## Bundle Health & Safety Assurance Committee 7 September 2020

2.5 Update on Fire Enforcement Notices and Letters of Fire Safety at Withybush General Hospital (WGH) and Glangwili General Hospital (GGH)

Presenter: Rob Elliott

Item 2.5 Update on Fire Enforcement Notices and Letters of Fire Safety at Withybush General Hospital (WGH) and Glangwili General Hospital (GGH)

Appendix 1 - WGH

Appendix 2 - St Nons St Caradogs Bro Cerwyn

Appendix 3 - Kensington St Thomas etc

Appendix 4 - Secure EMI Unit etc

Appendix 5 - GGH

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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	07 September 2020
TEITL YR ADRODDIAD: TITLE OF REPORT:	Update on Fire Enforcement Notices and Letters of Fire Safety at Withybush General Hospital (WGH) and Glangwili General Hospital (GGH)
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Andrew Carruthers, Director of Operations
SWYDDOG ADRODD: REPORTING OFFICER:	Rob Elliott, Director of Estates, Facilities and Capital Management

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

## ADRODDIAD SCAA SBAR REPORT

#### Sefyllfa / Situation

This paper updates the Health & Safety Assurance Committee on progress on the Fire Enforcement Notices and Letters of Fire Safety issued by the Mid and West Wales Fire Rescue Service (MWWFRS) on WGH and GGH.

#### Cefndir / Background

The MWWFRS, as part of their normal routine inspections, visited WGH on 30<sup>th</sup> July 2019 and GGH on 24<sup>th</sup> February 2020, to undertake Inspections of Fire Safety. As a result of these inspections, Fire Enforcement Notices and Letters of Fire Safety were issued on the WGH site and a single Fire Enforcement Notice on the GGH site.

As set out in this report, each Fire Enforcement Notice and Letter of Fire Safety included multiple actions, which required completion within specific timeframes.

In managing this, Hywel Dda University Health Board (HDdUHB) is working closely with MWWFRS and Welsh Government (WG) Capital Estates Teams in order to fully establish agreed timelines and funding availability to achieve these target dates.

#### Asesiad / Assessment

The MWWFRS have issued a number of Fire Enforcement Notices and Letters of Fire Safety as set out below. This is a complex situation with a number of revisions and withdrawals of Fire Enforcement Notices which have been subsequently reissued against new timelines. These revised timelines take into account the disruptions caused by the current COVID-19 Pandemic and confirmation of the completion of delivery programmes by HDdUHB.

Discussions will continue with MWWFRS on these timelines in order to obtain formal approval to all programmes submitted by HDdUHB.

A full delivery programme has been submitted to MWWFRS. Whilst significant elements of this programme have been formally agreed and included within the updated Fire Enforcement Notices and Letters of Fire Safety, there remain certain elements that have been approved verbally, however HDdUHB are yet to receive formal confirmation of approval despite requesting this on a number of occasions. This is specifically around Letters of Fire Safety at WGH and the programme submitted for GGH. This is being urgently pursued by HDdUHB in order to formalise the position.

As work proceeds, the MWWFRS will need to be regularly updated on progress in completing technical business cases and the construction works necessary.

Listed below are all the current Fire Enforcement Notices and Letters of Fire Safety under each site heading, which can be made available if required:

#### **WGH**

MWWFRS Enforcement Notice EN/262/06 for visit on 30<sup>th</sup> July 2019 dated 8th August 2019 MWWFRS Enforcement Notice EN/262/06 extension of 2 months dated 29th November 2019

MWWFRS Withdrawal of Enforcement Notice EN/262/06 date 17th February 2020

MWWFRS Enforcement Notice KS/890/02 Extended deadline to 30th September 2020 dated 17th February 2020

MWWFRS Enforcement Notice KS/890/03 Extended deadline to 28th August 2021 dated 17<sup>th</sup> February 2020

MWWFRS Enforcement Notice KS/890/04 Extended deadline to 30<sup>th</sup> April 2021 dated 17th February 2020

MWWFRS Enforcement Notice KS/890/02 Extension due to Covid-19 to 30th January 2021 dated 20th July 2020

MWWFRS Enforcement Notice KS/890/03 Extension due to Covid-19 to 31st December 2021 dated 20th July 2020

#### St Caradog's/St Nons/Bro Cerwyn (Pembrokeshire)

MWWFRS Enforcement Notice EN/262/08 for visit to St Caradog's, Bro Cerwyn to be actioned by 4th March 2020 dated 6th December 2019.

