

Northumberland, Tyne and Wear NHS Foundation Trust

Board of Directors Meeting

Meeting Date: 26 July 2017

Title and Author of Paper: Fire Safety of Cladding Systems. Paul McCabe

Executive Lead: James Duncan

Paper for Information:

Key Points to Note:

Following the fire at Grenfell Tower in London, Trusts are being asked to evaluate risks associated with cladding systems. This paper is intended to inform the Trust Board of the investigations that have taken place so far and the information that has been sent back to NHS Improvement.

Risks Highlighted to Board : No additional risks have as yet been identified.

Does this affect any Board Assurance Framework/Corporate Risks?

Please state Yes or No - No

If Yes please outline

Equal Opportunities, Legal and Other Implications: None

Outcome Required:

Link to Policies and Strategies:

Introduction

This short report is intended to provide the Trust Board with an updated position in respect of the investigatory work that is being done in identifying any fire risks associated with cladding systems attached to buildings.

Background

The fire at Grenfell Tower has thrown into sharp focus the complex issues surrounding fire safety and due to the way in which fire rapidly spread on the exterior of the building much of the focus has been on the type of cladding system used in the building refurbishment. The type of cladding used at Grenfell comprised of an Aluminium Composite Panel (ACP) which is essentially made of 2 thin sheets of aluminium with a polyethylene core, this makes for a lightweight panel which is used as a rain screen to protect the thermal insulation which is attached to the building wall. The insulation was a polyisocyanurate board attached to a timber batten on the building. Reports suggest that the gap between the ACP and the insulation was not fire stopped and this created a chimney effect which when coupled with the fact that polyethylene burns meant that resulting fire spread was rapid.

NHS Improvement

NHSI sent out a questionnaire on the 19th of June which was returned by the deadline of 1pm on the following day – the return is attached as Appendix A.

On Saturday 24th June, Jim Mackey sent out an email to all Trusts asking them to undertake a joint inspection of all facilities in conjunction with the local F&R Services. Contact was made with both Northumberland and Tyne and Wear F&RS, however, neither were aware of the request and could not facilitate. NTW responded on the 25th of June informing NHSI of this fact – Appendix C.

NHSI have asked for additional details on buildings over 18m in height and a response to that will be sent prior to the 19th of July deadline.

Cladding on NTW FT Premises

The Trust has a number of buildings with cladding, however early investigation has not identified any with the type used at Grenfell Tower, furthermore none of the NTW premises are above 18m – a height which is often quoted, which it is presumed is associated with the start of a building being classed as high rise. Although reference is also being made to buildings over 2 storeys in height.

In order to determine the types of cladding in use a meeting was held with Capital Projects, Paul McCabe and Paul Yeomans of Medical Architecture (MA). MA are the design practice who have worked extensively with NTW for over 11 years and are incidentally working directly with NHSI on this fire issue at a wider level.

We agreed to pull together a register of all cladding used in NTW premises and populate on a spreadsheet, in order that no building is missed a register of all finishes / construction will be compiled.

The categories we are using are detailed below, it is likely the Trust will have cladding in category 3-7.

	Category 1	Category 2	Category 3	Category 4	Category 5	Category 6	Category 7
Storeys	>2	≤2	>2	≤2	>2	≤2	Any
Occupation	Patients / Staff	Patients / Staff	Patients / Staff	Patients / Staff	Staff	Staff	Patients / Staff
Cladding	Same sort as Grenfell Tower	Same sort as Grenfell Tower	Any other	Any other	Any other	Any other	None
Action / timescale	Urgent risk assessment required (1 week)	Urgent risk assessment required (2 weeks)	Further investigation required (1 month)	Further investigation required (2 months)	Further investigation required (2 month)	Further investigation required (3 months)	Regular review of Fire Risk Assessment (when due)

Next Steps

NTW Solutions Ltd will facilitate / complete the following:

