



TOTAL FIRE GROUP LTD

Fire Risk Assessment

Conducted at:

Brookway Court Bideford Drive Wythenshawe Manchester M23 0GL



08 June 2023







Certificate Number	LS	0329972
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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.

SCHEDUI	SCHEDULE		
Part 1	NSI Life Safety Fire Risk Assessment Silver Approved On	rganisation	
	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.		
Dort 5	Effective date of the fire risk assessment	00/00/2003	
Part 5	Effective date of the fire risk assessment	08/06/2023	
Part 6	Recommended date for review of the fire risk assessment	08/06/2024	

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)	Your
Job Title	Fire Safety Consultant
Date	

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. The risk assessment should not be relied upon by any person other than the customer/client named herein. i.e. if the premises are sold to a third party. This fire risk assessment is made without prejudice to any requirements made by Local Authority, Building Control or by the local Fire Authority. Fire assessment and evaluation of risk is a dynamic and evolving process. The Assessment that we have prepared is based on the appearance of the premises/building, number of employees, internal layout and information provided on Thursday, 8 June 2023

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

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

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

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

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

Contact Details

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1.0 Fire Risk Assessment Details

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

Wythenshawe Community Housing Group Limited
Wythenshawe House, 8 Poundswick Lane, Wythenshawe, Manchester, Greater Manchester, M22 9TA
and relates only to the premises of:
Brookway Court, Bideford Drive, Wythenshawe, Manchester, M23 0GL
Responsible or Accountable person(s):
Wythenshawe Community Housing Group (WCHG)
Person(s) consulted and landline contact number:
Victoria Finn (Building Safety Manager). 0161 946 9191
Fire Risk Assessor:
Tim Burgon GIFireE
Validated by:
Luke Saul BSc (Hons), AlFireE, MIFSM, Tier 3 Nationally Accredited Fire Risk Assessor N438
Date fire risk assessment was conducted:
Thursday, 8 June 2023
Time:
09.30
Date of last FRA or FRA Review (if known)
16 Jun 2022
Suggested date for next review:
June 2024
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 89 (fifteenth), 80 (thirteenth), 73 (twelfth), 66 (eleventh) and 59 (tenenth).

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. 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 and 2022)

2.5 Approximate maximum and minimum 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:

Sleeping occupants		
Persons familiar with the pro	emises	Yes
Persons unfamiliar with the pro	emises	No
Occupants with disabilities		T
Mobility-in	npaired	Yes
Hearing-in	npaired	Yes
Learning diff	ficulties	Yes
Occupants in remote	e areas	No
	Others	Yes
Comments		
None.		

2.9 Fire Loss Experience

None reported.

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

None



3.0 Overall Risk Rating

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

Risk to Life: Moderate.

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 & Substances	5
IDENTIF'	YING THE FIRE HAZARDS	
4.1	Are suitable arrangements in place to manage the elimination or reduction of risks from dangerous substances? (Article 12)	N/A
4.2	Are there suitable additional emergency measures provided to safeguard all relevant persons from emergencies related to dangerous substances in or on the premises? (Article 16)	N/A
4.3	Have combustible or flammable materials used or stored in the premises been identified?	N/A
4.4	Are all combustible or flammable materials stored or stacked safely?	N/A
4.5	Has consideration been given to reduce the quantity held or has the use of non-combustible materials been considered?	N/A
4.6	Are all substances stored away from ignition sources?	N/A
4.7	Where flammable stores are provided, are they adequately ventilated and correctly marked?	N/A
4.8	Are all refuse bins for Dangerous, Flammable, Combustible Materials & Substances sited where they will not affect the means of escape or pose a fire hazard?	N/A
4.9	Is all Dangerous, Flammable, Combustible waste removed on a regular basis?	N/A
4.10	Is the frequency of waste removal adequate?	N/A

