TOTAL FIRE GROUP

Wythenshawe Community Housing Group

TOTAL FIRE GROUP LTD

Fire Risk Assessment

Conducted at:

Bagnall Court
Greenway
Manchester
M22 4LT

04 March 2025

Fire Industry Association

BAFE FIRE SAFETY REGISTER REGISTERED ORGANISATION ID: 302157

NSI SILVER

UKAS PRODUCT CERTIFICATION 0142

Certificate Number	LS	0396992

Life Safety Fire Risk Assessment

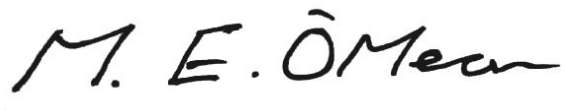
Silver Approved Scheme

CERTIFICATE OF CONFORMITY

This certificate is issued by the Approved Company named in Part 1 of the Schedule in respect of the fire risk assessment provided for the person(s) or organisation named in Part 2 of the Schedule at the premises and / or part of the premises identified in Part 3 of the schedule.

SCHEDULE		
Part 1	**NSI Life Safety Fire Risk Assessment Silver Approved Organisation**	
	Total Fire Group Ltd	
	BAFE Registration Number	
	NSI 00330	
Part 2	**Name of Client**	
	Wythenshawe Community Housing Group Limited	
Part 3	**Address of premises for which the fire risk assessment was carried out**	
	Bagnall Court, Greenway, Manchester, M22 4LT	
	Part or parts of the premises to which the fire risk assessment applies	
	The common parts and communal areas only.	
Part 4	**Brief description of the scope and purpose of the fire risk assessment**	
	In compliance with Article 9(1) of the RRFSO 2005.	
Part 5	**Effective date of the fire risk assessment**	04/03/2025
Part 6	**Recommended date for review of the fire risk assessment**	04/03/2026

We, being currently a NSI Approved organisation in respect of fire risk assessment identified in the above schedule, certify that the fire risk assessment referred to in the above schedule complies with the Specification identified in the above schedule and with all other requirements as currently laid down within BAFE SP205 Scheme in respect of such fire risk assessment.

Signed (for and on behalf of the issuing Approved organisation)	
Job Title	Senior Fire Safety Consultant
Date	14/03/2025

1. This certificate is used subject to NSI Regulations and Rules of the NSI LIFE SAFETY FIRE RISK ASSESSMENT SILVER Approval Scheme.

2. NSI reserves the right to conduct an audit by an authorised NSI representative during normal business hours, with the permission of the customer, of the fire risk assessment and its related premises in order to ensure that the said risk assessment complies with BAFE Scheme document SP205-1 (the Scheme) Section 7 and generally.

3. NSI requires every NSI LIFE SAFETY FIRE RISK ASSESSMENT SILVER Approved Company to issue a Certificate of Conformity in accordance with the Scheme for all fire risk assessments it carries out that wholly or partly address life safety.

4. The Certificate of Conformity when completed is a clear statement that the Approved Company conducted the fire risk assessment for life safety, it is suitable and sufficient and compliant with the BAFE SP205-1 Scheme document and is certified by a registered competent fire risk assessor.

5. Where life safety and other aspects of fire protection are addressed in the same fire risk assessment a Certificate of Conformity shall be issued but the certificate shall make clear that the certificate applies only to the life safety aspects of the fire risk assessment and not further or otherwise.

6. Should the customer be dissatisfied with the fire risk assessment covered by this certificate, he/she should at first contact the Approved Company at its local office. If satisfaction is not obtained, the customer should address a written complaint to the customer services department at the head office of the Approved Company. If the customer remains dissatisfied, he/she may address a written complaint, outlining the nature of his/her dissatisfaction and the circumstances of the fire risk assessor company's response, to the Customer Care Manager at NSI.

   NSI will not normally consider complaints unless the Approved Company has been given the opportunity to resolve the dispute as set out above.

   Subject thereto and as hereinafter provided, NSI will endeavour to assist in the resolution of the dispute between the contracting parties, provided always that NSI will not deal with or be involved in any discussions or negotiations with either party with regard to financial or other loss, claims or potential loss claims, outstanding payments or construction and/or interpretation of the Approved Company’s terms and conditions of contract.

   NSI shall not be liable for any act or omission arising from any assistance it may provide as hereinbefore provided unless such act or omission is shown to have been fraudulent or deceitful.

7. This Certificate confirms conformity with the requirements of BAFE Scheme document SP205-1 applicable at the date of issue by the issuing company. NSI does not undertake to investigate any query or complaint in relation to future changes to BAFE scheme documents, policies or other regulations that render the fire risk assessment in need of further updating. In that event, the appropriate update should be carried out by a company holding NSI LIFE SAFETY FIRE RISK ASSESSMENT Approval.

8. NSI does not accept any responsibility or liability for any fire risk assessment produced by the Approved Company

9. Unless the issuing company's obligation to NSI in respect of the fire risk assessment are undertaken by another NSI Approved Company, NSI will not enforce its Rules or Standards on the Approved Company or on its successor in business in respect of any fire risk assessments after the issuing company ceases to hold NSI LIFE SAFETY FIRE RISK ASSESSMENT Approval.

10. The Certificate is issued subject to the terms and conditions of the company issuing the certificate for the fire risk assessment service.

11. On this certificate and in these terms and conditions, where the context permits, the reference to the issuing company shall include any Approved Company who shall undertake the issuing company's obligations to NSI in respect of the fire risk assessment.

Note.

"SP205" is a Scheme Document published by the British Approvals for Fire Equipment (BAFE).

TOTAL FIRE GROUP

Contents

TERMS AND CONDITIONS OF BUSINESS

Bagnall Court, Greenway, Manchester, M22 4LT

This fire risk assessment is in accordance with the full Terms and Conditions provided with our quotation that should be read in full. The risk assessment should not be relied upon by any person other than the customer/client named herein. i.e. if the premises are sold to a third party. This fire risk assessment is made without prejudice to any requirements made by Local Authority, Building Control or by the local Fire Authority. Fire assessment and evaluation of risk is a dynamic and evolving process. The Assessment that we have prepared is based on the appearance of the premises/building, number of employees, internal layout and information provided on **Tuesday, 4 March 2025**

This fire risk assessment is prepared pursuant to our assessor's knowledge of the premises as disclosed to him/her by the occupier and following an inspection. The working of equipment not specifically checked by him/her is outside our knowledge and control. The risk assessment only identifies those areas of risk apparent at the date above in relation to the risks relating to fire. If there is a change in the structure of the premises/building, number of employees, layout or any other aspect that could impact upon fire safety the Responsible Person should ensure that no revision to the Assessment is required.

We have assessed the risk of fire to ensure legislative compliance and safety of relevant persons and have provided you with our Assessment. Ownership and implementation of the assessment is vital. We accept no responsibility for loss, damage or other liability arising from a fire, loss or injury due to the failure to observe the safety observance and practices identified in our Assessment. The Responsible Person will always remain responsible for the outcome of the Fire Risk Assessment or its review. We highlight that we recommend a periodic fire risk assessment review regardless of any changes in the structure, nature of business and employees. Total Fire Group Ltd accepts no liability where the recommended review date in the fire risk assessment has been exceeded, the information provided should not be relied upon 12 months from the date of the Assessment.

The submission of this Assessment constitutes neither a warranty of future results by Total Fire Group Ltd nor an assurance against risk. The Assessment represents only the best judgement of the consultant involved in its preparation, and is based, in part, on information provided by others. No liability whatsoever is accepted for the accuracy of such information.

Our recommendations are outlined in an Action Plan Summary. This sets out the measures it is considered necessary for you to take to satisfy the requirements of the Fire Safety Order and to protect people from fire. It is particularly important that you study the Action Plan, and, if any recommendation in the Action Plan is unclear, you should seek clarification. You are advised that this fire risk assessment forms only the foundation for management of fire safety in your premises and compliance with the Fire Safety Order. It is imperative you act on its recommendations and record what you have done. This will demonstrate to the enforcing authority your commitment to fire safety and to fulfilling your legal obligations. The Fire Safety Order requires that you keep your risk assessment under review. A date for routine review is given within the Assessment, but you should review the Assessment sooner should there be any reason to suspect it is no longer valid, if a significant change takes place or if a fire occurs.

The Fire Safety Order requires that you give effect to 'arrangements for the effective planning, organization, control, monitoring and review of the preventive and protective measures'. These are the measures that have been identified by the risk assessment as the general fire precautions you need to take to comply with the Fire Safety Order. You must record these arrangements. While this fire risk assessment is not the record of the fire safety arrangements to which the Fire Safety Order refers, much of the information contained in this Assessment will coincide with the information in that record. We have based our assessment on the situation we were able to observe while at the premises and on information provided to us, either verbally or in writing. No verification of full compliance with relevant British Standards was carried out. Our surveys do not involve destructive exposure, and it is not always possible to see in all rooms and areas, nor inspect less readily accessible areas such as above ceilings or voids. It is therefore necessary to rely on a degree of sampling and also reasonable assumptions and judgement.

Contact Details
Total Fire Group Ltd Suite 312, Waters Meeting Business Park, Britannia Way Bolton BL2 2HH
01204 697990 info@totalfiregroup.org

1.0 Fire Risk Assessment Details

The following fire risk assessment has been conducted on behalf of:

Wythenshawe Community Housing Group Limited

Wythenshawe House, 8 Poundswick Lane, Wythenshawe, Manchester, Greater Manchester, M22 9TA

and relates only to the premises of:

Bagnall Court, Greenway, Manchester, M22 4LT

Responsible or Accountable person(s):

Wythenshawe Community Housing Group (WCHG).

Person(s) consulted and landline contact number:

No representative of the Responsible Person was present at the time of this Fire Risk Assessment. However, Mike Richmond (WCHG) was onsite for a short duration.

Fire Risk Assessor:

Ethan Davies BSc (Hons), MIFSM, Tier 3 IFSM Level Fire Risk Assessor (N665)

Validated by:

Mark O'Meara DMS, Eng Tech, MIFireE, MIFSM, Tier 3 Nationally Accredited Fire Risk Assessor 0143

Date fire risk assessment was conducted:

Tuesday, 4 March 2025

Time:

11:00 am.

Date of last FRA or FRA Review (if known)

04 Jun 2024

Suggested date for next review:

March 2026

Fire risk assessment limitations:

A type 3 common parts and flats (Non-Destructive) Fire Risk Assessment (as detailed in the latest guidance document Fire

Safety in Purpose Built Blocks of Flats) has been completed with access available to flats 52 and 58.

The Fire Strategy carried out by FIRNTEC Building Compliance on the 7th of January 2023 has been viewed by the assessor.

The lift motor room and adjacent ventilation plant room were accessed and viewed at the roof level. The roof itself was however not accessed for safety reasons and no permit which includes no access to the gas boiler and radio transmitter rooms.

All ground floor ancillary rooms including the main electrical intake room, laundry, store rooms, the water tank room, and caretaker's area were accessed. The externally accessed refuse room was also viewed.

A good sample/selection of false ceiling tiles on various floors was lifted in several locations in order to assess the compartmentation above, but the vision was limited due to the narrow space between the tiles and the true ceiling.

A good sample/selection of riser and electrical cupboards and dry-rising main cupboards were opened and viewed.

No access was gained into the small under-stairs cupboard.

The assessment of the fire performance of the external wall construction and cladding is excluded from this fire risk assessment. Where required, it is recommended that advice is sought from a qualified and competent specialist on the nature of, and fire risks associated with, the external wall construction, including any cladding on this building. This exclusion is consistent with advice provided by the Fire Industry Association (FIA), specifically within the document 'FIA Guidance on the Issue of Cladding and External Wall Construction in Fire Risk Assessments for Multi-Occupied Residential Premises'. Where it is determined that a detailed assessment of an external wall is required, this should be carried out by specialists in accordance with PAS 9980.

All services or penetrations traversing fire resisting compartments were not confirmed as being sufficiently fire stopped with fire resisting material. Any locations that have been identified are highlighted in section 9. Where fire compartments/fire dampers/ceiling voids were considered inaccessible for safety reasons and could not be physically accessed or were outside the visual range of the assessor, technical comment on these areas cannot be provided. If there are reasons to suspect the fire resistance within the building has not been sufficiently maintained the responsibility to provide this technical information rests with the duty holder.

There were no outstanding notices of deficiencies/enforcement action from the enforcing authority and the fire strategy document and "as built" plans issued on completion of the building/alterations were not observed.

This document is part of the continuous management of fire safety within these premises and as such should be read in conjunction with any previous fire risk assessments.

Note

The following assessment has been conducted to assist the responsible person in compliance with the Regulatory Reform (Fire Safety) Order 2005. Although reference is made to relevant British Standards, Codes of Practice and Guides the Assessment will not, nor is it intended to, ensure compliance with any of the documents referred to in the Assessment. However, deviations from generally accepted codes, standards and universally recognised good fire safety practice will be clearly identified in the fire risk assessment.

2.0 General Premises Details

2.1 Number of floors:

13 (ground to 12th) plus a roof level with plant.

2.2 Approximate building footprint:

360m^2

2.3 Details of Construction and Premises:

Bagnall Court is a high-rise residential block of purpose-built, general-needs flats which was previously noted to have been constructed in 1964. The premises contain a total of 62 flats and have brick and concrete infill panel outer walls with aluminium cladding panels, concrete floors and a single concrete stairway serving all floors.