MWWFRS Withdrawal of Enforcement Notice EN/262/08 date 17th April 2020

MWWFRS Enforcement Notice KS/890/05 extended deadline to 16th October 2020 dated 17th April 2020

MWWFRS Enforcement Notice KS/890/05 Extension due to Covid-19 to 16th February 2021 date 20th July 2020

MWWFRS Letter of Fire Safety for Kensington, St Thomas, Springfield, Sealyham, Pembroke County Blocks following visit to site on 17th December 2019 to be actioned within 6 months dated 7th January 2020

MWWFRS Letter of Fire Safety for Secure EMI Unit, St Nons/Bro Cerwyn/St Brynach's (Day Hospital) to be actioned within 3 months dated 10th December 2020

#### **GGH**

MWWFRS Enforcement Notice KS/890/06 to be actioned by 16th October 2020 dated 17th April 2020

MWWFRS Enforcement Notice KS/890/06 Extension due to Covid-19 to 16<sup>th</sup> February 2021 dated 20th July 2020

### **Details of Fire Enforcement Notices and Letters of Fire Safety**

The Appendices provide the full details of each current Fire Enforcement Notice and Letter of Fire Safety and the full content of each Notice with specific completion dates relevant to each action.

### **Summary of Position to Date**

As noted in the Appendices, good progress has been made on completing a significant number of actions required by the Fire Enforcement Notices and Letters of Fire Safety. This has been undertaken with support from HDdUHB's Discretionary Capital Programme.

The outstanding elements of work will now require significant Capital expenditure to complete.

At WGH the following can be confirmed:

- Advanced works programme totalling £350k will be financed by WG. This work is progressing to programme with a target date as indicated of 29th January 2021.
- The following section of work as identified as Phase 1 of the Fire Enforcement Notices and Letters of Fire Safety, as contained in the Appendices, is currently programmed to complete by 31st December 2021. This element of work is subject to delay for the following two reasons:
  - The Programme Business Case (PBC) submitted by HDdUHB was not endorsed by WG in line with the original programme. Whilst this has now been resolved and the PBC has been endorsed by WG, HDdUHB will have to finance, at risk, the fee cost element of the next stage of the Business Justification Case (BJC). WG has advised that during the development of this BJC, they hope to be in a position to support the ongoing construction cost element. This delay is in the order of 6-8 weeks from the original programme.
  - Following the above endorsement, HDdUHB is now progressing with the appointment of Supply Chain Partners within the Design for Life Building for Wales Framework arrangements. This is a mandated requirement for construction costs of this scale. This has proved challenging in that the companies on this All-Wales Framework managed by National Health Service Wales Shared Services Partnership-Specialist Estates Services (NHS Wales NWSSP-SES) have initially declined interest in tendering for these works. Following further negotiation by colleagues in NWSSP-SES, with our support, we now have only one company willing to participate subject to HDdUHB agreeing to a circa 5 week extension for the delivery of the BJC. (Note: We would normally expect bids from all 5 companies listed on this Framework).
- HDdUHB is now analysing the overall impact of these issues in formulating an updated programme for the Phase 1 element of work at WGH. Once established, this revised programme will need to be discussed and agreed with MWWFRS..
- In terms of the Phase 2 works which include departments, wards, theatres etc., MWWFRS are yet to update their Fire Enforcement Notices on this element of work. This is a highly complex phase in the programme which is likely to involve a substantial decant of critical services. MWWFRS have agreed that this will need to be considered again at a later date.

### At GGH the following can be confirmed:

- At GGH an advanced work programme has been established which completes in May 2021. Survey works have been disrupted due to COVID-19 Pandemic restrictions, therefore we are currently evaluating if there is any impact to this date. We remain confident of maintaining this delivery timeline.
- The following section of work as identified as Phase 1 in the Appendices is currently
  programmed to complete by the end of April 2022. Due to the impact of COVID-19 on
  survey activities, this programme is likely to slip by circa 2 months. We are currently
  analysing the full impact of this in developing revised programme dates.
- In terms of the Phase 2 works which include departments, wards, theatres etc., MWWFRS are yet to update their Fire Enforcement Notices on this element of work. This is a highly complex Phase in the programme which is likely to involve a substantial decant of critical services. MWWFRS have agreed that this will need to be considered again at a later date.
- On the GGH site, whilst these dates have been submitted to MWWFRS and verbally agreed an updated Fire Enforcement Notice is awaited. We are now urgently seeking their formal agreement to these programme dates.

