



TOTAL FIRE GROUP LTD

Fire Risk Assessment

Conducted at:

Brookway Court Bideford Drive Wythenshawe Manchester M23 0GL



16 June 2022







Certificate Number	LS	0244301
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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	CHEDULE		
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		
	Brookway Court, Bideford Drive, Wythenshawe, Manchester, M23 0GL		
	Part or parts of the premises to which the fire risk assessment applies		
	The common parts only.		
Part 4	Brief description of the scope and purpose of the fire risk assessment		
	In compliance with Article 9(1) of the RRFSO 2005.		
Part 5	Effective date of the fire risk assessment	16/06/2022	
Part 6	Recommended date for review of the fire risk assessment	16/06/2023	

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	24/06/2022

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

Brookway Court, Bideford Drive, Wythenshawe, Manchester, M23 0GL

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 Thursday, 16 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:

The following fire fish dissessificate has been conducted on behalf of
Wythenshawe Community Housing Group Limited Wythenshawe House, 8 Poundswick Lane, Wythenshawe, Manchester, Greater Manchester, M22 9TA
and relates only to the premises of:
Brookway Court, Bideford Drive, Wythenshawe, Manchester, M23 0GL
Responsible person(s):
Wythenshawe Community Housing Group (WCHG).
Person(s) consulted and landline contact number:
Diane Burrell (Facilities Manager). 0161 946 9191.
Fire Risk Assessor:
Luke Saul BSc (Hons), AlFireE, MIFSM, Tier 3 Nationally Accredited Fire Risk Assessor N438
Audited by:
Mark O'Meara DMS, Eng Tech, MIFireE, MIFSM, Tier 3 Nationally Accredited Fire Risk Assessor 0143
Date fire risk assessment was conducted:
Thursday, 16 June 2022
Time:
12:45.
Date of last FRA or FRA Review (if known)
21 Jun 2021
Suggested data for next review
Suggested date for next review:
June 2023

Fire risk assessment limitations:

A type 3 (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 to flats 39 (seventh), 57 (tenth), 70 (twelfth), 83 (fourteenth) and 91 (fifteenth).



Access was available to the lift motor room, the old (no longer in use) caretaker's area, the resident's laundry, the bin room, tank room, pump room, meter room and the communal boiler room. A large sample of the service risers (minimum of 1 per floor) and a sample of areas above the false ceilings were also accessed.

There was no access available to many of the cupboards containing electricals which adjoined one of the lobbies serving flats on each floor. Although approximately half of these could be accessed, the other half had different locks fitted which our assessor did not have the keys for, therefore could not be accessed. Although our assessor was able to gain access to the roof, there was no access to the building (which appeared to be for radio/signal purposes) which was located on the roof. Some boarded areas in the common areas could not been seen behind without performing a destructive fire risk assessment, which was not undertaken at this time.

The assessment of the fire performance of the external wall construction and 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 assessments. In this statement, our consultant has followed the Fire Industry Association (FIA) Guidance Note June 2020 (specifically Section 4.6).

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.

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:

17 including the ground floor.

2.2 Approximate building footprint:

475m²

2.3 Details of Construction and Premises:

Brookway Court is a high rise residential block built in 1971, which contains a total of 94 self-contained flats. The premises is of concrete frame construction with brick infill panels and a curtain wall glazing which includes spandrel panels (work is currently being undertaken in relation to these spandrel panels, as detailed in Section 9.13). Floors and walls are concrete and the premises has a flat roof which is covered with a felt type material. Each of the upper floors, aside from the very top (sixteenth) floor, has the same layout. This consists of a central lift lobby containing 2 lifts, off which are lobbies providing access to 3 flats either side. In one of the lobbies is a sprinkler stop valve and in the other lobby is access to the refuse chute room and an electrical cupboard (however many electrical cupboards could not be accessed as stated in Section 1). There is a dry riser outlet on each floor, located within the lift lobby. The single staircase serving all floors is also lobbied from the lift lobby on each floor level. The sixteenth floor is of a slightly different arrangement. This floor is not served by either of the lifts, instead being served by a continuation of the single staircase. To account for this, the staircase itself has been lobbied at fifteenth floor level. The lift motor room has 2 access points, either at the very head of the single stair at sixteenth floor level or via a door from the lobby serving flats on the sixteenth floor. The tank room adjoins the lift motor room, as does parts of the roof. The ground floor is also of a different layout, this consisting of a lift lobby off which are 2 flats, a laundry and access to a series of short corridors leading to an old caretaker's office, meter room and pump room. The refuse and boiler rooms are externally accessed at ground level. Final exits from the building for the residents are provided from the base of the single staircase and from the lift lobby at ground level. An additional exit is located to the rear of the pump room however is not for resident use.

A number of resident flats were accessed (as specified in Section 1) and the layout of these was the same, consisting of an entrance door opening into a hallway, off which were 2 bedrooms, a bathroom, store cupboard and a living room. The kitchens were inner rooms to the living rooms. Enclosed balconies were accessible from living rooms. Each flat was provided with a BS5839-6 Grade D fire alarm system to an LD1 standard of coverage. A BS5839-1 type heat detector was also observed as installed in each of the flat entrance hallways and this has been confirmed to be part of the common area fire alarm system which has been reconfigured to be silent and to function as an emergency alert system for use by the Fire and Rescue Service. Also extending throughout each flat was a sprinkler system, which appeared to be fed by the tanks on the sixteenth floor tank room and the ground floor pump room. This sprinkler system was also observed to serve some areas such as the laundry and pump room. Emergency lighting is installed throughout the common areas, including plant.

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:

188, based on an assumption of two persons per flat.

2.6 Approximate maximum number of employees at any one time:

Limited to occasional visits by cleaning and maintenance staff.



2.7 Maximum number of members of the public:

Limited to visitors to the residents.



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

2.9 Fire Loss Experience

None reported.



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.

Storage was identified in the common areas and a number of deficiencies relating to compartmentation were observed. Although such deficiencies were noted, the general standard of compartmentation present was high. A comprehensive, silent BS5839-1 fire alarm system is installed within the building which is monitored and this will enable the swift summoning of the Fire Service. The overall risk to life is considered to be moderate.

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

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

Risk to Property: Tolerable

As alluded to above, some deficiencies have been identified regarding compartmentation, however the standard across the premises is high and is supplemented by the provision of a comprehensive fire alarm system which will enable early summoning of the Fire Service. For these reasons, the risk to property is considered to be tolerable.

Risk to Business Continuity:

N/A.

