



TOTAL FIRE GROUP LTD

Fire Risk Assessment

Conducted at:

1-58 Hollyhedge Court
223 Hollyhedge Road
Manchester
Greater Manchester
M22 4QD



05 July 2021



Certificate Number	LS	0207516
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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.

SCHEDULE		
Part 1	NSI Life Safety Fire Risk Assessment Silver Approved Organisation	
	Total Fire Group Ltd	
	BAFE Registration Number	
	NSI 00330	
Part 2	Name of Client	
	Wythenshawe Community Housing Group Limited	
Part 3	Address of premises for which the fire risk assessment was carried out	
	1-58 Hollyhedge Court, 223 Hollyhedge Road, Manchester, Greater Manchester, M22 4QD	
	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 RRFSA 2005.	
Part 5	Effective date of the fire risk assessment	05/07/2021
Part 6	Recommended date for review of the fire risk assessment	05/07/2022

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

Signed (for and on behalf of the issuing Approved organisation)	
Job Title	Fire Safety Consultant & Auditor
Date	20/08/2021

1. This certificate is used subject to NSI Regulations and Rules of the NSI LIFE SAFETY FIRE RISK ASSESSMENT SILVER Approval Scheme.
2. NSI reserves the right to conduct an audit by an authorised NSI representative during normal business hours, with the permission of the customer, of the fire risk assessment and its related premises in order to ensure that the said risk assessment complies with BAFE Scheme document SP205-1 (the Scheme) Section 7 and generally.
3. NSI requires every NSI LIFE SAFETY FIRE RISK ASSESSMENT SILVER Approved Company to issue a Certificate of Conformity in accordance with the Scheme for all fire risk assessments it carries out that wholly or partly address life safety.
4. The Certificate of Conformity when completed is a clear statement that the Approved Company conducted the fire risk assessment for life safety, it is suitable and sufficient and compliant with the BAFE SP205-1 Scheme document and is certified by a registered competent fire risk assessor.
5. Where life safety and other aspects of fire protection are addressed in the same fire risk assessment a Certificate of Conformity shall be issued but the certificate shall make clear that the certificate applies only to the life safety aspects of the fire risk assessment and not further or otherwise.
6. Should the customer be dissatisfied with the fire risk assessment covered by this certificate, he/she should at first contact the Approved Company at its local office. If satisfaction is not obtained, the customer should address a written complaint to the customer services department at the head office of the Approved Company. If the customer remains dissatisfied, he/she may address a written complaint, outlining the nature of his/her dissatisfaction and the circumstances of the fire risk assessor company's response, to the Customer Care Manager at NSI.

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

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

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

7. This Certificate confirms conformity with the requirements of BAFE Scheme document SP205-1 applicable at the date of issue by the issuing company. NSI does not undertake to investigate any query or complaint in relation to future changes to BAFE scheme documents, policies or other regulations that render the fire risk assessment in need of further updating. In that event, the appropriate update should be carried out by a company holding NSI LIFE SAFETY FIRE RISK ASSESSMENT Approval.
8. NSI does not accept any responsibility or liability for any fire risk assessment produced by the Approved Company
9. Unless the issuing company's obligation to NSI in respect of the fire risk assessment are undertaken by another NSI Approved Company, NSI will not enforce its Rules or Standards on the Approved Company or on its successor in business in respect of any fire risk assessments after the issuing company ceases to hold NSI LIFE SAFETY FIRE RISK ASSESSMENT Approval.
10. The Certificate is issued subject to the terms and conditions of the company issuing the certificate for the fire risk assessment service.
11. On this certificate and in these terms and conditions, where the context permits, the reference to the issuing company shall include any Approved Company who shall undertake the issuing company's obligations to NSI in respect of the fire risk assessment.

Note.

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

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TERMS AND CONDITIONS OF BUSINESS

1-58 Hollyhedge Court, 223 Hollyhedge Road, Manchester, Greater Manchester, M22 4QD

This fire risk assessment is in accordance with the full Terms and Conditions provided with our quotation that should be read in full. This fire risk assessment is made without prejudice to any requirements made by Local Authority, Building Control or by the local Fire Authority. Fire assessment and evaluation of risk is a dynamic and evolving process. The Assessment that we have prepared is based on the appearance of the premises/building, number of employees, internal layout and information provided on **Monday, 5 July 2021**

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.

