



**PWYLLGOR CYNLLUNIO POBL A SICRWYDD PERFFORMIAD  
PEOPLE PLANNING AND PERFORMANCE ASSURANCE COMMITTEE**

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	27 April 2021
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Business Justification Case (BJC) for Phase I of Fire Enforcement Notices (FENs) and Letters of Fire Safety Matters (LoFSMs) at Worthybush General Hospital (WGH)
<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)**

Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA  
SBAR REPORT**

**Sefyllfa / Situation**

This report sets out the next stage in delivering the Capital investment necessary to comply with the FENs and LoFSMs in place on the WGH site.

The BJC document referred to in this report and attached at Appendix 1 sets out the Capital investment required for Phase 1 of fire enforcement works at WGH.

**Cefndir / Background**

The Mid and West Wales Fire & Rescue Service (MWWFRS), as part of their normal routine inspection, visited WGH on 30 July 2019 to undertake an inspection of Fire Safety. As a result of this inspection, FENs and LoFSMs were issued on the WGH site.

The Hywel Dda University Health Board (HDdUHB) have worked closely with MWWFRS in developing a detailed implementation programme which allows the works to be undertaken in an operational acute hospital. This has resulted in the MWWFRS reissuing their FENs into the following stages reflecting the dates from the HDdUHB implementation plan:

- Advance Works Contract – Vertical escape routes at WGH and priority work at St Caradog's (**KS/890/02 and LoFSMs dated 12<sup>th</sup> January 2021**) – **now completed**.
- Phase 1 – All remaining Horizontal escape routes at WGH, all remaining work at St Caradog's and St Nons, all work at Kensington, St Thomas, Springfield, Sealyham and Pembroke County Blocks (**FEN KS/890/03, FEN KS/890/05 and LOFSMs dated 12<sup>th</sup> January 2021**).
- Phase 2 – All departments /ward areas/risk rooms (**FEN KS/890/04**).

Throughout the development of the above, HDdUHB has worked closely with Welsh Government (WG) to appraise them of progress and works planned in future.

The MWWFRS are fully involved in regular discussions with HDdUHB on progress and are supportive of actions to date. They remain committed to supporting HDdUHB to complete all of these works.

Due to the timing of this BJC only being available following the most recent Capital Planning & IM&T Sub Committee (CE&IM&TSC) meeting, members of the CE&IM&TSC have been requested to provide comments on the BJC documents. Any comments received will be relayed to PPPAC at the meeting.

### Asesiad / Assessment

The next stage of the investment programme at the WGH is Phase 1 as noted above.

HDdUHB, supported by the Supply Chain Partner and appointed Project Manager and Cost Advisor, have developed the complete BJC and technical annexes to deliver the Phase 1 aspect of the FENs. This is attached as Appendix 1. Note: The technical annexes are not included due to their size, however they are available should they be required.

The development of the BJC has included extensive involvement of the General Management Team at WGH in order to organise the works with the minimum disruption possible.

The BJC for Phase 1 now indicates a completion date of July 2022. It should be noted that this is circa 3 months beyond the FEN date.

This has been discussed with MWWFRS and they have confirmed in a letter, which is included in the BJC, on how this will be managed with a further inspection in March 2022 when an extension of time will be granted subject to our progress.

The BJC also sets out the Capital needs for Phase 1, together with extensive detail of the fire engineering solutions included within the various technical annexes. The complexity of the Project has increased substantially from the initial Project Business Case (PBC) following the detailed survey and design solutions developed by the Supply Chain Team.

In summary, the Capital cost of the Project is as follows:

- Basic Project Outturn Cost - £9,124,964.
  - Total Quantified Risk Contingency - £3,832,403.
  - Total Outturn Cost (including contingency) £12,957,367.
- (All of the above are inclusive of VAT)

You will note in the above summary a figure of £3,832,403 for quantified risk contingency funding. This has been included following discussions with WG and agreement on an innovative way of dealing with contingency risk in terms of capital outturn. This element of funding can only be accessed by the HDdUHB should the Project require additional funding.

This arrangement was negotiated as the contract will be based on the New Engineering Contract (NEC) Option E (rather than Option C). Therefore, the contract will operate on a cost plus basis where the contractor is required to fully justify all costs incurred and they will then be paid on this basis with the addition of profit and overheads.

This major change was undertaken by WG following the reluctance of any national framework contractors expressing an interest in the Project under the normal Option C target cost arrangements due to the complexity of the Project.

This arrangement offers additional support to HDdUHB in the case of escalating capital costs as the works progress and is fully recognised as necessary by WG scrutiny teams.

HDdUHB has been in regular dialogue with WG regarding the development of capital cost and the technical fire engineering solutions required.

### Argymhelliad / Recommendation

The People, Planning & Performance Assurance Committee is asked to:

- Support the submission of the BJC to WG seeking approval to progress with this work, prior to ratification via Chair's Action.

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

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

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	Not Applicable
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	2.1 Managing Risk and Promoting Health and Safety
Amcanion Strategol y BIP: UHB Strategic Objectives:	4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2019-20	10. Not Applicable

### **Gwybodaeth Ychwanegol:**

#### **Further Information:**

Ar sail tystiolaeth: Evidence Base:	Extensive site bases survey information and direct input from key operational estate staff.
Rhestr Termiau: Glossary of Terms:	Contained within the body of the report.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Cynllunio Pobl a Sicrwydd Perfformiad: Parties / Committees consulted prior to People Planning and Performance Assurance Committee:	Members of CE&IM&TSC have been asked for any comment on the BJC documents. Any comments received will be relayed to PPPAC.

<b>Effaith: (rhaid cwblhau)</b> <b>Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian:</b> <b>Financial / Service:</b>	Funding sought from Welsh Government
<b>Ansawdd / Gofal Claf:</b> <b>Quality / Patient Care:</b>	Not applicable
<b>Gweithlu:</b> <b>Workforce:</b>	Delivering a sustainable estate to support Clinical Functions
<b>Risg:</b> <b>Risk:</b>	Business Continuity Management
<b>Cyfreithiol:</b> <b>Legal:</b>	Risk of enforcement from external agencies
<b>Enw Da:</b> <b>Reputational:</b>	Not Applicable
<b>Gyfrinachedd:</b> <b>Privacy:</b>	Not Applicable
<b>Cydraddoldeb:</b> <b>Equality:</b>	Not Applicable

# **Hywel Dda University Health Board**

## **Withybush Hospital – Fire Precaution Upgrade Works**

### **Appendices**

# Appendices

1. MWWFRS Enforcement Notice (8 August 2019)
2. HDUHB Response (19 November 2019)
3. MWWFRS Response (29 November 2019)
4. MWWFRS Correspondence (6 December 2019)
5. MWWFRS Correspondence (10 December 2019)
6. MWWFRS Correspondence (7 January 2020)
7. MWWFRS Correspondence (17 February 2020)
8. MWWFRS Correspondence (Extensions to timescales)
9. MWWFRS Correspondence (12 January 2021)
10. MWWFRS Correspondence (19 March 2021)
11. HDUHB Fire Safety Action Plan
12. Cost Report
13. Programme
14. Risk Register
15. Risk Potential Assessment
16. Integrated Impact Assessment

## Appendix 1

The Chief Executive  
Corporate Offices  
Hywel Dda Health Board  
Hafan Derwen  
Ystwyth Building  
Jobs Well Road  
Carmarthen  
SA31 3BB

Gofynner am/  
Please ask for: Watch Manager K B Jenkins

Ext No: 3350

E-bost/E-mail: K.Jenkins@mawwfire.gov.uk

Fy Nghyf/My Ref: BFS/KBJ/SJM/00114719

Dyddiad/Date: 08 August 2019



Gwasanaeth Tân ac Achub  
Canolbarth a Gorllewin Cymru

Mid and West Wales  
Fire and Rescue Service

Prif Swyddog Tân  
Chief Fire Officer  
Chris Davies QFSM MBA

Y Pencadlys,  
Heol Llwyn Pisgwydd,  
Caerfyrddin,  
Sir Gâr,  
SA31 1SP  
post@tancgc.gov.uk

Headquarters,  
Lime Grove Avenue,  
Carmarthen,  
Carmarthenshire,  
SA31 1SP  
mail@mawwfire.gov.uk

Facs | Fax:

01267 220562

Ffôn | Tel:

0370 60 60 699

HOFFI DILYN RHANNU | Ein Negeseuon  
Diogelwch  
Our Safety  
Messages  
LIKE FOLLOW SHARE

Rydym yn croesawu gohebiaeth yn  
y Gymraeg a'r Saesneg - byddwn yn  
ymateb yn gyfartal i'r ddau ac yn ateb yn  
eich dewis iaith heb oedi.

Rydym yn croesawu galwadau yn y  
Gymraeg a'r Saesneg.

We welcome correspondence in Welsh  
and English - we will respond equally to  
both and will reply in your language of  
choice without delay.

We welcome calls in Welsh and English.



www.tancgc.gov.uk  
www.mawwfire.gov.uk

## URGENT – ACTION REQUIRED

Dear Sir (*as Responsible Person or Duty Holder*),

### Enforcement Notice

#### The Regulatory Reform (Fire Safety) Order 2005: Article 30

**Premises: HWYEL DDA HEALTH BOARD, WITHYBUSH GENERAL HOSPITAL,  
WITHYBUSH, FISHGUARD ROAD, HAVERFORDWEST, SA61 2PZ**

An authorised inspector visited your premises on 30 July 2019 and evaluated the fire safety provided. The Mid & West Wales Fire and Rescue Authority is of the opinion that you have failed to comply with a provision / provisions of the Regulatory Reform (Fire Safety) Order 2005 because people were unsafe in case of fire. The schedule to this Notice further explains the provision(s), with which you have not complied.

The serving of this Notice dated **08 August 2019** and numbered **EN/262/06** is necessary to ensure that you adequately protect people in case of fire. This authority has to make sure that you provide safety. The attached schedule sets out what you must do.

### Timescale for Completion

You are required to take steps to remedy the matters in the schedule by **30 November 2019**. My officer will contact you prior to this date to arrange a further visit. You may apply for an extension to the period of time within which you need to remedy the failure(s). The authority will grant / deny additional time according to the efforts you have made. If you require additional time, please contact my officer at your earliest opportunity.



## **Penalty for Non-compliance**

If you do not comply with this Notice, you will have committed an offence and this authority will consider a prosecution against you. A prosecution could lead to you being liable to a fine, imprisonment or both, subject to the Courts.

## **Route to Appeal**

You can legally appeal this Notice. To do so, you must appeal 'by way of complaint for an order to the Clerk to the Magistrates' Court in the area in which the premises are situated', within 21 days from the day on which this notice was served.

The bringing of an appeal has the effect of suspending the operation of this Enforcement Notice until the appeal is finally disposed of or (if the appeal is withdrawn), until the withdrawal of the appeal.

You can clarify or challenge what you need to do. If you have any feedback you wish to share, please access the Complaints and Compliments section found on our website:

<http://www.mawwfire.gov.uk/English/Contacts/Pages/Complaints-and-Compliments.aspx>

## **Fire Safety Management**

### **ARTICLE 8 – GENERAL FIRE PRECAUTIONS**

“The responsible person must – take such general precautions as will ensure, so far as is reasonably practical, the safety of any of his employees or relevant persons”.

### **ARTICLE 14 – MEANS OF ESCAPE**

“Where necessary to safeguard the safety of relevant persons in case of fire the responsible person must ensure that escape routes to emergency exits, and exits are kept clear at all times and where required, to be adequately illuminated by emergency lighting.”

You should record:

- The significant findings of your fire risk assessment (i.e. what you have done and what you will do to ensure the safety of people in case of fire);
- Any people identified as being especially at risk; and
- The arrangements you have in place to plan, organise, control, monitor and review the fire safety measures you have in place.

You should review your fire risk assessment regularly especially if:

- i. There is reason to suspect that people are not safe in case of fire, or
- ii. There has been a significant change to the preventive and protective measures you have taken in case of fire.

Where in consequence of any such review, changes to your safety measures are required; you should make those changes.

To stop your fire safety falling below an acceptable standard again, you should put in place a system of planning, organising, controlling, monitoring and reviewing the performance of each of the fire safety

measures you have in place.

You should have measures in place to tackle small fires and have an appropriate number of trained people available to implement those measures.

You should ensure that fire safety equipment and systems are properly tested and maintained so that they will work when needed (Emergency Lighting System).

You should make a record of the testing and maintenance done to any of your safety systems.

You must tell any employees if you have identified them as being especially at risk in case of fire and what you have done to mitigate that risk in order to keep them safe.

You should tell anyone working in your premises (who are employed by another party) of any fire risk to them and what you have done to keep them safe, including the people you have nominated to help in an emergency.

- You should record the fire safety information and training you give to employees and managers.

Purchasing or installing fire safety equipment that complies with an appropriate standard would normally satisfy the requirements. The Fire Risk Assessment Guides contain references to, and details of relevant standards.

### **Alternative Solutions**

If you prefer to use a different solution to bring about safety from fire please contact my officer. If your solution is agreed, this Notice will be withdrawn, and another Notice served in its stead. An alternative approach might enable you to apply an equally appropriate safety solution to better meet your needs. Any alternative you propose must meet the 'outcome(s)' stated in the schedule.

Yours faithfully



Watch Manager K B Jenkins  
Authorised Fire Safety Inspecting Officer  
On behalf of the Mid and West Wales Fire and Rescue Authority

cc Mr Steve Moore, Corporate Offices, Hywel Dda Health Board, Hafan Derwen, Ystwyth Building,  
Jobs Well Road, Carmarthen, SA31 3BB  
[Steve.moore@wales.nhs.uk](mailto:Steve.moore@wales.nhs.uk)

Health Inspectorate Wales, Rhydycar Business Park, Merthyr Tydfil CF48 1UZ  
[HIW@gov.wales](mailto:HIW@gov.wales)

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Gareth Lloyd BSc (Hons) Fi Fire E, Head of Fire Safety Management, Estates Department, Prince Philip Hospital, Bryngwyn Mawr, Llanelli, SA14 8QF

Anthony Pitcher, Senior Fire Safety Advisor, NHS Wales Shared Services Partnership, Specialist Estates Services, 3<sup>rd</sup> Floor, Companies House, Crown Way, Cardiff, CF14 3UB

## Important Information – schedule referred to in Enforcement Notice

Notes to this schedule:

The government guidance most suitable to your premises is "**Guide to Risk Assessment in Healthcare Premises**" ISBN-13: 978 1 85112 824 2 which can be found at <http://www.cfoa.org.uk/19512>

Before you make certain changes to the premises, you may have to apply for approval from statutory bodies and/or others having interest in them. If you have doubt about the need for approval, you should ask the relevant body. For example, you may have to apply for approval from a Building Control Body <http://www.legislation.gov.uk/uksi/2010/2214/regulation/3/made>. You might also need to apply for the property owners' permission [http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet\\_EN.pdf](http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet_EN.pdf) among others.

### The Schedule Contains 9 Items

Item number 1 Obstructed Escape Route	
Outcome	This work is necessary to provide sufficient escape routes (corridors, stairs and doors) for people.
Required Action	Ensure that everyone can evacuate quickly and safely by removing combustibles and electrical equipment / wheeled bins from escape routes throughout all floors. This is to include any photocopiers and broken beds on the escape route.
Reason	The escape routes on all floors had many combustible materials stored in them. These items would delay or prevent people escaping quickly and safely from fire.  This is contrary to Articles 8(1), 14, 19(1) and 21(2).

Item number 2 Compartmentation	
Outcome	This work is necessary to reduce the risk of the spread of fire.
Required Action	Carry out a full survey of the hospital to identify areas where compartmentation is incomplete. Fire resisting structures are to continue to slab/upper floor/roof level and pass through any false ceiling provided.  Reinstate the fire resistance in the following locations and any other areas identified in the survey:  i. Laundry Room in basement area ii. Compartment doors in basement area corridor iii. Compartment floor in server room in basement area iv. External mortuary parapet
Reason	It was noted during the inspection where false ceiling tiles in some areas were missing there was a lack of compartmentation above the tiles. Compartment walls

	<p>were not providing sufficient protection in case of fire and would affect people before they could escape.</p> <p>This is contrary to Articles 8(1) and 14(2) (b)</p>
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<b>Item number 3 Fire Resisting Doors</b>	
Outcome	This work is necessary to make sure that escape routes (corridors, stairs and doors) can be safely used whenever they are needed.
Required Action	<p>Ensure that all fire-resisting door-sets can resist fire and smoke for 30 minutes. All defective fire doors need to be upgraded. This is to include:</p> <ul style="list-style-type: none"> <li>• Corridor doors in Ward 10</li> <li>• A &amp; E store rooms</li> </ul> <p>The term 'door-set' refers to the complete element as used in practice:</p> <ul style="list-style-type: none"> <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>
Reason	<p>Doors were not capable of preventing the spread of fire for long enough to enable people to escape because some of the fire doors were not providing a minimum standard of fire resistance. Some did not have intumescent seals or smoke sealing devices fitted to these doors.</p> <p>This is contrary to Articles 8(1) and 14(2)(b).</p>

<b>Item number 4 Fire Exit Door Difficult to Open</b>	
Outcome	This work is necessary to make sure that escape routes (corridors, stairs and doors) can be safely used whenever they are needed.
Required Action	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.
Reason	<p>The fire escape door in the basement area next to the HSDU Department was not readily and immediately available as a fire exit because it was a roller shutter door. This means that people trying to use this escape door during an evacuation, might be trapped in the building.</p> <p>This is contrary to Articles 8(1) and 14(2)(f)</p>

Item number 5 Sliding Doors on Escape Route	
Outcome	This work is necessary to make sure that escape routes (corridors, stairs and doors) can be safely used whenever they are needed.
Required Action	<p>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.</p> <ul style="list-style-type: none"> <li>• Next to canteen corridor area in basement</li> </ul>
Reason	<p>The automatic sliding doors do not default to the open position in the event of power failure or on operation of the fire alarm system. This means that people may not be able to evacuate through these doors to escape a fire and may become trapped in the building.</p> <p>This is contrary to Articles 8(1) and 14(2)(b) and (e).</p>

Item number 6 Inner Room	
Outcome	This work is necessary to provide sufficient escape routes (corridors, stairs and doors) for people.
Required Action	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.
Reason	<p>The only way out from the HSDU inner room is through another room. People in this location could be trapped by a fire in the room leading to it.</p> <p>This is contrary to Articles 8(1), 13(1)(a), 14(2)(b), 15(1)(a), and 15(2)(a) and (b).</p>

Item number 7 Maintenance	
Outcome	This work is necessary to make sure that the Emergency Lighting systems are adequately tested and maintained in accordance with British Standard 5266 Part 1.
Required Action	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.
Reason	<p>The Emergency Lighting system was not properly tested and maintained. This means that it could fail without warning or at the moment it is needed most, and that people would be at risk in case of fire.</p> <p>This is contrary to Articles 8(1), 14(2)(h) and 17(1)</p>

<b>Item number 8 Fire Damper Systems- Maintenance</b>	
Outcome	There is no evidence that the testing regime for fire damper systems throughout the hospital is being adhered to. These systems need to be tested in accordance with the British Standard Legislation British Standard 5588-9 Codes of Practice- Fire Precautions in the Design and Construction and Use of Buildings- 9 Code of Practice for Ventilation.
Required Action	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.
Reason	<p>There is no evidence that the fire dampers throughout the hospital are properly tested and maintained.</p> <p>This means that they could fail without warning or at the moment they are needed most, and that people would be at risk in case of fire.</p> <p>This is contrary to Articles 8(1) and 17(1).</p>

<b>Item number 9 Dry Riser Systems- Maintenance</b>	
Outcome	There is no evidence that the testing regime for fire dry riser systems throughout hospital was being adhered to. These systems need to be tested in accordance with British Standard 9990-2015 Code of Practice- Design Provisions, Installation and Maintenance Guidance for Dry Risers and Foam Inlets.
Required Action	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.
Reason	<p>The fire dry riser systems throughout hospital are not properly tested and maintained. At present they are out of compliance and need to be pressure tested on an annual basis.</p> <p>This means that they could fail without warning or at the moment they are needed most, and that people would be at risk in case of fire.</p> <p>This is contrary to Articles 8(1) and 17(1).</p>

## Appendix 2





Ein cyf/Our ref: CEO.1310  
Gofynnwch am/Please ask for: Katie Jenner  
Rhif Ffôn /Telephone: 01267 239730  
Dyddiad/Date: 19 November 2019

Swyddfeydd Corfforaethol, Adeilad Ystwyth  
Hafan Derwen, Parc Dewi Sant, Heol Ffynnon Job  
Caerfyrddin, Sir Gaerfyrddin, SA31 3BB

Corporate Offices, Ystwyth Building  
Hafan Derwen, St Davids Park, Job's Well Road,  
Carmarthen, Carmarthenshire, SA31 3BB

Chris Davies QFSM MBA  
Chief Fire Officer  
Mid and West Wales Fire and Rescue Service  
Lime Grove Avenue  
Carmarthen  
Carms SA31 1SP

Dear Chris

**Enforcement Notice: The Regulatory Reform (Fire Safety) Order 2005: Article 30  
Withybush General Hospital, Haverfordwest SA61 2PZ**

Further to the above notice dated 8 August 2019, requiring actions to be taken on Fire Safety in our Estate by 30 November 2019, the Health Board has acted at pace to implement a range of important Fire Safety improvements required as part of this notice.

We have previously set these out to you in formal Action Plans confirming all improvements that will be made by the completion date of the notice; 30 November 2019. I am pleased to confirm that all these works are on programme and are being monitored carefully as part of our fortnightly Fire Enforcement Control Group.

As part of our regular briefings to you, you will also be aware that we have identified specific complex areas of fire improvements, which will not be possible to complete by 30 November 2019. These relate to wide ranging Fire Compartmentation and Fire Damper remedial works. My officers have discussed this aspect with you at our meetings, where we were able to explain more fully the complexity of this work and why additional time will be needed.

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Swyddfeydd Corfforaethol, Adeilad Ystwyth,  
Hafan Derwen, Parc Dewi Sant, Heol Ffynnon Job,  
Caerfyrddin, Sir Gaerfyrddin, SA31 3BB

Corporate Offices, Ystwyth Building,  
Hafan Derwen, St Davids Park, Job's Well Road,  
Carmarthen, Carmarthenshire, SA31 3BB

Cadeirydd /Chair  
**Miss Maria Battle**

Prif Weithredwr/Chief Executive  
**Mr Steve Moore**

Bwrdd Iechyd Prifysgol Hywel Dda yw enw gweithredol Bwrdd Iechyd Lleol Prifysgol Hywel Dda  
Hywel Dda University Health Board is the operational name of Hywel Dda University Local Health Board

Mae Bwrdd Iechyd Prifysgol Hywel Dda yn amgylchedd di-fwg Hywel Dda University Health Board operates a smoke free environment

At our most recent meeting, you noted that the priority for this future work would be the delivery of full Fire Compartmentation work to all escape routes within Withybush General Hospital. Following this, you would be looking to improve Fire Safety within specific wards and departments. An initial assessment of this work indicates that we will require substantial Capital support from Welsh Government, and an appointment of an extensive supply chain of key specialist contractors and design teams to deliver this work. We will be progressing this in discussion with Welsh Government Capital Estates advisors. In consideration of timescales, I would expect that the initial Business Case and Market Testing of the priority work you have identified, to be circa eight months. This will then establish a formal programme of delivery for the multiple phases necessary to deliver this priority work. In proceeding in this way, the Health Board will be in a position to fully brief the Fire Service on the delivery programmes for the phased implementation of all priority work. As this work progresses, we will ensure you are continually updated on progress.

Given the upfront procurement requirements, our initial application will be for a 12 month extension from the 30<sup>th</sup> November 2019, which will enable us to complete the procurement element of the work and commence the initial phases of scheme delivery.

At this point, we will be able to engage fully with you, and where necessary, agree future extensions to the time lines based on agreed improvement work programmes. As part of these discussions, it would be helpful to understand how we should approach the remaining Fire Compartmentation works beyond the priority identified.

We also appreciate that as a Health Board we need to continue to make improvements whilst procurement and design work is progressing. As you will be aware, we are investing heavily in our Fire Door System and this will continue as part of our agreed infrastructure plans to the end of March 2020. In addition, we will be identifying significant capital sums from our own Discretionary Capital Programme to continue with the fire stopping work in the new financial year whilst we are developing the design and procurement of future phases of delivery.

It would also be helpful for us to meet with David Hancock, your Head of Business Fire Safety. We were hoping to have this meeting before the end of the month, but due to his diary commitments I understand that this will now be towards the middle of December. We will be very happy to meet at your earliest convenience if you need to discuss this further

I would appreciate if noting all of the above, you would consider our request for a 12 month initial extension from the 30<sup>th</sup> November 2019.

I look forward to hearing from you.

With best wishes  
Yours sincerely



**Steve Moore**  
**Chief Executive**

## Appendix 3

The Chief Executive  
Corporate Offices  
Hywel Dda Health Board  
Hafan Derwen  
Ystwyth Building  
Jobs Well Road  
Carmarthen  
SA31 3BB

Gofynner am/  
Please ask for:

Group Manager D Hancock

Ext No:

5540

E-bost/E-mail:

d.hancock@mawwfire.gov.uk

Fy Nghyf/My Ref:

DTH/00114719

Dyddiad/Date:

29 November 2019



Gwasanaeth Tân ac Achub  
Canolbarth a Gorllewin Cymru

Mid and West Wales  
Fire and Rescue Service

## URGENT – ACTION REQUIRED

Dear Sir(as Responsible Person),

### Enforcement Notice

The Regulatory Reform (Fire Safety) Order 2005: Article 30

Premises: **HYWEL DDA HEALTH BOARD, WITHYBUSH GENERAL HOSPITAL,  
WITHYBUSH, FISHGUARD ROAD, HAVERFORDWEST, SA61 2PZ**

Thank you for contacting this authority to discuss the additional time you require to comply with the enforcement notice dated 8<sup>th</sup> August 2019 and numbered EN/262/06. The Fire and Rescue Authority has considered your application for an extension of time to comply with the requirements of the notice and will grant you more time.

The enforcement notice dated 8<sup>th</sup> August 2019 and numbered EN/262/06 remains in force.

### Timescale for Completion

The Fire and Rescue Service do not consider the timescale requested, in combination with the proposed works, to be acceptable for the priority delivery of the Fire Stopping and Compartmentation work required.

The Fire and Rescue Service is prepared to allow an additional 2 months, to the previously given deadline, for the provision of a revised proposal to be put to the Service for consideration.

You may apply for a further extension to the period of time within which you need to remedy the failure(s). The authority will grant or deny further time to comply with the requirements, according to the further efforts you make.

Prif Swyddog Tân  
Chief Fire Officer

Chris Davies QFSM MBA

Y Pencadlys,  
Heol Llwyn Pisgwydd,  
Caerfyrddin,  
Sir Gâr,  
SA31 1SP  
post@tancgc.gov.uk

Headquarters,  
Lime Grove Avenue,  
Carmarthen,  
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SA31 1SP  
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Facs | Fax:

01267 220562

Ffôn | Tel:

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Diogelwch  
Our Safety  
Messages

Rydym yn croesawu gohebiaeth yn  
y Gymraeg a'r Saesneg - byddwn yn  
ymateb yn gyfartal i'r ddau ac yn ateb yn  
eich dewis iaith heb oedi.

Rydym yn croesawu galwadau yn y  
Gymraeg a'r Saesneg.

We welcome correspondence in Welsh  
and English - we will respond equally to  
both and will reply in your language of  
choice without delay.

We welcome calls in Welsh and English.



www.tancgc.gov.uk  
www.mawwfire.gov.uk

As you are aware a meeting is scheduled for the 10<sup>th</sup> December 2019, when this matter can be discussed further.

### **Penalty for Non-compliance**

If you do not comply with the requirements of the Notice within the period stated above, you will have committed an offence and this authority will consider a prosecution against you. A prosecution could lead to you being liable to a fine, imprisonment or both, subject to the Courts.

### **Route to Appeal**

There was a right to appeal the original enforcement notice. That right of appeal expires 21 days after the date of the original notice. That period may have passed.

You can clarify or challenge what you need to do. If you have any feedback you wish to share, please access the Complaints and Compliments section found on our website:

<http://www.mawwfire.gov.uk/English/Contacts/Pages/Complaints-and-Compliments.aspx>

### **Alternative Solutions**

Although you had previous opportunity to discuss different solutions (to bring about safety from fire), this option is still available to you. If the risk in case of fire in the premises has changed, or if you wish to provide safety using alternative means, please contact my officer. Any alternative solution you propose must meet the 'outcome(s)' stated in the schedule.

Yours faithfully



Group Manager Dai Hancock  
Head of Business Fire Safety  
On behalf of the Mid and West Wales Fire and Rescue Authority

Cc Mr Steve Moore, Corporate Offices, Hywel Dda Health Board, Hafan  
Derwen, Ystwyth Building, Jobs Well Road, Carmarthen, SA31 3BB  
[Steve.moore@wales.nhs.uk](mailto:Steve.moore@wales.nhs.uk)

Health Inspectorate Wales, Rhydycar Business Park, Merthyr Tydfil  
CF48 1UZ  
[HIW@gov.wales](mailto:HIW@gov.wales)

[Rob.elliott@wales.nhs.uk](mailto:Rob.elliott@wales.nhs.uk)

[Bethan.andrews@wales.nhs.uk](mailto:Bethan.andrews@wales.nhs.uk)

[Janice.cole-williams@wales.nhs.uk](mailto:Janice.cole-williams@wales.nhs.uk)

Gareth Lloyd BSc (Hons) FiFireE, Head of Fire Safety Management, Estates Department, Prince Philip Hospital, Bryngwyn Mawr, Llanelli, SA14 8QF

Anthony Pitcher, Senior Fire Safety Advisor, NHS Wales Shared Services Partnership, Specialist Estates Services, 3<sup>rd</sup> Floor, Companies House, Crown Way, Cardiff, CF14 3UB

## Appendix 4

The Chief Executive,  
Corporate offices  
Hywel Dda Health Board  
Hafan Derwen  
Ystwyth Building  
Jobs well Road  
Carmarthen,  
SA31 38B

Gofynner am/  
Please ask for: Watch Manager K B Jenkins

Ext No: 3350

E-bost/E-mail: K.Jenkins@mawwfire.gov.uk

Fy Nghyf/My Ref: ED/KJ/00113573

Dyddiad/Date: 06 December 2019



Gwasanaeth Tân ac Achub  
Canolbarth a Gorllewin Cymru

Mid and West Wales  
Fire and Rescue Service

Prif Swyddog Tân  
Chief Fire Officer  
Chris Davies QFSM MBA

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Our Safety  
Messages

Rydym yn croesawu gohebiaeth yn  
y Gymraeg a'r Saesneg - byddwn yn  
ymateb yn gyfartal i'r ddau ac yn ateb yn  
eich dewis iaith heb oedl.

Rydym yn croesawu galwadau yn y  
Gymraeg a'r Saesneg.

We welcome correspondence in Welsh  
and English - we will respond equally to  
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We welcome calls in Welsh and English.



www.tancgc.gov.uk  
www.mawwfire.gov.uk

## URGENT – ACTION REQUIRED

Dear Sir (as Responsible Person or Duty Holder),

### Enforcement Notice

#### The Regulatory Reform (Fire Safety) Order 2005: Article 30

Premises: **HYWEL DDA HEALTH BOARD, ST CARADOGS, BRO CERWYN, WITHYBUSH,  
WITHYBUSH ROAD, HAVERFORDWEST, SA612PZ**

An authorised inspector visited your premises on **2<sup>nd</sup> December 2019** following a fire on the **1<sup>st</sup> December 2019** and evaluated the fire safety provided. The Mid & West Wales Fire and Rescue Authority is of the opinion that you have failed to comply with a provision / provisions of the Regulatory Reform (Fire Safety) Order 2005 because people were unsafe in case of fire. The schedule to this Notice further explains the provision(s), with which you have not complied.

The serving of this Notice dated **6<sup>th</sup> December 2019** and numbered **EN/262/08** is necessary to ensure that you adequately protect people in case of fire. This authority has to make sure that you provide safety. The attached schedule sets out what you must do.

### Timescale for Completion

You are required to take steps to remedy the matters in the schedule by **4<sup>th</sup> March 2020**. My officer will contact you prior to this date to arrange a further visit. You may apply for an extension to the period of time within which you need to remedy the failure(s). The authority will grant / deny additional time according to the efforts you have made. If you require additional time, please contact my officer at your earliest opportunity.



### Penalty for Non-compliance

If you do not comply with this Notice, you will have committed an offence and this authority will consider a prosecution against you. A prosecution could lead to you being liable to a fine, imprisonment or both, subject to the Courts.

### Route to Appeal

You can legally appeal this Notice. To do so, you must appeal 'by way of complaint for an order to the Clerk to the Magistrates' Court in the area in which the premises are situated', within 21 days from the day on which this notice was served.

The bringing of an appeal has the effect of suspending the operation of this Enforcement Notice until the appeal is finally disposed of or (if the appeal is withdrawn), until the withdrawal of the appeal.

You can clarify or challenge what you need to do. If you have any feedback you wish to share, please access the Complaints and Compliments section found on our website:

<http://www.mawwfire.gov.uk/English/Contacts/Pages/Complaints-and-Compliments.aspx>

### Alternative Solutions

If you prefer to use a different solution to bring about safety from fire please contact my officer. If your solution is agreed, this Notice will be withdrawn, and another Notice served in its stead. An alternative approach might enable you to apply an equally appropriate safety solution to better meet your needs. Any alternative you propose must meet the 'outcome(s)' stated in the schedule.

Yours sincerely,



Watch Manager K B Jenkins  
Authorised Fire Safety Inspecting Officer  
On behalf of the Mid and West Wales Fire and Rescue Authority

Cc:

Mr Steve Moore, Corporate Offices, Hywel Dda Health Board, Hafan Derwen, Ystwyth Building, Jobs Well Road, Carmarthen, SA313BB [Steve.moore@wales.nhs.uk](mailto:Steve.moore@wales.nhs.uk)

Health Inspectorate Wales, Rhydycar Business Park, Merthyr Tydfil CF48 IUZ [HIW@gov.wales](mailto:HIW@gov.wales)

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[Ray.claridge@wales.nhs.uk](mailto:Ray.claridge@wales.nhs.uk)

Gareth Lloyd BSc (Hons) Fi Fire E, Head of Fire Safety Management, Estates Department, Prince Philip Hospital, Bryngwyn Mawr, Llanelli, SA14 8QF

Anthony Pitcher, Senior Fire Safety Advisor, NHS Wales Shared Services Partnership, Specialist Estates Services, 3<sup>rd</sup> Floor, Companies House, Crown Way, Cardiff, CF14 3UB

### Important Information – schedule referred to in Enforcement Notice

Notes to this schedule:

The government guidance most suitable to your premises is "Guide to Risk Assessment in Healthcare Premises" ISBN-13: 978 1 85112 824 2 which can be found at <http://www.cfoa.org.uk/19512>

Before you make certain changes to the premises, you may have to apply for approval from statutory bodies and/or others having interest in them. If you have doubt about the need for approval, you should ask the relevant body.

For example, you may have to apply for approval from a Building Control Body

<http://www.legislation.gov.uk/uksi/2010/2214/regulation/3/made>. You might also need to apply for the property owners' permission

[http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet\\_EN.pdf](http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet_EN.pdf) among others.

### THIS SCHEDULE HAS 7 ITEMS FOR YOUR ATTENTION

ITEM 1	Fire Risk Assessment
OUTCOME	This work is necessary to reduce the risk of fire.
ACTION	All items identified in the <u>significant findings</u> of your Fire Risk Assessment will need to be completed within the identified time scales.
REASON	This work is required to protect people on the premises from the effects of fire.  This is contrary to Article 9

<b>ITEM 2</b>	<b>Fire Resisting Doors</b>
<b>OUTCOME</b>	This work is necessary to make sure that escape routes (corridors, stairs and doors) can be safely used whenever they are needed.
<b>ACTION</b>	<p>Ensure that door-sets that can resist fire and smoke for <u>30 minutes</u> are provided in the following locations:</p> <ul style="list-style-type: none"> <li>• All identified fire resisting doors throughout St Caradogs unit &amp; <u>Waldo Suite</u> (Mental Health Department)</li> </ul> <p>The term 'door-set' refers to the complete element as used in practice:</p> <ul style="list-style-type: none"> <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> <p>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.</p>
<b>REASON</b>	<p>Fire doors were not capable of preventing the spread of fire and heat for long enough to enable people to escape from the premises should a fire occur.</p> <p>There were defective intumescent strips and smoke seals fitted to the fire doors.</p> <p>Some self-closing devices were inserted into the top of the fire doors and were noted to be compromising the integrity of that fire door.</p> <p>Not all bedroom doors were fitted with self-closing devices and were observed to be left in the open position. WHTM Guide 05-02 now requires all patient bedroom doors to be fitted with appropriately designed free-swing self-closing devices.</p> <p>This is contrary to Articles 8 and 14</p>

<b>ITEM 3</b>	<b>Obstructed Escape Route</b>
<b>OUTCOME</b>	This work is necessary to make sure that escape routes (corridors, stairs and doors) can be safely used whenever they are needed.
<b>ACTION</b>	<p>Ensure that the escape route next to staff room G16, which leads into a small yard area, is cleared of all obstructions and remains available for escape purposes at all times.</p> <p>Wheeled bin compound, electrical appliances and combustible items in escape route will need to be removed.</p>
<b>REASON</b>	<p>The effectiveness of the escape route from St Caradogs &amp; Waldo Suite, used by the Mental health department, has been compromised and would delay or prevent people escaping quickly and safely should a fire occur.</p> <p>This is contrary to Articles 8 and 14</p>

<b>ITEM 4</b>	<b>Compartmentation</b>
<b>OUTCOME</b>	This work is necessary to reduce the risk of the spread of fire.
<b>ACTION</b>	<p>Reinstate the fire resistance in the following location(s)</p> <ul style="list-style-type: none"> <li>The ventilation system will need to be inspected and repaired as necessary to ensure all its inherent fire safety devices are functioning in line with its design specifications and manufacturer's instructions</li> </ul>
<b>REASON</b>	<p>It was noted following inspection that the Damper systems throughout all three parts of the hospital i.e. St Caradogs &amp; Waldo Suite, Bro Cerwen, were showing faults on the Main Damper System Panel in the nursing office G04 and were noted to be in a closed position.</p> <p>There doesn't appear to be any inspections/maintenance in accordance with the manufacturer's instructions. And staff did not have any understanding of their significance in the procedures for this system. Therefore, the system is not providing sufficient protection in case of fire and would affect people before they could escape should a fire occur.</p> <p>This is contrary to Article 8</p>

<b>ITEM 5</b>	<b>Compartment</b>
<b>OUTCOME</b>	This work is necessary to reduce the risk of the spread of fire.
<b>ACTION</b>	<p>Reinstate the fire resistance in the following location(s)</p> <ul style="list-style-type: none"> <li>• Fire resisting Glazing removed from main corridor of St Caradogs &amp; replaced with thin plywood boarding.</li> </ul>
<b>REASON</b>	<p>Fire resisting corridors had also been compromised by removing fire resisting glazing &amp; replaced by thin plywood &amp; tiled mosaics. These were not providing sufficient structural protection in case of fire and would affect people before they could escape.</p> <p>This is contrary to Article 8</p>

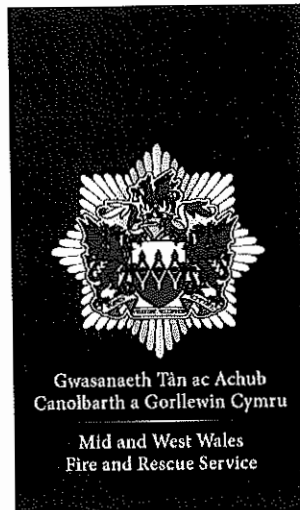
<b>ITEM 6</b>	<b>Escape Routes</b>
<b>OUTCOME</b>	This work is necessary to detect fire and raise the alarm.
<b>ACTION</b>	The fire alarm system will need to be inspected by a qualified fire alarm engineer to ensure the system is fit for purpose and repaired/upgraded as necessary.
<b>REASON</b>	<p>It was noted by staff that the smoke detector heads (Anti-Ligature Fire &amp; Smoke Detector heads) were being removed by patients and that this was a regular occurrence. If more than one detector head is removed in the loop/series, the fire alarm system fails showing a fault on the fire alarm panel.</p> <p>This is contrary to Article 13</p>

<b>ITEM 7</b>	<b>Escape Routes</b>
<b>OUTCOME</b>	This work is necessary to make sure that escape routes (corridors, stairs and doors) can be safely used whenever they are needed.
<b>ACTION</b>	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.
<b>REASON</b>	<p>The Emergency fire escape door in kitchen area of Waldo Suite (Mental Health Department), was difficult to open, because a key pad lock was in this door. This means that people trying to use this fire escape door, during an emergency, might become trapped in the building.</p> <p>This is contrary to Article 14</p>

## Appendix 5

The Chief Executive  
Corporate Offices  
Hywel Dda Health Board  
Hafan Derwen  
Ystwyth Building  
Jobs Well Road  
Carmarthen  
SA31 3BB

*Gofynner am/  
Please ask for:* Watch Manager K B Jenkins  
*Ext No:* 3350  
*E-bost/E-mail:* K.Jenkins@mawwfire.gov.uk  
*Fy Nghyf/My  
Ref:* BFS/KBJ/SJM/00113573  
*Dyddiad/Date:* 10 December 2019



Prif Swyddog Tân  
Chief Fire Officer  
Chris Davies QFSM MBA

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Heol Llwyn Plisgwydd,  
Caerfyrddin,  
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Messages

Rydym yn croesawu gohebiaeth yn  
y Gymraeg a'r Saesneg - byddwn yn  
ymateb yn gyfartal i'r ddau ac yn ateb yn  
eich dewis iaith heb oedi.

Rydym yn croesawu galwadau yn y  
Gymraeg a'r Saesneg.

We welcome correspondence in Welsh  
and English - we will respond equally to  
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choice without delay.

We welcome calls in Welsh and English.



www.tancgc.gov.uk  
www.mawwfire.gov.uk

Dear Sir

## The Regulatory Reform (Fire Safety) Order 2005

### Letter of Fire Safety Matters

**Premises: HYWEL DDA HEALTH BOARD, ST NONS (SECURE EMI UNIT)/BRO CERWYN/ST BRYNACH'S (DAY HOSPITAL)**

I visited your premises on 05 December 2019 and evaluated the fire safety provided. I am of the opinion that some people are at risk in case of fire. You have an ongoing duty to ensure the safety of people. The attached schedule sets out what you need to do.

### Timescale for Completion

You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking. I will visit again and will contact you in approximately **3 months** (from the date of this letter) to arrange my next visit. You should complete the actions and outcomes before that visit.

### Consequence for Non-compliance

If you do not do the work in the schedule before my next visit (or I find that safety provisions have worsened), the authority may serve an enforcement notice on you. An enforcement notice would legally bind you to do the work.

### Route to Appeal

You can clarify or challenge what you need to do. If you have any feedback you wish to share, please access the Complaints and Compliments section found on our website: <http://www.mawwfire.gov.uk/English/Contacts/Pages/Complaints-and-Compliments.aspx>.

### Fire Safety Management

The schedule sets out what you need to do to improve fire safety. Taking this advice will help you to sustain those improvements.

You should appoint competent people to help you put in place appropriate safety measures in case of fire. Information to help you select competent help is available



from <<http://www.cfoa.org.uk/19532>>

You should record:

- The significant findings of your fire risk assessment (i.e. what you have done and what you will do to ensure the safety of people in case of fire);
- Any people identified as being especially at risk; and
- The arrangements you have in place to plan, organise, control, monitor and review the fire safety measures you have in place.

You should review your fire risk assessment regularly especially if:

- i. There is reason to suspect that people are not safe in case of fire, or
- ii. There has been a significant change to the preventive and protective measures you have taken in case of fire.

Where in consequence of any such review, changes to your safety measures are required; you should make those changes.

To stop your fire safety falling below an acceptable standard again, you should put in place a system of planning, organising, controlling, monitoring and reviewing the performance of each of the fire safety measures you have in place.

You should have measures in place to tackle small fires and have an appropriate number of trained people available to implement those measures.

You should make a record of the testing and maintenance done to any of your safety systems.

You must tell any employees if you have identified them as being especially at risk in case of fire and what you have done to mitigate that risk in order to keep them safe.

You should tell anyone working in your premises (who are employed by another party) of any fire risk to them and what you have done to keep them safe, including the people you have nominated to help in an emergency.

- You should record the fire safety information and training you give to employees and managers.

Purchasing or installing fire safety equipment that complies with an appropriate standard would normally satisfy the requirements. The Fire Risk Assessment Guides contain references to, and details of relevant standards.

### **Alternative Solutions**

If you want to use a different solution to bring about safety from fire, please contact me to discuss an action plan. An action plan might enable you to apply an equally appropriate safety solution to better meet your needs. Any alternative solution you propose must meet the 'outcome(s)' stated in the schedule.

Yours faithfully



Watch Manager K B Jenkins  
Authorised Fire Safety Inspecting Officer  
On behalf of the Mid and West Wales Fire and Rescue Authority

cc [Rob.elliott@wales.nhs.uk](mailto:Rob.elliott@wales.nhs.uk)

[Bethan.andrews@wales.nhs.uk](mailto:Bethan.andrews@wales.nhs.uk)

[Janice.cole@wales.nhs.uk](mailto:Janice.cole@wales.nhs.uk)

[Peter-gill@wales.nhs.uk](mailto:Peter-gill@wales.nhs.uk)

[Ray.claridge@wales.nhs.uk](mailto:Ray.claridge@wales.nhs.uk)

## Important Information – schedule referred to in letter

Notes to this schedule:

The government guidance most suitable to your premises is "Guide to Risk Assessment in Healthcare Premises" ISBN-13: 978 1 85112 824 2 which can be found at <http://www.cfoa.org.uk/19512>

Before you make certain changes to the premises, you may have to apply for approval from statutory bodies and/or others having interest in them. If you have doubt about the need for approval, you should ask the relevant body. For example, you may have to apply for approval from a Building Control Body <http://www.legislation.gov.uk/uksi/2010/2214/regulation/3/made>. You might also need to apply for the property owners' permission

[http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet\\_EN.pdf](http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet_EN.pdf) among others.