The main entrance to the building is front-facing and opens into a lift lobby containing 2 lifts which also provide access to resident flats, a telephone cupboard, the main electrical cupboard, the laundry corridor and the caretaker's areas. The laundry corridor itself has several storage cupboards located off it. The caretaker's area consists of a corridor used for storage of cleaning materials, with storage cupboards adjoining in addition to a pump room. Also at the ground floor level, the bin room is accessed externally.

The roof level is accessible via a door at the head of the staircase and by use of a ladder. The lift motor room and ventilation extraction are located at the roof level, as are a boiler room and a radio transmitter room.

The layout of each upper floor is the same, aside from one difference in that only 1 lift serves the 12th floor. On every floor, in the lobbies serving flats, false ceilings are installed, with solid ceilings in rooms and areas adjoining. A number of riser cupboards adjoin the lobbies. The flat lobbies are permanently ventilated and a door from these lobbies opens onto a small open deck area, off which is a refuse chute hopper and a door into the staircase. At the base of the staircase is a final exit leading directly to fresh air.

The building is provided with a BS5839-1 type fire alarm system which incorporates automatic detection to L2 standard in the common areas. The fire alarm system has been re-configured so that it can function in a similar manner to an Evacuation Alert System (EAS). This system is monitored and is generally silent (except for in plant and service areas) on its activation. Despite most manual call points associated with the system being removed, one remains. Emergency lighting is installed throughout the communally used spaces, including plant areas. A dry riser system is installed, as is a sprinkler system which provides coverage in key risk common areas such as the laundry.

A number of resident flats were accessed and the layout of these were similar, consisting of the entrance door opening into a hallway, off which was a bedroom(s), bathroom and living room. The kitchens are inner rooms to the living rooms and a door from the living room provides access to a concrete-floored balcony. Vents in the bathrooms appeared to be part of a common system, and the kitchen vents were on the walls directly to the outside. Within the flats, BS5839-6 Grade D LD1 fire alarm systems were installed throughout the flats. The common fire alarm system also extends into the flats in the form of heat detection in the flat entrance hallway. The sprinkler system provides coverage throughout the resident flats. Also, there is a flat per floor that is of the studio-type layout, with the entrance door opening into a lobby, off which are the bathroom and the bedroom/kitchen living room area.

2.4 Occupancy/Purpose Groups

The premises are classed as Purpose Group 1a Residential (Flat) as defined by Building Regulations Approved Document B 2019 (amended 2020 and 2022)

2.5 Approximate maximum and minimum number of persons:

124 (based upon an assumption of 2 persons per flat).

2.6 Approximate maximum number of employees at any one time:

Occasional visits by WCHG staff and trades persons.

2.7 Maximum number of members of the public:

Limited to visitors to the resident flats. The exact number may be variable.

2.8 Occupants at Special Risk:

Sleeping occupants	
Persons familiar with the premises	Yes
Persons unfamiliar with the premises	No
Occupants with disabilities	
Mobility-impaired	Yes
Hearing-impaired	Yes
Learning difficulties	Yes
Occupants in remote areas	No
Others	Yes

Comments

Flats are general needs. Residents may be present with any combination of disabilities throughout the premises.

The Responsible Person for the premises should provide information and regularly remind tenants on the fire procedures by providing leaflets and where necessary encouraging new tenants to have a home fire safety check by the local fire service. Specific measures regarding tenants with any disabilities identified can be discussed and implemented following the home fire safety check in conjunction with relevant local community services.

2.9 Fire Loss Experience

None evident. None were reported at the time of assessment.

2.10 Any other relevant building details: i.e. Does the building have any ancillary uses, such as commercial or community activities? If yes provide details

None.

3.0 Overall Risk Rating

Based on the findings within the fire risk assessment the overall risk ratings have been quantified as:

Risk to Life: Moderate.

The standard of fire safety on the premises is generally high, however, findings have been raised in regard to the confinement of fire and fire safety signs and notices. The risk to life is considered to be moderate at the time of the fire risk assessment.

However, when the significant findings and recommendations identified within this Fire Risk Assessment are addressed the risk to life will be reduced to tolerable.

The risk rating has been determined after considering the fire risk rating matrix in section 17.0. In these premises it is considered that the risk of a fire occurring is unlikely and the likely consequences of harm from fire (should one occur) are moderate harm.

Risk to Property: Tolerable

A monitored, comprehensive fire alarm system is installed which has also been configured as an evacuation alert system, as is a sprinkler system which covers both resident flats and key common areas of higher risk. The overall risk to property is considered to be tolerable.

Risk to Business Continuity:

N/A.

Note: The BAFE SP205-1 fire risk assessment certification relates to life safety only and not property or business continuity protection. The client should undertake further detailed assessment of risk for these areas if it considers necessary.

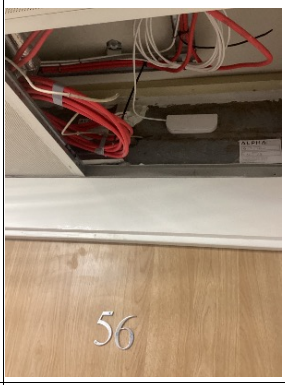
4.0 Dangerous, Flammable, Combustible Materials & Substances		
IDENTIFYING THE FIRE HAZARDS		
4.1	Are suitable arrangements in place to manage the elimination or reduction of risks from dangerous substances? (Article 12)	N/A
4.2	Are there suitable additional emergency measures provided to safeguard all relevant persons from emergencies related to dangerous substances in or on the premises? (Article 16)	N/A
4.3	Have combustible or flammable materials used or stored in the premises been identified?	Yes
4.4	Are all combustible or flammable materials stored or stacked safely?	Yes
4.5	Has consideration been given to reduce the quantity held or has the use of non-combustible materials been considered?	N/A
4.6	Are all substances stored away from ignition sources?	Yes
4.7	Where flammable stores are provided, are they adequately ventilated and correctly marked?	Yes
4.8	Are all refuse bins for Dangerous, Flammable, Combustible Materials & Substances sited where they will not affect the means of escape or pose a fire hazard?	N/A
4.9	Is all Dangerous, Flammable, Combustible waste removed on a regular basis?	N/A
4.10	Is the frequency of waste removal adequate?	N/A

4.0 Dangerous, Flammable, Combustible Materials & Substances: Finding(s)	
Ref	**FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
4.1-4.2	Questions 4.1 and 4.2 relate to substances and materials which are subject to the “Dangerous Substances and Explosive Atmosphere Regulations 2002” (DSEAR). No substances or materials falling into the above regulations were seen or are known to be stored or used inside the premises.
4.6-4.7	It was seen that there were two flammable substance store cupboards, located in the caretaker's/cleaner's areas, but these only had cleaning materials stored inside and did not contain any significantly flammable substances at the time of this fire risk assessment. The cupboards are kept closed shut when not in use.

5.0 Interior Furnishings		
5.1	Are all interior furnishings made from fire resisting materials?	Yes
5.2	Where appropriate are they retreated with flame retardant chemicals (theatre curtain etc.) or made from inherently flame retardant materials?	N/A
5.3	Are all items located away from ignition sources?	N/A
5.4	Is all furniture in a good condition i.e. free from tears in covers, burns or discolouring from heat?	N/A

5.0 Interior Furnishings: Finding(s)	
Ref	**FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
5.1	At the time of this Fire Risk Assessment, the common areas, stairs and corridors were free and clear from any interior furnishing.

6.0 Heating and Electrical Appliances		
6.1	Are portable or fixed heaters used?	Yes
6.2	Are all heaters fitted with suitable guards and located in positions away from combustible materials?	Yes
6.3	Are all heaters free from naked flames?	Yes
6.4	Has the use of safer alternatives been considered?	N/A
6.5	Are systems in place to ensure appliances are tested, repaired and maintained on a regular basis in accordance with the Electricity at Work Regulations, 1989?	Yes
6.6	Has the premise's electrical system undergone electrical safety checks?	Yes
6.7	Is there a procedure to prevent the use of unauthorised portable appliances?	Yes
6.8	Is the ventilation of all appliances adequate?	Yes
6.9	Are all appliances turned off when the area is unoccupied?	Yes
6.10	Are all appliances protected by the correct fuse rating?	Yes
6.11	Are systems in place to isolate any appliance with a blown fuse?	Yes
6.12	Are all appliances free from visible signs of overheating?	Yes
6.13	Are multi-point adapters and extension leads kept to a minimum?	Yes
6.14	Are all cables (where can be seen) on walls, floors, ceilings correctly secured, so as not to pose an entrapment risk to firefighters?	No
6.15	Are cables free from mechanical damage?	Yes
6.16	Do signs indicate all electrical hazards?	Yes
6.17	Are reasonable measures taken to prevent fires as a result of cooking?	N/A
6.18	Are filters changed and ductwork cleaned regularly?	N/A
6.19	Are suitable extinguishing appliances available?	N/A
6.20	Are legal or other requirements for testing, maintenance & record keeping complied with for equipment such as hoists, escalators, air handling systems, heating boilers, pressure vessels etc.?	Yes
6.21	Do the premises have a lightning protection system? (where required)	Yes
6.22	Have other potential sources of heat not listed above been considered?	Yes

6.0 Heating and Electrical Appliances: Finding(s)	
Ref	**FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	Observation
6.14	It was observed that the false ceiling had been removed on some floors, exposing bundles of cable and wire. 
	Recommended Actions
6.14	It is recommended that the false ceiling be reinstalled, this will help secure the wires/cable.
Ref	**COMMENTARY**
6.0	The main gas isolation valve is housed inside a dedicated meter cupboard within the refuse store on the ground floor. A notice in the ground floor lift lobby is provided which indicates the location of the gas isolation valve to attending firefighters.
6.1-6.3	There was no heating system provided to the residential common parts, however, gas is present in the building for the rooftop heating system/boiler room, which is supplied to individual flats via a heat exchanger for the mechanical heating and ventilation system in each flat. There are also some wall-mounted electrical heaters that are thermostatically controlled, located in the water tank room and also the lift motor room; these are for the purpose of frost protection during winter.
6.5, 6.10	Periodic PAT testing of portable electrical appliances in the communally used areas is organised by WCHG on a periodic basis. It is highlighted that not all electrical devices need to be the subject of an annual PAT. The Health and Safety Executive (HSE) advocates a proportionate, risk-based approach to the maintenance of portable electrical appliances within the workplace. This guidance is simple and easy to follow and can be found on the HSE website "Maintaining Portable Electrical Equipment in a low-risk environment."
6.6	WCHG has confirmed as part of their standard responses that the building's electrical systems undergo electrical safety checks. It was previously confirmed that both the common area and the flat electrical installations are serviced on a 5-yearly basis. A label was observed on one of the electrical consumer units that was dated 05/2021 for the last service.
6.17-6.19	There are no communal cooking facilities or kitchens.
6.20	The washers and dryers in the communal laundry appeared to be clean and in good condition with clean filters at the time of this fire risk assessment.
6.20	WCHG has confirmed as part of their standard responses that they have appropriate testing and maintenance programs in place to ensure legal compliance for equipment such as air handling systems, heating boilers, pressure vessels, etc.
6.21	Lightning protection is installed. WCHG has confirmed as part of their standard responses that these systems are checked and maintained.
6.22	No solar or PV systems were advised to be fitted to this building.

7.0 Persons at Risk		
7.1	Does the actual occupancy of the premises/building conform with the occupancy figures contained in the relevant guide for the type of premises/purpose group?	Yes
7.2	Are the management/responsible person(s) aware of the occupancy restrictions for all rooms within the premises? i.e. function rooms, bars, conference facilities	N/A
7.3	Have the requirements of the Equality Act 2010 (permanent or temporary disabilities) for ALL persons been assessed and complied with where reasonable?	Yes
7.4	Have all disabled staff members been consulted and where agreed PEEPs been prepared?	N/A
7.5	Have standard PEEPs or PCFRAs been prepared for all relevant persons and visitors that may reasonably be expected to resort to the premises?	Yes
7.6	Are disabled refuges provided?	N/A
7.7	Are members of staff trained in the evacuation of disabled or mobility impaired persons?	N/A
7.8	Are fire evacuation drills conducted at least annually, taking into account all employees, shift and casual workers, visitors and contractors where appropriate?	N/A
7.9	Are the results recorded? (People involved, time taken, learning outcomes).	N/A
7.10	Is the access of relevant persons controlled at all times? I.e. are public, visitors & contractors required to sign in?	Yes
7.11	Are relevant persons made aware of the fire and health and safety procedures on arrival? (I.e. fire procedure/building plan adjacent to signing in book etc.)	Yes
7.12	Are notices in place to inform of restricted access areas?	Yes
7.13	Are there designated fire marshals where appropriate for all areas to ensure all relevant persons are accounted for following an emergency?	N/A
7.14	Is sleeping accommodation provided for the staff, public, temporary residents etc.? (Hotels, boarding houses, probation hostels etc.).	N/A

7.0 Persons at Risk: Finding(s)	
Ref	**FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.

Ref	COMMENTARY
7.1	The previous FRA noted that WCHG considers the mobility and capabilities of residents when first assigning accommodation.
7.1, 7.3, 7.8	**As part of WCHG's Fire and Building Safety Management Policy it is noted in section 6.3 that** "residents in General Needs high-rise blocks are regularly consulted and asked to self-identify where they may be unable to evacuate unaided in the event of a fire or other emergency and the information will be stored in the Secure Information Box at each premise and reviewed annually or where there is a change of need or tenancy. Where tenants are unable to evacuate unaided then a rehousing assessment will be undertaken with the tenants to assess the option of a possible transfer to a more suitable home. All new applicants prior to the offer of an apartment in a high-rise block will be assessed for their suitability with regard to mobility and ability to self-evacuate."
7.1, 7.3, 7.8	The building is occupied as general needs flats, therefore fire drills and associated staff procedures are not required. Residents of the flats may have a range of disabilities but will be familiar with the means of access and egress which is used on a regular basis. New residents should be encouraged to have a home fire safety check by the local authority Fire and Rescue Service where it is considered that they may be vulnerable in the event of a fire. Specific measures regarding residents with any disabilities identified can be discussed and implemented following the home fire safety check in conjunction with relevant local community services. Where it is known that persons cannot self-evacuate, further fire safety measures may be needed.