4	.0 Dangerous, Flammable, Combustible Materials & Substances: Finding(s)
Ref	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 all cables (where can be seen) on walls, floors, ceilings correctly secured, so as not to pose an entrapment risk to firefighters?	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 hoists, escalators, air handling systems, heating boilers, pressure vessels etc.?	Yes
6.21	Do the premises have a lightning protection system? (where required)	Yes
6.22	Have other potential sources of heat not listed above been considered?	Yes



	6.0 Heating and Electrical Appliances: Finding(s)		
Ref	SIGNIFICANT FINDINGS		
Dof	None.		
Ref	RECOMMENDATIONS None.		
Ref	COMMENTARY		
6.0	All gas installations have safety checks carried out on a 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. 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 is carried out on a 5 yearly cycle. 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 as in plant and laundry spaces.		
6.16	Suitable electrical hazard signage was observed on the premises, where required.		
6.20	The boiler room was provided with the appropriate fire extinguishers and gas and electrical shut offs.		
6.21	The lightning protection system is tested on an annual basis. Servicing records are held on WCHG systems.		



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



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



Ref	COMMENTARY
7.1	WCHG considers the mobility and capabilities of residents when first assigning accommodation.
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, 7.7 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.



7.5, 7.7	In the Secure Information Box (SIB) observed in another similar WCHG high rise block, there is a sheet detailing resident 'PEEPs'. As there are no staff stationed permanently on the premises, it is likely that this is intended to refer to 'PREPs'. It is reasonable to assume that the same is present in this block, although the contents of the SIB could not be accessed.
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 Means of Escape	
8.1	Do travel distances meet the criteria given in the relevant HM Government guide and recognised industry norms and guidelines? Are the travel distances from flat entrance doors to the nearest stairway or final exit(s) acceptable?	Yes
8.2	Is the smoke ventilation provision suitable for the escape travel distances and protection of escape staircases? OV, AOV, PV or mechanical systems? Are the systems subject to regular servicing and testing?	Yes
8.3	Are there a sufficient number of exits of suitable width from each area/room for the persons present?	Yes
8.4	Can you ordinarily expect the Fire Service to arrive in the event of a fire whilst the fire is in the room of origin?	Yes
8.5	Can you expect the premises to be evacuated within the standard times for the type of construction?	Yes
8.6	Are all escape routes available and accessible at all times?	Yes
8.7	Are all escape routes and stairways free from undesirable items? (E.g. portable heaters, cooking appliances, furniture, coat racks, vending/gaming machines, photocopiers, mirrors.	No
8.8	Do any inner rooms exist?	No
8.9	Are vision panels provided between the inner room & access room and is it adequate?	N/A
8.10	If the vision between the inner room and the access room is inadequate is smoke detection provided within the access room?	N/A
8.11	Are all emergency exits doors unlocked and available at all times when the premises are occupied?	Yes
8.12	Are all final exit doors checked (opened) on a regular basis? Are the outcomes recorded?	Yes
8.13	Is the door furniture provided appropriate for the purpose group of the premises i.e. public buildings, licensed premises etc.?	Yes
8.14	Are floor and stairway surfaces in good condition and free from slip and trip hazards?	Yes
8.15	Do all final exits lead to a place of safety?	Yes
8.16	Are external escape paths clear of obstructions?	Yes
	Electronic Door Release Devices	
8.17	Are all escape doors free from electro-mechanical door locks devices?	No
8.18	Are all escape doors free from electro-magnetic door locks devices?	No
8.19	Where electronic/electrical door control devices are fitted do they meet the installation criteria given in BS 7273 Pt. 4 2015	Yes
8.20	Do entry control devices conform to the category of actuation for the purpose group that the particular premises/building currently operates within?	Yes
8.21	Is the emergency operation of the door lock stated by appropriate signage?	Yes
8.22	Have all persons in the assessment area received instructions on how the devices operate in the event of an emergency?	Yes



	8.0 Means of Escape: Finding(s)
Ref	SIGNIFICANT FINDINGS
	Observation
8.7	Storage was observed within the common areas, specifically in the following locations:
	 Plastic Box and old appliances parts (Outside flat 63). Waste bin and wood (Outside flat 60). Shoe rack (Outside flat 41). A buggy (Adjacent to flat 27). 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.
	Recommended Actions
8.7	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.



