

2.4

Fire Safety Audit System Report 2019/20

*Presenter: Andrew Carruthers*

Item 2.4 Fire Safety Audit System Report

Appendix 1 Fire Safety Audit System Report



## HEALTH & SAFETY ASSURANCE COMMITTEE PWYLLGOR ANSAWDD IECHYD A DIOGELWCH

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	02 November 2020
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Fire Safety Audit System Report 2019/20
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Andrew Carruthers, Director of Operations
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	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 has been prepared to provide the Health and Safety Assurance Committee (HSAC) with an update on the Annual NHS Wales Shared Services Partnership-Specialist Estates Services (NWSSP-SES) Fire Audit. The audit is routinely submitted in May of each year, however due to COVID-19, this year's deadline has been extended to September 2020.

#### Cefndir / Background

##### **Annual NWSSP Online Fire Audit**

All NHS Boards in Wales are mandated by Welsh Government (WG) to submit an annual fire audit. This takes the form of an online self-audit. The areas covered within the audit are outlined below:

- Organisational Wide Report - this section provides information on the organisation and reports on such items as structure, policy and management of fire safety
- Site Specific Report - focusing on site related management of fire safety related items including maintenance of fire safety installations
- Premises information
- Roles
- Policy issues
- Training
- Miscellaneous items
- Fire risk assessments

As part of the audit, costs incurred in order to reach fire safety compliance are submitted together with an estimate of the time required to reach compliance.

The audit process is a 'self-audit' submitted on line on the NWSSP-SES system. The work required for the audit is generally carried out by the Fire Safety Manager and the Fire Safety Advisors. This involves meetings and discussions with Hospital and Community Managers and Site Operational staff.

Once the audit is complete, the submission can only be made by the Director responsible for fire safety matters.

Once submitted, NWSSP-SES produce a report for WG. This report provides information to the Capital Planning, Estates and Facilities Branch of WG on an All-Wales basis and highlights trends and weaknesses in the performance of all Health organisations within Wales. The internal process for the review of the NWSSP-SES may result in certain recommendations being made to HDdUHB.

As an example, a number of years ago the report identified that fire risk assessments and fire safety training performance levels in Wales were lower than that considered acceptable. WG then contacted all Health organisations within Wales requesting a number of remedial actions to be taken.

The audit submission also considers the costs associated in order that premises reach compliance from a fire safety perspective together with an estimate of the time taken to achieve that position.

The submission must cover all inpatient facilities and 25% of other properties. NWSSP-SES have taken a pragmatic approach to the number of non-inpatient facilities included this year due to the COVID-19 pandemic.

### **Asesiad / Assessment**

#### **Annual NWSSP Online Fire Audit.**

The annual Fire Audit was submitted to WG on 29<sup>th</sup> September 2020. This was in line with NWSSP-SES granting an extension of the date required for submission from May 2020 to the end of September 2020.

The submission included the following sites:

- All inpatient facilities
- Gorwelion Day Hospital
- Cardigan Integrated Care Centre
- Aberaeron Integrated Care Centre

The report indicated a much improved position in relation to fire risk assessments and also reflected the change to the method of delivery of fire safety training.

Following specific work on the costs for compliance and the timescales involved, revised estimates have been submitted, given that we are now in a better informed position to assess costs as a result of survey work being carried out. Work has also been undertaken to ensure that the figures submitted are reflective of those in the backlog maintenance register for fire safety.

This subject area may be a consideration for WG going forward across Wales as they consider financial requirements to address fire safety issues.

For the acute sites, the following has been submitted:

- Withybush General Hospital £8m
- Glangwili General Hospital £8m
- Bronglais General Hospital £2m
- Prince Philip General Hospital £1m

(It should be noted that these are estimates)

These figures will be updated as works progress on the delivery of the major improvements in fire safety within HDdUHB. The detailed design work within the Business Case process will enable HDdUHB to provide updated figures.

In general, the submission highlights the fact that on an organisational level, HDdUHB is in a good position. Management structures and policy issues are adequately addressed.

Maintenance issues are also generally satisfactory although the audit identifies certain areas where improvements can be made. These are currently being addressed through a review of the Planned Preventative Maintenance (PPM) arrangements.