7.3, 7.5, 7.7	Identification of vulnerable residents in purpose-built flats with regard to escape provision: As part of the fire safety management plan, it is critical that 'adequate provisions' are provided for the evacuation of any disabled users. The fire safety for the building needs to take into account the disabled occupants who may have access to the premises. Purpose-built flats are afforded enhanced levels of compartmentation and these enhanced levels of fire compartmentation are generally considered 'adequate provisions' that allow occupants to remain in the non-fire-affected compartment in the event of a fire elsewhere. Any failings discovered in the fire compartmentation jeopardize the evacuation strategy either locally to a flat/floor or within the whole building and protection measures would need to be reviewed immediately. There is no requirement under the Fire Safety Order for the Responsible Person to consider the means of escape from within a person's flat which is considered a 'private dwelling', unlike the duty for protection required within the common parts for all persons. A flat occupied by any person, including a vulnerable or disabled person, is separate from this duty if they are unable to self-evacuate from a fire affecting their flat. Irrespective of the legislation, two distinct evacuation stages are considered; 1. Evacuation from the dwelling on fire - The NFCC Fire Safety in Specialised Housing Guidance is intended to assist Responsible Persons for purpose-built blocks of flats where disabled and vulnerable persons are housed, and the recommendations in the guide go beyond the scope of the legislation. The guide recommends measures for the protection of vulnerable residents from a fire within their own flats. A disabled person living in a block of flats is best served with a Person-Centred Fire Risk Assessment (PCFRA), which will achieve far more in terms of the safety of a disabled person from the risk of fire in their own flat than focusing purely on the much more narrow issue of a PEEP, which would not be practicable for implementation in this premises. In all cases, it is likely to lead to a Personal Rescue Emergency Plan (PREP). 2. Moving through an evacuation from the common parts - Many persons with mobility impairment will be able to leave their own flat but may be unable to evacuate from the building (e.g. because of difficulty in negotiating stairs). In this connection, two matters need to be considered, namely relatively safe refuges and the use of existing lifts subject to the assessment of risk. Following consultation with the residents: • Every resident who voluntarily self-identifies to the Responsible Person as unable to self-evacuate should be subject to a PCFRA. This may lead to a PREP. • The assessment should differentiate between a person who is unable to self-evacuate from their flat and a person who is able to get out of their flat but is unable to evacuate from a relatively safe area (staircase or refuge). • Responsible persons should add information to the Secure Information Box (SIB) that they are aware of, for example, where they have been notified about a person with mobility impairments who has not self-declared or has refused a PCFRA. • Clarity may be necessary on whether the Responsible Person would be fulfilling the duties under the Fire Safety Order if all vulnerable persons have not been considered and given the opportunity to self-declare mobility impairments. • The SIB rescue information for the Fire and Rescue Service is not the same as a PCFRA or a PEEP this applies even where a PCFRA is declined since the amount of information required can vary and the PCFRA is particular to that person. • The PCFRA should feed into a review of the premise's fire risk assessment. • A PCFRA should be reviewed as soon as practicable if the resident indicates a change in circumstances to the Responsible Person. A regular review of PCFRAs is also required to mitigate the risk of changes to circumstances going unnoticed because residents have not updated the Responsible Person. It is important that the Responsible Person understands that any PREP or PCFRA may require the building's Fire Risk Assessment to be informed and updated. Personal plans for fire emergencies: **PEEP (Personal Emergency Evacuation Plan) -** Is the term normally understood for a generally non-residential building to provide a plan separate and in addition to the normal fire plan which may include assistance to evacuate from the building by trained persons available at all times that the disabled person is expected to be in the premises. This type of plan is generally ineffective and not recommended in purpose-built blocks of flats that do not have permanent staff on site. Reliance on friends and non-resident family members as part of a PEEP may place vulnerable persons or their nominated assistant at greater risk of harm as they may not be available at the critical time or be sufficiently trained to make a suitable dynamic assessment of the risks presented. **PCFRA (Person-Centred Fire Risk Assessment)** - The person-centred approach, based on a PCFRA, relates to the safety of residents who are at high risk from fire in their own accommodation; as such, this risk assessment and measures identified by it are outside the scope of the Fire Safety Order. The assessment is designed to reduce the potential fire hazards as far as possible depending on the personal circumstances of the disabled person, thus reducing the risk of fire, and may also include a PREP. **PREP (Personal Rescue Emergency Plan)** - This term is born out of a PCFRA and is generally where a disabled person is in need of rescue by the Fire and Rescue Service when all other risk reduction measures have failed. For an outbreak of fire elsewhere other than the disabled person's flat the probability of implementing such a plan is greatly reduced. This is unlikely to arise unless there are building failures, such as loss of compartmentation. **Note -** "Although previous guidance noted that PEEPs is generally ineffective and not recommended in purpose-built blocks of flats that do not have permanent staff on site, PEEP implementation is currently being considered as part of the Grenfell Tower Inquiry: Phase 2 Report that has recently been published, which should be considered by building owners and managers."
7.5	The previous FRA noted that Tom Porter (Building Safety Officer for WCHG) had confirmed that where vulnerable persons are identified within the building (i.e. those persons whose details are provided within the SIB) these persons are offered person centred fire risk assessments (PCFRAs). Following the formulation of any PCFRAs, appropriate risk reduction measures should be implemented and these should be updated/reviewed on a suitable periodic basis.

7.10-7.11	Visitors to the resident's flats are not required to sign in; however access is controlled by the residents and visitors to the flats are the responsibility of the tenants. Fire routine notices are displayed appropriately in the premises. Access for contractors is formally controlled by WCHG with appropriate arrangements in place. All contractors should be provided with adequate Health and Safety instruction prior to arrival, where necessary. No signing in book is considered as required.
7.12	Restricted areas are secured by locked doors which are locked by WCHG staff or cleaners when not in use.

8.0 Means of Escape		
8.1	Do travel distances meet the criteria given in the relevant HM Government guide and recognised industry norms and guidelines? Are the travel distances from flat entrance doors to the nearest stairway or final exit(s) acceptable?	Yes
8.2	Is the smoke ventilation provision suitable for the escape travel distances and protection of escape staircases? OV, AOV, PV or mechanical systems? Are the systems subject to regular servicing and testing?	Yes
8.3	Are there a sufficient number of exits of suitable width from each area/room for the persons present?	Yes
8.4	Can you ordinarily expect the Fire Service to arrive in the event of a fire whilst the fire is in the room of origin?	Yes
8.5	Can you expect the premises to be evacuated within the standard times for the type of construction?	N/A
8.6	Are all escape routes available and accessible at all times?	Yes
8.7	Are all escape routes and stairways free from undesirable items? (E.g. portable heaters, cooking appliances, furniture, coat racks, vending/gaming machines, photocopiers, mirrors.	Yes
8.8	Do any inner rooms exist?	Yes
8.9	Are vision panels provided between the inner room & access room and is it adequate?	N/A
8.10	If the vision between the inner room and the access room is inadequate is smoke detection provided within the access room?	Yes
8.11	Are all emergency exits doors unlocked and available at all times when the premises are occupied?	Yes
8.12	Are all final exit doors checked (opened) on a regular basis? Are the outcomes recorded?	Yes
8.13	Is the door furniture provided appropriate for the purpose group of the premises i.e. public buildings, licensed premises etc.?	Yes
8.14	Are floor and stairway surfaces in good condition and free from slip and trip hazards?	Yes
8.15	Do all final exits lead to a place of safety?	Yes
8.16	Are external escape paths clear of obstructions?	Yes
Electronic Door Release Devices		
8.17	Are all escape doors free from electro-mechanical door locks devices?	Yes
8.18	Are all escape doors free from electro-magnetic door locks devices?	No
8.19	Where electronic/electrical door control devices are fitted do they meet the installation criteria given in BS 7273 Pt. 4 2015	Yes
8.20	Do entry control devices conform to the category of actuation for the purpose group that the particular premises/building currently operates within?	Yes
8.21	Is the emergency operation of the door lock stated by appropriate signage?	Yes
8.22	Have all persons in the assessment area received instructions on how the devices operate in the event of an emergency?	Yes

8.0 Means of Escape: Finding(s)	
Ref	**FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.

Ref	COMMENTARY
8.0	Access into the premises is controlled by the residents via an electronic door entry security system.
8.2	Smoke ventilation in the stairway is provided by three permanently open vents (POVs) on the half landing between the 11th and 12th floors. These vents together provide an area in excess of the 1m² required. In addition, the doorway from the stairway onto the uppermost open deck can be opened for additional ventilation if required. Although this is an unusual arrangement, it is considered acceptable by our assessor, after taking into account that the stairway is separated on each floor from the common lobby to the flats by an open deck and 2 x self-closing fire doors. It would be highly unlikely for any smoke from a flat fire that affects a common lobby, to be able to reach or enter the staircase, due to the layout. Additionally, the lift room accessed from the top of the stairs is separated by a fire door and a vertical ladder, giving access to a rooftop room, which again is ventilated directly to the outside. The final exit door at the base of the stairs also opens straight to the outside. 
8.2	The lobbies serving flats are provided with a permanently open vent on each floor, which would allow smoke from a fire to ventilate to fresh air and help keep conditions tenable within the lobbies. Additionally, the door leading to the stairs via the open deck could be opened to provide ventilation within the lift lobbies, allowing smoke to escape, as is the refuse cupboards. 
8.2	Air bricks and a louvred door were observed for ventilation purposes in the lift motor room. Photos reused from previous fire risk assessments.  
8.7	The staircase, landings and common lobbies were all free and clear of any combustible furniture or obstructions at the time of this fire risk assessment. The routes are regularly checked by the cleaners on behalf of WCHG.
8.8-8.10	The water pump room could be classed as an inner room, however, the caretaker's/cleaner's area is only small and the corridor from the tank room to the common area lobby is only short, the corridor is also protected by smoke detection (which WCHG had previously confirmed to be audible in this area) and the water tank room is seldom used. These arrangements were found to be satisfactory by our consultant.
8.12	The exit doors are used on a regular basis by the residents. Any problems would be reported to WCHG. The exit routes are also used regularly by the caretakers/cleaners and it is reasonable to assume that they would report any defects for repair.
8.12, 8.18	It has previously been confirmed that the electromagnetic door lock release mechanisms are checked weekly. They are also serviced/tested every six months by a competent contractor, with records held centrally by WCHG.
8.13	Thumb turn-type opening devices were observed as fitted to the internal side of the flat entrance doors accessed.
8.13	At the base of the staircase serving all upper floors, a push bar-type opening device is provided.

8.18-8.19	As part of WCHG's standard responses, they have confirmed that due to most FRAs raising a finding, WCHG had engaged with Tech Sol and confirmed that doors fail safe/open upon a fire alarm activation or loss of electricity, and that break glass points are installed as a back up should the push to exit button fail.
8.18-8.19	Where electromagnetically secured doors were observed as fitted on the premises (e.g. main entrance door/laundry corridor door), these were provided with suitable overrides on the escape side. 

9.0 The Confinement of Fire

9.1	Are all escape routes and compartments protected by fire resistant walls and doors where required?	No
9.2	Where required, are the compartment walls of top floor compartments extended through the roof void and suitably sealed at the roof?	Yes
9.3	Is there a procedure for monitoring and maintaining existing fire resisting construction and fire stopping, in particular, pre-contractual agreements prior to any alterations work on site?	Yes
9.4	Is there a procedure in place to regularly check the condition of fire resisting doors and doorsets?	Yes
9.5	Are all fire doors self-closing, kept locked shut where appropriate and in good condition?	No
9.6	Are all fire doors fitted with smoke seals and intumescing strips where required?	No
9.7	Is there reasonable limitation of linings to escape routes that might promote fire spread?	Yes
9.8	From a non-invasive inspection, is there potential for fire and smoke spread through routes such as doors, walls, vertical shafts, service ducts, service penetrations, venting systems, cavities, and voids?	Yes
9.9	Have there been any structural alterations within the past 12 months?	No
9.10	Were the requirements of the Building Regulations followed and a completion certificate issued?	N/A
9.11	Are all ducts fitted with effective fire dampers where required?	N/A
9.12	Are all fire exits underneath and within 1.8m horizontal or 9m vertically of any external escape stair, fire resisting and self-closing?	N/A
9.13	Is glazing within the above distances fire resisting and fixed shut?	N/A
9.14	Is there a procedure for all premises/areas to be checked at the end of a working period for potential fire hazards?	Yes
9.15	Are the premises free from risk posed by adjacent properties? (Uncontrolled fly tipping, overgrown vegetation or poor housekeeping)	Yes
9.16	Are there any other premises features or hazards that could affect fire development or spread?	Yes
9.17	Is there potential for fire and smoke spread into the premises from an external fire?	No
9.18	Does basic security against arson by outsiders appear reasonable?	Yes
	Automatic Hold Open Devices	
9.19	Are any fire doors fitted with automatic door release devices?	No
9.20	Are the devices fitted to any critical doors? e.g. onto stairs in a single staircase building	N/A
9.21	Is smoke detection provided within the area located near to the door release device? (Consider to L3 standard?)	N/A
9.22	Are all non-self-contained devices linked to the fire alarm system and released on actuation?	N/A
9.23	Are any self-contained, acoustically actuated door hold open devices fitted?	No
9.24	Are all devices tested regularly and the results recorded? (At least once a week)	N/A
9.25	Are all doors released at night or when the area is unoccupied?	N/A
9.26	Are all devices tested in accordance with the manufactures relevant standard to ensure satisfactory operation?	N/A
	External Wall Systems	
9.27	Has the risk of external fire spread been considered? Consider external cladding, wall systems, external render and balconies.	Yes
9.28	Has there been any previous examination of the building's external wall system or cladding? If yes provide details.	Yes
9.29	Has the information on the EWS or any changes to it, been sent to the Fire and Rescue Service?	Yes

