcomed this and have advised that they will pick this question up as part of the scrutiny process of the PBC.

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

> Prince Philip Hospital (PPH)

- At the previous Committee it was noted that priority works have been committed to be undertaken in the current financial year (now complete). We are currently undertaking the independent quality review which is applicable to all Fire Door installations.
- Future investment plans for this site are as follows:
 - The initial stage of EFAB funding will commence in April 2023 and will continue into the following financial year completing in March 2025 (£411k and £733k respectively)
 - The final stage of Business Case development for the remaining work beyond 2025 will require a BJC to be submitted. We are currently reviewing the timeline of this and whether a PBC is required in advance of a BJC.

> South Pembrokeshire Hospital (SPH)

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

Certain elements of the above work have already been completed on a fast-track basis to accommodate patient decant from WGH to SPH in response to the RAAC surveys to avoid further disruption.

As noted in the previous Committee we can now give an assurance that all Fire Investment plans for all requirements across the HDdUHB have now been fully approved by MWWFRS and we continue to meet regularly to update on progress.

1. Audit Tracker

Attached at Appendix 1 for further information, is the HDdUHB tracker developed by the Assurance and Risk Team which monitors progress on all of the above issues. Going forward, this Appendix will be regularly updated and submitted with the Fire Safety Management Update Report to the Health & Safety Committee for completeness.

2. Fire Safety Management Update

2.1 Fire Risk Assessments (FRAs)

As of 30 May, there are 0 overdue FRAs. A further 37 FRAs come online (up to 14^t July 2023) as identified on the NWSSP-SES system dashboard.

2.2 Boris Fire Risk Assessment Management System

Live FRAs are now being undertaken by using the new system. A full update was given to the Fire Safety Group on 6 December 2022. All FRAs will transfer to the new Boris system over the next circa 12 months. Currently 141 Fire Risk Assessments out of a total of 364 have been undertaken and transferred (38.73% of all FRAs; 31.31% previously reported).

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

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

2.3 Fire Safety Training

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

Table 3.0 As at 15 February 2023

Competence Name	Assignment Count	Required	Achieved	Compliance %
NHS CSTF Fire Safety - 2 Years	11,748	11,748	9,462	80.54%
100 LOCAL Fire Safety Level 2 - 1 Year General	5,457	5,457	2,769	50.74%
100 LOCAL Fire Safety Level 3 - 1 Year General	212	212	119	56.13%

<u> Table 3.0 As at 18th April 2023</u>

Competence Name	Assignment Count	Required	Achieved	Compliance %
NHS CSTF Fire Safety - 2 Years	11,842	11,842	9,833	83.30%
100 LOCAL Fire Safety Level 2 - 1 Year General	5,487	5,487	3,008	54.82%
100 LOCAL Fire Safety Level 3 - 1 Year General	190	190	124	63.26%

<u> Table 3.0 As at 30th May 2023</u>

Competence Name	Assignment Count	Required	Achieved	Compliance %
NHS CSTF Fire Safety - 2 Years	11,959	11,959	10,080	84.29%
100 LOCAL Fire Safety Level 2 - 1 Year General	5,530	5,530	3,192	57.72%
100 LOCAL Fire Safety Level 3 - 1 Year General	178	178	138	77.53%

As noted above:

- Level 1 fire safety training is now over 80% and continues to rise.
- Level 2 fire safety training has improved marginally since the last report. Level 2 training covers all clinical staff that work with or have direct contact with in-patient and out-patient facilities

• Level 3 fire safety training has increased by 14% since the last report. Acknowledging the importance of the training for these individuals, additional sessions have been provided. We will continue to undertake additional sessions on a flexible basis to continue to improve compliance.

A review of the total numbers of staff in this group (178) indicates that almost all of these staff will need refresher training with very few new starters.

- Level 4 fire warden training 6 sessions facilitated by an external accredited contractor have taken place with a total number of 92 volunteers being trained. Additional sessions will be provided if more volunteers are forthcoming.
- Level 5 senior staff training (Band 8B & above) 200 staff have already attended the training out of a possible 244. This equates to circa 82% uptake.

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

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

2.4 Unwanted Fire Signals (UwFS)

We have attached at Appendix 2 a full report on UwFS's throughout the HDdUHB for the period 1st June 2023 to 26th June 2023. Any sites not listed have had no false alarms within the reporting period.

Argymhelliad / Recommendation

The Health and Safety Committee is requested to:

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

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.11 Ensure reports and factual information from external regulatory agencies are acted upon within achievable timescales.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol:	Estates and Facilities Risk No 813 Score 15

Datix Risk Register Reference and Score:	
Galluogwyr Ansawdd:	6. All Apply
Enablers of Quality:	Choose an item.
Quality and Engagement Act	Choose an item.
(sharepoint.com)	Choose an item.
Parthau Ansawdd:	2. Safe Care
Domains of Quality Quality and Engagement Act	1. Staying Healthy 3. Effective Care
(sharepoint.com)	Choose an item.
Amcanion Strategol y BIP: UHB Strategic Objectives:	5. Safe sustainable, accessible and kind care4. The best health and wellbeing for our individuals, families and communities
	Choose an item.
	Choose an item.
Amcanion Cynllunio	2a Staff health and wellbeing
Planning Objectives	5a Estates Strategies
	7a Population Health Choose an item.
Amcanion Llesiant BIP:	10. Not Applicable
UHB Well-being Objectives:	Choose an item.
Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	Choose an item.
Objectives Annual Report 2021-2022	Choose an item.

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

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Funding sought from Welsh Government.
Ansawdd / Gofal Claf: Quality / Patient Care:	Not Applicable
Gweithlu: Workforce:	Delivering a safe working environment
Risg: Risk:	Estates and Facilities Risk No 813

