ATLAS ENTERTAINMENT
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CONFIDENTIAL ADVISORY REPORT

Barcelona Indoor FEC Pre-opening Corrective Action Plan

Accountable remediation, verification and effectiveness-review framework

ATLAS DECISION INTELLIGENCE

PRODUCT	Corrective Action Plan
SOURCE DOCUMENT	Barcelona-Operations-Manual-Compliance-Gap-Analysis-V3-Preview
EVIDENCE SCOPE	43-page governed Compliance Gap Analysis
PRIORITY BASIS	Seven P1 gates and P2 mobilisation actions
PLAN BOUNDARY	Hypothetical; no closure or effectiveness assurance
PREPARED BY	ATLAS Entertainment

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Table of Contents

Decision exhibits are embedded with the relevant chapters

1. Executive Summary

This Corrective Action Plan operationalises the Barcelona Indoor FEC Pre-opening Compliance Gap Analysis into an accountable remediation programme. The governed register defines 24 actions (A1-A24) with owners and target dates through 2026-10-01. Seven P1 pre-opening gates must be closed before public opening: PAU approval and filing in HERMES (A1), municipal licence OMAIIAA (A2), approved aforo and evacuation basis aligned to CTE DB-SI (A3), RIPCI commissioning/acceptance and maintainer/logbook (A4), REBT legalisation (A5), PRL preventive plan and baseline risk assessments (A6), and HACCP implementation (A7). Evidence of approvals, certificates and working controls is required for closure; intent or assignment is insufficient.

Seventeen P2 mobilisation actions prepare front-of-house compliance and operating discipline: consumer-complaint forms (A8), GDPR/CCTV artefacts and logs (A9, A20), VAT/ticketing controls (A10, A16, A22), packaging EPR (A11), accessibility information and training (A12, A23), first-aid readiness (A13), opening/closing checks (A14), allergen dossier/notices (A15), UNE-EN 13814 operational integration (A17), no-smoking controls (A18), waste segregation and gestor (A19), emergency drills/lessons learned (A21), and PRL annual program/memory (A24).

Phase sequencing aligns with authority dependencies: immediate mobilisation by 2026-08-31, core legalisation and safety by 2026-09-10, and authorisations/integration through 2026-10-01. Charts reflect seven P1 and seventeen P2 actions; timelines are planning-only. No completion, verification or effectiveness is claimed absent artefacts. Owners, resources, acceptance criteria and verifiers are specified per action. Where causal analysis is absent, this plan requires proportionate root-cause work before claiming durable closure. Decision focus: mobilise P1 gates on the critical path (A4-A6 precede A1; A1 precedes A2/A21; A3 ties to POS limits) and stand up daily evidence capture to enable timely verification and licensing engagement.

2. Background and Trigger

The plan is triggered by the governed Compliance Gap Analysis for a new indoor family entertainment centre in Barcelona, Spain. The analysis identified mandatory pre-opening authorisations and operational controls required by Catalan civil protection (PAU/HERMES), municipal licensing (OMAIIAA), national building and fire codes (CTE DB-SI), active fire protection regulations (RIPCI), electrical legalisation (REBT), occupational risk prevention (PRL), and food hygiene (HACCP). It further mapped mobilisation controls spanning GDPR/CCTV, consumer protection, accessibility, ticketing/VAT, waste/EPR, first aid, no-smoking, and ride operations under UNE-EN 13814.

Key constraint: only the traceability matrix, action register and roadmap were supplied. No site-specific approvals, commissioning certificates, municipal resolutions, aforo certificates, PRL/HACCP documents, POS outputs or GDPR artefacts were provided. Therefore, no completion, overdue, verification or effectiveness metrics can be asserted. The governed priorities classify gaps as P1 (pre-opening gate) and P2 (mobilisation), not critical/major/minor. Dates are mobilisation targets that may require alignment with construction and authority lead times.

The corrective action plan converts the gap findings into an accountable, sequenced implementation with owners, resources, dependencies, verification artefacts and effectiveness reviews. It preserves legal boundaries: fire, electrical, licensing and data protection confirmations must be issued by competent authorities or roles. It also embeds operational evidence capture to support authority inspections and internal governance. The immediate trigger for decision-making is the clustering of September 2026 deliverables across A3-A7 on the critical path to A1 (PAU approval) and subsequently to A2 (municipal licence), requiring disciplined dependency management and early engagement with Protecció Civil and Ajuntament de Barcelona.

3. Scope

Objective: Convert the governed findings, P1 gates, P2 mobilisation gaps and remediation actions in the supplied Compliance Gap Analysis into an accountable pre-opening corrective action plan for the Barcelona Indoor FEC. This scope includes mapping each gap to actions A1-A24, preserving priorities, owners, dependencies, target dates, verification artefacts, acceptance criteria, and effectiveness reviews.

In-scope elements:

- P1 pre-opening gates: PAU/HERMES (A1), municipal licence OMAIIAA (A2), aforo/evacuation per CTE DB-SI (A3), RIPCI maintenance/acceptance (A4), REBT legalisation (A5), PRL plan and baseline RAs (A6), HACCP (A7).
- P2 mobilisation controls: customer complaint system (A8), GDPR/CCTV governance (A9, A20), VAT/ticketing audit trail (A10, A16, A22), packaging EPR (A11), accessibility information/training (A12, A23), first-aid readiness (A13), opening/closing checks (A14), allergen dossier/notices (A15), UNE-EN 13814 ops integration (A17), no-smoking controls (A18), waste and gestor (A19), drills/lessons (A21), PRL annual program/memory (A24).

Out-of-scope: creating or certifying legal documents, issuing licences, reproducing paid standards content, or asserting completion/verification/effectiveness absent evidence. Financial re-modelling is excluded; VAT mapping must follow AEAT and be evidenced via POS outputs. Benchmarking beyond Spain/Catalonia is excluded.

Deliverables: sequenced roadmap and resource needs; verification plan and acceptance criteria per action; owner accountability and governance cadence. Limitations: controlled hypothetical scenario; missing records are not confirmed non-compliance; action assignment is not proof of implementation; closure and effectiveness require governed evidence and validation.