Part 2: References and Methodology Index

A. Extracts from RRO (FS) 2005 Articles Part 2 – Fire Safety Duties:

- Article 8 – Duty to take general fire precautions
- Article 9 – Risk assessment
- Article 10 – Principles of prevention to be applied
- Article 11 – Fire safety arrangements
- Article 12 – Elimination or reduction of risks from dangerous substances
- Article 13 – Fire-fighting and fire detection
- Article 14 – Emergency routes and exits
- Article 15 – Procedures for serious and imminent danger and for danger areas
- Article 16 – Additional emergency measures in respect of dangerous substances
- Article 17 – Maintenance
- Article 18 – Safety assistance
- Article 19 – Provision of information to employees
- Article 20 – Provision of information to employers and the self-employed from outside undertakings
- Article 21 – Training
- Article 22 – Co-operation and co-ordination
- Article 23 – General duties of employees at work
- Article 37 – Fire-fighters' switches for luminous tube signs etc.
- Article 38 – Maintenance of measures provided for protection of fire fighters

Part 2: References and Methodology Index continued

- B. The Fire Safety (Employees Capabilities) (England) Regulations 2010**
- C. Fire Safety Management**
- D. Information on Fire Alarm Systems**
- E. Information on Fire Fighting Equipment and Training**
- F. Information on Emergency Lighting**
- G. Information on Fire Safety Signs and Notices**
- H. Frequency Checks, Fire Safety Maintenance Log**
- I. Working with contractors**
- J. The Electricity at Work regulations 1989**
- K. Personal Emergency Evacuation Plan – Examples**
- L. FRA Review Information**
- M. Review Checklist**

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:

1-58 Hollyhedge Court, 223 Hollyhedge Road, Manchester, Greater Manchester, M22 4QD

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1.0 Fire Risk Assessment Details

Responsible person(s):

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

Person(s) consulted and landline contact number:

Diane Burrell Facilities Manager 0161 946 9191.

Fire Risk Assessor:

Garry Pritchard MIFireE, MIFSM, (Tier 3 Nationally Accredited Fire Risk Assessor 0138)

Audited by:

Garry Dutton BEng(Hons) Fire Engineering, MIFSM, (Tier 3 Nationally Accredited Fire Risk Assessor 097)

Date fire risk assessment was conducted:

Monday, 5 July 2021

Time:

10.45 a.m.

Date of last FRA or FRA Review (if known)

13 Jul 2020

Suggested date for next review:

July 2022

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 gained to Flats 9 and 55. Access was also gained to the caretaker's area, ground floor plant rooms, the bin room, the community room, the biomass room and a large sample of the service risers. The roof, lift motor room and the areas above the false ceiling on the ground floor were accessed.

The assessment of the fire performance of the external wall construction and cladding is excluded from this assessment. Where commented on, advice is given to obtain a separate assessment as recommended in current MHCLG consolidated advice note (CAN) January 2020 and the Fire Industry Association (FIA) Guidance note June 2020.

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

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

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

Note

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

2.0 General Premises Details

2.1 Number of floors:

12 including the ground floor.

2.2 Approximate building footprint:

600m²

2.3 Details of Construction and Premises:

Hollyhedge Court was built in 1962 and is a high rise residential block. It was constructed with concrete floors and stairs and has a flat roof. The main entrance leads into a protected lobby and then into the lift lobby where there are two lifts. The single stairway terminates in the ground floor protected lobby adjacent to an alternative exit to outside. On the ground floor, from the lift lobby, there is corridor access to the Community Room (with alternative fire exit) which is currently used as a site office by a contractor. There is a further office and some cupboards off this corridor. Another corridor entered by a door opposite the lifts leads to the caretaker's area which contains the pump/tank room and has access doors to other rooms and cupboards. On the upper floors, the flat entrance doors open into the lift lobby and are separated from the stairway by a short corridor. This corridor also gives access to the refuse chute which is protected by a fire door. The inlet for the dry rising main is on the front of the premises and the outlets are located within the lift lobbies. The flats have a hallway approach to the habitable rooms and they are provided with a BS 5389 Pt 6 fire alarm and detection system and sprinkler protection. The sprinkler system also extends in to other areas of the premises, such as plant rooms.

The existing fire alarm has been previously reconfigured to be a silent system and is now used as an Evacuation Alert System for use by the Fire and Rescue Service only. Emergency lighting is provided throughout the premises.

2.4 Occupancy/Purpose Groups

The premises are classed as Purpose Group 1a Residential (Flat) as defined by Building Regulations Approved Document B 2006 Table D1.

2.5 Approximate maximum number of persons:

An assumption of two persons per flat.

2.6 Approximate maximum number of employees at any one time:

Limited to 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:

<i>Sleeping occupants</i>	
Persons familiar with the premises	Yes
Persons unfamiliar with the premises	N/A
<i>Occupants with disabilities</i>	
Mobility-impaired	Yes
Hearing-impaired	Yes
Learning difficulties	Yes
Occupants in remote areas	No
Others	No
Comments	
<p>Flats are general needs. Residents may be present with any combination of disabilities throughout the premises. WCHG should provide information and regularly remind tenants on the fire procedures by providing leaflets and where necessary encouraging new tenants to have a home fire safety check by the local fire service. Specific measures regarding tenants with any disabilities identified can be discussed and implemented following the home fire safety check in conjunction with relevant local community services.</p>	

2.9 Fire Loss Experience

None reported since the last Fire Risk Assessment.