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

Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule,	Progress update/Reason overdue
BFS/KBJ/SJM/001 13573	. Dec-19	2019/20	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters. St Nons (Secure EMI unit)/ St Brynach's (Day Hospital) / Bro Cerwyn (Offices) BFS/KBJ/SJM/00113573	BFS/KBJ/SJM/001135 73_001	High	 R.1. St Nons. Ensure that door sets than can resist fire and smoke for 30 minutes are provided in the following locations: Throughout Units, many doors were defective, these were on escape routes. The terms door set refers to the complete element as used in practice: The door leaf or leaves. The frame in which the door is hung. Hardware essential to the functioning of the door set, 3 x hinges. Intumescent seals and smoke sealing devices/Self closure. Self-closers to be fitted to all doors and not compromise strips and seals of fire doors. 	Mar-20 Dec-21 Apr-22 Mar-23 Jul-23 Aug-23	Dec-21 Apr-22 Dec-22 Mar-23 Jul-23 Aug-23	Amber	12/01/2021- Revised letter from MWWFRS confirmed this item is Stage 2 / Phase 1 works relate to all remaining escape routes at W 11/11/2022- a revised completion date of March 2023 had previous who had formally extended the FEN dates. Following the latest update to this Committee extensive further w This work being identified from forward look surveys as part of the The impact on programme of the above has meant that the date r a period of 4-month extension. This extension has been fully assest acceptance of this programme. This programme impact has been planned for mid November 2022. 20/12/2022- This programme update has been fully reported to N adjustment. They have noted that they will look to revisit theUHB given at that point. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position. Forecasted compl 21/04/2023- communication from MWWFRS confirmed a formal of
BFS/KBJ/SJM/001 13573	. Dec-19	2019/20	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters. St Nons (Secure EMI unit)/ St Brynach's (Day Hospital) / Bro Cerwyn (Offices) BFS/KBJ/SJM/00113573	BFS/KBJ/SJM/001135 73_002	High	R2. St Nons. Reinstate the fire resistance in the following location(s): Compartmentation issues throughout unit, due to Dampers showing fault on system.	Mar-20 Dec-21 Apr-22 Mar-23 Jul-23 Aug-23	Dec-21 Apr-22 Dec-22 Mar-23 Jul-23 Aug-23	Amber	12/01/2021- Revised letter from MWWFRS confirmed this item is Stage 2 / Phase 1 works relate to all remaining escape routes at W 11/11/2022- a revised completion date of March 2023 had previo who had formally extended the FEN dates. Following the latest update to this Committee extensive further w This work being identified from forward look surveys as part of th The impact on programme of the above has meant that the date of a period of 4-month extension. This extension has been fully asset acceptance of this programme. This programme impact has been 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position. WWFRS head of 12 20/12/2022- This programme update has been fully reported to M adjustment. They have noted that they will look to revisit theUHB given at that point. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position. Forecasted compl 21/04/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position. Forecasted compl 21/04/2023- communication from MWWFRS confirmed a formal of pending request to extend.
BFS/KS/SJM/0017 5424/ 00175421/00175 428/00175426/00 175425		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/ 00175421/00175428/00 175426/00175425	5_001		 R1. Compartment A Compartmentation survey of all the listed blocks above including floor to roof (Loft separation between stairwell and accommodation / office areas) must be carried out to ensure that fire and smoke cannot pass. All Loft hatches are to be fire resisting to a minimum of 30 minutes. Data cables, pipes and ducting need to be fire stopped, noted within St Thomas block but to include any other area not noted within all other blocks. 	Mar-20 Dec-21 Apr-22 Mar-23 Jul-23 Aug-23	Dec-21 Apr-22 Dec-22 Mar-23 Jul-23 Aug-23	Amber	12/01/2021- Revised letter from MWWFRS confirmed this item is Stage 2 / Phase 1 works relate to all remaining escape routes at W 11/11/2022- a revised completion date of March 2023 had previo who had formally extended the FEN dates. Following the latest up Fire Doors and Fire Stopping requirements. This work being identic chain and UHB teams. The impact on programme of the above has meant that the date is a period of 4-month extension. This extension has been fully asset acceptance of this programme. This programme impact has been planned for mid-November 2022. 20/12/2022- This programme update has been fully reported to N adjustment. They have noted that they will look to revisit theUHB given at that point. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position. Forecasted comp 21/04/2023- communication from MWWFRS confirmed a formal pending request to extend.

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

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

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BFS/KS/SJM/0017 5424/ 00175421/00175 428/00175426/00 175425		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/ 00175421/00175428/00 175426/00175425	BFS.KS/SJM/0017542 4/ 00175421/00175428 /00175426/0017542 5_002		 R2. Fire Resisting Corridors Ensure that the means of escape is kept free from fire and smoke for a period of 30 minutes by ensuring that: Bedroom / flat doors, Kitchen, cleaners and Laundry room doors, are all to be a minimum fire resistance of FD30s with a self-closer. (Pembroke county, Springfield, St Thomas, Kensington blocks) these doors should not be wedged open and any intumescent smoke seals that is damaged (Painted over) or missing should be replaced. At the time of the inspection I noted a number of doors being held open with wedges, the use of these Wedges holding doors open in all Blocks should be prohibited as it could promote the spread of fire, if doors are required to be left open then they will have to be self-closing 30-minute fire door linked in to the fire detection system. Excessive gaps in fire doors should be 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. 	Mar-20 Dec-21 Apr-22 Mar-23 Jul-23 Aug-23	Dec-21 Apr-22 Dec-22 Mar-23 Jul-23 Aug-23	Amber	12/01/2021- Revised letter from MWWFRS confirmed this item is Stage 2 / Phase 1 works relate to all remaining escape routes at W 11/11/2022- a revised completion date of March 2023 had previo who had formally extended the FEN dates. Following the latest up Fire Doors and Fire Stopping requirements. This work being identi chain and UHB teams. The impact on programme of the above has meant that the date r a period of 4-month extension. This extension has been fully asses acceptance of this programme. This programme impact has been planned for mid-November 2022. 20/12/2022- This programme update has been fully reported to N adjustment. They have noted that they will look to revisit the UHE given at that point. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position. Forecasted compl 21/04/2023- communication from MWWFRS confirmed a formal opending request to extend.
BFS/KS/SJM/0011 4719 - KS/890/03	Feb-20	2019/20	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: Withybush General Hospital. BFS/KS/SJM/00114719 - KS/890/03	BFS/KS/SJM/001147 19_03_001	High	R1. Compartmentation – All Horizontal Corridor Escape Routes To undertake whatever works are necessary to ensure that any / all breaches in fire resisting compartmentation that affect the Horizontal Escape Routes within Withybush Hospital are addressed. Fire resisting structures are to continue to slab / upper floor level / roof level and pass through any false ceiling provided.	Aug 21 Dec 21 Apr 22 Dec 22 Mar 23 Jul 23 Aug 23	Dec 21 Apr 22 Dec 22 Mar 23 Jul 23 Aug 23	Amber	This work is part of the phase 1 WGH Fire Enforcement Programm 12/08/2022- MWWFRS have extended to March 2023 as they have extra time to implement. Letter dated 25/07/22 from MWWFRS of 11/11/2022- a revised completion date of March 2023 had previous who had formally extended the FEN dates. Following the latest update to this Committee extensive further w This work being identified from forward look surveys as part of th The impact on programme of the above has meant that the date of a period of 4-month extension. This extension has been fully asse acceptance of this programme. This programme impact has been planned for mid-November 2022. 20/12/2022- This programme update has been fully reported to N adjustment. They have noted that they will look to revisit the UHE given at that point. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health be thay are comfortable with the current position. Forecasted compl 21/04/2023- communication from MWWFRS confirmed a formal pending request to extend.
BFS/KS/SJM/0011 4719- KS/890/04	Feb-20	2019/20	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: Withybush General Hospital. BFS/KS/SJM/00114719- KS/890/04	BFS/KS/SJM/001147 19_004	High	 R1. Compartmentation – All Other Compartmented Areas. To undertake whatever works are necessary to ensure that any / all breaches in fire resisting compartmentation that affect the Wards, Theatres, Plant Rooms, Offices, Surgeries, Specialist Units and any other compartmented spaces within Withybush Hospital are addressed. Fire resisting structures are to continue to slab / upper floor level / roof level and pass through any false ceiling provided. 	Apr-22 Apr-25	Dec-24 Apr-25	Amber	This work is part of the phase 2 WGH Fire Enforcement Programm 13/11/2020- Letter dated 05/11/2020 from MWWFRS this notice them on the 02 October 2020). Recommendation changed back fr 27/06/2022- Phase 2 works remain on programme to be completed 12/08/22-unchanged- Phase 2 at WGH, WG has provided approvation then to WG after the scrutiny process 11/11/2022- unchanged, same as previous comment from 12/08/20/12/2022- A programme completion date will be developed as the phase 2 project. Early indications are that due to the multiple Dec diligence work within the Business Case. As this becomes more de can be made to the Phase 2 Enforcement dates. This matter has be programme should the nature of the works dictate that an extens 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health be thay are comfortable with the current position of April 2025 date. 26/04/2023- the UHB has recently presented a reduced scope of v received the second week of May 2023. Subject to this being app
KS/890/08	Nov-20	2020/21	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: West Wales General Hospital, Glangwili, Dolgwili Road, Carmarthen, Carmarthenshire, SA31 2AF KS/890/08	K5/890/08_01	High	R1.Compartmentation – All Horizontal Corridor Escape Routes (Agreed Phase 1 Works). To undertake whatever works are necessary to ensure that any/all breaches in fire resisting compartmentation that affect the Horizontal Escape Routes within Glangwili General Hospital are addressed as agreed in the programme for Phase 1 Works (presented to us on the 02 October 2020). Fire resisting structures are to continue to slab/upper floor level/roof level and pass through any false ceiling provided.	Oct 20 Feb 21 Jul 22 Feb 23 Aug-23	Jul 22 Feb 23 Nov-23	Amber	13/11/2020- Letter dated 05/11/2020 from MWWFRS confirming KS/890/09 dated 04/11/2020. KS/890/08 to be completed by 31/0 October 2020). Original completion dates shown on tracker taken 11/11/2022- a revised completion date of March 2023 had previo who had formally extended the FEN dates. Following the latest update to this Committee extensive further w This work being identified from forward look surveys as part of th 20/12/2022- A revised completion date of November 2023 has no checks. This programme update has been fully reported to the Mt adjustment. MWWFRS have noted that they will look to revisit the can be given at that point. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position. Forecasted compl 21/04/2023- communication from MWWFRS confirmed a formal pending request to extend.