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



	4.0 Dangerous, Flammable, Combustible Materials & Substance	es
IDENTIF	/ING 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?	N/A
4.7	Where flammable stores are provided, are they adequately ventilated and correctly marked?	N/A
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	4.0 Dangerous, Flammable, Combustible Materials & Substances: Finding(s)		
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 are stored or used inside the premises.		



	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 the Fire Risk Assessment, the common areas were free from furniture.	



	6.0 Heating and Electrical Appliances	
6.1	Are portable or fixed heaters used?	No
6.2	Are all heaters fitted with suitable guards and located in positions away from combustible materials?	N/A
6.3	Are all heaters free from naked flames?	N/A
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	Ref SIGNIFICANT FINDINGS		
	None.		
Ref	RECOMMENDATIONS		
	None.		



Ref	COMMENTARY
6.0	Isolation points for the lifts are located in the lift motor room.
6.1	There is no heating provided in the communal areas. The flats are heated by a communal heating system, the boilers for which are located in an externally accessed boiler house. Water heating vessels are located within the resident flats.
6.5	Portable appliance testing (PAT) is regularly carried out on appliances that are the responsibility of WCHG. It is highlighted that not all electrical devices need to be the subject of an annual PAT. The Health and Safety Executive (HSE) advocates a proportionate, risk based approach to the maintenance of portable electrical appliances within the workplace. This guidance is simple and easy to follow and can be found on the HSE website "Maintaining Portable Electrical Equipment in a low risk environment.
6.6	WCHG have informed our assessor that servicing for the electrical installations for the building was last carried out on 11/05/2021. All records and certification relating to such servicing is stored on WCHG systems.
6.9	It would be impractical to turn off/isolate many of the appliances in use within the building when the area is unoccupied, such
6.16	as in plant and laundry spaces. Fire door
6.20	All gas installations have safety checks carried out on a 10 month rolling programme of work. The lifts are serviced on a monthly basis. Laundry equipment is also maintained under a service contract. All records relating to this testing and maintenance is held centrally on WCHG systems.
6.21	The lightning protection system is tested on an annual basis, with this last having been carried out in 04/2022. Servicing
6.22	records are held on WCHG systems.
6.22	No other sources of ignition were identified during this assessment and there are no solar panels fitted to this building.



	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.	<u> </u>



Ref	COMMENTARY
7.1, 7.3, 7.8	The building is occupied as general needs flats, therefore fire drills and associated staff procedures are not required. Residents of the flats may have a range of disabilities but will be familiar with the means of access and egress which is used on a regular basis. New residents should be encouraged to have a home fire safety check by the local authority Fire and Rescue Service where it is considered that they may be vulnerable in the event of a fire. Specific measures regarding residents with any disabilities identified can be discussed and implemented following the home fire safety check in conjunction with relevant local community services. Where it is known that persons cannot self-evacuate, further fire safety measures may be needed.
7.3	WCHG communicated to our assessor that they currently have a means of identifying vulnerable persons within the building, detailed as follows: An email is sent out to all tenants using the email address provided by the tenant to WCHG, enabling them to self-identify as vulnerable. For persons who have not provided WCHG with an email address, a letter is sent. Where neither an email nor a letter is replied to, WCHG knock on resident doors. Finally, where none of the former means of contact have been successful, WCHG set a response deadline. Personal information relating to the residents is logged via a questionnaire within the email/letter and responses are held on 'Orchard'. WCHG confirmed that where a vulnerable person is identified via completion of the questionnaires detailed above an 'EVAC' report is completed. If unable to self-evacuate from their flat, a vulnerable tenant is offered an online rehousing application with a view to moving to a more suitable premises/location. Managers receive updates daily regarding any vulnerable persons and information relating to vulnerability is held on a tenants file. The Fire Service are also made aware of all tenants who are in need of assistance in the event of an emergency.



7.3, 7.5, 7.7 Identification of vulnerable residents in purpose-built flats with regard to escape provision:

As part of the fire safety management plan, it is critical that 'adequate provisions' are provided for the evacuation of any disabled users. The fire safety for the building needs to take into account the disabled occupants who may have access to the premises. Purpose-built flats are afforded with enhanced levels of compartmentation and these enhanced levels of fire compartmentation are generally considered 'adequate provisions' that allow occupants to remain in the non-fire affected compartment in the event of a fire elsewhere. Any failings discovered in the fire compartmentation jeopardize the evacuation strategy either locally to a flat/floor or within the whole building and protection measures would need to be reviewed immediately. There is no requirement under the Fire Safety Order for the Responsible Person to consider the means of escape from within a person's flat which is considered a 'private dwelling', unlike the duty for protection required within the common parts for all persons. A flat occupied by any person, including a vulnerable or disabled person, is separate from this duty if they are unable to self-evacuate from a fire affecting their flat. Irrespective of the legislation, two distinct evacuation stages are considered;

- 1. Evacuation from the dwelling on fire NFCC Specialised Housing Guidance is intended to assist Responsible Persons for purpose-built blocks of flats where disabled and vulnerable persons are housed, and the recommendations in the guide go beyond the scope of the legislation. The guide recommends measures for the protection of vulnerable residents from a fire within their own flats. A disabled person living in a block of flats is best served with a Person-Centred Fire Risk Assessment (PCFRA), which may or may not lead to a Personal Evacuation Emergency Plan (PEEP), but, even if it does where trained persons are able to assist, the PCFRA will achieve far more in terms of the safety for a disabled person from the risk of fire in their own flat than focusing purely on the much more narrow issue of a PEEP. In all cases, it is likely to lead to a Personal Rescue Emergency Plan (PREP).
- Moving through and evacuation from the common parts Many persons with mobility impairment will be able to leave their own flat but may be unable to evacuate from the building (e.g. because of difficulty in negotiating stairs). In this connection, two matters need to be considered, namely relatively safe refuges and the use of existing lifts subject to the assessment of risk.

Following consultation with the residents:

- Every resident who voluntarily self-identifies to the Responsible Person as unable to self-evacuate should be subject to a PCFRA. This may lead to a PEEP or a PREP.
- The assessment should differentiate between a person who is unable to self-evacuate from their flat and a person who is able to get out of their flat but is unable to evacuate from a relatively safe area (staircase or refuge).
- Where a PEEP is the outcome of a PCFRA it should look to implement building safety measures where reasonably
 practicable to ensure that those with impairments have a plan for evacuation and should only require rescue in
 circumstances where this main plan cannot be implemented. It should not be implied that a successful evacuation will
 always be possible, and rescue is never needed; in some cases of severe disability, evacuation or rescue by FRS will
 be the only option.
- Responsible persons should add information to the Premises Information Box (PIB) that they are aware of, for example, where they have been notified about a person with mobility impairments who has not self-declared or has refused a PCFRA/PEEP.
- Clarity may be necessary on whether the Responsible Person would be fulfilling the duties under the Fire Safety Order if all vulnerable persons have not been considered and given the opportunity to self-declare mobility impairments.
- The PIB rescue information for the fire and rescue service is not the same as a PCFRA/PEEP; this applies even where a PCFRA/PEEP is declined since the amount of information required can vary and the PEEP/ PCFRA is particular to that person.
- The PCFRA/PEEP should feed into a review of the premises fire risk assessment. If the use of refuge areas is to be relied on as part of a PEEP, details about the method of communication from the place of safety should be included.
- PCFRA/PEEP should be reviewed as soon as practicable if the resident indicates a change in circumstances to the Responsible Person. A regular review of PCFRA/PEEPs is also required to mitigate the risk of changes to circumstances going unnoticed because residents have not updated the Responsible Person.