9.0 The Confinement of Fire: Finding(s)

Ref	FINDINGS
	Observation
9.1, 9.5, 9.8	It was observed at the time of the fire risk assessment that the doors to the staircase on the 10th and 11th floor were unable to self close fully and unaided into the rebate. Where fire doors cannot self close fully and unaided into their rebate, this may allow for the spread of fire/products of combustion, placing persons at risk of harm.
	Recommended Actions
9.1, 9.5, 9.8	It is recommended that the fire doors be adjusted so that they are able to self close fully and unaided into their rebate.
	Observation
9.1, 9.8	Breaches in compartmentation were observed at the time of the fire risk assessment; • There was a breach observed above the bin chute on the 6th floor. • There was a breach leading from the bin chute room towards the communal area on the 6th floor. Where breaches of compartmentation are present, this may allow for the spread of fire/products of combustion, placing persons at risk of harm.  
	Recommended Actions
9.1, 9.8	It is recommended that these areas be fire-stopped to at least 60 minutes of fire resistance.
	Observation
9.6	It was observed that a letterbox seal may be hanging from the front of the entrance door to flat 28. Where fire door components are damaged they may allow for the spread of smoke and products of combustion, placing persons at risk of harm. 
	Recommended Actions
9.6	It is recommended that the flat letterbox be checked to ensure no damage to the seal, the seal should then be replaced or installed back into the letterbox if it is free from damage.
Ref	**RECOMMENDATIONS**
	None.

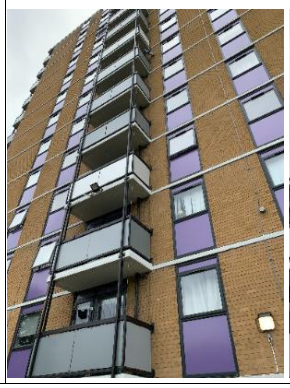
Ref	COMMENTARY
9.0	Although entrance halls within flats are not wholly protected, notional fire doors and Georgian Wire glazing are provided between the entrance hallway and the flat living room, which is an access room to the kitchen.
9.1	**As noted in the previous FRA** - It was noted that the heating pipe riser cupboards adjoining flat entrance lobbies on the upper floors had FD30s doors fitted which are kept locked, however also incorporate intumescent grilles. The latest guidance in the ASFP Guide to Inspecting Passive Fire Protection for Fire Risk Assessors identifies this type of vent as unsatisfactory on an escape route. However, in this instance the arrangement has been accepted as the heating pipe cupboards contain no source of ignition, the doors to the cupboards are kept locked and the cupboard is fire-stopped both vertically and horizontally (however, see the above finding). The same arrangement has been accepted in the cupboards adjoining the laundry corridor, however, in this instance there is the added benefit that a fire-resisting door and wall separates the laundry corridor from common escape routes used by the residents.   
9.1	**Retained for historical information** - As recommended in the previous fire risk assessment, the security door separating the laundry corridor from the ground floor main entrance/lift lobby has been replaced by a new, electronically secured FD30s self-closing fire door.
9.1-9.2	There is no roof void compartmentation to consider as the building has a flat roof as seen via Google Maps, and as advised.
9.1-9.3, 9.8	**Retained for historical information:** It has been highlighted in previous Fire Risk Assessments that compartmentation works have been carried out throughout the premises by Allied Protection Ltd (circa July 2017). They are an accredited passive fire protection contractor and they have provided WCHG with documentary/photographic evidence of their work. Following the installation of the common fire alarm system, further fire stopping was required. This was carried out by Flame Hold Ltd, another accredited passive fire protection contractor who has also provided WCHG with documentary/photographic evidence of their work. Additionally, it was noted during the course of this FRA that remedial fire stopping and compartmentation works have been carried out by Alpha Fire Solutions, accredited contractors (during April 2022) following the installation of the sprinklers and the new FD30 flat entrance doors. It is indicated by labelling that the extent of the fire stopping works incorporates spaces such as behind sprinkler trunking, however this was not confirmed due to this fire risk assessment being non-destructive. By viewing areas above false ceiling spaces in flat entrance lobbies, it could be confirmed that fire stopping had been carried out in these areas. **Note:** WCHG has implemented annual compartmentation inspections by an accredited passive fire protection contractor. **2024 update** - Apart from the issues raised in the above findings, from a sample check, extensive fire-stopping was observed throughout the premises.    

9.1, 9.5	It was observed that there was a void flat on the 10th floor. A metal door cover has been installed over the flats entrance door. 
9.1, 9.5	The previous fire risk assessment raised an action that the entrance door to flat 17 did not self-close into its rebate. WCHG have confirmed that this action was completed on the 15th of July 2024.
9.1, 9.5	The previous fire risk assessment raised an action in regard to deficiencies to fire doors and flat entrance doors. The following issues have since been rectified, and the work was completed on the 1st of August 2023. **Communal door issues include;** • Loose/damaged or missing intumescent fire and cold smoke seals (including the ground floor main electrical cupboard at one side of the door, the sprinkler tank pump room door, the 8th and 12th floor refuse chute door on the top of the door, and the 1st, 4th and 5th-floor communal lobby doors on the lower part of the doors. • Doors not fully closing into their rebates (including the 12th-floor staircase door). **Flat entrance door issues include;** • Flat 38's letter plate was found damaged.
9.1, 9.5-9.6	**Retained for historical information:** WCHG had completed the programme of fire door replacement in this building, which has been ongoing during the course of previous fire risk assessments. Although some deficiencies relating to individual doors have been noted (see relevant significant findings) doors appeared to be of the same standard from a visual external inspection. From the sample accessed on this assessment, the doors were observed to be FD30s and fitted with combined intumescent fire and cold smoke seals, and self-closing devices. The doors had spring-loaded metal letterboxes fitted approximately midway down their length.   
9.1, 9.5-9.6, 9.8	Article 8 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to take general fire precautions to ensure the safety of relevant persons. This includes measures to reduce the risk of fire on the premises and the risk of the spread of fire on the premises.
9.1, 9.8	The previous fire risk assessment raised an action that there were a number of penetrations in the compartmentation that did not appear to be adequately protected to maintain the fire resistance of the compartment floors/walls. Below are past areas of concern that have now been rectified. All repairs were completed by HG Maintenance. • The area above the hallway/false ceiling that separates the ground floor communal lift lobby and laundry. • Missing or damaged fire stopping appeared to be present above a few flats from the communal area from a sample view above the false ceilings. There may be more areas as these areas were only sampled in a few locations. Areas noted for example were above flats 62 and 56. • Previous raised - There is a breach above the electrical riser cupboard within the entrance foyer, where cables pass through above the false ceiling into the main entrance lobby, which some resident flats adjoin (still outstanding on this visit). • No access was gained into the small under-stairs cupboard to check the compartmentation.

9.1, 9.8	Although there were still some breaches in compartmentation between: • The laundry corridor and rooms adjoining. • The caretaker's/cleaner's corridor and rooms adjoining. these have not been raised in the significant findings of the report as suitable fire resisting construction including walls and fire doors are provided between these areas and the common escape routes such as the ground floor lift lobby. These areas are not classified as 'areas of special fire hazard' as defined in Approved Document B Volume 1: 2019 Edition with 2020 and 2022 amendments.
9.4	As confirmed on WCHG's standard responses: • All front entrance fire doors regardless of height that go into common areas are inspected annually during the annual gas/safety checks. Fire Doors to Individual residential premises are inspected annually and recorded on a PDA, any defects are logged and reported to be rectified. • Common Fire Doors to High Rise Blocks above 11mt are inspected quarterly by a third-party trained consultant and any defects are recorded and repairs raised to rectify. • All high-rise doors are visually inspected by the Building Safety Officer on weekly visits to the blocks. Individuals who inspect Fire Doors have undertaken training facilitated by Ventro or Fire Door UK. **Note** Regulation 10 of the Fire Safety (England) Regulations 2022 gives further advice on additional information about fire doors to be given to residents. https://www.gov.uk/government/publications/fire-safety-england-regulations-2022/fact-sheet-fire-doors-regulation-10
9.6	The refuse doors on each floor have large gaps at the foot of the doors. These doors are in place for smoke control to prevent smoke from affecting the balcony egress to the staircase should a fire occur in the bin chute areas. The refuse chute rooms have an open balcony which allows smoke to escape before it reaches the bottom of the doors, and the end of the refuse chute is protected by a fire shutter plate. With this in mind and the opinion of our assessor, the gaps at the foot of the doors are considered low risk. However, should future upgrades take place, the gaps at the foot of the doors should be reduced to a tolerable level. 
9.8	**Compartmentation:** For Information; Where the level of fire stopping or fire resisting construction is found to be below an acceptable standard remedial fire stopping work should be carried out. Breaches in fire resisting construction should be filled with suitable fire resisting materials to maintain the standard of fire resistance of the surrounding structure in accordance with BS 476 Pt 22 or BS EN 1364 Pt 1 to 6. The use of third party accredited passive fire protection contractors and products should ensure any remedial actions will be to the required standard in the most cost effective manner. The Responsible Person ought to have in place a system for ensuring that the integrity of any passive fire protection measures is not compromised when building alterations are carried out e.g. for the installation of new pipes, cables and other services. Records of these should be maintained for future inspection by auditors and enforcement agencies. One common available fire stopping product is expanding fire resisting foam. To avoid unnecessary costs, the universal use of expanding fire resisting foam products should be used with caution and in strict accordance with the manufacturer's recommendations to achieve the required fire resistance. **Generally, expanding foam products are tested as narrow linear gap seals and will not work in a large penetration seal.** The Guide to Inspecting Passive Fire Protection for Fire Risk Assessors produced by The Association for Specialist Fire Protection advises that PU expanding fire resisting foam products should only be used to seal linear gaps between walls and walls / floors / ceilings. It cannot be used to seal pipe or cable penetrations unless tested for that end-use application. In this case, other more appropriate fire stopping products should be used. It is recommended where rectifying life safety compartmentation issues that third party accredited contractors, who have been accredited to undertake the particular aspect of works, using appropriate third party accredited products is considered. **Note:** **Compartmentation** - Compartment walls and floors should form a complete barrier to fire between compartments they separate and have the appropriate fire resistance. **Fire Stopping** - If compartmentation is to be effective, every joint or imperfection of fit, or opening to allow services to pass through the compartment, should be adequately protected to the same standard of fire resistance by sealing or fire stopping so that the fire resistance of the compartment is not impaired.

9.8	The previous first risk assessment raised an action that the heating pipe riser cupboards on each floor appear to have pipe penetrations that run over into the communal area at a high level and are not fire-stopped from within the cupboard. The intumescent grilles have been accepted on the doors on the basis that heating pipe cupboards contain no source of ignition, the doors to the cupboards are kept locked **and the cupboard is fire-stopped both vertically and horizontally**. However, fire-stopping has not been undertaken. At the time of the fire risk assessment it was observed that these areas have now been fire stopped. WCHG have confirmed that all repairs were completed by HG Maintenance.
9.11	The previous FRA raised an action in relation to the bathroom extractor in flat 54 not appearing to be the same as the others observed on the premises, which appeared to the be intumescent infill type detailed in commentary 9.11. Although no access was gained into the flat to check, the previous FRA action has been signed off as complete on 19/11/2023 by Mike Holt. Evidence was also attached showing an intumescent infill type installed for the flat.
9.11	Extraction is present from the laundry directly to the outside.
9.11	**Retained for historical information, however, see the above finding:** WCHG have previously confirmed that Allied Protection Ltd has completed fire stopping and compartmentation works to prevent fire spread via the common bathroom extraction vents/shafts. They have also fitted fire-rated valves with an intumescent infill in the bathrooms, which are connected to the ducting and shaft. Although these valves will not prevent smoke spread into the shaft in the early stages of a fire, they are an acceptable method of preventing fire spread. This is in line with current guidance within the document Fire Safety In Purpose Built Blocks Of Flats. Documentary evidence of works is kept by WCHG but was not seen by our assessor during the course of this fire risk assessment.
9.11	**Kitchen Extraction:** It was noted that the kitchen ventilation in the flats seen is extracted directly to the outside via a powered fan installed within the kitchen wall of the flat which was not common to any other flats. It is assumed that all the flats in the block have similar provisions installed in the kitchen.
9.11	The previous FRA raised an action in relation to the bathroom extractor in flat 36 not appearing to be the same as the others observed on the premises, which appeared to be intumescent infill type detailed in commentary 9.11. Although no access was gained into the flats to check, WCHG have confirmed that a fire passive extract vent has been fitted. Certification information: Certifire CF 564 364912 250W X 250 H.
9.11	The previous fire risk assessment raised an action that the vent in the bathroom to flats 17, 23 and 25 did not appear to be connected to any form of ducting within the shaft. From a visual observation through the vent, it appears that the vents are positioned below the shaft ducting (as seen in the pictures, a board is covering the old vent and ducting route). As the new vents do not appear to be connected to ducting rising through the shaft, it is not clear if smoke would be extracted. This is assumed to be the same in all other flats as from a sample of flats accessed, the vents appeared to be in the same position. WCHG have confirmed that the ventilation system is operated from the roof where the equipment is located and vents through a central shaft. Below is a list of remedial works that were quoted and carried out; • Supply and fit fireproof board to line the ducting and fill gaps with intumescent mastic (price per linear meter up to 0.5M width). • Fill any large penetration hole up to 0.25 square meters with ablative coated batt and seal the edges with intumescent mastic in the bathroom ducting on the Floor and ceiling. • Supply and fit an intumescent vent into the batt work which will allow free flow air in between the compartmentation. • Supply and fit an intumescent vent into the ducting, including stainless steel covers. WCHG have confirmed that the work was undertaken by Allied Protection, FIRAS Contractor.
9.12-9.13	The 'main entrance' final exit from the lift lobby and the exit at the base of the staircase serving all floors discharge within 1.8m of each other and the surrounding glazing does not appear to be fire-resisting. Although this does not meet the requirements of current guidance, this has been accepted on the basis that robust control measures are in place to ensure these areas remain sterile at all times, therefore the probability of a fire beginning in either of these areas is negligible. 
9.16	**Balconies:** It has previously been confirmed by WCHG that they have a zero-tolerance policy with regard to balconies and their contents. It is understood that residents have been informed that storage of combustibles is not allowed on the balconies and that ignition sources such as heaters and barbecues are prohibited.