### ST NONS (SECURE EMI UNIT) AND ST BRYNACH'S (DAY HOSPITAL)

Item number 1 Fire Resisting Doors	
Outcome	This work is necessary to make sure that escape routes (corridors, stairs and doors) can be safely used whenever they are needed.
Required Action	<p>Ensure that door-sets that can resist fire and smoke for <b>30 minutes</b> are provided in the following locations:</p> <ul style="list-style-type: none"><li>Throughout Units, many doors were defective, these were on escape routes.</li></ul> <p>The term 'door-set' refers to the complete element as used in practice:</p> <ul style="list-style-type: none"><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><li>Self-closers to be fitted to all doors and not compromise strips and seals of fire doors.</li></ul>
Reason	<p>Doors were not capable of preventing the spread of fire for long enough to enable people to escape because some of the fire doors were not providing a minimum standard of Fire resistance.</p> <p>This is contrary to Articles 8(1) and 14(2)(b).</p>

Item number 2 Compartment	
Outcome	This work is necessary to reduce the risk of the spread of fire.
Required Action	Reinstate the fire resistance in the following location(s)

	<ul style="list-style-type: none"> <li>Compartmentation issues throughout unit, due to Dampers showing fault on system.</li> </ul>
Reason	It was noted following inspection that the Damper Systems throughout the St Nons Unit, Bro Cerwen, and St Brynach's were showing faults on the Main Damper System Panel. Therefore, these systems were not providing sufficient protection in case of fire and would affect people before they could escape.

Item number 3 Maintenance	
Outcome	This work is necessary to make sure that the Emergency Lighting systems are tested and maintained in accordance with article 17, which states – "Where necessary in order to safeguard the safety of relevant persons the responsible person must ensure that the premises and any facilities, equipment and devices provided.....are subject to a suitable system of maintenance.....in an efficient state..... In efficient working order and in good repair"
Required Action	Ensure that certificates showing testing of the Emergency lighting systems are provided via email at the earliest opportunity.
Reason	The certificates showing testing of the Emergency lighting & fire alarm systems (by a suitably qualified engineer - BS standard accreditation) were not available at the time of the inspection.

### **BRO CERWYN (OFFICES)**

Item number 1 Obstructed Escape Route	
Outcome	This work is necessary to provide sufficient escape routes (corridors, stairs and doors) for people.
Required Action	<p>Ensure that everyone can evacuate quickly and safely by removing the combustibles from the escape route –</p> <ul style="list-style-type: none"> <li>Outside kitchen area and dead-end corridor to offices.</li> </ul>
Reason	<p>The escape route outside the kitchen area corridor, had many combustibles in it. These items would delay or prevent people escaping quickly and safely from fire, should an issue arise with these.</p> <p>This is contrary to Articles 8(1), 14, 19(1) and 21(2).</p>

Item number 2 Compartment	
Outcome	This work is necessary to reduce the risk of the spread of fire.
Required Action	Reinstate the fire resistance in the following locations <ul style="list-style-type: none"> <li>Holes in ceiling areas of offices, water leaking onto electrical appliances and sockets.</li> </ul>
Reason	There is the possibility of a fire starting due to the water leaks in the ceiling areas, of offices, when it rains. The flat roof covering part of the premise will need to be maintained to prevent any issues arising.

## Appendix 6

The Chief Executive  
Corporate Offices  
Hywel Dda Health Board  
Hafan Derwen  
Ystwyth Building  
Jobs Well Road  
Carmarthen  
SA31 3BB

Gofynner am/  
Please ask for:

Watch Manager K Steele

Ext No:

3367

E-bost/E-mail:

k.steele@mawwfire.gov.uk

Fy Nghyf/My  
Ref:

BFS.KS/SJM/00175424  
00175421/00175428/00175426/00  
175425

Dyddiad/Date:

07 January 2020

[Steve.Moore2@wales.nhs.uk](mailto:Steve.Moore2@wales.nhs.uk)

Dear Sir

## The Regulatory Reform (Fire Safety) Order 2005

### Letter of Fire Safety Matters

**Premises: KENSINGTON, ST THOMAS, SPRINGFIELD, SEALYHAM, PEMBROKE COUNTY BLOCKS, HYWEL DDA HEALTH BOARD, WITHYBUSH GENERAL HOSPITAL, WITHYBUSH, FISHGUARD ROAD, HAVERFORDWEST, SA61 2PZ.**

I visited your premises on 17 December 2019 and evaluated the fire safety provided. I am of the opinion that some people are at risk in case of fire. You have an ongoing duty to ensure the safety of people. The attached schedule sets out what you need to do.

### Timescale for Completion

You should complete the work outlined in the schedule as soon as possible, balancing the need for safety against the demands on your business or undertaking. I will visit again and will contact you in approximately **6 months** (from the date of this letter) to arrange my next visit. You should complete the actions and outcomes before that visit.

### Consequence for Non-compliance

If you do not do the work in the schedule before my next visit (or I find that safety provisions have worsened), the authority may serve an enforcement notice on you. An enforcement notice would legally bind you to do the work.

### Route to Appeal

You can clarify or challenge what you need to do. If you have any feedback you wish to share, please access the Complaints and Compliments section found on our website:

<http://www.mawwfire.gov.uk/English/Contacts/Pages/Complaints-and-Compliments.aspx>.

### Fire Safety Management

The schedule sets out what you need to do to improve fire safety. Taking this advice will help you to sustain those improvements.



Gwasanaeth Tân ac Achub  
Canolbarth a Gorllewin Cymru

Mid and West Wales  
Fire and Rescue Service

Prif Swyddog Tân  
Chief Fire Officer

Chris Davies QFSM MBA

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eich dewis iaith heb oedi.

Rydym yn croesawu galwadau yn y  
Gymraeg a'r Saesneg.

We welcome correspondence in Welsh  
and English - we will respond equally to  
both and will reply in your language of  
choice without delay.

We welcome calls in Welsh and English.



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[www.mawwfire.gov.uk](http://www.mawwfire.gov.uk)

You should record:

- The significant findings of your fire risk assessment (i.e. what you have done and what you will do to ensure the safety of people in case of fire);
- Any people identified as being especially at risk; and
- The arrangements you have in place to plan, organise, control, monitor and review the fire safety measures you have in place.

You should review your fire risk assessment regularly especially if:

- i. There is reason to suspect that people are not safe in case of fire, or
- ii. There has been a significant change to the preventive and protective measures you have taken in case of fire.

Where in consequence of any such review, changes to your safety measures are required; you should make those changes.

To stop your fire safety falling below an acceptable standard again, you should put in place a system of planning, organising, controlling, monitoring and reviewing the performance of each of the fire safety measures you have in place.

You should have measures in place to tackle small fires and have an appropriate number of trained people available to implement those measures.

You should ensure that fire safety equipment and systems are properly tested and maintained so that they will work when needed.

You should make a record of the testing and maintenance done to any of your safety systems.

You must tell any employees if you have identified them as being especially at risk in case of fire and what you have done to mitigate that risk in order to keep them safe.

All your employees should be aware of the people you have nominated and trained to tackle small fires and those you have nominated and trained to implement your procedures for evacuation.

All your employees should be given information on the fire safety measures you have in place to protect them.

You should tell anyone working in your premises (who are employed by another party) of any fire risk to them and what you have done to keep them safe, including the people you have nominated to help in an emergency.

- You should record the fire safety information and training you give to employees and managers.

### **Alternative Solutions**

If you want to use a different solution to bring about safety from fire, please contact me to discuss an action plan. An action plan might enable you to apply an equally appropriate safety solution to better meet your needs. Any alternative solution you propose must meet the 'outcome(s)' stated in the schedule.



## Further Recommendations

It was noted whilst carrying out the inspection that all portable appliances are not properly tested and maintained (this was apparent within all five blocks).

All Portable Electrical Equipment is to be checked by a suitably qualified person as per the:

The Provision and Use of Work Equipment Regulations 1998

The portable appliances were not properly tested and maintained. This means that any of these appliances fail without warning and that people would be at risk in case of fire.

Yours faithfully



Watch Manager K Steele

Authorised Fire Safety Inspecting Officer

On behalf of the Mid and West Wales Fire and Rescue Authority

cc [ray.claridge@wales.nhs.uk](mailto:ray.claridge@wales.nhs.uk)  
[Rob.Elliott@wales.nhs.uk](mailto:Rob.Elliott@wales.nhs.uk)  
[Gareth.Lloyd10@wales.nhs.uk](mailto:Gareth.Lloyd10@wales.nhs.uk)

## Important Information – schedule referred to in letter

Notes to this schedule:

The government guidance most suitable to your premises is "**Guide to Risk Assessment in Sleeping Accommodation**" ISBN-13: 978 1 85112 817 4 and "**Guide to Risk Assessment in Offices and Shops**" ISBN-13: 978 1 85112 815 0 which can be found at <http://www.cfoa.org.uk/19512>

Before you make certain changes to the premises, you may have to apply for approval from statutory bodies and/or others having interest in them. If you have doubt about the need for approval, you should ask the relevant body. For example, you may have to apply for approval from a Building Control Body <http://www.legislation.gov.uk/ukxi/2010/2214/regulation/3/made>. You might also need to apply for the property owners' permission [http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet\\_EN.pdf](http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet_EN.pdf) among others.

### The Schedule Contains 7 Items

Item number 1 Compartment	
Outcome	This work is necessary to reduce the risk of the spread of fire.
Required Action	<ul style="list-style-type: none"><li>• 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.</li><li>• All Loft hatches are to be fire resisting to a minimum of 30 minutes.</li><li>• 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.</li></ul> <p><b>TIME FOR COMPLETION: 6 months</b></p>
Reason	The fire resistance cannot be confirmed and needs to provide the sufficient protection in case of fire. Without the correct compartmentation fire and smoke could spread unhindered and would affect people before they could escape.

Item number 2 Fire Resisting Corridors	
Outcome	This work is necessary to provide sufficient escape routes (corridors, stairs and doors) for people.
Required Action	<p>Ensure that the means of escape is kept free from fire and smoke for a period of 30 minutes by ensuring that:</p> <ul style="list-style-type: none"><li>• 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.</li></ul>

	<p>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.</p> <ul style="list-style-type: none"> <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> <p><b>TIME FOR COMPLETION: 6 Months</b></p>
Reason	<p>People using the above-mentioned locations may be affected by a fire in one of the adjoining rooms. This means that people may not be able to reach safety before being affected by fire and / or smoke.</p>

Item number 3 Improve Fire Detection System	
Outcome	Change the type of and add to the fire detection system.
Required Action	<ul style="list-style-type: none"> <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. 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</li> </ul>

	<p>(but this should include all blocks if server is on escape route in the same way).</p> <p>The changes should be carried out and commissioned by a competent person.</p> <p><b>TIME FOR COMPLETION: 3 Months</b></p>
Reason	<p>People within the premises may not be able to hear the fire alarm sounding or there may be a delay in the activation of the alarm delaying their escape from fire.</p>

<b>Item number 4 Obstructed Escape Route</b>	
Outcome	<p>This work is necessary to provide sufficient escape routes (corridors, stairs and doors) for people.</p>
Required Action	<p>Ensure that everyone can evacuate quickly and safely by details.</p> <ul style="list-style-type: none"> <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 Kensington, Sealyham)</li> <li>• Notice boards should be placed behind a lockable screen if erected on a means of escape.</li> </ul> <p><b>TIME FOR COMPLETION: 3 Months</b></p>
Reason	<p>The escape route from the office areas (Kensington, Sealyham) within the blocks had as mentioned above items of hazard and combustibility stored within them. This would delay or prevent people escaping quickly and safely from fire.</p>

<b>Item number 5 Escape Lighting</b>	
Outcome	<p>This work is necessary to make sure that escape routes (corridors, stairs and doors) can be safely used whenever they are needed.</p>
Required Action	<p>Ensure that escape lighting on all escape routes in all five locations mentioned above are operating to the standard required and in accordance with BS 5266 the emergency lighting should operate if the local lighting circuit fails. The system should be tested monthly and inspected bi-annually.</p> <p><b>TIME FOR COMPLETION: 3 Months</b></p>
Reason	<p>People within the blocks named above may not be able to find the way out in an emergency because the lighting might not operate as it should.</p>

Item number 6 Establish Emergency Procedures	
Outcome	This work is necessary to help people understand what to do if fire breaks out.
Required Action	<p>Establish procedures to be followed in case of fire and nominate people to put those procedures into effect.</p> <p>Ensure that there are enough competent people to successfully implement an evacuation.</p> <p>Where premises are occupied on a shared basis, effective systems of communication must be established with those responsible for other premises to ensure all relevant persons are provided with suitable and sufficient information in respect of the fire safety measures implemented.</p> <p>All five blocks but namely the Kensington, Sealyham Blocks.</p> <p><b>TIME FOR COMPLETION: 3 Months</b></p>
Reason	There was no evidence of a fire procedure or fire drills. Without these, people may behave in unpredictable ways and can be put at risk. Good procedures will allow everyone to leave safely in case of fire.

Item number 7 Reduce Fire Spread	
Outcome	This work is necessary to reduce the risk of the spread of fire.
Required Action	<p>Upholstered furniture is to comply with British Standard 7176 or the equivalent European Standard.</p> <ul style="list-style-type: none"> <li>• Pembroke county community room.</li> </ul> <p><b>TIME FOR COMPLETION: 3 Months</b></p>
Reason	A fire would grow unhindered in the non-fire-retardant material. People would be exposed to a significant fire.

## Appendix 7

The Chief Executive  
Corporate Offices  
Hywel Dda University Health Board  
Hafan Derwen  
Ystwyth Building  
Jobs Well Road  
Carmarthen  
SA31 3BB

Gofynner am/  
Please ask for: Watch Manager K Steele  
Ext No: 3367  
E-bost/E-mail: k.steele@mawwfire.gov.uk  
Fy Nghyf/My Ref: BFS/KS/SJM/00114719  
Dyddiad/Date: 17 February 2020

Dear Sir (as Responsible Person)

## The Regulatory Reform (Fire Safety) Order 2005

### Withdrawal of Enforcement Notice

**Premises: HYWEL DDA UNIVERSITY HEALTH BOARD, WITHYBUSH GENERAL HOSPITAL, WITHBUSH, FISHGUARD ROAD, HAVERFORDWEST, SA61 2PZ**

Please be advised that the Enforcement Notice, dated 08 August 2019 and numbered **EN / 262 / 06** is withdrawn.

There are however outstanding matters contained within the Enforcement Notice indicated above that still need to be addressed.

To rationalise the correspondence associated with these outstanding matters and to provide clarity on the enforcement expectations in relation them, further Enforcement Notices **KS / 890 / 02, KS / 890 / 03, KS / 890 / 04 dated the 09/02/2020** have been issued.

### Fire Safety Management

You should review the risks to people in case of fire regularly especially if:

- There is reason to suspect that people are not safe in case of fire, or
- There has been a significant change to the preventive and protective measures you have taken in case of fire.

Where, in consequence of a review, changes to your safety measures are required; you should make those changes.

Yours faithfully,



Watch Manager K. Steele  
Authorised Fire Safety Inspecting Officer  
On behalf of the Mid and West Wales Fire and Rescue Authority



Gwasanaeth Tân ac Achub  
Canolbarth a Gorllewin Cymru

Mid and West Wales  
Fire and Rescue Service

Prif Swyddog Tân  
Chief Fire Officer  
Chris Davies QFSM MBA

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Caerfyrddin,  
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0370 60 60 699

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eich dewis iaith heb oedi.

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choice without delay.

We welcome calls in Welsh and English.



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cc Mr Steve Moore, Corporate Offices, Hywel Dda Health Board, Hafan Derwen, Ystwyth Building, Jobs Well Road, Carmarthen, SA31 3BB  
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[HIW@gov.wales](mailto:HIW@gov.wales)

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Anthony Pitcher, Senior Fire Safety Advisor, NHS Wales Shared Services Partnership, Specialist Estates Services, 3<sup>rd</sup> Floor, Companies House, Crown Way, Cardiff, CF14 3UB



The Chief Executive  
Corporate Offices  
Hywel Dda Health Board  
Hafan Derwen  
Ystwyth Building  
Jobs Well Road  
Carmarthen  
SA31 3BB

Gofynner am/  
Please ask for: Watch Manager K Steele  
  
Ext No: 3367  
  
E-bost/E-mail: k.steele@mawwfire.gov.uk  
  
Fy Nghyf/My Ref: BFS/KS/SJM/00114719  
  
Dyddiad/Date: 17 February 2020



Gwasanaeth Tân ac Achub  
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Mid and West Wales  
Fire and Rescue Service

## URGENT – ACTION REQUIRED

Dear Sir (*as Responsible Person or Duty Holder*),

### Enforcement Notice

#### The Regulatory Reform (Fire Safety) Order 2005: Article 30

**Premises: HYWEL DDA UNIVERSITY HEALTH BOARD, WITHYBUSH HOSPITAL,  
WITHYBUSH, FISHGUARD ROAD, HAVERFORDWEST, SA61 2PZ**

An authorised inspector visited your premises on 07 February 2020 and evaluated the fire safety provided. The Mid & West Wales Fire and Rescue Authority is of the opinion that you have failed to comply with a provision / provisions of the Regulatory Reform (Fire Safety) Order 2005 because people were unsafe in case of fire. The schedule to this Notice further explains the provision(s), with which you have not complied.

The serving of this Notice dated **09 February 2020** and numbered **KS/890/03** is necessary to ensure that you adequately protect people in case of fire. This authority has to make sure that you provide safety. The attached schedule sets out what you must do.

### Timescale for Completion

You are required to take steps to remedy the matters in the schedule by **28 August 2021**. My officer will contact you prior to this date to arrange a further visit.

It should be noted that the timescales provided for the completion of the works contained within the schedule, are in alignment with your own projections.

You may apply for an extension to the period of time within which you need to remedy the failure(s). The authority will grant / deny additional time according to

Prif Swyddog Tân  
Chief Fire Officer  
Chris Davies QFSM MBA

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choice without delay.

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the efforts you have made. If you require additional time, please contact my officer at your earliest opportunity.

### **Penalty for Non-compliance**

If you do not comply with this Notice, you will have committed an offence and this authority will consider a prosecution against you. A prosecution could lead to you being liable to a fine, imprisonment or both, subject to the Courts.

### **Route to Appeal**

You can legally appeal this Notice. To do so, you must appeal 'by way of complaint for an order to the Clerk to the Magistrates' Court in the area in which the premises are situated', within 21 days from the day on which this notice was served.

The bringing of an appeal has the effect of suspending the operation of this Enforcement Notice until the appeal is finally disposed of or (if the appeal is withdrawn), until the withdrawal of the appeal.

You can clarify or challenge what you need to do. If you have any feedback you wish to share, please access the Complaints and Compliments section found on our website:

<http://www.mawwfire.gov.uk/English/Contacts/Pages/Complaints-and-Compliments.aspx>

### **Alternative Solutions**

If you prefer to use a different solution to bring about safety from fire, please contact my officer. If your solution is agreed, this Notice will be withdrawn, and another Notice served in its stead. An alternative approach might enable you to apply an equally appropriate safety solution to better meet your needs. Any alternative you propose must meet the 'outcome(s)' stated in the schedule.

Yours faithfully,



Watch Manager K. Steele  
Authorised Fire Safety Inspecting Officer  
On behalf of the Mid and West Wales Fire and Rescue Authority

cc Mr Steve Moore, Corporate Offices, Hywel Dda Health Board, Hafan Derwen, Ystwyth Building,  
Jobs Well Road, Carmarthen, SA31 3BB  
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Gareth Lloyd BSc (Hons) Fi Fire E, Head of Fire Safety Management, Estates Department, Prince Philip Hospital, Bryngwyn Mawr, Llanelli, SA14 8QF

Anthony Pitcher, Senior Fire Safety Advisor, NHS Wales Shared Services Partnership, Specialist Estates Services, 3<sup>rd</sup> Floor, Companies House, Crown Way, Cardiff, CF14 3UB

## Important Information – schedule referred to in Enforcement Notice

Notes to this schedule:

The government guidance most suitable to your premises is "**Guide to Risk Assessment in Healthcare Premises**" ISBN-13: 978 1 85112 824 2 which can be found at <http://www.cfoa.org.uk/19512>

Before you make certain changes to the premises, you may have to apply for approval from statutory bodies and/or others having interest in them. If you have doubt about the need for approval, you should ask the relevant body. For example, you may have to apply for approval from a Building Control Body <http://www.legislation.gov.uk/uksi/2010/2214/regulation/3/made>. You might also need to apply for the property owners' permission [http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet\\_EN.pdf](http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet_EN.pdf) among others.

### This Schedule contains 2 Items

Item Number 1 - Compartmentation – All Horizontal Corridor Escape Routes	
Outcome	This work is necessary to reduce the risk of spread of fire
Required Action	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.
Reason	It has been identified during inspection that there is a lack of or incomplete compartmentation in these areas. Compartmentation was not providing sufficient protection in case of fire and would affect relevant people before they could escape.  This is contrary to Articles 8(1) and 14 (2) (b).
Time for Completion	<b>28 August 2021.</b>

Item Number 2 - Compartmentation – All Vertical Breaches and / or Penetrations	
Outcome	This work is necessary to reduce the risk of spread of fire
Required Action	To undertake whatever works are necessary to ensure that any / all breaches in fire resisting compartmentation that affect the intermediate floors between levels within Withybush Hospital are addressed.  Fire resisting structures are to continue to slab/ upper floor level / roof level and pass through any false ceiling provided.
Reason	It has been identified during inspection that there is a lack of or incomplete compartmentation in these areas. Compartmentation was not providing sufficient protection in case of fire and would affect relevant people before they could escape.  This is contrary to Articles 8(1) and 14 (2) (b).
Time for Completion	<b>28 August 2021.</b>

The Chief Executive  
Corporate Offices  
Hywel Dda Health Board  
Hafan Derwen  
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Jobs Well Road  
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Please ask for: Watch Manager K Steele  
  
Ext No: 3367  
  
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Fy Nghyf/My Ref: BFS/KS/SJM/00114719  
  
Dyddiad/Date: 17 February 2020



Gwasanaeth Tân ac Achub  
Canolbarth a Gorllewin Cymru

Mid and West Wales  
Fire and Rescue Service

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Dear Sir (*as Responsible Person or Duty Holder*),

### Enforcement Notice

#### The Regulatory Reform (Fire Safety) Order 2005: Article 30

**Premises: HYWEL DDA UNIVERSITY HEALTH BOARD, WITHYBUSH HOSPITAL,  
WITHYBUSH, FISHGUARD ROAD, HAVERFORDWEST, SA61 2PZ**

An authorised inspector visited your premises on 07 February 2020 and evaluated the fire safety provided. The Mid & West Wales Fire and Rescue Authority is of the opinion that you have failed to comply with a provision / provisions of the Regulatory Reform (Fire Safety) Order 2005 because people were unsafe in case of fire. The schedule to this Notice further explains the provision(s), with which you have not complied.

The serving of this Notice dated **09 February 2020** and numbered **KS/890/04** is necessary to ensure that you adequately protect people in case of fire. This authority has to make sure that you provide safety. The attached schedule sets out what you must do.

#### Timescale for Completion

You are required to take steps to remedy the matters in the schedule by **30 April 2020**. My officer will contact you prior to this date to arrange a further visit.

It should be noted that the timescales provided for the completion of the works contained within the schedule, are in alignment with your own projections.

You may apply for an extension to the period of time within which you need to remedy the failure(s). The authority will grant / deny additional time according to

the efforts you have made. If you require additional time, please contact my officer at your earliest opportunity.

### **Penalty for Non-compliance**

If you do not comply with this Notice, you will have committed an offence and this authority will consider a prosecution against you. A prosecution could lead to you being liable to a fine, imprisonment or both, subject to the Courts.

### **Route to Appeal**

You can legally appeal this Notice. To do so, you must appeal 'by way of complaint for an order to the Clerk to the Magistrates' Court in the area in which the premises are situated', within 21 days from the day on which this notice was served.

The bringing of an appeal has the effect of suspending the operation of this Enforcement Notice until the appeal is finally disposed of or (if the appeal is withdrawn), until the withdrawal of the appeal.

You can clarify or challenge what you need to do. If you have any feedback you wish to share, please access the Complaints and Compliments section found on our website:

<http://www.mawwfire.gov.uk/English/Contacts/Pages/Complaints-and-Compliments.aspx>

### **Alternative Solutions**

If you prefer to use a different solution to bring about safety from fire, please contact my officer. If your solution is agreed, this Notice will be withdrawn, and another Notice served in its stead. An alternative approach might enable you to apply an equally appropriate safety solution to better meet your needs. Any alternative you propose must meet the 'outcome(s)' stated in the schedule.

Yours faithfully,



Watch Manager K. Steele  
Authorised Fire Safety Inspecting Officer  
On behalf of the Mid and West Wales Fire and Rescue Authority

cc Mr Steve Moore, Corporate Offices, Hywel Dda Health Board, Hafan Derwen, Ystwyth Building,  
Jobs Well Road, Carmarthen, SA31 3BB  
[Steve.moore2@wales.nhs.uk](mailto:Steve.moore2@wales.nhs.uk)

Health Inspectorate Wales, Rhydyar Business Park, Merthyr Tydfil CF48 1UZ  
[HIW@gov.wales](mailto:HIW@gov.wales)

[Rob.elliott@wales.nhs.uk](mailto:Rob.elliott@wales.nhs.uk)

[Bethan.andrews@wales.nhs.uk](mailto:Bethan.andrews@wales.nhs.uk)

[Janice.cole-williams@wales.nhs.uk](mailto:Janice.cole-williams@wales.nhs.uk)

Gareth Lloyd BSc (Hons) Fi Fire E, Head of Fire Safety Management, Estates Department, Prince Philip Hospital, Bryngwyn Mawr, Llanelli, SA14 8QF

Anthony Pitcher, Senior Fire Safety Advisor, NHS Wales Shared Services Partnership, Specialist Estates Services, 3<sup>rd</sup> Floor, Companies House, Crown Way, Cardiff, CF14 3UB

## Important Information – schedule referred to in Enforcement Notice

Notes to this schedule:

The government guidance most suitable to your premises is "**Guide to Risk Assessment in Healthcare Premises**" ISBN-13: 978 1 85112 824 2 which can be found at <http://www.cfoa.org.uk/19512>

Before you make certain changes to the premises, you may have to apply for approval from statutory bodies and/or others having interest in them. If you have doubt about the need for approval, you should ask the relevant body. For example, you may have to apply for approval from a Building Control Body <http://www.legislation.gov.uk/uksi/2010/2214/regulation/3/made>. You might also need to apply for the property owners' permission [http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet\\_EN.pdf](http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet_EN.pdf) among others.

### This Schedule contains 1 Item

Item Number 1 - Compartmentation – All Other Compartmented Areas.	
Outcome	This work is necessary to reduce the risk of spread of fire
Required Action	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.
Reason	It has been identified during inspection that there is a lack of or incomplete compartmentation in these areas. Compartmentation was not providing sufficient protection in case of fire and would affect relevant people before they could escape.  This is contrary to Articles 8(1) and 14 (2) (b).
Time for Completion	<b>30 April 2022.</b>



The Chief Executive  
Corporate Offices  
Hywel Dda Health Board  
Hafan Derwen  
Ystwyth Building  
Jobs Well Road  
Carmarthen  
SA31 3BB

Gofynner am/  
Please ask for: Watch Manager K Steele  
  
Ext No: 3367  
  
E-bost/E-mail: k.steele@mawwfire.gov.uk  
  
Fy Nghyf/My Ref: BFS/KS/SJM/00114719  
  
Dyddiad/Date: 17 February 2020



Gwasanaeth Tân ac Achub  
Canolbarth a Gorllewin Cymru

Mid and West Wales  
Fire and Rescue Service

## URGENT – ACTION REQUIRED

Dear Sir (*as Responsible Person or Duty Holder*),

### Enforcement Notice

#### The Regulatory Reform (Fire Safety) Order 2005: Article 30

**Premises: HYWEL DDA UNIVERSITY HEALTH BOARD, WITHYBUSH HOSPITAL,  
WITHYBUSH, FISHGUARD ROAD, HAVERFORDWEST, SA61 2PZ**

An authorised inspector visited your premises on 07 February 2020 and evaluated the fire safety provided. The Mid & West Wales Fire and Rescue Authority is of the opinion that you have failed to comply with a provision / provisions of the Regulatory Reform (Fire Safety) Order 2005 because people were unsafe in case of fire. The schedule to this Notice further explains the provision(s), with which you have not complied.

The serving of this Notice dated **09 February 2020** and numbered **KS/890/02** is necessary to ensure that you adequately protect people in case of fire. This authority has to make sure that you provide safety. The attached schedule sets out what you must do.

#### Timescale for Completion

You are required to take steps to remedy the matters in the schedule by **30 September 2020**. My officer will contact you prior to this date to arrange a further visit.

It should be noted that the timescales provided for the completion of the works contained within the schedule, are in alignment with your own projections.

You may apply for an extension to the period of time within which you need to remedy the failure(s). The authority will grant / deny additional time according to

Prif Swyddog Tân  
Chief Fire Officer  
Chris Davies QFSM MBA

Y Pencadlys,  
Heol Llwyn Pisgwydd,  
Caerfyrddin,  
Sir Gâr,  
SA31 1SP  
post@tancgc.gov.uk

Headquarters,  
Lime Grove Avenue,  
Carmarthen,  
Carmarthenshire,  
SA31 1SP  
mail@mawwfire.gov.uk

Facs | Fax:

**01267 220562**

Ffôn | Tel:

**0370 60 60 699**

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Diogelwch  
Our Safety  
Messages  
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Rydym yn croesawu gohebiaeth yn  
y Gymraeg a'r Saesneg - byddwn yn  
ymateb yn gyfartal i'r ddau ac yn ateb yn  
eich dewis iaith heb oedi.

Rydym yn croesawu galwadau yn y  
Gymraeg a'r Saesneg.

We welcome correspondence in Welsh  
and English - we will respond equally to  
both and will reply in your language of  
choice without delay.

We welcome calls in Welsh and English.



www.tancgc.gov.uk  
www.mawwfire.gov.uk

the efforts you have made. If you require additional time, please contact my officer at your earliest opportunity.

### **Penalty for Non-compliance**

If you do not comply with this Notice, you will have committed an offence and this authority will consider a prosecution against you. A prosecution could lead to you being liable to a fine, imprisonment or both, subject to the Courts.

### **Route to Appeal**

You can legally appeal this Notice. To do so, you must appeal 'by way of complaint for an order to the Clerk to the Magistrates' Court in the area in which the premises are situated', within 21 days from the day on which this notice was served.

The bringing of an appeal has the effect of suspending the operation of this Enforcement Notice until the appeal is finally disposed of or (if the appeal is withdrawn), until the withdrawal of the appeal.

You can clarify or challenge what you need to do. If you have any feedback you wish to share, please access the Complaints and Compliments section found on our website:

<http://www.mawwfire.gov.uk/English/Contacts/Pages/Complaints-and-Compliments.aspx>

### **Alternative Solutions**

If you prefer to use a different solution to bring about safety from fire, please contact my officer. If your solution is agreed, this Notice will be withdrawn, and another Notice served in its stead. An alternative approach might enable you to apply an equally appropriate safety solution to better meet your needs. Any alternative you propose must meet the 'outcome(s)' stated in the schedule.

Yours faithfully,



Watch Manager K. Steele  
Authorised Fire Safety Inspecting Officer  
On behalf of the Mid and West Wales Fire and Rescue Authority

cc Mr Steve Moore, Corporate Offices, Hywel Dda Health Board, Hafan Derwen, Ystwyth Building,  
Jobs Well Road, Carmarthen, SA31 3BB  
[Steve.moore2@wales.nhs.uk](mailto:Steve.moore2@wales.nhs.uk)

Health Inspectorate Wales, Rhydyar Business Park, Merthyr Tydfil CF48 1UZ  
[HIW@gov.wales](mailto:HIW@gov.wales)

[Rob.elliott@wales.nhs.uk](mailto:Rob.elliott@wales.nhs.uk)

[Bethan.andrews@wales.nhs.uk](mailto:Bethan.andrews@wales.nhs.uk)

[Janice.cole-williams@wales.nhs.uk](mailto:Janice.cole-williams@wales.nhs.uk)

Gareth Lloyd BSc (Hons) Fi Fire E, Head of Fire Safety Management, Estates Department, Prince Philip Hospital, Bryngwyn Mawr, Llanelli, SA14 8QF

Anthony Pitcher, Senior Fire Safety Advisor, NHS Wales Shared Services Partnership, Specialist Estates Services, 3<sup>rd</sup> Floor, Companies House, Crown Way, Cardiff, CF14 3UB

## Important Information – schedule referred to in Enforcement Notice

Notes to this schedule:

The government guidance most suitable to your premises is "**Guide to Risk Assessment in Healthcare Premises**" ISBN-13: 978 1 85112 824 2 which can be found at <http://www.cfoa.org.uk/19512>

Before you make certain changes to the premises, you may have to apply for approval from statutory bodies and/or others having interest in them. If you have doubt about the need for approval, you should ask the relevant body. For example, you may have to apply for approval from a Building Control Body <http://www.legislation.gov.uk/uksi/2010/2214/regulation/3/made>. You might also need to apply for the property owners' permission [http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet\\_EN.pdf](http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet_EN.pdf) among others.

### This Schedule contains 2 Items

Item Number 1 - Compartmentation – All Vertical Escape Routes.	
Outcome	This work is necessary to reduce the risk of spread of fire
Required Action	To undertake whatever works are necessary to ensure that any / all breaches in fire resisting compartmentation that affect the Vertical 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.
Reason	It has been identified during inspection that there is a lack of or incomplete compartmentation in these areas. Compartmentation was not providing sufficient protection in case of fire and would affect relevant people before they could escape.  This is contrary to Articles 8(1) and 14 (2) (b).
Time for Completion	<b>30 September 2020.</b>

Item number 2. Fire Damper Systems - Maintenance	
Outcome	There is no evidence that the testing regime for fire damper systems throughout the hospital is being adhered to. These systems need to be tested in accordance with the British Standard Legislation British Standard 5588-9 Codes of Practice- Fire Precautions in the Design and Construction and Use of Buildings- 9 Code of Practice for Ventilation.
Required Action	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.
Reason	There is no evidence that the fire dampers throughout the hospital are properly tested and maintained. This means that they could fail without warning or at the moment they are needed most, and that people would be at risk in case of fire. This is contrary to Articles 8(1) and 17(1).
Time for Completion	<b>30 September 2020.</b>

## Appendix 8

The Chief Executive  
Corporate Offices  
Hywel Dda Health Board  
Hafan Derwen  
Ystwyth Building  
Jobs Well Road  
Carmarthen  
SA31 3BB

Gofynner am/  
Please ask for: Watch Manager K Steele  
Ext No: 3367  
E-bost/E-mail: k.steele@mawwfire.gov.uk  
Fy Nghyf/My Ref: BFS/KS/SJM/00114719  
Dyddiad/Date: 20 July 2020

## Enforcement Notice

### The Regulatory Reform (Fire Safety) Order 2005: Article 30

Premises: **HYWEL DDA UNIVERSITY HEALTH BOARD, WITHYBUSH HOSPITAL,  
WITHYBUSH, FISHGUARD ROAD, HAVERFORDWEST, SA61 2PZ**

## URGENT – ACTION REQUIRED

Dear Sir (*as Responsible Person or Duty Holder*),

Thank you for contacting this authority to discuss the enforcement notice dated **09 February 2020** and numbered **KS/890/02**, and the difficulties you are experiencing in achieving compliance with the requirements of the enforcement notice due to problems arising from the incidence of COVID-19.

The Fire and Rescue Authority has considered your case in the context of the current extraordinary circumstances and will grant you an extension of time to comply with the requirements of the notice.

The enforcement notice dated **09 February 2020** and numbered **KS/890/02** remains in force.

### Timescale for Completion

You are required to take steps to remedy the matters in the schedule by **30 January 2021**. My inspector will contact you prior to this date to arrange a further visit. You may apply for a further extension to the period of time within which you need to remedy the failure(s). The authority will grant or deny further time to comply with the requirements, according to the further efforts you make. Consideration will again be given to any ongoing factors relating to the incidence of COVID-19 if appropriate.

### Penalty for Non-compliance

If you do not comply with the requirements of the Notice within the period stated above, you will have committed an offence and this authority will consider a prosecution against you. A prosecution could lead to you being liable to a fine, imprisonment or both, subject to the Courts.

FSO 04



Gwasanaeth Tân ac Achub  
Canolbarth a Gorllewin Cymru

Mid and West Wales  
Fire and Rescue Service

Prif Swyddog Tân  
Chief Fire Officer  
Chris Davies QFSM MBA

Y Pencadlys,  
Heol Llwyn Pisgwydd,  
Caerfyrddin,  
Sir Gâr,  
SA31 1SP  
post@tancgc.gov.uk

Headquarters,  
Lime Grove Avenue,  
Carmarthen,  
Carmarthenshire,  
SA31 1SP  
mail@mawwfire.gov.uk

Facs | Fax:

01267 220562

Ffôn | Tel:

0370 60 60 699

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Rydym yn croesawu gohebiaeth yn  
y Gymraeg a'r Saesneg - byddwn yn  
ymateb yn gyfartal i'r ddau ac yn ateb yn  
eich dewis iaith heb oedi.

Rydym yn croesawu galwadau yn y  
Gymraeg a'r Saesneg.

We welcome correspondence in Welsh  
and English - we will respond equally to  
both and will reply in your language of  
choice without delay.

We welcome calls in Welsh and English.



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www.mawwfire.gov.uk

### Route to Appeal

There was a right to appeal the original enforcement notice. That right of appeal expires 21 days after the date of the original notice. That period may have passed.

You can clarify or challenge what you need to do. If you have any feedback you wish to share, please access the Complaints and Compliments section found on our website:

<http://www.mawwfire.gov.uk/English/Contacts/Pages/Complaints-and-Compliments.aspx>

### Alternative Solutions

Although you had previous opportunity to discuss different solutions (to bring about safety from fire), this option is still available to you. If the risk in case of fire in the premises has changed, or if you wish to provide safety using alternative means, please contact my officer. Any alternative solution you propose must meet the 'outcome(s)' stated in the schedule.

Yours faithfully,



Watch Manager K. Steele  
Authorised Fire Safety Inspecting Officer  
On behalf of the Mid and West Wales Fire and Rescue Authority

cc Steve Moore (Chief Executive - Hywel Dda University Health Board) [Steve.moore2@wales.nhs.uk](mailto:Steve.moore2@wales.nhs.uk)

Health Inspectorate Wales [HIW@gov.wales](mailto:HIW@gov.wales)

Rob Elliott (Hywel Dda UHB - Director of Estates, Facilities and Capital Management) [Rob.elliott@wales.nhs.uk](mailto:Rob.elliott@wales.nhs.uk)

Janice Cole-Williams (WGH General Manager) [Janice.cole-williams@wales.nhs.uk](mailto:Janice.cole-williams@wales.nhs.uk)

Bethan Andrews [Bethan.andrews@wales.nhs.uk](mailto:Bethan.andrews@wales.nhs.uk)

Gareth Lloyd (Hywel Dda UHB – Head of Fire Safety Management) [Gareth.Lloyd10@wales.nhs.uk](mailto:Gareth.Lloyd10@wales.nhs.uk)

Daniel Dyer (Hywel Dda UHB - Fire Safety Advisor) [Daniel.Dyer@wales.nhs.uk](mailto:Daniel.Dyer@wales.nhs.uk)

Anthony Pitcher [Anthony.Pitcher@wales.nhs.uk](mailto:Anthony.Pitcher@wales.nhs.uk)

**This Schedule contains 2 Items**

<b>Item Number 1 - Compartmentation – All Vertical Escape Routes.</b>	
Outcome	This work is necessary to reduce the risk of spread of fire
Required Action	<p>To undertake whatever works are necessary to ensure that any / all breaches in fire resisting compartmentation that affect the Vertical Escape Routes within Withybush Hospital are addressed.</p> <p>Fire resisting structures are to continue to slab / upper floor level / roof level and pass through any false ceiling provided.</p>
Reason	<p>It has been identified during inspection that there is a lack of or incomplete compartmentation in these areas. Compartmentation was not providing sufficient protection in case of fire and would affect relevant people before they could escape.</p> <p>This is contrary to Articles 8(1) and 14 (2) (b).</p>
Time for Completion	<b>30 January 2021.</b>

<b>Item number 2. Fire Damper Systems - Maintenance</b>	
Outcome	There is no evidence that the testing regime for fire damper systems throughout the hospital is being adhered to. These systems need to be tested in accordance with the British Standard Legislation British Standard 9999:2017 Fire safety in the design management and use of buildings – Code of practice.
Required Action	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 9999:2017 Appendix W1.
Reason	<p>There is no evidence that the fire dampers throughout the hospital are properly tested and maintained.</p> <p>This means that they could fail without warning or at the moment they are needed most, and that people would be at risk in case of fire.</p> <p>This is contrary to Articles 8(1) and 17(1).</p>
Time for Completion	<b>30 January 2021.</b>



The Chief Executive  
Corporate Offices  
Hywel Dda Health Board  
Hafan Derwen  
Ystwyth Building  
Jobs Well Road  
Carmarthen  
SA31 3BB

Gofynner am/  
Please ask for: Watch Manager K Steele  
  
Ext No: 3367  
  
E-bost/E-mail: k.steele@mawwfire.gov.uk  
  
Fy Nghyf/My Ref: BFS/KS/AMD/00114719  
  
Dyddiad/Date: 05 November 2020



Gwasanaeth Tân ac Achub  
Canolbarth a Gorllewin Cymru

Mid and West Wales  
Fire and Rescue Service

## URGENT – ACTION REQUIRED

Dear Sir/Madam (*as Responsible Person or Duty Holder*),

### Enforcement Notice

#### The Regulatory Reform (Fire Safety) Order 2005: Article 30

**Premises: HYWEL DDA UNIVERSITY HEALTH BOARD, WITHYBUSH HOSPITAL,  
WITHYBUSH, FISHGUARD ROAD, HAVERFORDWEST, SA61 2PZ**

Thank you for contacting this authority to discuss the enforcement notice dated **09 February 2020** and numbered **KS/890/03** and the difficulties you are experiencing in achieving compliance with the requirements of the enforcement notice due to problems arising from the incidence of COVID-19.

The Fire and Rescue Authority has considered your case in the context of the current extraordinary circumstances and will grant you an extension of time to comply with the requirements of the notice.

The enforcement notice dated **09 February 2020** and numbered **KS/890/03** remains in force.

### Timescale for Completion

You are required to take steps to remedy the matters in the schedule by **30 April 2022 as agreed in the programme for Phase 1 Works (presented to us on the 02 October 2020)**. My inspector will contact you prior to this date to arrange a further visit. You may apply for a further extension to the period of time within which you need to remedy the failure(s). The authority will grant or deny further time to comply with the requirements, according to the further efforts you make. Consideration will again be given to any ongoing factors relating to the incidence of COVID-19 if appropriate.

Prif Swyddog Tân  
Chief Fire Officer  
Chris Davies QFSM MBA

Y Pencadlys,  
Heol Llwyn Pisgwydd,  
Caerfyrddin,  
Sir Gâr,  
SA31 1SP  
post@tancgc.gov.uk

Headquarters,  
Lime Grove Avenue,  
Carmarthen,  
Carmarthenshire,  
SA31 1SP  
mail@mawwfire.gov.uk

Facs | Fax:

**01267 220562**

Ffôn | Tel:

**0370 60 60 699**

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ymateb yn gyfartal i'r ddau ac yn ateb yn  
eich dewis iaith heb oedi.

Rydym yn croesawu galwadau yn y  
Gymraeg a'r Saesneg.

We welcome correspondence in Welsh  
and English - we will respond equally to  
both and will reply in your language of  
choice without delay.

We welcome calls in Welsh and English.



**Penalty for Non-compliance**

If you do not comply with this Notice, you will have committed an offence and this authority will consider a prosecution against you. A prosecution could lead to you being liable to a fine, imprisonment or both, subject to the Courts.

**Route to Appeal**

There was a right to appeal the original enforcement notice. That right of appeal expires 21 days after the date of the original notice. That period may have passed.

You can clarify or challenge what you need to do. If you have any feedback you wish to share, please access the Complaints and Compliments section found on our website:

<http://www.mawwfire.gov.uk/English/Contacts/Pages/Complaints-and-Compliments.aspx>

**Alternative Solutions**

If you prefer to use a different solution to bring about safety from fire, please contact my officer. If your solution is agreed, this Notice will be withdrawn, and another Notice served in its stead. An alternative approach might enable you to apply an equally appropriate safety solution to better meet your needs. Any alternative you propose must meet the 'outcome(s)' stated in the schedule.

Yours faithfully,



Watch Manager K Steele  
Authorised Fire Safety Inspecting Officer  
On behalf of the Mid and West Wales Fire and Rescue Authority

CC: [Steve.moore2@wales.nhs.uk](mailto:Steve.moore2@wales.nhs.uk)

[HIW@gov.wales](mailto:HIW@gov.wales)

[Rob.elliott@wales.nhs.uk](mailto:Rob.elliott@wales.nhs.uk)

[Janice.cole-williams@wales.nhs.uk](mailto:Janice.cole-williams@wales.nhs.uk)

[Bethan.andrews@wales.nhs.uk](mailto:Bethan.andrews@wales.nhs.uk)

[Gareth.Lloyd10@wales.nhs.uk](mailto:Gareth.Lloyd10@wales.nhs.uk)

[Daniel.Dyer@wales.nhs.uk](mailto:Daniel.Dyer@wales.nhs.uk)

[Anthony.Pitcher@wales.nhs.uk](mailto:Anthony.Pitcher@wales.nhs.uk)

## Important Information – schedule referred to in Enforcement Notice

Notes to this schedule:

The government guidance most suitable to your premises is "Guide to Risk Assessment in Healthcare Premises" ISBN-13: 978 1 85112 824 2, which can be found at <http://www.cfoa.org.uk/19512>

Before you make certain changes to the premises, you may have to apply for approval from statutory bodies and/or others having interest in them. If you have doubt about the need for approval, you should ask the relevant body. For example, you may have to apply for approval from a Building Control Body <http://www.legislation.gov.uk/uksi/2010/2214/regulation/3/made>. You might also need to apply for the property owners' permission [http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet\\_EN.pdf](http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet_EN.pdf) among others.