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.

This assessment has highlighted issues concerning the external wall systems. However, there are compensatory features including the fire alarm and sprinkler systems that mean the 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

The compartmentation within the premises and the compensatory features detailed above mean that 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

IDENTIFYING THE FIRE HAZARDS

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

4.0 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 Review, 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?	N/A
6.9	Are all appliances turned off when the area is unoccupied?	N/A
6.10	Are all appliances protected by the correct fuse rating?	N/A
6.11	Are systems in place to isolate any appliance with a blown fuse?	N/A
6.12	Are all appliances free from visible signs of overheating?	N/A
6.13	Are multi-point adapters and extension leads kept to a minimum?	N/A
6.14	Are walkways or escape routes free from trailed cables?	N/A
6.15	Are cables free from mechanical damage?	N/A
6.16	Do signs indicate all electrical hazards?	Yes
6.17	Are reasonable measures taken to prevent fires as a result of cooking?	N/A
6.18	Are filters changed and ductwork cleaned regularly?	N/A
6.19	Are suitable extinguishing appliances available?	N/A
6.20	Are legal or other requirements for testing, maintenance & record keeping complied with for equipment such as lifts, hoists, escalators, air handling systems, heating boilers, pressure vessels etc.?	Yes
6.21	Do the premises have a lightning protection system? (where required)	Yes
6.22	Have other potential sources of heat not listed above been considered?	Yes

6.0 Heating and Electrical Appliances: Finding(s)

Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
6.1	There is no heating provided in the communal areas. The flats are heated by a communal biomass heating system with a gas backup.
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	Mains electrical tests are carried out. The date of the last test recorded was 13.12.16.
6.20	All gas installations have safety checks carried out on a 10 month rolling programme of work. All equipment such as the heating system and the lifts are maintained under contract. Records are kept on WCHG systems.
6.21	The lightning protection system is tested on an annual basis. The tests are recorded and all records are stored on WCHG systems.
6.22	No other sources of ignition were identified during this assessment.


7.0 Persons at Risk Audit

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

7.0 Persons at Risk Audit: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	Observation
7.3	<p>Information regarding the residents who would require assistance to evacuate is now held in the WCHG CCTV control room which is staffed 24/7. Should an incident occur, an Assure 24 staff member will attend the premises and pass this information to the Fire and Rescue Service.</p> <p>Personal Emergency Evacuation Plans (PEEPs) are currently not required in high rise general needs blocks of flats, however, following recommendations from the Grenfell Tower Inquiry Phase 1 report, the Home Office have intentions to make it a legal requirement to implement PEEPs in new and existing high rise flats by the introduction of regulations via Article 24 of the Fire Safety Order. This will require responsible persons to provide a tailored approach to evacuation for those residents who self-identify to WCHG that they would have difficulty self-evacuating in the event of a fire.</p>
	Recommended Actions
7.3	<p>Since WCHG already have details of vulnerable persons available via their Assure 24 fire alarm actuation procedures, they should consider the guidance in the current HM Government consultation for the preparation of Personal Emergency Evacuation Plans (PEEPs) for residents who self identify that they are unable to self evacuate.</p> <ul style="list-style-type: none"> • Best practice indicates templates should be aligned to HM guidance. • Current information should also follow recently released NFCC and FIA guidance on the provision of information to fire services on the location and regular updating of the information regarding PEEPs. • See also recommendation Section 12 of this assessment regarding Premises Information Boxes (PIB). <p>It is not implied that at this time there is a requirement in law for these systems to be installed in blocks of flats, the above information is provided for the client to pre-plan for the proposed changes to the fire safety order following the implementation of the fire safety bill. See commentary.</p>
Ref	COMMENTARY
7.0	The building is general needs flats and individual PEEPs, evacuation drills and staff procedures are not required.
7.3	Residents may be present with any combination of the above disabilities throughout the premises. Individual PEEPs are not <u>currently</u> considered appropriate for general needs flats (however, see Recommendation 7.3 regarding PEEPs). It is not known if new tenants who occupy the flats have any disabilities, but an assessment towards their ability to react to a fire within the premises should be undertaken on taking up residence.
7.3	<p>The consultant is making the responsible person aware of the following, which could require significant resources to implement should the proposals become a legal requirement. The Home office has recently published a consultation document entitled Personal Emergency Evacuation Plans in High Rise Residential Buildings – recommendations from the Grenfell Tower Inquiry Phase 1 report. The report includes the following proposals:</p> <ul style="list-style-type: none"> • Proposal 1: To require the Responsible Person to prepare a PEEP for every resident in a high-rise residential building who self-identifies to them as unable to self-evacuate (subject to the resident's voluntary self-identification) and to do so in consultation with them. • Proposal 2: To provide a PEEP template (Annex A) to assist the Responsible Person and the residents in completing the PEEP, and to support consistency at a national level. • Proposal 3: Proposal to require the Responsible Person to complete and keep up to date information about residents in their building who would have difficulty self-evacuating in the event of a fire (and who have voluntarily self-identified as such), and to place it in an information box on the premises to assist effective evacuation during a rescue by the Fire and Rescue Service. • Proposal 4: In order to assist the Responsible Person and support consistency at a national level, to provide a template to capture the key information to be provided in the information box. <p>The current consultation on PEEPs can be found at: https://www.gov.uk/government/consultations/personal-emergency-evacuation-plans</p> <p>See Section 12 regarding current guidance on information required in Premises Information Boxes</p>
7.8	Various members of the WCHG staff including the caretaker are on the premises at different times. They are all familiar with the layout of the premises including the exit routes. Evacuation drills are not considered to be necessary.
7.10-7.11	Entry is controlled by the residents who are informed of any visitors via the intercom located adjacent to the main entrance door. Contractors are organised and controlled by WCHG.