Whilst the report identifies areas for improvements for fire record drawings information together with PPM particularly, these are being addressed as follows:

- Through the work currently being undertaken as a result of the Fire Safety Governance Review.
- For PPM, through the current review of resources within the operational team. This will be in place in the final quarter of 2020/21, in addition the introduction of an electronic management system.
- The fire drawing issues are being addressed through the appointment of two CAD Operators. The recruitment process is currently at the shortlisting stage with appointments planned for November 2020. With these appointments it is envisaged that the fire drawings position will have been addressed by the end of June 2021.

The Fire Audit Report submission is attached as Appendix 1.

#### Argymhelliad / Recommendation

The Health & Safety Assurance Committee is requested to note the update on the Fire Safety Audit System Report 2019/20.

#### **Amcanion: (rhaid cwblhau)**

#### **Objectives: (must be completed)**

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	5.8 Ensure there is a process of review of findings of safety management system audits and seek assurance that corrective actions are put in place.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	N/A
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:	2. Living and working well.
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019</a>	10. Not Applicable

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	Interviews with Hospital and Estates Management.
Rhestr Termiau: Glossary of Terms:	Contained within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd Iechyd a Diogelwch: Parties / Committees consulted prior to Health and Safety Assurance Committee:	N/A

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	N/A
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	N/A
<b>Gweithlu: Workforce:</b>	Delivering a safe working environment
<b>Risg: Risk:</b>	Fire Safety Risk
<b>Cyfreithiol: Legal:</b>	Potential for legal challenge if HDdUHB does not comply with Government legislation

<b>Enw Da:</b> <b>Reputational:</b>	N/A
<b>Gyfrinachedd:</b> <b>Privacy:</b>	N/A
<b>Cydraddoldeb:</b> <b>Equality:</b>	N/A



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Bwrdd Iechyd Prifysgol  
Hywel Dda  
Hywel Dda University  
Health Board

## **Fire Audit Report**

**Hywel Dda UHB**

**Organisation-Wide Report**

**Audit submitted on 29/09/2020**

### **Declaration**

This Audit has been submitted by Andrew Carruthers, Board Level Director (responsible for fire) on behalf of Mr Steve Moore, Chief Executive. The information contained in this fire safety audit for the period April – March 2020 reflects the standards of fire safety within this Organisation.

This organisation is committed to addressing the issues identified in this Audit.

Submitted date: 29/09/2020

### **List of sites audited**

**Amman Valley Hospital**

**Bronglais General Hospital**

**Hafan Derwen**

**Llandovery Hospital**

**Prince Philip Hospital**

**Withybush General Hospital**

**Glangwili General Hospital**

**Tregaron Hospital**

**South Pembrokeshire Hospital**

**Canolfan Bro Cerwyn**

**Cardigan Integrated Care Centre**

**Gorwelion Day Hospital**

## Aberaeron Integrated Care Centre

### Audit details

<b>Contact name</b>	Mr. Rob Elliott
<b>Address</b>	Hywel Dda University Health Board Glangwili Hospital Carmarthen
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<b>Contact fax</b>	
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<b>Organisation's profile</b>	The Organisation's profile is set out in the Fire Safety Policy Document.

### Hywel Dda UHB

		delegated to	action	completed
<b>1</b>	<b>Roles and Responsibilities</b>			
<b>1.0</b>	Provide names of the following: -			
<b>1.0.1</b>	Chief Executive <b>Mr Steve Moore</b>			
<b>1.0.2</b>	Board Level Director (responsible for fire safety) <b>Mr. Andrew Carruthers</b>			
<b>1.0.3</b>	Fire Safety Manager <b>Mr. Gareth Lloyd</b>			
<b>1.0.4</b>	Fire Safety Advisor(s) <b>Mr Richard Jupp, Mr Mike Gilbert, Mr. Daniel Dyer</b>			
<b>1.1</b>	Chief Executive			
<b>1.1.1</b>	Is an annual fire report presented at the Organisation's Board meeting informing them of the current state of fire safety in all the organisation's occupied premises? <b>Included within the Estates Operational Services annual report</b>	<b>Yes</b>		
<b>1.1.2</b>	Is fire safety a standing agenda item at the management/executive board meetings? <b>Fire safety is raised at board meetings, it is also raised at Health and Safety and Emergency Planning Sub Committee and the Fire Management meeting where fire safety is a standing agenda item.</b>	<b>Yes</b>		
<b>1.1.3</b>	Has the Chief Executive agreed a fire safety investment programme?	<b>Yes</b>		