Ref	COMMENTARY
8.2, 8.6	Automatic openable vents are provided in the lobbies serving flats on each floor level. This AOV system has been newly installed and the vent will open automatically on actuation of the smoke detector in the lobby.
8.2, 8.6	Permanent ventilation is provided at the absolute head of the staircase on the sixteenth floor. This staircase was originally lobbied at the fifteenth floor before the AOV system was installed. The door providing the lobby on the fifteenth floor has now been removed in line with recommendations and sign off from Building Control. It is the opinion of the assessor that this is acceptable. There is now permanent ventilation to the staircase and automatic opening ventilation to both lobbies on each floor level.
8.6	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.
8.6	Steps on the internal staircase are nosed, ensuring clear visibility for those using them.
8.7	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.
8.8, 8.11	From the internal side, flat entrance doors accessed were provided with opening mechanisms. This has been previously identified and it appears that the work has taken place in July 2022.
8.12	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.
8.17	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.
8.18-8.19	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	Are all escape routes and compartments protected by fire resistant walls and doors where required?	No
9.2	Where required, are the compartment walls of top floor compartments extended through the roof void and suitably sealed at the roof?	Yes
9.3	Is there a procedure for monitoring and maintaining existing fire resisting construction and fire stopping, in particular, pre-contractual agreements prior to any alterations work on site?	Yes
9.4	Is there a procedure in place to regularly check the condition of fire resisting doors and doorsets?	Yes
9.5	Are all fire doors self-closing, kept locked shut where appropriate and in good condition?	No
9.6	Are all fire doors fitted with smoke seals and intumescing strips where required?	Yes
9.7	Is there reasonable limitation of linings to escape routes that might promote fire spread?	Yes
9.8	From a non-invasive inspection, is there potential for fire and smoke spread through routes such as doors, walls, vertical shafts, service ducts, service penetrations, venting systems, cavities, and voids?	No
9.9	Have there been any structural alterations within the past 12 months?	Yes
9.10	Were the requirements of the Building Regulations followed and a completion certificate issued?	Yes
9.11	Are all ducts fitted with effective fire dampers where required?	Yes
9.12	Are all fire exits underneath and within 1.8m horizontal or 9m vertically of any external escape stair, fire resisting and self-closing?	N/A
9.13	Is glazing within the above distances fire resisting and fixed shut?	N/A
9.14	Is there a procedure for all premises/areas to be checked at the end of a working period for potential fire hazards?	N/A
9.15	Are the premises free from risk posed by adjacent properties? (Uncontrolled fly tipping, overgrown vegetation or poor housekeeping)	Yes
9.16	Are there any other premises features or hazards that could affect fire development or spread?	Yes
9.17	Is there potential for fire and smoke spread into the premises from an external fire?	No
9.18	Does basic security against arson by outsiders appear reasonable?	Yes
	Automatic Hold Open Devices	
9.19	Are any fire doors fitted with automatic door release devices?	No
9.20	Are the devices fitted to any critical doors? e.g. onto stairs in a single staircase building	N/A
9.21	Is smoke detection provided within the area located near to the door release device? (Consider to L3 standard?)	N/A
9.22	Are all non-self-contained devices linked to the fire alarm system and released on actuation?	N/A
9.23	Are any self-contained, acoustically actuated door hold open devices fitted?	No
9.24	Are all devices tested regularly and the results recorded? (At least once a week)	N/A
9.25	Are all doors released at night or when the area is unoccupied?	N/A
9.26	Are all devices tested in accordance with the manufactures relevant standard to ensure satisfactory operation?	N/A
	External Wall Systems	
9.27	Has the risk of external fire spread been considered? Consider external cladding, wall systems, external render and balconies.	Yes
9.28	Has there been any previous examination of the building's external wall system or cladding? If yes provide details.	Yes
9.29	Has the information on the EWS or any changes to it, been sent to the Fire and Rescue Service?	Yes