For all of the works detailed in the Appendices, WG continue to be highly supportive of our plans and are working with HDdUHB to mitigate any delay to the delivery of this essential work.

We have agreed with WG to arrange a joint meeting with MWWFRS in September 2020 to fully discuss the overall programme of delivery. This will establish a joint agreement between HDdUHB, MWWFRS and WG on the overall timing of the Business Case process and any adjustments that have been necessary as detailed above.

#### **Argymhelliad / Recommendation**

The Committee is asked to note:

- the current progress against the Fire Enforcement Notices and Letters of Fire Safety outlined within this report.
- the further work necessary to fully evaluate any modifications to the established programme.
- the urgent action being taken to receive written confirmation from MWWFRS in support of the verbal agreements made to date.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	5.9 Ensure reports and factual information from external regulatory agencies are acted upon within achievable timescales.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Estates and Facilities Risk No 813
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	2.1 Managing Risk and Promoting Health and Safety

Nodau Gwella Ansawdd: Quality Improvement Goal(s):	No Avoidable Deaths
Amcanion Strategol y BIP: UHB Strategic Objectives:	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018- 2019	10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth:	MWWFRS and extensive site based survey information
Evidence Base:	
Rhestr Termau:	Contained in body of report
Glossary of Terms:	
Partïon / Pwyllgorau â	N/A
ymgynhorwyd ymlaen llaw y	
Pwyllgor Ansawdd Iechyd a	
Diogelwch:	
Parties / Committees consulted	
prior to Health and Safety	
Assurance 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:	N/A
Gweithlu: Workforce:	Delivering a safe working environment
Risg: Risk:	Estates and Facilities Risk No 813
Cyfreithiol: Legal:	Potential for legal challenge if HB does not comply with requirements of Fire enforcement Notices
Enw Da: Reputational:	Potential for legal challenge if HB does not comply with requirements of Fire enforcement Notices
Gyfrinachedd: Privacy:	N/A
Cydraddoldeb: Equality:	N/A

### APPENDIX 1 - WITHYBUSH GENERAL HOSPITAL – ENFORCEMENT NOTICE

Obstructed Escape Routes are clear of any ombustible materials and wheelie are etc., etc.  Compartmentation: arry out a full survey of the hospital didentify areas where ompartmentation is incomplete. Fire sisting structures are to continue to ab/upper floor/roof level and pass arough any false ceiling provided. Ote: The above element of Fire ompartmentation is now subvided into 3 component parts and ally agreed with MWWFRS. These ee:	Completed  Complete  Survey Complete	Programme to complete 29 Jan	Phase I	Phase II
compartmentation: In the structures are clear of any symbols before the hospital and wheelie arry out a full survey of the hospital addentify areas where compartmentation is incomplete. Fire sisting structures are to continue to ab/upper floor/roof level and pass rough any false ceiling provided. The above element of Fire compartmentation is now subvided into 3 component parts and ally agreed with MWWFRS. These is:	Survey			
arry out a full survey of the hospital identify areas where impartmentation is incomplete. Fire sisting structures are to continue to ab/upper floor/roof level and pass rough any false ceiling provided. It is the above element of Fire impartmentation is now subvided into 3 component parts and ally agreed with MWWFRS. These is:	1			
ertical Escape Routes				
		21 as confirmed on EN/KS/890/02		
orizontal Escape Routes		E147 K37 6367 62	Construction works complete by 31 Dec 21 as confirmed on	
ards/Departments			EN/KS/890/03 Note: updated programme being developed	The current EN/KS/890/04 refers to a completion date of 20 Apr 22. This has been
nis is set out in detail in the range of inforcement Notices and Letters of the Safety listed within the SBAR. Full etails of the Notices are available if quired.				discussed with MWWFRS and it is agreed that this will need to be revisited at a later date.
Compartmentation: einstate the fire resistance in the llowing locations and any other eas identified in the survey: I. Laundry Room in Basement Area II. Compartment doors in basement area corridor III. Compartment floor in server	Complete  Item removed on current			
niinfere	s is set out in detail in the range of forcement Notices and Letters of a Safety listed within the SBAR. Full tails of the Notices are available if quired.  Compartmentation: Instate the fire resistance in the lowing locations and any other has identified in the survey: I. Laundry Room in Basement Area II. Compartment doors in basement area corridor	s is set out in detail in the range of forcement Notices and Letters of e Safety listed within the SBAR. Full tails of the Notices are available if quired.  Compartmentation: Instate the fire resistance in the lowing locations and any other has identified in the survey: I. Laundry Room in Basement Area II. Compartment doors in basement area corridor II. Compartment floor in server room in basement area  II. Compartment floor in server room in basement area	s is set out in detail in the range of forcement Notices and Letters of a Safety listed within the SBAR. Full sails of the Notices are available if quired.  Compartmentation: Instate the fire resistance in the lowing locations and any other was identified in the survey: I. Laundry Room in Basement Area II. Compartment doors in basement area corridor II. Compartment floor in server room in basement area  II. Compartment floor in server room in basement area	Construction works complete by 31 Dec 21 as confirmed on EN/KS/890/03 Note: updated programme being developed  s is set out in detail in the range of forcement Notices and Letters of a Safety listed within the SBAR. Full rails of the Notices are available if puired.  Compartmentation: Instate the fire resistance in the owing locations and any other rais identified in the survey:  I. Laundry Room in Basement Area  II. Compartment doors in basement area  II. Compartment floor in server room in basement area  II. Compartment floor in server room in basement area