8.0 Escape

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

8.0 Escape: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
8.5	 <p>The above Photographs show an example of the means of smoke ventilation in the stairway of the premises. The layout is the same on all floors from the first floor upwards. The vent on the stairs leads into the ducting which in turn vents direct to outside. WCHG have previously engaged third parties to confirm that this method of smoke ventilation is adequate. Smoke modeling calculations have been provided by a fire engineer that concluded that provided new grilles were fitted and the ducting was cleaned that the existing provisions for smoke ventilation are satisfactory. In addition, the ducting has been inspected by another third party who confirmed that they were fit for purpose. WCHG have documentary evidence available issued by the third-parties. It was noted that permanent vents are located in the short corridor between the lift lobby and the stairs and adjacent to the bin chute hopper.</p>
8.5, 8.10, 8.17	WCHG have previously confirmed that all the electro-magnetic locks within the residential areas of the premises are linked to the fire alarm and conform to BS 7273 part 4. In addition, the biomass room also has an electro-magnetic lock on the entrance door from the lift lobby which is linked into the independent fire alarm system for this room. This lock also conforms to BS 7273 part 4.
8.11	Final exit doors are used regularly by residents and it can be reasonably expected that any fault would be reported.
8.11, 8.17	The electro-magnetic door lock release mechanisms are checked weekly. They are also serviced/tested every six months.
8.16	The fire doors between the short corridor and the stairway on each floor are fitted with electro-mechanical locks. These locks can be opened on the escape (corridor) side without the use of a key.

9.0 The Confinement of Fire

9.1	Are all escape routes and compartments protected by fire resistant walls and doors where required?	Yes
9.2	Are all fire doors self-closing, kept locked shut where appropriate and in good condition?	No
9.3	Are all fire doors fitted with smoke seals and intumescent strips where required?	Yes
9.4	Do wall & ceiling linings meet the required surface spread of flame classes? e.g. Class O on escape routes	Yes
9.5	Have any breaches in the fire resistance (walls, floors and doors) been fire stopped with appropriate fire resisting materials?	Yes
9.6	Have there been any structural alterations within the past 12 months?	No
9.7	Were the requirements of the Building Regulations followed and a completion certificate issued?	N/A
9.8	Are all ducts fitted with effective fire dampers where required?	Yes
9.9	Are all fire exits underneath and within 1.8m horizontal or 9m vertically of any external escape stair, fire resisting and self-closing?	N/A
9.10	Is glazing within the above distances fire resisting and fixed shut?	N/A
9.11	Is there a procedure for all premises/areas to be checked at the end of a working period for potential fire hazards?	N/A
9.12	Are the premises free from risk posed by adjacent properties? (Uncontrolled fly tipping, overgrown vegetation or poor housekeeping)	Yes
9.13	Has the risk of external fire spread been considered? Consider external cladding, wall systems, external render and balconies.	Yes
9.14	Are there any other premises features or hazards that could affect fire development or spread?	No
9.15	Are the premises secure from any potential fire hazards outside susceptible to arson attack that could affect the building?	Yes
Automatic Hold Open Devices		
9.16	Are any fire doors fitted with automatic door release devices?	No
9.17	Are the devices fitted to any critical doors? e.g. onto stairs in a single staircase building	N/A
9.18	Is smoke detection provided within the area located near to the door release device? (Consider to L3 standard?)	N/A
9.19	Are all non-self-contained devices linked to the fire alarm system and released on actuation?	N/A
9.20	Are any self-contained, acoustically actuated door hold open devices fitted?	No
9.21	Are all devices tested regularly and the results recorded? (At least once a week)	N/A
9.22	Are all doors released at night or when the area is unoccupied?	N/A
9.23	Are all devices tested in accordance with the manufactures relevant standard to ensure satisfactory operation?	N/A