It is important that the Responsible Person understands that any PEEP, PREP, or PCFRA may require the building's Fire Risk Assessment to be informed and updated.

Personal plans for fire emergencies:

PEEP (Personal Emergency Evacuation Plan) - Is the term normally understood for a generally non-residential building to provide a plan separate and in addition to the normal fire plan which may include assistance to evacuate from the building by trained persons available at all times that the disabled person is expected to be in the premises. This type of plan is generally ineffective and not recommended in purpose-built blocks of flats that do not have permanent staff on site. Reliance on friends and non-resident family members as part of a PEEP may place a vulnerable persons or their nominated assistant at greater risk of harm as they may not be available at the critical time or be sufficiently trained to make a suitable dynamic assessment of the risks presented.

PCFRA (Person Centred Fire Risk Assessment) - The person-centred approach, based on a PCFRA, relates to the safety of residents who are at high risk from fire in their own accommodation; as such, this risk assessment and measures identified by it are outside the scope of the Fire Safety Order. The assessment is designed to reduce the potential fire hazards as far as possible depending on the personal circumstances of the disabled person, thus reducing the risk of fire, and may also include a PREP.

PREP (Personal Rescue Emergency Plan) - This term is born out from a PCFRA and is generally where a disabled person is in need of rescue by the Fire and Rescue Service when all other risk reduction measures have failed. For an outbreak of fire elsewhere other than the disabled person's flat the probability of implementing such a plan is greatly reduced. This is unlikely to arise unless there are building failures, such as loss of compartmentation.



7.10-7.11	Contractor access is controlled by WCHG. A signing in book is not necessary. Visitors to the flats are the responsibility of the
	tenants. Where necessary, health and safety information relating to this building may be provided by WCHG to attending
	contractors, prior to them accessing the premises.
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.	No
8.7	Do any inner rooms exist?	No
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?	N/A
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
	Observation
8.6	2. 3. 4.
	Storage was observed within the common areas, specifically in the following locations:
	 Bike and tree by flat 63 (eleventh). Shoe rack outside flat 41 (seventh). Pram by flat 15 (third). Bike by flat 3 (first).
	Where there is such storage this may encourage additional storage, may pose a slip/trip hazard and may contribute to the development of a fire which has spread onto the escape route, all of which may place persons at risk of harm.
0.6	Recommended Actions It is recommended that arrangements are made for the storage to be removed and for recidents to be advised/educated.
8.6	It is recommended that arrangements are made for the storage to be removed and for residents to be advised/educated regarding storage in the escape routes accordingly.
Ref	RECOMMENDATIONS
	None.
L	



COMMENTARY Ref 8.5 A door onto the roof of the building provides a means of permanent ventilation from the lift motor room. There are also some manually openable windows in the room. 8.5 Small permanent vents are provided in the lobbies serving flats on each floor level. Such vents are also provided in the refuse chute rooms 8.5 Permanent ventilation is provided at the absolute head of the staircase on the sixteenth floor. Permanent ventilation is also provided at each level of the staircase moving downwards. This is required, particularly at fifteenth floor level, due to the staircase itself being lobbied at fifteenth floor level. 8.5 Steps on the internal staircase are nosed, ensuring clear visibility for those using them. 8.6 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. 8.10, 8.12 From the internal side, flat entrance doors accessed were provided with key operated locks. 8.11 Final exit doors are used regularly by residents and it can be reasonably expected that any fault would be reported. Such doors are also checked by a member of staff on a weekly basis and this is recorded electronically. 8.16 At each floor level, access from the lift lobbies into the lobbies serving flats is via electromechanically secured doors. On the escape side (back into the lift lobbies) these doors are overridden via use of push pads.



8.17-8.18



Where electromagnetically secured doors are installed within the premises (e.g. final exits, external exit from forecourt, laundry), these were observed to be accompanied by suitable green box emergency overrides.



	9.0 The Confinement of Fire	
9.1		No
9.2	Are all escape routes and compartments protected by fire resistant walls and doors where required?	No
9.2 9.3	Are all fire doors self-closing, kept locked shut where appropriate and in good condition?	1
9.3 9.4	Are all fire doors fitted with smoke seals and intumescing strips where required?	Yes
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?	Yes
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?	N/A
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?	Yes
	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?	No
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



	9.0 The Confinement of Fire: Finding(s)
Ref	SIGNIFICANT FINDINGS
9.1	Observation A security door is fitted between the ground floor lift lobby and the laundry room. It could not be confirmed whether this will provide sufficient fire resistance and, where this is the case, persons may be placed at risk of harm. Recommended Actions
9.1	The door to the laundry should be to FD30s standard and it is recommended that this standard is confirmed or remedial works are carried out to ensure such a standard is provided. Observation
9.1-9.2	Observation
	The flat entrance door to flat 42 was boarded over at the time of the assessment. Where fire doors do not provide the required standard of fire resistance (30 minutes) to the adjoining escape route, persons may be placed at risk of harm.
0400	Recommended Actions
9.1-9.2	It is recommended that a competent person attends site to replace this door with a new FD30s self-closing fire door set or repair to meet this standard.
	Observation
9.1-9.3	
	It is observed that there are composite construction fire doors installed to flat entrances. The previous fire risk assessment detailed that investigations have been carried out and these doors have not met the performance level in the Building
	Regulations with regard to fire resistance and smoke control from both sides. A number of manufacturer's flat entrance fire doors have previously failed fire tests when subjected to fire on both sides of the door despite being certified as FD30s compliant. The flat doors could not be confirmed as meeting current test evidence and certified as FD30s door assemblies conforming to BS476-22 (compatible door, frame, ironmongery, hardware etc.) and fitted with a positive-action self-closing device. Flat entrance fire doors should have test evidence demonstrating they meet the performance requirement in the Building Regulations guidance for fire resistance and smoke control from both sides. Where a flat entrance door is not self-closing or does not provide the relevant degree of fire resistance, a fire in a flat may prejudice the common means of escape as the doors may not form an effective barrier against the products of combustion placing relevant persons at risk of harm.
	Recommended Actions
9.1-9.3	 If doors meet current test evidence and are certified as FD30s door assemblies conforming to BS476-22 (compatible door, frame, ironmongery, hardware etc), fitted with a positive-action self-closing device and installed in accordance with the manufacturer's instruction based on the original test specimen then no further action is necessary. The previous fire risk assessment indicates that this is not the case for these. Where it is known that the fire doors fitted do not have test evidence demonstrating they meet the performance requirement in the Building Regulations guidance for fire resistance and smoke control from both sides, then they should be replaced with fully compliant FD30s doors (compatible door, frame, ironmongery, hardware etc.) and fitted with a positive-action self-closing device.
	 Any doors identified as damaged at any time should be immediately replaced/repaired as appropriate. As an interim measure, ensure all doors have a self-closing device installed.
	For further information and guidance regarding composite flat entrance doors, see commentary 9.1-9.3.