3. Fire Resisting Doors: Ensure that all fire-resisting door-sets can resist fire and smoke for 30 minutes. All defective fire doors need to be upgraded.  Note: The above element of Fire Compartmentation is now subdivided into 3 component parts and fully agreed with MWWFRS. These are:				
Vertical Escape Routes  Horizontal Escape Routes		Programme to complete 29 Jan 21 as confirmed on EN/KS/890/02	Construction	
Horizontal Escape Routes			works complete by 31 Dec 21 as confirmed on EN/KS/890/03 Note: updated programme being developed	The survey
Wards/Departments				The current EN/KS/890/04 refers to a completion date of 20 Apr 22. This has
This is set out in detail in the range of Enforcement Notices and Letters of Fire Safety listed within the SBAR. Full details of the Notices are available if required.				been discussed with MWWFRS and it is agreed that this will need to be revisited at a later date.
<ul> <li>3. Fire Resisting Doors:</li> <li>This is to include:</li> <li>Corridor doors in Ward 10</li> <li>A &amp; E store rooms</li> </ul>	Complete			
4. Fire Exit Door Difficult to Open: Ensure that all doors on exit routes are available and can be easily and immediately opened, without the use of a key, in an emergency by anyone who might need to use them.    HSDU Dept referenced	Item removed on current notices.			
5. Sliding Doors on Escape Routes: Ensure that the following automatic sliding door defaults to the open position in the event of a power failure or on operation of the fire alarm system.  • Next to canteen corridor area in basement	Complete  Item removed on current notices.			

6. Inner Room: Ensure that people in the location of the HSDU Department receive an early warning in case of fire by providing fire detection (linked to the fire alarm system) in the room leading to store room and lobby corridor.	Complete  Item removed on current notices.		
7. Emergency Lighting - Maintenance: Ensure that the Emergency Lighting system is properly tested and maintained. Confirmation of compliance to British Standard 5266 Part 1 is to be returned to this office.	Item removed on current notices.		
8. Fire Damper Systems - Maintenance: Ensure that the fire damper systems are properly tested and maintained. Following completion of testing of these systems, documentation needs to be sent to my office confirming this. Fire damper systems should be tested as per British Standard 5588-9 Code 9, with a maximum testing interval of two years.	Complete  Item removed on current notices.		
9. Dry Riser Systems - Maintenance: Ensure that the fire dry riser systems are properly tested and maintained. Following completion of testing of these systems, documentation needs to be sent to my office confirming this.	Complete  Item removed on current notices.		

## APPENDIX 2 - ST NONS, ST CARADOGS, BRO CERWYN – ENFORCEMENT NOTICE

		No of Items	Advance	BC Delivery	
Enforcement Notice	Item/Description	Completed	Works	Phase I	Phase II
EN/262/08 dtd 6 Dec 19	Fire Risk Assessments:     All items identified in the significant findings of your Fire Risk Assessment will need to be completed within the identified time scales	Complete			
	<ul> <li>2. Fire Resisting Doors: Ensure that door-sets that can resist fire and smoke for 30 minutes are provided in the following locations: <ul> <li>All identified fire resisting doors throughout St Caradog's unit &amp; Waldo Suite (Mental Health Department)</li> </ul> </li> <li>The term 'door-set' refers to the complete element as used in practice: <ul> <li>The door leaf or leaves.</li> <li>The frame in which the door is hung.</li> <li>Hardware essential to the functioning of the door set. 3 x hinges</li> <li>Intumescent seals and smoke sealing devices.</li> </ul> </li> <li>Any self-closing device fitted to doors and must not compromise the effectiveness of any intumescent strips and smoke seals forming part of the door set.</li> <li>Note: The above is now sub-divided into 2 component parts and fully agreed with MWWFRS. These are:</li> </ul>				
	Bedroom Door replacement		Completing by 29 Jan 21 As confirmed in EN/KS/890/05		
	All remaining fire doors within this building			Completing 31 Dec 21 this date has not yet been included in the updated Enforcement Notices but this programme has been submitted to MWWFRS	