Observation 1. Small ages appeared to be present at the top of the service riser cupboards by flats 93/94 (sixteenth). 2. Corner of riser by flat 30 (fifth) where non fire rated foam appeared to be present. Where there are breaches in fire stopping this may enable the spread of products of combustion, placing persons at ris harm Recommended Actions 9.1 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 Ap Document (9 ADB) Volume 1, fire stopping with observed to the required However, where there is potential for products of comb to spread to other areas of the building horizontally, the absence of such fire stopping should be rectified with suitable malerials. Observation 9.1 Many of the doors to the electrical rooms adjoining the lobbies serving flats could not be accessed as the locks had bee changed and our assessor did not have keys for access. The floors where our assessor could not access these cupbowere 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, where our assessor could not result in the beginning or spread of a fire which could place persons at risk of ham Recommended Actions 9.1 It is recommended that the cupboards which could not be accessed (specified above) are checked to confirm that they contain inappropriate storage or breaches in compartmentation. Where inappropriate storage is identified this should be removed and where breaches in compartmentation. Where inappropriate storage is dentified this should be removed and where breaches in compartmentation. Where inappropriate storage is identified this should be removed and where breaches in compartmentation. Where inappropriate storage is the materials through which they pass. Observation 14 It is recommended to repair or replace the portion of damaged frame at all floor levels en	D (9.0 The Confinement of Fire: Finding(s)
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	J. 1, J.O	do not provide the required standard of fire resistance (30 minutes) to the adjoining escape route, persons may be placed at risk of harm.
 Recommended Actions 9.1, 9.5 It is recommended that a competent person attends site to replace the letterbox to the fire-resisting self-closing door. 	0105	



	Observation
9.6	There was a missing intumescent strip and smoke seal on a portion of the door to the tank room on the sixteenth floor and the electrical room opposite flat 55 on the ninth floor.
	Recommended Actions
9.6	It is recommended to provide an intumescent strip and smoke seal to a portion of the door to the tank room on the sixteenth floor and the electrical room opposite flat 55 on the ninth floor.
	Observation
9.16	The service riser door by flat 54 (eleventh floor) could not be closed fully and did not lock shut. Smoke and products of combustion may bypass the door into the escape corridor placing occupants at risk of harm
	Recommended Actions
9.16	It is recommended that remedial works are carried out to ensure that the door lock/secure shut when closed. This would reduce the potential for persons to gain unauthorised access.
Ref	RECOMMENDATIONS
	None.



Ref	COMMENTARY
	Where the level of fire stopping or fire resisting construction is found to be below an acceptable standard remedial fire stopping work should be carried out. Breaches in fire resisting construction should be filled with suitable fire resisting materials to maintain the standard of fire resistance of the surrounding structure in accordance with BS 476 Pt 22 or BS EN 1364 Pt 1 to 6. The use of third party accredited passive fire protection contractors and products should ensure any remedial actions will be to the required standard in the most cost effective manner. The Responsible Person ought to have in place a system for ensuring that the integrity of any passive fire protection measures is not compromised when building alterations are carried out e.g. for the installation of new pipes, cables and other services. Records of these should be maintained for future inspection by auditors and enforcement agencies. One common available fire stopping product is expanding fire resisting foam. To avoid unnecessary costs, the universal use of expanding fire resisting foam products should be used with caution and in strict accordance with the manufacturer's recommendations to achieve the required fire resistance. Generally, expanding foam products are tested as narrow linear gap seals and will not work in a large penetration seal. The Guide to Inspecting Passive Fire Protection for Fire Risk Assessors produced by The Association for Specialist Fire Protection advises that PU expanding fire resisting foam products should only be used to seal linear gaps between walls and walls / floors / ceilings. It cannot be used to seal pipe or cable penetrations unless tested for that end-use application. In this case, other more appropriate fire stopping products should be used. It is recommended where rectifying life safety compartmentation issues that third party accredited contractors, who have been accredited to undertake the particular aspect of works, using appropriate third party accredited products is considered. Note: Co
	so that the fire resistance of the compartment is not impaired.
9.0	CCTV is provided in the common areas.
9.1	As highlighted previously, compartmentation works have been carried throughout the premises by Allied Protection Ltd and, at a later date, Flamehold. They are accredited passive fire protection contractors and they have provided WCHG with documentary/photographic evidence of their work.
9.1	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.
9.1	Breaches in compartmentation which were observed at each level of the refuse chute room had been completed.
9.1	A number of breaches and penetrations in compartmentation in the previous report had been completed.
9.1	The electromagnetic securing door at the base of the staircase at ground floor level was in good working order with an emergency door release device - green override box installed on the escape side of the door.
9.1	The security door has been newly installed between the ground floor lift lobby and the laundry room which appears to be a fire-resting self-closing door and was functioning correctly at the time of the assessment.