- Carry out a survey of all buildings and complete a register
- Provide further updates to both the NTW NHS FT Trust Board and NTW Solutions Board at required intervals
- In conjunction with our own Estates team and drawing on appropriate external expertise we will risk assess the cladding materials and where necessary sent samples for testing
- Depending upon risks and results of sample testing an action plan will be drawn up.
- Continue to work with local F&RS and undertake joint inspections
- Provide on-going information to NHSI as required

Paul McCabe

Head of Estates and Facilities

17th July 2017

Cladding and Fire Improvement Questionnaire



Trust Code:	RX4
Trust Name:	Northumberland, Tyne and Wear NHS Foundation Trust
Trust Contact Name:	Paul McCabe
Contact Telephone number:	07983436897, 0191 2467277
Email:	paul.mccabe@ntw.nhs.uk
Sites (if relevant) separated by a semicolon:	Northgate Hospital; Chad House; Greenacres Centre; Howard Centre; Plessey Centre; 15 Wallace Green; 17 Wallace Green; Ashmore House; Wellington House; Bailiffgate 10; Anderson Court; Bowes Street 22-26; Sextant House 2; West Farm House 1-2; Hawkhill Business Park; Sextant House 5; Sextant House 6; Easterfield Court; St Nicholas Hospital; Ferndene; Ravenswood; Silverdale; Hawkeys Lane 26a; Brooke House; Dryden Road Day Hospital; Lobley Hill Clinic; Plummer Court; Station Road 25-29; Elm House; Benton View 1; Oxford Centre; Sir GB Hunter Memorial Hospital; Project Answer (NECA); Benton House; Hopewood Park; Monkwearmouth Hospital; Rose Lodge; Craigavon; Houghton Day Unit; Empire House; Mary Street 4-6; Vermont House; Teleport House; St Georges Park; Walkergate Park; Fairnington Centre (Tynedale Patient Centre); Ridley House; Gateshead Health Centre; Campus for Ageing and Vitality; Molineux Street; Royal Victoria Infirmary (Ward 31); Monkton Hall Hospital; Palmer Hospital; Queen Elizabeth Hospital (Tranwell Unit); Cleadon Park Primary Care Centre; Keegan Court;

CLADDING QUESTIONNAIRE - Where you have no cladding, please enter **NIL** for Q1. - **IF NIL only complete question 7.**
if you are in any doubt please enter **Y** in question 1.

FIRE IMPROVEMENT SCHEMES - Where you have no applicable Fire Improvement Schemes, please enter **Nil** for Q1. - **IF NIL only complete question 1.**

Cladding Questionnaire

IF IN DOUBT ENTER "Y" TO QUESTION 1. - In order to clarify in due course.

Question	Response
1 Is there any cladding in use on buildings at your trust? (Y/N/NIL)	Y
2 What type of cladding is used?	Various, Storender, Envirowall Render, Cedar cladding, Trespa panelling, Duraclad, Composite tile, Slate tile cladding, Kalzip cladding, Siberian Larch Timber cladding.
3 What is the location of this cladding?	Various applications on the perimeter of buildings. Generally speaking the use of cladding is limited.
4 Please confirm which contractor / sub contractor carried out the cladding work	Various - but typically main contractors will be Laing O Rourke and Kier, sub-contractors Rentec North East Ltd, SCS render systems, Chemplas Ltd,
5 Please confirm if these buildings are over 2 stories high? (Y/N)	Y - there is only 1 building over 2 stories that has cladding and it is not used for inpatients
6 Please confirm if these buildings offer inpatient services? (Y/N)	Y
7 Has a fire risk assessment been undertaken in the last 12 months? (Y/N)	Y

Fire Improvement Schemes Questionnaire

Question	Response
1 Capital costs of fire improvements (individual schemes or part of larger scheme) (£) / NIL	£35,000
2 Please briefly describe the scheme: (200 words max)	Monkwearmouth Hospital has a central building predominantly used for administrative purposes, the building is almost 100 years old and is in need of general refurbishment. As part of the refurbishment works improvements will be made to the existing fire precautions in particular around detection and compartmentation. A business case has been prepared but is not yet approved, the fire precautions are a relatively small amount of the overall cost.
3 What is the current status of this work/scheme (Chose one below by indicating with 1):	
a. Awaiting approval, but not yet approved? (1)	1):
b. Approved, but not underway? (1)	
c. Underway? (1)	
4 Is trust funding fire safety works themselves or is it subject to external financing? If 'YES' then choose one of the following, below:	
a. external financing approved (Y)	
b. Awaiting approval (Y)	
c. Financing application not submitted yet (1)	1