3. Obstructed Escape Route: Ensure that the escape route next to staff room G16, which leads into a small yard	Complete	p	and we wait formal approval Note: updated rogramme being developed
area, is cleared of all obstructions and remains available for escape purposes at all times. Wheeled bin compound, electrical appliances and combustible items in escape route will need to be removed.	Item removed on current notice.		
<ul> <li>4. Compartmentation:         Reinstate the fire resistance in the following location(s)         <ul> <li>The ventilation system will need to be inspected and repaired as necessary to ensure all its inherent fire safety devises are functioning in line with its design specifications and manufacturer's instructions         </li> </ul> </li></ul>		th no ir th Er N p su f	completing 31 Dec 21 his date has but yet been included in he updated inforcement lotices but this rogramme has been hibmitted to MWWFRS and we wait formal approval Note: updated rogramme being developed
<ul> <li>5. Compartmentation: Reinstate the fire resistance in the following location(s): <ul> <li>Fire resisting Glazing removed from main corridor of St Caradog's &amp; replaced with thin plywood boarding.</li> </ul> </li> </ul>	Complete  Item removed on current notice.		
6. Escape Routes: The fire alarm system will need to be inspected by a qualified fire alarm engineer to ensure the system is fit for purpose and repaired/upgraded as necessary.	Item removed on current notice.		
7. Escape Routes: Ensure that all doors on exit routes are available and can be easily and immediately opened in an emergency by anyone who might need to use them.	Complete  Item removed on current notice.		

## APPENDIX 3 - KENSINGTON, ST THOMAS, SPRINGFIELD, SEALYHAM, PEMBROKE COUNTY BLOCKS, HYWEL DDA HEALTH BOARD, WITHYBUSH GENERAL HOSPITAL – LETTER OF FIRE SAFETY MATTERS

		BC Delivery			
Enforcement Notice	Item/Description	No of Items Completed	Advance Works	Phase I	Phase II
Letter of Fire Safety dtd 7 Jan 20	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	Completion end of Sep 20			
	All Loft hatches are to be fire resisting to a minimum of 30 minutes	Completion end of Sep 20			
	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.			Completing 31 Dec 21 this date has not yet been included in the updated Letters of Fire Safety but this programme has been submitted to MWWFRS and we await formal approval Note: Updated programme being developed	
	2. Fire Resisting Doors: 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.	Wedges now being removed and managed accordingly			

	<ul> <li>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).</li> <li>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</li> <li>Lobby doors need to be replaced in both first floor RH offices within the Springfield and Kensington blocks.</li> </ul>		Completing 31 Dec 21 this date has not yet been included in the updated Letters of Fire Safety but this programme has been submitted to MWWFRS and we await formal approval Note: Updated programme being developed	
}	3. Improve Fire Detection Systems:			
	<ul> <li>The detection within the means of escape from the flats and bedrooms should be changed from heat detection to smoke detection to allow the maximum amount of time between detection alert and escape.</li> <li>It was noted that there was heat detection in the bedrooms and entrance halls into the flats and within the lounge areas where smoke detection would be the preferred safer option, it was explained to me that this was due to the residents being able to smoke within the premises before the smoking ban to reduce the false alarm calls.</li> <li>It was noted that there was a detector being covered at time of inspection within the kitchen of the Pembroke county block (First floor flat F block). You must ensure that this practice is not repeated, information must be given to the occupants explaining the severity of this action.</li> <li>Due to the Server within the Means of escape an additional detector within the area of the device is required (due to the lintel between the detector and the server) noted within the Pembroke county and St Thomas block (but this should include all blocks if server is on escape route in the same way).</li> <li>The changes should be carried out and commissioned by a competent person.</li> </ul>	Completed	We will be developing this as part of the Discretionary Programme and will complete this by circa Jul 21	
	<ul> <li>4. Obstructed Escape Route:         Ensure that everyone can evacuate quickly and safely by details.         <ul> <li>Removing the photocopier to a safe location off the means of escape (within the Sealyham block)</li> <li>Keeping all escape routes clear of all items namely file cabinets and combustibles. (office Areas</li> </ul> </li> </ul>	Completed		
	combustibles. (office Areas Kensington, Sealyham)			