Item Number 1 - Compartmentation – All Horizontal Corridor Escape Routes	
Outcome	This work is necessary to reduce the risk of spread of fire
Required Action	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 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.
Reason	It has been identified during inspection that there is a lack of or incomplete compartmentation in these areas. Compartmentation was not providing sufficient protection in case of fire and would affect relevant people before they could escape.  This is contrary to Articles 8(1) and 14 (2) (b).
Time for Completion	<b>30 April 2022.</b>

Item Number 2 - Compartmentation – All Vertical Breaches and / or Penetrations	
Outcome	This work is necessary to reduce the risk of spread of fire
Required Action	To undertake whatever works are necessary to ensure that any/all breaches in fire resisting compartmentation that affect the intermediate floors between levels within Withybush Hospital are addressed 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.
Reason	It has been identified during inspection that there is a lack of or incomplete compartmentation in these areas. Compartmentation was not providing sufficient protection in case of fire and would affect relevant people before they could escape.  This is contrary to Articles 8(1) and 14 (2) (b).
Time for Completion	<b>30 April 2022.</b>

The Chief Executive  
Corporate Offices  
Hywel Dda Health Board  
Hafan Derwen  
Ystwyth Building  
Jobs Well Road  
Carmarthen  
SA31 3BB

Gofynner am/  
Please ask for: Watch Manager K Steele  
  
Ext No: 3367  
  
E-bost/E-mail: k.steele@mawwfire.gov.uk  
  
Fy Nghyf/My Ref: BFS/KS/AMD/00114719  
  
Dyddiad/Date: 05 November 2020



Gwasanaeth Tân ac Achub  
Canolbarth a Gorllewin Cymru

Mid and West Wales  
Fire and Rescue Service

## URGENT – ACTION REQUIRED

Dear Sir/Madam (as Responsible Person or Duty Holder),

### Enforcement Notice

#### The Regulatory Reform (Fire Safety) Order 2005: Article 30

**Premises: HYWEL DDA UNIVERSITY HEALTH BOARD, WITHYBUSH HOSPITAL,  
WITHYBUSH, FISHGUARD ROAD, HAVERFORDWEST, SA61 2PZ**

An authorised inspector visited your premises on 07 February 2020 and evaluated the fire safety provided. The Mid & West Wales Fire and Rescue Authority is of the opinion that you have failed to comply with a provision / provisions of the Regulatory Reform (Fire Safety) Order 2005 because people were unsafe in case of fire. The schedule to this Notice further explains the provision(s), with which you have not complied.

The serving of this Notice dated **09 February 2020** and numbered **KS/890/04** is necessary to ensure that you adequately protect people in case of fire. This authority has to make sure that you provide safety. The attached schedule sets out what you must do.

### Timescale for Completion

You are required to take steps to remedy the matters in the schedule by **30 April 2025 as agreed in the programme for Phase 1 Works (presented to us on the 02 October 2020)**. My officer will contact you prior to this date to arrange a further visit. You may apply for an extension to the period of time within which you need to remedy the failure(s). The authority will grant/deny additional time according to the efforts you have made. If you require additional time, please contact my officer at your earliest opportunity.

### Penalty for Non-compliance

If you do not comply with this Notice, you will have committed an offence and this authority will consider a prosecution against you. A prosecution could lead to you being liable to a fine, imprisonment or both, subject to the Courts.

FSO 04

Prif Swyddog Tân  
Chief Fire Officer  
Chris Davies QFSM MBA

Y Pencadlys,  
Heol Llwyn Pisgwydd,  
Caerfyrddin,  
Sir Gâr,  
SA31 1SP  
post@tancgc.gov.uk

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Lime Grove Avenue,  
Carmarthen,  
Carmarthenshire,  
SA31 1SP  
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Facs | Fax:

**01267 220562**

Ffôn | Tel:

**0370 60 60 699**

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Diogelwch  
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ymateb yn gyfartal i'r ddau ac yn ateb yn  
eich dewis iaith heb oedi.

Rydym yn croesawu galwadau yn y  
Gymraeg a'r Saesneg.

We welcome correspondence in Welsh  
and English - we will respond equally to  
both and will reply in your language of  
choice without delay.

We welcome calls in Welsh and English.



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### **Route to Appeal**

You can legally appeal this Notice. To do so, you must appeal 'by way of complaint for an order to the Clerk to the Magistrates' Court in the area in which the premises are situated', within 21 days from the day on which this notice was served.

The bringing of an appeal has the effect of suspending the operation of this Enforcement Notice until the appeal is finally disposed of or (if the appeal is withdrawn), until the withdrawal of the appeal.

You can clarify or challenge what you need to do. If you have any feedback you wish to share, please access the Complaints and Compliments section found on our website: <https://www.mawwfire.gov.uk/eng/about-us/access-to-information/compliments-comments-and-complaints/>

### **Alternative Solutions**

If you prefer to use a different solution to bring about safety from fire please contact my officer. If your solution is agreed, this Notice will be withdrawn, and another Notice served in its stead. An alternative approach might enable you to apply an equally appropriate safety solution to better meet your needs. Any alternative you propose must meet the 'outcome(s)' stated in the schedule.

Yours faithfully,



Watch Manager K Steele  
Authorised Fire Safety Inspecting Officer  
On behalf of the Mid and West Wales Fire and Rescue Authority

CC: [Steve.moore2@wales.nhs.uk](mailto:Steve.moore2@wales.nhs.uk)

[HIW@gov.wales](mailto:HIW@gov.wales)

[Rob.elliott@wales.nhs.uk](mailto:Rob.elliott@wales.nhs.uk)

[Janice.cole-williams@wales.nhs.uk](mailto:Janice.cole-williams@wales.nhs.uk)

[Bethan.andrews@wales.nhs.uk](mailto:Bethan.andrews@wales.nhs.uk)

[Gareth.Lloyd10@wales.nhs.uk](mailto:Gareth.Lloyd10@wales.nhs.uk)

[Daniel.Dyer@wales.nhs.uk](mailto:Daniel.Dyer@wales.nhs.uk)

[Anthony.Pitcher@wales.nhs.uk](mailto:Anthony.Pitcher@wales.nhs.uk)

**Important Information – schedule referred to in Enforcement Notice**

Notes to this schedule:

The government guidance most suitable to your premises is "**Guide to Risk Assessment in Healthcare Premises**" ISBN-13: 978 1 85112 824 2, which can be found at <http://www.cfoa.org.uk/19512>

Before you make certain changes to the premises, you may have to apply for approval from statutory bodies and/or others having interest in them. If you have doubt about the need for approval, you should ask the relevant body. For example, you may have to apply for approval from a Building Control Body <http://www.legislation.gov.uk/uksi/2010/2214/regulation/3/made>. You might also need to apply for the property owners' permission [http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet\\_EN.pdf](http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet_EN.pdf) among others.

Item Number 1 - Compartmentation – All Other Compartmented Areas. (Agreed Phase 2 Works)	
Outcome	This work is necessary to reduce the risk of spread of fire
Required Action	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, 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.
Reason	It has been identified during inspection that there is a lack of or incomplete compartmentation in these areas. Compartmentation was not providing sufficient protection in case of fire and would affect relevant people before they could escape.  This is contrary to Articles 8(1) and 14 (2) (b).
Time for Completion	<b>30 April 2025.</b>

The Chief Executive  
Corporate Offices  
Hywel Dda Health Board  
Hafan Derwen  
Ystwyth Building  
Jobs Well Road  
Carmarthen  
SA31 3BB

Gofynner am/  
Please ask for: Watch Manager K Steele  
  
Ext No: 3367  
  
E-bost/E-mail: k.steele@mawwfire.gov.uk  
  
Fy Nghyf/My Ref: BFS/KS/SJM/00113573  
  
Dyddiad/Date: 26 August 2020



Gwasanaeth Tân ac Achub  
Canolbarth a Gorllewin Cymru

Mid and West Wales  
Fire and Rescue Service

## URGENT – ACTION REQUIRED

Dear Sir (*as Responsible Person or Duty Holder*),

### Enforcement Notice

#### The Regulatory Reform (Fire Safety) Order 2005: Article 30

**Premises: ST CARADOGS, BRO CERWYN, HYWEL DDA UNIVERSITY HEALTH BOARD,  
FISHGUARD ROAD, HAVERFORDWEST, SA61 2PG**

Thank you for contacting this authority to discuss the enforcement notice dated **02 April 2020** and numbered **KS/890/05**. and the difficulties you are experiencing in achieving compliance with the requirements of the enforcement notice due to problems arising from the incidence of COVID-19.

The Fire and Rescue Authority has considered your case in the context of the current extraordinary circumstances and will grant you an extension of time to comply with the requirements of the notice.

The enforcement notice dated **02 April 2020** and numbered **KS/890/05** remains in force.

### Timescale for Completion

You are required to take steps to remedy the matters in the schedule by **31 December 2021**. My inspector will contact you prior to this date to arrange a further visit. You may apply for a further extension to the period of time within which you need to remedy the failure(s). The authority will grant or deny further time to comply with the requirements, according to the further efforts you make. Consideration will again be given to any ongoing factors relating to the incidence of COVID-19 if appropriate.

Prif Swyddog Tân  
Chief Fire Officer  
Chris Davies QFSM MBA

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Heol Llwyn Pisgwydd,  
Caerfyrddin,  
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eich dewis iaith heb oedi.

Rydym yn croesawu galwadau yn y  
Gymraeg a'r Saesneg.

We welcome correspondence in Welsh  
and English - we will respond equally to  
both and will reply in your language of  
choice without delay.

We welcome calls in Welsh and English.



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### **Penalty for Non-compliance**

If you do not comply with this Notice, you will have committed an offence and this authority will consider a prosecution against you. A prosecution could lead to you being liable to a fine, imprisonment or both, subject to the Courts.

### **Route to Appeal**

You can legally appeal this Notice. To do so, you must appeal 'by way of complaint for an order to the Clerk to the Magistrates' Court in the area in which the premises are situated', within 21 days from the day on which this notice was served.

The bringing of an appeal has the effect of suspending the operation of this Enforcement Notice until the appeal is finally disposed of or (if the appeal is withdrawn), until the withdrawal of the appeal.

You can clarify or challenge what you need to do. If you have any feedback you wish to share, please access the Complaints and Compliments section found on our website:

<http://www.mawwfire.gov.uk/English/Contacts/Pages/Complaints-and-Compliments.aspx>

### **Alternative Solutions**

If you prefer to use a different solution to bring about safety from fire, please contact my officer. If your solution is agreed, this Notice will be withdrawn, and another Notice served in its stead. An alternative approach might enable you to apply an equally appropriate safety solution to better meet your needs. Any alternative you propose must meet the 'outcome(s)' stated in the schedule.

Yours faithfully,



Watch Manager K Steele  
Authorised Fire Safety Inspecting Officer  
On behalf of the Mid and West Wales Fire and Rescue Authority

cc Steve Moore (Chief Executive - Hywel Dda University Health Board) [Steve.moore2@wales.nhs.uk](mailto:Steve.moore2@wales.nhs.uk)

Health Inspectorate Wales, Rhydyar Business Park, Merthyr Tydfil CF48 1UZ  
[HIW@gov.wales](mailto:HIW@gov.wales)

Rob Elliott (Hywel Dda UHB - Director of Estates, Facilities and Capital Management)  
[Rob.elliott@wales.nhs.uk](mailto:Rob.elliott@wales.nhs.uk)

Janice Cole-Williams (WGH General Manager) [Janice.cole-williams@wales.nhs.uk](mailto:Janice.cole-williams@wales.nhs.uk)

Bethan Andrews [Bethan.andrews@wales.nhs.uk](mailto:Bethan.andrews@wales.nhs.uk)

Gareth Lloyd (Hywel Dda UHB – Head of Fire Safety Management) [Gareth.Lloyd10@wales.nhs.uk](mailto:Gareth.Lloyd10@wales.nhs.uk)

Daniel Dyer (Hywel Dda UHB - Fire Safety Advisor) [Daniel.Dyer@wales.nhs.uk](mailto:Daniel.Dyer@wales.nhs.uk)

Anthony Pitcher [Anthony.Pitcher@wales.nhs.uk](mailto:Anthony.Pitcher@wales.nhs.uk)



### The Schedule Contains 3 Items

<b>Item 1</b>	<b>Fire Risk Assessment</b>
<b>Outcome</b>	This work is necessary to reduce the risk of fire.
<b>Action</b>	<p>According to the action plan dated 02 December 2019 V2 there is still a small number of significant findings of your Fire Risk Assessment that need to be completed.</p> <p>These need to be confirmed once completed.</p>
<b>Reason</b>	<p>This work is required to protect people on the premises from the effects if fire.</p> <p>This is in accordance with Article 9.</p>

<b>Item 2</b>	<b>Fire Resisting Doors</b>
<b>Outcome</b>	This work is necessary to make sure that escape routes (corridors, stairs and doors) can be safely used whenever they are needed.
<b>Action</b>	<p>Ensure that door-sets that can resist fire and smoke for 30 minutes are provided in the following locations:</p> <ul style="list-style-type: none"> <li>All identified fire resisting doors throughout St Caradogs Unit and Waldo Suite (Mental Health Department)</li> </ul> <p>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.</p>
<b>Reason</b>	<p>Fire doors were not capable of preventing the spread of fire and heat for long enough to enable people to escape from the premises should a fire occur.</p> <p>There were defective intumescent strips and smoke seals fitted to the fire doors.</p> <p>Some self-closing devices were inserted into the top of the fire doors and were noted to be compromising the integrity of that fire door.</p> <p>Not all bedroom doors were fitted with self-closing devices and were observed to be left in the open position. WHTM Guide 05-02 now requires all patient bedroom doors to be fitted with appropriately designed free-swing self-closing devices.</p> <p>This is contrary to Articles 8 and 14.</p>

<b>Item 3</b>	<b>Compartmentation / Dampers</b>
<b>Outcome</b>	This work is necessary to reduce the risk of the spread of fire.
<b>Action</b>	Reinstate the fire resistance in the following location:

	<ul style="list-style-type: none"> <li>The ventilation system will need to be inspected and repaired as necessary to ensure all its inherent fire safety devices are functioning in line with its design specifications and manufacturer's instructions.</li> </ul> <p>According to the action plan dated 02 December 2019 V2 this is ongoing works to be completed in the timescale of the Enforcement Notice</p>
<b>Reason</b>	<p>It was noted following inspection that the Damper Systems throughout all three parts of the hospital i.e. St Caradogs and Waldo Suite, Bro Cerwyn, were showing faults on the Main Damper System Panel in the nursing office G04 and were noted to be in a closed position.</p> <p>There does not appear to be any inspections/maintenance in accordance with the manufacturer's instructions and staff did not have any understanding of their significance in the procedures for this system. Therefore, the system is not providing sufficient protection in case of fire and would affect people before they could escape should a fire occur.</p> <p>This is contrary to Article 8.</p>

## Appendix 9

The Chief Executive  
Corporate Offices  
Hywel Dda Health Board  
Hafan Derwen  
Ystwyth Building  
Jobs Well Road  
Carmarthen  
SA31 3BB

Gofynner am/  
Please ask for: Watch Manager K Steele  
  
Ext No: 3367  
  
E-bost/E-mail: k.steele@mawwfire.gov.uk  
  
Fy Nghyf/My  
Ref: BFS/KS/SJM/00113573  
  
Dyddiad/Date: 12 January 2021

[Steve.moore@wales.nhs.uk](mailto:Steve.moore@wales.nhs.uk)

Dear Sir

## The Regulatory Reform (Fire Safety) Order 2005

### Letter of Fire Safety Matters

**Premises: BRO CERWYN, ST NONS, ST BRYNACH, ST CARADOGS, FISHGUARD ROAD  
HAVERFORDWEST, SA61 2PG.**

Following my visit to the site on 25 June 2020 and to assist with the linking of the schedule of works at the WGH site. **I have issued this letter to confirm the agreed outcome of the meeting on 06 January 2021. The schedule of works has been aligned with all stages of the document named Fire Precaution Upgrade Works Withybush General Hospital.**

### Timescale for Completion

As mentioned within the WGH Fire Enforcement programme Covid impact document, **Stage 1 / Advanced works** relate to Vertical Escape routes and Priority work at St Caradogs to be completed by end **Jan 2021**.

**Stage 2 / Phase 1 works** relate to all remaining escape routes at WGH and all remaining work at St Caradogs, St Nons to be completed by end **April 2022**.

**Stage 3 / Phase 2 works** relate to all department / ward areas including any sub compartmentation and risk room area. To be completed by end **April 2025**

### Consequence for Non-compliance

If you do not do the work in the schedule before my next visit (or I find that safety provisions have worsened), the authority may serve an enforcement notice on you. An enforcement notice would legally bind you to do the work.

### Route to Appeal

You can clarify or challenge what you need to do. If you have any feedback you wish to share, please access the Complaints and Compliments section found on our website:

<https://www.mawwfire.gov.uk/eng/about-us/access-to-information/compliments-comments-and-complaints/>.



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Mid and West Wales  
Fire and Rescue Service

Prif Swyddog Tân  
Chief Fire Officer  
Chris Davies QFSM MBA

Y Pencadlys,  
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eich dewis iaith heb oedi.

Rydym yn croesawu galwadau yn y  
Gymraeg a'r Saesneg.

We welcome correspondence in Welsh  
and English - we will respond equally to  
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choice without delay.

We welcome calls in Welsh and English.



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[www.mawwfire.gov.uk](http://www.mawwfire.gov.uk)

### Alternative Solutions

If you want to use a different solution to bring about safety from fire, please contact me to discuss an action plan. An action plan might enable you to apply an equally appropriate safety solution to better meet your needs. Any alternative solution you propose must meet the 'outcome(s)' stated in the schedule.

Yours faithfully,



Watch Manager K Steele  
Authorised Fire Safety Inspecting Officer  
On behalf of the Mid and West Wales Fire and Rescue Authority

CC's: Steve Moore (Chief Executive - Hywel Dda University Health Board), [Steve.moore2@wales.nhs.uk](mailto:Steve.moore2@wales.nhs.uk)

Health Inspectorate Wales, Rhydycar Business Park, Merthyr Tydfil CF48 1UZ, [HIW@gov.wales](mailto:HIW@gov.wales)

Rob Elliott (Hywel Dda UHB - Director of Estates, Facilities and Capital Management),  
[Rob.elliott@wales.nhs.uk](mailto:Rob.elliott@wales.nhs.uk)

Janice Cole-Williams (WGH General Manager), [Janice.cole-williams@wales.nhs.uk](mailto:Janice.cole-williams@wales.nhs.uk)

Bethan Andrews, [Bethan.andrews@wales.nhs.uk](mailto:Bethan.andrews@wales.nhs.uk)

Gareth Lloyd (Hywel Dda UHB – Head of Fire Safety Management), [Gareth.Lloyd10@wales.nhs.uk](mailto:Gareth.Lloyd10@wales.nhs.uk)

Daniel Dyer (Hywel Dda UHB - Fire Safety Advisor), [Daniel.Dyer@wales.nhs.uk](mailto:Daniel.Dyer@wales.nhs.uk)

Anthony Pitcher, [Anthony.Pitcher@wales.nhs.uk](mailto:Anthony.Pitcher@wales.nhs.uk)

Simon Chiffi (Hywel Dda UHB - Head of Operations) [Simon.Chiffi@wales.nhs.uk](mailto:Simon.Chiffi@wales.nhs.uk)

Claire Bird - (Hywel Dda UHB - Assurance and Risk Officer), [Claire.Bird@wales.nhs.uk](mailto:Claire.Bird@wales.nhs.uk)

Jason Wood (Hywel Dda UHB - ESTATES) [Jason.Wood@wales.nhs.uk](mailto:Jason.Wood@wales.nhs.uk)

## Important Information – Schedule referred to in letter

Notes to this schedule:

The government guidance most suitable to your premises is "**Guide to Risk Assessment in Sleeping Accommodation**" ISBN-13: 978 1 85112 817 4 and, "**Guide to Risk Assessment in Offices and Shops**" ISBN-13:978 1 85112 815 0, which can be found at <http://www.cfoa.org.uk/19512>

Before you make certain changes to the premises, you may have to apply for approval from statutory bodies and/or others having interest in them. If you have doubt about the need for approval, you should ask the relevant body. For example, you may have to apply for approval from a Building Control Body <http://www.legislation.gov.uk/ukxi/2010/2214/regulation/3/made>. You might also need to apply for the property owners' permission [http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet\\_EN.pdf](http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet_EN.pdf) among others.

This Schedule contains 3 items

### St Nons (Secure EMI Unit) and St Brynach's (Day Hospital)

Item 1 – Fire Resisting Doors	
Outcome	This work is necessary to make sure that escape routes (corridors, stairs and doors) can be safely used whenever they are needed.
Required Action	<p>Ensure that door-sets that can resist fire and smoke for <b>30 minutes</b> are provided in the following locations:</p> <ul style="list-style-type: none"><li>Throughout units, many doors were defective, these were on escape routes.</li></ul> <p>The term 'door-set' refers to the complete element as used in practice:</p> <ul style="list-style-type: none"><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><li>Self-closers to be fitted to all doors and not compromise strips and seals of fire doors.</li></ul> <p><b>TIME FOR COMPLETION:</b> <b>To be completed in line with the agreed advanced, first and second phase works as mentioned within the document: Fire Precaution Upgrade Works Withybush General Hospital, presented to us on the 6<sup>th</sup> Jan 2021</b></p>
Reason	<p>Doors were not capable of preventing the spread of fire for long enough to enable people to escape because some of the fire doors were not providing a minimum standard of Fire resistance.</p> <p>This is contrary to Articles 8(1) and 14(2)(b).</p>

Item 2 – Compartment	
Outcome	This work is necessary to reduce the risk of the spread of fire.

Required Action	Reinstate the fire resistance in the following location: <ul style="list-style-type: none"> <li>Compartmentation issues throughout unit, due to Dampers showing fault on system.</li> </ul>
Reason	<p>It was noted following inspection that the Damper Systems throughout the St Nons Unit, Bro Cerwyn, and St Brynach's were showing faults on the Main Damper System Panel. Therefore, these systems were not providing sufficient protection in case of fire and would affect people before they could escape.</p> <p><b>TIME FOR COMPLETION:</b>  <b>To be completed in line with the agreed advanced, first and second phase works as mentioned within the document: Fire Precaution Upgrade Works Withybush General Hospital, presented to us on the 6th Jan 2021.</b></p>

### **Bro Cerwyn (Offices)**

<b>Item 3 - Compartment</b>	
Outcome	This work is necessary to reduce the risk of the spread of fire.
Required Action	Reinstate the fire resistance in the following locations <ul style="list-style-type: none"> <li>Holes in ceiling areas of offices, water leaking onto electrical appliances and sockets.</li> </ul> <p><b>TIME FOR COMPLETION:</b>  <b>To be completed in line with the agreed advanced, first and second phase works as mentioned within the document: Fire Precaution Upgrade Works Withybush General Hospital, presented to us on the 6th Jan 2021</b></p>
Reason	There is the possibility of a fire starting due to the water leaks in the ceiling areas, of offices, when it rains. The flat roof covering part of the premise will need to be maintained to prevent any issues arising.

The Chief Executive  
Corporate Offices  
Hywel Dda Health Board  
Hafan Derwen  
Ystwyth Building  
Jobs Well Road  
Carmarthen  
SA31 3BB

Gofynner am/  
Please ask for:

Watch Manager K Steele

Ext No:

3367

E-bost/E-mail:

k.steele@mawwfire.gov.uk

Fy Nghyf/My  
Ref:

BFS.KS/SJM/00175424  
00175421/00175428/00175426/00  
175425

Dyddiad/Date:

12 January 2021

[Steve.Moore2@wales.nhs.uk](mailto:Steve.Moore2@wales.nhs.uk)

Dear Sir

## The Regulatory Reform (Fire Safety) Order 2005

### Letter of Fire Safety Matters

**Premises: KENSINGTON, ST THOMAS, SPRINGFIELD, SEALYHAM, PEMBROKE COUNTY BLOCKS, HYWEL DDA HEALTH BOARD, WITHYBUSH GENERAL HOSPITAL, WITHYBUSH, FISHGUARD ROAD, HAVERFORDWEST, SA61 2PZ.**

I visited your premises on 17 December 2019 and evaluated the fire safety provided. I am of the opinion that some people are at risk in case of fire. **I have issued this letter to confirm the agreed outcome of the meeting on 06 January 2021. The schedule of works has been aligned with all stages of the document named Fire Precaution Upgrade Works Withybush General Hospital.**

### Timescale for Completion

As mentioned within the WGH Fire Enforcement programme Covid impact document, **Stage 1 / Advanced works** relate to Vertical Escape routes and Priority work at St Caradogs to be completed by end **Jan 2021**.

**Stage 2 / Phase 1 works** relate to all remaining escape routes at WGH and all remaining work at St Caradogs, St Nons to be completed by end **April 2022**.

**Stage 3 / Phase 2 works** relate to all department / ward areas including any sub compartmentation and risk room area. To be completed by end **April 2025**.

### Consequence for Non-compliance

If you do not do the work in the schedule before my next visit (or I find that safety provisions have worsened), the authority may serve an enforcement notice on you. An enforcement notice would legally bind you to do the work.

### Route to Appeal

You can clarify or challenge what you need to do. If you have any feedback you wish to share, please access the Complaints and Compliments section found on our website:

<http://www.mawwfire.gov.uk/English/Contacts/Pages/Complaints-and-Compliments.aspx>.



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Mid and West Wales  
Fire and Rescue Service

Prif Swyddog Tân  
Chief Fire Officer

Chris Davies QFSM MBA

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Rydym yn croesawu galwadau yn y Gymraeg a'r Saesneg.

We welcome correspondence in Welsh and English - we will respond equally to both and will reply in your language of choice without delay.

We welcome calls in Welsh and English.



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[www.mawwfire.gov.uk](http://www.mawwfire.gov.uk)



### **Alternative Solutions**

If you want to use a different solution to bring about safety from fire, please contact me to discuss an action plan. An action plan might enable you to apply an equally appropriate safety solution to better meet your needs. Any alternative solution you propose must meet the 'outcome(s)' stated in the schedule.

### **Further Recommendations**

**It was noted whilst carrying out the inspection that all portable appliances are not properly tested and maintained (this was apparent within all five blocks).**

**All Portable Electrical Equipment is to be checked by a suitably qualified person as per the:**

**The Provision and Use of Work Equipment Regulations 1998**

**The portable appliances were not properly tested and maintained. This means that any of these appliances fail without warning and that people would be at risk in case of fire.**

Yours faithfully



Watch Manager K Steele  
Authorised Fire Safety Inspecting Officer  
On behalf of the Mid and West Wales Fire and Rescue Authority

cc 's

Health Inspectorate Wales, Rhydycar Business Park, Merthyr Tydfil CF48 1UZ, [HIW@gov.wales](mailto:HIW@gov.wales)

Rob Elliott (Hywel Dda UHB - Director of Estates, Facilities and Capital Management), [Rob.elliott@wales.nhs.uk](mailto:Rob.elliott@wales.nhs.uk)

Janice Cole-Williams (WGH General Manager), [Janice.cole-williams@wales.nhs.uk](mailto:Janice.cole-williams@wales.nhs.uk)

Bethan Andrews, [Bethan.andrews@wales.nhs.uk](mailto:Bethan.andrews@wales.nhs.uk)

Gareth Lloyd (Hywel Dda UHB – Head of Fire Safety Management), [Gareth.Lloyd10@wales.nhs.uk](mailto:Gareth.Lloyd10@wales.nhs.uk)

Daniel Dyer (Hywel Dda UHB - Fire Safety Advisor), [Daniel.Dyer@wales.nhs.uk](mailto:Daniel.Dyer@wales.nhs.uk)

Anthony Pitcher, [Anthony.Pitcher@wales.nhs.uk](mailto:Anthony.Pitcher@wales.nhs.uk)

Simon Chiffi (Hywel Dda UHB - Head of Operations) [Simon.Chiffi@wales.nhs.uk](mailto:Simon.Chiffi@wales.nhs.uk)

Claire Bird - (Hywel Dda UHB - Assurance and Risk Officer), [Claire.Bird@wales.nhs.uk](mailto:Claire.Bird@wales.nhs.uk)

Jason Wood (Hywel Dda UHB - ESTATES) [jason.wood@walesnhs.uk](mailto:jason.wood@walesnhs.uk)

## Important Information – schedule referred to in letter

Notes to this schedule:

The government guidance most suitable to your premises is "**Guide to Risk Assessment in Sleeping Accommodation**" ISBN-13: 978 1 85112 817 4 and "**Guide to Risk Assessment in Offices and Shops**" ISBN-13: 978 1 85112 815 0 which can be found at <http://www.cfoa.org.uk/19512>

Before you make certain changes to the premises, you may have to apply for approval from statutory bodies and/or others having interest in them. If you have doubt about the need for approval, you should ask the relevant body. For example, you may have to apply for approval from a Building Control Body <http://www.legislation.gov.uk/ukxi/2010/2214/regulation/3/made>. You might also need to apply for the property owners' permission [http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet\\_EN.pdf](http://cadw.gov.wales/docs/cadw/publications/ListedBuildingConsentBooklet_EN.pdf) among others.

### The Schedule Contains 7 Items

Item number 1 Compartment	
Outcome	This work is necessary to reduce the risk of the spread of fire.
Required Action	<ul style="list-style-type: none"><li>• 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.</li><li>• All Loft hatches are to be fire resisting to a minimum of 30 minutes.</li><li>• 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.</li></ul> <p><b>TIME FOR COMPLETION: To be completed in line with the agreed advanced, first and second phase works as mentioned within the document: Fire Precaution Upgrade Works Withybush General Hospital, presented to us on the 6th Jan 2021</b></p>
Reason	The fire resistance cannot be confirmed and needs to provide the sufficient protection in case of fire. Without the correct compartmentation fire and smoke could spread unhindered and would affect people before they could escape.

Item number 2 Fire Resisting Corridors	
Outcome	This work is necessary to provide sufficient escape routes (corridors, stairs and doors) for people.
Required Action	<p>Ensure that the means of escape is kept free from fire and smoke for a period of 30 minutes by ensuring that:</p> <ul style="list-style-type: none"><li>• 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</li></ul>

	<p>wedged open and any intumescent smoke seals that is damaged (Painted over) or missing should be replaced.</p> <p>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.</p> <ul style="list-style-type: none"> <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> <p><b>TIME FOR COMPLETION: To be completed in line with the agreed advanced, first and second phase works as mentioned within the document: Fire Precaution Upgrade Works Withybush General Hospital, presented to us on the 6th Jan 2021</b></p>
Reason	<p>People using the above-mentioned locations may be affected by a fire in one of the adjoining rooms. This means that people may not be able to reach safety before being affected by fire and / or smoke.</p>

Item number 3 Improve Fire Detection System	
Outcome	Change the type of and add to the fire detection system.
Required Action	<ul style="list-style-type: none"> <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> </ul> <p>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.</p> <ul style="list-style-type: none"> <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).</li> </ul>

	<p>You must ensure that this practice is not repeated, information must be given to the occupants explaining the severity of this action.</p> <ul style="list-style-type: none"> <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> </ul> <p>The changes should be carried out and commissioned by a competent person.</p> <p><b>TIME FOR COMPLETION: To be completed in line with the agreed advanced, first and second phase works as mentioned within the document: Fire Precaution Upgrade Works Withybush General Hospital, presented to us on the 6th Jan 2021</b></p>
Reason	People within the premises may not be able to hear the fire alarm sounding or there may be a delay in the activation of the alarm delaying their escape from fire.

Item number 4 Obstructed Escape Route	
Outcome	This work is necessary to provide sufficient escape routes (corridors, stairs and doors) for people.
Required Action	<p>Ensure that everyone can evacuate quickly and safely by details.</p> <ul style="list-style-type: none"> <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 Kensington, Sealyham)</li> <li>Notice boards should be placed behind a lockable screen if erected on a means of escape.</li> </ul> <p><b>TIME FOR COMPLETION: To be completed in line with the agreed advanced, first and second phase works as mentioned within the document: Fire Precaution Upgrade Works Withybush General Hospital, presented to us on the 6th Jan 2021</b></p>
Reason	The escape route from the office areas (Kensington, Sealyham) within the blocks had as mentioned above items of hazard and combustibility stored within them. This would delay or prevent people escaping quickly and safely from fire.

Item number 5 Escape Lighting	
Outcome	This work is necessary to make sure that escape routes (corridors, stairs and doors) can be safely used whenever they are needed.
Required Action	Ensure that escape lighting on all escape routes in all five locations mentioned above are operating to the standard required and in accordance with BS 5266 the emergency lighting should operate if the local lighting circuit fails.

	<p>The system should be tested monthly and inspected bi-annually.</p> <p><b>TIME FOR COMPLETION: To be completed in line with the agreed advanced, first and second phase works as mentioned within the document: Fire Precaution Upgrade Works Withybush General Hospital, presented to us on the 6th Jan 2021</b></p>
Reason	People within the blocks named above may not be able to find the way out in an emergency because the lighting might not operate as it should.

<b>Item number 6 Establish Emergency Procedures</b>	
Outcome	This work is necessary to help people understand what to do if fire breaks out.
Required Action	<p>Establish procedures to be followed in case of fire and nominate people to put those procedures into effect.</p> <p>Ensure that there are enough competent people to successfully implement an evacuation.</p> <p>Where premises are occupied on a shared basis, effective systems of communication must be established with those responsible for other premises to ensure all relevant persons are provided with suitable and sufficient information in respect of the fire safety measures implemented.</p> <p>All five blocks but namely the Kensington, Sealyham Blocks.</p> <p><b>TIME FOR COMPLETION: To be completed in line with the agreed advanced, first and second phase works as mentioned within the document: Fire Precaution Upgrade Works Withybush General Hospital, presented to us on the 6th Jan 2021</b></p>
Reason	There was no evidence of a fire procedure or fire drills. Without these, people may behave in unpredictable ways and can be put at risk. Good procedures will allow everyone to leave safely in case of fire.

<b>Item number 7 Reduce Fire Spread</b>	
Outcome	This work is necessary to reduce the risk of the spread of fire.
Required Action	<p>Upholstered furniture is to comply with British Standard 7176 or the equivalent European Standard.</p> <ul style="list-style-type: none"> <li>• Pembroke County Community Room.</li> </ul> <p><b>TIME FOR COMPLETION: To be completed in line with the agreed advanced, first and second phase works as mentioned within the document: Fire Precaution Upgrade Works Withybush General Hospital, presented to us on the 6th Jan 2021</b></p>
Reason	A fire would grow unhindered in the non-fire-retardant material. People would be exposed to a significant fire.

## Appendix 10

Mr Rob Elliott, Director of Facilities &  
Capital Management  
Glangwili Hospital  
Dogwili Road  
Carmarthen  
SA31 2AF

[Rob.elliott@wales.nhs.uk](mailto:Rob.elliott@wales.nhs.uk)

*Gofynner am/  
Please ask for:  
Rhif Est/Extn.  
No.*

Watch Manager K Steele

3367

*E-bost/E-mail:*

[k.steele@mawwfire.gov.uk](mailto:k.steele@mawwfire.gov.uk)

*Fy Nghyf/My  
Ref:*

BFS/KS/AMD/00114719

*Eich Cyf/Your  
Ref:*

*Dyddiad/Date:* 19 March 2021



Gwasanaeth Tân ac Achub  
Canolbarth a Gorllewin Cymru

Mid and West Wales  
Fire and Rescue Service

Dear Mr Elliot

**RE: ENFORCEMENT NOTICE NUMBERED KS/890/03 AND DATED APRIL 2022**

Further to the conversation on the possibility of the Phase 1 works at Withybush General Hospital running over the completion date due to the complexity and capital value of this project, as we have over 12 months to the current expiry date, we would not want to review this enforcement notice until early in to 2022.

Subject to continuing the good progress, which is apparent at this time and as the project is well underway with the imminent removal of the enforcement notice KS/890/02, I can foresee no real issue with extending the notice mentioned KS/890/03 by the few months as we discussed.

Please could you contact me in early March 2022 and update me on the progress of the works, at that point we can discuss the extension of the notice at that date.

We are happy to work with you and assist in any way we can. Please contact me any time to discuss any issues or updates regarding the notices that are in force on both sites.

Yours faithfully

Watch Manager K Steele  
Authorised Fire Safety Inspecting Officer  
On behalf of the Mid and West Wales Fire and Rescue Authority

Prif Swyddog Tân  
Chief Fire Officer  
Chris Davies QFSM MBA

Y Pencadlys,  
Heol Llwyn Pisgwydd,  
Caerfyrddin,  
Sir Gâr,  
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Facs | Fax:

01267 220562

Ffôn | Tel:

0370 60 60 699

HOFFI DILYN RHANNU | Ein Negeseuon  
Diogelwch  
Our Safety  
Messages  
You Tube f t i  
LIKE FOLLOW SHARE

Rydym yn croesawu gohebiaeth yn  
y Gymraeg a'r Saesneg - byddwn yn  
ymateb yn gyfartal i'r ddau ac yn ateb yn  
eich dewis iaith heb oedi.

Rydym yn croesawu galwadau yn y  
Gymraeg a'r Saesneg.

We welcome correspondence in Welsh  
and English - we will respond equally to  
both and will reply in your language of  
choice without delay.

We welcome calls in Welsh and English.



[www.tancgc.gov.uk](http://www.tancgc.gov.uk)  
[www.mawwfire.gov.uk](http://www.mawwfire.gov.uk)

## Appendix 11



ACTION PLAN v12 31 July 19  
Fire Enforcement Notice – WGH

Ref	Brief Description	Fire Authority Concern	Proposal	Budget		Contract Appointment Programme						Lead Person
				Funds already allocated	Capital Bids	Invite to Tender	Receipt of Tender	Appointed Contractor	Proposed Completion Date	Revised Completion Date	Final Completion Date	
1	<b>Housekeeping:</b>	Items in Corridors										
a	Dirty Linen Trolleys		<p><del>Short Term Solution – Store outside main site in roll off container will require lighting and ramp access. Order placed w/c 12 Aug</del></p> <p>The two roll off containers are now in place and being used for storage from the lower ground floor. Dirty linen trolleys are now in the place where storage was previously used on the lower ground floor.</p> <p>Long Term Solution – Creation of new dirty linen store in current hard standing area adjacent to lower ground floor corridor.</p> <p><b>Contractor appointed –on programme</b></p>		£3,000				16 Aug 19			Stephen John/Duncan Evans
					£46,000	9 Sep 19 Confirmed on programme	7 Oct 19	14 Oct19	25 Nov 19 Confirmed on programme		<b>COMPLETE INC ADDITIONAL DRAINAGE</b>	Stephen John/ Phil Astles
b	Clean Linen Trolleys		<p>Delivered directly into linen/sewing room Not on lower GF corridor</p> <p><b>Complete</b></p>						9 Aug 19 Confirmed Completed			Stephen John/ Jill Richards
c	Linen Trolleys - general		<p>Where these are located on wards/theatres linen must be stored appropriately within the departments. Trolleys will not be left outside of ward on the corridor.</p> <p>Regular walkabout feedback from Supervisors and Estate staff</p>						16 Aug 19 Confirmed Completed			Stephen John/Jill Richards
d	General Bin Storage		<p>All bins to be removed from corridor to newly constructed external hard standing areas:</p> <p>Colposcopy and Puffin Ward / ACDU <b>Orders Placed on programme</b></p> <p>Kitchen / Delivery Courtyard <b>Orders Placed on programme</b></p>		£31,500	9 Sep 19 Confirmed on programme	7 Oct 19	14 Oct 19	18 Nov 19	25 Nov 19	<b>COMPLETE WITNESSED BY MWWFRS</b>	Phil Astles
					£17,200	As above	As above	As above	As above			

			<p>The following two projects already funded from the Discretionary Capital Programme:</p> <p><del>Pathology courtyard (under construction)</del> Alternative solution now found at zero cost</p> <p>Outside maintenance office.</p> <p>Linen collection system changed so that linen and waste now collected from each ward and department. Additional collection times also added.</p> <p>It is essential that there is no storage of any type in any: escape routes, corridors, stair wells, public areas.</p> <p>Hospital Manager to ensure this is the case with the support from the Operations team locally.</p>			27 Aug 19	13 Sep 19	20 Sep 19	25 Oct 19	NA	NA	Stephen John
						27 Aug 19	13 Sep 19	20 Sep 19	25 Oct 19		16 Aug 19	Janice Cole-Williams Support from Stephen John Jill Richards
e	Photocopiers		<p>Must be removed from all corridors into locations that are not on an escape route. Relocation of copiers will require network and power points. (Still to be evaluated but expected to be at low cost as relocating existing services)</p> <p>Complete</p>		--	--			30 Aug19		Confirmed Completed Ward 7 Dayroom	Janice Cole-Williams Support from Stephen John Ray Claridge
f	Bed Storage		<p>All beds to be removed from corridors. Additional external storage to be provided.</p> <p>Provision of storage facility</p> <p>Ensure beds are not stored on corridors and are removed</p> <p>As part of the original plan additional storage for 10 beds has been provided. Whilst this was thought to be sufficient this is not the case. There is therefore a requirement for additional storage capacity for 15 beds.</p> <p>Additional containers to be purchased</p> <p>In place no - beds in corridors since</p>	£3,000					16 Aug 19			Stephen John
										16 Sep 19	Confirmed Completed 6 Sep 19	Janice Cole-Williams Support from Jill Richards
g	General Storage		<p>It is essential that there is no storage of any type in any: escape routes, corridors, stair wells, public areas.</p> <p>Hospital Manager to ensure this is the case with the support from the Operations team locally.</p>		--	--						Janice Cole-Williams with support from Jill Richards

			We have a high level of confidence that this is in place but needs constant monitoring.									
2	Dry Riser Maintenance	Testing Protocols	Outsource to Contractor for testing  Fully completed	Ops Budget		7 Aug 19			30 Aug 19	20 Sep 19 Completed		Stephen John/Duncan Evans
3	Emergency Lighting	Testing Procedures  Annual full discharge testing	Testing Information to be provided to Fire Service (already submitted)  Investment in replacement mains monitoring panels (Auto test facility)  Currently on target		--  £20,000	--  23 Aug 19	13 Sep 19	20 Sep 19	7 Aug 19  1 Nov 19 Completed			Stephen John/Duncan Evans Note: arrangements in place for testing – system software will now automatically test on 24/25/26 Dec
4	Fire Alarm System	Repeater panels not functioning	Fire alarm all working fully. Secondary repeater panels to be replaced with new units.  Currently on target		£23,000	23 Aug 19	13 Sep 19	20 Sep 19	1 Nov 19 Completed			Stephen John/Duncan Evans
5	Fire Doors on Ward 9	Doors not installed appropriately	Ward 9 incorrectly fitted fire doors to be replaced by contractor at their cost.  Completed  GL/PA/RC to work together on this		Nil				8 Nov 19 1 Nov 19 Completed		COMPLETE WITNESSED BY MWWFRS	Phil Astles
6	Fire Doors	Ill fitting/require replacement	£100k already identified from within the current years Discretionary Capital Programme. This will be prioritised by the Fire Safety Team  This funding will be invested prior to the 31 <sup>st</sup> Mar 2020 on a planned programme.  We are currently reviewing all Fire Door Surveys. This will inform future needs at WGH and will be the subject of a complete review of fire compartmentation as noted in 7 below.	£100,000					31 Mar 20 Confirmed on programme		Tender ready to be passed to Procurement for advanced work (St Caradogs & WGH).  Door repair scheme of priority doors commences Monday 9 <sup>th</sup> April –	Gareth Lloyd/ Ray Claridge/ Phil Astles  A prioritised list of door replacements has now been received. The Capital team are now developing a plan to complete the

											complete 17 <sup>th</sup> Apr.	work this finance year.  Further work needed with major capital design team to establish a deliverable programme. Engagement with Fire Service key to this planning.
7	Fire Compartments and Fire Damper Remedial Work		<p>This is a holistic review of all fire compartmentation and fire damper systems at WGH.</p> <p>This will involve consideration of Asbestos Management, clinical service interruption/decant needs in order to develop a deliverable plan for Fire Stoppage/Dampers.</p> <p>Fire Service have already been advised that the planning of the programme of this will be several months work.</p> <p>Extension of time needed</p>									<p>Further work needed with major capital design team to establish a deliverable programme. Engagement with Fire Service key to this planning.</p> <p>Will require an application to extend current timescales set for completion of 30<sup>th</sup> Nov 19.</p>
8	Fire Stopping to External Soffit	Gaps in Fire Stopping to external Mortuary parapet/soffit system	<p>Further work needed on this area due to the sensitivities of Mortuary access. Potential for alternative entrances/exits needed for body transfers during construction works.</p> <p>Currently clarifying with the Fire Service the specific requirements of this area. When clarified a formal programme and cost estimate can be established</p> <p>We have established position that the asbestos risk can be managed and therefore a repair on it suffice rather than a whole replacement</p>								<p>1-Nov-19</p> <p>15<sup>TH</sup>-November</p> <p>COMPLETE</p>	

9	Means of Escape	Inappropriate final exit doors from building	<p>Revisions to Fire Exits needed at:</p> <p>HSDU- new exit, convert window into escape door, new FA call point, detection and external lighting.</p> <p>Laundry room- new exit convert window into escape door, new FA call point, detection, external lighting and stair/landing. Repair cladding</p> <p>Dining room Corridor Exit – replace existing to outward opening door, relocate fire alarm call point.</p> <p>This work will include the work identified in the server room in basement area.</p> <p>Update for CEO Friday</p> <p>Doors being delivered 18 Nov, 2 days to install, 2 days to make good. On programme.</p>		£62,100	9 Sep 19	30 Sep 19	7 Oct 19	<del>18 Nov 19</del>	25 Nov 19 Work completed	ALL COMPLETE WITNESSED BY MWWFRS	Phil Astles
			TOTALS	£100,000	£205,800							

## Appendix 12

## Business Justification Case

Health Board: Hywel Dda Vale University Health Board

Hospital/Site: Withybush General Hospital and Bro Cerwyn / St Brynach Day Hospitals, Haverfordwest

Project Title: Phase 1 Fire Precaution Upgrade Works, Withybush

Project No: QS2889

Option No: 2

Option Title: Preferred Solution

Prepared by: Lee Wakemans Ltd.