9.0 The Confinement of Fire: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	Observation
9.2	 <p>The above photograph shows that the fire resisting hatch doors that enable access to the lift motor room are damaged and no longer close and stay fully closed in the rebate. Where fire doors do not close fully into the rebate, they will not act as a barrier to prevent the spread of fire and the products of combustion from spreading from one area to another, including the escape routes. This would place persons at risk of harm.</p>
	Recommended Actions
9.2	The fire resisting hatch doors should be replaced or repaired.
	Observation
9.5	 <p>The three photographs above show three of the four areas of damaged fire stopping that were identified during this assessment. Photograph 1 shows the fire stopping in the service riser cupboard between adjacent to Flat 13. Photograph 2 shows the fire stopping in the service riser cupboard adjacent to Flat 51. Photograph 3 shows the fire stopping in the service riser cupboard adjacent to Flat 29. There was also damaged fire stopping in the service riser cupboard to Flat 8. Damaged or incomplete fire stopping will not prevent the spread of fire from one area to another, including the escape routes. This would place persons at risk of harm. Since the date of this assessment, our assessor has been informed by WCHG that the process for the fire stopping to be repaired has been instigated.</p>
	Recommended Actions
9.5	All breaches in compartmentation should be fire stopped. The work should be carried out using materials that are suitable for the location where they are to be used and should provide the same fire resistance as the structure where they are to be used in accordance with BS 476.
	Observation
9.13	<p>The previous Fire Risk Assessment stated that WCHG has confirmed that the curtain walling that encloses the balconies to the flats is aluminium framed with clear and opaque glazing throughout. The render system and brick slips are applied directly to mineral wool insulation slabs, which in turn are fixed directly to the original facade. They have also now provided some documentation in respect of the External Wall Insulation (EWI). However, attention is drawn to the Ministry of Housing, Communities & Local Government Consolidated Advice Note for building owners of multi-storey, multi-occupied residential buildings, dated January 2020: http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/869532/Building_safety_advice_for_building_owners_including_fire_doors_January_2020.</p> <p>The Advice Note recommends that building owners should consider the risk of external fire spread as part of the fire risk assessment for multi-occupied residential buildings. Consideration has been given to this matter within this fire risk assessment. The Advice Note further recommends the assessment of the fire risks of any external wall system, irrespective of the height of the building. Where the external wall/structure or balconies can assist a fire spreading, this may place relevant persons at risk of harm.</p>
	Recommended Actions
9.13	<p>It is strongly recommended that you obtain advice from qualified and competent specialists on the nature of, and fire risks associated with, the external wall system and the external wall insulation system construction, fitted to this building. This exclusion is consistent with advice provided by The Fire Industry Association and is discussed in their guidance note to fire risk assessors on this matter: https://www.fia.uk.com/</p> <p>NOTE: Short term interim measures may be required and the fire and rescue service informed of the cladding, see section 11 MHCLG advice note Jan 2020.</p>
Ref	RECOMMENDATIONS
	None.