is to be completed in line with the agreed first phase works:

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

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

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

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

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

mme.

have accepted UHB presentation of the extra complexity of the work involved which requires S confirms this.

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

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

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

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

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

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

mme.

ce is extended to 30 April 2025 as agreed in the programme for Phase 2 Works (presented to k from red to amber.

leted by April 2025.

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

08/22.

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

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

of works for Phase 2, which the MWWFRS are considering, with a decision likely to be approved, there will be a significant reduction in cost.

ing enforcement notice KS/890/06 is withdrawn and replaced by KS/890/07, KS/890/08, 1/07/2022 as agreed in the programme for Advanced Works (presented to them on the 02 ten from original KS/890/06 enforcement notice.

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

r works have been identified including additional Fire Doors and Fire Stopping requirements. the pre planning process in place with the supply chain and UHB teams. now been accepted by the Project Management Team following all their due diligence MWWFRS in a formal meeting held on 08/12/2022 and they fully accept the need for this

MWWFRS in a formal meeting held on 08/12/2022 and they fully accept the need for this the UHB prior to the currently set end date (February 2023), so that an appropriate extension

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

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

Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule,	Progress update/Reason overdue
KS/890/09	Nov-20	2020/21	Mid and West Wales Fire and Rescue Service	Enforcement Notice Premises: West Wales General Hospital, Glangwili, Dolgwili Road, Carmarthen, Carmarthenshire, SA31 2AF KS/890/09	KS/890/09_01	High	Item Number 1 - Compartmentation. (Agreed Phase 2 works). To undertake whatever works are necessary to ensure that any/all breaches in fire resisting compartmentation that affect the Wards, Theatres, Plant Rooms, Offices, Surgeries, Specialist Units and any other compartmented spaces within Glangwili General Hospital are addressed as agreed in the programme for Phase 2 works (presented to us on the 02 October 2020). Fire resisting structures are to continue to slab/upper floor level/roof level and pass through any false ceiling provided.	Oct-20 Feb-21 Aug-24	Aug-24	Amber	13/11/2020- Letter dated 05/11/2020 from MWWFRS confirming KS/890/09 dated 04/11/2020. KS/890/09 to be completed by 31/0 October 2020). Original completion dates shown on tracker taken 11/11/2022- The expectation was that the BJC would be complete due to capacity issues and the extent and complexity of the works this from our PM and a review of any opportunities to improve on November 2023. On the wider programming the impact on progra MWWFRS have already been briefed on this and this will be set ou complex given the delivery of these FEN works to busy clinical area both commencement dates and programme delivery dates for this may be required to the programme, should the nature of the work 20/12/2022- It is important to note that Phase 2 works will be extr diligence work required during the Business Case development wil Regular discussions continue with MWWFRS, including a formal m dates should the nature of the works dictate that an additional pe 25/01/2023- MWWFRS letter dated 20/01/23 confirms the present and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position of April 2024. 26/04/2023- it is unlikely this works will be completed by August 2 on the UHB position and will consider an official extension when the
BFS/KS/AMD/001 06219	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/001062 19_002	High	 Item 1- R2. The following door should be replaced with fire doors providing 30/60 minutes fire resistance (Dependant on the location of the door). Panels or partitions above or at the sides of the doors should provide a similar degree of fire resistance. Bryngofal – door 690, door from main corridor to command area and the cut door in the medical infirmary. Residential blocks (2 to 7) - a number of flat / bedroom doors within these residences (for this action refer to point 1 fire door survey). 		Oct 22 Mar 23 Mar-25	Amber	11/11/2022- A meeting is planned for mid November 2022 with M position will be fully explained as part of this briefing. It is expecte programme of prioritised works which will be undertaken over the adjust the investment programme to rely on Discretionary program the majority of the work programme which will inevitably extend the MWWFRS/WG to formalise this position. It is anticipated that the in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confi and the specific content of work within each of the 4 Stages has be formal approval but initial comments at the above meeting were vapproaching this work. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health be thay are comfortable with the current position. Works to Resident for the remaining works. Recommendation moved back from red
BFS/KS/AMD/001 06219	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/001062 19_003	High	Item 1- R3. All doors on rooms within Block 2 housing Combi boilers are to be fitted with an air transfer grille, it should only be fitted with one that is capable of sealing both by thermal initiation and by interface with smoke sensors either directly or via a fire alarm panel(Dependant on the type of ventilation required for the appliance). The air transfer grill should conform to a relevant standard e.g.BS 8214:2016. If these appliances do not require this type of ventilation.	Mar-25	Oct 22 Mar 23 Mar-25	Amber	11/11/2022- A meeting is planned for mid-November 2022 with M position will be fully explained as part of this briefing. It is expecte programme of prioritised works which will be undertaken over the adjust the investment programme to rely on Discretionary prograt the majority of the work programme which will inevitably extend 1 MWWFRS/WG to formalise this position. It is anticipated that the in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confi and the specific content of work within each of the 4 Stages has b formal approval but initial comments at the above meeting were very series of the specific content of works which will need the above meeting were very series of the specific content of work within each of the 4 Stages has b formal approval but initial comments at the above meeting were very series of the above
BFS/KS/AMD/001 06219	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/001062 19_005	! High	 Item 1- R5. Fire resisting doors need to be fitted with: A self-closing device including fire alarm activated Self closers. Intumescent strips and smoke seals. Three brass/Steel hinges. Fire doors should conform to a relevant standard e.g. WHTM 05-02 Appendix C: Doors and door-sets Appendix B (including Appendix C Table B1) of Approved Document B Volume 2 Buildings other than dwelling houses. B5 7273-4:2015 Actuation of release mechanisms for doors BS 8214:2016 - timber-based fire door assemblies – Code of Practice. Compliance with this or an equivalent standard will normally satisfy the requirement. 	Oct-22 Mar-25	Oct 22 Mar-23 Mar-25	Amber	11/11/2022- A meeting is planned for mid-November 2022 with M position will be fully explained as part of this briefing. It is expected programme of prioritised works which will be undertaken over the adjust the investment programme to rely on Discretionary program the majority of the work programme which will inevitably extend the MWWFRS/WG to formalise this position. It is anticipated that the in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confir and the specific content of work within each of the 4 Stages has be formal approval but initial comments at the above meeting were wapproaching this work. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the present and provided MWWFRS with an accurate account of the health bot thay are comfortable with the current position. All remaining door 2025. Recommendation moved back from red to amber.
BFS/KS/AMD/001 06219	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/001062 19_007	High	 Item 3- R7. The existing fire warning system must be extended as necessary to conform fully to BS 5839-1:2017 Category L1 within the following areas. Bryngofal red zone storage area main building previously a bathroom. The demountable structures. And any other room converted into a risk room within the Prince Phillip site. All work involving the fire alarm should be carried out in accordance with BS 5839-1 current edition, HTM 0503 B Section 4 and paragraph 4.6. 	Oct-22 Mar-25	Oct-22 Mar-23 Mar-25	Amber	11/11/2022- A meeting is planned for mid-November 2022 with M position will be fully explained as part of this briefing. It is expected programme of prioritised works which will be undertaken over the adjust the investment programme to rely on Discretionary programe the majority of the work programme which will inevitably extend the MWWFRS/WG to formalise this position. It is anticipated that the in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confii and the specific content of work within each of the 4 Stages has be formal approval but initial comments at the above meeting were wapproaching this work. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the present and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position. Overarching delivered the specific content of work with an accurate position. Overarching delivered the programme to a specific or the current position. Overarching delivered the programme to a specific or the current position. Overarching delivered the programme to a specific or the present and provided MWWFRS with an accurate position. Overarching delivered the present and provide present present and provide present present present and provide present present and provide present pre

