



TOTAL FIRE GROUP LTD

Fire Risk Assessment

Conducted at:

Bagnall Court Shawcross Lane Greenway Manchester M22 4LT



06 June 2022







Certificate Number	LS	0244295
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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.

SCHEDU	HEDULE		
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, Shawcross Lane, 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 ris	k assessment	
	In compliance with Article 9(1) of the RRFSO 2005.		
Part 5	Effective date of the fire risk assessment	06/06/2022	
Part 6	Recommended date for review of the fire risk assessment	06/06/2023	

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)	M. E. ÔMean
Job Title	Senior Fire Safety Consultant
Date	20/06/2022

Life Safety Fire Risk Assessment Silver is an Approval Scheme of Insight Certification Ltd, Sentinel House, 5 Reform Road, Maidenhead, Berkshire. SL6 8BY BAFE, Bridges 2, The Fire Service College, London Road, Moreton-in-Marsh, GL56 0RH

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



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TERMS AND CONDITIONS OF BUSINESS

Bagnall Court, Shawcross Lane, 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. 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 **Monday, 6 June 2022**

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.



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	e, Manchester	, Greater Manchester,	M22 9TA

and relates only to the premises of:

Bagnall Court, Shawcross Lane, Greenway, Manchester, M22 4LT

Responsible person(s):

Wythenshawe Community Housing Group, 307 Greenwood Road, Wythenshawe, M22 9HD.

Person(s) consulted and landline contact number:

Diane Burrell (Facilities Manager) 0161 946 9191.

Fire Risk Assessor:

David Hilliard GIFireE, FS Dip L4. MIFSM, Tier 3 Nationally Accredited Fire Risk Assessor 0266

Audited by:

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

Date fire risk assessment was conducted:

Monday, 6 June 2022

Time:

10:00

Date of last FRA or FRA Review (if known)

07 Jun 2021

Suggested date for next review:

June 2023

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 30, 34, 47, 49, 51 & 53.

The lift motor room on the roof and adjacent ventilation plant room were accessed and viewed. The mains electrical intake



room, laundry, store rooms and the water tank room on the ground floor were also opened and seen. The caretaker's area was seen on this occasion. A selection of false ceiling tiles on various floors were lifted in several locations in order to assess the compartmentation above, but vision was limited due to the narrow space between the tiles and the true ceiling. There was no access to the gas boiler room on the roof as a permit is required to go out onto the roof and gain access to this (no permit issued) and neither was there any access to the sprinkler tank room, which is a separate structure adjacent to the main building, as no key was available. The bin store was opened and entered.

A good selection of electrical service riser cupboards in the communal hallways were opened this time and previously all have been accessed. Several Dry Rising main cupboards were also accessed to see inside. The facilities manager from WCHG provided access and accompanied our assessor during the course of his visit.

The assessment of the fire performance of the external wall construction and any cladding is excluded from this fire risk assessment. Where it is determined that a detailed assessment of an external wall is required, PAS 9980 should be used for these requirements. The consultant has followed Fire Industry Association (FIA) Guidance note of June 2020.

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 assessment document is part of the continuous management of fire safety within these premises and as such should be read in conjunction with the fire risk assessment or review as dated above.

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:

14 Floors (Including the ground floor and lift motor room on the roof)

2.2 Approximate building footprint:

400m²

2.3 Details of Construction and Premises:

The premises is a high rise residential block completed in 1964. There is a total of 62 flats. There is a communal laundry, caretaker's office, plant rooms and the bin / refuse room on the ground floor. The block was constructed with brick and concrete panel outer walls, concrete floors and a single stairway. There is also an External Wall System (EWS) which is referred to in Section 9.0 The layout of all the upper floors is the same throughout, with the entrance doors to the five flats opening into the lift lobby. A communal door from the lift lobby leads onto a small open balcony. There are two doors on this balcony, one leads into the single stairway and the other into a permanently open ventilated bin chute lobby. The lift motor room is accessed through a secure door at the top of the staircase, via a vertical ladder and the ventilation plant room. The exit from the base of the main stairway is adjacent to but separated from the main entrance. The staircase is effectively a separate shaft. A dry rising main is provided for the fire service. The inlet for the dry rising main is on the front of the premises and the outlets are located within the lift lobbies. The flats have a hallway approach to all the habitable rooms and they are provided with a BS 5389, Pt 6, fire alarm and detection system and also a water sprinkler protection system compliant with BS 9251. The sprinkler system also extends into some other areas of the premises, such as the plant rooms and laundry.

The existing common fire alarm has been previously reconfigured to be a silent system and is now used as an Evacuation Alert System for use by the Fire and Rescue Service only. Emergency lighting is also provided throughout the premises within the common areas and service rooms etc. The heating is provided via a hot water heat exchange system in each flat, fed from gas boilers installed in a room on the roof.

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)

2.5 Approximate maximum number of persons:

191 (Based on 2 persons per flat, plus 5 staff and resident's visitors.)

2.6 Approximate maximum number of employees at any one time:

5 (WCHG staff and trades persons.)

2.7 Maximum number of members of the public:

62 (Based on 1 Visitor per flat.)



2.8 Occupants at Special Risk:

	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

Flats are general needs. Residents may be present with any combination of disabilities throughout the premises. WCHG 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 reported or evidence seen within the last 12 months.



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 premises operates on a Stay Put policy for the flats and a full evacuation policy for all other areas. There are several findings and recommendations mentioned in this assessment that require attention and which could affect the life safety of the occupants, especially regarding some breaches in the compartmentation. Therefore, the overall risk to life can currently be considered as moderate at this present time.

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: Moderate

There is a good level of smoke detection in the common areas and also within the flats, that should detect a fire and raise the alarm. The common area access lobbies are fitted with adequate ventilation in the form of POVs. There are no known large amounts of combustibles stored within the premises, the common areas were also free of any storage and all risk rooms are of reasonable fire resisting construction. However, there are some findings in this report that require attention and which may allow a fire or smoke to travel further than is necessary, therefore, the overall risk to property can also be said to be moderate.

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 & Substance	es
IDENTIF	YING 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?	N/A
4.4	Are all combustible or flammable materials stored or stacked safely?	N/A
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 sited where they will not affect the means of escape or pose a fire hazard?	N/A
4.9	Is all 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	Ref SIGNIFICANT 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 substances store cupboards, located in the caretaker's / cleaner's rooms, but these only had cleaning materials stored inside and did not contain any significantly flammable substances at the time of this FRA. 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? (The Furniture and Furnishings (Fire) (Safety) Regulations 1988 (as amended in 1989 & 1993))	N/A
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	SIGNIFICANT 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 furniture or combustible storage.



	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 walkways or escape routes free from trailed cables?	Yes	
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 lifts, 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	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
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	Portable electrical appliances which are the responsibility of WCHG appear to have been safety checked or tested, PAT, within the last 12 months. A sample of appliances checked were last seen to have been tested during April 2022. PAT label on an appliance. 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	The property undergoes a 5 year electrical installation test and service for the communal areas and 10 yearly testing for the flats in accordance with BS 7671. (Tests done by AB Electrical Ltd) All records are held in house on the WCHG data systems. The most recent mains electrical tests have been carried out during May 2021, with the next tests being due in May 2026. **The most recent mains electrical tests have been carried out during May 2021, with the next tests being due in May 2026. **The most recent mains electrical tests have been carried out during May 2021, with the next tests being due in May 2026. **The most recent mains electrical tests have been carried out during May 2021, with the next tests being due in May 2026. **The most recent mains electrical tests have been carried out during May 2021, with the next tests being due in May 2026. **The most recent mains electrical tests have been carried out during May 2021, with the next tests being due in May 2026. **The most recent mains electrical tests have been carried out during May 2021, with the next tests being due in May 2026. **The most recent mains electrical tests have been carried out during May 2021, with the next tests being due in May 2026. **The most recent mains electrical tests have been carried out during May 2021, with the next tests being due in May 2026. **The most recent mains electrical tests have been carried out during May 2021, with the next tests being due in May 2026. **The most recent mains electrical tests have been carried out during May 2021, with the next tests being due in May 2026. **The most recent mains electrical tests have been carried out during May 2021, with the next tests being due in May 2026. **The most recent mains electrical tests have been carried out during May 2021, with the next tests being due in May 2026. **The most recent mains electrical tests have been carried out during May 2021, with the next tests being due in May 2026. **The most recent mains electrical tests have been carried out
6.17-6.19	There are no communal cooking facilities or kitchens.
6.20	All gas installations have Gas Safety checks carried out on a 10 month rolling programme of work, by approved contractors Murry Building Services Ltd. The common heating system, the lifts and laundry facilities are all maintained under contract. Records are kept on WCHG data systems.
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	The main gas isolation valve is housed inside a dedicated meter cupboard within the refuse store on the ground floor. Externally accessed.
6.21	The lightning protection system is tested on an annual basis by PTSG. The test records are stored on the WCHG data systems.
6.22	At the time of this fire risk assessment, no other sources of heat, such as (e.g. candles, cigarettes or domestic appliances,)
	were seen within the common / communal areas, lobbies and stairs.