9.1. 9.5-9.6 Determining the risk priority for fire doors:

WCHG 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.

Current guidance states that when doors are identified for replacement the fire risk assessment ought to determine a risk based approach on how urgently such doors should be replaced within the particular building. A judgement is made based on the likelihood of a fire occurring, then spreading and the consequences affecting the relevant persons. In making this judgement 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.

9.1, 9.5-9.6

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 advice can be sought. Using an independent UKAS accredited certification body whose engineers are qualified and adhere to the 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 fully compliant FD30s doors (compatible door, frame, ironmongery, hardware etc).

Reference is made to Annex C of BSEN1634-1 - 'Fire resistance and smoke control tests for door and shutter assemblies, openable windows and elements of building hardware', which states "Doorsets made from other or composite materials are specifically excluded from this annex as there is not sufficient evidence of their behaviour in fire to be able to provide guidance on the weakest side against fire attack". This statement is re-enforced by a study conducted by the MHCLG 'GRP composite fire doors test results' in 2019 (GRP Composite Fire Doors Test Results), which sampled and tested a number of fire doors from 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.

Although the MHCLG Guidance 'Annex A: Assurance and Assessment of Fire Doors' has been withdrawn and can no longer be directly referred to, it is still considered that Appendix A of this document provides an indication of the process required to prioritise the replacement of composite flat entrance doors in a building.

Further advice on routine inspection and maintenance of fire resisting doors can be found in BS 8214 and LGA guidance Fire Safety in Purpose Built Flats section 82.

Note - WCHG have confirmed to our assessor that they have a flat entrance door renewal plan in place for existing composite flat entrance door sets.

9.1, 9.5-9.6, 9.16

Article 8 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to take general fire precautions to ensure the safety of relevant persons. This includes measures to reduce the risk of fire on the premises and the risk of the spread of fire on the premises

9.2

Dry riser outlets were fire stopped at each floor level.

Tom Porter (Building Safety Officer for WCHG) informed our assessor that 'Team Brand' (an external contractor) carry out the 9.4 quarterly common fire door checks as required by the Fire Safety (England) Regulations and that the annual flat entrance door checks are undertaken as part of the WCHG annual health and safety check which is carried out by an in house team.

9.5

All fire-resisting self-closing doors to the common areas throughout the building were self-closing and formed a tight seal between the door and the frame. Any defects to these doors will be identified during the 'Team Brand' (an external contractor) quarterly common fire door checks.

9.6 There were a number of new fire-resisting self-closing flat entrance doors. All flat entrance doors assessed were in good working order and were fire-resisting and self-closing. All other flat entrance doors on all floors looked in good condition. The new doors have been installed since recommendations from the previous fire risk assessment.





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.

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

9.16 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.



9.16 All refuse chute rooms, electrical rooms (Which could be opened) and risers were clear of combustible items at the time of the assessment.

