

RAG Rating Guide

- Red Red - Action will not be completed in designated time
- Amber Amber - Action on target for completion
- Green Green - Action complete

LEGISLATIVE BREACHES:

The Regulatory Reform (Fire Safety) Order 2005, suitable and sufficient assessments of the fire risk and implementation of appropriate control measures
 The Health and Safety at Work etc. Act 1974, Section 2(1) requires that every employer shall ensure, so far as is reasonably practicable, the health and welfare at work of all his employees
 FIRE SAFETY MANAGEMENT - Draft Internal Audit 2020/21 Action Plan

NWSSP Audit & Assurance Services

Number	Recommendation	Target Date	Action taken/planned	RAG Rating Open – Closed	Comments	Lead (s)	Executive Sponsor	Supporting Evidence	Date Complete
Policies - Procedures	R 1. Fire Safety Policy to be reviewed to ensure effective controls are captured: A. Central reporting B. Local reporting	31-Aug-21	Review current Fire Safety Policy to ensure central and local reporting structures that are in place are illustrated in the policy. Present revised Fire Safety Policy to the Health & Safety Operational Group and Health & Safety Committee for approval.	Medium	Policy has been reviewed and appropriate amendments inserted and shared with NWSSP-SES authorised engineer (Fire) for comments prior to presenting to H&S group and committee. No comments received, so policy will be submitted to the H&S committee on 1st July 2021 for approval.	Mark Parsons - Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim)	Updated policy provided and has been included in the papers for the H&S committee on 1st July 2021. 	
Governance Structure	R 2. The Fire Safety Manager (Assistant director of Health & Safety) should chair the Fire Safety sub-group	12-May-21	In the Fire Safety Group meeting on 29th March 2021, it was agreed that the Fire Safety Manager (Assistant Director of Health & Safety) would chair the group and will chair the group from May 2021.	Green	Updated Terms of Reference were agreed at the meeting on 29th March 2021 to capture the changes to the structure of the group and included the change of Chair of the group.	Mark Parsons - Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim)		12/05/2021
Local Groups	R 3. The Fire Safety Policy should confirm the local fire safety group interrelationships with other groups and committees within existing structures	31-Aug-21	As part of the Fire Safety Policy review the interrelationships will be captured and included in the Fire Safety Policy and in the Fire Safety Group Terms of Reference.	Green	This has been captured in the Fire Safety Policy and the Fire Safety Group Terms of Reference	Mark Parsons - Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim)	The terms of reference and the updated fire safety policy outline the governance structure and how the various groups and committees are linked. The Fire Safety Policy page 5 provides the governance structure and Terms of Reference outlines the service groups link to the fire safety group and H&S group/committee on page 3	
Strategy to Achieve Statutory Compliance	R 4. Management should develop an appropriate strategy targeting funding to address fire safety requirements	30-Jun-21	Fire risk assessment action plans to be reviewed to identify actions completed and outstanding. Additionally review 6 monthly fire door inspections and fire audits to identify short - medium and long term requirements. Develop bids to submit to NWSSP for additional funding from WG for fire related compliance and backlog maintenance.	Green	Bids completed by Capital/Estates(Health & Safety submitted to NWSSP-SES and confirmation of agreed funding. Waiting for confirmation of receipt of funds prior to commencing works. A number of the bids were successful with works expected to commence in Q2 of 2021/22 financial year. In addition discretionary capital is currently being sourced to develop a longer term strategy for core compliance works and backlog maintenance.	Assistant Director of Capital & Planning/ Assistant Director of Operations (Estates)/Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim) / Rab McEwan Chief Operating Officer(Interim) / Sian Harrop-Griffiths Director of Strategy & Planning	Award of funding letter from Welsh Government . 	31-May-21
Strategy to Achieve Statutory Compliance	R 5. Risk assessments should be completed within stipulated review periods, including refresh for ward reconfigurations.	30-Nov-21	Undertake full review of fire safety resources to identify appropriate resources to undertake fire safety risk assessments and compliance. Review options for temporary resources to assist with overdue fire risk assessments.	Amber	Temporary resources put in place to reduce overdue fire risk assessments. A reduction from 72% to 46% has been achieved since January 2021. Projected target to complete overdue FRA by 31 July 2021.	Mark Parsons - Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim)	Add current FRA compliance percentage to show positive direction in reducing overdue FRA 	18-Jun-21
Strategy to Achieve Statutory Compliance	R 6. Management should confirm the total number of applicable areas for risk assessment	31-Sept-21	Undertake a full review of fire risk assessments to confirm the number of areas that require FRA and update NWSSP fire audit system.	Green	Partial review of risk assessment areas has been undertaken. Further review will be completed while completing the overdue risk assessments.	Mark Parsons - Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim)	insert updated FRA area list to confirm current number of FRA and frequency refresh completed on current round of FRA the confirmed number of areas is 382. 	18-Jun-21
Strategy to Achieve Statutory Compliance	R 7. Management should ensure effective information systems to facilitate appropriate fire safety assurance (system interfaces)	30-Jun-21	NWSSP-SES fire audit system actions to be downloaded and cross referenced to monitor actions completed. Also link in to service group H&S (fire) groups.	Green	Partial review of risk assessment areas has been undertaken. Further review will be completed while completing the overdue risk assessments. The review will be continued each year as a number of FRA's may be amalgamated where this is practicable to do so.	Mark Parsons - Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim)	Based on the FRA reviewed to date the complete list of premises has been embedded. 	15-Jun-21
Local Implementation	R 8. An appropriate range of Fire Safety summary and exception reporting should be agreed for relevant core committees to provide appropriate control assurance on identified fire safety risks.	30-Jun-21	A standard report template will be adopted similar to the report received from the H&S Ops group key issues update report.	Green	Report template will be presented at the next Fire Safety Group in May 2021	Mark Parsons - Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim)	New report template for service groups and estates to complete for each meeting. 	12-May-21