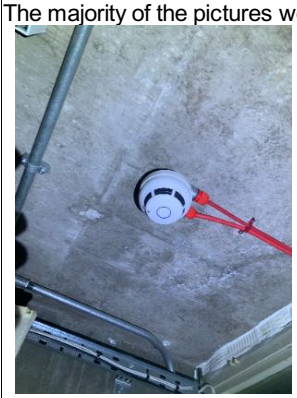
9.16	**Lithium Batteries - Electric scooters, bikes, and mobility scooters.** With the increased use of e-bikes and e-scooters, comes a corresponding fire safety concern associated with their charging and storage. The use of these products is expected to continue to rise. Some fire services and fire investigators have seen a rise in e-bike and e-scooter battery fires. On occasions batteries can fail catastrophically, they can 'explode' and/or lead to a rapidly developing fire. **Precautions when charging:** • Follow the manufacturer's instructions when charging and always unplug your charger when it's finished charging. • Ensure you have working smoke alarms. If you charge or store your e-bike or e-scooter in a garage or kitchen ensure you install detection, heat alarms rather than smoke detectors for these areas is recommended. • Charge batteries whilst you are awake and alert so if a fire should occur you can respond quickly. Don't leave batteries to charge while you are asleep or away from home. • Always use the manufacturer-approved charger for the product, and if you spot any signs of wear and tear or damage buy an official replacement charger for your product from a reputable seller. • Do not cover chargers or battery packs when charging as this could lead to overheating or even a fire. • Do not charge batteries or store your e-bike or e-scooter near combustible or flammable materials. • Do not overcharge your battery – check the manufacturer's instructions for charge times. • Do not overload socket outlets or use inappropriate extension leads (use un-coiled extensions and ensure the lead is suitably rated for what you are plugging into it). • In the event of an e-bike, e-scooter, or lithium-ion battery fire – do not attempt to extinguish the fire. Get out, stay out, and call 999. **Precautions with storage:** • Avoid storing or charging e-bikes and e-scooters on escape routes or in communal areas of a multi-occupied building. If there's a fire, it can affect people's ability to escape. • Responsible Persons should consider the risks posed by e-bikes and e-scooters when they are charged or left in common areas such as means of escape, bike stores and mobility scooter charging rooms. They may wish to offer advice to residents on the safe use, storage, and charging of these products. • Store e-bikes and e-scooters and their batteries in a cool place. Avoid storing them in excessively hot or cold areas. • Follow the manufacturer's instructions for the storage and maintenance of lithium-ion batteries if they are not going to be used for extended periods of time. The batteries work by moving lithium particles between a negative and positive electrode to charge and discharge. To allow those particles to move easily, they're suspended in pressurized cells inside the batteries filled with volatile and flammable chemicals. The movement of the particles causes heat as the battery is charged and discharged. If the battery was badly designed or improperly used or installed, that heat can ignite the chemicals, causing flames or explosions. Damage to the thin walls that keep the different parts of the battery separate can also lead to short circuits and a corresponding heat build-up.
9.16	The previous fire risk assessment raised an action that within flat 23, an E-bike/scooter was found on charge within the hallway to the flat. WCHG have confirmed that the tenant has been spoken to and asked to refrain from charging the E-bike/scooter within the hallway of their flat.
9.16, 9.18	The refuse chute is protected within the bin room by means of a spring-loaded gate, connected to a fusible link. The metal gate slides across the base of the refuse chute to provide fire separation if the temperature from a fire in a bin causes the link to melt. The operation of the spring-loaded gate is checked and serviced six monthly by a contractor and is serviced annually. The chute access rooms and bin hoppers in each open balcony are also checked regularly and are protected by self-closing metal hopper doors with rubber seals.
9.18	Recycling bins are stored externally, a suitable distance away from the building's perimeter.
9.18	CCTV equipment was observed in the common areas, with the associated equipment located in the main electrical intake cupboard.

9.27-9.29	A past FRA raised an action in relation to ensuring that the installations of cladding replacements are carried out in line with the manufacturer's instructions, with all relevant certification and documentation held on file, and where necessary, this information should be relayed to the Fire and Rescue Service. The previous FRA action was signed off as complete on 19/03/2024 with evidence attached to the action to show, Operations and Maintenance information, a typical balcony panel arrangements, a powder coat fire test certificate (although in another language - French), a powder coat data sheet, and a Warrington fire classification of reaction to fire performance report dated 29/09/2022 for Proteus Facades. Also provided to our assessor, was an HRB information spreadsheet that detailed the panels to the glazing system and panels to the balcony HPL had been replaced with A2-rated panels. This spreadsheet also noted that external wall information was sent to GMFRS on 06/06/2024. **Retained for historical information:** At the time of the previous fire risk assessment, concerns had been raised regarding the composition of the materials forming the resident balcony panels and the spandrel panels between resident flat windows on each floor. Since this has been raised, WCHG has confirmed that works have been commissioned for both the balcony panels and the spandrel panels to be replaced. At the time of this assessment, the work had not begun, however, scaffolding was being erected around the building so that the work could commence. WCHG have provided our assessor with information and relevant certification showing that the materials are to be replaced with the following: **Window spandrels** - To be replaced with 'Proteus SP' material produced by 'Proteus Facades'. This is a polyester powder-coated steel/ceramic powder-coated aluminium/glass-faced spandrel panel with a Rockwool insulated core structurally bonded to a lightweight metal rear skin to be used within a curtain wall system. Warrington Fire Testing and Certification Limited have classified the material in relation to their reaction to fire behaviour as A2, S1, d0. **Balcony panel** - This is being replaced with '3mm aluminium panels coated on both sides'. Work to identify the unsuitability of the panels and spandrels was detailed in a report carried out by Tenos fire engineers for a similar building and this information has also been applied to this site.  

10.0 Automatic Fire Detection

10.1	Where a fire alarm system is required has one been provided?	Yes
10.2	Is there suitable provision of automatic detection within the flats?	Yes
10.3	Is there a procedure in place to ensure fire detection within residents' flats are routinely checked, to ensure they have not been tampered with?	Yes
10.4	Is it possible to define the detection system category? (L1- L5 etc.)	Yes
10.5	Is the automatic fire detection suitable for the risk and premises type?	Yes
10.6	Does the system conform to standards appropriate to the purpose group for the premises/building use? i.e. BS 5839 Pt. 1 or BS 5839 Pt. 6 etc.	Yes
10.7	Are sufficient call points and detectors provided?	Yes
10.8	Can the alarm be raised without placing anyone at risk?	Yes
10.9	Are all call points visible, unobstructed?	Yes
10.10	Are all fire alarm sounders of the same type, giving the same alarm signal? The signal should be distinct from all other alarms or signals in the workplace to avoid confusion.	Yes
10.11	Where required does the system have a voice alarm? i.e. large places of assembly	N/A
10.12	Can the alarm be heard throughout all areas of the premises?	No
10.13	Has a suitable fire zone plan been provided adjacent to the fire panel where necessary? i.e. complex premises or care homes	Yes
10.14	Is the fire alarm system under a regular maintenance programme by a qualified fire alarm engineer?	Yes
10.15	Are there systems in place to ensure the system is tested weekly from a different call point?	Yes
10.16	Are all fire alarm tests, faults and maintenance schedules recorded?	Yes

10.0 Automatic Fire Detection: Finding(s)

Ref	FINDINGS
	None.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
10.1-10.6, 10.8, 10.10	A common BS5839-1 fire alarm system is installed which incorporates the provision of automatic detection to L2 standard. The system also extends into flats in the form of a heat detector in flat entrance hallways. It is understood that the fire alarm system has been configured to be silent (in the main) and is monitored. It is also understood that the system has also been configured to act as a form of Evacuation Alert System (EAS), whereby it can be used by the Fire and Rescue Service to sound on a chosen floor and the floors above and below the chosen floor. WCHG had previously confirmed that the common fire alarm is audible in service/plant areas and on the roof, where contractors may be present and where immediate evacuation would be considered prudent. The fire alarm panel was free from faults at the time of the fire risk assessment. The majority of the pictures were reused due to no changes:    
10.2-10.3	Adjudging by the provisions within those flats sampled at the time of the assessment, BS5839-6 Grade D LD1 fire alarm systems are installed in all rooms except bathrooms and cupboards, along with heat detection to the communal system in the flat hallways. As part of WCHG's standard responses, all alarms within flats are checked and the findings are recorded as part of the annual gas servicing. Due to the above process and physically seeing detection in flats accessed, it is reasonable to assume that this is representative of the remainder of the flats.
10.9	The previous fire risk assessment recommended that the call points at the base of the staircase be removed. At the time of the fire risk assessment it was observed that the call points had been removed, WCHG have also confirmed that this job was completed on the 9th of September 2024.
10.13	A suitable alarm zone plan is provided adjacent to the alarm control panel in the entrance foyer. See appendix. 
10.14-10.16	As part of their standard responses, WCHG ensures that the fire alarm/emergency alert systems are tested weekly, with tests, faults, and maintenance schedules recorded. Also confirmed in their standard responses is that the maintenance of such systems is carried out regularly by an approved contractor. Records were not observed at the time of the fire risk assessment.

11.0 Emergency Escape Lighting		
11.1	Has the provision of emergency lighting been considered? Working hours, windowless areas, open access areas>60m2, toilets>8m2.	Yes
11.2	Is emergency lighting provided in accordance with guidance relevant to the purpose group for the premises? (BS5266, ADB)	Yes
11.3	Does it illuminate escape routes, exits, corridors, hazards or obstructions, changes in floor level, signs, fire alarm call points and firefighting equipment?	Yes
11.4	Is the emergency lighting beyond the final exit adequate so that persons can reach a place of safety?	Yes
11.5	Are routine checks carried out in accordance with the appropriate standard to which the system conforms – i.e. daily, monthly, 6 monthly and annual checks?	Yes
11.6	Are records of maintenance kept?	Yes
11.7	Is normal lighting adequate and in working order?	Yes

11.0 Emergency Escape Lighting: Finding(s)	
Ref	**FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
11.1-11.3	Emergency lighting is installed on the common escape routes and stairway and appears to be in good working order. It was also seen to be installed within the roof service areas and lift motor rooms. It was not possible to ascertain the exact level of illumination, but the coverage appeared to be satisfactory.
11.4	There is an emergency light outside of the main exit door and there is sufficient borrowed light beyond the final exit to enable persons escaping in a fire emergency to reach a place of safety.
11.5-11.6	As part of their standard responses, WCHG ensures routine checks are carried out for emergency lighting in accordance with the appropriate standards to which the system conforms. Records were not observed at the time of the fire risk assessment.

12.0 Fire Fighting Equipment, Facilities, Systems & Fixed Installations		
Firefighting Equipment		
12.1	Where appropriate are adequate numbers of fire extinguishers provided? Consider floor area, special risks, minimum travel distance of 30m.	Yes
12.2	Are the correct types of extinguishers provided for the risks?	Yes
12.3	Are all extinguishers installed and sited in accordance with current guidance?	Yes
12.4	Are appropriate checks carried out on a monthly basis?	Yes
12.5	Are all extinguishers serviced by a qualified engineer every 12 months?	Yes
Firefighting and Firefighter Facilities		
12.6	Are firefighting and firefighter facilities provided, tested and maintained? (Dry/wet rising mains, SIB's, wayfinding signage)	Yes
12.7	Are all systems fully operational and functional?	Yes
12.8	Are all security devices functional? (Sprinkler valves, wet & dry rising mains padlocked etc.)	No
12.9	Where sprinklers are fitted are all heads clear of obstructions (500mm clear of stock) and functional?	Yes
12.10	Where firefighting shafts or fire mains are provided are the locations of the inlets/outlets in line with current guidance?	Yes
Firefighting Lifts		
12.11	Are lifts provided for the use of firefighters or evacuation?	Yes
12.12	Are all lift controls functional, tested and maintained?	Yes
12.13	Are any defects to the lift(s) reported to the Fire and Rescue Service? (defects that would affect or impact firefighting operations)	Yes
Facilities and Systems		
12.14	Is there an Emergency Alert System (EAS) for use by the Fire and Rescue Service? If the EAS is not in accordance with BS8629 can it be adapted to provide an EAS on the floor of fire origin, selected floors, or full evacuation? Please provide details.	Yes
12.15	Have up to date floor and building plans been provided to the Fire Service in electronic format, detailing key building information, location of firefighting facilities and equipment?	Yes
12.16	Where appropriate, has a Secure Information Box (SIB) been provided with up to date info, and access keys? Is it in a suitable secure location for access by the Fire Service?	Yes

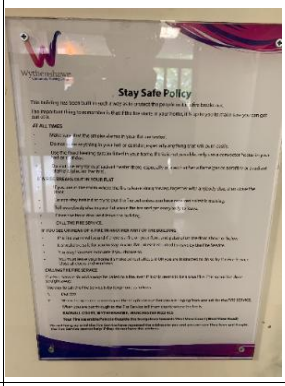
12.0 Fire Fighting Equipment, Facilities, Systems & Fixed Installations: Finding(s)	
Ref	**FINDINGS**
	Observation
12.8	It was observed at the time of the fire risk assessment that the glazing to the sprinkler shut-off valves on the 2nd and 7th floors were missing. Where pivotal parts of the sprinkler system are left unsecured, this may allow for tampering and damage to occur, in turn placing persons at risk of harm in the event the system needs to be used. 
	Recommended Actions
12.8	Glazing should be fitted to the doors of the valves to secure them.
Ref	**RECOMMENDATIONS**
	None.