	Observation
9.1, 9.5	Many of the doors to the electrical rooms adjoining the lobbies serving flats could not be accessed as the locks had been changed and our assessor did not have keys for access. The floors where our assessor could not access these cupboards were as follows: 13, 11, 10, 8, 7, 5, 4, 2, 1. Where our assessor could not access these areas they could not confirm that the standards of compartmentation and the contents of the cupboards would not result in the beginning or spread of a fire which could place persons at risk of harm. Recommended Actions
9.1, 9.5	It is recommended that the cupboards which could not be accessed (specified above) are checked to confirm that they do not contain inappropriate storage or breaches in compartmentation. Where inappropriate storage is identified this should be removed and where breaches in compartmentation are observed these should be fire stopped to the same standard of fire resistance as the materials through which they pass. Observation
9.2	2. The following doors were not effectively self-closing at the time of the assessment: 1. Flat entrance door to flat 39 (seventh).
	 Door from stair into lift lobby (seventh). Door from lift lobby into lobby serving flats towards 24 (fourth). Where fire doors are not effectively self-closing they may enable the passage of products of combustion, placing persons at risk of harm.
	Recommended Actions
9.2	The specified doors should receive attention and remedial works to ensure they are effectively self-closing from all angles of swing.



Observation 9.5 Breaches in compartmentation were identified in the following areas: 1. Small gaps appeared to be present at the top of the service riser cupboards by flats 93/94 (sixteenth). 2. Electrical cupboard opposite flat 85 (fourteenth). Electrical cupboard (twelfth). Corner of riser by flat 30 (fifth) where non fire rated foam appeared to be present. 5. Possible breach in riser cupboard around existing fire stopping, where material in the area cannot be confirmed as fire Where there are breaches in fire stopping this may enable the spread of products of combustion, placing persons at risk of harm Recommended Actions 9.5 It is recommended that the breaches are fire stopped to 60 minutes fire resistance. Note - Where services passing through ceilings are part of a 'shaft' as portrayed in Section 7.23 and Diagram 7.1 of Approved Document B (ADB) Volume 1, fire stopping will not be required. However, where there is potential for products of combustion to spread to other areas of the building horizontally, the absence of such fire stopping should be rectified with suitable materials. Observation 9.5 Breaches in compartmentation were observed at each level of the refuse chute room, leading all the way up the building. Where there are breaches in compartmentation this may enable products of combustion to bypass compartment walls and place persons at risk of harm Recommended Actions 9.5 It is recommended that each refuse chute room is provided with 60 minutes fire stopping to the breaches.



	Observation
9.14	2. Combustibles were observed within several of the cupboards around the building where such storage is deemed to be inappropriate, detailed as follows: 1. Electrical cupboard by flat 38 (sixth).
	2. Electrical cupboard by flat 20 (third).
	Where combustibles are stored in close proximity to sources of ignition there is increased potential for a fire to begin, placing persons at risk of harm.
0.44	Recommended Actions
9.14	It is recommended that the combustibles are removed and these areas are kept free of such storage.
Ref	RECOMMENDATIONS
0.40	Observation 111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
9.13	 WCHG have communicated to our assessor that mast climbers have been installed at Brookway Court in order to rectify issues relating to the external façade, which were raised at the time of the previous fire risk assessment. More specifically, WCHG confirmed that the following works are in the process of being carried out at Brookway Court: 1. Windows containing combustible spandrel panels (identified as a result of a report being carried out by Tenos Ltd) being replaced. This includes bedroom, kitchen, enclosed balcony and communal windows. 2. AOVs being installed in the lobbies providing access to the flats. 3. Roof covering being replaced (this has already been completed). 4. Now entrance doors being installed along with patterness area.
	4. New entrance doors being installed along with entrance area soffit.
	Recommended Actions
9.13	Ensure all Regulation 38 information relating to the work being carried out is obtained by WCHG and is held on secure data systems.
	Observation
9.14	The service risers by flats 45 (sixth floor) and 10 (second floor) could be closed but did not lock shut.
	Recommended Actions
9.14	It is recommended that remedial works are carried out to ensure that the doors lock/secure shut when closed. This would reduce the potential for persons to gain unauthorised access. Observation
9.15	The (normally) electromagnetically secured exit door at the base of the staircase was not securing at the time of the
	assessment and was therefore ajar, enabling any person to access the block.
	Recommended Actions