Ref	COMMENTARY
9.1, 9.5	It was previously highlighted that there were two service risers or shafts containing soil pipes for the flats. One is located in the caretaker's corridor behind the bin room and the other in the corridor leading to the community room which is still being used as a site office. WCHG have confirmed that fire stopping and compartmentation works have been carried out to ensure that the soil pipes and other associated pipework are fire stopped where they pass through compartment floors and walls and where necessary they are enclosed in fire resisting construction. Documentary and photographic evidence is available.
9.1, 9.5	As highlighted previously compartmentation works have been carried throughout the premises by Allied Protection Ltd. They are an accredited passive fire protection contractor and they have provided WCHG with documentary/photographic evidence of their work. Following the installation of the fire alarm system, further fire stopping was required. This was carried out by Flame Hold Ltd who are also an accredited passive fire protection contractor. They have also provided WCHG with documentary/photographic evidence of their work.
9.2-9.3	<p>WCHG have confirmed that the entrance doors to individual flats are checked annually by their in-house gas service engineers who have attended a training course provided by a third party. The checks include:</p> <ul style="list-style-type: none"> • Confirming that the door is in good condition and fits properly into the frame. • Confirming that the letterbox is intact and not damaged. • Confirming that the door has a self-closing device and that the door is fully self-closing. • Confirming that the door or frame is fitted with intumescent strips and cold smoke seals that are complete and not damaged. • Checking that any glazing in the door is fire resistant.
9.2, 9.5	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.
9.5, 9.8	WCHG have previously confirmed that Allied Protection Ltd has completed fire stopping and compartmentation works to prevent fire spread via the common bathroom extract shafts. They have also fitted fire rated valves with an intumescent infill in the bathrooms which are connected to the ducting and shaft. Although these valves will not prevent smoke spread into the shaft they are an acceptable method of preventing fire spread. Documentary and photographic evidence is available.
9.5, 9.8	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 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. Current guidance recommends 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. It is recommended where rectifying 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.
9.13	<p>The assessment by specialists should follow the process set out in the MHCLG Consolidated Advice Note. Note should be taken of diagram 1 of that document. This assessment should demonstrate how the external wall construction supports the overall intent of Requirement B4 (1) in Part B of Schedule 1 to the Building Regulations 2010, namely that "the external walls of the building shall adequately resist the spread of fire over the walls and from one building to another, having regard to the height, use and location of the building". In this connection, the assessment should address this functional requirement (regardless of the height of the building) and not just the recommendations set out in guidance that supports the Regulations (e.g. Approved Document B under the Regulations). The assessment should not just comprise a statement of either compliance or non-compliance with the functional requirement or the guidance, but should include a clear statement on the level of risk and its acceptability.</p> <p>This assessment by specialists should take into account a number of factors, including, but not necessarily limited to:</p> <ul style="list-style-type: none"> • The type of evacuation strategy used in the building, i.e. simultaneous, staged, phased or 'stay put' and the anticipated evacuation time should evacuation become necessary; • Suitability of the facilities for fire fighting, including fire fighting access for the fire and rescue service; • The construction of the external walls, including any cladding and its method of fixing; • The presence, and appropriate specification, of cavity barriers; • The height of the building; • The vulnerability of residents; • Exposure of external walls or cladding to an external fire; • Fire protection measures within the building (e.g. compartmentation, automatic fire suppression, automatic fire detection); • Apparent quality of construction, or presence of building defects; • The combustibility of the building structure and the use of modern methods of construction, such as timber framing, CLT etc; • The location of escape routes; • The complexity of the building; and • The premises' emergency plan including an assessment of the adequacy of any staffing levels for the type of evacuation method employed. <p>The assessment is likely to take account of information on any approval of the building (and alterations to the building) under the Building Regulations, and of information on external wall construction and any cladding available from the Responsible Person (e.g. in operation and maintenance manuals, or handed over for compliance with Regulation 38 of the Building Regulations). It is unlikely that an RICS EWS1 form will provide adequate assurance on its own.</p>
9.14	The lift motor room has a permanent vent.


9.14



In the bin room on the ground floor, the bin in use is located adjacent to a lid that has a fusible link and closes should a fire occur within the bin to prevent fire spread up the chute. The fusible link is checked annually by an appointed contractor. The photographs above show the lid and fusible link mechanism and also an example of the bin hoppers that have been installed on each floor.

10.0 Fire Alarm System

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

10.0 Fire Alarm System: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	Observation
10.6	 <p>The photograph above shows a smoke detector in the corridor to the community room that is fitted with a dust cover. The dust cover will prevent the detector from working correctly when required and will therefore place persons at risk of harm.</p>
	Recommended Actions
10.6	The dust cover should be removed.
	Observation
10.12-10.14	Where additional break glass call points, alarm sounders and visible warnings have been installed in the lift motor room and/or on the roof, our assessor has been unable to confirm that they have been added to the testing and maintenance schedule. Should these devices not be tested and maintained in accordance with BS 5389 they may fail to work when required and thereby place persons at risk of harm.
	Recommended Actions
10.12-10.14	WCHG should confirm that any additional break glass call points, alarm sounders and visible warnings installed in the lift motor room and/or on the roof, have been added to the testing and maintenance schedule.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
10.0	The common fire detection system is configured for the Fire and Rescue Service to use as an Emergency Alert System (EAS). One of the recommendations made in the Grenfell Tower Inquiry Phase 1 report published in October 2019 recommends; "that all high-rise residential buildings (both those already in existence and those built in the future) be equipped with facilities for use by the Fire and Rescue Services (FRS) enabling them to send an evacuation signal to the whole or a selected part of the building by means of sounders or similar devices" Such systems should be separate from any fire detection and warning system as recommended in BS 8629. The evacuation strategy has reverted to a stay-put strategy. The common area fire detection system is configured as a silent system under normal operating mode and the fire panel control and indicating equipment (CIE) is provided for use by the FRS for manually alerting individual or multiple floors to evacuate should the need arise during firefighting operations. On activation of a fire/smoke detector or call point within the common area, a signal is sent to the CIE in the entrance foyer and then transmitted to an offsite receiving centre where a call is made to the FRS for a response to the building. The system was configured following consultation with GMFRS. It is not in accordance with the recommendations of British Standard 8629:2019, Code of Practice for the Design, Installation, Commissioning and Maintenance of Evacuation Alert Systems for use by the Fire and Rescue Service in Buildings Containing Flats.
10.1	WCHG has previously confirmed that each flat has been provided with a BS 5389 Pt 6 Grade D LD 1 system with smoke detection in the bedrooms, living areas, lobby areas and with a heat detector in the kitchen. This was confirmed in the two flats accessed by our assessor.
10.2	The Bio-mass room has its own BS5389 Part 1 Category L5 system. This alarm is monitored but by a different ARC than the main BS5389 Part 1 Category L1 system.
10.6	Article 13 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to ensure the premises are, to the extent appropriate equipped with appropriate fire detection and alarms.
10.12-10.14	The Evacuation Alert System is tested weekly by the staff from WCHG's Facilities Department. A record of the test is kept onsite and on WCHG's systems. The maintenance of the system is carried out by an approved contractor and is also recorded. The separate fire alarm system in the bio-mass room is tested weekly by WCHG facilities staff and maintained by an appointed contractor. The appropriate records are kept on-site and on WCHG's systems.
10.12-10.14	Article 17 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to provide a suitable system of maintenance for any facilities, equipment and devices so that they are maintained in good working order.