Date: 19 March 2021 (Version 1 ISSUE)

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**Project Title:** Phase 1 Fire Precaution Upgrade Works, Withybush  
**Option No:** 2  
**Option Title:** Preferred Solution

#### BASIS OF ESTIMATING

##### Stage 2 Indicative Cost Plan

BCIS PubSec Index Level : N/A FP - Costs escalated with published and assessed inflation for the duration of the project  
 Equipment cost level : N/a EPI  
 Location factor : 0.97  
 Proposed start on site : May-21 Based on IHP's indicative programme as at  
 Proposed completion date : Jun-22 March 2021

#### Capital Cost Summary

Ref	Cost Centre	Net £	VAT £	Gross £
1	Departmental Cost (OBC2)	£ -	£ -	£ -
2	On costs (OBC3) N/A of (1)	£ 5,072,251	£ 1,014,450	£ 6,086,701
3	Sub-total	£ 5,072,251	£ 1,014,450	£ 6,086,701
4	Provisional location adjustment - indicative costs based on the site's regional location 0.97	£ -	£ -	£ -
5	Works Cost	£ 5,072,251	£ 1,014,450	£ 6,086,701
6	Fees (OBC4) 30.23% of (5)	£ 1,533,497	£ 306,699	£ 1,840,197
	Management & Design - Pre-Construction Stages £ 381,894 7.53%			
	Management & Design - Construction Stage £ 380,029 7.49%			
	Additional Management & Supervision - Construction Stage £ 771,574 15.21%			
	<u>£ 1,533,497 30.23%</u>			
7	Non-works Costs (OBC4)	£ 525,311	£ 105,062	£ 630,373
8	Equipment Costs (OBC2) N/A of (1)	£ -	£ -	£ -
9	Quantified Risk Contingency: Anticipated risk level normally expected at BJC Stage 2 (OBC) for a low risk traditional project	£ 590,369	£ 118,074	£ 708,443
	Health Board £ 590,369 All Health Board			
	SCP £ -			
	<u>£ 590,369 (8.28% of 5, 6, 7 &amp; 8)</u>			
10	VAT Reclaim	£ -	(£ 140,751)	(£ 140,751)
11	Optimism Bias - Excluded	-	-	-
12	BJC Project Cost (at OBC equivalent stage)	£ 7,721,429	£ 1,403,535	£ 9,124,964



13	Inflation forecast (escalation for full project escalation included by HDUHB and SCP)	£	-	£	-	£	-
14	<b>Forecast Project Outturn Cost - Excluding Advanced Fire Code Works and Additional Quantified Risk Contingency to be held by Welsh Government (for approval purposes)</b>	£	7,721,429	£	1,403,535	£	9,124,964
15	Advanced Fire Code Works - these works form part of a separate budget of £350,000 already approved and funded by Welsh Government	£	-	£	-	£	-
16	<b>Forecast Project Outturn Cost - Including Advanced Fire Code Works but excluding additional Quantified Risk Contingency to be held by Welsh Government (for approval purposes)</b>	£	7,721,429	£	1,403,535	£	9,124,964
17	Additional Quantified Risk Contingency: Anticipated additional risk level associated with the adhoc/ bespoke nature of risks associated with a project of this nature to be held by Welsh Government	£	3,193,669	£	638,734	£	3,832,403
	Health Board	£	-				
	SCP	£	-				
	Welsh Government - general risk contingency	£	2,036,668				
	Welsh Government - specific risk contingency for over boarding	£	1,157,001				
		£	3,193,669				
			(44.79% of 5, 6, 7 & 8)				
18	<b>Forecast Project Outturn Cost - Including additional Quantified Risk Contingency to be held by Welsh Government (for approval purposes)</b>	£	10,915,098	£	2,042,268	£	12,957,367

Project Title: Phase 1 Fire Precaution Upgrade Works, Withybush  
Option No: 2  
Option Title: Preferred Solution

CAPITAL COSTS: DEPARTMENTAL AND EQUIPMENT COSTS

Accommodation	Functional Size	Space allowance		N/A/C	Departmental Allowance £	Equipment Allowance £
		m2	£/m2			
None	N/A			C	£ -	£ -

Total floor area (Nett Area)	0 m2	£ -
Less: Abatement for transferred equipment		£ -
Departmental Cost - to OBC1 Summary		£ -
Equipment Cost - to OBC1 Summary		£ -

**Project Title:** Phase 1 Fire Precaution Upgrade Works, Withybush  
**Option No:** 2  
**Option Title:** Preferred Solution

CAPITAL COSTS: ON-COSTS

	Net Cost	% of DCA
1 Communications - GIFA: <input type="text"/>		
a Space	£ -	N/A
b Medical Gases	£ -	N/A
c Lifts	£ -	N/A
2 "External" Building Work		
a Drainage	£ -	N/A
b Roads, paths, parking	£ -	N/A
c Site layout, walls, fencing, gates	£ -	N/A
d BWIC with "External" engineering work	£ -	N/A
3 "External" Engineering Work		
a Steam, condensate, heating, hot water and gas supply mains	£ -	N/A
b Cold water mains and storage	£ -	N/A
c Electricity mains, sub-stations, standby generating plant	£ -	N/A
d Calorifiers and associated plant	£ -	N/A
e Miscellaneous services	£ -	N/A
4 Auxiliary Buildings	£ -	N/A
5 Other on-costs and abnormals		
a Building abnormals (See Annex A)	£ 5,072,251	N/A
b Engineering (See Annex B)	£ -	N/A
c Other on-costs (See Annex C)	£ -	N/A
Total On-costs - to OBC1 Summary	£ 5,072,251	0.00%

**Project Title:** Phase 1 Fire Precaution Upgrade Works, Withybush  
**Option No:** 2  
**Option Title:** Preferred Solution

CAPITAL COSTS: FEES AND NON-WORKS COSTS

	£	% of Works Cost
1 Fees		
<u>Health Board</u>		
a. Project Manager	£ 126,420	2.49%
b. Health Board Cost Advisor	£ 173,103	3.41%
c. Supervisor	£ 284,000	5.60%
d. Project Director	£ -	0.00%
e. In-house Project Sponsorship	£ 50,722	1.00%
f. Financial Vetting	£ -	0.00%
g. Audit	£ 20,000	0.39%
h. Specialist Advisors	£ 25,375	0.50%
Escalation on Health Board's external consultant's base DFL rates	£ 43,690	0.86%
Actual for year 2 to June 2019 (4.1%) and year 3 to June 2020 (4.42%) and forecast year 4 to June 2021 (assessed 3%), year 5 to June 2022 (assessed 4%) and year 6 to June 2023 (assessed 3%)		
<u>SCP</u>		
i. Constructor - Pre-Construction	£ 105,032	2.07%
j. Healthcare Planner	£ -	0.00%
k. Architect	£ 211,686	4.17%
l. Civil and Structural Engineer	£ 20,709	0.41%
m. Building Services Engineer	£ 164,303	3.24%
n. Principal Designer	£ 7,375	0.15%
o. BREEAM Advisor	£ -	0.00%
p. Building Services Installer- pre-construction	£ 32,219	0.64%
q. Other - Fire Engineer	£ 226,813	4.47%
Escalation on SCP's base DFL rates for staff and external consultants - excludes Fire Engineer (Hydrock) as costs based on non-DFL current rates.	£ 42,050	0.83%
Actual for year 2 to June 2019 (4.1%) and year 3 to June 2020 (4.42%) and forecast year 4 to June 2021 (assessed 3%), year 5 to June 2022 (assessed 4%) and year 6 to June 2023 (assessed 3%)		
Total Fees to OBC1 Summary	£ 1,533,497	30.23%
2 Non-Works Costs		
a. Land purchase costs and associated legal fees	£ 10,000	
b. Statutory and Local Authority charges	£ 15,000	
c. Planning and Building Control fees	£ 9,986	
d. Other	£ 490,325	
Total Non-Works Costs to OBC1 Summary	£ 525,311	

**Project Title:** Phase 1 Fire Precaution Upgrade Works, Withybush  
**Option No:** 2  
**Option Title:** Preferred Solution

# PROJECT CASHFLOW FORECAST

Proposed start on site: May-21  
 Proposed completion date: Jun-22

	Year				Total
	0	1	2	3	
Financial year	2020/21	2021/22	2022/23	2023/24	
Works Cost	£0	£4,372,297	£623,127	£76,827	£ 5,072,251
Fees	£371,314	£895,478	£243,438	£23,267	£ 1,533,497
Non-works Costs	£48,024	£402,744	£74,543	£0	£ 525,311
Equipment Costs	£0	£0	£0	£0	£ -
Quantified Risk Provision - Held by Health Board	£34,716	£469,453	£77,913	£8,287	£ 590,369
<b>Total for Economic Appraisal</b>	<b>£ 454,054</b>	<b>£ 6,139,973</b>	<b>£ 1,019,021</b>	<b>£ 108,380</b>	<b>£ 7,721,429</b>
Gross VAT	£90,811	£1,227,995	£203,804	£21,676	£ 1,544,286
Less: Reclaimable VAT	<b>-£16,547</b>	<b>-£88,611</b>	<b>-£32,968</b>	<b>-£2,625</b>	<b>(£ 140,751)</b>
Net VAT	£ 74,264	£ 1,139,384	£ 170,836	£ 19,051	£ 1,403,534
Inflation (escalation for full project escalation included by HDUHB and SCP)	£ -	£ -	£ -	£ -	£ -
<b>Total for Financial Case (excluding Advanced Fire Code Works and Additional Quantified Risk Contingency to be held by Welsh Government)</b>	<b>£ 528,318</b>	<b>£ 7,279,357</b>	<b>£ 1,189,857</b>	<b>£ 127,431</b>	<b>£ 9,124,964</b>
Advanced Fire Code Works - these works form part of a separate budget of £350,000 already approved and funded by Welsh Government	£0	£0	£0	£0	£ -
<b>Total for Financial Case (including Advanced Fire Code Works excluding and Additional Quantified Risk Contingency to be held by Welsh Government)</b>	<b>£ 528,318</b>	<b>£ 7,279,357</b>	<b>£ 1,189,857</b>	<b>£ 127,431</b>	<b>£ 9,124,964</b>
Additional Quantified Risk Provision - General risk held by Welsh Government (including VAT)	£0	£ 2,069,500	£ 338,273	£ 36,228	£ 2,444,002
Additional Quantified Risk Provision - General risk held by Welsh Government (including VAT)	£0	£ 1,175,652	£ 192,168	£ 20,581	£ 1,388,401
<b>Total for Financial Case (including Additional Quantified Risk Contingency to be held by Welsh Government)</b>	<b>£ 528,318</b>	<b>£ 10,524,509</b>	<b>£ 1,720,298</b>	<b>£ 184,240</b>	<b>£ 12,957,367</b>

**Project Title:** Phase 1 Fire Precaution Upgrade Works, Withybush  
**Option No:** 2  
**Option Title:** Preferred Solution

**PROJECT CASHFLOW FORECAST**

Proposed start on site: May-21  
 Proposed completion date: Jun-22

**Funding source: Department for Health and Social Services: Welsh Assembly Government**

Year	0	1	2	3	Total
Financial year	2020/21	2021/22	2022/23	2023/24	
Works Cost	£ -	£ 4,372,297	£ 623,127	£ 76,827	£ 5,072,251
Fees	£ 371,314	£ 895,478	£ 243,438	£ 23,267	£ 1,533,497
Non-works Costs	£ 48,024	£ 402,744	£ 74,543	£ -	£ 525,311
Equipment Costs	£ -	£ -	£ -	£ -	£ -
Quantified Risk Provision - Held by Health Board	£ 34,716	£ 469,453	£ 77,913	£ 8,287	£ 590,369
Sub-Total	£ 454,054	£ 6,139,973	£ 1,019,021	£ 108,380	£ 7,721,428
Gross VAT	£ 90,811	£ 1,227,995	£ 203,804	£ 21,676	£ 1,544,286
Less: Reclaimable VAT	(£ 16,547)	(£ 88,611)	(£ 32,968)	(£ 2,625)	(£ 140,751)
Net VAT	£ 74,264	£ 1,139,384	£ 170,836	£ 19,051	£ 1,403,534
Inflation (escalation for full project escalation included by HDUHB and SCP)	£ -	£ -	£ -	£ -	£ -
<b>Total for Financial Case (excluding Advanced Fire Code Works and Additional Quantified Risk Contingency to be held by Welsh Government)</b>	£ 528,318	£ 7,279,357	£ 1,189,857	£ 127,431	£ 9,124,964

Advanced Fire Code Works - these works form part of a separate budget of £350,000 already approved and funded by Welsh Government

£0 £0 £0 £0 £ -

**Total for Financial Case (including Advanced Fire Code Works excluding and Additional Quantified Risk Contingency to be held by Welsh Government)**

£ 528,318	£ 7,279,357	£ 1,189,857	£ 127,431	£ 9,124,964
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Additional Quantified Risk Provision - General risk held by Welsh Government (including VAT)

£0 £ 2,069,500 £ 338,273 £ 36,228 £ 2,444,002

Additional Quantified Risk Provision - General risk held by Welsh Government (including VAT)

£0 £ 1,175,652 £ 192,168 £ 20,581 £ 1,388,401

**Total for Financial Case (including Additional Quantified Risk Contingency to be held by Welsh Government)**

£ 528,318	£ 10,524,509	£ 1,720,298	£ 184,240	£ 12,957,367
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**Funding source:**

Year	0	1	2	3	Total
Financial year	2018/19	2019/20	2020/21	2021/22	
Works Cost					£ -
Fees					£ -
Non-works Costs					£ -
Equipment Costs					£ -
Quantified Risk Contingency					£ -
Sub-Total	£ -	£ -	£ -	£ -	£ -
Gross VAT					£ -
Less: Reclaimable VAT					£ -
Net VAT	£ -	£ -	£ -	£ -	£ -
Inflation	£ -	£ -	£ -	£ -	£ -
<b>Total</b>	£ -	£ -	£ -	£ -	£ -

Project Title:	Phase 1 Fire Precaution Upgrade Works, Withybush
Option No:	2
Option Title:	Preferred Solution

#### KEY PROGRAMME DATES

	Planned @ SOC	Actual
Submission of SOC to Regional Office	N/a	
Regional Office Approval	N/a	
Submission of OBC to WAG	N/a	
		Forecast @ OBC
Submission of FBC to WAG*		TBC
WAG Approval		TBC
Agreement of Indicative Cost		19 March 2021
Start on Site (Advanced Works)		TBC
Start on Site		17 May 2021
Handover		20 June 2022
Opening of Facility		N/A
Project Closure		TBC

\* Assumes OBC & FBC Programme overlap during WG scrutiny

Project Title:

Option No:

Option Title:

Phase 1 Fire Precaution Upgrade Works, Withybush

2

Preferred Solution

RECOVERABLE VAT CALCULATION

	a	b	c	d
	Cost Net of VAT	VAT at 20% (i.e. prior to recovery)	Percentage recoverable (% of col b)	Recoverable VAT (col b x col c)
Works Cost	£ 5,072,251	£ -	0.00%	£ -
Fees (recoverable VAT)	£ 703,756	£ 140,751	20.00%	£ 140,751
Fees (non-recoverable VAT)	£ 829,741	£ -	0.00%	£ -
Non-works Costs	£ 525,311	£ -	0.00%	£ -
Equipment Costs	£ -	£ -	0.00%	£ -
Contingencies	£ 590,369	£ -	0.00%	£ -
Total				£ 140,751



Project Title: Phase 1 Fire Precaution Upgrade Works, Withybush  
Option No: 2  
Option Title: Preferred Solution

CAPITAL COSTS: ON-COSTS - Annex A: Building Abnormals

	Item	Qty	Unit	Rate	Net Cost	Comments
	Withybush General Hospital - Stem corridors (hospital streets) and surrounding areas	1	Item	£ 3,050,043	£ 3,050,043	Indicative scope of main works includes:  Removal and replacement of suspended ceilings Removal of asbestos associated with the works Repairs and replacement of defective fire door sets Fire compartmentation improvement works Mechanical engineering installations including fire / smoke dampers (FDS) and associated ductwork and control panels, temporary diversion of services to facilitate the works and associated BWIC
	Withybush General Hospital - Boiler house	1	Item	£ 8,824	£ 8,824	
	Withybush General Hospital - Underground ducts	1	Item	£ 249,600	£ 249,600	
	Withybush General Hospital - Pitched roof plant and non-plant spaces	1	Item	£ 166,681	£ 166,681	Electrical installations including door controls, minor alterations, minor fire alarm modifications, temporary diversions including removal of power, lighting, comms, alarms etc and associated BWIC
	Residential Blocks	1	Item	£ 729,268	£ 729,268	
	Mental Health - Bro Cerwyn / St Brynach Day Hospitals	1	Item	£ 730,684	£ 730,684	
	Escalation on Year 1 DFL staff cost rates included in Preliminaries totalling £1,039,072 (IHP) and £276,005 (Imtech) plus fee (6.25%) totalling £1,397,269	1	Item	£ 137,150	£ 137,150	
	Actual for year 2 to June 2019 (4.1%), year 3 to June 2020 (4.42%) and year 4 to June 2021 (- 2.66%) and forecast year 5 to June 2022 (assessed 4%) and year 6 to June 2023 (assessed 3%)					

Total Annex A - to OBC3 Building Abnormals

£ 5,072,251

Equivalent to £/m2

N/A

Project Title: Phase 1 Fire Precaution Upgrade Works, Withybush

Option No: 2  
Option Title: Preferred Solution

CAPITAL COSTS: ON-COSTS - Annex B: Engineering Abnormals

Item	Qty	Unit	Rate	Net Cost	Comments
None	1	Item	£0	£	-

Total Annex B - to OBC3 Engineering Abnormals	£	-
Equivalent to £/m2	N/A	

Project Title: Phase 1 Fire Precaution Upgrade Works, Witherbush

Option No: 2  
Option Title: Preferred Solution

CAPITAL COSTS: ON-COSTS - Annex C: Other On-Cost Abnormals

Item	Qty	Unit	Rate	Net Cost	Comments
None	1	Item	£ -	£ -	

Total Annex C - to OBC3 Engineering Abnormals

£ -

Equivalent to £/m2 N/A

Estimated BJC Project Costs - OBC (Stage 2), FBC (Stage 3), Design Completion & Construction (Stage 4), Operational Commissioning (Stage 5) & Project Closure (Stage 6) - Forecast Cashflow  
Issue Version 1 - 19 March 2021  
Prepared by: Lee Wakemans

Assumptions:  
Provisional location adjustment: Not applicable, all rates based on project location  
Inflation forecast by NWSSP-SES: Not applicable, SCP have assessed escalation for the full duration of the project on construction rates and staff and consultant's rates as follows (HDUHB have applied same escalation rates for directly appointed consultants for years 4, 5 and 6 as assessed by IHP):  
  
Actual as published by NWSSP-SES: Year 2 to June 2019 (4.1%), year 3 to June 2020 (4.42%) and year 4 to June 2021 **-2.66% (minus)**  
Forecast by IHP: year 5 to June 2022 (assessed 4%) and year 6 to June 2023 (assessed 3%)

OBC Cost Head / Organisation	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Totals	VAT Rating	Clarifications		
	Approval					Construction Period - 78 weeks										Defects Period - 12 months																				
Works Cost:																																				
Departmental Costs - not applicable	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	Based on costs produced by the SCP (IHP) and reviewed by the Cost Advisor (Lee Wakemans)	
On costs :																																				
Communications - not applicable	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	Assume all Works Costs are abnormal building works		
External Building Work - not applicable	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	Assume all Works Costs are abnormal building works		
External Engineering Work - not applicable	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	Assume all Works Costs are abnormal building works		
Auxiliary Buildings - not applicable	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	Assume all Works Costs are abnormal building works		
Other on-costs and Building abnormalities (See Engineering - not applicable)	£0	£0	£0	£0	£0	£0	£72,013	£305,774	£400,554	£305,446	£451,107	£468,934	£518,719	£522,399	£463,781	£437,931	£309,189	£206,125	£206,125	£118,951	£74,027	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£74,027	£4,935,101	20%		
Other on-costs - not applicable	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	Assume all Works Costs are abnormal building works		
Escalation on Year 1 DFL staff cost rates included in Preliminaries totalling £1,039,072 (IHP) and £276,005 (Imtech) plus fee (6.25%) totalling	£0	£0	£0	£0	£0	£1,180	£5,030	£11,390	£8,680	£12,820	£13,330	£14,750	£14,850	£13,180	£12,450	£8,790	£5,860	£5,860	£3,380	£2,800	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£2,800	£137,150	20%	Actual for year 2 to June 2019 (4.1%), year 3 to June 2020 (4.42%) and year 4 to June 2021 (-2.66%) and forecast year 5 to June 2022 (assessed 4%) and year 6 to June 2023 (assessed 3%)	
Sub-totals Works Cost	£0	£0	£0	£0	£0	£73,193	£310,804	£411,944	£314,126	£463,927	£482,264	£533,469	£537,249	£476,961	£450,381	£317,979	£211,985	£211,985	£122,331	£76,827	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£76,827	£5,072,251			
Fees:																																				
Hywel Dda University Health																																				
Project Manager	£3,500	£4,000	£4,000	£4,920	£3,000	£7,000	£7,000	£7,000	£7,000	£7,000	£7,000	£7,000	£7,000	£7,000	£7,000	£7,000	£7,000	£7,000	£7,000	£7,000	£2,000	£0	£1,000	£0	£1,000	£0	£1,000	£0	£1,000	£2,000	£126,420	0%				
Health Board Cost	£2,138	£16,000	£21,992	£10,973	£2,000	£7,500	£7,500	£7,500	£7,500	£7,500	£7,500	£7,500	£7,500	£7,500	£7,500	£7,500	£7,500	£7,500	£7,500	£4,000	£4,000	£1,000	£0	£1,000	£0	£1,000	£0	£1,000	£2,000	£173,103	0%					
Supervisor - normal working hours	£0	£0	£0	£0	£0	£5,000	£12,000	£12,000	£12,000	£12,000	£12,000	£12,000	£12,000	£12,000	£12,000	£12,000	£12,000	£12,000	£12,000	£12,000	£5,000	£2,000	£1,000	£1,000	£1,000	£1,000	£1,000	£1,000	£1,000	£1,000	£3,000	£203,000	20%	Based on 40 hours per week and benchmarked market rates. Also includes assessed hours through defects period.		
Supervisor - out of hours working	£0	£0	£0	£0	£0	£6,000	£6,000	£6,000	£6,000	£6,000	£6,000	£6,000	£6,000	£6,000	£6,000	£6,000	£6,000	£6,000	£3,000	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£81,000	20%	Based on 20 hours per week and benchmarked market rates	
In-House Project	£0	£0	£0	£0	£0	£732	£3,108	£4,119	£3,141	£4,639	£4,823	£5,335	£5,372	£4,770	£4,504	£3,180	£2,120	£2,120	£1,223	£768	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£767	£50,722	20%	Based on 1.00% of Works Cost	
Financial Vetting	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	As instructed by Jason Wood (HDUHB) - 26 January 2021		
Audit	£0	£0	£0	£0	£0	£0	£1,500	£1,500	£1,500	£1,500	£1,500	£1,500	£1,500	£1,500	£1,500	£1,500	£1,500	£1,500	£1,500	£500	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£20,000	20%	As instructed by Jason Wood (HDUHB) - 26 January 2021
Specialist Advisors	£1,594	£1,594	£1,594	£1,594	£0	£1,000	£2,000	£2,000	£2,000	£2,000	£2,000	£1,000	£1,000	£1,000	£1,000	£1,000	£1,000	£1,000	£1,000	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£25,375	0%	Based on 0.5% of Works Cost. Consultants yet to be identified and appointed
Escalation on Health Board's external consultant's base DFL rates (PM and CA)	£420	£1,250	£1,600	£1,020	£580	£1,990	£2,270	£2,330	£2,270	£2,360	£2,370	£2,340	£2,350	£2,310	£2,300	£2,220	£2,160	£2,160	£1,930	£2,570	£1,200	£530	£130	£400	£130	£400	£130	£400	£130	£400	£130	£400	£1,040	£43,690	Part 0% & Part 20%	Actual for year 2 to June 2019 (4.1%), year 3 to June 2020 (4.42%), forecast year 4 to June 2021 (-2.66%) and forecast for year 5 to June 2022 (assessed 4%) and year 6 to June 2023 (assessed 3%)
SCP (IHP):																																				
Constructor - Pre-Healthcare Planner	£14,200	£27,250	£45,417	£18,166	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£105,032	20%	Refer to OBC and FBC cost report	
Architect (HLM)	£2,561	£17,213	£28,688	£11,475	£0	£14,034	£14,034	£14,034	£11,442	£11,442	£11,442	£10,094	£10,094	£10,094	£10,094	£9,031	£9,031	£7,969	£5,917	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	Not applicable		
Civil and Structural Engineer (Hydrock)	£0	£2,725	£4,542	£1,817	£0	£1,063	£1,063	£1,063	£1,063	£1,063	£1,063	£1,063	£1,063	£1,063	£1,063	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£1,000	£20,709	0%		
Building Services Engineer (Hydrock)	£5,149	£9,390	£15,651	£6,260	£0	£9,563	£9,563	£9,563	£9,563	£9,563	£9,563	£9,563	£8,500	£8,500	£8,500	£8,500	£8,500	£8,500	£7,916	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£2,000	£164,303	0%		
Principal Designer (HLM)	£0	£0	£0	£0	£0	£2,125	£2,125	£2,125	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£1,000	£7,375	0%		
BREEAM Advisor	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0																									



Estimated BJC Project Costs - OBC (Stage 2), FBC (Stage 3), Design Completion & Construction (Stage 4), Operational Commissioning (Stage 5) & Project Closure (Stage 6) - Forecast Cashflow  
On-Costs - Building abnormalities (Annex A):  
Issue Version 1 - 19 March 2021  
Prepared by: Lee Wakemans

Clarifications:  
Basis of Costs: Based on the SCP's (Integrated Healthcare Projects (IHP)) Phase 1 Cost Plan Rev E  
Risks: IHP's costs based on limited site surveys and design solutions leading to the requirement for a larger than normal Quantified Risk Contingency as discussed and agreed in principle with H DUHB and NWSSP-SES.

OBC Cost Head / Organisation	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Totals	VAT Rating	Clarifications
	Approval	Construction Period - 78 weeks															Defects Period - 12 months													
Works Cost - Building abnormalities:																														
Withybush General Hospital - Stem corridors (hospital streets) and surrounding areas	£0	£72,013	£305,774	£400,554	£206,125	£206,125	£206,125	£206,125	£206,125	£206,125	£206,125	£206,125	£206,125	£206,125	£118,951	£45,751	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£45,751	£3,050,043	20%	Based on costs produced by the SCP (IHP) and reviewed by the Cost Advisor (Lee Wakemans)
Withybush General Hospital - Boiler house	£0	£0	£0	£0	£0	£0	£5,153	£3,406	£0	£0	£0	£0	£0	£0	£0	£132	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£132	£8,824	20%	
Withybush General Hospital - Underground ducts	£0	£0	£0	£0	£0	£0	£0	£51,531	£103,063	£51,531	£35,987	£0	£0	£0	£0	£3,744	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£3,744	£249,600	20%	
Withybush General Hospital - Pitched roof plant and non-plant spaces	£0	£0	£0	£0	£0	£51,531	£51,531	£51,531	£7,087	£0	£0	£0	£0	£0	£0	£2,500	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£2,500	£166,681	20%	
Residential Blocks	£0	£0	£0	£0	£99,321	£103,063	£103,063	£103,063	£103,063	£103,063	£92,756	£0	£0	£0	£0	£10,939	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£10,939	£729,268	20%	
Mental Health - Bro Cerwyn / St Brynach Day Hospitals	£0	£0	£0	£0	£0	£90,388	£103,063	£103,063	£103,063	£103,063	£103,063	£103,064	£0	£0	£0	£10,960	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£10,960	£730,684	20%	
Totals	£0.00	£72,012.86	£305,774.07	£400,554.47	£305,446.33	£451,106.62	£468,934.38	£518,718.72	£522,399.08	£463,781.25	£437,931.11	£309,188.50	£206,125.00	£206,125.00	£118,950.58	£74,026.51	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£74,026.51	£4,935,101		

Estimated BJC Project Costs - OBC (Stage 2), FBC (Stage 3), Design Completion & Construction (Stage 4), Operational Commissioning (Stage 5) & Project Closure (Stage 6) - Forecast Cashflow

Non-works Costs:  
Issue Version 1 - 19 March 2021  
Prepared by: Lee Wakemans

Clarifications:  
Basis of Costs: Based on indicative estimated costs provided by HDUHB and IHP and benchmark cost data.

OBC Cost Head / Organisation	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Totals	VAT Rating	Clarifications		
	Approval																																			
Non-works Costs:																																				
Hywel Dda University Health																																				
Legal Fees (Titting, leases and conveyancing)	£0	£0	£0	£0	£0	£2,500	£2,500	£2,500	£2,500	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£10,000	20%	As instructed by Jason Wood (H DUHB) - 26 January 2021		
Mid & West Wales Fire Authorities' Inspections	£0	£0	£0	£0	£0	£2,500	£2,500	£2,500	£2,500	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£10,000	20%	As instructed by Jason Wood (H DUHB) - 26 January 2021.	
Business case writer (Strategic Healthcare Planning Consultant	£0	£0	£0	£5,000	£5,000	£2,000	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£12,000	20%	JW to check with the Fire Officer. Included in OBC (Stage 2) and FBC (Stage 3)	
Planning Application Fee	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	20%	Agreed with Jason Wood (H DUHB) and Miles Brown (Mace), not required - 26 January 2021	
Building Control Consultant	£0	£0	£0	£0	£0	£1,000	£0	£0	£0	£1,000	£0	£0	£0	£0	£1,000	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£3,000	20%	Minimal advice to support the Local Authority's Building Control	
Building Control Fees	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	20%	Included by IHP	
Utilities Services Specialist	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	20%	Agreed with Jason Wood (H DUHB) and Miles Brown (Mace), not required - 26 January 2021	
VAT Recovery / Capital Allowances / Tax	£0	£0	£2,500	£2,500	£2,500	£2,500	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£10,000	20%	As instructed by Jason Wood (H DUHB) - 26 January 2021	
IT support for de-commissioning and re-commissioning	£0	£0	£0	£0	£0	£2,000	£2,000	£2,000	£2,000	£2,000	£2,000	£2,000	£2,000	£2,000	£2,000	£2,000	£2,000	£1,000	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£25,000	20%	As instructed by Jason Wood (H DUHB) - 26 January 2021	
Moving patients, medical records, equipment etc and clinical clean - moving furniture and builder's cleaning	£0	£0	£0	£0	£0	£2,000	£2,000	£2,000	£2,000	£3,000	£3,000	£2,000	£2,000	£2,000	£2,000	£2,000	£2,000	£2,000	£2,000	£2,000	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£30,000	20%	As instructed by Jason Wood (H DUHB) - 29 January 2021	
District Valuer fee	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£2,000	£2,000	£1,000	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£5,000	20%	As instructed by Jason Wood (H DUHB) - 29 January 2021	
Welsh translation costs	£0	£0	£500	£500	£0	£750	£750	£750	£750	£750	£750	£750	£750	£750	£750	£750	£750	£750	£250	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£11,000	20%	As instructed by Jason Wood (H DUHB) - 26 January 2021	
Art	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	20%	As instructed by Jason Wood (H DUHB) - 26 January 2021	
BREEAM accreditation	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	20%	Not required, confirmed by NW SSP-SES
Statutory notice and publicity / consultation	£0	£0	£0	£0	£0	£0	£1,000	£0	£1,000	£0	£1,000	£0	£1,000	£0	£1,000	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£5,000	20%	As instructed by Jason Wood (H DUHB) - 26 January 2021	
Temporary supplies - energy and water	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	20%	Included by IHP	
Other fees & costs - to be confirmed	£0	£0	£0	£0	£0	£0	£1,000	£1,000	£1,000	£0	£1,000	£1,000	£1,000	£0	£1,000	£1,000	£1,000	£1,000	£0	£1,000	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£10,000	20%	To be confirmed	
Asbestos Consultant to issue clearances following multiple surveys	£0	£0	£0	£0	£0	£4,000	£4,000	£4,000	£4,000	£4,000	£4,000	£4,000	£4,000	£4,000	£4,000	£4,000	£4,000	£2,000	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£50,000	20%	As instructed by Jason Wood (H DUHB) - 26 January 2021	
Minor works associated with shutdowns, operational estates support requirements	£0	£0	£0	£0	£0	£5,000	£5,000	£5,000	£5,000	£5,000	£5,000	£5,000	£5,000	£5,000	£5,000	£5,000	£5,000	£5,000	£5,000	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£70,000	20%	As instructed by Jason Wood (H DUHB) - 29 January 2021	
SCP (IHP):																																				
Dilapidation surveys	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	20%	Multiple surveys throughout programme included by IPH	
Acoustics Consultant including survey	£0	£0	£0	£0	£0	£0	£1,063	£1,063	£1,063	£1,063	£1,063	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£5,313	20%		
Builder's Work (TBC)	£0	£850	£850	£425	£0	£0	£1,514	£1,514	£1,514	£1,514	£1,514	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£9,695	20%		
Temporary Services (ETS)	£0	£638	£638	£319	£0	£0	£1,400	£1,400	£1,400	£1,400	£1,400	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£8,594	20%		
IT Consultant	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	20%	Included above by HDUHB
CCTV survey of drainage and inaccessible areas	£0	£0	£0	£0	£0	£3,542	£3,542	£3,542	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£10,625	20%		
Additional Asbestos	£0	£10,179	£10,179	£5,089	£0	£1,063	£0	£1,063	£0	£1,063	£0	£1,063	£0	£1,063	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£30,759	20%		
Fire testing doors	£0	£0	£0	£0	£21,250	£5,316	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£10,631	20%		
Fire testing existing fire compartmentation walls and partitions	£0	£0	£0	£0	£21,250	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£21,250	20%		
Building Control Fees	£0	£0	£0	£0	£0	£1,746	£1,746	£1,746	£1,746	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£6,986	20%	Gary Smith (IHP) confirmed plan fee and inspection fee 28 January 2021	
Hot Office for short term decant whilst works being progressed (50m2)	£0	£963	£963	£826	£0	£2,125	£468	£468	£468	£468	£468	£468	£468	£468	£468	£468	£468	£468	£468	£298	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£0	£11,252	20%		
Furniture removal, storage and reinstatement, attendant	£0	£0	£0	£0	£0	£10,000	£10,000	£10,000	£10,000	£10,000	£10,000	£10,000	£10,000	£10,000	£10,000	£10,000	£10,000	£10,000	£10,000	£0	£0															

Project Risk Register - Version 4 - Health Board Risks - 15 March 2021

Identification				Assessment					Management				Risk Quantification Calculation			
Nr	Risk Description	Risk Consequence: 1. Time 2. Cost 3. Quality 4. Operational	Risk Owner	Probability	Impact	Score	Risk Allocation	Category	Management Actions	Action Owner	Review Date	Comments	Cost if it happens (£)	Likelihood Factor	Expected Value (£)	Basis
STRATEGIC/PLANNING/PROGRAMME RISKS																
S1	The Contractor's ability to undertake the works (or part thereof) is directly affected by a COVID-19 Event. There is risk for disruptions, close down, delays and lock down of workfaces or the entire site due to actions taken by Government, Local Authorities, the Hospital Management, the Client and/or the Constructor that are due to the risk of COVID - 19 infection spread. Business closures and furloughed staff restricting supply of materials and services, social distancing measures, reduced workforce due to illness, compliance with he Construction Leadership Council's Site Operating Procedures.	Time, Cost, Operational	Health Board	3	5	15		Programme	Works on site to be constantly reviewed to ensure compliance with the Construction Leadership Council's Site Operating Procedures and Hywel Dda are to be updated regularly on the impact to programme and costs on the project; Constructor to provide a COVID-19 Management Plan; Constructor to provide a financial/timeline (if any) impact assessment for each COVID-19 Management Plan, which needs to include mitigating actions; Any financial consequences for the Authority must exclude any profit element and be prepared on an open book and transparent basis; Constructor to seek approvals in a timely manner and applications deemed late will be dismissed.	Health Board	Ongoing		£22,000	0.60	£13,200	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S2	Contract choice results in high cost of works, i.e. NEC Option E to encourage contractor tendering	Cost	Health Board	3	5	15		Strategic	Tight schedule of rates to be prepared/agreed AND/OR Additional allowances in cost estimate/budget AND/OR H DUHB to provide additional site supervision/time clerk to sign off resource	Health Board	Ongoing		£25,000	0.60	£15,000	Assume cost if it happens 0.5% of Works Cost
S3	Late involvement of Contractor / SCP in business case work	Time	Health Board	2	4	8		Programme	Ensure timely appointment of SCP	Health Board	Ongoing		£7,500	0.20	£1,500	Based on a 1 week design delay. £7,500 a week for SCP and direct fees.
S4	Incomplete surveys during BJC stage (e.g. vertical compartmentation) to inform the design, programme and cost	Time, Cost, Quality	Health Board	4	3	12		Strategic	Base design on worst case scenarios and assumptions from high level inspections. Suitable allowances to be made in cost estimate	Health Board	Ongoing		£22,000	0.42	£9,240	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S5	Risk regarding delivering the BJC within the MWVFRFA timescales and this risk is associated with further enforcement action - Various causes of delay resulting in delay of delivery of BJC	Time	Health Board	3	4	12		Programme	Ensure programme is actively monitored and target dates achieved	Health Board	Ongoing		£7,500	0.42	£3,150	Based on a 1 week design delay. £7,500 a week for SCP and direct fees.
S6	The extent of fire strategy and fire stopping compliance works in relation to fire service improvement notices are underestimated.	Time, cost	Health Board	3	4	12		Programme	Early procurement of surveys and investigations to ensure business cases are robust.	Health Board	Ongoing		£22,000	0.42	£9,240	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S7	Hospital activities impact on proposed phasing and/or decant strategy OR Decant strategy changes to original agreement.	Time, cost	Health Board	3	5	15		Strategic	Early engagement with the Hospital and Management Teams to discuss requirements and expectations	Health Board	Ongoing		£22,000	0.60	£13,200	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S8	Hospital fails to release work areas in accordance with the Programme	Time, cost	Health Board	3	3	9		Programme	Phasing Strategy to be defined early in the project with consultation with the Hospital	Health Board	Ongoing		£22,000	0.18	£3,960	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S9	Impact of Brexit on labour market shortages, inflation on Plant and Materials	Time, Cost	Health Board	3	3	9		Programme	Ongoing monitoring of indices during BJC stage	Health Board	Ongoing		£25,000	0.18	£4,500	Assume cost if it happens 0.5% of Works Cost
S10	Risk that sign off will not be received in time from project Stakeholders, TA's or Technical Services	Time	Health Board	3	2	6		Programme	JW to direct TA re sign off in respect of review of documents	Health Board	Ongoing		£15,000	0.15	£2,250	Based on a 2 week design delay. £7,500 a week for SCP and direct fees.
S11	Clarity around project bank account arrangements at stage 4 construction and processes to be followed	Cost	Health Board	2	2	4		Strategic	Required at next stage. Ensure Contractor understands their responsibilities in setting up. SCP issues with timing for payments into PBA (potentially 33 days) SCP avg payment time is currently 26 days. SCP cannot open bank account until HB jointly sign the mandate which is linked to WAG approval and Call Off Order.	Health Board	Ongoing		£7,500	0.10	£750	Based on a 1 week design delay. £7,500 a week for SCP and direct fees.
S12	There is a risk that elements of the existing infrastructure to be used by the project works requires remedial work - eg fire alarms, duct dampers	Time, Cost	Health Board	3	3	9		Strategic	SCP to develop design in design proposals period	Health Board	Ongoing		£22,000	0.36	£7,920	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S13	There is a risk that the project will be impacted by delays in governance/approvals process e.g. PBC, FBC, Etc.	Time	Health Board	3	3	9		Strategic	JW to liaise with Boards to mitigate risk	Health Board	Ongoing		£10,000	0.36	£3,600	Based on a 4 week design delay. £2,500 a week for SCP and direct fees.
S14	Changes to Client Team key personnel - A key person from either team leaves and new working practices and relationships need to be established	Time, Quality, Operational	Health Board	3	2	6		Strategic	Communication with all stakeholders regularly throughout the project	Health Board	Ongoing		£7,500	0.15	£1,125	Based on a 1 week design delay. £7,500 a week for SCP and direct fees.
S14A	Changes to SCP key personnel - A key person from either team leaves and new working practices and relationships need to be established	Time, Quality, Operational	Health Board	3	2	6		Strategic	Communication with all stakeholders regularly throughout the project	Health Board	Ongoing		£22,000	0.15	£3,300	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S15	Phasing strategy and phasing interface between hospital and works not aligned	Time, Cost, Operational	Health Board	2	5	10		Strategic	Phasing strategy to be agreed with the Hospital as early as possible	Health Board	Ongoing		£22,000	0.35	£7,700	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S16	Other hospital works concurrent with and disrupting our works.	Time, cost	Health Board	2	4	8		Strategic	Early engagement with the Hospital to determine	Health Board	Ongoing		£22,000	0.20	£4,400	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S17	Unrealistic programme set for the main construction phase.	Quality, Operational	Health Board	4	3	12		Programme	(1) Review with appointed Designed for Life: Building for Wales Supply Chain Partner (SCP)/constructor regularly as design develops. Outline dates passed to MHRA during BJC process.	Health Board	Ongoing		£22,000	0.48	£10,560	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S18	Public engagement plans / processes are delayed / poorly coordinated	Strategic	Health Board	2	3	6		Strategic	Liaise with the planning consultant. Public engagement info published online etc. due to Covid-19.	Health Board	Ongoing		£7,500	0.15	£1,125	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S19	Staff Engagement plans / processes are delayed / poorly coordinated	Strategic	Health Board	2	3	6		Strategic	Involved early. Continuing liaison	Health Board	Ongoing		£22,000	0.15	£3,300	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.