Cu bas the jud	### CHG have plans in place for a four year replacement programme for their flat entrance doors that are of composite construction and do not meet the Building Regulations performance requirements. #### Union of the program of the programme for their flat entrance doors that are of composite construction and do not meet the Building Regulations performance requirements. #### Union of the program of the programme for their flat entrance doors that are of composite construction and do not meet the Building Regulations performance requirements. ###################################
Cor Cu bas the jud	urrent guidance states that when doors are identified for replacement the fire risk assessment ought to determine a risk ased approach on how urgently such doors should be replaced within the particular building. A judgement is made based on e likelihood of a fire occurring, then spreading and the consequences affecting the relevant persons. In making this dgement the following non-exhaustive list outlines some of the issues which have been considered: • The likelihood of a fire occurring in the common landing area and affecting the flat entrance door and subsequently the flat. • The likelihood of a flat fire affecting the common area and thus adjacent flats prior to Fire and Rescue Service intervention. • The condition and design of the existing flat entrance door (nominal smoke and fire resistance). • The internal layout of the flat (that may assist in fire/smoke containment). • The installation of smoke alarms within the flats. • The installation of a fire alarm in the common area. • The floor height of the highest occupied flat. • Alternative exit routes and their availability (escape windows, balcony or multiple stairs). • The size of the client's housing stock and competing priorities. • The national picture regarding fire doors and their supply (Is it likely doors can be replaced on the suggested timescales?). • A risk comparison against general housing and high rise residential tower blocks.
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	 The internal layout of the flat (that may assist in fire/smoke containment). The installation of smoke alarms within the flats. The installation of a fire alarm in the common area. The floor height of the highest occupied flat. Alternative exit routes and their availability (escape windows, balcony or multiple stairs). The size of the client's housing stock and competing priorities. The national picture regarding fire doors and their supply (ls it likely doors can be replaced on the suggested timescales?). A risk comparison against general housing and high rise residential tower blocks.
	 The installation of a fire alarm in the common area. The floor height of the highest occupied flat. Alternative exit routes and their availability (escape windows, balcony or multiple stairs). The size of the client's housing stock and competing priorities. The national picture regarding fire doors and their supply (Is it likely doors can be replaced on the suggested timescales?). A risk comparison against general housing and high rise residential tower blocks.
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	A risk comparison against general housing and high rise residential tower blocks.
adverthe What the What the fully Re operated on fire from the price on the price of	the flat entrance doors form part of the fire protected escape route and fall within the scope of the Fire Safety Order. Where additional assurance that existing or proposed fire door sets meet the current benchmarks is desired, professional divice can be sought. Using an independent UKAS accredited certification body whose engineers are qualified and adhere to be latest Passive Fire Protection Federation guidance would be a good way of securing this professional advice. Where it is known that the fire doors fitted do not have test evidence demonstrating they meet the performance requirement in the Building Regulations guidance for fire resistance and smoke control from both sides, then they should be replaced with llly compliant FD30s doors (compatible door, frame, ironmongery, hardware etc). The seference is made to Annex C of BSEN1634-1 – 'Fire resistance and smoke control tests for door and shutter assemblies, benable windows and elements of building hardware', which states "Doorsets made from other or composite materials are decifically excluded from this annex as there is not sufficient evidence of their behaviour in fire to be able to provide guidance in the weakest side against fire attack". This statement is re-enforced by a study conducted by the MHCLG 'GRP composite ele doors test results' in 2019 (GRP Composite Fire Doors Test Results), which sampled and tested a number of fire doors on a total of 9 composite door manufacturers. The test conclusion was that there was a performance issue with GRP composite 30 minute fire doors across the market. The test conclusion was that there was a performance issue with GRP composite to intend the MHCLG Guidance 'Annex A: Assurance and Assessment of Fire Doors' has been withdrawn and can no longer edirectly referred to, it is still considered that Appendix A of this document provides an indication of the process required to ioritise the replacement of composite flat entrance doors in a building. Litter advice on routine inspection and maintenance of fire resist
	 Gaps. FR glass. Letter plates. Self-closing devices. Intumescent strips and cold smoke seals. Overall condition. ne checks are logged on a portable electronic device which transports the records to WCHG central data systems.
9.1-9.3, 9.5, Arti 9.14 ens	ticle 8 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to take general fire precautions to asure the safety of relevant persons. This includes measures to reduce the risk of fire on the premises and the risk of the pread of fire on the premises.
9.1, 9.5 As a la	s highlighted previously, compartmentation works have been carried throughout the premises by Allied Protection Ltd and, at later date, Flamehold. They are accredited passive fire protection contractors and they have provided WCHG with ocumentary/photographic evidence of their work.



9.1. 9.5







False ceiling tiles were installed in the common areas. A number of areas above the false ceilings were inspected and it was observed that fire stopping works had been carried out in these areas, including where services passed into flats and above lobby doors.

9.5 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.

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.

9.5 Dry riser outlets were fire stopped at each floor level.

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 extract 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 initial smoke spread into the shaft they are an acceptable method of preventing fire spread. Documentary and photographic evidence is available and is held by WCHG.

9.8 No form of extraction was observed to be provided from the kitchens of resident flats.



9.14





In the bin room on the ground floor, the bin in use is located adjacent to a lid that has a fusible link and closes should a fire occur within the bin to prevent fire spread up the chute. In the refuse chute rooms, metal chutes are provided which are self-closing. The fusible link is checked annually by an appointed contractor, with labels fitted to bin equipment indicating that this was last carried out on 19/04/2022.

9.15



CCTV is provided in the common areas



	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?	Yes		
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.	Yes		
10.5	Are sufficient fire alarm call points and detectors provided?	Yes		
10.6	Can the alarm be raised without placing anyone at risk?	Yes		
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.	N/A		
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
10.10	A country was observed to be provided on the roof of the promises, however it could not be confirmed whether or not this
	A sounder was observed to be provided on the roof of the premises, however it could not be confirmed whether or not this sounder is audible once the BS5839-1 system activates (as generally the system is programmed to be silent). Where persons working on the roof receive inadequate warning of a fire they may be placed at risk of harm. **Recommended Actions**
10.10	Confirm that the sounder on the roof is sufficiently audible to persons working in the area or carry out remedial works to ensure this is the case.
Ref	RECOMMENDATIONS
	Observation
10.3-10.5	Manual call points were provided throughout the common areas which are regularly accessed by the residents. Our assessor understands that whereas detectors are silent when activated, the manual call points are clearly audible. This may result in frequent false alarms and may result in faults or similar showing on the fire alarm panel.
	Recommended Actions
10.3-10.5	It is recommended that the manual call points in the common areas which are accessed by residents are removed if they result in an audible alarm sounding on activation. It is noted that where manual call points remain in areas accessible only to staff members these may remain as audible, so long as they only sound in staff/plant areas, not throughout the whole building.
	Observation
10.5	
	In this building smoke detection linked to the BS5839-1 fire alarm system is provided in the service riser cupboards by flats. In the cupboard near flats 81/82 (fourteenth floor) this smoke detector was sellotaped.
	Recommended Actions
10.5	Remove the Sellotape and ensure the smoke detector is in good, functional condition.