9.27-9.28 The window spandrel panels on the outside of the building have been replaced with 'Proteus SP' material produced by 'Proteus Facades'. This is a polyester powder coated steel/ceramic powder coated aluminium/glass faced spandrel panel with Rockwool insulated core structurally bonded to a lightweight metal rear skin to be used within a curtain wall system. Warrington Fire Testing and Certification Limited have classified the material in relation to their reaction to fire behaviour as A2, S1, d0.

All information, testing details, documentation and certification relating to the new spandrels is held centrally with WCHG.



	10.0 Automatic Fire Detection		
10.1	Where a fire alarm system is required has one been provided?	Yes	
10.2	Is there suitable provision of automatic detection within the flats?	Yes	
10.3	Is there a procedure in place to ensure fire detection within residents' flats are routinely checked, to ensure they have not been tampered with?	Yes	
10.4	Is it possible to define the detection system category? (L1- L5 etc.)	Yes	
10.5	Is the automatic fire detection suitable for the risk and premises type?	Yes	
10.6	Does the system conform to standards appropriate to the purpose group for the premises/building use? i.e. BS 5839 Pt. 1 or BS 5839 Pt. 6 etc.	Yes	
10.7	Are sufficient call points and detectors provided?	Yes	
10.8	Can the alarm be raised without placing anyone at risk?	Yes	
10.9	Are all call points visible, unobstructed?	Yes	
10.10	Are all fire alarm sounders of the same type, giving the same alarm signal? The signal should be distinct from all other alarms or signals in the workplace to avoid confusion.	N/A	
10.11	Where required does the system have a voice alarm? i.e. large places of assembly	N/A	
10.12	Can the alarm be heard throughout all areas of the premises?	Not Known	
10.13	Has a suitable fire zone plan been provided adjacent to the fire panel where necessary? i.e. complex premises or care homes	Yes	
10.14	Is the fire alarm system under a regular maintenance programme by a qualified fire alarm engineer?	Yes	
10.15	Are there systems in place to ensure the system is tested weekly from a different call point?	Yes	
10.16	Are all fire alarm tests, faults and maintenance schedules recorded?	Yes	



	10.0 Automatic Fire Detection: Finding(s)
Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
D-f	None.
Ref	COMMENTARY The contract for detecting protein has also been confirmed to set on a form of Francisco Alext Contact (FAC), whereby it
10.0	The common fire detection system has also been configured to act as a form of Evacuation Alert System (EAS), whereby it can be used by the Fire and Rescue Service to sound on a chosen floor and the floors above and below the chosen floor. 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 manual 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.
10.6	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.
10.6	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.
10.6	The last fire risk assessment identified manual call points were not required in the communal areas. these manual call points have now been appropriately covered.
10.10	Only fire alarm sounders installed in the maintenance areas of the building including the roof are clearly audible and alert maintenance staff of activation of the fire the alarm system.
10.13	A suitable building and zone plan is provided adjacent to the fire alarm panel.
10.14	The last fire risk assessment identified a smoke detector In the cupboard near flats 81/82 (fourteenth floor) was sellotaped. This smoke detector has now been secured correctly.
10.15-10.16	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 every 6 months and this is recorded.



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.	



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



12.0	12.0 Fire Fighting Equipment, Facilities, Systems & Fixed Installations: Finding(s)	
Ref	SIGNIFICANT FINDINGS	
	None.	
Ref	RECOMMENDATIONS	
	None.	