Nr	Risk Description	Risk Consequence: 1. Time 2. Cost 3. Quality 4. Operational	Risk Owner	Probability	Impact	Score	Risk Allocation	Category	Management Actions	Action Owner	Review Date	Comments	Cost if it happens (£)	Likelihood Factor	Expected Value (£)	Basis
S20	Non availability of labour - Other projects or events reduce the availability of some resources	Time, Cost, Quality	Health Board	2	3	6		Programme	Liaise with suppliers at earliest opportunity	Health Board	Ongoing		£22,000	0.15	£3,300	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S21	Costs associated with non availability of labour - Other projects or events reduce the availability of some resources	Time, Cost, Quality	Health Board	2	3	6		Financial	Liaise with suppliers at earliest opportunity	Health Board	Ongoing		£22,000	0.15	£3,300	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S22	Emergency events disrupting / suspending / ceasing the works	Time, Cost, Quality	Health Board	3	3	9		Programme / Financial	Alternative work areas for IHP to relocate to be identified	Health Board	Ongoing		£22,000	0.36	£7,920	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S23	Decant requirements as a result of lobby installation. Lobbies in Phase 2 however risk that Phase 1 work requirements will increase - unknown until fire strategy developed.	Time, Cost, Quality	Health Board	3	3	9		Programme / Financial	Works to lobbies to be deferred to Phase 2.  Design of lobbies will be carried out throughout Phase 1 therefore early engagement with stakeholders will take place to discuss possible decant of areas.	Health Board	Ongoing		£22,000	0.36	£7,920	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S24	Change of Fire Officer and potential additional requirements from replacement (i.e. Gareth Lloyd leaving May 2021).	Time, Cost, Quality	Health Board	5	3	15		Programme / Financial	Early liaison with replacement	Health Board	Ongoing		£22,000	0.60	£13,200	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S25	Advanced works being completed by the Health Board is not complete in time for Phase 1 to commence.	Time, Cost, Quality	Health Board	3	4	12		Programme / Financial	Close monitoring of programme - JW to update on any potential delays.	Health Board	Ongoing		£22,000	0.42	£9,240	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
FINANCIAL RISKS																
F1	Capital costs underestimated at PBC	Cost, time	Health Board	3	4	12		Financial	Review as part of BJC development and completion of surveys	Health Board	Ongoing		£7,500	0.42	£3,150	Assume cost if it happens 0.15% of Works Cost
F2	Risk that the main contractor could fail	Time, cost	Health Board	1	5	5		Financial	Procurement to check financial stability of tenderers	Health Board	Ongoing		£2,500	0.13	£313	Assume cost if it happens 0.05% of Works Cost
F3	Risk of other subcontractor failure	Time, cost	Health Board	1	5	5		Financial	SCP to ensure financial stability of suppliers as part of tendering process	Health Board	Ongoing		£2,500	0.13	£313	Assume cost if it happens 0.05% of Works Cost
F4	Bankruptcy of suppliers	Time, cost	Health Board	1	5	5		Financial	Procurement to check financial stability of tenderers	Health Board	Ongoing		£2,500	0.13	£313	Assume cost if it happens 0.05% of Works Cost
F5	There is the risk that the rate for VAT will change again	Cost	Health Board	1	3	3		Financial	Government policy to be monitored	Health Board	Ongoing		£2,500	0.08	£188	Assume cost if it happens 0.05% of Works Cost
F6	Significant changes in inflation of key materials or shortages	Time, cost, quality	Health Board	3	3	9		Financial	Contractor to procure the materials in a timely manner	Health Board	Ongoing		£2,500	0.32	£788	Assume cost if it happens 0.05% of Works Cost
F7	Increased costs due to unknown works	Time, cost, quality	Health Board	4	4	16		Financial	Contractor to procure the materials in a timely manner. Option E so HB take cost.	Health Board	Ongoing		£2,500	0.80	£2,000	Assume cost if it happens 0.05% of Works Cost
F8	Increased costs due to Statutory changes during the works	Time, cost, quality	Health Board	3	4	12		Financial	Monitor statutory changes during the works.	Health Board	Ongoing		£2,500	0.42	£1,050	Assume cost if it happens 0.05% of Works Cost
DESIGN RISKS																
D1	Fire Officer Requirements - Unforeseen items required to meet the fire officer's requirements	Time, Cost	Health Board	3	4	12		Design	TA Team and Contractor will engage with the Fire Officer at an early stage so that the requirements can be agreed and incorporated in a timely manner.	Health Board	Ongoing		£22,000	0.42	£9,240	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D2	Scope of works changing arising from Hospital request, third party requirements (e.g. Planners), general briefing changes etc	Time, cost	Health Board	2	3	6		Design	To be managed by Project Sponsor/Client Representative	Health Board	Ongoing		£1,250	0.15	£188	Assume cost if it happens 0.025% of Works Cost
D3	Risk that there will be changes in Building Regs, general statutory changes and changes to Hywel Dda Standards after design proposals	Cost, time	Health Board	2	3	6		Design	Ensure all changes prior to tender are identified	Health Board	Ongoing		£1,250	0.15	£188	Assume cost if it happens 0.025% of Works Cost
D4	Existing survey information is inaccurate or incomplete	Time, Cost	Health Board	4	3	12		Design	SCP to check information as part of the design process	Health Board	Ongoing		£22,000	0.42	£9,240	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D5	Scope of Works not fully defined and contradictions within the Contract Documents.	Time, Cost, Quality	Health Board	4	3	12		Design	TA team to ensure scope of works is as detailed as possible and includes all relevant standards	Health Board	Ongoing		£2,500	0.42	£1,050	Assume cost if it happens 0.05% of Works Cost
D6	Existing structural defects not apparent at time of submitting design proposals (i.e. after surveys completed)	Time, cost	Health Board	3	3	9		Design	Works to be captured early/as soon as they become apparent, with allowances made in programme and budget	Health Board	Ongoing		£750	0.32	£236	Assume cost if it happens 0.04% of Works Cost
D7	Design / scope is not compliant with Hospital Fire Strategy & Evacuation strategy.  The Hospital does not have a full fire or evacuation strategy in place which can be used to inform the scope of works and design.	Time, Cost, Quality, Operational	Health Board	4	4	16		Design	Explore every avenue to obtain fire strategy information from Hospital.  Recommend and appoint Fire Engineer/ consultant to validate / confirm the fire strategy.  Clearly state assumptions made in design so that these can be used as basis for when fire strategy is generated.	Health Board	Ongoing		£22,000	0.72	£15,840	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D8	Lack of detailed survey information and full fire strategy - Design options created using a nominal scheme based on assumptions	Time, Cost, Quality, Operational	Health Board	2	4	8		Design	Recommend and appoint Fire Engineer/ consultant to validate / confirm the fire strategy.  Base design assumptions on worst case scenarios  Clearly state assumptions made in design so that these can be used as basis for when fire strategy is generated.	Health Board	Ongoing		£22,000	0.20	£4,400	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D9	Infection control sign off of details is delayed or not acceptable	Time, Operational	Health Board	2	2	4		Design	Include as key milestones on programme to manage expectations.  Meeting to be arranged with key stakeholder Tracey Nicholas re. infection control.	Health Board	Ongoing		£22,000	0.10	£2,200	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D10	Compliance with HTMs / HBNs	Time, Cost, Quality	Health Board	3	3	9		Design	Review designs/derrogation schedule to be approved.	Health Board	Ongoing		£22,000	0.32	£6,930	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D11	Consequential improvements requiring building control approval	Time, Cost, Quality	Health Board	2	3	6		Design	Review designs/derrogation schedule to be approved.	Health Board	Ongoing		£1,250	0.15	£188	Assume cost if it happens 0.025% of Works Cost
D12	Existing partitions/walls in poor/dangerous structural condition	Time, Cost, Quality	Health Board	3	3	9		Design	Carry out survey and identify structural deficiencies and remedial works	Health Board	Ongoing		£1,250	0.32	£394	Assume cost if it happens 0.025% of Works Cost
D13	Existing partitions/walls not meeting basic fire and smoke resistance requirements	Time, Cost, Quality	Health Board	3	4	12		Design	Carry out survey and identify deficiencies and remedial works	Health Board	Ongoing		£3,125	0.42	£1,313	Assume cost if it happens 0.0625% of Works Cost
D14	Existing wall construction not as fire tested ie 2 layers 9.5mm plasterboard	Time, Cost, Quality	Health Board	3	4	12		Design	Carry out survey and identify deficiencies and remedial works	Health Board	Ongoing		£500	0.42	£210	Assume cost if it happens 0.01% of Works Cost
D15	Existing doorsets not meeting requirements	Time, Cost, Quality	Health Board	3	4	12		Design	Carry out survey and identify deficiencies and remedial works	Health Board	Ongoing		£1,250	0.42	£525	Assume cost if it happens 0.025% of Works Cost

Nr	Risk Description	Risk Consequence: 1. Time 2. Cost 3. Quality 4. Operational	Risk Owner	Probability	Impact	Score	Risk Allocation	Category	Management Actions	Action Owner	Review Date	Comments	Cost if it happens (£)	Likelihood Factor	Expected Value (£)	Basis
D16	Aesthetic outcomes of the Works - increase decorations etc	Time, Cost, Quality	Health Board	3	3	9		Design	Stakeholder engagement - manage expectations e.g if carrying out works within room, 1 wall will be decorated and existing 3 will have a different finish.	Health Board	Ongoing		£1,250	0.32	£394	Assume cost if it happens 0.025% of Works Cost
D17	Extent of asbestos works	Time, Cost, Quality	Health Board	4	4	16		Programme	Survey where possible and proceed with caution	Health Board	Ongoing		£1,250	0.80	£1,000	Assume cost if it happens 0.025% of Works Cost
D18	Certification of existing glazed screens / doors / windows	Time, Cost, Quality	Health Board	3	3	9		Design	Carry out survey and identify deficiencies and remedial works	Health Board	Ongoing		£1,250	0.32	£394	Assume cost if it happens 0.025% of Works Cost
D19	Fire performance of the existing and new partitions	Time, Cost, Quality	Health Board	3	3	9		Design	Survey the existing fire compatment partitions and identify any deficiencies and remedial works required.	Health Board	Ongoing		£1,250	0.32	£394	Assume cost if it happens 0.025% of Works Cost
D20	Adequacy of existing fire strategy	Time, Cost, Quality	Health Board	3	3	9		Design	Fire engineer to review	Health Board	Ongoing		£1,250	0.32	£394	Assume cost if it happens 0.025% of Works Cost
D21	Completeness, adequacy and condition of the existing M&E deisgns and requirement for services diversions	Time, Cost, Quality	Health Board	4	4	16		Design	Thorough surveys to be carried out to establish routes where diversions / modification required.  Surveys to establish flow rates 'before and after' service diversion to confirm reduction.	Health Board	Ongoing		£44,000	0.72	£31,680	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D22	Establish fire rating / structural integrity / acosutics / putty pads / baffles (if required) of existing lightweight partition main compartment wall construction	Time, Cost, Quality	Health Board	3	4	12		Design	Intrusive wall survey to establish construction / fire rating / extent / closure to soffit and adjacent fabrics / smoke seal head and sole.Hydrock initial review of existing partition design/capability. Hydrock to provide info re: fire engineered solutions to each scenario.	Health Board	Ongoing		£22,000	0.42	£9,240	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D23	Agree scope and performance for the installation of new fire dampers (FSD / FD)	Time, Cost, Quality	Health Board	3	4	12		Design	Hydrock to confirm principles and connection to existing network. Survey of all fire dampers & associated ventilation systems. Impact upon operation of the Hospital. Review with Gareth Lloyd - establish from Health Board if FSD's will be required. Consult Fire Service.	Health Board	Ongoing		£22,000	0.42	£9,240	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D24	Review fire stopping compartmentation requirements for underground ducts v working environment and agree principles.		Health Board	3	3	9		Design	Hydrock to confirm principles and compartmentation requirements. Survey of all underground ducts to establish extent. Impact upon operation of the Hospital. Hydrock to review. AIB lids to GF duct cover? Consider situation where ducts cross fire compartment? Consider lids as barrier and assume as single compartment?	Health Board	Ongoing		£22,000	0.32	£6,930	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D25	Additional site attendance/design management from design team over anticipated input	Cost, time	Health Board	3	3	9		Design	Allowance made in budgets, however, opotential for excessive requirements - allow in risk.	Health Board	Ongoing		£125	0.32	£39	Assume cost if it happens 0.025% of Works Cost
D26	Ward Lobbies/stair lobbies. Risk of impact on existing accommodation layouts being rendered inappropriate.	Cost, time	Health Board	3	3	9		Design	Review design/feasibility during project process. Achieve stakeholder engagement/sign off.	Health Board	Ongoing		£1,250	0.32	£394	Assume cost if it happens 0.025% of Works Cost
D27	Certification of existing fire stopping works	Time, Cost, Quality	Health Board	3	3	9		Design	Hydrock to confirm principles of certification and warranting the recent works. Survey of all existing fire stopping to establish if constructed to approved details and therefore satisfy the fire requirement.	Health Board	Ongoing		£1,250	0.32	£394	Assume cost if it happens 0.025% of Works Cost
D28	Requirement to remodel ward entrances, stair lobbies and secondary means of escape - providing lobbies etc.	Time, Cost, Quality	Health Board	3	3	9		Design	Deferred to Phase 2 works	Health Board	Ongoing		£1,250	0.32	£394	Assume cost if it happens 0.025% of Works Cost
D29	Fire alarm system sufficiency / extension	Time, Cost, Quality	Health Board	3	3	9		Design	Hydrock to confirm requirements.	Health Board	Ongoing		£1,250	0.32	£394	Assume cost if it happens 0.025% of Works Cost
D30	Refurbishment of existing doors by accredited persons and compliance with Fire Officer requirements.	Time, Cost, Quality	Health Board	3	3	9		Design	Agreement with fire officer to be sought	Health Board	Ongoing		£1,250	0.32	£394	Assume cost if it happens 0.025% of Works Cost
D31	Compatibility of newly installed & existing equipment/systems etc.	Time, Cost, Quality	Health Board	3	3	9		Design	Engineered judgement to be made for each scenario.	Health Board	Ongoing		£1,250	0.32	£394	Assume cost if it happens 0.025% of Works Cost
	<b>SITE &amp; CONSTRUCTION RISKS</b>															
C1	Control of noise - noise levels during construction not acceptable to hospital causing works to stop	Time, cost	Health Board	3	4	12		Construction	Hospital to advise on a specific times/ periods when specific restriction apply during early meetings	Health Board	Ongoing		£22,000	0.42	£9,240	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C2	Control of dust - both internally and externally - not managed appropriately causing works to stop.	Time, Cost, Operational	Health Board	3	4	12		Construction	SCP to identify areas where dust control is required and select appropriate equipment to manage e.g extraction, wiping down, vacuum. WGH (Helen Johns and Gareth Lloyd) to explore options for workstation areas within hospital e.g for cutting station.	Health Board	Ongoing		£22,000	0.42	£9,240	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C3	Disruption to existing services during construction impacting on hospital services	Time, Cost, Operational	Health Board	4	5	20		Construction	Liaise with Hospital regularly throughout the project. Contractor strategy to be developed to deal with such circumstances.	Health Board	Ongoing		£22,000	1.00	£22,000	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C4	Ward disruption to works - Events happening on wards results in contractors having to stop works	Time, cost	Health Board	4	3	12		Programme	Suitable contingency/float to be allowed for within programme AND/OR Suitable decant strategy to be prepared and agreed AND/OR Hospital wards/wings to be shut down during construction works and patients redirected to other hospitals/temporary relocation of client services	Health Board	Ongoing		£22,000	0.42	£9,240	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C5	There is a risk that the weather will impact on site progress	Time, Cost, Quality	Health Board	3	3	9		Construction	SCP to ensure effective mitigation measures in place including protection, maximise off-site processes	Health Board	Ongoing		£22,000	0.32	£6,930	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C6	Discovery of vermin - Specialist removal required; delay to works	Time	Health Board	1	4	4		Construction	Hywel Dda to commission Surveys in this regard	Health Board	Ongoing		£22,000	0.10	£2,200	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C7	Delayed delivery times - Delay or disruption of the Works . Re-sequencing of Works or out of hours works required.	Time	Health Board	3	2	6		Construction	Contractor strategy to be developed to deal with such circumstances.	Health Board	Ongoing		£44,000	0.15	£6,600	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C8	Restrictions on use of crane/cherry picker/ mobile access	Time, Cost	Health Board	4	2	8		Construction	Hold meeting to discuss and determine mitigation measures where necessary. Hold review meetings when project requirements/Hospital restrictions etc change so that mitigation measures can be updated.	Health Board	Ongoing		£22,000	0.20	£4,400	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C9	Restrictions to movement of materials into and out of the work areas - Aborted visits to site; delays to works	Time	Health Board	2	3	6		Construction	Hold meeting to discuss and determine mitigation measures where necessary	Health Board	Ongoing		£44,000	0.15	£6,600	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C10	Long lead in items	Time	Health Board	3	2	6		Construction	Early engagement of the Supply Chain. Fire dampers 6 to 8 weeks; Door sets 12 to 14 weeks from order.	Health Board	Ongoing		£22,000	0.15	£3,300	Based on a 1 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.

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Project Risk Register - Version 4 - Risks to be held by Welsh Government (excluding overboarding) - 17 March 2021

Identification				Assessment					Management				Risk Quantification Calculation			
Nr	Risk Description	Risk Consequence: 1. Time 2. Cost 3. Quality 4. Operational	Risk Owner	Probability	Impact	Score	Risk Allocation	Category	Management Actions	Action Owner	Review Date	Comments	Cost if it happens (£)	Likelihood Factor	Expected Value (£)	Basis
STRATEGIC/PLANNING/PROGRAMME RISKS																
S1	The Contractor's ability to undertake the works (or part thereof) is directly affected by a COVID-19 Event. There is risk for disruptions, close down, delays and lock down of workfaces or the entire site due to actions taken by Government, Local Authorities, the Hospital Management, the Client and/or the Constructor that are due to the risk of COVID - 19 infection spread. Business closures and furloughed staff restricting supply of materials and services, social distancing measures, reduced workforce due to illness, compliance with he Construction Leadership Council's Site Operating Procedures.	Time, Cost, Operational	Welsh Government	3	5	15		Programme	Works on site to be constantly reviewed to ensure compliance with the Construction Leadership Council's Site Operating Procedures and Hywel Dda are to be updated regularly on the impact to programme and costs on the project; Constructor to provide a COVID-19 Management Plan; Constructor to provide a financial/timeline (if any) impact assessment for each COVID-19 Management Plan, which needs to include mitigating actions; Any financial consequences for the Authority must exclude any profit element and be prepared on an open book and transparent basis; Constructor to seek approvals in a timely manner and applications deemed late will be dismissed.	Welsh Government	Ongoing		£88,000	0.60	£52,800	Based on a 4 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S2	Contract choice results in high cost of works, i.e. NEC Option E to encourage contractor tendering	Cost	Welsh Government	3	5	15		Strategic	Tight schedule of rates to be prepared/agreed AND/OR Additional allowances in cost estimate/budget AND/OR HDUHB to provide additional site supervision/time clerk to sign off resource	Welsh Government	Ongoing		£125,000	0.60	£75,000	Assume cost if it happens 2.5% of Works Cost
S3	Late involvement of Contractor / SCP in business case work	Time	Welsh Government	2	4	8		Programme	Ensure timely appointment of SCP	Welsh Government	Ongoing		£22,500	0.20	£4,500	Based on a 3 week design delay. £7,500 a week for SCP and direct fees.
S4	Incomplete surveys during BJC stage (e.g. vertical compartmentation) to inform the design, programme and cost	Time, Cost, Quality	Welsh Government	4	3	12		Strategic	Base design on worst case scenarios and assumptions from high level inspections. Suitable allowances to be made in cost estimate	Welsh Government	Ongoing		£110,000	0.42	£46,200	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S5	Risk regarding delivering the BJC within the MWVFRA timescales and this risk is associated with further enforcement action - Various causes of delay resulting in delay of delivery of BJC	Time	Welsh Government	3	4	12		Programme	Ensure programme is actively monitored and target dates achieved	Welsh Government	Ongoing		£37,500	0.42	£15,750	Based on a 5 week design delay. £7,500 a week for SCP and direct fees.
S6	The extent of fire strategy and fire stopping compliance works in relation to fire service improvement notices are underestimated.	Time, cost	Welsh Government	3	4	12		Programme	Early procurement of surveys and investigations to ensure business cases are robust.	Welsh Government	Ongoing		£110,000	0.42	£46,200	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S7	Hospital activities impact on proposed phasing and/or decant strategy OR Decant strategy changes to original agreement.	Time, cost	Welsh Government	3	5	15		Strategic	Early engagement with the Hospital and Management Teams to discuss requirements and expectations	Welsh Government	Ongoing		£220,000	0.60	£132,000	Based on a 10 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S8	Hospital fails to release work areas in accordance with the Programme	Time, cost	Welsh Government	3	3	9		Programme	Phasing Strategy to be defined early in the project with consultation with the Hospital	Welsh Government	Ongoing		£110,000	0.18	£19,800	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S9	Impact of Brexit on labour market shortages, inflation on Plant and Materials	Time, Cost	Welsh Government	3	3	9		Programme	Ongoing monitoring of indices during BJC stage	Welsh Government	Ongoing		£250,000	0.18	£45,000	Assume cost if it happens 5% of Works Cost
S10	Risk that sign off will not be received in time from project Stakeholders, TA's or Technical Services	Time	Welsh Government	3	2	6		Programme	JW to direct TA re sign off in respect of review of documents	Welsh Government	Ongoing		£37,500	0.15	£5,625	Based on a 5 week design delay. £7,500 a week for SCP and direct fees.
S11	Clarity around project bank account arrangements at stage 4 construction and processes to be followed	Cost	Welsh Government	2	2	4		Strategic	Required at next stage. Ensure Contractor understands their responsibilities in setting up. SCP issues with timing for payments into PBA (potentially 33 days) SCP avg payment time is currently 26 days. SCP cannot open bank account until HB jointly sign the mandate which is linked to WAG approval and Call Off Order.	Welsh Government	Ongoing		£18,750	0.10	£1,875	Based on a 2.5 week design delay. £7,500 a week for SCP and direct fees.
S12	There is a risk that elements of the existing infrastructure to be used by the project works requires remedial work - eg fire alarms, duct dampers	Time, Cost	Welsh Government	3	3	9		Strategic	SCP to develop design in design proposals period	Welsh Government	Ongoing		£110,000	0.36	£39,600	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S13	There is a risk that the project will be impacted by delays in governance/approvals process e.g. PBC, FBC, Etc.	Time	Welsh Government	3	3	9		Strategic	JW to liaise with Boards to mitigate risk	Welsh Government	Ongoing		£25,000	0.36	£9,000	Based on a 10 week design delay. £2,500 a week for SCP and direct fees.
S14	Changes to Client Team key personnel - A key person from either team leaves and new working practices and relationships need to be established	Time, Quality, Operational	Welsh Government	3	2	6		Strategic	Communication with all stakeholders regularly throughout the project	Welsh Government	Ongoing		£37,500	0.15	£5,625	Based on a 5 week design delay. £7,500 a week for SCP and direct fees.
S14A	Changes to SCP key personnel - A key person from either team leaves and new working practices and relationships need to be established	Time, Quality, Operational	Welsh Government	3	2	6		Strategic	Communication with all stakeholders regularly throughout the project	Welsh Government	Ongoing		£55,000	0.15	£8,250	Based on a 2.5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S15	Phasing strategy and phasing interface between hospital and works not aligned	Time, Cost, Operational	Welsh Government	2	5	10		Strategic	Phasing strategy to be agreed with the Hospital as early as possible	Welsh Government	Ongoing		£110,000	0.35	£38,500	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S16	Other hospital works concurrent with and disrupting our works.	Time, cost	Welsh Government	2	4	8		Strategic	Early engagement with the Hospital to determine	Welsh Government	Ongoing		£110,000	0.20	£22,000	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S17	Unrealistic programme set for the main construction phase.	Quality, Operational	Welsh Government	4	3	12		Programme	(1) Review with appointed Designed for Life: Building for Wales Supply Chain Partner (SCP)/constructor regularly as design develops. Outline dates passed to MHRA during BJC process.	Welsh Government	Ongoing		£110,000	0.48	£52,800	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S18	Public engagement plans / processes are delayed / poorly coordinated	Strategic	Welsh Government	2	3	6		Strategic	Liaise with the planning consultant. Public engagement info published online etc. due to Covid-19.	Welsh Government	Ongoing		£18,750	0.15	£2,813	Based on a 2.5 week design delay. £7,500 a week for SCP and direct fees.
S19	Staff Engagement plans / processes are delayed / poorly coordinated	Strategic	Welsh Government	2	3	6		Strategic	Involved early. Continuing liaison	Welsh Government	Ongoing		£55,000	0.15	£8,250	Based on a 2.5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S20	Non availability of labour - Other projects or events reduce the availability of some resources	Time, Cost, Quality	Welsh Government	2	3	6		Programme	Liaise with suppliers at earliest opportunity	Welsh Government	Ongoing		£110,000	0.15	£16,500	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.



Nr	Risk Description	Risk Consequence: 1. Time 2. Cost 3. Quality 4. Operational	Risk Owner	Probability	Impact	Score	Risk Allocation	Category	Management Actions	Action Owner	Review Date	Comments	Cost if it happens (£)	Likelihood Factor	Expected Value (£)	Basis
S21	Costs associated with non availability of labour - Other projects or events reduce the availability of some resources	Time, Cost, Quality	Welsh Government	2	3	6		Financial	Liaise with suppliers at earliest opportunity	Welsh Government	Ongoing		£110,000	0.15	£16,500	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S22	Emergency events disrupting / suspending / ceasing the works	Time, Cost, Quality	Welsh Government	3	3	9		Programme / Financial	Alternative work areas for IHP to relocate to be identified	Welsh Government	Ongoing		£66,000	0.36	£23,760	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S23	Decant requirements as a result of lobby installation. Lobbies in Phase 2 however risk that Phase 1 work requirements will increase - unknown until fire strategy developed.	Time, Cost, Quality	Welsh Government	3	3	9		Programme / Financial	Works to lobbies to be deferred to Phase 2.  Design of lobbies will be carried out throughout Phase 1 therefore early engagement with stakeholders will take place to discuss possible decant of areas.	Welsh Government	Ongoing		£66,000	0.36	£23,760	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S24	Change of Fire Officer and potential additional requirements from replacement (i.e. Gareth Lloyd leaving May 2021).	Time, Cost, Quality	Welsh Government	5	3	15		Programme / Financial	Early liasion with replacement	Welsh Government	Ongoing		£66,000	0.60	£39,600	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
S25	Advanced works being completed by the Health Board is not complete in time for Phase 1 to commence.	Time, Cost, Quality	Welsh Government	3	4	12		Programme / Financial	Close monitoring of programme - JW to update on any potential delays.	Welsh Government	Ongoing		£66,000	0.42	£27,720	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
FINANCIAL RISKS																
F1	Capital costs underestimated at PBC	Cost, time	Welsh Government	3	4	12		Financial	Review as part of BJC development and completion of surveys	Welsh Government	Ongoing		£22,500	0.42	£9,450	Assume cost if it happens 0.45% of Works Cost
F2	Risk that the main contractor could fail	Time, cost	Welsh Government	1	5	5		Financial	Procurement to check financial stability of tenderers	Welsh Government	Ongoing		£5,000	0.13	£625	Assume cost if it happens 0.10% of Works Cost
F3	Risk of other subcontractor failure	Time, cost	Welsh Government	1	5	5		Financial	SCP to ensure financial stability of suppliers as part of tendering process	Welsh Government	Ongoing		£5,000	0.13	£625	Assume cost if it happens 0.10% of Works Cost
F4	Bankruptcy of suppliers	Time, cost	Welsh Government	1	5	5		Financial	Procurement to check financial stability of tenderers	Welsh Government	Ongoing		£5,000	0.13	£625	Assume cost if it happens 0.10% of Works Cost
F5	There is the risk that the rate for VAT will change again	Cost	Welsh Government	1	3	3		Financial	Government policy to be monitored	Welsh Government	Ongoing		£5,000	0.08	£375	Assume cost if it happens 0.10% of Works Cost
F6	Significant changes in inflation of key materials or shortages	Time, cost, quality	Welsh Government	3	3	9		Financial	Contractor to procure the materials in a timely manner	Welsh Government	Ongoing		£7,500	0.32	£2,363	Assume cost if it happens 0.15% of Works Cost
F7	Increased costs due to unknown works	Time, cost, quality	Welsh Government	4	4	16		Financial	Contractor to procure the materials in a timely manner. Option E so HB take cost.	Welsh Government	Ongoing		£7,500	0.80	£6,000	Assume cost if it happens 0.15% of Works Cost
F8	Increased costs due to Statutory changes during the works	Time, cost, quality	Welsh Government	3	4	12		Financial	Monitor statutory changes during the works.	Welsh Government	Ongoing		£7,500	0.42	£3,150	Assume cost if it happens 0.15% of Works Cost
DESIGN RISKS																
D1	Fire Officer Requirements - Unforeseen items required to meet the fire officer's requirements	Time, Cost	Welsh Government	3	4	12		Design	TA Team and Contractor will engage with the Fire Officer at an early stage so that the requirements can be agreed and incorporated in a timely manner.	Welsh Government	Ongoing		£66,000	0.42	£27,720	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D2	Scope of works changing arising from Hospital request, third party requirements (e.g. Planners), general briefing changes etc	Time, cost	Welsh Government	2	3	6		Design	To be managed by Project Sponsor/Client Representative	Welsh Government	Ongoing		£3,750	0.15	£563	Assume cost if it happens 0.075% of Works Cost
D3	Risk that there will be changes in Building Regs, general statutory changes and changes to Hywel Dda Standards after design proposals	Cost, time	Welsh Government	2	3	6		Design	Ensure all changes prior to tender are identified	Welsh Government	Ongoing		£3,750	0.15	£563	Assume cost if it happens 0.075% of Works Cost
D4	Existing survey information is inaccurate or incomplete	Time, Cost	Welsh Government	4	3	12		Design	SCP to check information as part of the design process	Welsh Government	Ongoing		£110,000	0.42	£46,200	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D5	Scope of Works not fully defined and contradictions within the Contract Documents.	Time, Cost, Quality	Welsh Government	4	3	12		Design	TA team to ensure scope of works is as detailed as possible and includes all relevant standards	Welsh Government	Ongoing		£7,500	0.42	£3,150	Assume cost if it happens 0.15% of Works Cost
D6	Existing structural defects not apparent at time of submitting design proposals (i.e. after surveys completed)	Time, cost	Welsh Government	3	3	9		Design	Works to be captured early/as soon as they become apparent, with allowances made in programme and budget	Welsh Government	Ongoing		£7,500	0.32	£2,363	Assume cost if it happens 0.15% of Works Cost
D7	Design / scope is not compliant with Hospital Fire Strategy & Evacuation strategy.  The Hospital does not have a full fire or evacuation strategy in place which can be used to inform the scope of works and design.	Time, Cost, Quality, Operational	Welsh Government	4	4	16		Design	Explore every avenue to obtain fire strategy information from Hospital.  Recommend and appoint Fire Engineer/ consultant to validate / confirm the fire strategy.  Clearly state assumptions made in design so that these can be used as basis for when fire strategy is generated.	Welsh Government	Ongoing		£66,000	0.72	£47,520	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D8	Lack of detailed survey information and full fire strategy - Design options created using a nominal scheme based on assumptions	Time, Cost, Quality, Operational	Welsh Government	2	4	8		Design	Recommend and appoint Fire Engineer/ consultant to validate / confirm the fire strategy.  Base design assumptions on worst case scenarios  Clearly state assumptions made in design so that these can be used as basis for when fire strategy is generated.	Welsh Government	Ongoing		£66,000	0.20	£13,200	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D9	Infection control sign off of details is delayed or not acceptable	Time, Operational	Welsh Government	2	2	4		Design	Include as key milestones on programme to manage expectations.  Meeting to be arranged with key stakeholder Tracey Nicholas re. infection control.	Welsh Government	Ongoing		£66,000	0.10	£6,600	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D10	Compliance with HTMs / HBNs	Time, Cost, Quality	Welsh Government	3	3	9		Design	Review designs/derrogation schedule to be approved.	Welsh Government	Ongoing		£66,000	0.32	£20,790	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D11	Consequential improvements requiring building control approval	Time, Cost, Quality	Welsh Government	2	3	6		Design	Review designs/derrogation schedule to be approved.	Welsh Government	Ongoing		£3,750	0.15	£563	Assume cost if it happens 0.075% of Works Cost
D12	Existing partitions/walls in poor/dangerous structural condition	Time, Cost, Quality	Welsh Government	3	3	9		Design	Carry out survey and identify structural deficiencies and remedial works	Welsh Government	Ongoing		£3,750	0.32	£1,181	Assume cost if it happens 0.075% of Works Cost
D13	Existing partitions/walls not meeting basic fire and smoke resistance requirements	Time, Cost, Quality	Welsh Government	3	4	12		Design	Carry out survey and identify deficiencies and remedial works	Welsh Government	Ongoing		£3,750	0.42	£1,575	Assume cost if it happens 0.075% of Works Cost
D14	Existing wall construction not as fire tested ie 2 layers 9.5mm plasterboard	Time, Cost, Quality	Welsh Government	3	4	12		Design	Carry out survey and identify deficiencies and remedial works	Welsh Government	Ongoing		£750	0.42	£315	Assume cost if it happens 0.025% of Works Cost
D15	Existing doorsets not meeting requirements	Time, Cost, Quality	Welsh Government	3	4	12		Design	Carry out survey and identify deficiencies and remedial works	Welsh Government	Ongoing		£3,750	0.42	£1,575	Assume cost if it happens 0.075% of Works Cost
D16	Aesthetic outcomes of the Works - increase decorations etc	Time, Cost, Quality	Welsh Government	3	3	9		Design	Stakeholder engagement - manage expectations e.g if carrying out works within room, 1 wall will be decorated and existing 3 will have a different finish.	Welsh Government	Ongoing		£3,750	0.32	£1,181	Assume cost if it happens 0.075% of Works Cost
D17	Extent of asbestos works	Time, Cost, Quality	Welsh Government	4	4	16		Programme	Survey where possible and proceed with caution	Welsh Government	Ongoing		£3,750	0.80	£3,000	Assume cost if it happens 0.075% of Works Cost

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D18	Certification of existing glazed screens / doors / windows	Time, Cost, Quality	Welsh Government	3	3	9		Design	Carry out survey and identify deficiencies and remedial works	Welsh Government	Ongoing		£3,750	0.32	£1,181	Assume cost if it happens 0.075% of Works Cost
D19	Fire performance of the existing and new partitions	Time, Cost, Quality	Welsh Government	3	3	9		Design	Survey the existing fire compatment partitions and identify any deficiencies and remedial works required.	Welsh Government	Ongoing		£3,750	0.32	£1,181	Assume cost if it happens 0.075% of Works Cost
D20	Adequacy of existing fire strategy	Time, Cost, Quality	Welsh Government	3	3	9		Design	Fire engineer to review	Welsh Government	Ongoing		£3,750	0.32	£1,181	Assume cost if it happens 0.075% of Works Cost
D21	Completeness, adequacy and condition of the existing M&E deisgns and requirement for services diversions	Time, Cost, Quality	Welsh Government	4	4	16		Design	Thorough surveys to be carried out to establish routes where diversions / modification required.  Surveys to establish flow rates 'before and after' service diversion to confirm reduction.	Welsh Government	Ongoing		£110,000	0.72	£79,200	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D22	Establish fire rating / structural integrity / acosutics / putty pads / baffles (if required) of existing lightweight partition main compartment wall construction	Time, Cost, Quality	Welsh Government	3	4	12		Design	Intrusive wall survey to establish construction / fire rating / extent / closure to soffit and adjacent fabrics / smoke seal head and sole.Hydrock initial review of existing partition design/capability. Hydrock to provide info re: fire engineered solutions to each scenario.	Welsh Government	Ongoing		£66,000	0.42	£27,720	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D23	Agree scope and performance for the installation of new fire dampers (FSD / FD)	Time, Cost, Quality	Welsh Government	3	4	12		Design	Hydrock to confirm principles and connection to existing network. Survey of all fire dampers & associated ventilation systems. Impact upon operation of the Hospital. Review with Gareth Lloyd - establish from Health Board if FSD's will be required. Consult Fire Service.	Welsh Government	Ongoing		£66,000	0.42	£27,720	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D24	Review fire stopping compartmentation requirements for underground ducts v working environment and agree principles.		Welsh Government	3	3	9		Design	Hydrock to confirm principles and compartmentation requirements. Survey of all underground ducts to establish extent. Impact upon operation of the Hospital. Hydrock to review. AIB lids to GF duct cover? Consider situation where ducts cross fire compartment? Consider lids as barrier and assume as single compartment?	Welsh Government	Ongoing		£66,000	0.32	£20,790	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
D25	Additional site attendance/design management from design team over anticipated input	Cost, time	Welsh Government	3	3	9		Design	Allowance made in budgets, however, opotential for excessive requirements - allow in risk.	Welsh Government	Ongoing		£375	0.32	£118	Assume cost if it happens 0.075% of Works Cost
D26	Ward Lobbies/stair lobbies. Risk of impact on existing accommodation layouts being rendered inappropriate	Cost, time	Welsh Government	3	3	9		Design	Review design/feasibility during project process. Achieve stakeholder engagement/sign off.	Welsh Government	Ongoing		£375	0.32	£118	Assume cost if it happens 0.075% of Works Cost
D27	Certification of existing fire stopping works	Time, Cost, Quality	Welsh Government	3	3	9		Design	Hydrock to confirm principles of certification and warranting the recent works. Survey of all existing fire stopping to establish if constructed to approved details and therefore satisfy the fire requirement.	Welsh Government	Ongoing		£375	0.32	£118	Assume cost if it happens 0.075% of Works Cost
D28	Requirement to remodel ward entrances, stair lobbies and secondary means of escape - providing lobbies etc.	Time, Cost, Quality	Welsh Government	3	3	9		Design	Deferred to Phase 2 works	Welsh Government	Ongoing		£375	0.32	£118	Assume cost if it happens 0.075% of Works Cost
D29	Fire alarm system sufficiency / extension	Time, Cost, Quality	Welsh Government	3	3	9		Design	Hydrock to confirm requirements.	Welsh Government	Ongoing		£375	0.32	£118	Assume cost if it happens 0.075% of Works Cost
D30	Refurbishment of existing doors by accredited persons and compliance with Fire Officer requirements.	Time, Cost, Quality	Welsh Government	3	3	9		Design	Agreement with fire officer to be sought	Welsh Government	Ongoing		£375	0.32	£118	Assume cost if it happens 0.075% of Works Cost
D31	Compatibility of newly installed & existing equipment/systems etc.	Time, Cost, Quality	Welsh Government	3	3	9		Design	Engineered judgement to be made for each scenario.	Welsh Government	Ongoing		£375	0.32	£118	Assume cost if it happens 0.075% of Works Cost
	<b>SITE &amp; CONSTRUCTION RISKS</b>															
C1	Control of noise - noise levels during construction not acceptable to hospital causing works to stop	Time, cost	Welsh Government	3	4	12		Construction	Hospital to advise on a specific times/ periods when specific restriction apply during early meetings	Welsh Government	Ongoing		£66,000	0.42	£27,720	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C2	Control of dust - both internally and externally - not managed appropriately causing works to stop.	Time, Cost, Operational	Welsh Government	3	4	12		Construction	SCP to identify areas where dust control is required and select appropriate equipment to manage e.g extraction, wiping down, vacuum. WGH (Helen Johns and Gareth Lloyd) to explore options for workstation areas within hospital e.g for cutting station.	Welsh Government	Ongoing		£66,000	0.42	£27,720	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C3	Disruption to existing services during construction impacting on hospital services	Time, Cost, Operational	Welsh Government	4	5	20		Construction	Liaise with Hospital regularly throughout the project. Contractor strategy to be developed to deal with such circumstances.	Welsh Government	Ongoing		£66,000	1.00	£66,000	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C4	Ward disruption to works - Events happening on wards results in contractors having to stop works	Time, cost	Welsh Government	4	3	12		Programme	Suitable contingency/float to be allowed for within programme AND/OR Suitable decant strategy to be prepared and agreed AND/OR Hospital wards/wings to be shut down during construction works and patients redirected to other hospitals/temporary relocation of client services	Welsh Government	Ongoing		£66,000	0.42	£27,720	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C5	There is a risk that the weather will impact on site progress	Time, Cost, Quality	Welsh Government	3	3	9		Construction	SCP to ensure effective mitigation measures in place including protection, maximise off-site processes	Welsh Government	Ongoing		£66,000	0.32	£20,790	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C6	Discovery of vermin - Specialist removal required; delay to works	Time	Welsh Government	1	4	4		Construction	Hywel Dda to commission Surveys in this regard	Welsh Government	Ongoing		£66,000	0.10	£6,600	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C7	Delayed delivery times - Delay or disruption of the Works . Re-sequencing of Works or out of hours works required.	Time	Welsh Government	3	2	6		Construction	Contractor strategy to be developed to deal with such circumstances.	Welsh Government	Ongoing		£110,000	0.15	£16,500	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C8	Restrictions on use of crane/cherry picker/ mobile access	Time, Cost	Welsh Government	4	2	8		Construction	Hold meeting to discuss and determine mitigation measures where necessary. Hold review meetings when project requirements/Hospital restrictions etc change so that mitigation measures can be updated.	Welsh Government	Ongoing		£66,000	0.20	£13,200	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C9	Restrictions to movement of materials into and out of the work areas - Aborted visits to site; delays to works	Time	Welsh Government	2	3	6		Construction	Hold meeting to discuss and determine mitigation measures where necessary	Welsh Government	Ongoing		£110,000	0.15	£16,500	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C10	Long lead in items	Time	Welsh Government	3	2	6		Construction	Early engagement of the Supply Chain. Fire dampers 6 to 8 weeks; Door sets 12 to 14 weeks from order.	Welsh Government	Ongoing		£66,000	0.15	£9,900	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C11	Working from height (e.g. loft spaces)	H&S	Welsh Government	3	3	9		Construction	RAMS; Work place risk assessment	Welsh Government	Ongoing		£66,000	0.32	£20,790	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.

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C12	Working in confined spaces	H&S	Welsh Government	3	3	9		Construction	RAMS; Work place risk assessment; radio's given to team members completing works	Welsh Government	Ongoing		£110,000	0.32	£34,650	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C13	Contractors inadequate expertise	Time, Cost, Quality	Welsh Government	2	3	6		Construction	Follow project brief and liaise with appointed design team for technical guidance	Welsh Government	Ongoing		£110,000	0.15	£16,500	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C14	Hospital can't provide access for TA team/contractors when required	Time, Cost	Welsh Government	3	3	9		Construction	Advance notice of any requirements for site access	Welsh Government	Ongoing		£66,000	0.32	£20,790	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C15	No building control sign off	Time, Cost	Welsh Government	3	3	9		Construction	Early engagement with Building Control	Welsh Government	Ongoing		£66,000	0.32	£20,790	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C16	Dampers to ductwork - Solution requires extensive fabric or other services removal	Time, Cost, Quality	Welsh Government	4	4	16		Construction	Early engagement between design team and SCP to provide an achievable solution	Welsh Government	Ongoing		£110,000	0.80	£88,000	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C17	There is a risk that Subcontractors/Suppliers will not perform	Time, Cost, Quality	Welsh Government	2	3	6		Construction	Liaise with suppliers at earliest opportunity	Welsh Government	Ongoing		£110,000	0.15	£16,500	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C18	There is a risk that Hazardous materials will be discovered in the existing buildings	Time, cost	Welsh Government	4	3	12		Construction	Execute additional Asbestos etc surveys before commencement	Welsh Government	Ongoing		£110,000	0.42	£46,200	Based on a 5 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C19	Review process for on ward, or ward boundary working. Target nil decant ward	Time, cost	Welsh Government	3	4	12		Construction	Liason with, department infection control, temporary hoardings, dust control, emergency measures.	Welsh Government	Ongoing		£66,000	0.42	£27,720	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C20	Establish sequence, zoning and restrictions of the Works	Time, cost	Welsh Government	3	3	9		Construction		Welsh Government	Ongoing		£66,000	0.32	£20,790	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C21	Existing floor planks / primary structure incomplete in location of compartmentation lines	Time, cost	Welsh Government	3	3	9		Construction	Thorough review when access is available	Welsh Government	Ongoing		£66,000	0.32	£20,790	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C22	Live services impeding the Works and inability to isolate or relocate	Time, cost	Welsh Government	4	4	16		Construction	Investigate the compartmentation lines	Welsh Government	Ongoing		£66,000	0.80	£52,800	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C23	Pharmacy fire shutter at slab level, compliance with required fire resistance at floor level.	Time, cost	Welsh Government	4	4	16		Construction	Health board to confirm the fire resistance of fire shutter - no records available therefore IHP to allow for replacement within costs.	Welsh Government	Ongoing		£66,000	0.80	£52,800	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C24	Pharmacy fire shutter maintenance  Pharmacy must remain operational throughout works as fundamental to hospital operations.	Time, cost	Welsh Government	4	4	16		Construction	Health board to confirm the maintenance / working order - no records available therefore IHP to allow for replacement within costs.  Stakeholder meeting to be arranged to discuss appraoch to working in this area.	Welsh Government	Ongoing		£66,000	0.80	£52,800	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C25	Smoke sealing to doors / flatness of floors	Time, cost	Welsh Government	4	4	16		Construction		Welsh Government	Ongoing		£66,000	0.80	£52,800	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C26	Incomplete Crest surveys not identifying the entire scope of fire stopping (both sides of wall / entire length of corridors and Phase 1 locations	Time, cost	Welsh Government	4	4	16		Construction	Establish fire stopping works from other side	Welsh Government	Ongoing		£66,000	0.80	£52,800	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C27	Restricted surveying being undertaken at OBC / FBC (limited to 25 locations)	Time, cost	Welsh Government	4	4	16		Construction	Apply assumptions to the further Works	Welsh Government	Ongoing		£66,000	0.80	£52,800	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
C28	Existing roof structure and suitability to access the works.	Time, cost	Welsh Government	2	4	8		Construction	Assessments of loads and access suitability to be undertaken	Welsh Government	Ongoing		£66,000	0.20	£13,200	Based on a 3 week construction delay of £20,000 a week for contractor prelims and additional direct fees of £2,000 a week.
	EARLY WARNING NOTICES (SCP NOTIFIED)															
EWN SCP1	Lack of existing M&E drawings raised 22 Dec 20	Time, cost	Welsh Government	2	2	4		design	Med gas and ductwork drags issued 30 Dec 20	Welsh Government	closed					
	EARLY WARNING NOTICES (PM NOTIFIED)															
														Contingency Total £:	£2,036,668	
														Project indicative capital value (ex vat)	£7,131,060	
														% of contingency	28.56%	

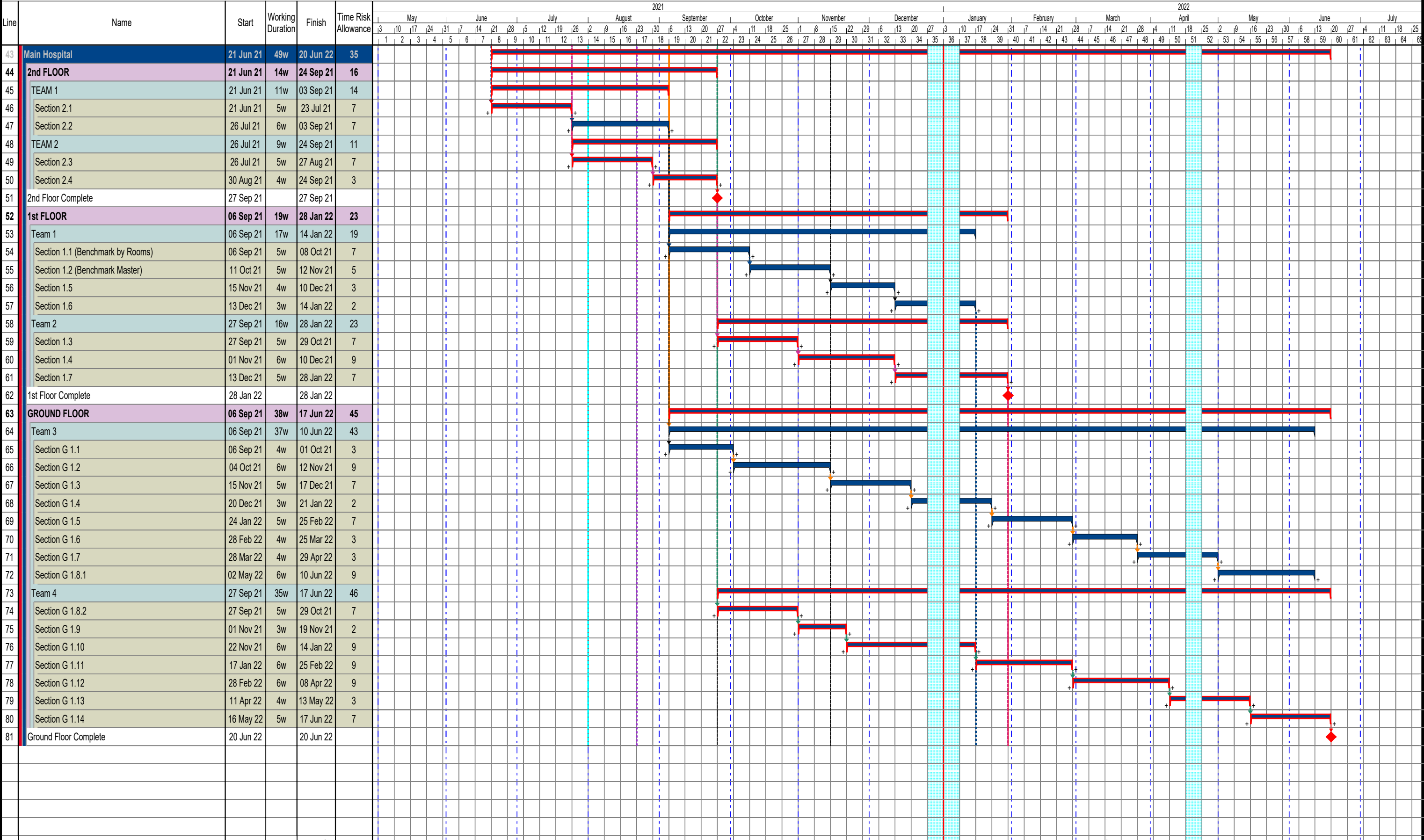
Project Risk Register - Version 1 - Overboarding Risk to be held by Welsh Government - 17 March 2021

Identification				Assessment					Management				Risk Quantification Calculation			
Nr	Risk Description	Risk Consequence: 1. Time 2. Cost 3. Quality 4. Operational	Risk Owner	Probability	Impact	Score	Risk Allocation	Category	Management Actions	Action Owner	Review Date	Comments	Cost if it happens (£)	Likelihood Factor	Expected Value (£)	Basis
	DESIGN RISKS															
D1	Stem corridor partitions to adjacent clinical and non-clinical areas need to be overboarded to achieve 60 min FR	Time, Cost	Welsh Governemnt	5	5	25		Design	Meeting arranged on 25 March 2021 with Mid & West Wales Fire & Rescue Service to confirm if required.	Welsh Government	Ongoing		£1,157,001	1.00	£1,157,001	The indicative estimated cost of this work if required has been prepared by the SCP (IHP) in their BJC Rev. A and then deducted from their Rec C so that the total estimated cost can be included as a risk to be held by Welsh Government
	EARLY WARNING NOTICES (SCP NOTIFIED)															
	EARLY WARNING NOTICES (PM NOTIFIED)															
														Contingency Total £:	£1,157,001	
														Project indicative capital value (ex vat)	£7,131,060	
														% of contingency	16.22%	