11.0 Emergency Escape Lighting

11.1	Has the provision of emergency lighting been considered? Working hours, windowless areas, open access areas>60m ² , toilets>8m ² .	Yes
11.2	Is emergency lighting provided in accordance with guidance relevant to the purpose group for the premises? (BS5266, ADB Table 9)	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
11.4	There is adequate borrowed light available for persons to reach a place of safety.
11.5-11.6	Monthly and six monthly checks are undertaken by a qualified engineer from the appointed contractor. A record of the checks is kept on WCHG systems.

12.0 Fire Fighting Equipment, Systems & Fixed Installations

12.1	Where appropriate are adequate numbers of fire extinguishers provided? Consider floor area, special risks, minimum travel distance of 30m.	Yes
12.2	Are the correct types of extinguishers provided for the risks?	Yes
12.3	Are all extinguishers installed and sited in accordance with current guidance?	Yes
12.4	Are appropriate checks carried out on a monthly basis?	Yes
12.5	Are all extinguishers serviced by a qualified engineer every 12 months?	Yes
Fixed Installations		
12.6	Are any fixed firefighting installations provided? (Sprinkler systems, local gas flooding etc.)	Yes
12.7	Are all systems fully operational and under a maintenance programme?	Yes
12.8	Are all security devices functional? (Sprinkler valves, wet & dry rising mains padlocked etc.)	Yes
12.9	Where sprinklers are fitted are all heads clear of obstructions (500mm clear of stock) and functional?	Yes
12.10	Are firefighting shafts with dry or wet mains provided?	No

12.0 Fire Fighting Equipment, Systems & Fixed Installations: Finding(s)

Ref	SIGNIFICANT FINDINGS
	Observation
12.6	The standard of the existing lifts could not be determined. As different types of lifts provide different levels of safety and control of the lift for firefighters, it is important that the correct details are available. Firefighters using a lift that does not provide a perceived level of safety would be placed at risk of harm or delayed in their firefighting operations, which would place relevant persons in the building at risk of harm.
	Recommended Actions
12.6	The standard of the two lifts should be confirmed and the details should be available for the fire and rescue service to ensure that they are aware of the standard of the lifts. It should also be confirmed that the required testing and maintenance of the lifts are carried out. This may include weekly tests of the control equipment for firefighters.
Ref	RECOMMENDATIONS
	Observation
12.0	Information about the premises is displayed on wallboards in the ground floor lobby. This information includes plans of typical floors and sprinkler zones. In addition, information regarding the residents who would require assistance to evacuate is also available (see Section 7.3). Since the previous Fire Risk Assessment, the Fire Industry Association and the National Fire Chiefs Council have issued "Code of Practice for the Provision of Premises Information Boxes in Residential Buildings to ensure that new legislation and the recommendations of the Grenfell Tower inquiry regarding information that is available to the fire service is available in a consistent format to assist at an incident, especially where vulnerable persons may be at risk. The information currently available to the fire service at an incident may not be adequate to meet the standards set out in the Code of Practice.
	Recommended Actions
12.0	It is recommended that WCHG should follow the FIA and NFCC code of practice and update the information available to firefighters as required consulting with the fire and rescue service where appropriate. The code of practice is available at the following link: https://www.fia.uk.com/news/fia-and-nfcc-s-new-code-of-practise-on-the-provision-of-premises-information-boxes-pibs-in-residential-buildings.html
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, 12.4-12.5	Fire extinguishers are provided in plant and staff areas. They are checked monthly and serviced annually by an approved contractor. Records are kept on WCHG systems. The next service is due in December 2021.
12.6	A BS 9251 sprinkler system has been installed. In each flat, there are 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 internal plant areas and the area currently used as a site office. There are control valves located in a secure cupboard in each lift lobby. A pump and water tank for the sprinkler system have been provided in one of the plant rooms on the ground floor. The system is maintained and serviced by an approved contractor.
12.6	Article 38 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to ensure the premises and any facilities equipment or devices provided in respect of the premises for use or the protection of firefighters are suitably maintained.
12.10	The dry rising main is both pressure tested and visually inspected annually, with six months between the two visits. The tests and inspections are carried out by an approved contractor. WCHG have confirmed that the last pressure test took place on 22.5.21. Records are kept on WCHG systems.