	<b>This is managed on behalf of the CEO via the capital monitoring group, which assesses the value of capital allocation for fire safety.</b>			
1.1.4	Has the programme of fire safety investment been accounted for in the organisation's business plans?	Yes		
	<b>Through prioritised bids within the Health Board Discretionary Capital Programme</b>			
1.2	Board Level Director (responsible for fire safety)			
1.2.1	Have the roles and responsibilities of the Board Level Director been formally agreed with the Chief Executive?	Yes		
	<b>The BLD and the CEO are fully aware of the roles and responsibilities for fire safety.</b>			
1.2.2	Is the Board Level Director satisfied that all premises have appropriate fire safety procedures and contingency plans?	Yes		
	<b>The BLD is fully aware of the procedures and plans held by the organisation, also has been made fully aware of what items remain outstanding across the HB and the resources required to address the identified shortcomings. As a result, the Health Board has invested heavily in the past year with the introduction of a dedicated Fire Safety Manager and a further 1.8 WTE Fire Advisors.</b>			
1.2.3	Is the Organisation's fire policy implemented in all premises?	Yes		
	<b>The HB has a HB approved (May 2018) revised fire safety policy which will be globally communicated to all staff at all premises. The document needs a minor revision to reflect the changes to the Fire Safety structure.</b>			
1.2.4	Is the Board Level Director satisfied that the fire policy has been communicated throughout the organisation?	Yes		
	<b>This has been communicated across the HB during its development utilising the various fire safety sub groups and the overarching HB wide fire safety group. The content of the policy will continually be communicated via such groups.</b>			
1.2.5	Is the Board Level Director informed of all fire drills?	Yes		
	<b>The BLD is fully aware of the evacuation drills undertaken across the HB. When they are scheduled and briefing note is issued and discussed at fire safety group meetings.</b>			
1.2.6	Is the Board Level Director informed of all fire incidents?	Yes		
	<b>The BLD is informed of all significant fire incidents that occur in the HB via the fire team reporting structure.</b>			
1.2.7	Is the Board Level Director satisfied with the management structure of Fire Safety Managers and deputies at all sites?	Yes		
	<b>The Health Board has invested significantly in the Fire Safety structure with the introduction of a dedicated Fire Safety Manager and an additional 1.8 WTE Fire Advisors. The restructure is now complete as of April 2019.</b>			
1.3	Fire Safety Manager			
1.3.1	Have the roles and responsibilities of the Fire Safety Manager been formally agreed with the Board Level Director?	Yes		
	<b>The Fire Management structure has recently been reviewed and a new structure put in place. A full time Fire Safety Manager is now in place and the roles and responsibilities of the post have been agreed at Board level.</b>			
1.3.2	Have Deputy Fire Safety Managers been appointed?	No		
	<b>There are no deputy fire safety managers appointed for the HB.</b>			

<b>1.3.3</b>	Have the roles and responsibilities of the Deputy Fire Safety Managers been formally agreed with the Fire Safety Manager?	<b>No</b>			
	<b>There are no deputy fire safety managers appointed for the HB.</b>				
<b>2</b>	<b>Policy Issues</b>				
<b>2.1</b>	Is there a current formally documented and dated fire safety policy approved by the Board?	<b>Yes</b>			
	<b>The HB has recently fully reviewed their fire safety policy (May 18) and it has been approved by the HB. The document has been streamlined and focuses on the key management responsibilities. There is a separate annex 1 document that has been written which contains more of the technical aspects of fire safety. The document requires a small revision to reflect the change in the Fire Safety Management and re-structure. The Policy is currently under review.</b>				
<b>2.2</b>	Does the Fire Policy address (or refer to) the following issues:				
<b>2.2.1</b>	Smoking?	<b>Yes</b>			
	<b>Held in Annex 1 of the fire safety policy. There is also a smoke free sites group set up in the HB, which raises issues regarding smoking on site.</b>				
<b>2.2.2</b>	Arson or combined arson / security?	<b>Yes</b>			
	<b>Held in Annex 1 of the fire safety policy. There is also a security manager employed by the HB who regularly reviews security concerns for the HB and who liaises closely with the fire safety manager across a range of security aspects.</b>				
<b>2.2.3</b>	Risks associated with working processes?	<b>Yes</b>			
	<b>Held in Annex 1 of the fire safety policy. There is a specific section relating to the control of contractors and the use of permits when working. A separate, new Control of Contractors Policy was introduced in April 2020.</b>				
<b>2.2.4</b>	Risks associated with electrical equipment?	<b>Yes</b>			
	<b>Held in Annex 1 of the fire safety policy. There is a specific section relating to the correct use of electrical equipment.</b>				
<b>2.2.5</b>	Car parking?	<b>Yes</b>			
	<b>Held in Annex 1 of the fire safety policy.</b>				
<b>2.2.6</b>	Planned preventative maintenance?	<b>Yes</b>			
	<b>Held in Annex 1 of the fire safety policy and further referred to in the HB's maintenance policy.</b>				
<b>2.2.7</b>	Permit to work?	<b>Yes</b>			
	<b>Held in Annex 1 of the fire safety policy and further referred to in the HB's maintenance policy.</b>				
<b>2.2.8</b>	Waste management?	<b>Yes</b>			
	<b>Held in Annex 1 of the fire safety policy.</b>				
<b>2.2.9</b>	Furniture and textiles?	<b>Yes</b>			
	<b>Held in Annex 1 of the fire safety policy.</b>				
<b>2.2.10</b>	Appropriate fire fighting equipment?	<b>Yes</b>			

