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# Specialist Estates Services Notification (SESN) 19/06

**24 May 2019**

**For action by:**

Board Level Directors (Fire), NHS Health Boards and Trusts

**For information only:**

Chief Executives

Estates/Facilities Directors and Managers Fire Safety Managers

Fire Advisors

Copy to: Head of Capital, Estates and Facilities, Department of Health and Social Care, Welsh Government

**Attached documents: N/A**

Dear Colleague

## **Fire management of derelict or unoccupied buildings**

### **Introduction**

Derelict or unoccupied buildings can often draw attention to unwanted activity including trespass, theft, vandalism and deliberated fire-raising. Recent fire incidents across the NHS Estate in Wales demonstrate the potential consequences for such buildings.

### **Background**

Recently, several vacant buildings across the NHS Estate have been subjected to deliberate fire-raising. The two most significant being, Lansdowne Hospital (Cardiff) which, whilst having had the benefit of comprehensive CCTV and robust security grilles, suffered considerable damage; followed by a second incident albeit with less security benefits at Llanfrechfa Grange Site (Cwmbran). Both of these incidents occurred in vacant buildings that had been unoccupied for a considerable period of time. Furthermore, both of these sites had experienced a history of petty malicious activity prior to the fires.



Fire damage Lansdowne Hospital



Fire damage Llanfrechfa Grange Hospital

Arson fires in unoccupied buildings often follow a pattern, beginning with graffiti, vandalism, broken windows etc. followed by setting of small fires causing limited damage leading to major incidents as illustrated above.

Although not infallible, restricting access and removing combustible materials are considered the two best practice approaches for mitigating the risk of deliberate fire-raising. Other precautionary measures such as disabling electrical supplies could also be beneficial; likewise conducting regular checks for signs of trespassing or damage could help to identify a heightened risk of arson to address.

A risk assessed approach specific to the building will determine the extent of precautionary measures necessary. Noting, these potential fire risks not only apply to sites currently mothballed or awaiting disposal but equally to redundant or disused buildings located within operational healthcare sites.

Comprehensive guidance is given in the Fire Protection Association's *Code of Practice; for the protection of empty buildings: fire safety and security*, which was developed through the Insurers' Fire Research Strategy Scheme (InFiReS). This Code of Practice provides guidance to those responsible for any empty premises and also includes a detailed management checklist for supporting effective management arrangements.

The Fire and Rescue Services' Arson Reduction Teams are also a valuable source of advice.

It should be noted that this SESN primarily focuses on fire safety aspects for derelict or unoccupied buildings. Recipients should also be mindful of the wider health and safety responsibilities covering matters such as asbestos management etc., as well as the duties imposed under the Occupiers' Liability Acts of 1957 and 1984.

### **Action Required**

- Undertake and periodically review fire risk assessments for unoccupied buildings. This should address the likelihood of a fire starting, including deliberate fire-raising, and the impact of any such fire on adjacent properties. Remedial actions should be implemented as necessary.
- Where premises are scheduled for closure, NHS organisations should implement a 'managed shutdown procedure', including for example;
  - removing all combustible waste, furniture, fixtures and fittings if possible;
  - disabling all electrical power supplies if appropriate;
  - isolation of gas or any other piped supplies;
  - additional security measures – such as security patrols, upgrading the perimeter fencing, installing additional exterior lighting and 'boarding up' windows and doors.
- In addition to liaising with the Fire and Rescue Services' Arson Reduction Teams, NHS organisations should also relay any relevant information to the Fire and Rescue Service about vulnerable buildings and their contents or features.

Any enquiries on the content of this letter should be addressed to Anthony Pitcher, Senior Fire Safety Advisor on 02920 904120 or e-mail [Anthony.Pitcher@wales.nhs.uk](mailto:Anthony.Pitcher@wales.nhs.uk)

Yours sincerely,



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