ing enforcement notice KS/890/06 is withdrawn and replaced by KS/890/07, KS/890/08, 1/08/2024 as agreed in the programme for Advanced Works (presented to them on the 02 ten from original KS/890/06 enforcement notice.

leted by Quarter 4 of the 2022/23 FY. The UHB has recently been informed by the SCP that orks, this date will now be circa August 2023. The UHB have asked for further clarification on e on this position. This has the potential to delay the start of works on Phase 2 until circa ogramme of Phase 1 would in any case align well with the revised programme of Phase 2. t out in a formal meeting with them mid-November 2022. Phase 2 works will be extremely areas. The due diligence work required during the Business Case development will confirm this work. Discussions have been undertaken with MWWFRS who appreciate that a revision vorks dictate that an additional period of time becomes necessary.

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

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

st 2024 due to the scope reduction and complexity of the works. MWWFRS are fully briefed on the works programme is presented to them. The business case is currently being drafted.

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

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

esentation that the Estates service delivered to them on 08/12/22 was extremely well laid out h boards current position and the agreed timeframes for completion. MWWFRS confirmed lential blocks (2 to 7) forms part of the advanced works developed by design team. a further piece of work beyond March 2025 re. BJC which will completed prior to March 2025 red to amber.

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

onfirmed the positive progress on the above plan. A 4 Stage programme has been developed as been set out for consideration for MWWFRS. This plan is currently with MWWFRS for revery positive in terms of the pro-active and structured manner in which the UHB is h MWWFRS to consider all investment programmes across the UHB Estate and the PPH exted that the MWWFRS will be supportive of this approach given that we already have a the next 6 months. Should the EFAB bids be unsuccessful then the HDdUHB would need to gramme investment in the first instance. This will then require a Business Case approach for nd the timelines. If this was the case, there would need to be follow up discussions with the EFAB position will be clear by the end of December 2022 so the UHB can plan accordingly

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

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

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

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

sentation that the Estates service delivered to them on 08/12/22 was extremely well laid out n boards current position and the agreed timeframes for completion. MWWFRS confirmed slivey plan for the site is to March 2025. Recommendation moved back from red to amber.

Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule,	Progress update/Reason overdue
BF5/KS/AMD/001 06219	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/001062 19_008	High	Item 4- R8. All door release devices (Including floor pneumatic release devices) should work in accordance with the relevant British standard: BS 7273-4:2015 actuation of release mechanisms for doors and comply with WHTM 05-02 Appendix C: Door Closers and Section 6 General provisions of Approved Document B Volume 2 Buildings other than dwelling houses. • Diabetic unit • This action should be carried out over the whole site and as part of the fire door survey mentioned in item 1 Compliance with this or an equivalent standard will normally satisfy the requirement.	Oct-22 Mar-24	Oct 22 Mar-24	Amber of Amber	11/11/2022- A meeting is planned for mid-November 2022 with M position will be fully explained as part of this briefing. It is expecte programme of prioritised works which will be undertaken over the adjust the investment programme to rely on Discretionary prograt the majority of the work programme which will inevitably extend the WWFRS/WG to formalise this position. It is anticipated that the in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confii and the specific content of work within each of the 4 Stages has be formal approval but initial comments at the above meeting were vapproaching this work. This recommendation will be picked up in p25/01/2023- MWWFRS letter dated 20/01/23 confirms the present and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position. Will be addressed
BFS/KS/AMD/001 06219	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: PRINCE PHILLIP HOSPITAL, BRYNGWYN MAWR, LLANELLI, SA14 8QF BFS/KS/AMD/00106219	BFS/KS/AMD/001062 19_013	High	Item 9- R13. The emergency lighting must be extended to cover the external exit routes and exit doors of the TY Bryn Template The system shall be installed, maintained and tested in accordance with a relevant standard. For a relevant standard please refer to BS5266-1:2016 Emergency lighting code of practice for emergency lighting of premises. Compliance with this or an equivalent standard will normally satisfy the requirement.	Oct 22 Mar-25	Oct 22 Aug 23 Mar-25	Amber	11/11/2022- A meeting is planned for mid-November 2022 with M position will be fully explained as part of this briefing. It is expecte programme of prioritised works which will be undertaken over the adjust the investment programme to rely on Discretionary prograte the majority of the work programme which will inevitably extend 1 MWWFRS/WG to formalise this position. It is anticipated that the in terms of any escalation to WG. 20/12/2022- Formal meeting with MWWFRS on 08/12/2022 confi and the specific content of work within each of the 4 Stages has be
BFS/KS/AMD/001 15940	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: HYWEL DDA, TENBY COTTAGE HOSPITAL, GAS LANE, TENBY, SA70 8AG BFS/KS/AMD/00115940	BFS/KS/AMD/001159 40_001	High	 R1. A fire door survey is required at the Tenby cottage hospital site due to a number of defects found at the time of inspection. The findings of this survey must be completed within the mentioned timescale. Fire resisting doors need to be fitted with: A self-closing devices including fire alarm activated Self closers. Intumescent strips and smoke seals. Three brass/steel hinges. Fire doors should conform to a relevant standard e.g. WHTM 05-02 Appendix C: Doors and door-sets Appendix B (including Appendix C Table B1) of Approved Document B Volume 2 Buildings other than dwelling houses. BS 7273-4:2015 Actuation of release mechanisms for doors BS 8214:2016 - timber-based fire door assemblies – Code of practice Compliance with this or an equivalent standard will normally satisfy the requirement. 	Oct-22 Mar-23 Mar-24	Oct 22 Mar 23 Mar-24	Amber	08/07/2022- UHB working with MWWFRS to agree the standards 07/09/2022- Head of Estates Risk & Compliance to check with MW 02/11/2022- The required standard has now been confirmed by M been set out in discussions with the MWWFRS. 20/12/2022- on track for completion by March 2023. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presen and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position of completion by N 25/04/2023- EFAB funding now secured to address this. Date of co December 2022, following the meeting MWWFRS wrote to the UH
BFS/KS/AMD/001 15940	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: HYWEL DDA, TENBY COTTAGE HOSPITAL, GAS LANE, TENBY, SA70 8AG BFS/KS/AMD/00115940	BFS/KS/AMD/001159 40_002	High	In the event of fire, breaches in compartmentation, will allow fire and smoke to spread unchecked throughout the building. This would have an impact on the means of escape and render the evacuation strategy of the building ineffective. All breaches in compartmentation should be fire stopped to provide the appropriate fire resistance in accordance with building regulations. The fire resistance should conform to a relevant standard e.g. WHTM 05-02 Chapter 5 and paragraph 5.12.	Mar-23 Mar-24	Oct-22 Mar-23 Mar-24	Amber	08/07/2022- UHB working with MWWFRS to agree the standards 07/09/2022- Head of Estates Risk & Compliance to check with MW 02/11/2022- The required standard has now been confirmed by M been set out in discussions with the MWWFRS. 20/12/2022- on track for completion by March 2023. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position of completion by M 25/04/2023- EFAB funding now secured to address this. Date of co December 2022, following the meeting MWWFRS wrote to the UB
BFS/KS/AMD/001 15940	Apr-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: HYWEL DDA, TENBY COTTAGE HOSPITAL, GAS LANE, TENBY, SA70 8AG BFS/KS/AMD/00115940	BFS/KS/AMD/001159 40_003	High	 Appendix A (including Table A1, A2) of Approved Document B Volume 2 Buildings R3. Sluice room R24 is to be upgraded to a fire hazard room. Any other room which has been changed to a fire hazard room within the premises. The fire separation between any fire hazard room and the means of escape of the building should provide a minimum 30 minutes' standard of fire resistance in accordance with WHTM 05-02 Table 6, 5.40-5.42, the fire separation should also conform to a relevant standard e.g. Appendix A (including Table A1, A2) of Approved Document B Volume 2 Buildings other than dwelling houses. Compliance with this or an equivalent standard will normally satisfy the requirement. 	Oct-22 Mar-24	Oct 22 Mar-23 Mar-24	Amber	08/07/2022- UHB working with MWWFRS to agree the standards 07/09/2022- Head of Estates Risk & Compliance to check with MW 02/11/2022- The required standard has now been confirmed by M been set out in discussions with the MWWFRS. 20/12/2022- on track for completion by March 2023. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position. Revised date of M amber.
BFS/SM/AMD/00 107788	May-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/00107788	BFS/SM/AMD/00107 788_001	High	R1. All doors to patient bedrooms are to be fitted with appropriately designed free- swing self-closing devices, as stated in (Table 6 WHTM 05-02).	Nov 22 Mar-24	Nov-22 Oct-23 Mar-24	Amber	27/06/2022- Funding and timescale to be agreed following the fin 07/09/2022- Head of Estates Risk & Compliance to send revised an 15/11/2022-AFT survey now completed. Detailed costs obtained f replacements for EFAB funding. 20/12/2022- seeking clarification for door work required and prior formal meeting on 08/12/2022. Awaiting formal revised date from investment being received in April 2023. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position and the revised date

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

onfirmed the positive progress on the above plan. A 4 Stage programme has been developed as been set out for consideration for MWWFRS. This plan is currently with MWWFRS for re very positive in terms of the pro-active and structured manner in which the UHB is in phase 1 as part of the EFAB funding for 2023/24.

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

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

sentation that the Estates service delivered to them on 08/12/22 was extremely well laid out n boards current position and the agreed timeframes for completion. MWWFRS confirmed ny March 2023. Recommendation moved back from red to amber.

f completion is March 2024. This date was included in the presentation to MWWFRS in UHB on 20/01/2023 to confirm they agreed with the timeframes presented.

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findings of the AFT survey.

action plan to Assurance and Risk team.

ed for 106 repairable doors. Site review with NWSSP-SES to agree prioritisation of door

rioritise work. MWWFRS aware of this work and the money required, as discussed at the rom MWWFRS. Estates service has provided revised date of October 2023 based on