	<b>Held in main fire policy and Annex 1 of the fire safety policy.</b>			
2.2.11	Appropriate fire training?	Yes		
	<b>Held in Annex 1 of the fire safety policy.</b>			
2.3	Does the organisation have a procedure in place to ensure that there are sufficient and adequately trained staff available at all times to provide assistance for evacuation?	Yes		
	<b>The HB has developed a range of fire defence plans for specific areas of the estate, which will clearly identify the requirements to support evacuation procedures. The HB's fire safety advisors/fire safety support officer provide the necessary training to staff. The HB also utilises fire response teams at all of their acute sites to support/assist with fire evacuation situations.</b>			
2.4	Does the organisation have procedures to identify and address specific fire safety provisions for patients whose medical condition may necessitate additional requirements e.g. bariatric patients, highly infectious/contagious diseases, etc?	Yes		
	<b>A clinical assessment is undertaken on every in-patient to determine their individual needs, included in this is an assessment of their evacuation requirements and risks especially if there are concerns with plus sized patients. The HB has acquired a range of evacuation aid products including the Hover Jack to assist with evacuation procedures. The HB are currently reviewing this in more detail and will be assessing all areas where there are potential complications associated with the use of evacuation aids. The fire safety team are working closely with the manual handling teams on this. A Health Board wide policy for Bariatric or other more complex evacuation is in the process of being compiled.</b>			
2.5	Does the organisation have access to up-to-date fire safety legislation and guidance?	No		
	<b>Although the Health Board has access to all HTM's, WHTM's HBN's, WHBN's etc, it does not have access to British Standards or other published guidance outside of Health Care. A process to arrange such access has been proposed.</b>			
2.6	Does the organisation have a procedure in place to ensure fire risk assessments are maintained up-to-date?	Yes		
	<b>The Health Board uses the Shared Services on-line systems for the management of fire risk assessments. It also uses an Excel tracker system to monitor properties. New properties are submitted to Shared Services for updating onto the on-line system. Fire risk assessments status is continually monitored by the Fire Safety Manager.</b>			
2.7	Are all risks and hazards identified in the fire risk assessments prioritised and incorporated into the health and safety plan for rectification?	Yes		
	<b>All risks in the risk assessments are reviewed and prioritised accordingly. Funding will then be bid for via statutory capital investment to address key areas of risk. This may be over a phased approach due to quantity of funding that is made available. A review of the management of fire risk assessments significant findings has recently been undertaken and new procedures implemented.</b>			
2.8	Where fire safety roles and responsibilities are shared with other organisations, are appropriate measures in place to ensure co-operation and co-ordination between the occupants?	Yes		
	<b>The HB ensures that it fully coordinates with various landlords/responsible persons at shared facilities to make sure that there is a coordinated approach to fire safety management.</b>			
2.9	Where patients are treated in non-NHS premises have appropriate procedures been developed for ensuring fire safety?	Yes		

**The HB has formally written to all premises that are not NHS owned (specifically GP sites) seeking assurances from the landlords/practice managers that suitable arrangements are in place for fire safety (risk assessments, training, fire defence plans etc.) for HB staff. The HB will now be requesting evidence (copies of the information) as opposed to a standard letter from the practice.**

**2.10** Are there procedures for investigating and reporting fire incidents and/or unwanted fire signals in accordance with the principles of WHTM05 03 Part H? **Yes**