	7.0 Persons at Risk Audit	
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		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. been prepared where disabled members of the public or visitors may reasonably be expected to resort to the premises?	N/A
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 Audit: Finding(s)	
Ref	SIGNIFICANT FINDINGS	
	None.	
Ref	RECOMMENDATIONS	
	None.	
Ref	COMMENTARY	
7.0	WCHG considers the mobility and capabilities of residents when first assigning accommodation, however, as the block is for residents and there are no staff normally on site outside of day time office hours, fire drills are not applicable and would not be appropriate.	
7.3	As previously identified; It was seen that a Premises Information Box (PIB) has now been installed in the entrance foyer that contains information specifically for the fire service, including any information regarding vulnerable or disabled residents. The fire service carry a key to gain access to the box. It must be noted that the responsibility for updating the information with regards to any vulnerable tenants remains with WCHG. It was stated that the information contained within the box is in keeping with NFCC and FIA released guidance. Therefore, WCHG (Housing Section) should ensure that the information stored in the PIB is kept up to date and regularly reviewed.	
	PIB in entrance foyer. BAGNAL BAGNAL	
7.3, 7.5, 7.7	Residents may be present with any combination of disabilities throughout the premises. Individual PEEPs are not considered appropriate for general needs flats. It is not known if new tenants who occupy the flats have any disabilities, but an assessment towards their ability to react to a fire within the premises should be undertaken when first taking up residence. New residents ought to be encouraged to have a home fire safety check by the local fire service. 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.	
	Information regarding the assistance of any mobility-impaired residents is now included in a PIB, (Premises Information Box) sited in the entrance foyer and which is easily accessible by the fire and rescue service.	
7.4	It was reported by the facilities manager that there are no disabled staff members visiting the premises at present.	
7.8	As a domestic premises WCHG have no responsibilities for the persons present from a fire procedure perspective, other than for WCHG appointed contractors and staff who should receive instruction prior to arrival.	
7.8	Whilst there are some areas used occasionally by WCHG staff, such as the office and caretaker's rooms, these have simple escape routes and are not in use all of the time. They are very familiar to the cleaners and staff. It is the opinion of our assessor that fire drills are not necessary for these areas and would be of little or no benefit.	
7.10-7.11	Visitors to the residents' 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. No signing in book is necessary.	
7.12	Restricted areas are secured by locked doors which are locked by WCHG staff or cleaners when not in use.	



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



	8.0 Escape: Finding(s)		
Ref	SIGNIFICANT FINDINGS		
	None.		
Ref	RECOMMENDATIONS		
	None.		



Ref	COMMENTARY
3.0	Access into the premises is controlled by the residents via an electronic door entry security system.
8.5	Smoke ventilation in the stairway is provided by three permanently open vents (POVs) on the top landing and three similar vents on the landing below. These vents together provide an area in excess of the 1m² required. In addition, the doorway from the stairway onto the upmost open balcony 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 balcony and a self-closing fire door. 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 roof top room, which again is ventilated direct to outside. The final exit door at the base of the stairs also opens straight to outside. POVs on levels 11 and 12 of the staircase.
0.5	
8.5	The common lift lobbies are provided with a permanent open vent (POV) 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 balcony could be opened to provide ventilation within the lift lobbies, allowing smoke to escape. Example of POV within the lift lobbies.
8.5, 8.10, 8.16-8.18	The main entrance is fitted with a power assisted opening device and also magnetic locks. It was confirmed that the powered opener 'fails safe' by being able to be pushed open during a power failure and the magnetic locks are provided with a Green Box emergency override adjacent to the door.
	The door from the laundry room also has magnetic locks, but has two green release buttons, assumed to be one on either side of the circuit, both buttons release the magnets, which makes this a 'double pole' release for emergencies.
	The exit door from the base of the stairs is fitted with a Push Bar to open the door.

8.5, 8.10, WCHG have previously confirmed that all the electro-magnetic locks within the premises are linked to the Emergency Alert System and conform to BS 7273 part 4.

8.6 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.



8.7-8.9	The water tank room could be classed as an inner room, however, the caretakers / cleaners 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 and the
	water tank room is seldom used. These arrangements were found to be satisfactory by our consultant.
8.11	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 they would report any defects for repair.
8.11, 8.17	It was confirmed that the electro-magnetic door lock release mechanisms are checked weekly. They are also serviced / tested
	every six months by AB Electrical engineers Ltd.



	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	Are all fire doors self-closing, kept locked shut where appropriate and in good condition?	No
9.3	Are all fire doors fitted with smoke seals and intumescing strips where required?	No
9.4	Do wall & ceiling linings meet the required surface spread of flame classes? e.g. Class O on escape routes	Yes
9.5	Have any breaches in the fire resistance (walls, floors and doors) been fire stopped with appropriate fire resisting materials?	No
9.6	Have there been any structural alterations within the past 12 months?	No
9.7	Were the requirements of the Building Regulations followed and a completion certificate issued?	N/A
9.8	Are all ducts fitted with effective fire dampers where required?	N/A
9.9	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
9.10	Is glazing within the above distances fire resisting and fixed shut?	N/A
9.11	Is there a procedure for all premises/areas to be checked at the end of a working period for potential fire hazards?	Yes
9.12	Are the premises free from risk posed by adjacent properties? (Uncontrolled fly tipping, overgrown vegetation or poor housekeeping)	Yes
9.13	Has the risk of external fire spread been considered? Consider external cladding, wall systems, external render and balconies.	Yes
9.14	Are there any other premises features or hazards that could affect fire development or spread?	Yes
9.15	Are the premises secure from any potential fire hazards outside susceptible to arson attack that could affect the building?	No
	Automatic Hold Open Devices	
9.16	Are any fire doors fitted with automatic door release devices?	No
9.17	Are the devices fitted to any critical doors? e.g. onto stairs in a single staircase building	N/A
9.18	Is smoke detection provided within the area located near to the door release device? (Consider to L3 standard?)	N/A
9.19	Are all non-self-contained devices linked to the fire alarm system and released on actuation?	N/A
9.20	Are any self-contained, acoustically actuated door hold open devices fitted?	N/A
9.21	Are all devices tested regularly and the results recorded? (At least once a week)	N/A
9.22	Are all doors released at night or when the area is unoccupied?	N/A
9.23	Are all devices tested in accordance with the manufactures relevant standard to ensure satisfactory operation?	N/A