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BFS/SM/AMD/00 107788	May-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/00107788	BFS/SM/AMD/00107 788_003	High	 R3. The following doors should be replaced with fire doors providing 30/60 minutes fire resistance (Dependant on the location of the door). Panels or partitions above or at the sides of the doors should provide a similar degree of fire resistance. Medication room (LSU) – this is a stable door and is not providing suitable fire resistance. 	Nov-22 Mar-24	Nov-22 Oct-23 Mar-24	Amber	27/06/2022- Survey by AFT been undertaken costs are due back m 07/09/2022- Head of Estates Risk & Compliance to send revised a 20/12/2022- seeking clarification for door work required and prio formal meeting on 08/12/2022. Awaiting formal revised date from investment being received in April 2023. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the presen and provided MWWFRS with an accurate account of the health bi thay are comfortable with the current position and the revised date
BFS/SM/AMD/00 107788	May-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/00107788	BFS/SM/AMD/00107 788_004	High	R4. Throughout the site various fire doors were found to be missing smoke seals. The seals should be attended to as part of the fire door survey mentioned above.	Nov 22 Mar-24	Nov 22 Oct 23 Mar-24	Amber	27/06/2022- Survey by AFT been undertaken costs are due back n 07/09/2022- Head of Estates Risk & Compliance to send revised a 20/12/2022- seeking clarification for door work required and prio formal meeting on 08/12/2022. Awaiting formal revised date fron investment being received in April 2023. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health be thay are comfortable with the current position and the revised da
BFS/SM/AMD/00 107788	May-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/00107788	BFS/SM/AMD/00107 788_005	High	R5. The cross-corridor doors in "Picu" was missing a self-closing device. A self- closing device is required on this door to ensure it closes fully into its rebate.	Nov-22 Mar-24	Nov-22 Oct-23 Mar-24	Amber	27/06/2022- Survey by AFT been undertaken costs are due back n 07/09/2022- Head of Estates Risk & Compliance to send revised ar 02/11/2022- Assurance and Risk team are awaiting confirmation t 15/12/2022- Head of Estates Risk & Compliance to confirm with G 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health br thay are comfortable with the current position and the revised da
BFS/SM/AMD/00 107788	May-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters CWM SEREN ST DAVIDS PARK HAFAN DERWEN, JOBS WELL ROAD, CARMARTHEN, SA31 3BB BFS/SM/AMD/00107788	BFS/SM/AMD/00107 788_008	High	 8. A hold open device (or alternative solution) is required on the "Step Down" kitchen door. Fire resisting doors need to be fitted with: A self-closing device including fire alarm activated Self closers. Intumescent strips and smoke seals. Three brass/steel hinges. Fire doors should conform to a relevant standard e.g. WHTM 05-02 Appendix C: Doors and door-sets Appendix B (including Appendix C Table B1) of Approved Document B Volume 2 Buildings other than dwelling houses. BS 7273-4:2015 Actuation of release mechanisms for doors BS 8214:2016 - timber-based fire door assemblies – Code of Practice. Compliance with this or an equivalent standard will normally satisfy the requirement. 	Nov 22 Mar-24	Nov-22 Oct-23 Mar-24	Amber	27/06/2022- Survey by AFT been undertaken costs are due back n 07/09/2022- Head of Estates Risk & Compliance to send revised at 20/12/2022- seeking clarification for door work required and prior formal meeting on 08/12/2022. Awaiting formal revised date from investment being received in April 2023. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position and the revised da
Admin - General/0032950 0	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Blue Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329500_0 01	High	R1. A number of fire resisting doors were found to have defects. All fire resisting doors throughout the premises are to be examined and repaired or replaced to ensure they are effectively self-closing onto their rebates. Gaps between door edge and frame are to be no more than 3 mm	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is Octobe survey to be undertaken at BGH site due to its complex environme 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position with the timescale 26/04/2023- The Programme Business Case has been submitted to
Admin - General/0032950 0	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Blue Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329500_0 02	High	R2. Self-closing devices on all fire resisting doors are to be checked and if required be adjusted, repaired, or replaced so the doors close completely into their rebates.	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is Octobe survey to be undertaken at BGH site due to its complex environme 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health be thay are comfortable with the current position with the timescale 26/04/2023- The Programme Business Case has been submitted to
Admin - General/0032950 0	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Blue Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329500_0 03	High	R3. All self-closing devices are to be regularly inspected and maintained.	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is Octobe survey to be undertaken at BGH site due to its complex environm 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health be thay are comfortable with the current position with the timescale 26/04/2023- The Programme Business Case has been submitted to

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on that all works have been completed/planned for this financial year.

th GGH colleagues if this recommendation is now implemented.

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Admin - General/0032950 0	Jun-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Failures Blue Block, Bronglais General Hospital, Caradoc Road, Aberystwyth SY23 1ER	Admin - General/00329500_0 05	High	R5. All fire door vents should be designed in accordance with the required British Standard.	Oct-27	Oct-27	Amber	08/07/2022- MWWFRS letter states phase 2 completion is Octobe survey to be undertaken at BGH site due to its complex environme 15/11/2022- MWWFRS letter dated 31/08/2022 (same reference- Phase 2 October 2027. 25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health bo thay are comfortable with the current position with the timescale 26/04/2023- The Programme Business Case has been submitted to
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BFS/KS/JEL/00115 068	5 Sep-22	2022/23	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Premises: SOUTH PEMBS HOSPITAL, FORT ROAD, PEMBROKE DOCK, SA72 6FY	BFS/KS/JEL/0011506 8_001	High	 R1. It was noted whilst carrying out the inspection that there were a number of faults found with a high number of the fire doors at this premises. These doors should be repaired or replaced. Any panels or partitions above or at the sides of the doors should provide a similar degree of fire resistance as the door installed. All doors mentioned within the fire door survey carried out in September 2021. Fire doors should conform to a relevant standard e.g. Appendix C and Table 6 WHTM 0502, Appendix B (including Appendix C Table B1) of Approved Document B Volume 2 Buildings other than dwelling houses. 	Mar 23 Mar-25	Mar-23 Mar-25	Amber	25/01/2023- MWWFRS letter dated 20/01/23 confirms the preser and provided MWWFRS with an accurate account of the health be thay are comfortable with the current position to be implemented 25/04/2023- EFAB funding now secured to address these defects presentation to MWWFRS in December 2022, following the meet timeframes presented.