**All fire incidents/unwanted fire signals are investigated in house by the respective fire safety officer and operational teams/staff who may have been called out as a result of the activation.**

**2.11** Does the organisation have appropriate procedures for immediately notifying the Welsh Government and NWSSP - SES in the event of a fire causing serious injuries, death, serious property damage or loss of services? **Yes**

**The HB does have a procedure for immediately notifying WG and NWSSP-SES in the event of a serious situation/fire incident at one of its facilities.**

**2.12** Are staff and safety representatives consulted on fire safety issues? **Yes**

**The HB regularly distributes global e-mails across the organisation which will contain specific fire safety management concerns or safety considerations, such as use of cooking facilities in non-designated areas, or fire safety within our estate (highlighting issues such as closing fire doors, removing door wedges etc). The HB also has a variety of committees and groups which meet regularly to discuss fire safety issues. The HB is also developing a fire safety web page, which will have links to a variety of fire safety information and advice and contact information.**

### **3 Training Issues**

**3.1** Has the Fire Safety Manager developed a training programme for all employees derived from a training needs analysis? **Yes**

**The FSM has recently developed and issued (March 2019) a revised comprehensive TNA for the HB which now forms part of the approved Fire Safety Policy. There are now 4 levels of training across the HB.**

**3.1.1** Provide an assessment of the overall compliance of fire safety training compared to the training needs analysis (April - March). **37%**

**Fire Safety training on a face to face basis has been suspended since the Covid-19 outbreak. The HB has adopted the online e-learning module to provide fire safety training as an interim measure until such time that face to face training can be re-introduced.**

**3.2** Is induction training in fire safety provided for ALL employees prior to commencement of work? **Yes**

**The induction process fire training aspect is now facilitated by an online e-learning session.**

**3.3** Is fire safety training provided for all part-time and agency staff? **Yes**

**The HB does provide training for all part-time and agency staff when notified by the responsible person in charge of a specific area.**

**3.4** Where applicable, is fire safety training provided for non-NHS staff employed within the premises? **Yes**

**The HB does offer training to staff working within its premises who are not directly employed by the NHS. This is usually raised and arranged via the responsible person in control of that specific area.**

**3.5** Is specific training provided for all employees who regularly deal with flammable materials or heat-producing equipment? **Yes**

**The HB provides varying levels of training, which considers the needs of all staff, kitchen staff, estates staff etc. Level 3 of the HB's TNA specifically looks at heat producing equipment and flammable materials. However, this process, being a face to face session is on hold due to Covid-19.**

- 3.6** Is attendance, content, frequency and delivery of fire safety training formally recorded, with records maintained for 3 years? **Yes**

**All training attendance is recorded by the individual fire safety advisor/support officer who delivers the training. The records are also issued to the ESR teams for formal recording against the staff record. There are some issues at present with the validity and consistency of records stored on the ESR system. However the HB are reviewing this in detail to address the problems.**

- 3.7** Does the organisation have a procedure to assess the effectiveness of fire training delivered? **Yes**

**The HB does have a system in place to review the effectiveness of training delivery. This is achieved through Q&A sessions at each training session. Also occasionally the sessions are peer reviewed by other members of the fire safety team and feedback is collated and discussed in fire team meetings.**

#### **4 Ongoing Works**

- 4.1** Does the organisation have a procedure to ensure that Building Regulations approval is sought for all new works and alterations where required? **Yes**

**All schemes that require formal building regulations approval will be undertaken via the use of the HB's in house discretionary design team, major project manager or appointed consultants working on behalf of the HB.**

- 4.2** Where deemed appropriate, is the fire authority consulted on fire safety issues? **Yes**

**The HB would consult the fire brigade or other enforcing authority where it is required to do so.**

- 4.3** Is there an effective procedure for ensuring fire safety when building, maintenance or refurbishment works are being undertaken? **Yes**

**The HB considers all aspects of fire safety when undertaking future maintenance or refurbishment works. This is dependent upon available financial support. If specific fire related work is unable to be addressed at the same time as the primary work then this will be highlighted on the HB's estates and facilities risk register and the risk will be mitigated as far as reasonably practicable.**

- 4.4** Does the organisation have a procedure to ensure that fire safety manuals/strategies are updated following the completion of building, maintenance or refurbishment works? **Yes**