Ref	9.0 The Confinement of Fire: Finding(s) SIGNIFICANT FINDINGS
	Observation
9.1	The frame around the door to Flat 50 had yet to be fire sealed and fitted with architrave. A gap could be seen between the frame and the wall. This would allow the products of combustion from a flat fire to spread onto the common lobby and place persons at risk of harm. Gap between frame and wall of Flat 50.
	Recommended Actions
9.1	WCHG ought to ensure that the gap between the frame and wall to Flat 50 is appropriately filled and sealed with suitable fire
	resisting materials and the architraves correctly replaced, inside and out. Observation
9.1	It was noted that the security door between the common area and the laundry / store rooms could not be confirmed as of a suitable fire resisting standard. Although the door is magnetically locked and is of a good standard, no smoke seals were fitte and the glazing was not fire resisting. Additionally, the inner door to the laundry room was kept open. A fire in the laundry room would affect the common area lobby / foyer as smoke and heat would be able to spread, placing persons at risk of harm. Security door to laundry area and inner door to laundry room kept open.
	Recommended Actions
9.1	WCHG ought to confirm that the security door is of a suitable fire resisting standard or take remedial actions to replace the door with an appropriate type. (FD30s) This may involve contacting the manufacturers for advice etc. The inner door to the laundry room should also be fitted with a self-closing device and the door allowed to fully close when persons enter or leave the room. This would provide two doors of separation between the laundry and the common area entrance foyer.
	Observation
9.1	It was noted that there is a large gap at the top of the wall, on the 12th floor, above Flat 62, that goes through to the flat, possibly where the wall has been damaged. This would allow the products of combustion from a flat fire to spread onto the common area and place persons at risk of harm. Gap in wall above door to Flat 62, 12th floor. Recommended Actions
9.1	WCHG ought to ensure that the hole / gap is completely made up and sealed by using suitable fire resisting materials that wi afford the same amount of fire resistance as the surrounding wall. See also the commentary below at 9.1, 9.5
9.1-9.2	Observation It was seen that the architrave around the door to the lift motor room, on the stair landing of the 12th floor, was missing on the right hand side. This may allow smoke to percolate around the door frame and affect the staircase, placing persons at risk of harm during an emergency. Missing architrave on R/H side of lift motor room door.



Recommended Actions 9.1-9.2 Any holes / gaps between the frame and the wall ought to be appropriately sealed with fire resisting materials and the architrave replaced and fixed into place. 9.1, 9.5 As previously identified; There is a hole or holes in the fire resisting board, above the fire door leading the the caretaker's / cleaners area. This would allow the products of combustion from a fire to spread more easily and affect the common lobby, placing persons at risk of harm. Holes in board above door to cleaners store area Recommended Actions 9.1, 9.5 WCHG ought to ensure that the holes are made up and sealed by using appropriate fire resisting materials, that will provide a sufficient amount of fire resistance. See the commentaries below. Observation 9.1, 9.5 There is a large hole above the mains electrical riser cupboard, within the entrance foyer, where cables pass through above the false ceiling. This would allow a fire in the cupboard or smoke to affect the main entrance foyer and place persons at risk View from inside and outside the riser cupboard where cables pass through. Recommended Actions 9.1, 9.5 WCHG ought to ensure that the hole / gap is fully sealed and made up by using appropriate fire resisting materials that will provide a sufficient amount of fire resistance, equivalent to the wall of the cupboard. See the commentary below regarding Compartmentation at 9.1, 9.5 Observation It was noted that the door to the caretakers / cleaners refreshment room had been kept open and not closed shut. This would 9.2 allow a fire starting in the room to spread and affect the corridor leading from the water tank room, placing persons at risk of harm. Door to cleaners room left open. Recommended Actions 9.2 WCHG ought to inform the cleaners / caretakers that the door should be kept firmly closed when not in use or when the room is empty. Observation 9.3 It was seen that the door or frame to one of the stores within the laundry area has not been fitted with any intumescent cold smoke seals and the store contains combustibles. This may allow smoke from a fire to spread into the laundry corridor and place persons at risk of harm in that area. Door to store room (nearest laundry) missing the intumescent cold smoke seals around the frame. Recommended Actions 9.3 WCHG ought to install suitable intumescent cold smoke seals around the frame which has been rebated and ensure that the

door continues to fully close and lock



Observation

9.5

9.13

9.13

It was seen that there is a hole in the mains electrical cupboard within the laundry, where cables pass through the side wall. This may allow a fire in the cupboard to spread further than is necessary and place persons at risk of harm in the building. Mains cupboard in laundry and hole where cables pass through.





Recommended Actions

9.5 WCHG ought to make up / fill and seal the hole with appropriate fire resisting materials.

Observation

As previously identified; A previous Fire Risk Assessment has highlighted an issue with the unknown external wall system (EWS), window / spandrel panels on the external walls and the panels that form the balconies. The EN classification, material specification, insulation and fixing method were still unknown at this time. Following the previous assessment, WCHG appointed consultants to assist in the identification of the fire risks associated with the EWS. A decision to replace the system has been made. Arrangements are now underway with an expectation that work onsite will begin possibly later on this year. Where the external wall / structure can assist fire spread, it may place persons at risk of harm.







Recommended Actions

9.13 The arrangements that are in place to replace EWS, window spandrel panels and balcony panels should be implemented in a timely manner as planned. It is noted that the premises are provided with adequate compartmentation, sprinklers in the individual flats and other specified areas and an Emergency Alert System should be available for use by the Fire and Rescue Service. The consultants employed by WCHG have not advised that any further fire safety measures should be introduced.

Note; The priority rating of this action has been reduced to P2 by our consultant, due to the installation of the sprinklers within the flats, which should be able to suppress any fire within a flat.

Observation

As previously identified; During this and the previous assessments, consideration was given as to the need for interim measures to be taken during any works that take place involving the external wall system and the vertical panels that form the balustrades of the balconies. The following fire safety measures are already in place:

- During this Fire Risk Assessment, the escape routes, including the access lobbies to the flats, were clear of any items. See Section 8.6.
- 2. The remedial compartmentation works within the premises has been carried out by a third party accredited passive fire contractor. **Any additional findings are identified in Section 9.1, 9.5 above.**
- 3. All flat entrance doors are inspected annually and any repairs or replacements are carried out. See Section 9.2/9.3.
- 4. The Fire Alarm/Evacuation Alert System, which is monitored by an alarm receiving centre (ARC)will provide an early warning of fire and notification to the Fire and Rescue Service. It also has the facility for the Fire and Rescue Service to instigate a staged or full evacuation of the premises should it be required. **See Section 10.0**
- 5. All the flats and ground floor plant areas have water sprinkler protection. See Section 12.6
- 6. Information regarding residents who may require assistance to evacuate the premises is kept secure in the entrance foyer in a PIB. (Premises Information Box)

Advice and information in PAS 9980 should also now be taken into consideration. However, although GMFRS are aware of the proposed works, there is a requirement for them to be consulted regarding the need for any Interim Measures. Inadequate fire safety measures may place persons at risk of harm during any construction or building alterations.

Recommended Actions

9.13 WCHG ought to provide GMFRS with a copy of this Fire Risk Assessment with particular reference to Section 9.13. They will then be able to form an opinion regarding the adequacy of existing fire safety measures and any further need for Interim Measures where required.



	Observation
9.14-9.15	It was seen that there are several combustible items and furniture stored adjacent to the building, near the main entrance and bin store. These present a significant fire loading and would place persons at risk of harm if an ignition source was introduced as the fire could spread into the building, via windows etc.
	Recommended Actions
9.14-9.15	WCHG ought to ensure that the items are removed as soon as possible and that any such temporary storage is place well away from the building. i.e. Stored adjacent to the refuse bins etc.
Ref	RECOMMENDATIONS
	None.