Ref	COMMENTARY
12.1	There are no fire extinguishers within the common areas. It is not normally considered necessary to provide fire extinguishers or hose reels in the common parts of blocks of flats. Such equipment should only be used by those trained in its use. It is not considered appropriate or practicable for residents in a block of flats to receive such training. In addition, if a fire occurs in a flat, the provision of fire extinguishing appliances in the common parts might encourage the occupants of the flat to enter the common parts to obtain an appliance and return to their flat to fight the fire. Such a procedure is inappropriate.
12.1-12.3	CO2 fire extinguishers are provided in the lift motor room, the boiler room, the pump room and the lobby near to the old caretaker's area. A water fire extinguisher is also provided in the old caretaker's area.
12.4-12.5	The fire extinguishers provided on the premises are checked monthly and serviced annually by an approved contractor. The last annual service was carried out in September 2022. Records are kept on WCHG systems.
12.8	A BS9251 fully functioning sprinkler system has been installed in each flat with concealed sprinkler heads located in the hallway, each bedroom, the lounge, the enclosed balcony and the kitchen. In addition, there are also sprinkler heads located in the ground floor entrance lobby, the laundry and parts of the old caretaker's area. There are control valves located in a secure cupboard on each landing. Water tanks are provided on the top floor, near to the lift motor room, and an additional tank with a pump system is located on the ground floor near the meter room. The system is maintained and serviced by an approved contractor on a quarterly basis and Argus also attend weekly to visually check the sprinkler system.
12.8	
10 15 10 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. 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. The Source Information Box (SIR) is leasted by the main entrance to the building in the lift lobby. Access was not excluded to
12.15-12.16	The Secure Information Box (SIB) is located by the main entrance to the building, in the lift lobby. Access was not available to the SIB, however Tom Porter (Building Safety Officer for WCHG) confirmed that the contents were the same in each tower block, and a SIB had been accessed in another WCHG for our assessor to take note of the contents. The following information are held in WCHG SIBs:
	 Lobby access keys. Evacuation procedure information. Key contacts. Building information. Asbestos information. Building plans. Vulnerable resident information, currently labelled as PEEPs (see commentary 7.5, 7.7). Off the run report
	Note that or in any financial of the state o



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
13.15	Has wayfinding signage been provided to clearly indicate floor levels, flat numbers from within the staircase(s) and each floor level?	Yes
13.16	Is the signage in line with the ADB revisions 2020?	Yes



	13.0 Fire Safety Signs and Notices: Finding(s)
Ref	SIGNIFICANT FINDINGS
	Observation
13.6-13.8	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.
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	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. Flats 93+94
13.0	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
13.6-13.8	access and egress from the building. 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
13.12	(now the Emergency Alert System), which is that they should evacuate the premises via the stairway. 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?					
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?					
14.6	Are procedures in place to inform relevant persons of the need to report any potential fire hazards?	Yes				
14.7	Is there a fire policy for the premises/organisation that clearly defines the roles and responsibilities of who will contribute to overall fire safety management?	Yes				
14.8	Has the fire service inspected or had any formal meetings, familiarisation visits, operational crew/CFS visits within the last 12 months?	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	Is adequate access provided for fire service vehicles in the event of an emergency?	Yes				

	14.0 General Fire Safety Procedures: Finding(s)						
Ref	Ref SIGNIFICANT FINDINGS						
	None.						
Ref	RECOMMENDATIONS						
	None.						
Ref	COMMENTARY						
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.						
14.7	All important documents and data regarding the premises are stored off-site.						
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	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 appointed competent persons and arrangements (under Article 18 of the RRFSO) in place to assist the responsible person in the management and implementation of the preventative and protective measures? (safety assistance)					
15.2	Has an Accountable Person been appointed? Where there is more than one accountable person, are there procedures in place ensuring that all accountable persons co-operate with each other?	Yes				
15.3	Have all staff been trained in how to call the Fire Service, use of fire extinguishers, evacuation procedures and basic fire awareness?	N/A				
15.4	Do all new employees receive basic fire procedure and induction training on the date of appointment?	N/A				
15.5	Are records of fire safety training kept?	N/A				
15.6	Are systems and procedures in place to control any new work, alterations or repairs to the premises, so that no fire hazards are introduced?					
15.7	Is a "permit" to work procedure in place for contractors etc.?					
15.8	Where an alterations notice is in force has the enforcing authority been informed prior to any significant changes being made?					
	Fire Marshals & Fire Plans					
15.9	Are fire marshals required to take charge of a fire incident and liaise with the Fire Service where required?	No				
15.10	Is there a list of fire marshals displayed in all locations where required?	N/A				
15.11	Are systems in place to provide identification for fire marshals during an emergency where required?	N/A				
15.12	Has a suitable fire assembly point been designated? (i.e. free from traffic hazards, radiated heat and free movement away from the premises)	N/A				
15.13	Do the premises require a written fire emergency plan detailing the roles and responsibilities in order to safely evacuate?	Yes				
15.14	Where required, is the fire emergency plan displayed on the premises?	N/A				
15.15	Are there procedures for calling out key staff during fire related emergencies outside of normal working hours?	Yes				