Notice boards sl behind a lockab on a means of e     S. Escape Lighting:     Ensure that escape lightin routes in all five locations are operating to the standaccordance with BS 5266 lighting should operate if circuit fails. The system sh monthly and inspected bi-	e screen if erected scape.  g on all escape mentioned above lard required and in the emergency the local lighting ould be tested	ted	
6. Establish Emergency Pri Establish procedures to be fire and nominate people procedures into effect. En enough competent people implement an evacuation occupied on a shared basi of communication must b those responsible for othe all relevant persons are pri and sufficient information safety measures impleme but namely the Kensingto	e followed in case of to put those sure that there are to successfully. Where premises are s, effective systems e established with er premises to ensure ovided with suitable in respect of the fire nted. All five blocks	ted	
7. Reduce Fire Spread: Upholstered furniture is to Standard 7176 or the equi Standard.  • Pembroke coun		ted	

# APPENDIX 4 - SECURE EMI UNIT, ST NONS/BRO CERWYN/ST BRYNACHS DAY HOSPITAL — LETTER OF FIRE SAFETY MATTERS

		No of Items		BC Delivery	
Enforcement Notice	Item/Description	Completed	Advance Works	Phase I	Phase II
Letter of Fire Safety	1. Fire Resisting Doors:				
dated 10 Dec 19	Ensure that door-sets that can resist fire				
	and smoke for <b>30 minutes</b> are provided				
	in the following locations:				
	<ul> <li>Throughout Units, many doors</li> </ul>			Commission 21	
	were defective, these were on			Completing 31 Dec 21 this	
	escape routes.			date has not	
	The term 'door-set' refers to the			yet been	
	complete element as used in practice:			included in	
	<ul> <li>The door leaf or leaves.</li> </ul>			updated	
	The frame in which the door is			Letter of Fire	
	hung.			Safety but this	
	Hardware essential to the			programme	
	functioning of the door set. 3 x			has been submitted to	
	hinges			MWWFRS and	
	Intumescent seals and smoke			we await	
				formal	
	sealing devices.			approval	
	Self-closers to be fitted to all			Note:	
	doors and not compromise			Updated	
	strips and seals of fire doors.			programme	
				being	
				developed	
	2. Compartmentation:			Completing 31	
	Reinstate the fire resistance in the			Dec 21 this date has not	
	following location(s)			yet been	
	Compartmentation issues throughout			included in	
	unit, due to Dampers showing fault on			updated	
	system			Letter of Fire	
	•			Safety but this	
				programme	
				has been	
				submitted to	
				MWWFRS and we await	
				formal	
				approval	
				Note:	
				Updated	
				programme	
				being	
				developed	
	3. Maintenance:	Committee			
	Ensure that certificates showing testing	Completed			
	of the Emergency lighting systems are provided via email at the earliest				
	opportunity.				
Bro Cerwyn Offices	Obstructed Escape Route:				

quic com Out	ure that everyone can evacuate ckly and safely by removing the nbustibles from the escape route – tside kitchen area and dead-end ridor to offices.	Completed		
Reir	Compartmentation:  nstate the fire resistance in the owing locations  • Holes in ceiling areas of offices, water leaking onto electrical appliances and sockets.	Completed		

## APPENDIX 5 - GLANGWILI GENERAL HOSPITAL — FIRE ENFORCEMENT NOTICE

		No of Items	Advance	BC Delivery		
Enforcement Notice	Item/Description	Completed	Works	Phase I	Phase II	
KS/890/06 dtd 17 Apr 20	<ul> <li>1. Compartmentation:         <ul> <li>All Horizontal and Vertical Breaches and/or Penetrations:</li> <li>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 the Glangwili Hospital site are addressed.</li> <li>Any contractual work undertaken to install services through a fire resisting barrier should be quality assured to ensure that the fire resistance is reinstated on completion.</li> <li>Any room that is made into a hazard room / area should comply with WHTM 0502 5.40 &amp; Table 6</li> </ul> </li> <li>Note: The above element of Fire Compartmentation is now sub-divided into 3 component parts and fully agreed with MWWFRS. These are:</li> </ul>					
	Vertical Escape Routes		Completed by May 21			
	Horizontal Escape Routes			Programme submitted for construction works to be completed by end Apr 22 Note: updated programme being developed		
	Wards/Departments  This is set out in detail in the range of	Note: these dates have been submitted to MWWFRS and we await formal			We have developed an initial proposed completion date but this is	
	Enforcement Notices and Letters of Fire Safety listed within the SBAR. Full details of the Notices are available if required.	agreement to these proposals			subject to further detailed evaluation	