COMMENTARY Ref 9.1-9.3 As previously identified; WCHG have been continuing with their fire door replacement scheme for all of the flat entry doors. All the doors seen to the flats throughout the block are new FD30 doors. Certification is held by WCHG. All of the flats accessed were fitted with an overhead self-closing device and all the doors were seen to be fully self-closing into their rebates. The door frames were also new and had intumescent seals around the frames with a cold smoke seal in the rebate. Any glazing seen on some doors also appeared to be compliant and fire resisting. This whole assembly would make the doors to that of an FD30s standard as required within current guidance. Note; Some of the architraves on a few doors had yet to be replaced, but it was confirmed by the facilities manager that the works were still on-going and that they would soon be completed. Without the architraves it was possible to see that the frames had been correctly sealed between the wall and frame. Only one frame had yet to be sealed, but as stated works were still taking place on this door. (Flat 50, see the findings above) New FD30 doors inclusive of self-closer and intumescent seal and cold smoke seal around the frame. 9.1 - 9.3Note: Current guidance recommends that the doors to the flats are periodically checked to ensure that they are all fitted with intumescent cold smoke seals around the edge of the door or frame and that the self closer is working correctly by closing the door completely into its frame / rebate from any angle. Afire occurring within a flat could easily compromise the means of escape if the door does not fully close behind the escaping occupant/s during an emergency. 9.1-9.3, 9.5 Article 14 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to ensure that emergency routes and exits can be used as quickly and safely as possible. Article 8 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to take general fire precautions to 9.1-9.3, 9.5, 9.13-9.15 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, 9.5 It has been highlighted in previous Fire Risk Assessments, that compartmentation works have been carried 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 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. Note: WCHG has implemented annual compartmentation inspections by an accredited passive fire protection contractor. Evidence of remedial fire stopping and compartmentation works Remedial works carried out by Flamehold contractors. Examples of remedial fire stopping works carried out by Alpha Fire Solutions. April 2022



9.1, 9.5 As previously identified; The board on the floor of the lift motor room, that covers the hole to the redundant hatch, has now been replaced with a fire resisting board. The works were completed during October 2021.





9.1, 9.5 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.

9.2-9.3 **Door Checking Procedure**;

It was confirmed by the facilities manager (Diane Burrell) that a regular and routine door checking procedure is in place and this is carried out at least annually by the Gas Safety inspection team, at the same time as testing the smoke detection in the flats. The records are stored by WCHG. Any faults are reported and remedial works implemented. The checks should include:

- confirming that the door is fitted with a working self-closing device
- confirming that the door fully closes into its rebate
- confirming that the door is fitted with intumescent strips and cold smoke seals
- confirming that the door has not been damaged in any way
- confirming that any glazing in the door is fire resistant
- confirming that the door frame is in good condition
- confirming that no inappropriate door furniture has been installed.

Where defects are reported, it is important that action is taken within an appropriate timescale and that they are not simply left until the next inspection.

Further advice on routine inspection and maintenance of fire-resisting doors can be found in BS 8214 and LGA guidance Fire Safety in Purpose Built Flats, Section 82; page 125.

Fire Safety In Purpose Built Flats

- 9.3 As previously identified; The electric riser cupboards on floors 6, 8, 10 & 11 were seen to all have their intumescent cold smoke seals in place, including along the top edge. All the doors appeared in good condition and closed securely. The remedial works had been carried out during July 2021.
- As previously identified; The small holes in the compartmentation, where pipes pass through, above the doors leading to the laundry, appear to have been fire stopped. However, this is not the main issue with regards to the laundry and fire separation. See the additional findings above.



9.5, 9.14 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. (Approx 72 degrees C) The operation of the spring loaded gate is checked and serviced six monthly by a contractor and was last serviced during April 2022. The chute access rooms and bin hoppers in each open balcony are also checked regularly and are protected by self closing fire doors.







9.8 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 FRA.

9.8 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 and which was not common to any other flats. It is assumed that all the flats in the block have similar provisions installed.

Examples of kitchen extraction fans leading direct to outside.





9.13 For Information; The assessment of the fire performance of the external wall construction and any cladding is excluded from this fire risk assessment. Where it is determined that a detailed assessment of an external wall is required, **PAS 9980 should**be used for these requirements. A separate assessment should only be completed by a competent and suitably qualified person. The consultant has followed Fire Industry Association (FIA) Guidance note of June 2020. (See the Limitations in Section 1.0 of this FRA.) See also the findings above at Section 9.13 that were included in the previous FRAs. The majority of the external walls are constructed of brick and cement based mortar and concrete slabs.





9.13-9.14 **Balconies**;

It was confirmed by the facilities manager that WCHG have a zero tolerance policy with regards to the balconies and their contents. Residents have been informed that storage of combustibles is not allowed on the balconies and that ignition sources such as heaters and barbeques are prohibited.

It was also noted by our consultant that the balconies seen appear to be constructed of concrete floors / ceilings with a steel frame. It is not known what the panelling is made from. See the finding above at Section 9.13 **See also PAS 9980** for further information or guidance where required.





9.15 The waste and recycling bins were seen to be kept in a secure and suitable location away from the building.





	10.0 Fire Alarm System		
10.1	Is the premises provided with a fire alarm system?	Yes	
10.2	Is it possible to define the alarm system category? (L1- L5 etc.)	Yes	
10.3	Is the fire alarm or category suitable for the risk and premises type?	No	
10.4	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.	No	
10.5	Are sufficient fire alarm call points and detectors provided?	No	
10.6	Can the alarm be raised without placing anyone at risk?	Not Known	
10.7	Are all call points visible, unobstructed?	Yes	
10.8	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	
10.9	Where required does the system have a voice alarm? i.e. large places of assembly	N/A	
10.10	Can the alarm be heard throughout all areas of the premises?	Not Known	
10.11	Has a suitable fire zone plan been provided adjacent to the fire panel where necessary? i.e. complex premises or care homes	Yes	
10.12	Is the alarm system under a regular maintenance programme by a qualified fire alarm engineer?	Yes	
10.13	Are there systems in place to ensure the system is tested weekly from a different call point?	Yes	
10.14	Are all fire alarm tests, faults and maintenance schedules recorded?	Yes	



	10.0 Fire Alarm System: Finding(s)	
Ref	SIGNIFICANT FINDINGS	
	Observation	
10.3-10.5	It was noted that manual fire alarm call points (MCPs) are provided within every landing access lobby, between the stairs and lift lobbies. They are not in view of any CCTV and it was stated by the facilities manager from WCHG that several false / malicious alarms have occurred within the past few months, caused by the deliberate activation of a manual call point in one of these areas. False alarms tend to generate a 'cry wolf' scenario' among the occupants and persons tend to learn to ignore an evacuation alarm, placing them at risk of harm during a genuine emergency. Additionally, manual call points and common fire alarms are NOT normally required within blocks of flats or apartments that are operating on a Stay Put / Stay Safe evacuation policy. These manual call points are outside the scope of the current guidance and recommendations for these flats. Manual Call Points in common lobbies on every floor.	
	Note ; If a smoke detector is activated within the common areas, then the alarm system is silent within the stair lobbies and stairs etc. However, it seems that it is audible if a MCP (call point) is broken. If the call points are removed it would also prevent the alarm panel from showing a fault or silent activation and prevent the fire service from being called un-necessarily. **Recommended Actions**	
10.3-10.5	WCHG ought to arrange for the manual call points within the access lobbies to be disabled and removed.	
	NB; The manual call points within the service / plant rooms, on the roof and ground floor, as well as the call point in the main foyer, covered by CCTV should remain in place and fully functional, so that contractors or staff can operate these if required. Also the alarm sounders within the roof voids, service and plant rooms and ground floor, should also remain functional / audible, so as to give warning to persons at work in those areas. All other floors can be a silent system, except when activated by the fire and rescue service from the main alarm panel / evacuation control.	
	Observation	
10.10	The common alarm system throughout the building has been reconfigured to act as a silent system, this may include the	
10.10	roof, lift motor room and access room and ground floor plant / service rooms. (Mains intake and water tank room) Persons working within these areas, such as the roof and access rooms, may not be aware of a fire starting within the exit	
	route areas, such as the roof ventilation room and this would place them at risk of harm as it would impede their escape. Recommended Actions	
10.10	WCHG ought to ensure that the alarm and sounders are live / fully audible within the roof rooms, roof area and ground floor	
10.10	plant rooms / service areas. i.e. If the detection in the lift motor room or adjacent access room was to activate then the sounder on the roof should activate, so as to alert any personnel working in that vicinity. The rest of the floor lobbies, stairs and common areas can remain as silent.	
Ref	RECOMMENDATIONS	
	Observation	
10.5-10.6, 10.10	There is currently no suitable or appropriate means for the fire service to be able to activate an emergency evacuation alarm on designated / selected floors during a serious fire situation.	
	It was stated that the fire service can operate the existing alarm system, but our consultant has considered this as an unsuitable means, as it could not be confirmed that the fire service have access to the control side of the alarm panel and neither is it possible to activate a floor by floor alarm / evacuation, as stipulated in BS 8629, 2019.	
	Following the Grenfell Tower fire in 2017, it has been identified that there is a requirement for the fire service to be able to manually sound an evacuation alarm on selected floors of high rise blocks. This should be achieved by operating designated Evacuation Alert Control and Indicating Equipment, (EACIE) located in the entrance foyer of the building.	
10 5 10 5	Recommended Actions	
10.5-10.6, 10.10	It is recommended that WCHG should install a suitable evacuation alarm system in accordance with current findings following the Grenfell enquiry and that complies with BS 8629, 2019. This should be separate from any existing fire alarm system and ought to have a control box for the sole use of the fire	
	service, located in the main entrance foyer and which allows for a simple floor by floor evacuation to be initiated where required by the fire service. See also the commentary 10.5, 10.6, 10.10 below.	