## Appendix 13

Withybush General Hospital FPS  
Hywel Dda University Health Board

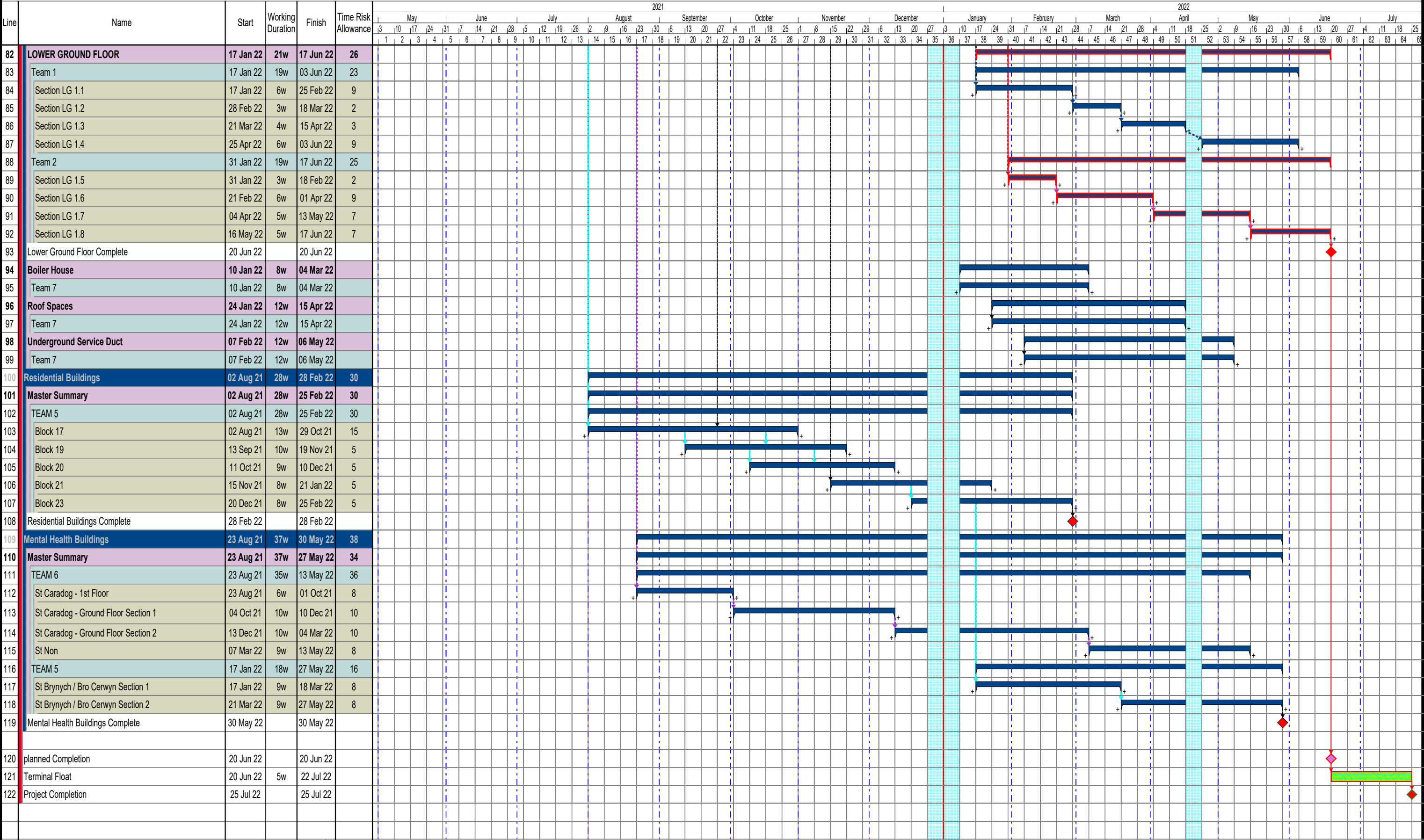


Programme No: HE0001/PR/Cn/0	
Revision: Dr 6	Date 09/03/2021
Rev Comment: 6th Draft	

High Level Indicative Construction Programme

Programme Status: Key Lead-in Activities added	
Prepared For (Owner): Adrian Rees	
Drawn By (Planner): Steve Hobbs	
Region: SW & SW	Progress Date:

'Note that the Duration Column Shows Working Weeks and Does Not Include Holidays'



Programme No: HE0001/PR/Cn/0

Revision: Dr 6

Date 09/03/2021

Rev Comment: 6th Draft

High Level Indicative Construction Programme

Programme Status: Key Lead-in Activities added

Prepared For (Owner): Adrian Rees

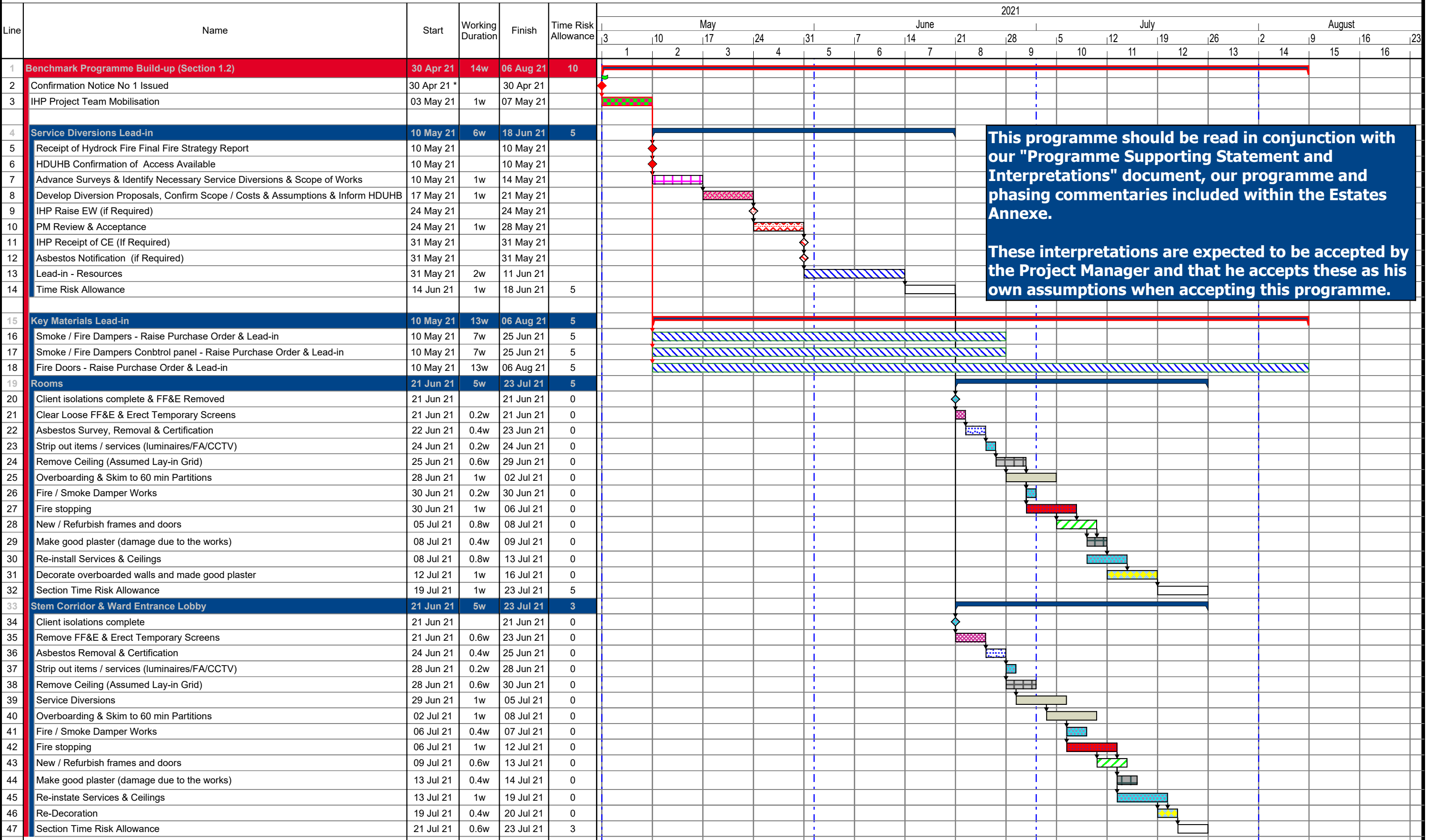
Drawn By (Planner): Steve Hobbs

Region: SW & SW

Progress Date:

'Note that the Duration Column Shows Working Weeks and Does Not Include Holidays'

Filename C:\Users\HobbsS1\Documents\Powerproject\Projects\Withybush General Hospital FPS (IHP stage 2).pp



This programme should be read in conjunction with our "Programme Supporting Statement and Interpretations" document, our programme and phasing commentaries included within the Estates Annexe.

These interpretations are expected to be accepted by the Project Manager and that he accepts these as his own assumptions when accepting this programme.

Programme No: HE0001/PR/Cn/0	
Revision: Dr6	Date 09/03/2021
Rev Comment: 6th Draft	

Section 1.2 (Benchmark Master)

Programme Status:	
Prepared For (Owner): Adrian Rees	
Drawn By (Planner): Steve Hobbs	
Region: SW & SW	Progress Date:

## Appendix 14

Project Risk Register - Version 4

Identification				Assessment					Management			
Nr	Risk Description	Risk Consequence: 1. Time 2. Cost 3. Quality 4. Operational	Risk Owner	Probability	Impact	Score	Risk Allocation	Category	Management Actions	Action Owner	Review Date	Comments
	<b>STRATEGIC/PLANNING/PROGRAMME RISKS</b>											
S1	The Contractor's ability to undertake the works (or part thereof) is directly affected by a COVID-19 Event. There is risk for disruptions, close down, delays and lock down of workfaces or the entire site due to actions taken by Government, Local Authorities, the Hospital Management, the Client and/or the Constructor that are due to the risk of COVID - 19 infection spread. Business closures and furloughed staff restricting supply of materials and services, social distancing measures, reduced workforce due to illness, compliance with he Construction Leadership Council's Site Operating Procedures.	Time, Cost, Operational	Health Board	3	5	15		Programme	Works on site to be constantly reviewed to ensure compliance with the Construction Leadership Council's Site Operating Procedures and Hywel Dda are to be updated regularly on the impact to programme and costs on the project; Constructor to provide a COVID-19 Management Plan; Constructor to provide a financial/timeline (if any) impact assessment for each COVID-19 Management Plan, which needs to include mitigating actions; Any financial consequences for the Authority must exclude any profit element and be prepared on an open book and transparent basis; Constructor to seek approvals in a timely manner and applications deemed late will be dismissed.	Health Board	Ongoing	
S2	Contract choice results in high cost of works, i.e. NEC Option E to encourage contractor tendering	Cost	Health Board	3	5	15		Strategic	Tight schedule of rates to be prepared/agreed AND/OR Additional allowances in cost estimate/budget AND/OR H DUHB to provide additional site supervision/time clerk to sign off resource	Health Board	Ongoing	
S3	Late involvement of Contractor / SCP in business case work	Time	Health Board	2	4	8		Programme	Ensure timely appointment of SCP	Health Board	Ongoing	
S4	Incomplete surveys during PBC stage (e.g. vertical compartmentation) to inform the design, programme and cost	Time, Cost, Quality	Health Board	4	3	12		Strategic	Base design on worst case scenarios and assumptions from high level inspections. Suitable allowances to be made in cost estimate	Health Board	Ongoing	
S5	Risk regarding delivering the PBC within the MWWFRA timescales and this risk is associated with further enforcement action - Various causes of delay resulting in delay of delivery of PBC	Time	Health Board	3	4	12		Programme	Ensure programme is actively monitored and target dates achieved	Health Board	Ongoing	
S6	The extent of fire strategy and fire stopping compliance works in relation to fire service improvement notices are underestimated.	Time, cost	Health Board	3	4	12		Programme	Early procurement of surveys and investigations to ensure business cases are robust.	Health Board	Ongoing	
S7	Hospital activities impact on proposed phasing and/or decant strategy OR Decant strategy changes to original agreement.	Time, cost	Health Board	3	5	15		Strategic	Early engagement with the Hospital and Management Teams to discuss requirements and expectations	Health Board	Ongoing	
S8	Hospital fails to release work areas in accordance with the Programme	Time, cost	Health Board	3	3	9		Programme	Phasing Strategy to be defined early in the project with consultation with the Hospital	Health Board	Ongoing	
S9	Impact of Brexit on labour market shortages, inflation on Plant and Materials	Time, Cost	Health Board	3	3	9		Programme	Ongoing monitoring of indices during BJC stage	Health Board	Ongoing	
S10	Risk that sign off will not be received in time from project Stakeholders, TA's or Technical Services	Time	Health Board	3	2	6		Programme	JW to direct TA re sign off in respect of review of documents	Health Board	Ongoing	
S11	Clarity around project bank account arrangements at stage 4 construction and processes to be followed	Cost	Health Board	2	2	4		Strategic	Required at next stage. Ensure Contractor understands their responsibilities in setting up. SCP issues with timing for payments into PBA (potentially 33 days) SCP avg payment time is currently 26 days. SCP cannot open bank account until HB jointly sign the mandate which is linked to WAG approval and Call Off Order.	Health Board	Ongoing	
S12	There is a risk that elements of the existing infrastructure to be used by the project works requires remedial work - eg fire alarms, duct dampers	Time, Cost	Health Board	3	3	9		Strategic	SCP to develop design in design proposals period	Health Board	Ongoing	
S13	There is a risk that the project will be impacted by delays in governance/approvals process e.g. PBC, FBC, Etc.	Time	Health Board	3	3	9		Strategic	JW to liaise with Boards to mitigate risk	Health Board	Ongoing	
S14	Changes to Client Team key personnel - A key person from either team leaves and new working practices and relationships need to be established	Time, Quality, Operational	Health Board	3	2	6		Strategic	Communication with all stakeholders regularly throughout the project	Health Board	Ongoing	



Nr	Risk Description	Risk Consequence: 1. Time 2. Cost 3. Quality 4. Operational	Risk Owner	Probability	Impact	Score	Risk Allocation	Category	Management Actions	Action Owner	Review Date	Comments
S14A	Changes to SCP key personnel - A key person from either team leaves and new working practices and relationships need to be established	Time, Quality, Operational	Health Board	3	2	6		Strategic	Communication with all stakeholders regularly throughout the project	Health Board	Ongoing	
S15	Phasing strategy and phasing interface between hospital and works not aligned	Time, Cost, Operational	Health Board	2	5	10		Strategic	Phasing strategy to be agreed with the Hospital as early as possible	Health Board	Ongoing	
S16	Other hospital works concurrent with and disrupting our works.	Time, cost	Health Board	2	4	8		Strategic	Early engagement with the Hospital to determine	Health Board	Ongoing	
S17	Unrealistic programme set for the main construction phase.	Quality, Operational	Health Board	4	3	12		Programme	(1) Review with appointed Designed for Life: Building for Wales Supply Chain Partner (SCP)/constructor regularly as design develops. Outline dates passed to MHRA during BJC process.	Health Board	Ongoing	
S18	Public engagement plans / processes are delayed / poorly coordinated	Strategic	Health Board	2	3	6		Strategic	Liaise with the planning consultant. Public engagement info published online etc. due to Covid-19.	Health Board	Ongoing	
S19	Staff Engagement plans / processes are delayed / poorly coordinated	Strategic	Health Board	2	3	6		Strategic	Involved early. Continuing liaison	Health Board	Ongoing	
S20	Non availability of labour - Other projects or events reduce the availability of some resources	Time, Cost, Quality	Health Board	2	3	6		Programme	Liaise with suppliers at earliest opportunity	Health Board	Ongoing	
S21	Costs associated with non availability of labour - Other projects or events reduce the availability of some resources	Time, Cost, Quality	Health Board	2	3	6		Financial	Liaise with suppliers at earliest opportunity	Health Board	Ongoing	
S22	Emergency events disrupting / suspending / ceasing the works	Time, Cost, Quality	Health Board	3	3	9		Programme / Financial	Alternative work areas for IHP to relocate to be identified	Health Board	Ongoing	
S23	Decant requirements as a result of lobby installation. Lobbies in Phase 2 however risk that Phase 1 work requirements will increase - unknown until fire strategy developed.	Time, Cost, Quality	Health Board	3	3	9		Programme / Financial	Works to lobbies to be deferred to Phase 2.  Design of lobbies will be carried out throughout Phase 1 therefore early engagement with stakeholders will take place to discuss possible decant of areas.	Health Board	Ongoing	
S24	Change of Fire Officer and potential additional requirements from replacement (i.e. Gareth Lloyd leaving May 2021).	Time, Cost, Quality	Health Board	5	3	15		Programme / Financial	Early liasion with replacement	Health Board	Ongoing	
S25	Advanced works being completed by the Health Board is not complete in time for Phase 1 to commence.	Time, Cost, Quality	Health Board	3	4	12		Programme / Financial	Close monitoring of programme - JW to update on any potential delays.	Health Board	Ongoing	
	<b>FINANCIAL RISKS</b>											
F1	Capital costs underestimated at PBC	Cost, time	Health Board	3	4	12		Financial	Review as part of BJC development and completion of surveys	Health Board	Ongoing	
F2	Risk that the main contractor could fail	Time, cost	Health Board	1	5	5		Financial	Procurement to check financial stability of tenderers	Health Board	Ongoing	
F3	Risk of other subcontractor failure	Time, cost	Health Board	1	5	5		Financial	SCP to ensure financial stability of suppliers as part of tendering process	Health Board	Ongoing	
F4	Bankruptcy of suppliers	Time, cost	Health Board	1	5	5		Financial	Procurement to check financial stability of tenderers	Health Board	Ongoing	
F5	There is the risk that the rate for VAT will change again	Cost	Health Board	1	3	3		Financial	Government policy to be monitored	Health Board	Ongoing	
F6	Significant changes in inflation of key materials or shortages	Time, cost, quality	Health Board	3	3	9		Financial	Contractor to procure the materials in a timely manner	Health Board	Ongoing	
F7	Increased costs due to unknown works	Time, cost, quality	Health Board	4	4	16		Financial	Contractor to procure the materials in a timely manner. Option E so HB take cost.	Health Board	Ongoing	
F8	Increased costs due to Statutory changes during the works	Time, cost, quality	Health Board	3	4	12		Financial	Monitor statutory changes during the works.	Health Board	Ongoing	
	<b>DESIGN RISKS</b>											
D1	Fire Officer Requirements - Unforeseen items required to meet the fire officer's requirements	Time, Cost	Health Board	3	4	12		Design	TA Team and Contractor will engage with the Fire Officer at an early stage so that the requirements can be agreed and incorporated in a timely manner.	Health Board	Ongoing	
D2	Scope of works changing arising from Hospital request, third party requirements (e.g. Planners), general briefing changes etc	Time, cost	Health Board	2	3	6		Design	To be managed by Project Sponsor/Client Representative	Health Board	Ongoing	
D3	Risk that there will be changes in Building Regs, general statutory changes and changes to Hywel Dda Standards after design proposals	Cost, time	Health Board	2	3	6		Design	Ensure all changes prior to tender are identified	Health Board	Ongoing	
D4	Existing survey information is inaccurate or incomplete	Time, Cost	Health Board	4	3	12		Design	SCP to check information as part of the design process	Health Board	Ongoing	
D5	Scope of Works not fully defined and contradictions within the Contract Documents.	Time, Cost, Quality	Health Board	4	3	12		Design	TA team to ensure scope of works is as detailed as possible and includes all relevant standards	Health Board	Ongoing	

Nr	Risk Description	Risk Consequence: 1. Time 2. Cost 3. Quality 4. Operational	Risk Owner	Probability	Impact	Score	Risk Allocation	Category	Management Actions	Action Owner	Review Date	Comments
D6	Existing structural defects not apparent at time of submitting design proposals (i.e. after surveys completed)	Time, cost	Health Board	3	3	9		Design	Works to be captured early/as soon as they become apparent, with allowances made in programme and budget	Health Board	Ongoing	
D7	Design / scope is not compliant with Hospital Fire Strategy & Evacuation strategy.  The Hospital does not have a full fire or evacuation strategy in place which can be used to inform the scope of works and design.	Time, Cost, Quality, Operational	Health Board	4	4	16		Design	Explore every avenue to obtain fire strategy information from Hospital.  Recommend and appoint Fire Engineer/ consultant to validate / confirm the fire strategy.  Clearly state assumptions made in design so that these can be used as basis for when fire strategy is generated.	Health Board	Ongoing	
D8	Lack of detailed survey information and full fire strategy - Design options created using a nominal scheme based on assumptions	Time, Cost, Quality, Operational	Health Board	2	4	8		Design	Recommend and appoint Fire Engineer/ consultant to validate / confirm the fire strategy.  Base design assumptions on worst case scenarios  Clearly state assumptions made in design so that these can be used as basis for when fire strategy is generated.	Health Board	Ongoing	
D9	Infection control sign off of details is delayed or not acceptable	Time, Operational	Health Board	2	2	4		Design	Include as key milestones on programme to manage expectations.  Meeting to be arranged with key stakeholder Tracey Nicholas re. infection control.	Health Board	Ongoing	
D10	Compliance with HTMs / HBNs	Time, Cost, Quality	Health Board	3	3	9		Design	Review designs/derrogation schedule to be approved.	Health Board	Ongoing	
D11	Consequential improvements requiring building control approval	Time, Cost, Quality	Health Board	2	3	6		Design	Review designs/derrogation schedule to be approved.	Health Board	Ongoing	
D12	Existing partitions/walls in poor/dangerous structural condition	Time, Cost, Quality	Health Board	3	3	9		Design	Carry out survey and identify structural deficiencies and remedial works	Health Board	Ongoing	
D13	Existing partitions/walls not meeting basic fire and smoke resistance requirements	Time, Cost, Quality	Health Board	3	4	12		Design	Carry out survey and identify deficiencies and remedial works	Health Board	Ongoing	
D14	Existing wall construction not as fire tested ie 2 layers 9.5mm plasterboard	Time, Cost, Quality	Health Board	3	4	12		Design	Carry out survey and identify deficiencies and remedial works	Health Board	Ongoing	
D15	Existing doorsets not meeting requirements	Time, Cost, Quality	Health Board	3	4	12		Design	Carry out survey and identify deficiencies and remedial works	Health Board	Ongoing	
D16	Aesthetic outcomes of the Works - increase decorations etc	Time, Cost, Quality	Health Board	3	3	9		Design	Stakeholder engagement - manage expectations e.g if carrying out works within room, 1 wall will be decorated and existing 3 will have a different finish.	Health Board	Ongoing	
D17	Extent of asbestos works	Time, Cost, Quality	Health Board	4	4	16		Programme	Survey where possible and proceed with caution	Health Board	Ongoing	
D18	Certification of existing glazed screens / doors / windows	Time, Cost, Quality	Health Board	3	3	9		Design	Carry out survey and identify deficiencies and remedial works	Health Board	Ongoing	
D19	Fire performance of the existing and new partitions	Time, Cost, Quality	Health Board	3	3	9		Design	Survey the existing fire compartment partitions and identify any deficiencies and remedial works required.	Health Board	Ongoing	
D20	Adequacy of existing fire strategy	Time, Cost, Quality	Health Board	3	3	9		Design	Fire engineer to review	Health Board	Ongoing	
D21	Completeness, adequacy and condition of the existing M&E designs and requirement for services diversions	Time, Cost, Quality	Health Board	4	4	16		Design	Thorough surveys to be carried out to establish routes where diversions / modification required.  Surveys to establish flow rates 'before and after' service diversion to confirm reduction.	Health Board	Ongoing	
D22	Establish fire rating / structural integrity / acoustics / putty pads / baffles (if required) of existing lightweight partition main compartment wall construction	Time, Cost, Quality	Health Board	3	4	12		Design	Intrusive wall survey to establish construction / fire rating / extent / closure to soffit and adjacent fabrics / smoke seal head and sole. Hydrock initial review of existing partition design/capability. Hydrock to provide info re: fire engineered solutions to each scenario.	Health Board	Ongoing	
D23	Agree scope and performance for the installation of new fire dampers (FSD / FD)	Time, Cost, Quality	Health Board	3	4	12		Design	Hydrock to confirm principles and connection to existing network. Survey of all fire dampers & associated ventilation systems. Impact upon operation of the Hospital. Review with Gareth Lloyd - establish from Health Board if FSD's will be required. Consult Fire Service.	Health Board	Ongoing	
D24	Review fire stopping compartmentation requirements for underground ducts v working environment and agree principles.		Health Board	3	3	9		Design	Hydrock to confirm principles and compartmentation requirements. Survey of all underground ducts to establish extent. Impact upon operation of the Hospital. Hydrock to review. AIB lids to GF duct cover? Consider situation where ducts cross fire compartment? Consider lids as barrier and assume as single compartment?	Health Board	Ongoing	



Nr	Risk Description	Risk Consequence: 1. Time 2. Cost 3. Quality 4. Operational	Risk Owner	Probability	Impact	Score	Risk Allocation	Category	Management Actions	Action Owner	Review Date	Comments
D25	Additional site attendance/design management from design team over anticipated input	Cost, time	Health Board	3	3	9		Design	Allowance made in budgets, however, opotential for excessive requirements - allow in risk.	Health Board	Ongoing	
D26	Ward Lobbies/stair lobbies. Risk of impact on existing accommodation layouts being rendered inappropriate.	Cost, time	Health Board	3	3	9		Design	Review design/feasibility during project process. Achieve stakeholder engagement/sign off.	Health Board	Ongoing	
D27	Certification of existing fire stopping works	Time, Cost, Quality	Health Board	3	3	9		Design	Hydrock to confirm principles of certification and warranting the recent works. Survey of all existing fire stopping to establish if constructed to approved details and therefore satisfy the fire requirement.	Health Board	Ongoing	
D28	Requirement to remodel ward entrances, stair lobbies and secondary means of escape - providing lobbies etc.	Time, Cost, Quality	Health Board	3	3	9		Design	Deferred to Phase 2 works	Health Board	Ongoing	
D29	Fire alarm system sufficiency / extension	Time, Cost, Quality	Health Board	3	3	9		Design	Hydrock to confirm requirements.	Health Board	Ongoing	
D30	Refurbishment of existing doors by accredited persons and compliance with Fire Officer requirements.	Time, Cost, Quality	Health Board	3	3	9		Design	Agreement with fire officer to be sought	Health Board	Ongoing	
D31	Compatibility of newly installed & existing equipment/systems etc.	Time, Cost, Quality	Health Board	3	3	9		Design	Engineered judgement to be made for each scenario.	Health Board	Ongoing	
	<b>SITE &amp; CONSTRUCTION RISKS</b>											
C1	Control of noise - noise levels during construction not acceptable to hospital causing works to stop	Time, cost	Health Board	3	4	12		Construction	Hospital to advise on a specific times/ periods when specific restriction apply during early meetings	Health Board	Ongoing	
C2	Control of dust - both internally and externally - not managed appropriately causing works to stop.	Time, Cost, Operational	Health Board	3	4	12		Construction	SCP to identify areas where dust control is required and select appropriate equipment to manage e.g extraction, wiping down, vacuum. WGH (Helen Johns and Gareth Lloyd) to explore options for workstation areas within hospital e.g for cutting station.	Health Board	Ongoing	
C3	Disruption to existing services during construction impacting on hospital services	Time, Cost, Operational	Health Board	4	5	20		Construction	Liaise with Hospital regularly throughout the project. Contractor strategy to be developed to deal with such circumstances.	Health Board	Ongoing	
C4	Ward disruption to works - Events happening on wards results in contractors having to stop works	Time, cost	Health Board	4	3	12		Programme	Suitable contingency/float to be allowed for within programme AND/OR Suitable decant strategy to be prepared and agreed AND/OR Hospital wards/wings to be shut down during construction works and patients redirected to other hospitals/temporary relocation of client services	Health Board	Ongoing	
C5	There is a risk that the weather will impact on site progress	Time, Cost, Quality	Health Board	3	3	9		Construction	SCP to ensure effective mitigation measures in place including protection, maximise off-site processes	Health Board	Ongoing	
C6	Discovery of vermin - Specialist removal required; delay to works	Time	Health Board	1	4	4		Construction	Hywel Dda to commission Surveys in this regard	Health Board	Ongoing	
C7	Delayed delivery times - Delay or disruption of the Works . Re-sequencing of Works or out of hours works required.	Time	Health Board	3	2	6		Construction	Contractor strategy to be developed to deal with such circumstances.	Health Board	Ongoing	
C8	Restrictions on use of crane/cherry picker/ mobile access	Time, Cost	Health Board	4	2	8		Construction	Hold meeting to discuss and determine mitigation measures where necessary. Hold review meetings when project requirements/Hospital restrictions etc change so that mitigation measures can be updated.	Health Board	Ongoing	
C9	Restrictions to movement of materials into and out of the work areas - Aborted visits to site; delays to works	Time	Health Board	2	3	6		Construction	Hold meeting to discuss and determine mitigation measures where necessary	Health Board	Ongoing	
C10	Long lead in items	Time	Health Board	3	2	6		Construction	Early engagement of the Supply Chain. Fire dampers 6 to 8 weeks; Door sets 12 to 14 weeks from order.	Health Board	Ongoing	
C11	Working from height (e.g. loft spaces)	H&S	Health Board	3	3	9		Construction	RAMS; Work place risk assessment	Health Board	Ongoing	
C12	Working in confined spaces	H&S	Health Board	3	3	9		Construction	RAMS; Work place risk assessment; radio's given to team members completing works	Health Board	Ongoing	
C13	Contractors inadequate expertise	Time, Cost, Quality	Health Board	2	3	6		Construction	Follow project brief and liaise with appointed design team for technical guidance	Health Board	Ongoing	
C14	Hospital can't provide access for TA team/contractors when required	Time, Cost	Health Board	3	3	9		Construction	Advance notice of any requirements for site access	Health Board	Ongoing	
C15	No building control sign off	Time, Cost	Health Board	3	3	9		Construction	Early engagement with Building Control	Health Board	Ongoing	
C16	Dampers to ductwork - Solution requires extensive fabric or other services removal	Time, Cost, Quality	Health Board	4	4	16		Construction	Early engagement between design team and SCP to provide an achievable solution	Health Board	Ongoing	
C17	There is a risk that Subcontractors/Suppliers will not perform	Time, Cost, Quality	Health Board	2	3	6		Construction	Liaise with suppliers at earliest opportunity	Health Board	Ongoing	
C18	There is a risk that Hazardous materials will be discovered in the existing buildings	Time, cost	Health Board	4	3	12		Construction	Execute additional Asbestos etc surveys before commencement	Health Board	Ongoing	

Nr	Risk Description	Risk Consequence: 1. Time 2. Cost 3. Quality 4. Operational	Risk Owner	Probability	Impact	Score	Risk Allocation	Category	Management Actions	Action Owner	Review Date	Comments
C19	Review process for on ward, or ward boundary working. Target nil decant ward	Time, cost	Health Board	3	4	12		Construction	Liason with, department infection control, temporary hoardings, dust control, emergency measures.	Health Board	Ongoing	
C20	Establish sequence, zoning and restrictions of the Works	Time, cost	Health Board	3	3	9		Construction		Health Board	Ongoing	
C21	Existing floor planks / primary structure incomplete in location of compartmentation lines	Time, cost	Health Board	3	3	9		Construction	Thorough review when access is available	Health Board	Ongoing	
C22	Live services impeding the Works and inability to isolate or relocate	Time, cost	Health Board	4	4	16		Construction	Investigate the compartmentation lines	Health Board	Ongoing	
C23	Pharmacy fire shutter at slab level, compliance with required fire resistance at floor level.	Time, cost	Health Board	4	4	16		Construction	Health board to confirm the fire resistance of fire shutter - no records available therefore IHP to allow for replacement within costs.	Health Board	Ongoing	
C24	Pharmacy fire shutter maintenance  Pharmacy must remain operational throughout works as fundamental to hospital operations.	Time, cost	Health Board	4	4	16		Construction	Health board to confirm the maintenance / working order - no records available therefore IHP to allow for replacement within costs.  Stakeholder meeting to be arranged to discuss approach to working in this area.	Health Board	Ongoing	
C25	Smoke sealing to doors / flatness of floors	Time, cost	Health Board	4	4	16		Construction		Health Board	Ongoing	
C26	Incomplete Crest surveys not identifying the entire scope of fire stopping (both sides of wall / entire length of corridors and Phase 1 locations	Time, cost	Health Board	4	4	16		Construction	Establish fire stopping works from other side	Health Board	Ongoing	
C27	Restricted surveying being undertaken at OBC / FBC (limited to 25 locations)	Time, cost	Health Board	4	4	16		Construction	Apply assumptions to the further Works	Health Board	Ongoing	
C28	Existing roof structure and suitability to access the works.	Time, cost	Health Board	2	4	8		Construction	Assessments of loads and access suitability to be undertaken	Health Board	Ongoing	
	EARLY WARNING NOTICES (SCP NOTIFIED)											
EWN SCP1	Lack of existing M&E drawings raised 22 Dec 20	Time, cost	Health Board	2	2	4		design	Med gas and ductwork drags issued 30 Dec 20	Health Board	closed	
	EARLY WARNING NOTICES (PM NOTIFIED)											

## Appendix 15



Llywodraeth Cymru  
Welsh Government

# Welsh Government Integrated Assurance

## Risk Potential Assessment Form (RPA)

(IAH-RPA)

Version 2.0 – March 2019

March 2019

# INTRODUCTION

## About OGC Gateway™:

Programmes and projects provide an important vehicle for the efficient and timely delivery of government aims. Good and effective management and control of programmes and projects is therefore essential to the successful delivery of government objectives. The Welsh Government Assurance Process (consistent with the OGC Gateway) is the responsibility of the Integrated Assurance Hub (IAH) and authorised to deliver assurance under accredited licence from the Infrastructure and Projects Authority (IPA), which is part of the UK's Cabinet Office. This process is designed to provide independent guidance to Senior Responsible Owners (SROs), programme and project teams and to the departments who commission their work, on how best to ensure that their programmes and projects are successful

The OGC Gateway Process examines programmes and projects at 'key decision points' in their lifecycle, and looks ahead to provide assurance that they can progress successfully to the next stage. The OGC Gateway Process is regarded as best practice in central civil government throughout the UK, and applicable to a wide range of programmes and projects, including:

- policy development and implementation
- organisational change and other change initiatives
- acquisition programmes and projects
- property/construction developments
- IT-enabled business change
- procurements using or establishing framework arrangements.

## Value of the OGC Gateway Process

OGC Gateway Reviews deliver a 'peer review', in which independent practitioners from outside the programme/project use their experience and expertise to examine the progress and likelihood of successful delivery of the programme or project. They are used to provide a valuable additional perspective on the issues facing the programme/project team, an external challenge to the robustness of plans and processes, and support to SROs in the discharge of their responsibilities to achieve their business aims, by helping to ensure:

- the best available skills and experience are deployed on the programme/project
- all the stakeholders covered by the programme/project fully understand the programme/project status and the issues involved
- there is assurance that the programme/project can progress to the next stage of development or implementation and is well managed in order to provide value for money on a whole life basis
- achievement of more realistic time and cost targets for programmes and projects
- improvement of knowledge and skills among government staff through participation in Reviews
- provision of advice and guidance to programme and project teams by fellow practitioners.

The Welsh Government's Risk Potential Assessment Form (IAH-RPA) is designed to provide a standard set of high-level criteria for assessing the **risk potential** of a programme/project in a strategic context.

The RPA enables a conversation to be had about the risks and responsibilities that the SRO has for delivery and that the programme/project in respect of visibility, reporting and assurance in a wider portfolio management context. The RPA can also help the programme/project to identify areas where specific skills sets, commensurate with the level of complexity, may be required.

The OGC Gateway Process offers an independent assurance for all potential high and medium risk programmes/projects within Welsh Government and Wider Welsh public sector. In order to determine the applicability of an OGC Gateway Review, the RPA **must** be completed by the SRO for the programme/project.

The RPA form is in five sections :

- Section 1 - (Programme/Project General Information) – gathers some basic information about the programme/project
- Section 2 - gathers a brief synopsis of the programme/project, its key objectives and the stage of the programme/project at the current time. This will provide context for the assessment by the IAH.
- Section 3 - is designed to build on information provided in Section 2, by capturing a standard set of high-level criteria for further assessing the **risk potential** of a proposed programme/project. This section is also used to determine if an Assessment Meeting with the SRO is appropriate to discuss whether an OGC Gateway Assurance might be of value to the programme/project. At the end of each question within this section the SRO is required to make a self assessment of the level of risk the programme/project carries. Further information and an explanatory note is required to support the self assessment.
- Section 4 – The SRO is required to provide an overall self assessment of the level of risk the programme/project is at.
- Section 5 – SRO sign off for the RPA form.

Completed forms must be sent directly for assessment to the Integrated Assurance Hub (IAH) Mailbox [Assurance@gov.wales](mailto:Assurance@gov.wales)

SECTION 1 :	Programme/Project General Information
1. Is this a Portfolio/Programme or Project?	Project
2. Programme/Project name	Hywel Dda University Health Board, Phase 1 Withybush General Hospital Fire Precaution Upgrade Scheme.
3. Your Division/Department	Facilities, Estates and Capital Management
4. Programme/Project Type	Legislation  Fire Compliance
5. SRO Contact Details (to include telephone number, mobile number and e-mail address)	<b>Andrew Carruthers</b> <b>Director of Operations</b> <a href="mailto:A.Carruthers@wales.nhs.uk">A.Carruthers@wales.nhs.uk</a> <b>Tel 01267 239699</b>
6. Programme/Project Manager details (to include telephone number, mobile number and e-mail address)	<b>Rob Elliott</b> <b>Director of Estates, Facilities &amp; Capital Management</b> <a href="mailto:Rob.Elliott@wales.nhs.uk">Rob.Elliott@wales.nhs.uk</a> <b>Tel 01267 227313</b> <b>Mobile 07774 776824</b>
7. Primary contact point for administration of the OGC Gateway™ Review (to include telephone number, mobile number and e-mail address)	<b>Jason Wood</b> <b>Major Capital Development Manager</b> <a href="mailto:Jason.Wood@wales.nhs.uk">Jason.Wood@wales.nhs.uk</a> <b>Mobile 07536 009905</b>
8. Finance Officer details: Review (to include telephone number, mobile number and e-mail address) <i>(N.B. review costs will initially be met by the Integrated Assurance Hub but will be recouped via journal at the end of the review)</i>	<b>Sarah Welsby</b> <b>Business Partner – Planning &amp; Major Projects</b> <a href="mailto:Sarah.Welsby@wales.nhs.uk">Sarah.Welsby@wales.nhs.uk</a> <b>Tel 01267 283026</b>
9. Date of previous Gateway Review if applicable – <i>please include previous Gateway Product &amp; IAH unique number).</i>	Click here to enter a date.  Choose an item.  AH/XX/XX

## SECTION 2 : PROGRAMME / PROJECT DETAILS

*Please provide a brief synopsis of the programme/project, the key objectives and at which stage the programme/project is currently at:*

Following visits from the Mid and West Wales Fire and Rescue Service (MWWFRS) to Withybush Hospital and associated sites in August and December 2019, Hywel Dda University Health Board (HDUHB) received enforcement notifications and letters of fire safety matters in relation to compliance with fire safety regulations.

A Programme Business Case was submitted to Welsh Government in March 2020 detailing a need for capital investment to enable the Health Board to achieve compliance within the stipulated timescales. The delivery programme for the works to address the contents of the MWWFRS notices has been developed and are split into several phases.

**General Housing Keeping and Management Actions.** These works were funded from within the HB and issues as highlighted by MWWFRS have been addressed.

**Advanced Works Package.** These works included upgrading of fire doors to main fire escape staircases and bedroom doors at St Caradog's Mental Health Unit. These works were funded by WG and are now complete.

**Phase 1.** These works will undertake fire improvement works to the main compartment and sub compartment lines and risks rooms on the main stem corridors and escape routes in the main hospital building. These works will include fire stopping, replacement and repair of fire doors, replacement of fire dampers and associated works. Phase 1 will also include remaining fire upgrading works at Bro Cerwyn, St Brynachs, St Caradogs and St Nons Mental Health Facilities, plus residential accommodation blocks, Sealyham Office Block and main plant areas. These works are currently programmed to last circa 60 weeks and are the subject of this Phase 1 BJC for which the HDUHB is seeking capital funding support from WG.

**Phase 2** works will address all fire related matters as identified within departmental and ward areas and will be the subject of a further BJC for which HDUHB will be seeking capital funding support from WG. It is envisaged that Phase 2 will follow on from the completion of the phase 1 programme.

The phased approach to the delivery of the works has been agreed in consultation with MWWFRS and WG and is based on providing a continual programme of fire improvement and upgrading works with the final goal of removal of all enforcement notifications and letters of fire safety by MWWFRS.



## SECTION 3 : GUIDANCE

Section 3 of the RPA assesses the potential risk for the programmes/project. The overall RPA assessment process at this point is an **indicator** of risk potential and is not an exhaustive risk analysis model. However, it can be the starting point for a more exhaustive risk assessment of a programme/project.

This section is made up of a series of five key short assessments, which will determine the basic and initial risk rating of the programme/project. These assessments are made using the knowledge and judgement of the SRO and programme/project team and should be considered in the light of a programme/project's strategic context. Each question requires an answer using the drop down boxes, a self assessment of the level of risk and a short explanatory note of the reasoning for the self assessment mark. This will provide further detail for the IAH and an audit trail of the considerations.

After completion, the SRO should e-mail the RPA Form directly to the IAH for initial assessment. The IAH will then formally write to the SRO to notify them of the outcome.

The initial assessment will normally be used throughout the life of the OGC Gateway Review process. However, and even though the score might decline during the programme/project lifecycle, should the programme/project's risk assessment increase, the higher assessment may take precedent.