Ref	COMMENTARY	
10.0	The common fire detection system is configured for the Fire and Rescue Service to use as an Emergency Alert System (EAS). 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 has reverted to a stay-put strategy. The common area fire detection system is configured as a silent system under normal operating mode and the fire panel control and indicating equipment (CIE) is provided for 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 or call point within the common area, a signal is sent to the CIE in the entrance foyer and then transmitted to an offsite receiving centre where a call is made to the FRS for a response to the building. The system was configured following consultation with GMFRS. 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.	
10.1-10.5	All of the resident flats accessed were provided with BS5839-6 Grade D LD1 fire alarm systems and WCHG have previously confirmed that that this provision is consistent throughout all of the flats in the building.	
10.1-10.5		
	The common area fire alarm and detection system incorporated smoke detection throughout commonly used areas and heat detection in the hallways of each resident flat. The fire alarm panel for the system is located in the lift lobby at ground floor level and appeared healthy at the time of the assessment. It was confirmed to our assessor that the system is addressable. Further detail regarding the fire alarm system and its purpose within the building is provided in commentary 10.0.	
10.10	Article 13 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to ensure the premises are, to the extent appropriate equipped with appropriate fire detection and alarms.	
10.11	Brookway Court	
	A suitable building and zone plan is provided adjacent to the fire alarm panel.	
10.12-10.14	The fire alarm/emergency alert system is tested weekly by the staff from WCHG's Facilities Department. A record of the test is kept electronically on WCHG's systems. The maintenance of the system is carried out by an approved contractor and is also recorded (last carried out 09/05/2022).	



	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?	N/A	
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	Suitable provision of emergency lighting was observed throughout the common areas.	
11.4	There is adequate borrowed light available externally for persons to reach a place of safety.	
11.5-11.6	Monthly testing of the emergency lighting system is carried out, with records held electronically. The system is also serviced annually, with this having last been carried out on 25/04/2022.	



	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?	Yes
12.3	Are all extinguishers installed and sited in accordance with current guidance?	Yes
12.4	Are appropriate checks carried out on a monthly basis?	Yes
12.5	Are all extinguishers serviced by a qualified engineer every 12 months?	Yes
	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	
12.6		
	When visiting the premises, it was clear that one of the two lifts serving the building was a firefighting lift of some sort. When our assessor was gathering information relating to this building, it was communicated that neither of the lifts had any firefighting functions. It could therefore not be confirmed that WCHG were fully aware of the types of lift present in the building and their capabilities with regards to firefighting. As different types of lifts provide different levels of safety and control of the lift for fighters, it is important that the correct details are available. Firefighters using a lift that does not provide a perceived level of safety would be placed at risk of harm which in turn may delay their operations placing residents (relevant persons) at risk of harm.	
	Recommended Actions	
12.6	The standard of the two lifts should be confirmed and the details should be available for the Fire and Rescue Service to ensure that they are aware of the standard of both lifts. Although supporting information relating to the lifts was confirmed to be provided in the premises information box, this supporting information was viewed (in excel spreadsheet form) and does not appear to indicate that one of the lifts has firefighting capabilities. It should be ensured that information provided to the Fire Service clearly outlines the lift's capabilities in relation to firefighting.	
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 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. 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. 	
	Note: The Fire Safety (England) Regulations 2022 (to be enacted in 2023) regulation 10 will require 3 monthly checks on all common area fire doors and on a best endeavour basis, annual checks to all flat entrance doors.	



 Note: The Fire Safety (England) Regulations 2022 will implement the majority of the recommendations above made Grenfell Tower Inquiry in its Phase 1 report which required a change in the law. The regulations will come into force of January 2023 following the publication of supporting guidance which is due later in 2022. There are no fire extinguishers within the common areas. It is not normally considered necessary to provide fire extire or hose reels in the common parts of blocks of flats. Such equipment should only be used by those trained in its use considered appropriate or practicable for residents in a block of flats to receive such training. In addition, if a fire occupants of flat, the provision of fire extinguishing appliances in the common parts might encourage the occupants of the flat to ecommon parts to obtain an appliance and return to their flat to fight the fire. Such a procedure is inappropriate. 12.1-12.3 The fire extinguishers provided on the premises are checked monthly and serviced annually by an approved contract last annual service was carried out on 10/09/2021. Records are kept on WCHG systems. Article 38 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to ensure the premises facilities equipment or devices provided in respect of the premises for use or the protection of firefighters are suitably maintained. 	nguishers It is not urs in a
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facilities equipment or devices provided in respect of the premises for use or the protection of firefighters are suitably maintained.	tor. The
	s and any /
A BS9251 sprinkler system has been installed in each flat with concealed sprinkler heads located in the hallway, each	, h
bedroom, the lounge, the enclosed balcony and the kitchen. In addition, there are also sprinkler heads located in the floor entrance lobby, the laundry and parts of the old caretaker's area. There are control valves located in a secure on each landing. Water tanks are provided on the top floor, near to the lift motor room, and an additional tank with a paystem is located on the ground floor near the meter room. The system is maintained and serviced by an approved on the ground floor near the meter room.	ground upboard
on a quarterly basis and Argus also attend weekly to visually check the sprinkler system. 12.8, 12.10	





The dry rising main is both pressure tested and visually inspected annually with six months between the two visits. The tests and inspections are carried out by an approved contractor. Records are kept on WCHG systems. WCHG informed our assessor that the last test was carried out in 07/2021, however labels observed on the riser cupboards indicated a date of 01/2022 (it is therefore presumed that the last pressure test was 07/2021 and the last visual check in 01/2022). The dry riser outlets are provided in the lift lobbies on each floor, except for on the sixteenth floor where the outlet is located at the very head of the stair. The dry rising inlet is by the main entrance, on the external façade of the building.



	13.0 Fire Safety Signs and Notices		
13.1	Do signs indicate all final exits?	Yes	
13.2	Can the final exit or a directional sign be identified from any position in the assessment area?	Yes	
13.3	Are all signs in the correct position, suitably fixed and directional arrows correct? (Can the way out be found just by using signs alone?)	Yes	
13.4	Are the signs the correct size for the areas where they are located?	Yes	
13.5	In places of public assembly are all escape signs illuminated on maintained luminaires?	N/A	
13.6	Are fire action notices displayed prominently and completed fully throughout the premises?	Yes	
13.7	Are all fire action notices similar throughout the premises?	No	
13.8	Does the content of the fire action notices reflect the actual procedure?	No	
13.9	Where firefighting equipment or fire alarm call points are not clearly visible is their location highlighted by supporting signage?	N/A	
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	
	Observation	
13.6-13.8	The state of the s	
	An old (and inaccurate) fire action notice has remained in situ on the noticeboard. Where conflicting fire action notices are provided persons may become confused regarding the correct action to take in the event of a fire, placing persons at risk of harm.	
	Recommended Actions	
13.6-13.8	It is recommended that the old, inaccurate fire action notice on the noticeboard is removed.	
Ref	RECOMMENDATIONS	
	None.	