Ref	COMMENTARY
10.1-10.3	In general the occupants of the purpose built flats should be capable of responding to, evacuating and calling the fire service if the BS 5839, Part 6, LD1 system of fire alarm within their own flat / apartment activates. Where it is known that there are vulnerable residents, it may be necessary to carry out an assessment of the occupants to ensure that this is still the case.
10.1-10.4, 10.12, 10.14	WCHG have previously confirmed that each flat has been provided with a BS 5389, Pt-6, Grade D, LD 1 category of system, with smoke detection in the bedrooms, living areas, lobby area and with a heat detector in the kitchen. This was confirmed and seen in all the flats accessed by our assessor at the time of this FRA. It was also noted and confirmed that the Pt-6 smoke detection within the flats is tested and checked as routine , by the Gas Safety team , at the same time that the flat entrance doors are checked, at least annually. Any faults are rectified and this was confirmed when speaking to several of the occupants of the flats. Example of a smoke detector in a flat and heat detector in a kitchen.
10.3-10.5, 10.10	Article 13 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to ensure the premises are, to the extent appropriately equipped with suitable fire detection and alarms.
	Article 15 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to establish appropriate procedures including safety drills to be followed in the event of serious and imminent danger to relevant persons.
	Article 19 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to provide information to employees about the risk and the precautions to be taken.



10.5-10.6, **BS 8629 Evacuation Control:**

10.10

For Information; One of the recommendations made in the Grenfell Tower Inquiry Phase 1 report published in October 2019 recommends; "that all high-rise residential buildings (both those already in existence and those built in the future) be equipped with facilities for use by the Fire and Rescue Services (FRS) enabling them to send an evacuation signal to the whole or a selected part of the building by means of sounders or similar devices" Such systems should be separate from any fire detection and warning system as recommended in BS 8629. The evacuation strategy should be reverted to a stay-put strategy and the common area fire detection system configured as a silent system under normal operating mode and a separate control box, for **Evacuation Alert Control and Indicating Equipment** (EACIE,) in addition to the fire alarm panel Control and Indicating Equipment, (CIE) be provided for the sole use by the FRS, for manually alerting individual or multiple floors to evacuate, should the need arise during firefighting operations. On activation of a fire/smoke detector within the common area, a signal is sent to the CIE alarm panel in the entrance foyer and then transmitted to an off-site receiving centre (Custodian) where a call is then made to the FRS for a response to the building. **The current alarm system was installed and configured prior to the publication of BS 8629.** It is not in accordance with the recommendations of British Standard 8629:2019, Code of Practice for the Design, Installation, Commissioning and Maintenance of Evacuation Alert Systems for use by the Fire and Rescue Service in Buildings Containing Flats.

The following are extracts as an example from Section 13.2 of BS 8629:2019.

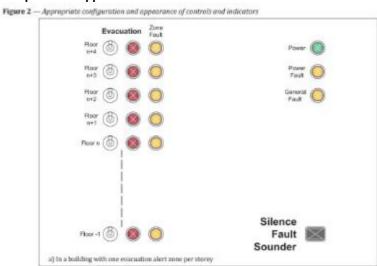
The following recommendations in respect of the siting and security of the EACIE should be met.

a) The EACIE should be sited internally within the building, at an appropriate location for fire fighters responding to a fire in the building, such that controls can be readily operated and indications are readily visible. This should comprise an area within the building in close proximity to the normal fire and rescue service entry point to the building. Where there is a concierge desk or similar, the EACIE should be sited behind this desk, provided that this location is readily accessible to the fire and rescue service at all times.

Figure 1 — Suitable sign for EACIE cabinet



Example of the appearance of the EACIE Control Panel.



Extract from BS 8629, 13.2.1

h) The EACIE should be entirely housed within a cabinet. The bottom edge of the cabinet should be located **at least 1.4m above floor level.** The cabinet should be secure against unauthorized use or casual vandalism and should prevent sight of the controls within.



10.11	A suitable alarm zone plan is provided adjacent to the alarm control panel in the entrance foyer.
10.12-10.13	As previously identified; It was confirmed by the facilities manager from WCHG that the additional break glass call points, alarm sounders and visible warnings installed in the lift motor room and/or on the roof, are now included in the routine testing and maintenance schedules for the building.
10.12-10.14	The common fire alarm system is tested weekly by the staff from Complete Fire Systems Ltd approved contractors. A record of the tests is kept on-site and on WCHG's data systems. The routine maintenance of the alarm system is carried out by an approved contractor (Fieldway Alarm Engineers) every six months and is also recorded. The alarm was last serviced during May 2022.



	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	SIGNIFICANT 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	It was confirmed by WCHG that regular inspections and servicing of the emergency lighting system are undertaken by a qualified electrician from Complete Fire Systems (approved contractors) and the system is also tested monthly by them, with the results recorded in the log book and the WCHG central data systems. The EL system was last serviced during May 2022.		
	For information; It is recommended that the emergency lighting is tested in accordance with BS 5266, Emergency Lighting and would typically include:-		
	 A visual check; A monthly function test of each unit with a "fishtail" test key; An annual test by a suitably qualified and competent person; The test results ought to be recorded in a suitable log book. 		



	12.0 Fire Fighting Equipment, Systems & Fixed Installations	
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?	No
12.3	Are all extinguishers installed and sited in accordance with current guidance?	No
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
	Fixed Installations	•
12.6	Are any fixed firefighting installations provided? (Sprinkler systems, local gas flooding etc.)	Yes
12.7	Are all systems fully operational and under a maintenance programme?	Yes
12.8	Are all security devices functional? (Sprinkler valves, wet & dry rising mains padlocked etc.)	Yes
12.9	Where sprinklers are fitted are all heads clear of obstructions (500mm clear of stock) and functional?	Yes
12.10	Are firefighting shafts with dry or wet mains provided?	Yes



	12.0 Fire Fighting Equipment, Systems & Fixed Installations: Finding(s)	
Ref	SIGNIFICANT FINDINGS	
	Observation	
12.2-12.3	It was seen that there are two water based extinguishers within the mains electrical intake room. (Ground floor) There are no significant Class A or Class B materials in this room and it may be possible for a person/s to incorrectly use these extinguishers on electrical apparatus during an emergency, placing themselves at risk of harm. (There is also a CO2 Ext which is appropriate for the risk) Water and Foam Extinguishers in mains electrical intake room.	
	Recommended Actions	
12.2-12.3	WCHG ought to remove the two water based extinguishers, leaving only the CO2 extinguisher in the mains electrical room.	
Ref	RECOMMENDATIONS	
	Observation	
12.0	Any new draft fire strategies and proposed fire safety precautions to be installed in support of the fire strategy should take account of the recommendations from the Grenfell Tower Inquiry. There are a number of recommendations from the Grenfell Tower Inquiry that apply to this building.	
	See also the commentary below at 12.0	
	Recommended Actions	
12.0	 The following Grenfell Tower Inquiry recommendations should also be considered as part of the overall fire safety improvement works within this premises: The installation of an Emergency Alert System for use by the fire and rescue service. Low-level numbering of flats, floor levels, and emergency exit signage. Firefighting lift inspection (currently being done) and monthly firefighter control function tests. Prepare and regularly updating any PEEPs and include information on vulnerable persons and their PEEPs within the Premises Information Box. (This was confirmed to have been updated recently) Provide fire safety instructions including how and when to evacuate the building in an easily understandable format with regards to the building and knowledge of the occupants. (e.g. Language etc) A check to ensure all fire door self-closers including flat entrance doors are operating effectively. This is being carried out by the Gas Safety Team. (GTI recommends 3 monthly checks, but given the size of task and number of well-managed buildings involved, 12 monthly may be considered reasonable, unless significant defects are regularly found / reported) 	