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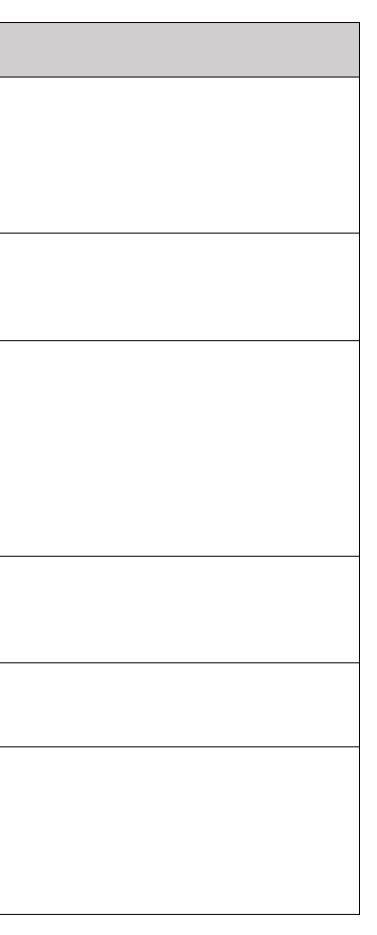
Defense	D-4	1	Damant	Damant Title	Deserve 1 at	Durianit	Descention destant	Outstand	Devices	Charter	Deserves and the /Deserve second
Reference Number	Date of report	Financial Year	Report Issued By	Report Title		Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule,	Progress update/Reason overdue
NE/BFS/0017390	Apr-23	2023/24	Mid and	Letter of Fire Safety	NE/BFS/00173907_0	High	R2. During the inspection breaches in compartmentation were identified:	Mar-23	Mar-23	Amber	
/			West Wales Fire and Rescue	Matters Template 26, Prince Philip Hospital, Dafen, Llanelli. SA15	02		Electrical Cupboard G37a				
			Service	8QF NE/BFS/00173907			The breaches in compartmentation would not support the existing evacuation strategy.				
							In the event of fire, breaches in compartmentation, will allow fire and smoke to spread unchecked throughout the building. This would have an impact on the means of escape and render the evacuation strategy of the building ineffective.				
							All breaches in compartmentation should be fire stopped to provide the appropriate fire resistance in accordance with building regulations.				
							The fire resistance should conform to a relevant standard e.g. Appendix A (including Table A1, A2) of Approved Document B Volume 2 Buildings Other Than Dwelling Houses.				
							Compliance with this or an equivalent standard will normally satisfy the requirement.				
NE/BFS/0017390 7	Apr-23	2023/24	Mid and West Wales	Letter of Fire Safety Matters Template 26,	NE/BFS/00173907_0 03	High	R3. Doors leading to Wards R45 & R53 and Cross corridor doors separating Nurse space from circulation area to be inspected as part of a PPM survey.	Sep-23	Sep-23	Amber	
			Fire and Rescue	Prince Philip Hospital, Dafen, Llanelli. SA15 8QF			The fire separation should conform to a relevant standard e.g. HTMW – 5 - 2				
			Service	NE/BFS/00173907			Compliance with this or an equivalent standard will normally satisfy the requirement.				
NE/BFS/0017390	Apr 22	2023/24	Mid and	Letter of Fire Safety	NF /RFC /00172007 0	Uich	DA The following five resisting dears were found to be demaged (defective. These	Sep-23	Sep-23	Amber	
7 7	Apr-23	2023/24	West Wales Fire and	Matters Template 26, Prince Philip Hospital,	NE/BFS/00173907_0 04	nigii	R4. The following fire resisting doors were found to be damaged/defective. These doors must be repaired/replaced.	Seh-52	5ep-25	Amber	
			Rescue Service	Dafen, Llanelli. SA15 8QF NE/BFS/00173907			•₨ 1164a & 1164b •₨ 1170a & 1170b				
				,			Fire doors should conform to a relevant standard e.g.				
							BS 8214:2016 - Timber-based fire door assemblies – Code of Practice				
							Compliance with this or an equivalent standard will normally satisfy the requirement				
NE/BFS/0017390 8	Apr-23	2023/24	Mid and West Wales	Letter of Fire Safety Matters Template 27,	NE/BFS/00173908_0 02	High	R2. The opening in the ceiling located in	Mar-24	Mar-24	Amber	
				Prince Philip Hospital, Dafen, Llanelli. SA15			•Switchgear Room				
			Service	8QF NE/BFS/00173908			should be in filled to achieve the same fire resistance as the rest of the floor/ceiling.				
							The fire separation should conform to a relevant standard e.g. WHTM – 05-02				
							Compliance with this or an equivalent standard will normally satisfy the requirement.				
NE/BFS/0017390 8	Apr-23	2023/24	Mid and West Wales	Letter of Fire Safety Matters Template 27,	NE/BFS/00173908_0 03	High	R3. Provide an emergency lighting system (which is to be independent of all other systems), to illuminate	Aug-23	Aug-23	Amber	
			Fire and Rescue Service	Prince Philip Hospital, Dafen, Llanelli. SA15 8QF			•External escape route				
			Service	8QF NE/BFS/00173908			On completion of the emergency lighting system, the commission certificate is to be completed by a competent person and a copy made available to the Fire and Rescue Authority.				
							This system is to be designed and installed in accordance BS5266-1:2016				
							Compliance with this or an equivalent standard will normally satisfy the requirement.				
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Defense	D-t (F ire	Dement	Damant Title	Deserving 1 vi	Duitanti	Deserves and attack	Original	Device	Charter	Des entre de la
Reference Number			Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule,	Progress update/Reason overdue
NE/BFS/0017390 8	Apr-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 27, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00173908	NE/BFS/00173908_0 04	High	 R4. The doorstops fitted to the frames of the following fire resisting doors were found to be missing and require installing Door id 0042. The door stops and frames should conform to a relevant standard e.g. BS 8214:2016 - Timber-based fire door assemblies – Code of Practice Compliance with this or an equivalent standard will normally satisfy the requirement 	Sep-23	Sep-23	Amber	
NE/BFS/0017390 8	Apr-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 27, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00173908	NE/BFS/00173908_0 05	High	R5. The gap between the door frame and the wall located •Door id 0053 should be in filled with a material that will provide the same degree of fire resistance as the wall. The fire separation should conform to a relevant standard e.g., WHTM – 05-02 Compliance with this or an equivalent standard will normally satisfy the requirement.	Sep-23	Sep-23	Amber	
NE/BFS/0017390 8	Apr-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 27, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00173908	NE/BFS/00173908_0 06	High	R6. Wedges, hooks and any other devices in use at the present time as a means of holding the self-closing doors in the open position shall be removed to ensure that the doors are effectively self-closing.	Jul-23	Jul-23	Amber	
NE/BFS/0017390 8	Apr-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 27, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00173908	NE/BFS/00173908_0 07	High	R7. The control measures identified in the current risk assessment for the safe use of dangerous substances must be maintained. Oxygen Cylinders should be stored in accordance with HTM 02 - 01	Sep-23	Sep-23	Amber	
NE/BFS/0017390 8	Apr-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 27, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00173908	NE/BFS/00173908_0 08	High	 R8. The following 30-minute fire resisting door was found to be damaged/defective. These doors must be repaired/replaced. R0089 Fire doors should conform to a relevant standard e.g. BS 8214:2016 - Timber-based fire door assemblies – Code of Practice Compliance with this or an equivalent standard will normally satisfy the requirement 		Sep-23	Amber	
NE/BFS/0017390 8	Apr-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 27, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00173908	NE/BFS/00173908_0 09	High	 R9. The intumescent strips and cold smoke seals on the following fire resisting doors were found to be damaged/missing. The strips and seals should be replaced in order to prevent the passage of smoke and flame. Ed 0048 Ed 0076 Ed 0080 The intumescent strips and cold smoke seals should conform to a relevant standard e.g. BS 8214:2016 - Timber-based fire door assemblies – Code of Practice Compliance with this or an equivalent standard will normally satisfy the requirement 		Sep-23	Amber	



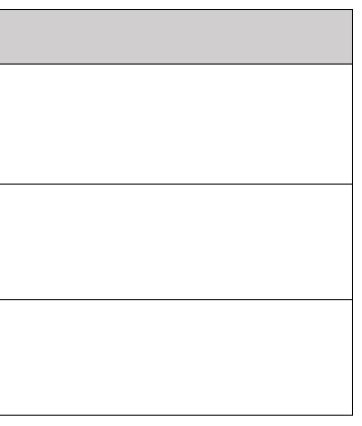
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Reference Number		Financial Year	Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind	Progress update/Reason overdue
										schedule,	
NE/BFS/0017390 8	Apr-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 27, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00173908	NE/BFS/00173908_0 10	High	 R10. The gap around the door and frame was found to be excessive. The door should be repaired in order to prevent the passage of smoke and flame. Rd 0046 Rd 0069 The doors should conform to a relevant standard e.g. BS 8214:2016 - Timber-based fire door assemblies – Code of Practice Compliance with this or an equivalent standard will normally satisfy the requirement 	Sep-23	Sep-23	Amber	
NE/BFS/0017390 8	Apr-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 27, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00173908	NE/BFS/00173908_0 11	High	 R11. Ceiling tiles in the following areas were found to be damaged, they should be repaired or replaced to provide or reinstated to provide the same standard of fire resistance as the rest of the ceiling. W34 The fire resistance should conform to a relevant standard e.g. MTMW -05 - 02 	Aug-23	Aug-23	Amber	
NE/BFS/0017390 8	Apr-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Template 27, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00173908	NE/BFS/00173908_0	High	 R12. Remove existing lock fastenings from door(s) indicated/located Einal exit Occ Therapy Room If the door(s) is/are required to be kept locked it/they should be fitted with an approved type of emergency security fastening that can be operated from the escape side of the door(s) without the use of a key, which is conspicuously indicated as to its method of operation. This work should be done to conform to a relevant standard e.g. Section 6 General provisions of Approved Document B Volume 2 Buildings other than dwelling houses. Compliance with this or an equivalent standard will normally satisfy the requirement. 	Aug-23	Aug-23	Amber	
NE/BFS/0033725 5 NE/BFS/0033725 5			Fire and Rescue Service Mid and	Letter of Fire Safety Matters Surgical Day unit, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF. NE/BFS/00337255	NE/BFS/00337255_0 02 NE/BFS/00337255_0 04		 R2. During the inspection breaches in compartmentation were identified: Water Plant room. (Transportation Weep Hole pipes still in situ in floor). 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 R4. Wedges, hooks and any other devices in use at the present time as a means of holding the self-closing doors in the open position shall be removed to ensure that 		Mar-24 Mar-23	Amber	
5			Fire and Rescue Service	unit, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF. NE/BFS/00337255			the doors are effectively self-closing.				
NE/BFS/0033725 5	May-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Surgical Day unit, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF. NE/BFS/00337255	NE/BFS/00337255_0 06	High	 R6. The following 30-minute fire resisting doors were found to be damaged/defective. These doors must be repaired/replaced. •©F55 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 	Mar-24	Mar-24	Amber	