Ref	COMMENTARY
12.1	There are no fire extinguishers within the common/communal escape route areas except from high-risk plant rooms. It is not normally considered necessary to provide fire extinguishers or hose reels in the common parts of blocks of flats. Such equipment should only be used by those trained in its use. It is not considered appropriate or practicable for residents in a block of flats to receive such training. In addition, if a fire occurs in a flat, the provision of fire extinguishing appliances in the common parts might encourage the occupants of the flat to enter the common parts to obtain an appliance and return to their flat to fight the fire. Such a procedure is inappropriate.
12.4-12.5	The most recent service date was September 2024 carried out by Billy Wilkinson. It is expected that caretakers will carry out monthly visual checks, although records were not observed.
12.6	Although not specific to the property, the assessor noted that there is a fire hydrant location around 6 metres away from the building. 
12.6-12.8, 12.10	A dry-rising main is installed for use by the Fire and Rescue Service. The dry-rising main outlets are located in the lobbies on each floor that contain the flat entrances and the lifts and are behind locked doors. The inlet is located adjacent to the main entrance, on the external facade. The dry-rising main is visually inspected monthly and is also serviced annually.
12.6-12.10, 12.14-12.16	As part of their standard responses, WCHG advised that where firefighting and firefighter facilities are provided (such as dry/wet rising mains, sprinklers, secure information boxes, wayfinding signage and emergency alert systems), these are tested and maintained.
12.8	Article 17 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to provide a suitable system of maintenance for any facilities, equipment and devices so that they are maintained in good working order.
12.8-12.10	A BS9251 sprinkler system has been installed. In each flat, there are concealed sprinkler heads located in the hallway, each bedroom, the living room, any enclosed balcony and the kitchen (essentially all rooms except the bathroom). In addition, there are also sprinkler heads located in the ground floor plant areas and the laundry. There are control valves on each floor located in a secure cupboard in each lift/flat lobby. A pump and water tank (Approximately 8000 litres) for the sprinkler system have been provided. The sprinkler panel is located by the fire alarm panel in the main entrance lift lobby and was displaying no faults at the time of the assessment. 

12.11-12.13	One of the lifts on the premises appears to be a standard passenger lift, whereas the other appears to be a firefighting lift. The firefighting lift has a switch to return the lift to the ground floor level and also an intercom for communications. Within the lift was a hatch in the ceiling. It was previously confirmed that the lift defaults to the ground floor on activation of the common fire alarm system and that the switch to manually return the lift to the ground floor is tested monthly in line with the Fire Safety (England) Regulations 2022. Records to evidence such testing are held centrally by WCHG and not viewed. It was previously communicated that all keys required for the operation of the lift have been provided to the Fire and Rescue Service and are also held in the SIB. It was also previously communicated that the firefighting lift can continue to be used by firefighters without having to reset the alarm if sounding audible. Also advised as part of WCHG's standard responses is that all lift controls are tested and maintained and that there is a policy in place to report any defects of the lift to the Fire and Rescue Service via their Building Safety Management System.  
12.14	Although the common fire alarm system is not a purpose-designed Evacuation Alert System (EAS), the previous assessor was informed that it had been re-configured so that the Fire and Rescue Service could sound the fire alarm system on a chosen fire floor and the floors above and below the chosen floors, initiating evacuation.
12.15-12.16	As part of their standard responses, WCHG maintains Secure Information Boxes (SIB). The Secure Information Box (SIB) is located by the main entrance to the building, in the lift lobby. Access was available to the SIB, except for the vulnerable residents list due to confidentiality. It is reasonable to assume the fire service carries a key to gain access to the box. It must be noted that the responsibility for providing and updating the information with regard to any vulnerable tenants remains with WCHG. An HRB information spreadsheet was provided to our assessor which noted that floor plans have been provided to GMFRS on 18/04/2024. **WCHG should ensure that the information stored in the SIB is correct in line with current guidance, kept up-to-date, and regularly reviewed.** 

13.0 Fire Safety Signs and Notices		
13.1	Do signs indicate all final exits?	Yes
13.2	Can the final exit or a directional sign be identified from any position in the assessment area?	Yes
13.3	Are all signs in the correct position, suitably fixed and directional arrows correct? (Can the way out be found just by using signs alone?)	Yes
13.4	Are the signs the correct size for the areas where they are located?	Yes
13.5	In places of public assembly are all escape signs illuminated on maintained luminaires?	N/A
13.6	Are fire action notices displayed prominently and completed fully throughout the premises?	Yes
13.7	Are all fire action notices similar throughout the premises?	N/A
13.8	Does the content of the fire action notices reflect the actual procedure?	Yes
13.9	Where firefighting equipment or fire alarm call points are not clearly visible is their location highlighted by supporting signage?	Yes
13.10	Are all fire doors signed appropriate to their use i.e. Fire Door Keep Locked Shut, Fire Exit Keep Clear etc.?	No
13.11	Where required, are external fire assembly points signs prominently displayed?	N/A
13.12	Are “No Smoking” signs and procedures in place to ensure there is no smoking in work or public places? (The Smoke Free (Premises and Enforcement) Regulations 2006)	Yes
13.13	Are all signs legible and in good condition?	Yes
13.14	Do all signs comply with the EN 7010:2011 where necessary?	Yes
13.15	Has wayfinding signage been provided to clearly indicate floor levels, flat numbers from within the staircase(s) and each floor level?	Yes
13.16	Is the signage in line with the ADB revisions 2020?	Yes

13.0 Fire Safety Signs and Notices: Finding(s)

Ref	FINDINGS
	Observation
13.10	At the time of the fire risk assessment, it was observed that there was no 'DO NOT USE LIFT IN EVENT OF A FIRE' signage on the 7th floor. Where this signage is missing, persons may use the lift in the event of a fire and become trapped if there is power failure, placing them at risk of harm. 
	Recommended Actions
13.10	It is recommended that 'DO NOT USE LIFT IN EVENT OF A FIRE' signage is displayed outside the lift on the 7th floor.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
13.0	Suitable 'Do Not Use in the Event of a Fire' signage was observed by the lifts. See finding 13.10.
13.1-13.4	Some standard directional and fire exit signage was observed on the common escape route.
13.6-13.8	A suitable 'stay safe' fire action notice was provided in the common area by the main entrance. This captures the 'stay-put' essence of the fire strategy whilst incorporating instructions should residents hear the BS8629 Evacuation Alert System sound. 
13.10	Article 14 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person where necessary to ensure the escape routes are provided with adequate signage.
13.11	The premises is operating on a Stay Put policy, but if evacuation is necessary, an appropriate assembly point would initially be designated as outside the main car park.
13.12	'No Smoking' signage was observed on the premises, in the common areas.
13.15-13.16	Wayfinding signage that has the floor number and directional signage to the flats, including flat numbers, is displayed in the lift lobbies and on the stairway landings. They appear to be mounted at the recommended height as per ABD and are all visible and in good condition. Supplementary signage is also present, with signage outside the lift areas to show which flats are on each floor and which floors the two lifts access.   

14.0 General Fire Safety Procedures		
14.1	Has the premises been free from reports of any fire related incidents within the past 12 months?	Yes
14.2	Has action been taken to avoid reoccurrence?	N/A
14.3	Has the premises been free of any fire alarm actuations within the past 12 months?	Yes
14.4	Where necessary has any action been taken to prevent reoccurrence?	N/A
14.5	Have there been any incidents of deliberate ignition by employees or arson attacks?	No
14.6	Are procedures in place to inform relevant persons of the need to report any potential fire hazards?	Yes
14.7	Is there a fire policy for the premises/organisation that clearly defines the roles and responsibilities of who will contribute to overall fire safety management?	Yes
14.8	Has the fire service inspected or had any formal meetings, familiarisation visits, operational crew/CFS visits within the last 12 months?	Not Known
14.9	Were any recommendations, enforcement or prohibition notices served?	N/A
14.10	Have all recommendations and notices been complied with?	N/A
14.11	Is adequate access provided for fire service vehicles in the event of an emergency?	Yes

14.0 General Fire Safety Procedures: Finding(s)	
Ref	**FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
14.1-14.5	Since the last fire risk assessment was undertaken there have been no reports of fire that our consultant was made aware of and there was no evidence of any fires having occurred. Any reports of fire or false alarms should be fully investigated and where necessary control measures implemented to reduce the possibility of further occurrences. Following any outbreak of fire affecting the common areas, the Fire Risk Assessment should be reviewed to identify if any further risk reduction measures are necessary.
14.6-14.7	As part of WCHG's standard response, they have a Fire Safety Policy/procedure in place.
14.7	The Chief Executive for Wythenshawe Community Housing Group has the overall responsibility for fire safety-related matters and management.
14.8	It was previously stated that the local fire service makes occasional visits to the property for the purpose of information gathering (72d inspections) and training, but it was not thought that the Fire Service have visited recently, other than to respond to false alarms or where they may have carried out some fire safety checks etc.
14.8	Our assessor was not made aware there were any outstanding notices of deficiencies/enforcement action from the enforcing authority. The significant findings of this Fire Risk Assessment should form the basis of an action plan and be implemented within the recommended timescales. The significant issues identified may become enforceable if not actioned in a reasonable period of time.
14.11	The previous FRA noted that the Fire Service had been provided with access fobs for all WCHG high-rise blocks.
14.11	Signage indicating certain provisions of the building is displayed externally, which may be used to assist attending Fire and Rescue Service personnel. 

15.0 Fire Safety Management		
15.1	Are there an adequate number of appointed competent persons and arrangements (under Article 18 of the RRFSO) in place to assist the responsible person in the management and implementation of the preventative and protective measures? (safety assistance)	Yes
15.2	Has an Accountable Person been appointed? Where there is more than one accountable person, are there procedures in place ensuring that all accountable persons co-operate with each other?	Yes
15.3	Have all staff been trained in how to call the Fire Service, use of fire extinguishers, evacuation procedures and basic fire awareness?	Yes
15.4	Do all new employees receive basic fire procedure and induction training on the date of appointment?	Yes
15.5	Are records of fire safety training kept?	Yes
15.6	Are systems and procedures in place to control any new work, alterations or repairs to the premises, so that no fire hazards are introduced?	Yes
15.7	Is a “permit” to work procedure in place for contractors etc.?	Yes
15.8	Where an alterations notice is in force has the enforcing authority been informed prior to any significant changes being made?	N/A
Fire Marshals & Fire Plans		
15.9	Are fire marshals required to take charge of a fire incident and liaise with the Fire Service where required?	N/A
15.10	Is there a list of fire marshals displayed in all locations where required?	N/A
15.11	Are systems in place to provide identification for fire marshals during an emergency where required?	N/A
15.12	Has a suitable fire assembly point been designated? (i.e. free from traffic hazards, radiated heat and free movement away from the premises)	N/A
15.13	Do the premises require a written fire emergency plan detailing the roles and responsibilities in order to safely evacuate?	N/A
15.14	Where required, is the fire emergency plan displayed on the premises?	N/A
15.15	Are there procedures for calling out key staff during fire related emergencies outside of normal working hours?	Yes

15.0 Fire Safety Management: Finding(s)	
Ref	**FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
15.1	WCHG employs competent and approved persons to carry out servicing and maintenance of all its preventative and protective fire safety measures.
15.1-15.2	WCHG use third party consultants with the necessary qualifications and competence or via fire mitigation frameworks to ensure preventative and protective measures are undertaken.
15.3-15.5	There are no permanent staff based in the block. However, as part of WCHG's standard responses, they have confirmed that all staff have undertaken fire safety awareness courses and are aware of the evacuation procedures for the in-scope buildings. The ARC will call the fire service in an activation. The monitoring company rings Assure24 and Assure24 rings the fire brigade.
15.6-15.7	As part of their standard responses, WCHG has confirmed that systems and procedures are in place to control any new work, alterations, or repairs to the premises, so that no fire hazards are introduced. This is currently undertaken by the Asset and Investment department which appoints appropriately qualified consultants as required. Also, permit-to-work procedures are in place for contractors. Should the Responsible Person appoint their own contractors for any building works, it is advised that they confirm their competence to undertake the proposed works. To ensure appropriate competencies and quality of work it is advised that the contractor has suitable Third-Party Accreditation. Their impact on the building should be closely monitored with regard to (amongst others), damage to party walls, the introduction of sources of ignition and combustible materials, the blocking of exit routes, or fire doors being wedged open. If hot work is to be undertaken, ensure the contractor has appropriate risk assessments, method statements, and fire extinguishers in place before commencing the work. Carry out an inspection of the work area at least 30 minutes after the works have finished, to check for any hot spots.
15.9	There are no staff normally on site outside of usual office hours that would take charge of an incident or act as a fire marshal. Fire marshals are not required within blocks of flats or apartments.
15.13	The provision of a suitable action notice as detailed in commentary 13.6, 13.8 is considered sufficient with regard to the provision of the evacuation information to the residents.
15.13-15.14	It is understood that WCHG sends out fire safety leaflets periodically, which detail the evacuation strategy (stay safe) for the building.
15.15	The WCHG senior manager on call will be notified. If the incident is very serious, the business continuity plan would be invoked, which has the personal phone numbers of senior staff.