Ensure that the fire damper systems are properly tested and maintained. Following completion of testing of these systems, documentation needs to be sent to my office confirming this. Fire damper systems should be tested as per British Standard 5588-8, with a maximum testing interval of two years.  3. Fire Resisting Corridors and Doors: Ensure that the escape routes are kept free from fire and smoke by making sure all fire doors are lit for purpose and protect the means of escape as they are intended to do so.  1. A number of fire resisting doors throughout the premises were found to have defects. All fire resisting doors throughout the premises are to be examined and repaired or replaced to ensure that they are effectively self closing onto their rebastes. Caps between door edge and frame are to be no more than 3 mm. Any damaged fire resisting glazing needs to be replaced.  2. It is important to ensure that self-closing fire resisting doors are not propped or wedged in the open position, if this is a requirement then the doors should be linked into the fire alarm, system to allow them to positively close fully into their frame on the activation of the fire alarm.  3. Ensure that all doors on exit routes are available and can be easily and immediately opened, without the use of a key, by anyone who might need to use them in an emergency.  4. Doors to rooms that have no public access should be locked when not in use.  5. All fire doors should have identification showing the firerating of the door.  6. All transom lights above all doors and enclosures within the hospital should have the same fire resistance as the structure it is part of.  Note: The above element of Fire Compartmentation is now sub-divided into			
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closing fire resisting doors are not propped or wedged in the open position, if this is a requirement then the doors should be linked into the fire alarm system to allow them to positively close fully into their frame on the activation of the fire alarm.  3. Ensure that all doors on exit routes are available and can be easily and immediately opened, without the use of a key, by anyone who might need to use them in an emergency.  4. Doors to rooms that have no public access should be locked when not in use.  5. All fire doors should have identification showing the firerating of the door.  6. All transom lights above all doors and enclosures within the hospital should have the same fire resistance as the structure it is part of.  Note: The above element of Fire	Ensure that the escape routes are kept free from fire and smoke by making sure all fire doors are fit for purpose and protect the means of escape as they are intended to do so.  1. A number of fire resisting doors throughout the premises were found to have defects. All fire resisting doors throughout the premises are to be examined and repaired or replaced to ensure that they are effectively self closing onto their rebates. Gaps between door edge and frame are to be no more than 3 mm. Any damaged fire resisting glazing needs to be		
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	and enclosures within the hospital should have the same fire resistance as the structure it is part of.		

3 component parts and fully agreed with MWWFRS. These are:				
Vertical Escape Routes		Complete May 21		
Horizontal Escape Routes  Wards/Departments  This is set out in detail in the range of Enforcement Notices and Letters of Fire	Note: these dates have been submitted to MWWFRS and we await formal agreement to		Programme submitted for construction works to be completed by end Apr 22 Note: updated programme being developed	We have developed an initial proposed completion date but this is subject to further
Safety listed within the SBAR. Full details of the Notices are available if required.	these proposals			detailed evaluation
<ul> <li>4. Fire Risk Assessment: <ul> <li>Ownership needs to be taken of the significant findings of the Fire Risk Assessment. Those items highlighted within the fire risk assessments need to be completed within the identified time scales.</li> <li>Departments within the hospital that are not operated by the Hywel Dda University Health Board also have a duty to comply with this item and all other items relevant to them within this enforcement notice.</li> </ul> </li> <li>5. Add to and Update the Fire Alarm:</li> </ul>	Ownership now accepted by Site Management Team. Programme being developed to deliver actions against key findings. New system will be introduced Feb 21 to better manage identification and programme delivery of items noted within fire risk assessments			evaluation
<ol> <li>Add to and Update the Fire Alarm:</li> <li>Extend the smoke detection within the corridor of the Tyssul ward (adjacent to the Laser treatment room) and link it to the existing fire alarm system.</li> </ol>	Completed			