**The HB does have a formal written procedure (managed by the property function) to ensure that all documentation issued at scheme hand over is formally recorded and issued to the HB. This is then transferred onto the HB's drawings. (At present the status of drawing information in relation to fire is under review). A program is in place to ensure that all Health Board properties, particularly those with inpatient facilities have p to date drawings. Prince Philip Hospital is completed and the work carried out by an outside contractor. Subject to finance this will be rolled out to other properties.**

- 4.5** Where schemes are notifiable under the CDM Regulations, is the CDM Health & Safety Plan co-ordinated with the organisation's fire strategy? **Yes**

**All new building schemes, which are undertaken by the HB are designed and co-ordinated in conjunction with available fire strategies, documentation and experience of key staff to ensure that all proposals consider fire safety as an integral part of the design and build process.**

- 4.5.1** Upon completion of CDM notifiable schemes are fire safety manuals/H&S files issued to the organisation? **Yes**

**At final completion/hand over all documentation is issued to the HB from the principle contractor. However the transfer of information onto the HB's drawing portfolio may take some time due to limited resources of CAD technicians. There is a library of files centrally stored on the estates server of previously completed work.**

- 4.6** Where new works or refurbishment schemes are proposed, are the recommendations of the current fire risk assessments considered? **Yes**

**For all new refurbishment schemes the HB does consider the risk assessment recommendations as part of the scheme. This again is subject to available funding and individual priority action plans.**

## **5 Miscellaneous**

- 5.1** Are all medical gas pipeline systems assessed, installed and maintained for compliance with HTM 02 by the medical gases approved person(s)? **Yes**

**The HB has authorised AP's for medical gas services. The infrastructure is also assessed by the AE and audits are undertaken on areas of non-compliance.**

- 5.2** Are all compressed gas cylinders stored and managed in accordance with HTM 02? **No**

**Although there are medical gas cylinder stores on certain sites, the management of cylinders requires some work with the development of suitable policies and provision of internal stores where necessary.**

- 5.3** Are Liquid Petroleum Gas (LPG) storage facilities constructed and maintained in accordance with UKLPG guidance? **n/a**

- 5.4** Are oil tank storage facilities constructed and maintained in accordance with the recommendations of BS5410 and generator oil tanks in accordance with HTM 06? **Yes**

**The Health Board has been awarded the Environmental Management System ISO 14001 Standard, which assesses, audits and ensures continual progress to this standard**

- 5.5** Where applicable, are 'Houses in Multiple Occupation' (staff residences) managed in accordance with 'The Management of Houses in Multiple Occupation (Wales) Regulations 2006'? **n/a**

**Local Authorities classify the accommodation as staff residential units, therefore this would not apply presently.**

- 5.6** Are all vacant or unused buildings on the organisation's estate secured and managed against the potential for deliberate fire-raising? **Yes**

**When premises are no longer required they are isolated from the electrical/ gas/ water supplies. As necessary, they are further protected by boarding etc where the risk of vandalism etc is identified.**

- 5.7** Where 'dangerous substances' are present, has the organisation undertaken risk assessments in accordance with the Dangerous Substances and Explosive Atmosphere Regulations 2002 (DSEAR)? **Yes**

**The Health and Safety managers have considered this and if necessary RA's are prepared. For specific situations consultants can be employed by the HB to undertake a DSEAR risk assessment. The HB are currently reviewing this across the organisation.**

- 5.8** Has the organisation implemented a prioritised action plan to address any DSEAR assessment findings? **No**

The fire safety team and the Health and safety managers are reviewing the requirements for DSEAR across the HB in order to implement a prioritised action plan where DSEAR assessments may be required. This work is progressing with a view of having the assessment completed by the end of 2018. This work is still in progress. The H&S team are working on providing a policy document and assessing where DSEAR assessments are required.

## Performance Indicators

### Projected dates of compliance

Site name	Compliance date
Aberaeron Integrated Care Centre	12/2022
Amman Valley Hospital	12/2025
Bronglais General Hospital	12/2025
Canolfan Bro Cerwyn	12/2025
Cardigan Integrated Care Centre	12/2020
Glangwili General Hospital	12/2025
Gorwelion Day Hospital	12/2023
Hafan Derwen	12/2025
Llandovery Hospital	12/2025
Prince Philip Hospital	04/2025
South Pembrokeshire Hospital	12/2025
Tregaron Hospital	04/2025
Withybush General Hospital	12/2025