16.0 Fire Evacuation Plan		
16.1	Is there a current, suitable fire evacuation procedure for all residents (and occupants) to follow in the event of a fire, and has this been communicated to all residents?	Yes
16.2	If the premises operates a "stay put" policy, is this suitable?	Yes
16.3	In multi-occupied buildings do all the fire evacuation procedures complement each other?	N/A

16.0 Fire Evacuation Plan: Finding(s)	
Ref	**FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
16.1-16.2	If necessary, residents can be evacuated floor by floor using the control and evacuation equipment (EACIE), but this is only to be operated by the fire and rescue service.
16.2	The Fire Safety Order requires that there should be a suitable emergency action plan for the premises. The Fire Safety (England) Regs 2022, also requires the Responsible Person to display and communicate the fire actions to all residents. Fire safety instructions must be provided in a conspicuous part of the building. The instructions must be in a comprehensible form that residents can reasonably be expected to understand and should cover the following: • The evacuation strategy for the building (e.g. stay put or simultaneous evacuation); • Instructions on how to report a fire (e.g. use of 999 or 112, the correct address to give to the fire and rescue service, etc.); • Any other instruction that informs residents what they must do when a fire has occurred. In addition, these instructions should be provided to residents when first occupying their flat and reissued to all existing residents at periods not exceeding 12 months. **Residents ought to have a clear understanding of what actions to take should a fire situation change and they need to evacuate the building.** **It is not implied that those not directly involved who wish to leave the building should be prevented from doing so.**

Fire Emergency Plan FLATS

STAY PUT POLICY

GENERAL ADVICE TO RESIDENTS

This building has been built in such a way as to protect the people in it if a fire breaks out.

The important thing to remember is that if the fire starts in your home, it is up to you to make sure that you can get out of it.

AT ALL TIMES

- Make sure that the smoke alarms in your flat are tested.
- Do not store anything in your hall or corridor,especially anything that will burn easily.
- Use the fixed heating system fitted in your home. If this is not possible, only use a convector heater in your hall or corridor. Do not use any form of radiant heater there, especially one with either a flame (gas or paraffin) or a radiant element (electric bar fire).

IF A FIRE BREAKS OUT IN YOUR FLAT

If you are in the room where the fire is, leave straightaway, together with anybody else, then close the door.

- Do not stay behind to try to put the fire out, unless you have received suitable training.
- Tell everybody else in your flat about the fire and get everybody to leave.
- Close the front door and leave the building.
- CALL THE FIRE SERVICE.

IF YOU SEE OR HEAR OF A FIRE IN ANOTHER PART OF THE BUILDING

- It will usually be safe for you to stay in your own home.
- You must leave your home if smoke or heat affects it OR you are instructed to do so by the Fire Service. Close all doors and windows.

CALLING THE FIRE SERVICE

The Fire Service should always be called to a fire, even if it only seems to be a small fire. This should be done straight away.

The way to call the fire service is by telephone as follows.

1) Dial 999.

2) When the operator answers give the telephone number you are ringing from and ask for the FIRE service.

When you are put through to the fire service, tell them clearly where the fire is:

Bagnall Court, Greenway, Manchester, M22 4LT

Do not hang up until the fire service have repeated the address to you and you are sure they have got it right. The fire service cannot help if they do not have the address

THE ABOVE PROCEDURE SHOULD BE COMMUNICATED TO EACH RESIDENT.

17.0 Risk Analysis, Priority Ratings and Fire Risk Ratings

Each action required has been given a **priority rating of between 1 and 3** based upon the following:

Note: The time scales given below are for the responsible person(s) to take action on the findings NOT the time scale to complete the resulting works from the findings.

Priority 1 (P1)	A serious breach of the Fire Safety Order which if not actioned would significantly increase the risk of fire or injury. Failure to reduce the risk could result in substantial injury to relevant persons. Actions or omissions of this nature would normally constitute an offence liable to enforcement or prosecution actions by the Fire Authority. The time scales given are normally short – **from immediate up to one month.**
Examples include:	Blocked or locked fire exits, serious breaches of life safety fire resistance, ineffective fire doors, insufficient or complete failure of fire alarm, emergency lighting or smoke venting systems.
Priority 2 (P2)	A lesser breach of the Fire Safety Order or property risk, which if not resolved may present a risk of fire or injury. Failure to reduce the risk could result in a moderate injury to relevant persons. Compliance may still be required to satisfy enforcing authorities but longer time scales are given, such as **2 to 4 months.**
Examples include:	Breaches in compartmentation. Firefighting equipment missing or defective, minor defects to the fire alarm or emergency lighting systems.
Priority 3 (P3)	Poor practices or features that whilst not presenting a serious risk would detract from the overall impact on the fire safety provisions within the premises. Also includes provision or practices and features that are preferable over and above the minimum standards required under the Fire Safety Order. Time scales are **variable** and could be **up to 12 months.** The acts or omissions would normally be tolerable but actions should still be implemented to maintain the risk level at a tolerable level.
Examples include:	Missing or incomplete fire signage, incomplete maintenance logs.

The fire risk assessment process involves an assessment of the likelihood of an event (generally outbreak of fire) combined with an assessment of the severity should the event be realised, the severity being classified as negligible, tolerable, moderate, substantial or intolerable. Each significant finding identified has been given an appropriate risk rating, which is then prioritised accordingly on the action plan.

Once all the significant findings have been identified the premises are given an overall **Life** and **Property** risk rating based on the expert opinion, experience and training of the fire safety consultant conducting the assessment.

Definitions:	
Hazard:	An article, substance, machine, installation or situation with potential to cause harm, loss or both. A fire hazard is a hazard that has the potential to cause a fire or promote fire development and/or spread.
Risk:	A measure of the probability that the potential for harm or loss posed by the hazard will materialise, combined with the potential extent and severity of the harm and/or damage that may result.
Harm:	Physical injury, death, ill health, property and equipment damage and any form of associated loss, which could cause harm.

To determine the risk rating two main areas are considered, the likelihood of an outbreak of fire and the potential for that outbreak to cause harm to persons, property and business continuity.

The likelihood of fire outbreak is given a rating of highly unlikely, unlikely and likely, this is then multiplied by the harm potential rating of slight, moderate and serious harm.

The level of fire risk is then quantified as **negligible, tolerable, moderate, substantial** or **intolerable.** The subjective risk rating is calculated and the risk level determined within the following parameters:

Negligible Risk	Where the combination of severity of harm and likelihood is very low and there is minimal risk to people's lives. The risk of a fire occurring is rare and the potential for fire spread is negligible, also where the overall fire safety management is of a high standard. No further action is normally required unless circumstances change. A reassessment should take place on the review date.
Tolerable Risk	Where the present systems, facilities or management procedures are reasonably satisfactory at the time of the assessment. Escape should be carried out unaided with effective fire safety management procedures in place. Possible minor actions may be required, with a reassessment being conducted at the review stage.
Moderate Risk	The present systems, facilities or management is unsatisfactory in some areas. Where a fire could occur and the available time needed to evacuate may be reduced by the speed of the development of fire, also where the reaction time of occupants may be slower because of the type of persons present e.g. sleeping, elderly or infirm or where there are large numbers of persons or complex escape routes. Remedial actions will be required with some control measures being implemented. A reassessment should be made once the control measures have been put in place.
Substantial Risk	Where the combination of severity and probability is high and urgent action must be taken to reduce the risk. Where a fire is likely or highly likely to occur and the spread of fire development would be such that the available escape time would be substantially reduced. Premises identified with substantial risk areas will normally require the provision of considerable resources in the form of equipment, training, information and management to mitigate the risks.
Intolerable Risk	Where the combination of severity and probability is such that extreme harm or death will occur and there is a real threat of an outbreak of fire. Action must be taken to immediately reduce the risk, ideally to a tolerable level. If this cannot be achieved, then consideration must be given to prohibiting or limiting the use of all or part of the premises until such risks can be reduced. Reassessment is required following implementation of the immediate or interim control measures.

The Probability of Fire depends on the number and nature of ignition sources, the extent of and any fire prevention measures and the nature and actions of the occupants. The Probability and Extent of Harm should a fire occur depends on the quality of the means of escape, number of storeys, complexity of the premises and mobility of the occupants.

Based upon the significant findings identified above, application of current fire safety codes and practice, experience and knowledge the following risk areas have been quantified.

FIRE RISK RATING MATRIX

LIKELIHOOD OF FIRE OUTBREAK	LIKELY CONSEQUENCES OF FIRE			
	Subjective Fire Risk Rating	Slight Harm	Moderate Harm	Serious Harm
	Highly Unlikely	Negligible Risk	Tolerable Risk	Moderate Risk
	Unlikely	Tolerable Risk	Moderate Risk	Substantial Risk
	Likely	Moderate Risk	Substantial Risk	Intolerable Risk

18.0 Summary of Findings

Ref	Hazard or Defect	Action Required	Hazard Priority	Risk Rating	Action By	Review Date	Contractor Completed
9.1, 9.5, 9.8	It was observed at the time of the fire risk assessment that the doors to the staircase on the 10th and 11th floor were unable to self close fully and unaided into the rebate.	It is recommended that the fire doors be adjusted so that they are able to self close fully and unaided into their rebate.	P1	Moderate			
9.1, 9.8	Breaches in compartmentation were observed on the 6th floor.	It is recommended that these areas be fire-stopped to at least 60 minutes of fire resistance.	P1	Moderate			
9.6	It was observed that a letterbox seal may be hanging from the front of the entrance door to flat 28.	It is recommended that the flat letterbox be checked to ensure no damage to the seal, the seal should then be replaced or installed back into the letterbox if it is free from damage.	P2	Moderate			
12.8	It was observed at the time of the fire risk assessment that the glazing to the sprinkler shut-off valves on the 2nd and 7th floors were missing.	Glazing should be fitted to the doors of the valves to secure them.	P1	Moderate			
13.10	At the time of the fire risk assessment, it was observed that there was no 'DO NOT USE LIFT IN EVENT OF A FIRE' signage on the 7th floor.	It is recommended that 'DO NOT USE LIFT IN EVENT OF A FIRE' signage is displayed outside the lift on the 7th floor.	P1	Moderate			

19.0 Recommendations

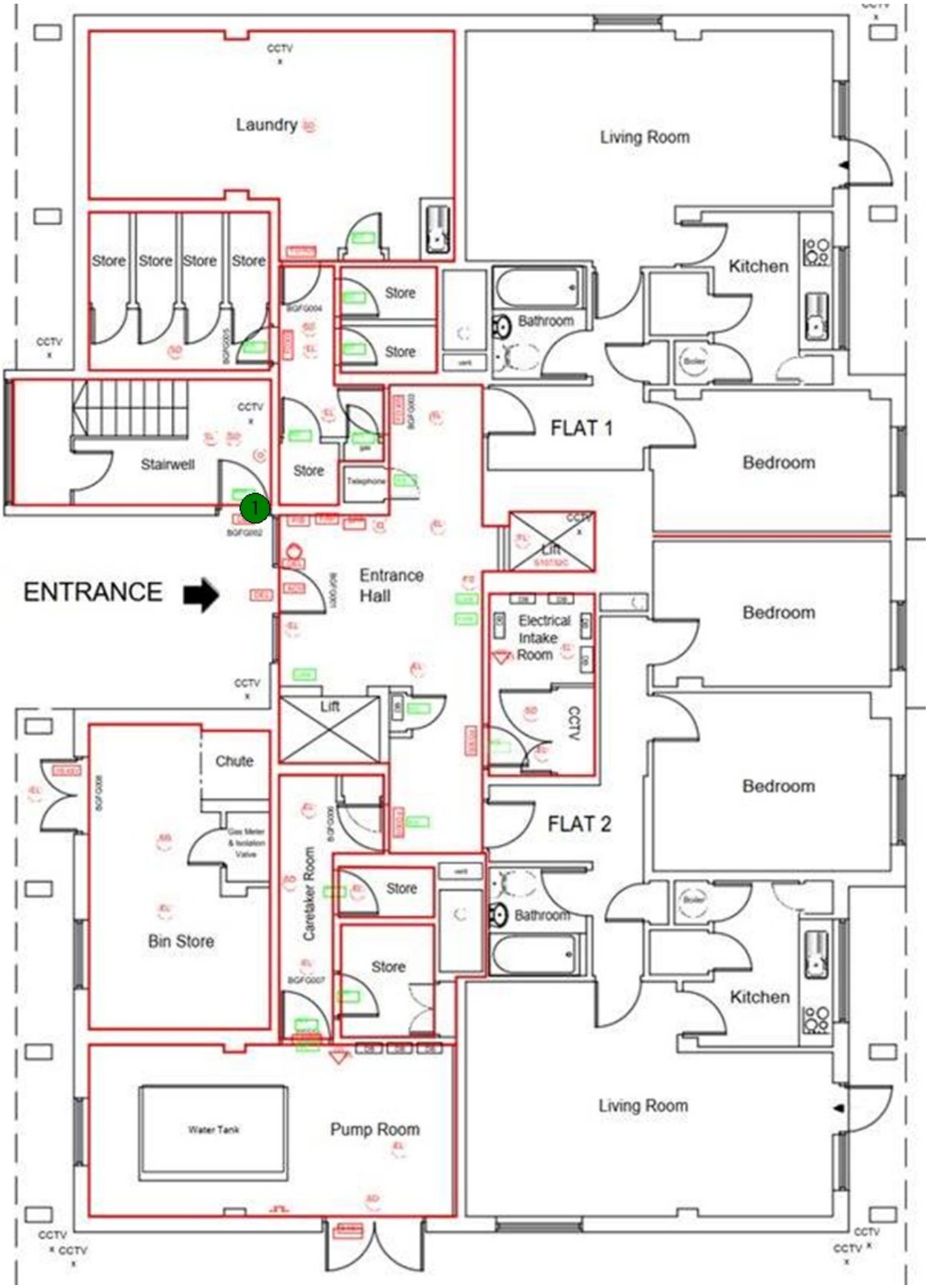
Ref	Observation	Recommended Action	Risk Rating	Contractor Completed
6.14	It was observed that the false ceiling had been removed on some floors, exposing bundles of cable and wire.	It is recommended that the false ceiling be reinstalled, this will help secure the wires/cable.	Moderate	

20.0 Commentaries

Ref	Observation	Recommended Action	Risk Rating	Contractor Completed
THERE WERE NO COMMENTARIES.				