If you have further questions about the use or completion of this section, please contact the Integrated Assurance Hub on 0300 025 0149 or 0300 025 3901 or you can e-mail us on [Assurance@gov.wales](mailto:Assurance@gov.wales)

SECTION 3.1 Strategic Alignment & Commitment	
3.1.1: Does the programme/project satisfy a ministerial commitment?	No
If YES, please state who is the responsible minister(s)	Choose an item.
3.1.2: Does the programme/project cut across ministerial portfolios	No
3.1.3: Does the programme/project satisfy a major policy commitment?	No
If YES, Which policy?	
3.1.4: Does the Programme/Project impact Key Organisational Objectives?	No links to strategic targets or performance indicators
3.1.5: Does the Programme/Project impact Business Change?	No change
<b>Strategic Alignment &amp; Commitment – Self assessed risk rating</b>	Very Low
<b>Further information &amp; explanatory note:</b>  As noted previously this Phase 1 BJC is part of a multi phased approach to delivering Fire Precaution Upgrade works required at Worthybush General Hospital, Haverfordwest and associated premises to satisfy letters of fire safety and enforcement notices as received from Mid & West Wales Fire & Rescue Service (MWWFRS)	

SECTION 3.2: Financial/funding impact	
3.2.1: How much is the projected budget for the programme/project?  <i>N.B. when completing this part of the form, please take into account the <u>whole-life costs</u> of the programme/project (as defined by HM Treasury Green Book)</i>	£5M and above
3.2.2: How long is the programme/project expected to run?	Over 2 Years
3.2.3: Is funding secured and in place for the entire lifecycle of the programme/project?	No
3.2.4: Does the programme/project receive external funding?	Yes - Capital Revenue
3.2.5: How is the Programme/Project budget managed?	Budget within delegations and local control
<b>Financial/Funding Impact – Self assessed risk rating</b>	Medium
<b>Further information &amp; explanatory note:</b>	

## SECTION 3.3 Stakeholder Engagement

3.3.1: Has the Programme/Project identified all stakeholders?	Yes - All stakeholders identified and engaged
3.3.2: How complex is stakeholder management?	many stakeholders in one organisation
3.3.3: Impact on resources	most resources in place
3.3.4: How many staff within the organisation will be affected by the programme/project?	100+
3.3.5: Impact on Public	Low impact - Minister advised
<b>Stakeholder Engagement – Self Assessed Risk Rating</b>	Low
<b>Further information &amp; explanatory note:</b>  <p>Phase 1 Delivery will have a disruptive effect on all areas of the main circulation of the building, however works will be of a relatively short duration in each area limiting long term affects on staff and public.</p>	

<b>SECTION 3.4 Governance</b>	
3.4.1: Has the programme/project undertaken a scoping exercise to ensure there is no duplication of work in any other part of the organisation?	Yes -
3.4.2: Are the Programme/Project Governance arrangements in place?	Yes as outlined in the BJC
3.4.3: Are the Programme/Projects Time & Quality Targets Achievable?	Yes subject to funding availability
3.4.4: Has the Programmes/Projects benefits been identified?	Yes working towards removal of current fire notices
3.4.5: Has the programme/project considered and implemented security standards in compliance with regulatory Acts e.g. GDPR?	Not Applicable
3.4.6: Governance – Self Assessed Risk Rating	Low
<b>Further information &amp; explanatory note:</b>	

<b>SECTION 3.5 Programme/Project Dependencies</b>	
3.5.1: Is the Programme or Project dependant on or connected to wider initiatives?	standalone programme/project with no dependency
3.5.2: Does the programme/project depend on key components, consent or approvals which are outside the organisations direct control?	No external factors that requires consent or approval
3.5.3: Does the programme/project key objective require new IT systems and/or the need to develop interfaces with existing IT systems?	No IT dependency
3.5.4: How complex are the commissioning/procurement arrangements for the programme/project	Single supplier required from existing commissioning/procurement framework
<b>Programme/Project Dependencies – Self Assessed Risk Rating</b>	Low
<b>Further information &amp; explanatory note:</b>  Suppliers selected from the Designed For Life Building For Wales Framework.  No IT dependency in terms of software systems only replacement upgrading of Hub Room enclosure infrastructure	

<b>Section 4: Programme/Project overall self assessment risk rating</b>
Low

<b>Section 5: SRO ENDORSEMENT</b>	
I am satisfied that the Risk Potential Assessment provides an accurate reflection of the programme/project at this stage of development.	
Signed Andrew Carruthers (Senior Responsible Owner)	Date 13/4/2021
I will re-asses the programme/project if there is a significant change to the programme/project scope or budget or if significant changes emerge that may threaten successful delivery.	
Signed Andrew Carruthers	Date 13/4/2021

(Senior Responsible Owner)	
----------------------------	--

## Appendix 16



## H DUHB Withybush General Hospital Fire Precautions Upgrade Scheme Phase 1 – March 2021

Integrated Impact Assessment Tool	Y/N	Evidence & Further Information	Completed By	Evidence
<b>Financial/Service Impacts</b>				
1. Has the new proposal/service model been costed?	N/A	Not Applicable infrastructure upgrade		
2. Does the budget holder have the resources to pay for the new proposal/service model, otherwise how will this be supported?	N/A	Not Applicable infrastructure upgrade		
3. Is the new proposal/service model affordable?	N/A	Not Applicable infrastructure upgrade		
4. Is there an impact on pay or non pay e.g. drugs, equipment, etc?	N	No additional revenue implications resulting from the programme are anticipated as replacement of existing infrastructure		
5. Is this a spend to save initiative?	N	This is a business case for capital investment.		
6. What is the financial or efficiency payback (prudence), if any?	N/A	Not Applicable		
7. Are there risks if the new proposal/service model is not put into effect?	Y	Risks could be MWWFRS take further enforcement action against HDUHB.	Project Group	BJC
8. Are there any recognised or unintended consequences of changes on other parts of the system (i.e. impact on current service, impact of changes in secondary care provision on primary care services and capacity	Y	More modern infrastructure and control systems such as fire dampers with central monitoring function	Project Group	BJC Estates Annex

or vice versa, or other statutory services e.g. Local Authorities?)				
9. Is there a need for negotiation/lead in times i.e. short term, medium term, long term?	<b>N</b>	No required negotiations. Welsh Government capital approval required. Lead in time for Building works mobilisation once approval for the capital is secured.		
10. Are capital requirements identified or funded?	<b>Y</b>	See BJC phase 1 for capital funding requirements and cashflow profile	Project Group	BJC/Estates Annex
11. Will capital projects need to be completed in time to support any service change proposed?	<b>N</b>			
12. Has a Project Board been identified to manage the implementation?	<b>Y</b>	As set out in BJC	Project Group	BJC
13. Is there an implementation plan with timescales to performance manage the process and risks?	<b>Y</b>	Phase 1 Delivery Programme and risk register included in BJC and associated Estates Annex based on an anticipated scope of works.	Project Group	BJC/Estates Annex
14. Is there a post project evaluation planed for the new proposal/service model?	<b>Y</b>	Post project evaluation and monitoring will be required by Welsh Government. Stages and detail to be agreed.	Project Group	BJC
15. Is the UHB clear of any other constraints which would prevent progress to implementation?	<b>Y</b>	The key constraint to the progress of this development is the availability of All Wales Capital from Welsh Government. The Project Risk Register captures current risks.	Project Group	BJC/Estates Annex
<b>Quality/Patient Care Impacts</b>				
16. a)Could there be a <i>positive</i> impact on patient outcome/care?	<b>N</b>	Works will be mostly above ceiling line although maybe some minor decorative uplift such as ceiling tile replacement.		

b) Could there be a <i>negative</i> impact on patient outcome/care	<b>Y</b>	Disruption to services during the delivery phase of the works although would be planned to minimize.		
17. Is there are potential for inequity of provision? E.g. rurality, transport.	<b>N</b>	Not applicable infrastructure upgrade		
18. Is there any potential for inconsistency in approach?	<b>N</b>	Not Applicable infrastructure upgrade		
19. Is there are potential for postcode lottery/commissioning?	<b>N</b>	Not Applicable infrastructure upgrade		
20. Is there a need to consider exceptional circumstances?	<b>N</b>	Not Applicable infrastructure upgrade		
21. Are there clinical and other consequences of providing or delaying/denying treatment <i>or the scheme</i> (i.e. improved patient outcomes, chronic pain, physical and mental deterioration, more intensive procedures eventually required?	<b>N</b>	Not Applicable infrastructure upgrade		
22. Are there any Royal Colleges standards, etc, applicable?	<b>N</b>	Not Applicable infrastructure upgrade		
23. Can clinical engagement be evidenced in the design of the new proposal/service model?	<b>Y</b>	Even though an infrastructure upgrade the Project Team have engaged with Hospital Management Teams as part of BJC development. Further extensive engagement will be required as part of delivery of the works	Project Team	BJC/Estates Annex
<b>Workforce Impact</b>				
24. Has the impact on the existing staff/WTE been determined?	<b>N/A</b>	Not Applicable infrastructure upgrade		

25. Is it deliverable without the need for premium workforce?	Y	Service Lead to be established to interface with Project Team		
26. Is there the potential for staff disengagement if there is no clinical/'reasonable' rationale for the action?	N			
27. Is there potential for professional body/college/union involvement?	N			
28. Could there be any perceived interference with clinical freedom?	N			
29. Is there potential for front line staff conflict with the public?	N			
30. Could there be challenge from the 'industries' involved?	N/A	Not Applicable		
31. Is there a communication plan to inform staff of the new arrangements?	Y	A Communication plan is being developed to ensure Clinical Hospital Teams are aware of scheme and impact on services and environment.	Project Group/Team	
32. Has the Organisational Change Policy been followed, including engagement/consultation in accordance with guidance?	N/A	Not Applicable		
33. Have training requirements been identified and will this be complete in time to support the new proposal/service model?	N/A	Not Applicable		
<b>Risk Impact</b>				
32. Has a risk assessment been completed?	Y	Risk Register/ RPA	Project Group	BJC

33. Is there a plan to mitigate the risks identified?	Y	As Risk Register	Project Group	BJC
<b>Legal Impact</b>				
34. Has legal compliance been considered e.g. Welsh Language: is there any specific legislation or regulations that should be considered before a decision is made?	N	Planning Permission not required Building Regulations/MWWFRS on going	Project Team	
35. Is there a likelihood of legal challenge?	N			
36. Is there any existing legal guidance that could be perceived to be compromised i.e. Independent Provider Contracts, statutory guidance re: Continuing Healthcare, Welsh Government Policy etc?	N			
37. Is there any existing contract and/or notice periods?	N			
<b>Reputational Impact</b>				
38. Is there a likelihood of public/patient opposition?	N			
39. Is there a likelihood of political activity?	N			
40. Is there a likelihood of media interest?	N	Unlikely although could be some negative press once works underway resulting from disruption.	Project Group/Team	
41. Is there the potential for an adverse effect on recruitment?	N			

42. Is there the likelihood of an adverse effect on staff morale?	<b>N</b>	Unlikely although could be some resulting from disruption caused to deliver works.		
43. Potential for judicial review?	<b>N</b>	No service changes		

**N/A Not Applicable**

# **Hywel Dda University Health Board**

## **Withybush Hospital – Fire Precaution Upgrade Works**

### **Phase One Business Justification Case**

Version: 1

12 April 2021

## Version Control

Version	Date Issued	Notes	Issued To
0.1	8 February 2021	Shell Document	Jason Wood – HDUHB; Miles Brown – MACE; Emma Francis – MACE; Kevin Parry – Lee Wakemans
0.2	2 March 2021	Updates to all cases	Jason Wood – HDUHB
0.3	12 March 2021	Updates to all cases	Jason Wood – HDUHB
0.4	15 March 2021	Incorporation of client feedback First full draft	Jason Wood – HDUHB
0.5	22 March 2021	Incorporation of capital costs Final draft	Jason Wood – HDUHB
0.6	29 March 2021	Updated final draft	Jason Wood – HDUHB
1.0	12 April 2021	Final Version	Jason Wood – HDUHB



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## 1.0 Executive Summary

Following visits from the Mid and West Wales Fire and Rescue Service (MWWFRS) to Withybush Hospital and associated sites in August and December 2019, Hywel Dda University Health Board (HDUHB) received enforcement notifications and letters of fire safety matters in relation to compliance with fire safety regulations.

A Programme Business Case was submitted to Welsh Government in March 2020 detailing a need for capital investment to enable the Health Board to achieve compliance within the stipulated timescales. The main risk associated with this BJC is the Failure to comply with the fire enforcement notices has a risk of prosecution and potentially the enforced closure of identified buildings.

This Business Justification Case (BJC) sets out the required investment and proposed programme of works in relation to Phase One of the required fire precaution upgrade works for Withybush General Hospital (including residential accommodation blocks) and Bro Cerwyn / St Brynachs Day Hospitals (including St Caradog's and St Non's Wards) Haverfordwest.

The approach to works has been developed on the basis that extensive over boarding is required to achieve the required fire rating, requiring an overall construction programme of 64 weeks. This programme will result in completion of the Phase One works in July 2022. This programme does extend the MWWFRS stipulated expectation for compliance with the enforcement notices by April 2022. Further dialogue with MWWFRS has been undertaken and agreement reached to review progress and notices in March 2022.

The capital costs outturn at an estimated cost of **£12,957,367** including VAT. This includes both the quantified risk contingency held by the Health Board and an additional quantified risk contingency to be held by WG reflecting the level of risk associated with the project.

The BJC seeks formal endorsement from Welsh Government (WG) for:

- Approval to proceed with the Main Works: Phase One;
- Release of the associated capital funding.

This business case has been structured in line with the Better Business Case Investment Guidance, five case model structure, which is in accordance with HM Treasury best practice and the approach prescribed by Welsh Government

## 1.1 Strategic Case

In 2019, the Mid and West Wales Fire and Rescue Service (MWWFRS) issued the Health Board with two enforcement notices due to failure to comply with provisions of the Regulatory Reform (Fire Safety) Order 2005 because people were unsafe in case of fire. The Health Board were also issued with two advisory letters indicating works required and that failure to comply would result in further enforcement notes being issued. These are summarised in Table 1 below:

Date	Details of enforcement notice
30/07/2019	MWWFRS visited Withybush Hospital on 30 July 2019. Enforcement notice EN/262/06 dated 8 August 2019 issued requiring Health Board required to remedy a number of specific areas by 30 November 2019.
19/11/2019	Health Board advise MWWFRS that a number of items on the schedule had been completed but that the compartmentation, fire doors and fire damper related items would require more time to resolve. MWWFRS subsequently agree extension to 31 January 2021.
01/12/2019	Fire incident at St Caradog's ward. MWWFRS visit site and issue enforcement notice EN/262/08 dated 6 December 2019 requiring resolution by 4 March 2020.
10/12/2019	Letter issued following MWWFRS visit to Bro Cerywn, St Non's and St Brynach wards advising there would be reinspection in 3 months and failure to comply may result in a further enforcement notice being issued.
07/01/2020	MWWFRS issue letter in relation to residential accommodation advising there would be reinspection in 6 months and failure to comply may result in a further enforcement notice being issued.
09/02/2020	Following a site visit on 7 February 2020 MWWFRS advised that EN/262/06 was withdrawn. As there were still outstanding issues for resolution further enforcement notices were issued dated 9 February 2020: KS/890/02 – action to be completed by 30 September 2020 KS/890/03 – action to be completed by 28 August 2021 KS/890/04 – action to be completed by 30 April 2020.
20/07/2020	Health Board advise MWWFRS of difficulties achieving compliance with the enforcement notices due to problems arising from the incidence of Covid-19. MWWFRS therefore grant extension of time for compliance for KS/890/02 to 30 January 2021.
26/08/2020	Health Board advise MWWFRS of difficulties achieving compliance with the enforcement notices due to problems arising from the incidence of Covid-19. MWWFRS therefore grant extension of time for compliance for KS/890/05 to 31 December 2021.

Date	Details of enforcement notice
02/10/2020	Health Board meet with MWWFRS to review progress.
05/11/2020	Health Board advise MWWFRS of difficulties achieving compliance with the enforcement notices due to problems arising from the incidence of Covid-19. MWWFRS therefore grant extension of time for compliance for KS/890/03 to 30 April 2022 and KS/890/04 to 30 April 2025.
06/01/2021	Health Board meet with MWWFRS to review progress and to present proposals for completion of the schedule of works
12/01/2021	MWWFRS issue a letter to confirm the agreed outcome of the meeting on 6 January 2021 whereby the enforcement notices are aligned with the proposed schedule of works: <ul style="list-style-type: none"> <li>• Stage 1 / Advanced works relating to Vertical Escape Routes and priority works at St Caradogs to be completed by end Jan 2021;</li> <li>• Stage 2 / Phase 1 works relating to all remaining escape routes at WGH and all remaining work at St Caradogs, St Nons to be completed by end April 2022;</li> <li>• Stage 3 / Phase 2 works relate to all department / ward areas including any sub compartmentation and risk room area to be completed by end April 2025.</li> </ul>
19/03/2021	MWWFRS confirm review of enforcement notices extended until March 2022.

Table 1: Summary of Enforcement Notices / Letters of Fire Safety Matters

The Programme Business Case (PBC) submitted in March 2020 detailed the outstanding works relating to compartmentation, fire resisting doors and fire damper systems which require substantial further investigation, planning of work and financial investment to remedy. A series of technical surveys were undertaken to allow initial assessments and assumptions of the required works to be made, however, the full extent of works, impact of asbestos and methodology restrictions could not be fully determined.

The proposed approach to delivery of the works set out in the PBC was to immediately address the most urgent works and to group the main package of works into two phases to remediate the fire compartmentation on the main hospital, residential accommodation blocks plus any remaining items from the advanced works phase in relation to the Bro Cerwyn / St Brynach's Day Hospitals site. The approach was agreed with MWWFRS and enforcement notices were amended to reflect the agreed delivery programme.

- Immediate Works: those works requiring immediate resolution including items of housekeeping, testing of emergency lighting and dry riser systems);
- Advanced Works: those works against which rapid progress was required including fire doors to main vertical escape routes and works to bedrooms in St Caradogs Mental Health unit;

- Phase 1 will concentrate on the fire stopping works to the primary escape routes (stem corridors) and will resolve the main compartmentation lines and 30-minute compartmentation as necessary i.e. escape routes, existing compartmentation between wards and high risk rooms and upgrading and provision of fire and smoke dampers and fire doors (subject of this BJC);
- Phase 2 will look at the sub-compartment and hazard rooms within departments and will resolve the 30-minute zones, typically general risk rooms on wards and departments etc including fire stopping, fire doors, upgrading and provision of fire dampers (subject of a subsequent BJC) and additional lobbied approaches to wards and stairwells.

Following approval of the PBC, the Advanced Works (those works against which rapid progress was essential) commenced on site and completed during February 2021.

The outstanding works (subject of this BJC) include the upgrade of existing main compartment walls to achieve agreed fire resistance rating, fire stopping throughout and repairs and/or replacement of fire doors along with integration of new fire / smoke dampers at the main compartment lines and are detailed in section 1.1.1 below.

### 1.1.1 Required Works

The Phase 1 element of the project remediates the main escape routes / compartmentation lines with works also encompassing the adjacent Mental Health and Residential Blocks. The requirement for compliance is for works to be completed by end April 2022.

The Phase 1 scope includes:

- Removal and replacement of suspended ceilings as necessary;
- Treatment of asbestos if impacted by the works;
- Repairs and replacement of defective fire door sets and furniture;
- Fire compartmentation improvement works as required both horizontally and vertically;
- Mechanical engineering installations including fire / smoke dampers (FDS) and associated ductwork;
- Control panels, temporary diversion of services to facilitate the works and associated builders work in connection (BWIC);
- Electrical installations modifications including door controls, minor alterations, minor fire alarm modifications to align with revised fire strategy.
- Temporary diversions as required including power, lighting, comms, alarms, ductwork and medical gas etc and associated BWIC.

In order to maintain the safety of staff, patients and visitors to the WGH site, the UHB must comply with the MWWFRS fire enforcement notices. Failure to adhere could result in prosecution and potentially an enforced closure of buildings.



Following discussion with MWWFRS the enforcement notices have been aligned with the schedule of works requiring the works associated with this BJC to be completed by April 2022. It is noted that the current construction programme extends beyond this timescale and further dialogue will therefore be required with MWWFRS to secure an extension to agreed completion dates. Discussion has taken place with MWWFRS and agreement has been reached for a review of progress in March 2022.

## 1.2 Economic Case

The Health Board have assessed the available options and determined that there are only two available options:

- Do nothing and risk prohibition notices;
- Undertake the works required to comply with the enforcement notices.

The approach to options development and appraisal was reviewed with NHS Wales Shares Services Partnership Specialist Estates Services (NWSSP-SES) in January 2021 where there was agreement that there is only one viable option available to the Health Board which is to undertake the works as required by MWWFRS. Adopting the phased approach to the works will allow for a continual programme of improvement and will allow more time to detail the requirements for the Phase Two works and how these can be approached to minimise the impact on operational services as far as possible.

This option ensures compliance with the Fire Enforcement requirements and sustains the hospital for the next 7 – 10 years in the context of the AHMWW Strategy.

The Do Nothing option risks further enforcement notices being served and potentially enforced closure of buildings. As this is not seen as a viable option, in agreement with WG, a Generic Economic Model (GEM) has not been completed for the scheme.

## 1.3 Commercial Case

### 1.3.1 Procurement Strategy

The Health Board has procured the design and construction elements of the proposed scheme through the NHS Building for Wales framework. The Supply Chain Partner and associated designer will be the Principal Contractor and Principal Designer for the purpose of the Construction (Design and Management) Regulations 2015 (CDM 2015).



The project is complicated in that it is impossible to assess the quantum and full nature of the works required in all areas prior to the business case submission, the elements being above ceiling in live wards and the sheer extent of survey and disruption that would be caused to the hospital. As such, the procurement strategy has had to respond to the level of risks and hence the procurement process is based on NEC Option E (cost reimbursable contract). This approach has been agreed with WG and NWSSP SES.

### **1.3.2 Service Requirements**

This BJC states a requirement for the delivery of the Fire Safety Precautions scheme under the NEC3 Engineering & Construction (ECC) Form of Contract (Option E) and Designed for Life: Building for Wales Framework.

A series of design proposals are available to support the functional content, based on Health survey reports and building notes and latest available guidance. A full copy of the latest version of the design proposals is included as an appendix to the Estates Annex.

This BJC covers the Phase 1 works only, Phase 1 being the main escape route and associated compartment walls. Phase 2 is to follow via a separate business case and will cover sub-compartment and risk rooms, which are mainly in the ward and department areas. The requirement for decant accommodation will also be further considered as part of Phase 2.

A phasing methodology and approach to delivering the works has been agreed in principle with the hospital management team and is further detailed within the estates annex.

### **1.3.3 Contractual Arrangements**

Contractual Arrangements with all parties have been entered into using the NEC contract as prescribed under the Framework. Due to the nature of the project, an Option E Contract (cost reimbursable contract) has been negotiated. This is a change to the framework standard of the NEC Option C form and as such it has required substantial amendments and re-writing. The final contract is being prepared for signing with final signing of contracts targeted for the end March / early April 2021.

Other than the change to NEC Option E, there are no key contractual clauses over and above the standard framework clauses, although requirements for AEDET, NEAT, BIM and BREEAM in relation to this project will be amended through local contract amendment.

### 1.3.4 Payment Arrangements

The Health Board have made, and will continue to make, payments to the externally appointed team in respect of products and services as follows:

- The contract will be managed by Hywel Dda University Health Board under the NEC3 Option C Target Cost Contract with regards to the Project Manager and Cost Advisor appointments, in line with 'Building for Wales' Framework terms and conditions;
- The contract will be managed by Hywel Dda University Health Board under the NEC3 Option E Cost Reimbursable with regards to the Supply Chain Partner appointment in line with 'Building for Wales' Framework terms and conditions.

The Project Bank Account process has been initiated and the account details verified by the Health Board as required. Following BJC approval, the Project Bank Account will be activated prior to the first contractual payment for work stage four.

## 1.4 Financial Case

The capital costs of the preferred option outturn at an estimated cost of **£12,957,367** including VAT and the quantified risk contingencies held by both the Health Board and WG.

### 1.4.1 Capital Costs

Capital cost forms are included at Appendix 12 and summarised in the table below:

Element	Capital Costs
Works Cost	£5,072,251
Fees	£1,533,497
Non-works Costs	£525,311
Equipment	N /A
Quantified Risk Contingency	£590,369
<b>Project Sub Total (excl. VAT)</b>	<b>£7,721,429</b>
VAT	£1,403,535
<b>Project Outturn Cost (inc. VAT)</b>	<b>£9,124,964</b>
<i>Quantified Risk Contingency</i>	
WG General Risk Contingency	£2,036,668
WG Specific Risk Contingency for over boarding	£1,157,001
<b>Risk Contingency Sub Total (excl. VAT)</b>	<b>£3,193,669</b>
VAT	£638,734
<b>Risk Contingency Total (inc. VAT)</b>	<b>£3,832,403</b>
<b>Forecast Project Outturn Cost</b>	<b>£12,957,367</b>

Table 2: Indicative Capital Costs

The cash flow is shown in Table 3.

	2020/21	2021/22	2022/23	2023/24	Total
Capital (£)	£528,318	£10,524,509	£1,720,298	£184,240	<b>£12,957,367</b>

Table 3: Indicative cash flow for capital expenditure

## 1.4.2 Revenue Implications and Affordability

It has been assumed that there will be no additional recurrent pay and non-pay costs, with the exception of capital charges attributable to the delivery of the programme. The Health Board's assumption is that capital charges including increased depreciation and any impairment charges on completion will be funded by Welsh Government. The estimated Annually Managed Expenditure (AME) Impairment charge is £8,989,724 and annual Departmental Expenditure Limit (DEL) depreciation charge is £103,159.

### **1.4.3 Funding Arrangements**

This project requires further funding from the Welsh Government NHS All Wales Capital programme.

## **1.5 Management Case**

### **1.5.1 Programme Management Arrangements**

The programme management structure for this programme is aligned with the Business Continuity (Major Infrastructure) Programme Approach which has been formally constituted and established in line with best practice (Managing Successful Programmes) and will be managed in accordance with PRINCE 2 methodology.

The programme of works identified within this business case will be managed via the WGH Delivery Team with direct reporting into the Project Board and the Capital, Estate, Information Management and Technology Sub-Committee (CEIMTS). A fortnightly Fire Enforcement Control Group has been established to ensure delivery of the agreed action plan.

The Health Board Director of Operations (Andrew Carruthers) is the formal Senior Responsible Officer (SRO) and will ensure that the programme meets its overall objectives and delivers its expected benefits. The Director of Estates, Facilities and Capital Management (Rob Elliott) is the Programme Director who will be responsible for the successful delivery of all projects within the programme. The Capital Development Manager (Jason Wood) will be the Estates lead overseeing operational delivery of the project.

### **1.5.2 Project Milestones**

The approach to works has been developed on the basis that extensive over boarding is required to achieve the required fire rating. The UHB are in ongoing discussions with MWWFRS to agree the principles of the fire and evacuation strategy and there may, therefore, be revisions to this assumption. On the basis of full over boarding being required the overall construction programme is 64 weeks. This could reduce to circa 60 weeks, subject to the over boarding being reduced to the anticipated minimum scope.

The detailed programme is included in Appendix 13 with key milestones shown in Table 4 below:

Programme	Time
<b>Phase 1 Delivery Programme:</b>	
Business Justification Case submission to WG	March 2021
WG approval to proceed to construction	April/May 2021
Phase 1 Completion of works (primary escape routes) based on 64 week programme	July 2022
<b>Phase 2 Delivery Programme:</b>	
Business Justification Case submission to WG	February 2022
Phase 2 Commencement of works on site	May 2022
Phase 2 Completion of Works (general ward / clinical spaces) based on 36 month programme	April 2025

Table 4: Programme Milestones

The proposed phasing strategy has been developed to ensure minimum disruption and congestion wherever possible (section 7.2.1, Table 18).

### 1.5.3 Arrangements for Contract Management

This will be administered under the NEC3 Engineering & Construction (ECC) Form of Contract, Option C Target Contract with Activity Schedule, with standard Designed for Life: Building for Wales Framework amendments for both the Project Manager and Cost Advisor.

For the design and construction contract for the Supply Chain Partner, Integrated Health Projects (IHP), this will be administered under the NEC3 Engineering & Construction (ECC) Form of Contract, Option E Cost Reimbursable Contract.

### 1.5.4 Main Risks

A comprehensive risk register is in place which has been ratified following a workshop including all of the delivery team members, HDUHB estates and operations team and importantly, the key stakeholders representing the hospital nursing / operational teams. The detailed risk register is included in Appendix 14, with the key risks (risk score 16 and above) identified in the table below:

Risk	Mitigation Measure
<b>Programme Risks</b>	
Extent of asbestos works	Survey where possible and proceed with caution
<b>Design Risks</b>	
Design / scope is not compliant with Hospital Fire Strategy & Evacuation strategy.  The Hospital does not have a full fire or evacuation strategy in place which can be used to inform the scope of works and design.	Explore every avenue to obtain fire strategy information from Hospital.  Recommend and appoint Fire Engineer/ consultant to validate / confirm the fire strategy.  Clearly state assumptions made in design so that these can be used as basis for when fire strategy is generated.
Completeness, adequacy and condition of the existing M&E designs and requirement for services diversions	Thorough surveys to be carried out to establish routes where diversions / modification required.  Surveys to establish flow rates 'before and after' service diversion to confirm reduction.
<b>Construction Risks</b>	
Disruption to existing services during construction impacting on hospital services	Regular liaison with stakeholders throughout the project. Contractor strategy to be developed.
Dampers to ductwork - Solution requires extensive fabric or other services removal	Early engagement between design team and SCP to provide an achievable solution
Live services impeding the Works and inability to isolate or relocate	Investigate the compartmentation lines
Pharmacy fire shutter at slab level, compliance with required fire resistance at floor level.	IHP to allow for replacement within costs
Pharmacy fire shutter maintenance Pharmacy must remain operational throughout works as fundamental to hospital operations	IHP to allow for replacement within costs Stakeholder meeting to confirm approach to working in this area.
Smoke sealing to doors / flatness of floors	
Incomplete Crest surveys not identifying the entire scope of fire stopping (both sides of wall / entire length of corridors and Phase 1 locations)	Establish fire stopping works from other side
Restricted surveying being undertaken at OBC / FBC (limited to 25 locations)	Apply assumptions to the further Works
<b>Financial Risks</b>	
Increased costs due to unknown works	Financial risk strategy agreed with WG.

Table 5: Main Risks

The HDUHB has agreed with WG and Shared Services that due to the difficulty in scoping the works contained in this Phase One BJC, that an additional risk allocation, over and above the project risk allocation, will be held centrally by WG. The BJC therefore includes for a reasonable level of contingency (wholly owned by the Health Board) along with a further sum allocated to the project but held by WG under Group 3 funding, being made available in the event that it is required.

The estimated cost of over boarding walls to achieve the required fire rating are included in this separate Risk Contingency. The mechanism for accessing this risk fund will be agreed with WG.

### **1.5.5 Main Benefits**

The main benefit from this project will be HDUHB compliance with fire enforcement notices. Additional benefits in relation to reduced backlog maintenance and a comprehensive concise fire strategy for the site will also be realised.

### **1.5.6 Programme Assurance**

Due to the nature of this BJC, the Health Board has determined that an Equality and Health Impact is not required. Ensuring that buildings are compliant with fire safety regulations will improve the safety for all patients, staff and visitors to the hospital.

A Risk Potential Assessment has been undertaken by the SRO (Appendix 15) and the project has been assessed as being low risk.

### **1.5.7 Post Project Evaluation**

The Programme Board will ensure that post project evaluation is undertaken in accordance with Welsh Government requirements. Evaluation will include:

- Evaluation of the project procurement stage;
- Evaluation of the various processes put in place during implementation;
- Evaluation of the project in use shortly after the works are completed.

### 1.5.8 Contingency Plans

There are no contingency plans should this project fail to achieve approval. The Health Board are at risk of receiving further enforcement notices which would impact on delivery of all hospital services.

## 1.6 Conclusion and Recommendations

This business case sets the required actions for Hywel Dda University Health Board to ensure compliance with fire safety regulations.

The business case has described the proposed approach to the works which aims for completion of the phase one works by July 2022. This is dependent on the outcome of discussions regarding the potential to over board existing fire compartment walls to increase fire resistance which could extend the phased completion date by circa four weeks. MWWFRS will review progress with the Health Board in March 2022.

The Health Board must comply within the stipulated timeframe set by the Mid and West Wales Fire and Rescue Service or risk prosecution and ultimately the potential closure of the Withybush Hospital and / or associated sites.

It is requested that Welsh Government:

- Approve this business case based on the proposed cost and approach to delivery of work;
- Acknowledge the MWWFRS expectations for completion of works requiring HDUHB to commence works in May 2021.



## 2.0 Introduction

### 2.1 Scope of Document

This Business Justification Case (BJC) has been developed to detail the required investment for Withybush General Hospital (including residential accommodation blocks) and Bro Cerwyn / St Brynachs Day Hospitals (including St Caradog's and St Non's Wards) Haverfordwest, in relation to fire precaution upgrade works.

Following visits from the Mid and West Wales Fire and Rescue Service (MWWFRS) to Withybush Hospital and associated sites in August and December 2019, Hywel Dda University Health Board (HDUHB) received enforcement notifications and letters of fire safety matters in relation to compliance with fire safety regulations. A Programme Business Case was submitted to Welsh Government in March 2020 detailing proposals which ensured that the Health Board would be able to achieve compliance within the stipulated timescales.

The PBC recommended immediate commencement on a programme of Advanced Works (essential works targeted at the buildings where the Health Board had received enforcement notices). These works have been completed.

The remaining works were packaged into two separate phases and this BJC specifically focuses on Phase One of the main works (primary escape routes). A separate BJC for Phase Two will address the sub-compartments and hazard rooms within departments and is intended to be submitted in February 2022.

## 2.2 Document Structure

This business case has been structured as follows and in line with the Better Business Case Investment Guidance, five case model structure, which is in accordance with HM Treasury best practice and the approach prescribed by Welsh Government (WG):

- **Strategic Case:** This section provides an overview of the context within which the investment will be made. It sets out the background and strategic context outlining the issues faced by Hywel Dda University Health Board and describes how the proposed investment will support organisational objectives;
- **Economic Case:** This section confirms the available options and makes recommendations for the preferred way forward;
- **Commercial Case:** This section sets out the procurement arrangements for the scheme;
- **Financial Case:** This section confirms funding arrangements and affordability and explains any impact on the balance sheet of the organisation;
- **Management Case:** This section details the plans for successful delivery of the project to cost, time and quality including the proposed approach for post project evaluation.

A glossary of abbreviations used is included at Section 9.0.

## 3.0 Strategic Case

This case describes the context within which this programme has been developed and demonstrates that the programme has been informed by, and will address, the identified drivers for change.

### 3.1 Organisational Overview

Hywel Dda University Health Board (HDUHB) is one of seven health boards in Wales and serves the population of mid and west Wales. The Health Board provides primary, community, in-hospital, mental health and learning disabilities services to a population of 384,000 taken from the three counties as follows:

- Carmarthenshire 183,936 residents;
- Ceredigion 79,488 residents;
- Pembrokeshire 120,576 residents.

HDUHB covers more than a quarter of the landmass of Wales and is the second most sparsely populated Local Health Board area, with roughly 13% of the total population of Wales.

Acute and community services are provided via four main hospital sites as well as a range of community-based services. The geography of the Health Board is challenging with journey times between the health board sites ranging from 45 to 105 minutes. The acute sites are:

- Bronglais General Hospital in Aberystwyth (BGH);
- Glangwili General Hospital in Carmarthen (GGH);
- Prince Philip Hospital in Llanelli (PPH);
- Withybush General Hospital in Haverfordwest (WGH).

#### 3.1.1 Hywel Dda Health and Care Strategy

In 2018, HDUHB published 'A Healthier Mid and West Wales: Our Future Generations living well' (AHMWW), the long-term strategy for transforming health services and delivering quality care closer to home. The AHMWW Programme is the Health Board's strategic transformation work programme which brings together all strategic work into one defined programme. The ethos of continuous engagement and co-production is at the heart of the programme with the key objective being to co-design future care and services with patients, staff, the public, key stakeholders and partners, in order to move beyond the traditional structure for NHS services by being truly able to address the needs of the population through earlier intervention, a flexible and joined up approach to care and preventing ill health in the first place.

The underlying ethos of AHMWW is that the programme should be clinically led and deliver a long-term strategic future for health and care. The focus is on keeping people healthy with a shift away from hospitals to care closer to home. While hospitals will continue to be a key part of the health and care system, the wider whole system approach will involve the hospitals working much more closely in the community at one end, while forming stronger links to highly specialised services at the other.

The future hospital model will have a new hospital located in the south of the region which will be the main site within a network of hospitals across mid and West Wales that includes the existing hospital sites. These hospitals will be vibrant centres supporting the health and well-being of the communities they serve. Under the proposal, Withybush Hospital will be repurposed to offer a range of services to support the social model for health and well-being.

The Health Board is developing a Programme Business Case (PBC) with the expectation of this being submitted to Welsh Government in July 2021. The PBC will set out the context and high-level need for the resources to support capital and estates planning for the delivery of the Health and Care Strategy transformation programme. This will deliver the essential estates infrastructure of a new purpose built planned and urgent care hospital and the repurposing of the existing hospital sites and will also consider the required for investment into the community estate infrastructure to support delivery of the new models of care.

A separate PBC has been developed to address the business continuity / estates infrastructure issues across all four acute hospitals within the context of the AHMWW Strategy. This has been formally submitted to Welsh Government and the Health Board are responding to scrutiny queries during March 2021.

Addressing the essential fire upgrade works as described in this BJC will be essential to maintaining both continuity of service in the interim period as well as supporting the re-purposing requirements.

### **3.1.2 Summary of Financial Standing**

The Health Board's outturn for 2019/20 was a deficit of £34.9m. For 2020/21 the UHB has developed an annual plan with a forecast deficit of £25m which is the projected end of year position.

### **3.1.2.1 Capital Plan**

The largest strategic capital commitments in the coming years and, for which detailed planning commenced in 2019/20, relate to the new build Urgent and Planned Care Centre and the repurposing of Glangwili and Withybush Hospitals. To support the UHB's capital and infrastructure plans, the UHB is currently considering the resource capacity and capability requirements to deliver this complex, high value programme and discussions with Welsh Government will be held to address the scale of development and modernisation needed including the digital modernisation required. This will include the need for a Programme Business Case to be developed to provide the evidence and confidence that major capital investment can help deliver the sustainable service model envisaged.

The Capital Investment Plan will prioritise both capital developments and backlog maintenance in line with the current prioritised position and strategic objectives and be informed by the current risks the organisation holds. A core focus of the capital plan is the delivery of essential quality and safety, business continuity schemes including replacements, issues of compliance and infrastructure maintenance.

### **3.1.2.2 Discretionary Capital Programme**

The UHB receives an annual allocation of circa £7.421m which is allocated annually into the areas of highest investment needs. For these locally controlled funds, this is in the main targeted to support issues of quality and safety, and business continuity and is allocated over the following headings:

- Infrastructure and statutory backlog;
- Estates statutory compliance;
- Replacement of medical and other equipment;
- Essential maintenance of estates infrastructure;
- Standardisation of medical equipment and devices across sites to enable cross site working;
- Capital support posts and business case developments;
- Significant upgrades of IT infrastructure and keeping pace with IT replacements.

The UHB faces very significant backlog pressures in IM&T, estates maintenance and equipment replacement which means that not all risks can be mitigated and programmes of replacement over a longer timeline are being developed and will need to be the subject of All Wales Capital support.

## 3.2 Policy Context

The Health Board has a corporate responsibility to deliver an efficient, safe estate that supports clinical services in line with HBN-008: Strategic Framework for the efficient management of healthcare estates and facilities. There are also legal responsibilities in the provision of soft and hard FM services requiring adherence to Health Technical Memoranda (HTM). HTMs provide guidance for the design, management and maintenance of healthcare engineering systems including fire safety.

There are a number of regulatory frameworks that the Health Board must comply with in relation to fire safety. These include:

- Building Regulations 2010;
- Regulatory Reform (Fire Safety) Order 2005;
- WHTM 05-01: Firecode Managing Healthcare Fire Safety (2019);
- WHTM 05-02: Fire safety in the design of healthcare premises (2014);
- HTM 05: Fire Safety (2011);
- Fire and Rescue Services Act (2004).

The Regulatory Reform (Fire Safety Order) consolidated the fire related legislation. As a result, the Healthcare Firecode suite of documents was revised with mandatory requirements for all NHS bodies. The NHS Wales Fire Safety Policy provides an unambiguous statement applicable to the NHS in Wales and premises where patients receive treatment or care. The aims are to minimise the incidence of fire throughout the NHS estate in Wales and to minimise the impact from fire on life, safety, delivery of service, the environment and property.

Compliance with these regulatory frameworks underpins this Business Justification Case.

## 3.3 Programme Investment Aims

Within the overall NHS planning context, the Minister for Health and Social Services has determined a series of investment objectives for the NHS Infrastructure Investment Programme including capital and revenue funding delivery models. These objectives have been adopted by HDUHB and interpreted for the overarching Estates Infrastructure programme as follows:

- Reduce the risk profile on Estate infrastructure;
- Maintain appropriate levels of patient safety and comfort;
- Extend the operating life of the hospitals;
- Support future service planning by ensuring sufficient infrastructure of systems resilience and capacity for future service modelling;
- Reduce essential backlog maintenance requirements;
- Identify and deliver a cost effective and value for money solution, programme timetable and budget.

The investment aims specific to this Business Case have been developed within the context of the overarching estates infrastructure approach and have a specific focus on ensuring compliance with the NHS Wales Fire Safety Policy on the Withybush Hospital Site.

The schemes of work included within this BJC are specific to WGH, elements of which are also works packages included in the Estates Infrastructure programme which is the subject of a separate business case. The programme investment aims for this BJC are to:

- Ensure compliance with core statutory standards namely Fire Code regulations;
- Reduce the risk profile on estate infrastructure;
- Support the delivery of safe, sustainable and accessible services, and facilitate high standards of patient care.

## 3.4 Existing Arrangements

Withybush Hospital is located in Haverfordwest and has a gross floor area of 43,368m<sup>2</sup> and provides 219 beds. The main hospital buildings were constructed in the 1970s and officially opened in 1979. A new Emergency and Urgent Care Centre was opened in 2010 and a new Renal Dialysis Unit opened in 2014.

There has been limited major investment since the opening of the original building apart from a retrospective install (1980s) of a pitched roof which is now nearing the end of its lifecycle. Most areas of the original hospital now require comprehensive refurbishment and this process has commenced with refurbishment of the Pathology department and some ongoing ward refurbishments. There is a need for considerable investment in the site with both the site engineering infrastructure and building assets either approaching or exceeding intended lifespan.



The age profile of the estate has implications on estate backlog performance which for WGH was assessed as being £13.3M at 31 March 2020.

Backlog Maintenance Costs by Risk Category per site per risk category for 2019/20				
High Risk Backlog Costs (£)	Significant Risk Backlog Costs (£)	Moderate Risk Backlog Costs (£)	Low Risk Backlog Costs (£)	Risk Adjusted Backlog Costs (£)
£0	£12,825,112	£4,160,515	£1,835,454	£13,253,467

Table 6: Withybush Hospital Site – 2019/20 Backlog Maintenance Liability

Figure 1 shows the age profile of the buildings on the Withybush Hospital site.



Figure 1: Withybush Hospital Building Age Profile

The Health Board has benefited from an uplift in its recurring discretionary capital allocation over the last few years and whilst this has been welcomed and has enabled greater flexibility at a local level to manage competing expenditure priorities, it remains extremely difficult to resolve



all risks. Even with a current level of discretionary capital of circa £7.4M, the HDUHB continues to face very significant backlog pressures in IM&T, estates maintenance and equipment replacement. The resulting impact has been service interruptions, risks to clinical service and business continuity and health and safety concerns. Not all risks can be mitigated and programmes of replacement over a longer timeline are being developed and will need to be the subject of All Wales Capital support. A separate PBC is being developed to address the business continuity / estates infrastructure issues across all four acute hospitals within the context of the AHMWW Strategy.

An overview assessment of the estate was undertaken in 2018 to determine the extent of works required to bring the acute sites in line with statutory compliance regulations. Fire compliance was assessed against the current version of HTM 05-02 - Firecode - Guidance in support of functional provisions 2015. It was determined that fire doors were generally in poor condition and that full system replacement would be required to achieve certified performance. Although progressive horizontal evacuation is possible from inpatient wards at one end, each ward has a dead end where escape is only possible via a staircase.

As part of developing this BJC a series of technical surveys have been undertaken to better understand the potential extent of the works required which are described further in section 3.5.4.

## 3.5 The Case for Change

In line with the AHMWW strategy there is a clear direction of travel for the future of the WGH site. The Health Board is also clear that as part of this strategy there is a need to maintain business continuity and a business-as-usual approach whilst the wider strategy is delivered. This requires the UHB to maintain estate and capital requirements to support clinicians to deliver services within the existing model during transition years. The business continuity schemes are crucial to on-going service delivery across the organisation and any deterioration in service delivery within the existing model will impact on clinical care and patient outcomes as well as affecting the ongoing engagement and positive relationship with the local population.

The following sections detail the fire enforcement notices that have been received, the works that have been completed, works that have commenced but not yet completed along with a detailed assessment of those works that are outstanding and form the subject of the business case.

### 3.5.1 Fire Enforcement Notices and Letters of Fire Safety Matters

The Mid and West Wales Fire and Rescue Service (MWWFRS) visited Withybush Hospital on 30 July 2019 and issued an enforcement notice (EN/262/06 dated 8 August 2019) requiring the Health Board to remedy a number of specific areas by 30 November 2019. The enforcement notice was issued due to failure to comply with provisions of the Regulatory Reform (Fire Safety) Order 2005 because people were unsafe in case of fire. The letter and accompanying schedule which detail the areas of non-compliance are included as Appendix 1 and summarised below:

Area of Non-Compliance	Required Action
Obstructed escape routes	Ensure that everyone can evacuate safely and quickly by removing combustibles and electrical equipment / wheeled bins from escape routes.
Compartmentation	Carry out full survey of the hospital to identify areas where fire compartmentation is incomplete. Reinstate fire resistance in areas identified
Fire resisting doors	Ensure all doors can resist fire and smoke for 30 minutes and upgrade defective doors.
Fire exit doors difficult to open	Ensure 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.
Sliding doors on escape route	Ensure that the automatic sliding door defaults to open in the event of a power failure or on operation of the fire alarm system.
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.
Emergency lighting system – maintenance	Ensure Emergency Lighting system is properly tested and maintained
Fire damper systems – maintenance	Ensure fire damper systems are properly tested and maintained.
Dry riser systems – maintenance	Ensure fire dry riser systems are properly tested and maintained.

Table 7: Areas of non-compliance EN/262/06

The Health Board informed MWWFRS on 19 November 2019 that a number of items on the schedule had been completed but that the compartmentation, fire doors and fire damper related items would require more time to resolve. The UHB advised that noting procurement timescales would mean physical works being undertaken later in 2020 (Appendix 2) and requested an extension of 12 months. MWWFRS responded to the UHB on 29 November 2019 stating that

this was not acceptable but did grant an extension of 2 months to 31 January 2020 (Appendix 3) to allow the UHB more time to develop a proposed plan. The plan was accepted by MWWFRS and revised enforcement notices issued to reflect this numbered KS/890/02, KS/890/03 and KS/890/04 (Appendix 7).

Following a fire incident at St Caradog's ward on 1 December 2019 (the mental health unit opposite the main Withybush site), MWWFRS visited the site and issued an enforcement notice (EN/262/08 dated 6 December 2019, Appendix 4). Resolution of the items raised was required by 4 March 2020.

Area of Non-Compliance	Required Action
Fire Risk Assessment	All items identified in the significant findings of the Fire Risk Assessment to be actioned within the identified timescales.
Fire resisting doors	Ensure all doors can resist fire and smoke for 30 minutes and upgrade defective doors.
Obstructed escape routes	Ensure that escape routes are cleared of obstructions and remain available for escape purposes at all times.
Compartmentation	Reinstate the fire resistance: ventilation system to be inspected and repaired
Compartmentation	Reinstate the fire resistance: fire resisting glazing removed from main corridor to be reinstated
Escape routes	Fire alarm system to be inspected and repaired / upgraded as necessary
Escape routes	Ensure 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.

Table 8: Areas of non-compliance EN/262/08

MWWFRS subsequently visited the adjacent Bro Cerywn, St Non's and St Brynach wards with a further letter relating to fire safety matters issued on 10 December 2019 (Appendix 5). The letter confirmed that MWWFRS would reinspect in approximately 3 months and works should be completed and that failure to comply may result in a further enforcement notice being issued.

Area of Non-Compliance	Required Action
Fire resisting doors	Ensure all doors can resist fire and smoke for 30 minutes and upgrade defective doors.
Compartmentation	Reinstate the fire resistance: compartmentation issues throughout the unit due to dampers showing fault on system
Maintenance	Ensure that certificates showing testing of the Emergency Lighting system are provided
Obstructed escape routes	Ensure that escape routes are cleared of obstructions and remain available for escape purposes at all times.
Compartmentation	Reinstate the fire resistance: holes in ceiling areas of offices, water leaking onto electrical appliances and sockets

Table 9: Areas of non-compliance St Nons and St Brynach's

The Health Board received a further letter relating to fire safety matters in relation to the residential accommodation dated 7 January 2020 (Appendix 6) which confirmed that MWFR would reinspect in approximately 6 months and works should be completed. Failure to comply may result in a further enforcement notice being issued.

Area of Non-Compliance	Required Action
Compartmentation	Full survey to be carried out
Fire resisting corridors	Ensure means of escape is kept free from fire and smoke for 30 minutes
Improve fire detection system	Change the type of and add to the fire detection system
Obstructed escape routes	Ensure that escape routes are cleared of obstructions and remain available for escape purposes at all times.
Escape lighting	Ensure that escape lighting on all escape routes are operating to the standard required and are regularly tested.
Establish emergency procedure	Establish procedure to be followed in case of fire
Reduce fire spread	Upholstered furniture to comply with the required standard

Table 10: Areas of non-compliance Residential Accommodation

Shortly after submission of the PBC in March 2020, the Covid-19 pandemic began to impact on routine services. As such, the Health Board experienced a number of operational difficulties which were impacting on the ability to achieve the stipulated timescales against the enforcement notices. The Health Board entered into dialogue with the MWWFRS and requested extensions to the agreed timelines including meeting with MWWFRS on two occasions (2 October 2020 and 6 January 2021).

MWWFRS acknowledged the difficulties and during 2020 agreed to the following extensions (Appendix 8):

- KS/890/02 – action to be completed by 30 January 2021;
- KS/890/03 – action to be completed by 30 April 2022;
- KS/890/04 – action to be completed by 30 April 2025;
- KS/890/05 – action to be completed by 31 December 2021.

At the meeting with MWWFRS on 6 January 2021, the Health Board discussed options for completion of the works. MWWFRS agreed to the proposed approach as detailed in the PBC and agreed to review the timelines within the enforcement notices. On 12 January 2021 MWWFRS formally confirmed alignment of enforcement notices with the proposed works delivery programme (Appendix 9). The requirement for compliance is:

- Stage 1 / Advanced works relating to Vertical Escape Routes and priority works at St Caradogs to be completed by end Jan 2021;
- Stage 2 / Phase 1 works relating to all remaining escape routes at WGH and all remaining work at St Caradogs, St Nons to be completed by end April 2022;
- Stage 3 / Phase 2 works relate to all department / ward areas including any sub compartmentation and risk room area to be completed by end April 2025.