From: "MACKEY, Jim (NHS IMPROVEMENT - T1520)" <jim.mackey@nhs.net>

Date: 24 June 2017 at 13:59:00 BST

Cc: "MCHUGH, Tom (NHS IMPROVEMENT - T1520)" <tom.mchugh1@nhs.net>, "CORBEN, Simon (NHS IMPROVEMENT - T1520)" <simon.corben@nhs.net>

Subject: **URGENT: Inspection by fire and rescue - action required**

To: Trust CEOs

Cc: Trust COOs

For cascade to trust on-call directors and estates on-call

Dear colleagues,

I would be grateful for your immediate help with the urgent actions outlined in this email. Please cascade this to the relevant on-call directors and estates on-call within your organisations.

Thank you for the enormous effort that you and your teams have put in to completing the questionnaires sent last week, following the tragic events at Grenfell Tower.

Following discussions with Secretary of State, I am requesting that we take further proactive and precautionary measures and instigate, with immediate effect, an inspection by your local fire and rescue services of all your properties by close of play tomorrow evening, to ensure that there are no urgent risk safety risks. I am aware that many of you have already undertaken a fire assessment with the relevant fire authorities – so please only take action if you have not done so already.

Upon completion of this inspection, please confirm by way of letter (signed by both trust CEO and fire inspector) that this has been concluded, and whether there are any immediate risks that need resolving. We will then work with trusts directly where an urgent decisions are required. **Please send your email confirmation and attachment to tom.mchugh1@nhs.net.**

We understand that it might be difficult to mobilise support from your end at such short notice, and so efforts are in train to ensure that these actions are also prioritised through Home Office.

You will also be aware, from Simon Corben's letter on Monday, that we will be taking action to mobilise further local support where this is required. This process is being managed in parallel to this request.

Once again may I thank you for your cooperation in this matter.

Best wishes

Jim

Northumberland, Tyne and Wear 
NHS Foundation Trust

Executive Corridor
1st Floor
Main Building
St Nicholas Hospital
Jubilee Road
Gosforth
Newcastle upon Tyne
NE3 3XT
Tel: 0191 2456801
e-mail : kirsty.allan@ntw.nhs.uk

JL/CW

25th June 2017

Dear Mr McHugh

I write in response to the instructions received from Jim Mackie on 24th June 2107, requesting that we undertake an inspection of our in-patient premises in conjunction with the local Fire and Rescue Services.

I can confirm that we contacted both Tyne and Wear and Northumberland Fire Authorities on the afternoon of Saturday 24th June, a short time after the request was issued. Both Authorities were unaware of this request and the Assistant Chief Fire Officer at Tyne and Wear Fire and Rescue Service escalated the issue to a national level as he suggested they would require guidance on this directly from the Home Office.

We are awaiting a formal response from both authorities and will proceed at the earliest possible opportunity with any inspection or other work as required. At this stage, due to the unavailability of the Fire and Rescue Service to carry out detailed surveys we are unable to complete the request.

I can confirm that around 90% of our inpatient beds are located on the ground floor of our buildings. The small number that are on the first or second floors are in predominantly brick built accommodation. These buildings [have more than one fire escape route and are fitted with comprehensive fire detection systems](#). Furthermore, all of our properties are subject to a fire risk assessments.

I have received assurance from our Head of Estates and Facilities who is also the Trust's Fire Safety Manager that there are no significant or urgent fire risks. This is based upon and supported by the professional opinion of the Trust Fire Safety Team (including four Fire Officers who have all served in the fire authority.)

Yours sincerely



John Lawlor
Chief Executive