Local Implementation	R 9. Local level reporting coverage should be implemented, including appropriate assurance summaries to local groups and appropriate escalation..	30-Jun-21	The Chair of the Fire Safety Group to write out to Service Group Directors to nominate individuals to represent the SDG at the Fire Safety Group	Green	Minutes/key actions to be summarised and shared with local groups and through the H&S Ops group. Minutes and papers will be made available to all members of the group for them to provide feedback to the respective sites, this will include the minutes of the group.	Mark Parsons - Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim)	New report template to be added 	12-May-21
Local Implementation	R 10. Appropriate arrangements should be put in place to implement the prioritised action plans. (Fire drawings need to be in place and updated).	31-Aug-21	Undertake a review of the various sites to identify fire compartmentation and update drawings.	Amber	This will be monitored by the FSG with appropriate reports submitted to H&S Ops group and H&S committee.	Mark Parsons - Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim)	Fire survey have been completed for Singleton/NPT and 50% through Morriston	
Local Implementation	R 11. Management should confirm appropriate local sign off of DSEAR procedures, and separately appropriate clinical sign off of medical gas cut off procedures at each site..	31-May-21	Local gas shut off procedures to be confirmed and distributed to all areas where gas shut off and to be signed off.	Green	Procedure in place and cascaded to Service Groups to circulate to departments/wards. This will also be covered in on-site scenario based training	Mark Parsons - Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim)	 wd 12a.jpg	12-May-21
Local Implementation	R 12. Fire safety training in the UHB should be prioritised for all staff..	31-May-21	Fire safety training to be completed	Green	Fire safety training is primarily completed on line, with additional face to face training on hold due to COVID-19. Plans are in place to recommence face to face once practicable to do so with COVID-19 restrictions.	Mark Parsons - Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim)	This should not be listed as not sure where NWSSP had 36% of staff trained. At the end of February, this was 75% and given the challenges of COVID-19 is still a reasonable compliance percentage, with further push to increase training compliance (This is a local issue)	
Local Implementation	R 13. The adequacy of fire warden provision across the UHB should be affirmed - ensuring that appropriate training is provided (this should include all roles with enhanced fire responsibilities).	31-May-21	Undertake a deep dive in to fire to review key areas i.e. fire warden and management responsibility	Amber	Roles and responsibilities captured in HB Fire Safety Policy, some additional committee interrelationships added. Local procedures being reviewed to ensure roles & responsibilities are captured. Fire Wardens being identified with training ready to roll out.	Mark Parsons - Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim)	Deep dive has been undertaken and now going through a recruitment capaign followed by appropriate training.	
Previous Actions	1. The risk assessment monitoring spreadsheet should be brought up to date (as currently it does not provide a comprehensive monitoring tool) This relates to all FRA and actions.	31-May-21	FRA template to be produced to capture appropriate information: FRA completed; no of actions per FRA including priority; no of actions outstanding to include priority	Amber	Spreadsheet is up to date and reviewed on a weekly basis by the H&S team (fire) and will be taken through the FSG.	Mark Parsons - Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim)	Add spreadsheet 	12-May-21
Previous Actions	3. The proposed reporting template should be enhanced with the addition of the RA (risk assessment) date, date of RA actions complete, RA action time (number of days open). This should be shared with the Service Group management to address incomplete actions.	31-May-21	As per 1 above	Green	As per 1 above	Mark Parsons - Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim)	Add action template 	12-May-21
Previous Actions	5. Reporting to both the Health & Safety Operational Group and the Health & Safety Committee should be enhanced to include action taken to address risks identified in risk assessments and risks still to be actioned..	31-May-21	New action template to capture actions complete and outstanding to be produced, agreed and implemented.	Green	New action template agreed at FSG meeting on 29th March 2021 and will commence use from May 2021. This will be monitored to ensure appropriate information is reported and recorded.	Mark Parsons - Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim)	Add new reporting template 	12-May-21
Previous Actions	3. The proposed reporting template should be enhanced with the addition of the RA (risk assessment) date, date of RA actions complete, RA action time (number of days open). This should be shared with the Service Group management to address incomplete actions.	31-May-21	New action template to be produced, agreed and implemented. New agenda standing items to be produced, agreed and implemented	Green	New action template agreed at FSG meeting on 29th March 2021 and will commence use from May 2021. New standard agenda agreed at FSG meeting on 29th March 2021 and will be implemented from May 2021	Mark Parsons - Assistant Director of Health & Safety	Christine Williams Director of Nursing and Patient Experience (Interim)	Add new action template 	12-May-21