In a letter dated 19 March 2021, MWWFRS confirmed that they do not want to review enforcement notice KS/890/03 until early 2022 and have requested that the UHB contact them in March 2022 to update them on progress and to discuss an appropriate extension (Appendix 10).

In order to maintain the safety of staff, patients and visitors to the WGH site, the UHB must comply with the MWWFRS fire enforcement notices. Failure to adhere could result in prosecution and potential an enforced closure of buildings.

### 3.5.2 Immediate Works

As described in the PBC, a number of issues requiring resolution in relation to enforcement notice EN/262/06 were immediately actioned as confirmed with MWWFRS (Appendix 11):

- Obstructed Escape Route: All housekeeping items resolved by a combination of clearance, management process updates and the purchase of external storage units;
- Fire Exit Door Difficult to Open: Works completed 25 November 2019;
- Sliding Doors on Escape Route: Works completed 25 November 2019;
- Inner Room: Works completed 25 November 2019
- Maintenance – Emergency Lighting: Testing records are in place and have been sent to MWWFRS. Investment in auto testing system made and auto test took place 24-26 December 2019;
- Dry Riser Systems: A contract for testing has been put in place. Test records have been sent to MWWFRS.

The PBC stated that the outstanding items (relating to compartmentation, fire resisting doors and fire damper systems) required substantial further investigation, planning of work and financial investment to remedy. A series of technical surveys were undertaken to allow initial assessments and assumptions of the required works to be made, however, the full extent of works, impact of asbestos and methodology restrictions could not be fully determined at that stage.

The proposed approach to delivery of the works was to immediately address the most urgent works and to group the main package of works into two phases to remediate the fire compartmentation on the main hospital, residential accommodation blocks plus any remaining items from the advanced works phase in relation to the Bro Cerwyn / St Brynach's Day Hospitals site.

The approach was agreed with MWWFRS and enforcement notices were amended to reflect the agreed delivery programme. The following sections describe progress against the Advanced Works and the outstanding work packages that will be addressed through this BJC.

### 3.5.3 Advanced Works

The Advanced Works were those works against which rapid progress was essential. The Fire Service were given assurance that work would be progressed in advance of the formal business justification case approval process.

Welsh Government approved the commencement of the Advanced Works and following financial approvals and a local tender based procurement exercise, works commenced on site during 2020 and completed in February 2021. These works included:

- Escape stairwells in the main hospital;
- Works to the fire doors to bedrooms in St Caradogs Mental Health Unit.

### 3.5.4 Outstanding Works

In line with the agreed strategy with MWWFRS, the PBC recommended approaching the remaining works in two phases:

- Phase 1 will concentrate on the fire stopping works to the primary escape routes (stem corridors) and will resolve the main compartmentation lines and 30-minute compartmentation as necessary i.e. escape routes, existing compartmentation between wards and high risk rooms and upgrading and provision of fire and smoke dampers and fire doors (subject of this BJC);
- Phase 2 will look at the sub-compartment and hazard rooms within departments and will resolve the 30-minute zones, typically general risk rooms on wards and departments etc including fire stopping, fire doors, upgrading and provision of fire dampers (subject of a subsequent BJC) and additional lobbied approaches to wards and stairwells.

To support the development of the PBC, a series of specialist surveys were conducted to enable initial assessments and assumptions to be made. This concluded that the overall works programme was likely to be in excess of 4 years and that more detailed technical surveys were required to determine the full extent of works, the impact of asbestos and likely methodology restrictions.

The difficulty in assessing the scope of the work content within a business case stage includes its sheer volume and accessibility, whilst keep the hospital functioning. “As Built” information is also lacking in both accuracy and extent. The majority of fire stopping remedials are above ceiling voids and would require a full survey to both sides of the partition, removal / investigation of every previously sealed penetration. This is impractical as would require extremely high inputs of labour and time and is almost as disruptive as physically undertaking the works itself requiring detail above ceiling surveys within wards and the like. Similarly, until ceilings are removed, it is difficult to ascertain the extent of the difficulty in carrying out the remedial activity, for example determining whether services placed close to the wall preventing access and requiring diverting prior to firestopping works being undertaken.



The Phase 1 element of the project remediates the main escape routes / compartmentation lines with works also encompassing the adjacent Mental Health and Residential Blocks. The scope includes:

- Removal and replacement of suspended ceilings as necessary;
- Treatment of asbestos if impacted by the works;
- Repairs and replacement of defective fire door sets and furniture;
- Fire compartmentation improvement works as required both horizontally and vertically;
- Mechanical engineering installations including fire / smoke dampers (FDS) and associated ductwork;
- Control panels, temporary diversion of services to facilitate the works and associated Builders Work in Connection (BWIC);
- Electrical installations modifications including door controls, minor alterations, minor fire alarm modifications to align with revised fire strategy.
- Temporary diversions as required including power, lighting, comms, alarms, ductwork and medical gas etc and associated BWIC.

Acknowledging the difficulties in fully establishing the required works, the SCP has undertaken a number of targeted detail reviews and surveys of areas of the site to establish the likely issues that will be encountered during the construction phase.

HUHB has undertaken substantial surveys of the main 'corridor' areas, along with the fire doors which have been used as a basis. The SCP has tested this data via detail surveys of at least 27 number sample locations. This is detailed within the accompanying Estates Annexe and summarised in Figure 2 below.



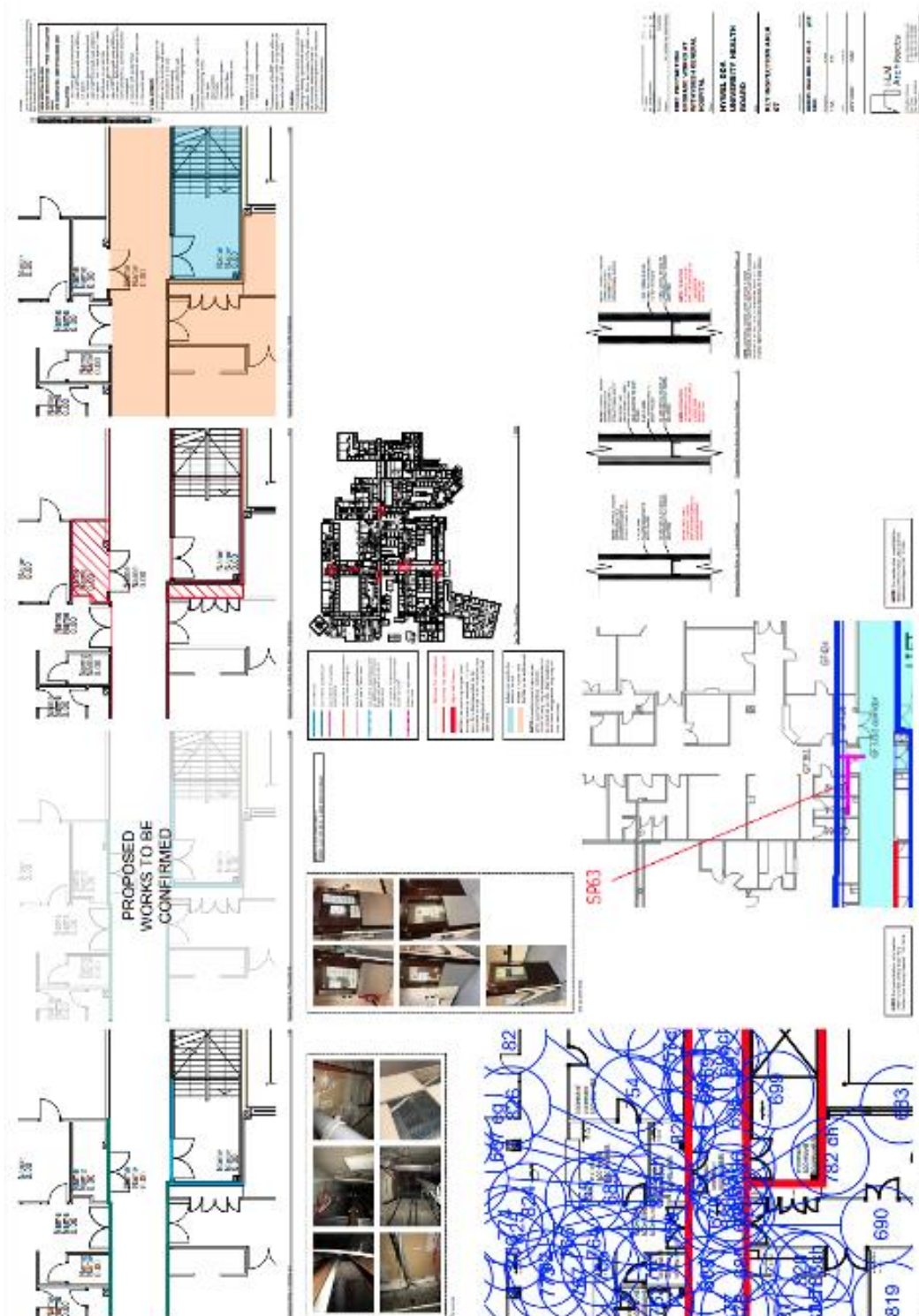


Figure 2: Sample Inspection Areas

An exercise has also been completed to establish a fire strategy as this currently does not exist in a coordinated, combined document. This exercise has supported the horizontal evacuation strategy currently implemented at the hospital and defined the Phase 1 area.

The scope of these works is to ensure compliance with the enforcement notices that have been issued. This will require the development of both fire and evacuation strategies and to then engineer the fire compartment walls once they are located. Within these Phase 1 works the vertical penetration areas are to also be sealed.

The technical team have reviewed the comments within the enforcement notices and have developed design proposals for this phase of the works which are detailed within the accompanying Estates Annexe.

The design team have collated all available information into drawings for each section of wall, indicating works required and scheduling penetrations to be rectified. It is recognised that due to the nature of the project this cannot possibly be 100% accurate but allows a good basis for market testing and future cost management.

The SCP M&E specialists have undertaken more extensive surveys for the fire dampers, but also importantly to ascertain, as far as is reasonably possible, the extent of potential diversions that may be required in order to undertake the fire precaution works.

HLM Architects have carried out visual surveys of the main hospital room layouts. Using these updated Existing General Arrangement drawings the health boards fire officer, the fire engineer and IHP are developing a fire strategy plan for the main hospital building.

### **3.5.5 Changes to Scope since PBC**

It is acknowledged, that due to the nature of the works this BJC will not describe a fully defined schedule of works and that the programme will need to be responsive to findings as the works progress.

As part of scoping the required works, HDUHB in conjunction with the appointed technical team have revisited the internal fire compartmentation. Many of the internal walls are lightweight partition walls presenting concerns that they were not offering sufficient protection in the event of a fire. Discussion has taken place with British Gypsum (the original wall system supplier) which has identified that no fire test data exists for these wall constructions. British Gypsum indicated that in their opinion the maximum fire resistance would be 30 minutes and suggested over boarding would be required to achieve a 1-hour fire wall.

As a result, during February 2021 the UHB decided to have a section of wall tested at a specialist offsite testing facility by the Building Research Establishment (BRE). Although the final report is awaited, BRE has determined that the existing walls as constructed, offer 45-minute protection.

As a consequence, there is a potential that compartment walls will still need to have additional layers of plasterboard overlayed to ensure compliance which is currently allowed for within the scheme costs and programme. The UHB Fire Manager is in discussion with MWWFRS as to whether there is an alternative solution to dealing with the findings of the fire test. A meeting with MWWFRS to further discuss this is scheduled towards the end of March 2021. If this alternative strategy is deemed successful, the requirement to over board the walls could be reduced.

Works to the main plant spaces have been brought forward into Phase One due to the higher risk potential of a fire starting and to ensure continuity of works for the supply chain partner through the programme.

It is noted that the current construction programme extends beyond this timescale and further dialogue will therefore be required with MWWFRS to secure an extension to agreed completion dates. Discussion has taken place with MWWFRS and agreement reached for further review in March 2022.

## 3.6 Business Needs

This BJC demonstrates that HDUHB is at risk of prosecution and potentially the enforced closure of identified buildings for non-compliance with fire enforcement notices. In order to maintain the safety of all staff, patients and visitors at WGH, HDUHB must address all of the areas of concern. The BJC describes the actions that have already been undertaken by the UHB and sets out the required action and associated investment plan to ensure compliance with all fire safety matters as identified by the MWWFRS.

The strategic drivers underpinning this Business Case are aligned with the organisational strategy:

- Supporting the transformation programme, planning priorities and strategic objectives;
- Ensuring the estate is functionally suitable for purpose;
- Ensuring the estate is compliant with statutory requirements and latest estate standards and guidance where it is possible to do so and those articulated within the Business Continuity (Major Infrastructure) Programme Business Case submitted to Welsh Government.

## 3.7 Potential Scope and Service Requirements

The scope of this business case is the programme of works required to ensure all buildings on the Withybush site are compliant with fire safety regulations. Whilst the proposed delivery strategy has taken into consideration the need to minimise the impact on operational service delivery, the nature of the works makes it impossible to avoid a degree of disruption. A stakeholder engagement and liaison strategy will be in place for the duration of the works (as described in the Management Case). This will ensure that there is a robust approach to maintaining all essential service requirements, acknowledging that this may impact on overall programme length.

## 3.8 Covid-19

The potential impact of Covid-19 on this project has been considered extensively and the programme will need to respond flexibly to any further disruption as a result of the pandemic. Appropriate infection control measures will be enforced throughout the works programme with regular review as required. Risks associated with Covid-19 are identified on the risk register (Appendix 14).

## 3.9 Main Benefits

There are two main benefits associated with this project. It is unlikely that these will be fully realised until the end of Phase 2 works:

- Removal of the fire enforcement notices;
- Improved safety of patients, staff and visitors in the event of a fire.

## 3.10 Main Risks

The main risk associated with this BJC is the failure to comply with the fire enforcement notices leading to risk of prosecution and potentially the enforced closure of identified buildings. A detailed risk register has been developed for the project which considers strategic, financial, design and construction risks (see section 7.5.2).

## 3.11 Constraints

There are a number of constraints to the delivery of the Phase 1 project requiring management:

- Availability of capital funding;
- A need to comply with the timeframes stipulated by MWWFRS;
- A need to minimise disruption to services during the construction phases.

## 3.12 Dependencies

The project is dependent on the following considerations:

- MWWFRS support to the proposed approach;
- WG and NWSSP SES support to proposed approach;
- Availability of capital funding, noting that WG have already funded the Advanced Works Package.

## 4.0 Economic Case

The purpose of the economic case is to identify the programme that optimises value for money. Having determined the strategic context for the investment proposal and established a robust case for change, this part of the economic case:

- Identifies critical success factors;
- Identifies and assesses the options for delivering service needs;
- Identifies a preferred way forward based on the preferred programme.

### 4.1 Critical Success Factors

The critical success factors associated with this PBC are:

- Strategic Fit:
  - Compliance with MWWFRS fire enforcement notices.
- Achievability:
  - Timescales for delivery;
  - Deliverability with minimal site constraints or challenges;
  - Potential affordability (capital).

### 4.2 Main Options

The Health Board have assessed the available options and determined that there are only two available options:

- Do nothing and risk prohibition notices;
- Undertake the works required to comply with the enforcement notices.

The approach to options development and appraisal was reviewed with NHS Wales Shares Services Partnership Specialist Estates Services (NWSSP-SES) in January 2021 where there was agreement that there is only one viable option available to the Health Board which is to undertake the works as required by MWWFRS. Adopting the phased approach to the works will allow for a continual programme of improvement and will allow more time to detail the requirements for the Phase Two works and how these can be approached to minimise the impact on operational services as far as possible.

The Do Nothing option risks further enforcement notices being served and potentially enforced closure of buildings. As this is not seen as a viable option, in agreement with WG, a Generic Economic Model (GEM) has not been completed for the scheme.

## 4.3 Preferred Way Forward

The UHB must comply with the requirements of the fire enforcement notices resulting in only one viable option (i.e. the Do Minimum option). This option ensures compliance with the Fire Enforcement requirements and sustains the hospital for the next 7 – 10 years in the context of the AHMWW Strategy.

The proposed approach is summarised within the strategic case (section 3.5.4) and described in detailed within the Estates Annexe which accompanies this BJC.

The capital and revenue implications of the preferred way forward are described in Section 6.0 (Financial Case) and the timescales are as described in Section 7.0 (Management Case).



## 5.0 Commercial Case

### 5.1 Procurement Strategy

The Health Board has procured the design and construction elements of the proposed scheme through the NHS Building for Wales framework. The Supply Chain Partner team includes design consultant services. It is this team who will develop the current surveys and provide a cost based upon agreed delivery approach and methods. The Supply Chain Partner and associated designer will be the Principal Contractor and Principal Designer for the purpose of the Construction (Design and Management) Regulations 2015 (CDM 2015).

The project is complicated in that it is impossible to assess the quantum and full nature of the works required in all areas prior to the business case submission, the elements being above ceiling in live wards and the sheer extent of survey and disruption that would be caused to the hospital.

The initial tender enquiry was issued using the framework standard NEC Option C contract (target cost) with interviews scheduled for 7 October 2020. The Supply Chain Partners (SCP) felt that, due to the impossibility of accurately defining and therefore costing the works, the risks associated with the contract were too high and no bids were returned.

Following consultations with Welsh Government and NHS Wales Shared Services Partnership Specialist Estates Services (NWSSP SES), a revised tender approach based on NEC Option E (cost reimbursable contract) was agreed and the tender process was rerun with a closing date of 26 October 2020. Two tenders were received from Interserve and Integrated Health Projects (IHP).

Following a robust interview process on 5 November 2020, IHP were selected and appointed as the successful SCP for the scheme.

#### 5.1.1 Contract Type

Contractual Arrangements with all parties have been entered into using the NEC contract as prescribed under the Framework. Due to the nature of the project, an Option E Contract (cost reimbursable contract) has been negotiated. This is a change to the framework standard of the NEC Option C form and as such it has required substantial amendments and re-writing.



As of 15 March, a series of meetings have been held between HDUHB, NWSSP SES, IHP and the respective legal parties. Agreements have been made and the final contract is being prepared for signing. Final signing of contracts is targeted for the end March / early April 2021.

Other than the change to NEC Option E, there are no key contractual clauses over and above the standard framework clauses, although requirements for AEDET, NEAT, BIM and BREEAM in relation to this project will be amended through local contract amendment.

## 5.2 Service Requirements and Outputs

This BJC states a requirement for the delivery of the Fire Safety Precautions scheme under the NEC3 Engineering & Construction (ECC) Form of Contract (Option E) and Designed for Life: Building for Wales Framework.

A series of design proposals are available to support the functional content, based on Health survey reports and building notes and latest available guidance. A full copy of the latest version of the design proposals is included as an appendix to the Estates Annex.

This BJC covers the Phase 1 works only, Phase 1 being the main escape route and associated compartment walls. Phase 2 is to follow via a separate business case and will cover sub-compartment and risk rooms, which are mainly in the ward and department areas.

A phasing methodology and approach to delivering the works has been agreed in principle with the hospital management team and is further detailed within the Estates Annex.

## 5.3 Commercial Arrangements

This section details the proposed procurement approach and gives detailed consideration to the specific commercial arrangements required. The preferred funding option for the investment is via Welsh Government Funding as public funding is considered the only viable option for this scheme.

### 5.3.1 Contractual Arrangements

In consultation with NWSSP SES, the Health Board have elected to adopt the NEC Option E contract. This is a cost reimbursable contract in which the contractor is reimbursed the actual costs they incur in carrying out the works plus an additional fee. Whilst this does place a greater financial risk on the Health Board, this contract type tends to be used where the nature or scope

of the work cannot be properly defined at the outset, and the risks associated with the works are high. Option E was therefore felt to be the most appropriate contract type for this scheme.

### **5.3.2 Payment Arrangements**

The Health Board have made, and will continue to make, payments to the externally appointed team in respect of products and services as follows:

- The contract will be managed by Hywel Dda University Health Board under the NEC3 Option C Target Cost Contract with regards to the Project Manager and Cost Advisor appointments, in line with 'Building for Wales' Framework terms and conditions;
- The contract will be managed by Hywel Dda University Health Board under the NEC3 Option E Cost Reimbursable with regards to the Supply Chain Partner appointment in line with 'Building for Wales' Framework terms and conditions.

The Project Bank Account process has been initiated and the account details verified by the Health Board as required. Following BJC approval, the Project Bank Account will be activated prior to the first contractual payment for work stage four.

### **5.3.3 Proposed Charging Mechanisms**

At the completion of the projects there will be no ongoing service arrangements provided by the Procurement partner and therefore no recurring charges associated with project.

## **5.4 Quality Assurance / Standards Compliance**

Upgrade works will be designed and installed in line with HTM 05-02 where reasonably practicable. Where total compliance cannot be achieved, engineered judgement from competent fire safety specialists will be drawn upon to ensure compliance with the functional requirements of the regulations can be achieved. A full derogations schedule is included within the Estates Annex accompanying this BJC.

Due to the nature of the project, the existing building, and project scope of works, BIM level 2 will not be provided. A Common Data Environment and naming conventions of which the client team will be involved with, will be in place. The project will be providing a comprehensive fire and evacuation strategy for the Withybush General Hospital (including Residential Accommodation Blocks) and Bro Cerwyn/St Brynach Day Hospitals (including St Caradog's & St Non's Wards).

AEDET, NEAT and BREEAM are also not relevant to this scheme.

## 5.5 Personnel Implications

The internal project management arrangements and requirements for specialist advice to support the design, procurement and delivery of the projects will be reviewed on an ongoing basis to ensure that adequate resources are available to deliver projects to the quality, cost and timelines required. The resource implications for the work packages are identified in the cost forms.

As this procurement is for construction only there are no Transfer of Undertakings (Protection of Employment) (TUPE) and Retention of Employment (RoE) implications.

## 5.6 Potential for Risk Transfer

The general principle is that risks should be passed to “the party best able to manage them”, subject to value for money (VFM). The following table indicates where the responsibility for risk lies between public and private sector:

Risk category	Potential Allocation		
	Public	Private	Shared
Design Risk	✓		
Construction and development risk	✓		
Transition and implementation risk	✓		
Availability and performance risk	✓		
Operating risk	✓		
Variability of revenue risks	✓		
Termination risks	✓		
Technology and obsolescence risks	✓		
Control risks	✓		
Residual value risks	✓		
Financing risks	✓		
Legislative risks	✓		
Other project risks	✓		

Table 11: Risk Allocation Matrix

The HDUHB has agreed with WG and Shared Services that due to the difficulty in scoping the works contained in this Phase One BJC, that an additional risk allocation, over and above the project risk allocation, will be held centrally by WG. The estimated cost of over boarding walls to achieve the required fire rating are included in this separate Risk Contingency and is excluded from the Works Cost. The mechanism for accessing this risk fund will be agreed with WG.

## 5.7 Accountancy Treatment

It is estimated that the impact on the Balance Sheet of the Health Board will be an increase in the value of fixed assets by £3,967,642.

## 6.0 Financial Case

### 6.1 Capital Costs

The purpose of this section is to set out the financial implications of the preferred option identified in the Economic Case and the proposed deal as described in the Commercial Case.

The capital costs of the preferred option outturn at an estimated cost of £12,957,367 including VAT. This includes the quantified risk contingency held by the Health Board and an additional quantified risk contingency to be held by WG as summarised in Table 12 below. The cash flow is included in Table 13. Capital cost forms are included at Appendix 12.

Element	Capital Costs
Works Cost	£5,072,251
Fees	£1,533,497
Non-works Costs	£525,311
Equipment	N / A
Quantified Risk Contingency	£590,369
<b>Project Sub Total (excl. VAT)</b>	<b>£7,721,429</b>
VAT	£1,403,535
<b>Project Outturn Cost (inc. VAT)</b>	<b>£9,124,964</b>
Additional Quantified Risk Contingency	
WG General Risk Contingency	£2,036,668
WG Specific Risk Contingency for over boarding	£1,157,001
<b>Risk Contingency Sub Total (excl. VAT)</b>	<b>£3,193,669</b>
VAT	£638,734
<b>Risk Contingency Total (inc. VAT)</b>	<b>£3,832,403</b>
<b>Forecast Project Outturn Cost</b>	<b>£12,957,367</b>

Table 12: Indicative Capital Costs

	2020/21	2021/22	2022/23	2023/24	Total
Capital (£)	£528,318	£10,524,509	£1,720,298	£184,240	<b>£12,957,367</b>

Table 13: Indicative cash flow for capital expenditure

### 6.1.1 Capital Cost Assumptions

The following assumptions have been made in developing the capital costs for this PBC:

- Capital costs – costs are escalated with published and assessed inflation for the duration of the project;
- Professional Fees – based on allowance of 30.23% of works costs;
- Location Factor – 0.97;
- Risk Contingency – based on quantified risk register (Appendix 12) equating to 8.28% of combined works, fees and non-works costs;
- A planning contingency has not been included;
- VAT: with the exception of professional fees (20%), no allowance has been made for VAT recovery. An assessment will be made of potential VAT recovery with the Health Board's VAT advisors with opportunities for VAT recovery maximised;
- An additional quantified risk contingency (to be held by WG) has been included in relation to the anticipated additional risk level associated with the project. This includes a sum for general risk contingency and a specific contingency for over boarding. Together this equate to 44.79% of combined works, fees and non-works costs;
- The internal project management costs associated with the development of this programme business case have been included in the professional fees.

### 6.1.2 Changes in Capital Cost Assumptions from PBC

At PBC stage, a series of technical surveys were undertaken to allow initial assessments and assumptions of the required works to be made. It was acknowledged that the full extent of works could not be fully determined at that stage and that more detailed analysis of requirements at BJC stage would refine the assumptions.

The technical team have undertaken a number of targeted surveys to support assessment of the requirements and to establish the likely issues during the construction phase. Given the nature of the works, the full scope cannot be fully determined until works begin on site, therefore indicative allowances and / or assumptions for certain elements have been made.

Table 14 provides a comparison between the indicative cost assumptions made at PBC stage and the projected outturn at BJC stage. It should be noted that at PBC stage the value of the Advanced Works (£350,000) were included within the Phase One costs, these have been excluded from the BJC assessment as they are part of a separate funding approval with Welsh Government.

Element	PBC Indicative Costs	BJC Projected Outturn	Variance
Works Cost	£2,550,000	£5,072,251	£2,522,251
Design Fees	£450,000	£1,533,497	£1,083,497
Non-works Costs	£230,000	£525,311	£295,311
Equipment	£60,000	N/A	(£60,000)
Project Risk Contingency	£490,000	£590,369	£100,369
<b>Sub Total (excl. VAT)</b>	<b>£3,780,000</b>	<b>£7,721,429</b>	<b>£3,941,429</b>
VAT	£330,000	£1,403,535	£1,073,535
<b>Total (inc. VAT)</b>	<b>£4,110,000</b>	<b>£9,124,964</b>	<b>£5,014,964</b>
Additional Quantified Risk Contingency (inc VAT)	N/A	£3,832,403	£3,832,403
<b>TOTAL</b>	<b>£4,110,000</b>	<b>£12,957,367</b>	<b>£8,847,367</b>

Table 14: Changes in capital costs from PBC

## 6.2 Revenue Implications and Affordability

For the purposes of this business case it has been assumed that there will be no additional recurrent pay and non-pay costs, with the exception of capital charges attributable to the delivery of the programme. The Health Board's assumption is that capital charges including increased depreciation and any impairment charges on completion will be funded by Welsh Government. The estimated Annually Managed Expenditure (AME) Impairment charge is £8,989,724 and annual Departmental Expenditure Limit (DEL) depreciation charge is £103,159.

## 6.3 Funding Arrangements

This project requires further funding from the Welsh Government NHS All Wales Capital programme.

## 7.0 Management Case

This section of the PBC demonstrates the approach that HDUHB will take to support the delivery of the programme in accordance with best practice. The programme management arrangements are aligned with those described in the Estates Infrastructure Programme Business Case ensuring that the Health Board are able to make progress against the identified key priority areas but also have sufficient flexibility to respond to changing requirements.

### 7.1 Programme Management Arrangements

The programme management structure within which this project sits, is aligned with the Business Continuity (Major Infrastructure) Programme Approach which has been formally constituted and established in line with best practice (Managing Successful Programmes) and will be managed in accordance with PRINCE 2 methodology.

The programme of works identified within this business case will be managed via the WGH Delivery Team with direct reporting into the Project Board and the Capital, Estate, Information Management and Technology Sub-Committee (CEIMTS). A fortnightly Fire Enforcement Control Group has been established to ensure delivery of the agreed action plan.

The Estates Infrastructure Programme Board will provide strategic direction in order to develop the specific capital investment proposals within this Business Justification Case and ensure that these are aligned with the Business Continuity (Major Infrastructure) PBC. Progress will be reported to the Health Board via the Capital, Estates and Information and Technology Sub-committee as illustrated in Figure 3 below.





Figure 3: Governance Structure

## 7.1.1 Project Roles and Responsibilities

The Health Board Director of Operations (Andrew Carruthers) is the formal Senior Responsible Officer (SRO) and will ensure that the programme meets its overall objectives and delivers its expected benefits. The Director of Estates, Facilities and Capital Management (Rob Elliott) is the Programme Director who will be responsible for the successful delivery of all projects within the programme. The Capital Development Manager (Jason Wood) will be the Estates lead overseeing operational delivery of the project.

Role	Responsibility
Project Board	<p>Responsible for successful delivery of the Programme to meet requirements of MWWFRS</p> <ul style="list-style-type: none"> <li>• Monitor programme / project plan for completion at key stages in capital investment process and monitor on a monthly or as required basis;</li> <li>• Provide strategic leadership and direction to the Delivery Team;</li> <li>• Approve project plan for completion of key stages and monitor on behalf of HDUHB;</li> <li>• Provide a challenge mechanism for the project;</li> <li>• Receive project reports and outputs ensuring sufficient detail is provided;</li> </ul>

Role	Responsibility
	<ul style="list-style-type: none"> <li>• Progress strategic specific issues and monitor the associated work programmes;</li> <li>• Support the development of technical briefs and outline design in conjunction with the Delivery Team;</li> <li>• Ensure that there are adequate project management arrangements in place;</li> <li>• Brief WG / MWWFRS on a regular basis to ensure good communication and understanding of project;</li> <li>• Monitor capital costs;</li> <li>• Support and guide the development of the technical documentation for the BJC in support of the delivery team and approval of the Health Board.</li> </ul>
Delivery Team	<p>Responsible for delivering the projects</p> <ul style="list-style-type: none"> <li>• Develop programme / project plan for completion at key stages in capital investment process and monitor on a monthly or as required basis;</li> <li>• Implementation of project plan activities on a daily basis;</li> <li>• Develop and monitor project planning, phasing and sequencing programme;</li> <li>• Manage associated work programme;</li> <li>• Provide operational and technical lead for the site;</li> <li>• Communicate with the site operational managers and master planning team;</li> <li>• Ensure suitable project management arrangements are in place;</li> <li>• Implement project systems and controls e.g. risk, change management;</li> <li>• Issue regular progress reports to the Programme Board;</li> <li>• Develop capital costs;</li> <li>• Develop BJCs;</li> <li>• Participate in internal and external audit processes.</li> </ul>

Table 15: Programme Roles and Responsibilities

## 7.1.2 Use of Special Advisors

The following team of specialist advisors has been appointed to date by the Health Board to support the PBC. Additional advisors will be appointed to support the individual projects as appropriate.

Advisor	Responsibility
Mace	Project Management
Lee Wakemans Management	Quantity Surveyors / Cost Advisors
Strategic Healthcare Planning	Business Case Authors
IHP	PSCP
HLM Architects	Architect
Hydrock Consultants	M&E and Civil and Structural Engineer
Hydrock Consultants	Fire Engineer
Imtech	Principal M&E Installer
TBC	NEC Supervisor

Table 16: Specialist Advisors

## 7.2 Programme Milestones

Given the locations and concealed nature of the works, full exposure of the as-built arrangements and conditions will be required to fully assess the scope of works and establish accurate timescales for their execution. Temporary or permanent diversions to existing services may also be required to facilitate access to the works. Indicative allowances and assumptions have therefore been made for certain elements.

The programme takes account of these assumptions and is built up using quantitative analysis of surveyed information for representative work sections and relative allowances for other sections based on size and complexity.

The approach to works has been developed on the basis that extensive over boarding is required to achieve the required fire rating. The UHB are in ongoing discussions with MWWFRS to agree the principles of the fire and evacuation strategy and there may, therefore, be revisions to this assumption.

On the basis of full over boarding being required the overall construction programme is 64 weeks, which could reduce to circa 60 weeks, subject to the over boarding being reduced to the anticipated minimum scope.

A detailed programme is included in Appendix 13 with the key milestones summarised in Table 17 below.

Programme	Time
<b>Phase 1 Delivery Programme:</b>	
Business Justification Case submission to WG	March 2021
WG approval to proceed to construction	April/May 2021
Phase 1 Completion of works (primary escape routes) based on 64 week programme	July 2022
<b>Phase 2 Delivery Programme:</b>	
Business Justification Case submission to WG	February 2022
Phase 2 Commencement of works on site	May 2022
Phase 2 Completion of Works (general ward / clinical spaces) based on 36 month programme	April 2025

Table 17: Programme Milestones

## 7.2.1 Phasing Strategy

Using this process in conjunction with the proposed phasing strategy, the following construction timescales have been developed to ensure minimum disruption and congestion wherever possible:

Phase	Duration	Indicative Dates
<b>Main Hospital</b>	<b>52 Weeks</b>	
Second Floor	14 weeks	21/06/2021 – 27/09/2021
First Floor	21 weeks	06/09/2021 – 28/01/2022
Lower Ground Floor	22 weeks	17/01/2022 – 17/06/2022
Ground Floor	41 weeks	06/09/2021 – 17/06/2022
<b>Residential Blocks</b>	<b>30 Weeks</b>	
Block 17	13 weeks	02/08/2021 – 29/10/2021
Block 19	10 weeks	13/09/2021 – 19/11/2021
Block 20	9 weeks	11/10/2021 – 10/12/2021
Block 21	10 weeks	15/11/2021 – 21/01/2022
Block 23	10 weeks	20/12/2021 – 25/02/2022

Phase		Duration	Indicative Dates
<b>Mental Health Buildings</b>		<b>40 Weeks</b>	
	St Caradog's First Floor	6 weeks	23/08/2021 – 01/10/2021
	St Caradog's Ground Floor	22 weeks	04/10/2021 – 04/03/2022
	St Non's	10 weeks	07/03/2022 – 13/05/2022
	St Brynach's	19 weeks	17/01/2022 – 27/05/2022

Table 18: Phasing Plans

## 7.3 Arrangements for Contract Management

This will be administered under the NEC3 Engineering & Construction (ECC) Form of Contract, Option C Target Contract with Activity Schedule, with standard Designed for Life: Building for Wales Framework amendments for both the Project Manager and Cost Advisor.

For the design and construction contract for the Supply Chain Partner, Integrated Health Projects (IHP), this will be administered under the NEC3 Engineering & Construction (ECC) Form of Contract, Option E Cost Reimbursable Contract.

## 7.4 Arrangements for Change Management

The Health Board recognises the challenges associated with delivery of these works whilst maintaining an operational site.

The works will be implemented in a systematic way that causes the least disruption to services. The project structure has been established to implement the necessary changes and ensure operational management leadership remains central to this.

To take this process forward working groups have been established during the development of the BJC involving the key hospital managers and nursing heads, or delegated leads. These groups will be fully consulted with regards to any changes to the works that may impact the provision of health services on the Withybush site. Any fundamental changes to the project scope or timeline will be authorised in advance by the Project Director and established Project Board.

## 7.5 Risk Management

There are a number of objectives from the implementation of a robust risk management process. The key objectives are as follows:

- Secure predictability: by analysing the risks, greater insight can be gained into the likelihood of successfully delivering the project within budget, on programme and to the required quality;
- Manage the risk exposure proactively: a clear understanding of the threats and opportunities will ensure that robust mitigation strategies can be put in place and opportunities are realised. This significantly reduces the chance of failure through a constant reassessment of the project's risk profile;
- Define mitigation strategies: provide clear mitigation strategies and action plans which are to be addressed by the appropriate owners;
- Ensure opportunities are both identified and realised;
- Address contingency management: ensure that the contingency of both client and contractor allowances are managed, providing adequate cover for identified risks. If the opportunity arises to release contingency back in to working capital this should be addressed in line with the requirements of the project.

Risk management helps with matters of cost control and with overall project delivery by assessing potential problems and formulating mitigation measures through the implementation of a structural approach so that:

- Potential risks to a project are identified;
- Management action plans are drafted as a response to the risks;
- Contingencies can be allocated to reflect identified risks;
- An audit trail is produced for the decisions taken;
- There is increased team understanding of the project and of the implications of certain courses of action;
- Risk events are responded to more swiftly and effectively.

Risk management will be an ongoing project control measure that encourages all participants to be proactive in identifying areas of concern and potential risk that can, when identified at an early enough stage, be managed to reduce / eradicate the impact on the programme.

A comprehensive risk register is in place which has been ratified following a workshop including all of the delivery team members, HDUHB estates and operations team and importantly, the key stakeholders representing the hospital nursing / operational teams.

The risk register has been priced to ascertain the proposed contingency level. This is an incredibly difficult process in that predicting potential outcomes is based on items that are in themselves unknown. The resulting contingency level is significant and far exceeds that which would normally be expected on a typical refurbishment project at this stage.

It is proposed that the BJC includes for a reasonable level of contingency (wholly owned by the Health Board) with a further sum allocated to the project but held by the Welsh Government under Group 3 funding, being made available in the event that it is required. The mechanism for accessing this funding will be agreed with WG.

### **7.5.1 Risk Register**

The risk register is a management tool that logs potential risks to the programme, primarily driven by health and safety, cost, programmes delays or any other risks that may be relevant to its successful completion.

The register is a live document and will be updated at regular intervals in Project Team and Board meetings as appropriate. The Project Manager will manage and retain ownership of the risk register throughout the programme. The risk register will be updated by both adding newly identified risks and reallocating risk funds where activities no longer pose risk. The risk register records and logs details of any item or event which is considered by the project team to put the objectives of the programme at risk (Appendix 14).

### **7.5.2 Main Risks**

The main risks were reviewed at a workshop in March 2021 with clinical and operational service representation. The main risks (risk score 16 and above) are identified in the following table:

Risk	Mitigation Measure
<b>Programme Risks</b>	
Extent of asbestos works	Survey where possible and proceed with caution
<b>Design Risks</b>	
Design / scope is not compliant with Hospital Fire Strategy & Evacuation strategy. The Hospital does not have a full fire or evacuation strategy in place which can be used to inform the scope of works and design.	Explore every avenue to obtain fire strategy information from Hospital. Recommend and appoint Fire Engineer/ consultant to validate / confirm the fire strategy. Clearly state assumptions made in design so that these can be used as basis for when fire strategy is generated.
Completeness, adequacy and condition of the existing M&E designs and requirement for services diversions	Thorough surveys to be carried out to establish routes where diversions / modification required. Surveys to establish flow rates 'before and after' service diversion to confirm reduction.
<b>Construction Risks</b>	
Disruption to existing services during construction impacting on hospital services	Regular liaison with stakeholders throughout the project. Contractor strategy to be developed.
Dampers to ductwork - Solution requires extensive fabric or other services removal	Early engagement between design team and SCP to provide an achievable solution
Live services impeding the Works and inability to isolate or relocate	Investigate the compartmentation lines
Pharmacy fire shutter at slab level, compliance with required fire resistance at floor level.	IHP to allow for replacement within costs
Pharmacy fire shutter maintenance Pharmacy must remain operational throughout works as fundamental to hospital operations	IHP to allow for replacement within costs Stakeholder meeting to confirm approach to working in this area.
Smoke sealing to doors / flatness of floors	
Incomplete Crest surveys not identifying the entire scope of fire stopping (both sides of wall / entire length of corridors and Phase 1 locations	Establish fire stopping works from other side
Restricted surveying being undertaken at OBC / FBC (limited to 25 locations)	Apply assumptions to the further Works
<b>Financial Risks</b>	
Increased costs due to unknown works	Financial risk strategy agreed with WG.

Table 19: Main Risks



## 7.6 Benefits Realisation

The main benefit from this project will be HDUHB compliance with fire enforcement notices. Additional benefits in relation to reduced backlog maintenance and a comprehensive concise fire strategy for the site will also be realised.

## 7.7 Programme Assurance

### 7.7.1 Risk Potential Assessment

The impact of the programme has been scored against the risk potential assessment (RPA) model (Appendix 15). The project has been assessed as low risk which will continue to be monitored via the Project Board and escalated as required.

### 7.7.2 Equality and Health Impact Assessment

Due to the nature of this BJC, the Health Board has determined that an Equality and Health Impact is not required. Ensuring that buildings are compliant with fire safety regulations will improve the safety for all patients, staff and visitors to the hospital.

### 7.7.3 Integrated Impact Assessment

An Integrated Impact Assessment (IIA) has been completed by the Health Board to determine impact on service and workforce (Appendix 16).

As an infrastructure upgrade project there are no long-term impacts anticipated, however there will be disruption to services during the delivery phase of the works. The aim is to minimise this impact and a communications plan is being developed to keep staff informed throughout the duration of the works.

## 7.8 Post Project Evaluation

The Programme Board will ensure that post project evaluation will be undertaken in accordance with Welsh Government requirements.

The Health Board is committed to ensuring that a thorough and robust post-project evaluation (PPE) is undertaken to ensure that positive lessons can be learnt from the project. The lessons learnt will be of benefit to:

- HDUHB – in using this knowledge for future projects including capital schemes;
- Other key local stakeholders – to inform their approaches to future major projects;
- The NHS more widely – to test whether the policies and procedures which have been used in this procurement are effective.

PPE also sets in place a framework within which the benefits realisation plan can be tested to identify which benefits have been achieved and which have not. NHS guidance on PPE has been published and the key stages which are applicable for this project are:

- Evaluation of the project procurement stage;
- Evaluation of the various processes put in place during implementation;
- Evaluation of the project in use shortly after the works are completed.

### 7.8.1 Stage 1 Evaluation: Project Procurement

The evaluation at this stage will examine:

- The effectiveness of the project management of the scheme;
- The quality of the documentation prepared by HDUHB;
- Communications and involvement during procurement;
- The effectiveness of advisers utilised on the scheme;
- The efficacy of NHS guidance in delivering the scheme;
- Perceptions of advice, guidance and support from:
  - Welsh Government;
  - NWSSP – Estates.

It is planned that this evaluation will be undertaken within four months of BJC approval.

### 7.8.2 Stage 2 Evaluation: Implementation

The evaluation at this stage will examine:

- The effectiveness of HDUHB project management of the scheme;
- The effectiveness of the PSCP project management of the scheme;
- Communications and involvement during commissioning;
- The effectiveness of the joint working arrangements established by the project partner and the project team;
- Support during this stage from other stakeholder organisations – Welsh Government, Welsh Health Estates and any others as appropriate;

It is planned that this evaluation will be undertaken six months following works completion.

### 7.8.3 Stage 3 Evaluation: Project in use

The evaluation at this stage will examine:

- The effectiveness of the project management of the scheme;
- Communications and involvement during commissioning and into operations;
- Support during this stage from other stakeholder organisations – Welsh Government, Welsh Health Estates and any others as appropriate;
- Overall success factors for the project in terms of cost and time, etc.;
- Extent to which it is felt the design meets users' needs.

It is planned that this evaluation will also be undertaken six months following works completion.

## 7.9 Contingency Plans

There are no contingency plans should this project fail to achieve approval. The Health Board are at risk of receiving further enforcement notices which would impact on delivery of all hospital services.

## 8.0 Conclusion and Recommendations

This business case sets the required actions for Hywel Dda University Health Board to ensure compliance with fire safety regulations.

The business case has described the proposed approach to the works which aims for completion of the phase one works by July 2022. This is dependent on the outcome of discussions regarding the potential to over board existing fire compartment walls to increase fire resistance which could extend the phased completion date by circa four weeks. MWWFRS will review progress with the Health Board in March 2022.

The Health Board must comply within the stipulated timeframe set by the Mid and West Wales Fire and Rescue Service or risk prosecution and ultimately the potential closure of the Withybush Hospital and / or associated sites.

It is requested that Welsh Government:

- Approve this business case based on the proposed cost and approach to delivery of work;
- Acknowledge the MWWFRS expectations for completion of works requiring HDUHB to commence works in May 2021.

## 9.0 Glossary of Abbreviations

Abbreviation	Definition
AHMWW	A Healthier Mid and West Wales: Our Future Generations living well
AME	Annually Managed Expenditure
BGH	Bronglais General Hospital
BJC	Business Justification Case
BRE	Building Research Establishment
BWIC	Builders Work in Connection
CDM	Construction (Design and Management)
CEIMTS	Capital, Estates, Information Management and Technology sub-committee
CSF	Critical Success Factor
DEL	Departmental Expenditure Limit
ECC	Engineering and Construction
FDS	Fire/Smoke Dampers
GEM	Generic Economic Model
GGH	Glangwili General Hospital
HBN	Health Building Note
HDUHB	Hywel Dda University Health Board
HSDU	Hospital Sterilisation and Disinfection Unit
HTM	Health Technical Memoranda
IHP	Integrated Health Projects
IIA	Integrated Impact Assessment
IM&T	Information Management and Technology
MWWFRS	Mid and West Wales Fire and Rescue Service
NEC	New Engineering Contract
NHS	National Health Service
NWSSP SES	NHS Wales Shares Services Partnership Specialist Estates Services
PBC	Programme Business Case
PPE	Post Project Evaluation
PPH	Prince Philip Hospital
PSCP	Principle Supply Chain Partner
RoE	Retention of Employment
RPA	Risk Potential Assessment
SCP	Supply Chain Partner

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SES	Specialist Estates Services
SRO	Senior Responsible Officer
TUPE	Transfer of Undertakings (Protection of Employment)
UHB	University Health Board
VAT	Value Added Tax
VFM	Value for Money
WGH	Withybush General Hospital
WG	Welsh Government
WHTM	Welsh Health Technical Memoranda

## 10.0 Appendices

1. MWWFRS Enforcement Notice (8 August 2019)
2. HDUHB Response (19 November 2019)
3. MWWFRS Response (29 November 2019)
4. MWWFRS Correspondence (6 December 2019)
5. MWWFRS Correspondence (10 December 2019)
6. MWWFRS Correspondence (7 January 2020)
7. MWWFRS Correspondence (17 February 2020)
8. MWWFRS Correspondence (extensions to timescales)
9. MWWFRS Correspondence (12 January 2021)
10. MWWFRS Correspondence (19 March 2021)
11. HDUHB Fire Safety Action Plan
12. Cost Report
13. Programme
14. Risk Register
15. Risk Potential Assessment
16. Integrated Impact Assessment