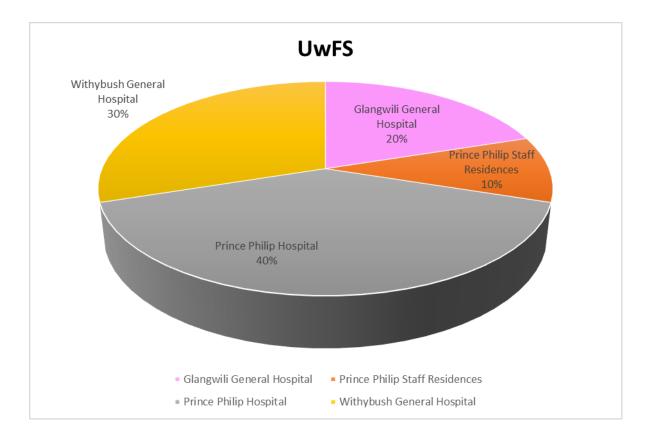


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Reference Number	Date of report	Financial Year	Report Issued By	Report Title	Recommendation Reference	Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule,	Progress update/Reason overdue
NE/BFS/0033725 5	May-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Surgical Day unit, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF. NE/BFS/00337255	NE/BFS/00337255_0 07	High	 R7. During the inspection the self-closing devices on the doors located at; •6F 06 •6F 01 •6F 15 •6F 22 Were found to be ineffective and should therefore be checked and maintained to a satisfactory standard so that the doors close completely into the rebate. Self-closing devices should conform to a relevant standard e.g. BS 8214:2016 - Timber-based fire door assemblies – Code of Practice. Compliance with this or an equivalent standard will normally satisfy the requirement. 	Mar-24	Mar-24	Amber	
NE/BFS/0014180 2	May-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Templates 8 & 9, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00141802	NE/BFS/00141802_0 01	High	R1. The fire safety measures evaluated in the fire risk assessment must be implemented.	Mar-24	Mar-24	Amber	
NE/BFS/0014180 2	May-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Templates 8 & 9, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00141802	NE/BFS/00141802_0 02	High	 R2. During the inspection breaches in compartmentation were identified: Switchgear Room – ward 3 B40 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. 	Sep-23	Sep-23	Amber	
NE/BFS/0014180 2			Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Templates 8 & 9, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00141802	NE/BFS/00141802_0 04		 R4. The following doors should be replaced with fire doors providing 30 minutes fire resistance. Panels or partitions above or at the sides of the doors should provide a similar degree of fire resistance. •B35 •Fire resisting doors need to be fitted with •A self-closing device •Thumescent strips and smoke seals. •Three brass/steel hinges. Fire doors should conform to a relevant standard e.g. Appendix B (including Appendix C Table B1) of Approved Document B Volume 2 Buildings other than dwelling houses. BS 8214:2016 - timber-based fire door assemblies – Code of practice Compliance with this or an equivalent standard will normally satisfy the requirement 		Mar-24	Amber	
NE/BFS/0014180 2	May-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Templates 8 & 9, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00141802	NE/BFS/00141802_0 05	High	R5. A fire warning system must be extended. The scope and extent of the fire alarm system should be informed by the significant findings of your fire risk assessment •Storeroom R35 All work involving the fire alarm should be carried out in accordance with the relevant standard e.g., BS5839	Sep-23	Sep-23	Amber	



		Financial Year	Report Issued By	Report Title		Priority Level	Recommendation	Original Completion Date	Revised Completion Date	Status (Red- behind schedule,	Progress update/Reason overdue
NE/BFS/0014180 2	May-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Templates 8 & 9, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00141802	NE/BFS/00141802_0 06	High	 R6. The following fire resisting doors were found to be damaged/defective. These doors must be repaired/replaced. •2241 Fire doors should conform to a relevant standard e.g. BS 8214:2016 - Timber-based fire door assemblies – Code of Practice Compliance with this or an equivalent standard will normally satisfy the requirement 	Mar-24	Mar-24	Amber	
NE/BFS/0014180 2	May-23	2023/24	Mid and West Wales Fire and Rescue Service	Letter of Fire Safety Matters Templates 8 & 9, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00141802	NE/BFS/00141802_0 07	High	 R7. The intumescent strips and cold smoke seals on the following fire resisting doors were found to be damaged/missing. The strips and seals should be replaced in order to prevent the passage of smoke and flame. 2160 2176 2170 The intumescent strips and cold smoke seals should conform to a relevant standard e.g. 	Sep-23	Sep-23	Amber	
NE/BFS/0014180 2	May-23	2023/24		Letter of Fire Safety Matters Templates 8 & 9, Prince Philip Hospital, Dafen, Llanelli. SA15 8QF NE/BFS/00141802	NE/BFS/00141802_0 08	High	 R8. During the inspection the self-closing devices on the doors located at; •Z243A •Z231 •Z172 A/B Were found to be ineffective and should therefore be checked and maintained to a satisfactory standard so that the doors close completely into the rebate. Self-closing devices should conform to a relevant standard e.g. 	Sep-23	Sep-23	Amber	





Comparison of fire incidents and UwFS on a site-by-site basis for the period 1st June 2023 to June 26th 2023 (inclusive)

Site	Fire	UwFS
Glangwili General Hospital	0	2
Prince Philip Hospital	0	4
Prince Philip hospital-Staff Residences	0	1
Withybush General Hospital	0	3

Cause of alarm signal

UwFS incidents between 1st June 2023 and 26th June 2023 (inclusive)

Site: Glangwili General Hospital

Item	Value	%
Other environmental effect	1	50%
System procedures not complied with	1	50%
Grand total	2	100%

Cause of alarm signal

UwFS incidents

between 1st June 2023 and 26th June 2023 (inclusive)

Site: Prince Philip Hospital

Item	Value	%
Other environmental effect	2	50%
Cooking fumes	2	50%
Grand total	4	100%

Cause of alarm signal

UwFS incidents between 1st June 2023 and 26th June 2023 (inclusive)

Site: Prince Philip hospital-Staff Residences

Item	Value	%
Cooking fumes	1	100%
Grand total	1	100%

Cause of alarm signal

UwFS incidents between 1st June 2023 and 26th June 2023 (inclusive)

Site: Withybush General Hospital

Item	Value	%
Insects	1	33.3%
Cooking fumes	2	66.7%
Grand total	3	100%

RICHARD JUPP,

HEAD OF FIRE SAFETY

26TH JUNE 2023