	15.0 Fire Safety Management: Finding(s)						
Ref	Ref SIGNIFICANT FINDINGS						
	None.						
Ref	RECOMMENDATIONS						
	None.						
Ref	COMMENTARY						
	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.						
WCHG employs competent persons to carry out service and maintenance of all preventative and protective se							
	There is a written Emergency Evacuation Procedure Multi Storey Blocks document which was revised in August 2022 contained in the secure information box.						
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.						
15.3-15.5	Our assessor was informed that this premises is not staffed, except for occasional maintenance and cleaner visits.						
15.6-15.7	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.						
15.15	There are 'out of hours' Emergency Procedures and Emergency Evacuation Procedures in place.						



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

	16.0 Fire Evacuation Plan: Finding(s)					
Ref	SIGNIFICANT FINDINGS					
	None.					
Ref	RECOMMENDATIONS					
	None.					
Ref	COMMENTARY					
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:

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

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

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

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



Definitions:	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 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 ratin harm to persons, property	g two main areas are considered, the likelihood of an outbreak of fire and the potential for that outbreak to cause and business continuity.						
The likelihood of fire outbre slight, moderate and serio	eak is given a rating of highly unlikely, unlikely and likely, this is then multiplied by the harm potential rating of us harm.						
	n quantified as negligible, tolerable, moderate, substantial or intolerable. The subjective risk rating is el determined within the following parameters:						
Where the combination of severity of harm and likelihood is very low and there is minimal r. The risk of a fire occurring is rare and the potential for fire spread is negligible, also where t management is of a high standard. No further action is normally required unless circumstareassessment 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 re Where a fire is likely or highly likely to occur and the spread of fire development would be such available escape time would be substantially reduced. Premises identified with substantial risk normally require the provision of considerable resources in the form of equipment, training, info 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	
7	Likely	Moderate Risk	Substantial Risk	Intolerable Risk	



18.0 Summary of Findings

FRA Ref	Hazard or Defect	Action Required	Hazard Priority	Risk Rating	Action By	Review Date	Contractor Completed
8.7	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.	identified	Moderate			
9.1	compartmentation were identified in the areas specified in the full	It is recommended that the breaches are fire stopped to 60 minutes fire resistance - see full significant finding.	P1 - previously identified	Moderate			
9.1	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	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			
9.1	system has been installed the contractors have removed a portion of the frame at the top of the frame on the outside of the	It recommended to repair or replace the portion of damaged frame at all floor levels ensuring the fire resistance of the frame provides 30 minutes fire resistance.	P1	Moderate			
9.1, 9.5	flat on the fourteenth floor had its letterbox missing at the time of the	competent person attends	P1	Substantial			
9.6	There was a missing intumescent strip and smoke seal on a portion of the door to the tank room on the sixteenth floor and the electrical room opposite flat 55 on the ninth floor.	It is recommended to provide an intumescent strip and smoke seal to a portion of the door to the tank room on the sixteenth	P1	Substantial			
9.16	flat 54 (eleventh floor) could not be closed fully and did not lock shut.	remedial works are carried out to ensure that the door lock/secure shut when closed	P1	Moderate			
13.6-13.8			previously	Moderate			



19.0 Recommendations

FRA Ref	Observation	Recommended Action	Risk Rating	Contractor Completed			
THERE WERE NO RECOMMENDATIONS							



20.0 Commentaries

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



Appendix

Sixteenth Floor