Ref	COMMENTARY	
12.0	As previously identified; Premises Information Boxes (PIBs) are now provided in the main entrance foyer, which contain information for the fire and rescue service. (See Section 7.3 for more information)	
12.0	Note: The Fire Safety (England) Regulations 2022 will implement the majority of the recommendations above made by the Grenfell Tower Inquiry in its Phase 1 report which required a change in the law. The regulations will come into force on 23 January 2023 following the publication of supporting guidance which is due later in 2022.	
12.1	There are no fire extinguishers within the common / communal areas. (Lift lobbies and stairs etc) 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.	
12.1	Fire extinguishers are provided in the staff areas and plant rooms etc. See the finding above at Section 12.2, 12.3	
12.2-12.3	Article 13 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to ensure the premises are, to the extent appropriately equipped with suitable firefighting equipment.	
12.4-12.5	All the fire extinguishers seen are checked monthly by staff and serviced annually by the approved contractors from Complete Fire Services or Manchester Working. They were last serviced during September 2021. Records are kept on WCHG systems. Record of service on side of extinguishers.	
12.6	As previously identified; It has been confirmed that one Fire Fighting Lift is installed and the fire service informed. The Fire Fighting Lift is correctly indicated. The other is purely a passenger lift. The back up power supply for the Fire Fighting Lift is	

As previously identified; It has been confirmed that one Fire Fighting Lift is installed and the fire service informed. The Fire Fighting Lift is correctly indicated. The other is purely a passenger lift. The back up power supply for the Fire Fighting Lift is located inside the sprinkler tank room, but this was not accessed. (See limitations in Section 1.0) The lift is tested weekly along with the fire alarm.

Fire Fighting Lift override switch in entrance foyer.



12.6-12.8

A BS 9251 sprinkler system has been installed. In each flat, there are concealed sprinkler heads located in the hallway, each bedroom, the lounge, any enclosed balcony and the kitchen. In addition, there are also sprinkler heads located in the ground floor plant areas. There are control valves on each floor located in a secure cupboard in each lift / flat lobby. A pump and water tank (Approx 8000 Lts) for the sprinkler system have been provided in a separate secure building to the side of the block. The system is regularly maintained and serviced by an approved contractor. (Argus Fire)

Sprinkler control valves within the lift lobbies inside secure cupboards.





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. The inlet is located adjacent to the main entrance. The dry rising main is both pressure tested and visually inspected annually, as per BS 9990: 2015, with six months between the two visits. The tests and inspections are carried out by an approved contractor. (Complete Fire Services) WCHG have confirmed that the last pressure test took place during January 2022. Records are kept on WCHG systems.

Records of testing inside the inlet door and an outlet in a common lobby.







13.1	Do signs indicate all final exits?	Yes
		162
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?)	No
13.4	Are the signs the correct size for the areas where they are located?	No
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.?	Yes
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



	13.0 Fire Safety Signs and Notices: Finding(s)
Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	Observation
13.2-13.4, 13.13	Wayfinding Signs: Although some 'Wayfinding' signage has been installed on all floors, which would help to allow the fire service to identify the floor level they are on. These provisions were not considered to be in keeping with current guidance by our assessor. It may be difficult for the fire service to identify the floor levels during an emergency situation or whilst working in smoke for example. For Information:- Following the death of two firefighters in a flat fire at Shirley Towers, Hampshire the Coroners issued a number of recommendations through a Rule 43 Letter. The coroner recommended that there should be an obligation to: • provide signage to indicate floor levels both in stairwells and lift lobbies in high rise premises, to assist the emergency services; • ensure that signage indicating flat numbers and emergency exists in high rise premises are placed at a low level to increase visibility in smoke conditions.
	Whilst there is no legal duty at present for the responsible person to provide such signage, it is recommended that simple signage in the form of a number is placed to indicate each floor level. As replacement and redecoration takes place in the common areas, exit signs onto the stairs and floor level signs in lift lobbies and stairs should be included / fitted at low levels. It should be noted that when the signage is installed, it becomes a duty to maintain it. An example of wayfinding signage together with floor level numbering to aid firefighters can be found at:- Wayfinding Signs
	Recommended Actions
13.2-13.4, 13.13	WCHG ought to install appropriate 'Wayfinding' signs to the stairs and lift lobbies. The signs should be in keeping with the current guidance and also be installed at both low and high levels.
	Note: Signage should conform to the specifications and location set out in paragraph 15.14 to 15.16 of Approved Document B Volume 1 2019 edition incorporating 2020 amendments.



Ref	COMMENTARY	
13.0	Appropriate "In the event of fire Do Not use this lift " notices are located on each landing adjacent to the lifts. Fifth Sixth Sevel Eight Ninth Tenth Eleven Twelfth	
13.0	As previously identified; Adequate signs are provided both on the stair landings and in the lift lobbies, opposite the lift doors, that indicate the floor level and the flat numbers. Our consultant did not consider there to be a need to install further signs on the rear of the lobby access doors, as these would be of little benefit. Access doors are often wedged in the open position by fire fighters during an emergency or fire fighting operations. However, see the finding and recommendation above regarding Wayfinding signs. Examples of floor level signs on the stairs and lift lobbies.	
13.6	As previously identified; The old version of the fire action notice, giving incorrect advice, has been removed.	
13.6	A suitable fire action notice / fire plan is on display in the resident's notice board.	
13.11	The premises is now operating a Stay Put / Stay Safe policy, but if evacuation is necessary, the assembly point is designated as the main car park. A fire assembly point sign is not necessary.	
13.12	Suitable "No Smoking" signs are now on display in the foyer area and various locations throughout the building, such as the lift lobbies, as required by The Smoke Free (Premises and Enforcement) Regulations 2006. The only smoking allowed is within the residents own flats. There is No Smoking allowed within any communal area or circulation space.	



	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?	No	
14.4	Where necessary has any action been taken to prevent reoccurrence?	No	
14.5	Have there been any incidents of deliberate ignition by employees or arson attacks?	No	
14.6	Do all staff understand the need to report any potential fire hazards?	Yes	
14.7	Has a person(s) been given the overall responsibility for fire safety related matters and management?	Yes	
14.8	Have the fire service inspected the premises within the last 12 months?	Yes	
14.9	Were any recommendations, enforcement or prohibition notices served?	No	
14.10	Have all recommendations and notices been complied with?	N/A	
14.11	Are all important documents that may affect business continuity stored in fire resisting containers?	Yes	
14.12	Is adequate access provided for fire service vehicles in the event of an emergency?	Yes	

14.0 General Fire Safety Procedures: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
14.1-14.2	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.
14.3-14.4	All false, accidental and malicious actuations are recorded. System faults are corrected as soon as possible by the alarm contractor. Accidental and malicious actuations are passed to the Housing Manager who will arrange for the appropriate actions to be taken. N.B. It was stated this time that there had been several false / malicious alarm activations caused by the MCP (Manual Call Points) being broken / activated, that are located in the access lobbies, between the stairs and the lift lobbies. See Section 10.0 for advice and details.
14.7	A combined team from the departments within WCHG have responsibility for managing the fire safety of this premises, but the Chief Executive, for Wythenshawe Community Housing Group, has the overall responsibility for fire safety related matters and management.
14.8	It was stated that the local fire service make 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 carry out some home fire safety checks etc. 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 findings may become enforceable if not actioned in a reasonable period of time.
14.11	All important documents and data regarding the premises is stored off-site on the WCHG systems. There is some information regarding the residents now stored in the PIB in the main entrance foyer.
14.12	The Fire Service has been provided with access fobs for all WCHG high rise blocks.