Ref	COMMENTARY
13.0	'In the event of fire do not use this lift' notices have been provided on each landing adjacent to the lift.
13.0	16 Flats 93+94
	Wayfinding signage that has the floor number and directional signage to the flats, including flat numbers, is now displayed in
	the lift lobbies and on the stairway landings. These are not low level, however are considered satisfactory.
13.0	BROOKWAY COURT W 16 FLA LOBERY ACCESS 2 LUT 15 TR 15 TR 16
40.4.40.4	An external notice by the main entrance to the building provides key information to attending firefighters.
13.1-13.4	Directional signage was observed in the common areas. This building has a single staircase and residents will be familiar with access and egress from the building.
13.6-13.8	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.
13.6, 13.8	A new fire action notice is displayed in the entrance area. It includes the action to be taken should persons hear the fire alarm (now the Emergency Alert System), which is that they should evacuate the premises via the stairway.
13.12	process and provinces and the state way.
	Suitable 'No Smoking' signage was observed in the common area.



	14.0 General Fire Safety Procedures		
14.1	Has the premises been free from reports of any fire related incidents within the past 12 months?	Yes	
14.2	Has action been taken to avoid reoccurrence?	N/A	
14.3	Has the premises been free of any fire alarm actuations within the past 12 months?	Yes	
14.4	Where necessary has any action been taken to prevent reoccurrence?	N/A	
14.5	Have there been any incidents of deliberate ignition by employees or arson attacks?	No	
14.6	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?	No	
14.9	Were any recommendations, enforcement or prohibition notices served?	N/A	
14.10	Have all recommendations and notices been complied with?	N/A	
14.11	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	
14.0	Although keys were not provided to our assessor for accessing of the premises information box (PIB) on the premises, WCHG have confirmed to our assessor that the PIB contains the following information: • Access keys for all areas. • Personal Emergency Evacuation Reports (see Section 7.3).	
	 Personal Enlergency Evacuation Reports (see Section 7.3). Passenger lift supporting information (see Section 12.6). Access codes. Asbestos refurbishment survey. 	
14.1-14.2	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 action to be taken.	
14.7	The Chief Executive for Wythenshawe Community Housing Group has the overall responsibility for fire safety related matters and management.	
14.8-14.9	Our assessor was informed that the local authority Fire Service visited the premises in 03/2022, however no information has been provided to our assessor regarding subsequent recommendations/advice from the Fire Service, therefore it is assumed that none were issued.	
14.11	All important documents and data regarding the premises are stored off-site.	
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?	N/A
15.3	Do all new employees receive basic fire procedure and induction training on the date of appointment?	N/A
15.4	Are records of fire safety training kept?	N/A
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?	N/A
	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?	No
15.13	Are there clearly defined written procedures to be followed in the event of a fire in the form of an emergency plan?	N/A
15.14	Is a fire plan displayed throughout the premises where required?	N/A
15.15	Are there procedures for calling out key staff during fire related emergencies outside of normal working hours?	Yes

	15.0 Fire Safety Management: Finding(s)	
Ref	Ref SIGNIFICANT FINDINGS	
	None.	
Ref	Ref RECOMMENDATIONS	
	None.	
Ref	COMMENTARY	
15.0	WCHG have confirmed to our assessor that they send out fire safety leaflets periodically, which detail the evacuation strategy (stay put/stay safe) for the building.	
15.1	WCHG employs competent persons to carry out service and maintenance of all preventative and protective services.	
15.2-15.4	Our assessor was informed that this premises is not staffed, except for occasional maintenance and cleaner visits.	
15.5-15.6	.5-15.6 WCHG have informed our assessor that all major works have ongoing Clerk of Works persons overseeing the work and an employers agent and/or third party accredited organisation/person sign off work which may affect compartmentation on completion. In addition to the above, RAMS are submitted for contractor works and works are also assessed for any activities requiring	
	permit to work'. For major works the contractor has a permit license to manage the procedure and this is regularly audited.	
15.13-15.14	For this premises, accurate fire action notices will be considered sufficient with regards to provision of evacuation strategy information, as recommended in Section 13.6-13.8.	
15.15	There are 'out of hours' Emergency Procedures and Emergency Evacuation Procedures in place.	



	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
16.1-16.2	The premises were constructed as purpose built flats. They incorporate compartmentation between each flat and between the flats and the escape route and this supports a 'stay safe' policy. However, the comments in Section 9 should be noted and actioned where appropriate. WCHG have in place a 'stay safe' policy and have informed all the residents in their high rise residential buildings, via a newsletter/leaflet of the action they should take on discovering a fire or on hearing the Evacuation Alert System when it is activated by the Fire and Rescue Service.



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:

Brookway Court, Bideford Drive, Wythenshawe, Manchester, M23 0GL

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
OF FIRE	Highly Unlikely	Negligible Risk	Tolerable Risk	Moderate Risk
LIKELIHOOD OF FIRE OUTBREAK	Unlikely	Tolerable Risk	Moderate Risk	Substantial Risk
5	Likely	Moderate Risk	Substantial Risk	Intolerable Risk



18.0 Summary of Findings

FRARef	Hazard or Defect	Action Required	Hazard Priority	Risk Rating	Action By	Review Date	Contractor Completed
8.6	Storage was observed within the common areas, specifically in the areas detailed within the full significant finding.	It is recommended that arrangements are made for the storage to be removed and for residents to be advised/educated regarding storage in the escape routes accordingly.		Moderate			
9.1	A security door is fitted between the ground floor lift lobby and the laundry room.		P1	Moderate			
9.1-9.2	The flat entrance door to flat 42 was boarded over at the time of the assessment.	It is recommended that a	P1	Substantial			
9.1-9.3	It is observed that there are composite construction fire doors installed to flat entrances. It has been determined as a result of investigations that the doors do not meet the required standard with regards to performance.			Moderate			
9.1, 9.5	Many of the doors to the electrical rooms adjoining the lobbies serving flats could not be accessed as the locks had been changed and our assessor did not have keys for access - specifications provided in the full significant finding.	It is recommended that the cupboards which could not be accessed (specified in the full significant finding) are checked to confirm that they do not contain inappropriate storage or breaches in compartmentation.		Moderate			
	A number of doors within the premises were not effectively self-closing when inspected, including	The specified doors should receive attention and remedial works to ensure they are effectively self-closing from all angles of swing.	P1	Substantial			
9.5	Breaches in compartmentation were identified in the areas specified in the full significant finding.	It is recommended that the breaches are fire stopped to 60 minutes fire resistance - see full significant finding.		Moderate			
9.5	Breaches in compartmentation were observed at each level of the refuse chute room, leading all the way up the building.	It is recommended that each refuse chute room is provided with 60 minutes fire stopping to the breaches.	P1	Moderate			



9.14	Combustibles were	It is recommended that the	P2	Moderate		
		combustibles are removed				
		and these areas are kept				
	building where such	free of such storage.				
	storage is deemed to be					
	inappropriate, as detailed in the full significant finding.					
10.10	A sounder was observed to	Confirm that the sounder	P2	Moderate		
	be provided on the roof of	on the roof is sufficiently				
	the premises, however it	audible to persons working				
	could not be confirmed	in the area or carry out				
	whether or not this sounder	remedial works to ensure				
	is audible once the	this is the case.				
	BS5839-1 system activates					
	(as generally the system is					
	programmed to be silent).					
12.6	The capabilities of the lifts	See Significant Finding 12.0	P1 -	Moderate		
	provided on premises for	for the actions required.	previously			
	firefighting purposes could		identified			
	not be clearly discerned.					
13.6-13.8		It is recommended that the		Moderate		
	action notice has remained	*	previously			
	in situ on the noticeboard.	notice on the noticeboard is	identified			
		removed.				