<ol> <li>Exchange the smoke detection for a heat detection within the staff room Block 32FF.</li> <li>A large number of Detector heads were seen to be outdated, this was also noted within the risk assessments, the fire detection needs to be updated in accordance with BS 5839 part 1.</li> <li>There needs to be fire alarm repeater panels available for both wards within Block 2 FF.</li> <li>All of the above points should comply with WHTM 05 03, part B and BS 5839 Part 1 The changes should be carried out and commissioned by a competent person.</li> </ol>	Programme for now being established but working to complete this in current financial year  Completed		
6. Escape Lighting: Ensure that the emergency lighting is tested and in good working order so that it will operate if the local lighting circuit fails. The system should conform to BS 5266.	Completed		
7. Training for Own Staff: Provide your employees with instruction and training, so that they know the fire precautions you have put in place. They must also be familiar with what they need to do in case of fire to ensure that they are safe and can keep other people safe.	Programme plan to deliver 85% staff training by end Dec 20		
	Note: Level 1 & 2 available online		
8. Cooperation and Coordination: Effective systems of communication must be established with those who are responsible for all departments to ensure all relevant persons are provided with suitable and sufficient information in respect of the fire safety measures implemented. The cooperation must ensure that the shared fire safety measure(s) protect you all.	Completed		
9. Alternative Escape Route (Distance): Do not allow the adjoining door within Room 32 X-Ray Department GF Block 6 and room 26 to be locked with a key. A push pad or similar device should be installed to the door which complies with BS EN 179 (for emergency exit devices) or BS EN 1125 (for panic hardware). Signage indicating the need to use this door as a fire exit should also be displayed on both sides of the door from room 26 to room 32.	Completed		
10. Obstruction of Escape Routes:			

Ensure that everyone can evacuate quickly and safely.  1. Cabinets and lockers should be stored in areas that do not impede escape in the event of an emergency these items should be removed from the corridors.  2. Remove fridge stored within staircase Block 8 FF.  3. Remove items stored in lift lobby 2/B within CCU.  4. Remove Bins Store within staircase Block 32 GF.  5. Remove Bins Stored at the entrance to SCBU	Completed Completed Completed Completed Completed	Permanent solution being developed, completion end Oct 20	
11. Fire Fighting Equipment: Remove the existing Dry Powder Extinguishers from within all of the departments of the hospital site.	Completed		
12. Storage of Refuse: Manage all waste on site responsibly. Your refuse bins sited at the rear of the Renal unit are overflowing and combustible material is accumulating around this area. This is also the case in the courtyard of Block 32 and within the maintenance yard. If not carefully managed and controlled, rubbish stacked in a haphazard fashion in unsightly piles outside premises can lead to more rubbish being dumped or fly tipped. Graffiti, vandalism and arson may then follow in quick succession. When there is no segregated bin storage, wheeled bins should be chained together and to an immobile object, such as a metal stake, at least 10 metres away from any building.		Permanent solution being developed, completion end Oct 20	
13. Flammables Storage: Remove unnecessary items stored within the site's plant rooms	Completed		
14. Access: Particular attention needs to be taken regarding the access for fire service vehicles in the event of a fire at the Glangwili site. Whilst visiting the site to conduct the inspections over a week period, it was noted that the car parks were heavily overcrowded with vehicles parking in unauthorised areas, as a result the attending fire appliances would not be able to access all parts of the hospital. Access to all parts of the building should be available for the fire service at all times as mentioned in WHTM - 0502 Chapter 7 and Part B of Schedule 1 of the Building Regulations 2010.			

Note: A range of traffic enforcement		30 Oct 20	
measures will be introduced shortly			
Note: I also remind you of the email	A full risk		
regarding the escape from the operating	assessment		
theatre and Preseli ward.	has been		
<ul> <li>You will need to agree with the</li> </ul>	completed		
other departments within the	for this		
trust, in writing, that the Preseli	facility and		
ward and theatre are not used by	agreed		
'non-ambulant bariatric persons',	protocols are		
this is due to the inability of staff	in place to		
to safely evacuate non-ambulant	manage		
bariatric patients down the narrow	patient		
escape stairs provided at each end	groups. This		
of the floor.	will ensure		
This should be enforced until a	safe practices		
time that you are able to safely	are		
evacuate non-ambulant bariatric	maintained.		
patients from the theatre and			
ward area, by providing an	General		
alternative safe escape route or	Managers		
making the existing escape route	are now		
suitable for all dependencies.	considering a		
You will also need to prove that all	formal		
persons can be safely evacuated	Capital Bid to		
from this area of the hospital	avoid the		
	need of such		
	restrictions in		
	patient flow.		