	15.0 Fire Safety Management	
15.1	Are there an adequate number of 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	Have all staff been trained in how to call the Fire Service, use of fire extinguishers, evacuation procedures and basic fire awareness?	Yes
15.3	Do all new employees receive basic fire procedure and induction training on the date of appointment?	Yes
15.4	Are records of fire safety training kept?	Yes
15.5	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
15.6	Is a "permit" to work procedure in place for contractors etc.?	Yes
15.7	Where an alterations notice is in force has the enforcing authority been informed prior to any significant changes being made?	
	Fire Marshals & Fire Plans	
15.8	Are fire marshals required to take charge of a fire incident and liaise with the Fire Service where required?	No
15.9	Is there a list of fire marshals displayed in all locations where required?	N/A
15.10	Are systems in place to provide identification for fire marshals during an emergency where required?	N/A
15.11	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
15.12	Do the premises require a fire plan in order to evacuate?	Yes
15.13	Are there clearly defined written procedures to be followed in the event of a fire in the form of an emergency plan?	Yes
15.14	Is a fire plan displayed throughout the premises where required?	Yes
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	SIGNIFICANT 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.	
15.2-15.4	There are no permanent staff based in the block. WCHG have previously confirmed that adequate fire safety training is in place, both for induction and repeat training for all staff that work at the premises. Appropriate training records are kept by the HR Department. This was confirmed by the facilities manager. However no individual staff training record was observed by our consultant during the course of his visit.	
15.5-15.6	WCHG have systems in place to control new work, repairs and alterations to ensure that no fire hazards are introduced into the premises. They also have a permit to work system in place for any contractors and for roof access etc. For Information; As fires are more frequent during refurbishment and/or alteration, it is important that any additional risks are evaluated, particularly when the building is occupied. Contractors have a duty to carry out a risk assessment and inform the client of any significant findings and of the remedial measures identified. Their impact on the building should be closely monitored with regard to (amongst others), damage to party walls, and the introduction of sources of ignition and combustible materials, the blocking of exit routes or fire doors being wedged open etc.	
15.8	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.	
15.11	The premises is now operating a 'Stay Put' / Stay Safe policy for the flats, but during an evacuation the main car park can be safely used as an assembly point.	
15.12-15.14	The fire action notice on display is detailed enough to act as a fire plan for the common areas and information regarding the Stay Put / Stay Safe evacuation procedure for the flats has been given to each occupant, by providing letters and information to the flats and the procedure is also displayed in the notice board.	
15.15	There are "Out of hours" Emergency Procedures and Emergency Evacuation Procedures in place with nominated WCHG staff providing cover.	



	16.0 Fire Emergency Plan		
16.1	Do the premises have a fire procedure/emergency plan and is it suitable for the numbers of staff and the processes carried on within the premises?	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 /emergency plans complement each other?	N/A	

	16.0 Fire Emergency Plan: Finding(s)
Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
16.1	WCHG have advised tenants to contact them where there may be a change in their circumstances or deterioration in health and mobility, so as to assist them with their safety. Neighbourhood officers collect details of any residents who would require assistance during an evacuation by GMFRS. See the information in Section 7.0 regarding the PIB.
16.1-16.2	The premises were constructed as purpose built flats complying with the Building Regulations in force at that time. They incorporate compartmentation between each flat and between the flats and the escape route and this supports a "Stay Put" policy. However, the findings in Section 9.0 should be noted and actioned. WCHG have in place a "Stay Safe" policy and have informed all the residents in their high rise residential buildings, via a newsletter, of the action, they should take on discovering a fire or on hearing the Evacuation Alert System, when it may be activated by the Fire and Rescue Service. WCHG has also produced a comprehensive fire action notice which includes the actions to be taken on discovering a fire or on hearing the Evacuation Alert System. (See Section 10.0) This notice is displayed in the entrance area to the premises, within the resident's notice board.
16.1-16.2	The fire resisting construction of the flats / apartments, along with the sprinklers, means an outbreak of fire should be able to be contained within the flat or room of origin. Other residents are in a reasonably safe place within their own flat while a fire in an adjacent flat is dealt with. Therefore, it is the opinion of our assessor that the residential parts continue to be suitable for a 'Stay Put' / Stay Safe policy. However, there are several findings within this report that still require urgent attention and actioning, paying particular note to Sections 9.0 & 10.0 It is not implied that those not directly involved who wish to leave the building should be prevented from doing so. Nor does this preclude those evacuating a flat that is on fire from alerting their neighbours, so that they can also escape if they feel threatened.
	It is a requirement of the Fire Safety Order that there should be a suitable emergency plan for the premises. The Responsible Person should convey this information to tenants in several ways. (e.g. through residents' handbooks / notice or poster) An example fire action plan is provided below for information and this should be communicated to each resident/s within the block. Residents ought to have a clear understanding of what actions to take should a fire situation change and they need to evacuate the building.



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, Shawcross Lane, 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:

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 required fire resistance, ineffective fire doors, insufficient or complete failure of emergency lighting or fire alarm systems.
Priority 2 (P2)	A lesser breach of the Fire Safety Order which if not resolved would 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:	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:	Logbooks not completed or up to date, fire extinguishers not wall mounted.
	·

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 is given an overall 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

LIKELY CONSEQUENCES OF FIRE					
	Subjective Fire Risk Rating	Slight Harm	Moderate Harm	Serious Harm	
LIKELIHOOD OF FIRE OUTBREAK	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

FRA Ref	Hazard or Defect	Action Required	Hazard Priority	Risk Rating	Action By	Review Date	Contractor Completed
9.1	to Flat 50 had yet to be fire sealed and fitted with architrave. A gap could be seen between the frame and the wall.	Ensure that the gap between the frame and wall to Flat 50 is appropriately filled and sealed with suitable fire resisting materials and the architraves correctly replaced.	P1	Substantial			
9.1	common area and the laundry / store rooms could not be confirmed as of a suitable fire resisting standard. Additionally, the inner door to the laundry room was kept open.	the door with an appropriate type. (FD30s) This may involve contacting the manufacturers for advice etc. The inner door to the laundry room should also be fitted with a self-closing device and the door allowed to fully close when persons enter or leave the room.		Moderate			
9.1	large gap at the top of the wall, on the 12th floor, above Flat 62, that goes through to the flat, possibly where the wall has been damaged.	Ensure that the hole / gap is completely made up and sealed by using suitable fire resisting materials that will afford the same level of fire resistance as the surrounding wall.		Substantial			
9.1-9.2	architrave around the door to the lift motor room, on the stair landing of the 12th floor, was missing on the	Appropriately seal and make up any holes or gaps between the frame and the wall with fire resisting materials and replace the architrave and fix into place.	P2	Moderate			
9.1, 9.5	There is a hole or holes in the fire resisting board,	Ensure that the holes are correctly made up and sealed by using appropriate fire resisting materials.	P1 - previously identified	Moderate			
9.1, 9.5	entrance foyer, where cables pass through above	is fully sealed and made up by using appropriate fire resisting materials that will	P1	Moderate			
9.2	been kept open and not	Inform the cleaners / caretakers that the door should be kept firmly closed when not in use or when the room is empty.	P1	Moderate			
9.3	It was seen that the door to one of the stores within the laundry area has not been fitted with any intumescent cold smoke seals and the	Install suitable intumescent		Moderate			
9.5		Make up / fill and seal the hole with appropriate fire resisting materials.	P2	Moderate			



9.13	highlighted an issue with the unknown external wall system (EWS), window /	The arrangements that are in place to replace any EWS, window spandrel panels and balcony panels should be implemented in a timely manner as planned.	previously identified	Moderate	Victoria Finn	
9.13	previous assessments, consideration was given as to the need for interim measures to be taken during any works that take place involving the external wall system and the vertical panels that form the	reference to Section 9.13. They will then be able to form an opinion regarding the adequacy of existing fire safety measures and any need for further Interim Measures.		Moderate	Mike Richmond	
9.14-9.15	several combustible items and furniture stored	removed as soon as possible and that any such temporary storage is place	P1	Moderate		
10.3-10.5	fire alarm call points (MCPs) are provided within every landing access lobby, between the stairs and lift		P2	Moderate		
10.10	The common alarm system throughout the building has been reconfigured to act as a silent system, this may include the roof, lift motor room and access room and ground floor plant / service rooms. (Mains intake and water tank room)	sounders are live / fully audible within the roof rooms, roof area and ground floor plant rooms /	P1	Moderate		
12.2-12.3	It was seen that there are two water based extinguishers within the	Remove the two water based extinguishers, leaving only the CO2 extinguisher in the room.	P2	Moderate		