Appendix

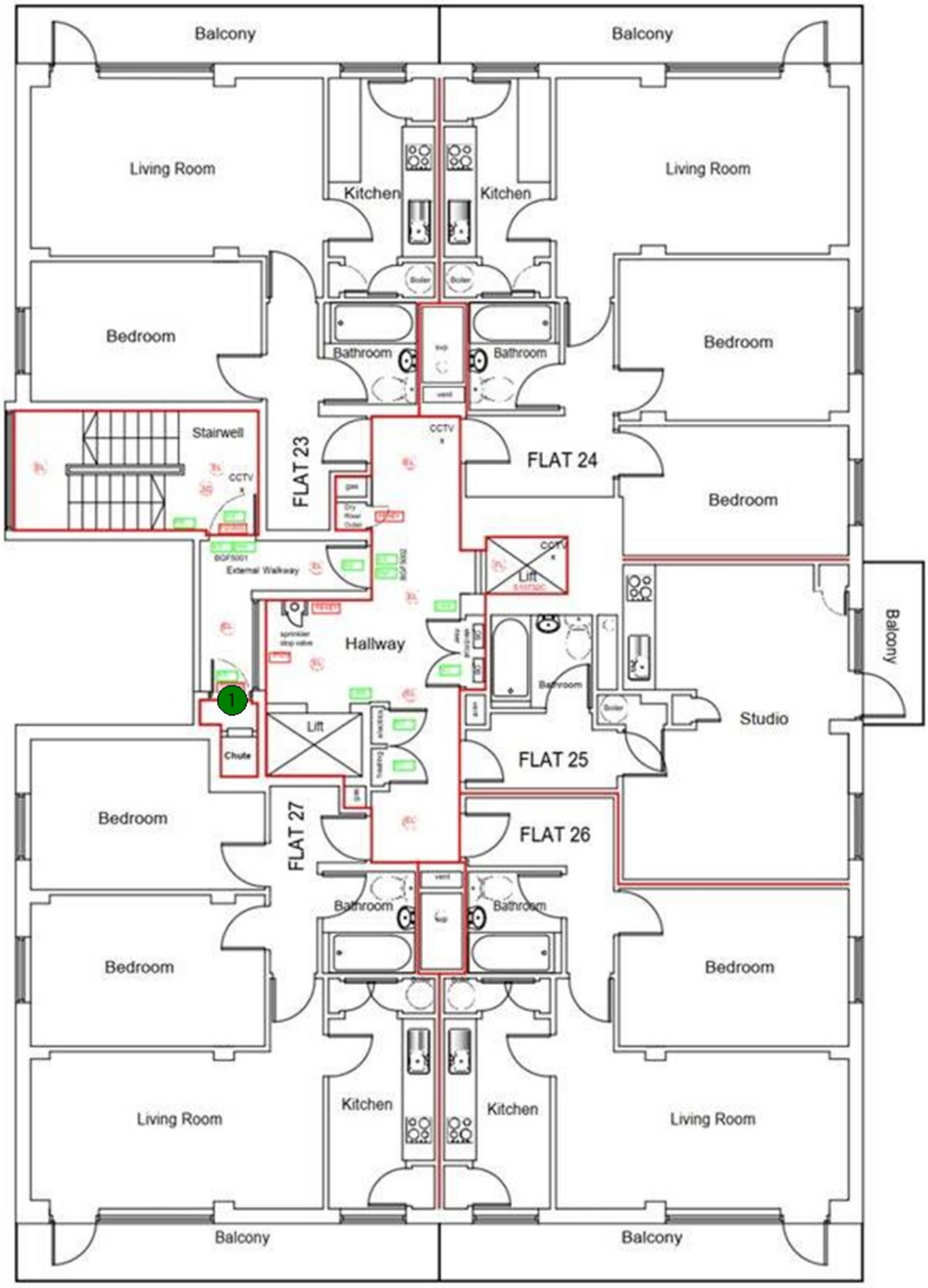
Ground Floor



1 The Confinement of Fire - 9.12-9.13

No Image

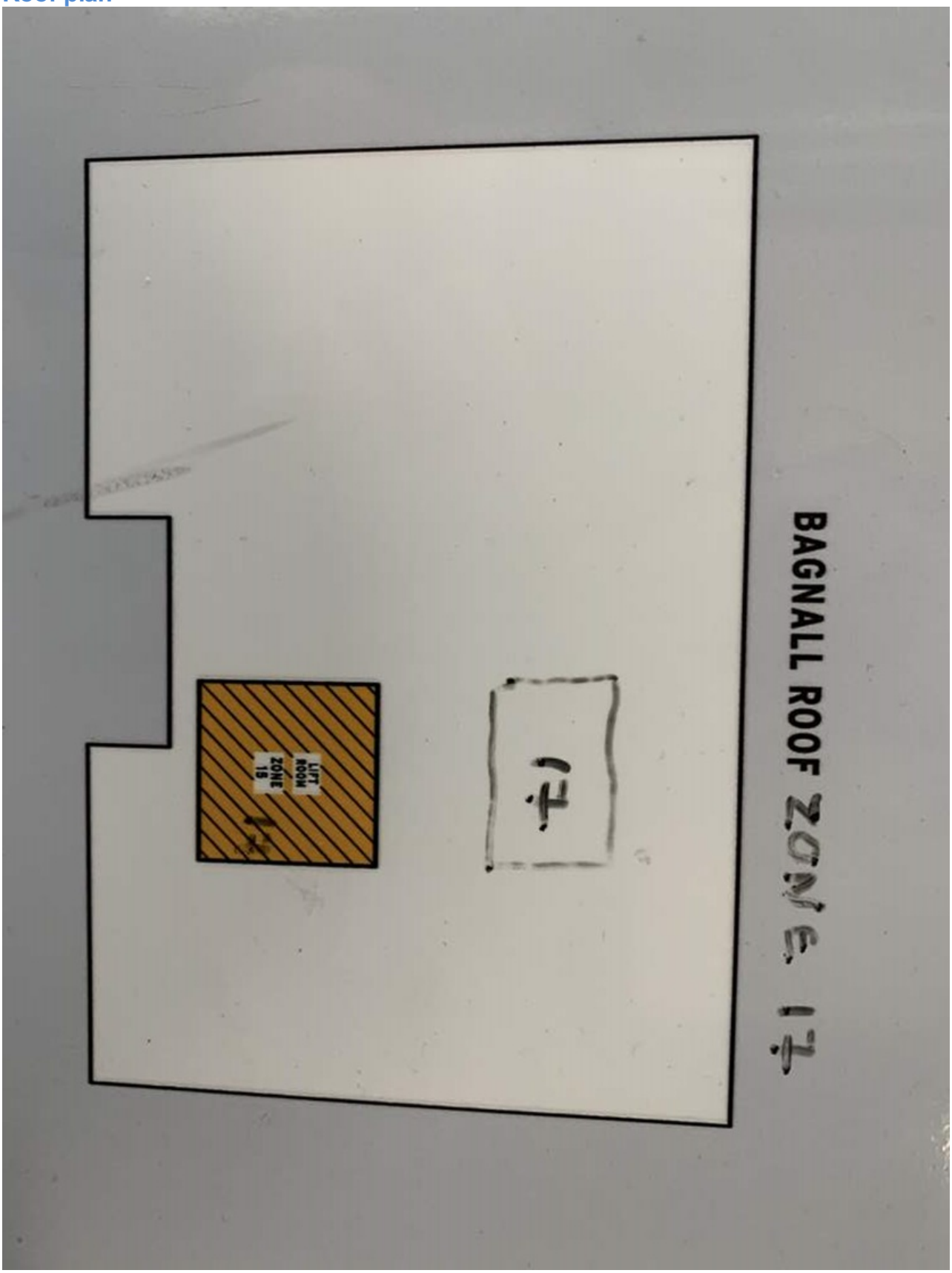
Typical Upper Floor



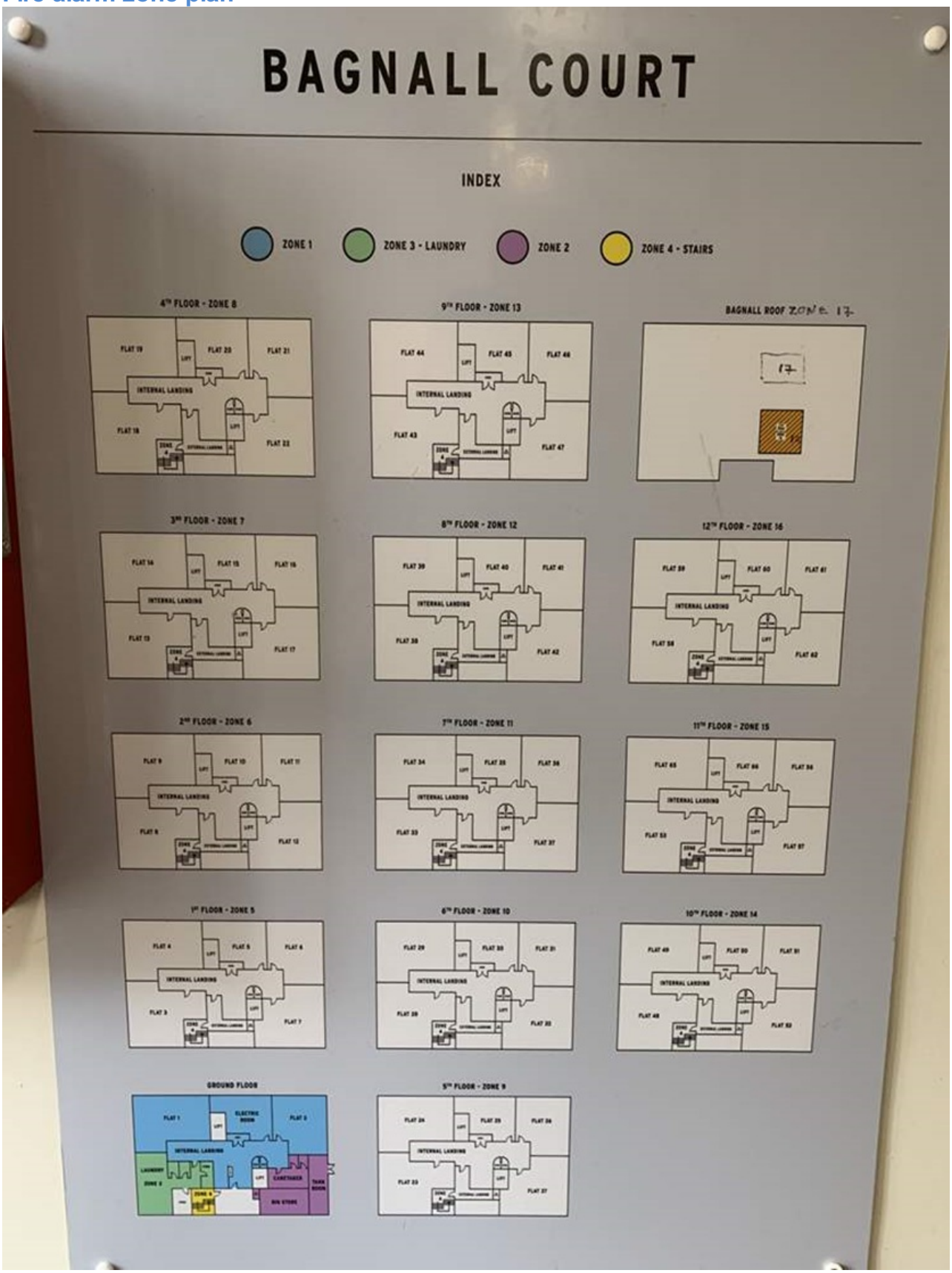
1 The Confinement of Fire - 9.6

No Image

Roof plan



Fire alarm zone plan



Sprinkler block plan - Ground floor

Sprinkler block plan - Typical upper floor