19.0 Recommendations

FRARef	Observation	Recommended Action	Risk Rating	Contractor Completed
9.13	WCHG have communicated to our assessor that mast climbers have been installed at Brookway Court in order to rectify issues relating to the external façade, which were raised at the time of the previous fire risk assessment.	Ensure all Regulation 38 information relating to the work being carried out is obtained by WCHG and is held on secure data systems.	Moderate	
9.14	The service risers by flats 45 (sixth floor) and 10 (second floor) could be closed but did not lock shut.		Moderate	
9.15	The (normally) electromagnetically secured exit door at the base of the staircase was not securing at the time of the assessment and was therefore ajar, enabling any person to access the block.	It is recommended that this door is repaired in order to prevent unauthorised access.	Moderate	
10.3-10.5	Manual call points were provided throughout the common areas which are regularly accessed by the residents. Our assessor understands that whereas detectors are silent when activated, the manual call points are clearly audible.	It is recommended that the manual call points in the common areas which are accessed by residents are removed if they result in an audible alarm sounding on activation.	Moderate	
10.5	In this building smoke detection linked to the BS5839-1 fire alarm system is provided in the service riser cupboards by flats. In the cupboard near flats 81/82 (fourteenth floor) this smoke detector was sellotaped.	smoke detector is in good, functional condition.	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.	The Grenfell Tower Inquiry recommendations should be considered as part of the overall fire safety improvement works within this premises. These are detailed in the full recommendation.	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.



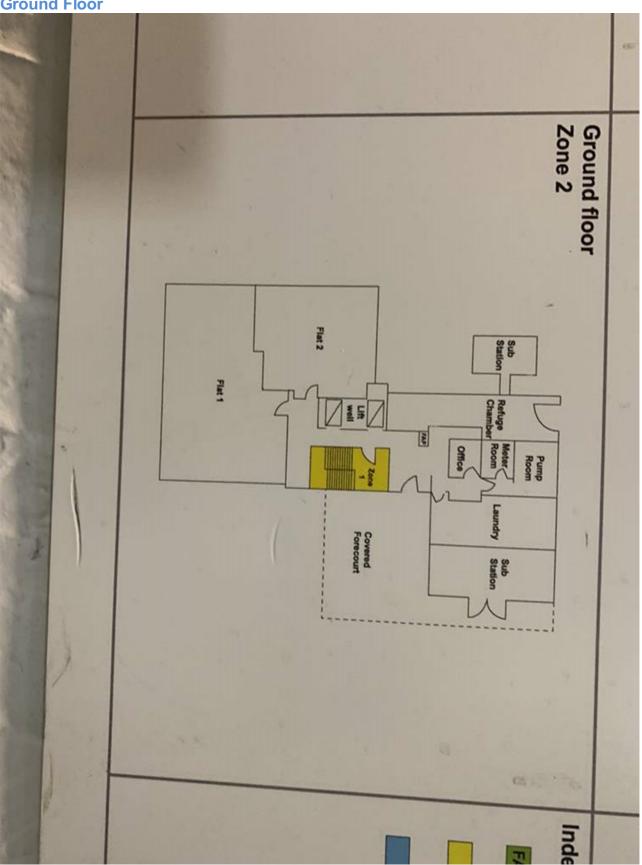
20.0 Commentaries

FRA Ref	Observation	Recommended Action	Risk Rating	Contractor Completed
8.10, 8.12	accessed were provided with key operated locks.	During the next refurbishment or on next replacement of the flat entrance doors, consider provision of a thumb turn device or other which would enable the resident to quickly exit the flat without the requirement for a key. It is acknowledged that the inside of the flat is beyond the extent of the Regulatory Reform (Fire Safety) Order 2005 legislation.		

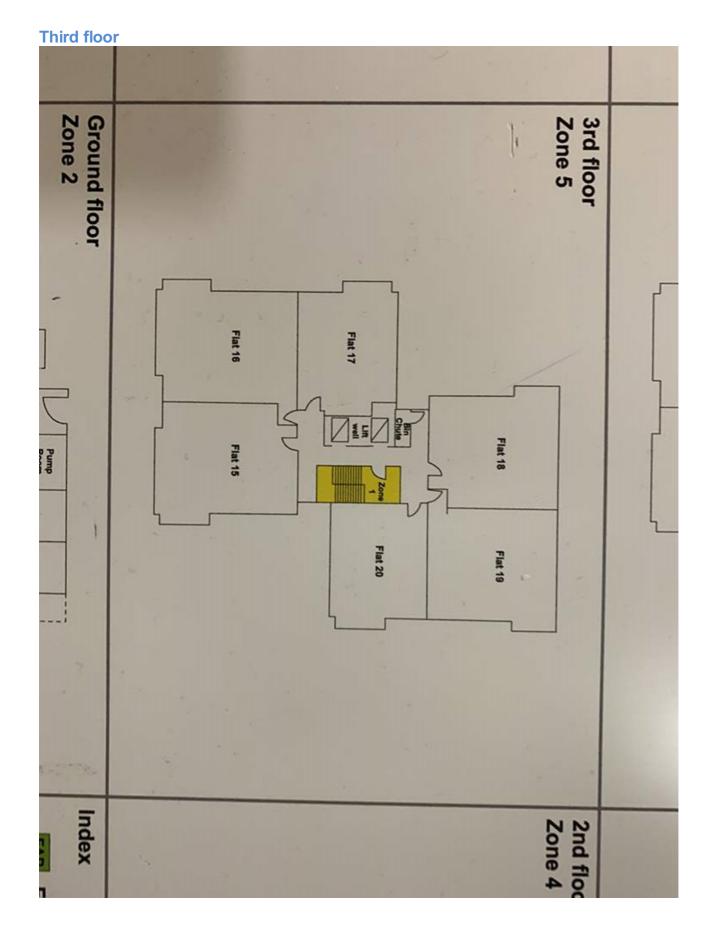


Appendix

Ground Floor









Sixteenth Floor