19.0 Recommendations

FRARef	Observation	Recommended Action	Risk Rating	Contractor Completed
10.5-10.6, 10.10	There is currently no suitable or appropriate means for the fire service to be able to activate an emergency evacuation alarm on designated / selected floors during a serious fire situation. This should be achieved by operating designated Evacuation Alert Control and Indicating Equipment, (EACIE) located in the entrance foyer of the building.	WCHG should install a suitable evacuation alarm system in accordance with current findings following the Grenfell enquiry and that complies with BS 8629, 2019. See the full details in Section 10.5, 10.6, 10.10	Moderate	
12.0	Any new draft fire strategies and proposed fire safety precautions to be installed in support of the fire strategy should take account of the recommendations from the Grenfell Tower Inquiry.	See the full details and recommendations in Section 12.0 of this report.	Moderate	
13.2-13.4, 13.13	It may be difficult for the fire service to identify the floor levels during an emergency situation or whilst working in smoke for example. See full details in Section 13.2-13.4, 13.13	WCHG ought to install appropriate 'Wayfinding' signs to the stairs and lift lobbies. The signs should be in keeping with the current guidance and also be installed at both low and high levels.	Moderate	

The recommendations above are issues which have been observed by the Total Fire Group Ltd Consultant and which in their opinion do not constitute a breach of the Regulatory Reform (Fire Safety) Order 2005 which deals with life safety in relation to all relevant persons. The recommendations are designed to assist the responsible person in identify areas where the required life safety systems are showing signs of deterioration, fair wear and tear etc. so that the business can budget for future replacements, repairs etc. In addition, there may be areas where the consultant believes the business is vulnerable from fire in terms of property protection or business continuity and therefore has included recommendations for the client to consider or investigate further.

IT IS FOR THE RESPONSIBLE PERSON TO DETERMINE WHETHER THE USE OF THE PREMISES, THE NATURE OF THE OCCUPANTS, THE PROPERTY PROTECTION, DAY TO DAY OPERATIONS AND THE FIRE SAFETY MANAGEMENT WOULD BE ENHANCED BY THE IMPLEMENTATION OF ANY RECOMMENDATIONS. THEY DO NOT CONSTITUTE A SIGNIFICANT FINDING.

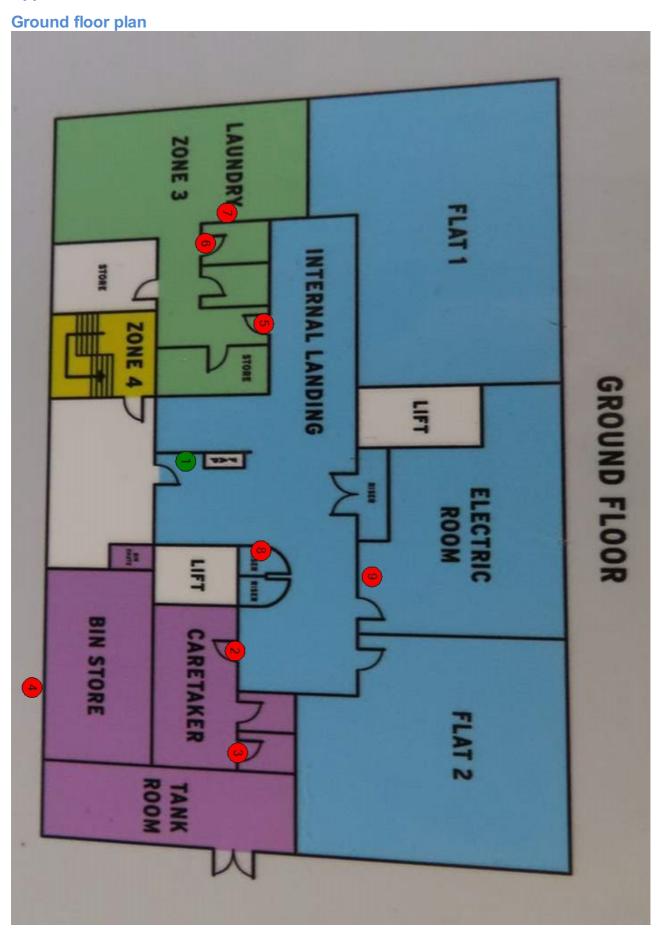


20.0 Commentaries

FRA Ref	Observation	Recommended Action	Risk Rating	Contractor Completed
7.3	· ,	Therefore, WCHG should ensure that the information stored in the PIB is kept up to date and regularly reviewed.		



Appendix





1 Persons at Risk Audit - 7.3



2 The Confinement of Fire - 9.1, 9.5



3 The Confinement of Fire - 9.2





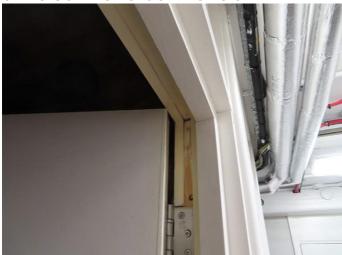
4 The Confinement of Fire - 9.14-9.15



5 The Confinement of Fire - 9.1

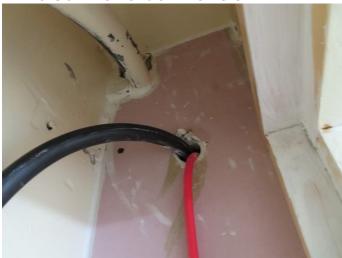


6 The Confinement of Fire - 9.3





7 The Confinement of Fire - 9.5



8 The Confinement of Fire - 9.1, 9.5

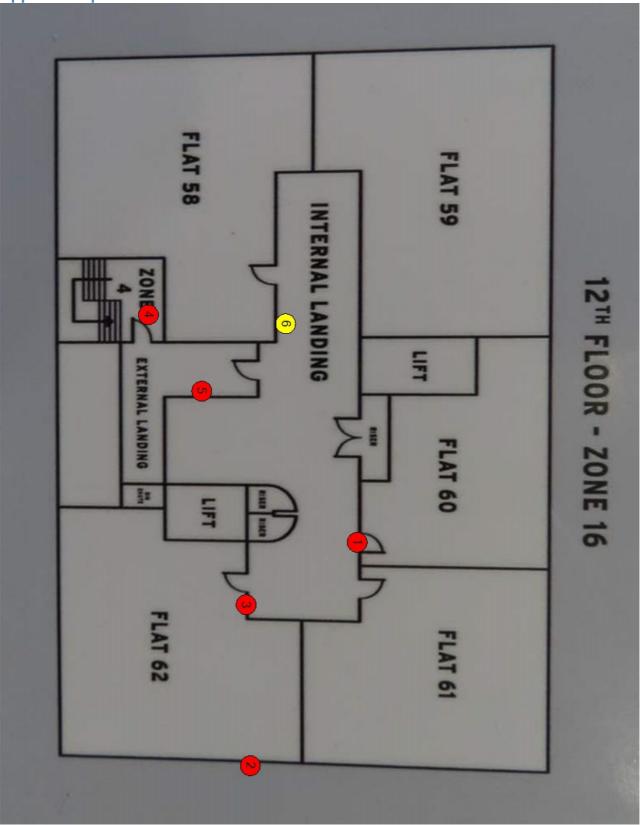


9 Fire Fighting Equipment, Systems & Fixed Installations - 12.2-12.3





Upper floor plan





1 The Confinement of Fire - 9.1



2 The Confinement of Fire - 9.13



3 The Confinement of Fire - 9.1





4 The Confinement of Fire - 9.1-9.2



5 Fire Alarm System - 10.3-10.5



6 Fire Safety Signs and Notices - 13.2-13.4, 13.13



Roof plan