13.0 Fire Safety Signs and Notices

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

13.0 Fire Safety Signs and Notices: Finding(s)

Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
13.0	"In the event of fire do not use his lift " notices have been provided on each landing adjacent to the lift.
13.0	As recommended in the previous Fire Risk, improved wayfinding signage has been provided. 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.
13.6, 13.8	A fire action notice is displayed in the entrance area.

14.0 General Fire Safety Procedures

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

14.0 General Fire Safety Procedures: Finding(s)

Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
14.1-14.2	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, Wythenshawe Community Housing Group, has the overall responsibility for fire safety related matters and management.
14.11	All important documents and data regarding the premises are stored off-site.
14.12	The Fire Service has been provided with access fobs for all WCHG high rise blocks.

15.0 Fire Safety Management		
15.1	Are there an adequate number of competent persons and arrangements (under Article 18 of the RRFSo) in place to assist the responsible person in the management and implementation of the preventative and protective measures? (safety assistance)	Yes
15.2	Have all staff been trained in how to call the Fire Service, use of fire extinguishers, evacuation procedures and basic fire awareness?	Yes
15.3	Do all new employees receive basic fire procedure and induction training on the date of appointment?	Yes
15.4	Are records of fire safety training kept?	Yes
15.5	Are systems and procedures in place to control any new work, alterations or repairs to the premises, so that no fire hazards are introduced?	Yes
15.6	Is a "permit" to work procedure in place for contractors etc.?	Yes
15.7	Where an alterations notice is in force has the enforcing authority been informed prior to any significant changes being made?	N/A
Fire Marshals & Fire Plans		
15.8	Are fire marshals required to take charge of a fire incident and liaise with the Fire Service where required?	N/A
15.9	Is there a list of fire marshals displayed in all locations where required?	N/A
15.10	Are systems in place to provide identification for fire marshals during an emergency where required?	N/A
15.11	Has a suitable fire assembly point been designated? (i.e. free from traffic hazards, radiated heat and free movement away from the premises)	N/A
15.12	Do the premises require a fire plan in order to evacuate?	Yes
15.13	Are there clearly defined written procedures to be followed in the event of a fire in the form of an emergency plan?	Yes
15.14	Is a fire plan displayed throughout the premises where required?	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	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
15.1	WCHG employs competent persons to carry out service and maintenance of all preventative and protective services.
15.2-15.4	WCHG have confirmed that adequate fire safety training is in place both for induction and repeat training for all staff that work at the premises. Appropriate training records are kept by the HR Department.
15.5-15.6	WCHG have systems in place to control new work, repairs and alterations to ensure that no fire hazards are introduced into the premises. They also have a permit to work system in place for contractors.
15.15	There are "Out of hours" Emergency Procedures and Emergency Evacuation Procedures in place.

16.0 Fire Emergency Plan

16.1	Do the premises have a fire procedure/emergency plan and is it suitable for the numbers of staff and the processes carried on within the premises?	Yes
16.2	If the premises operates a "stay put" policy, is this suitable?	Yes
16.3	In multi-occupied buildings do all the fire /emergency plans complement each other?	N/A

16.0 Fire Emergency Plan: Finding(s)

Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
16.1-16.2	The premises were constructed as purpose built flats complying with the Building Regulations in force at that time. They incorporate compartmentation between each flat and between the flats and the escape route and this supports a "stay put" policy. However, the comments in Section 9.0 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, 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. WCHG has also produced a comprehensive fire action notice which includes the actions to be taken on discovering a fire or on hearing the Evacuation Alert System. This notice is displayed in the entrance area to the premises.

17.0 Risk Analysis, Priority Ratings and Fire Risk Ratings

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

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

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

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

Definitions:	
Hazard:	An article, substance, machine, installation or situation with potential to cause harm, loss or both. A fire hazard is a hazard that has the potential to cause a fire or promote fire development and/or spread.
Risk:	A measure of the probability that the potential for harm or loss posed by the hazard will materialise, combined with the potential extent and severity of the harm and/or damage that may result.
Harm:	Physical injury, death, ill health, property and equipment damage and any form of associated loss, which could cause harm.
<p>To determine the risk rating two main areas are considered, the likelihood of an outbreak of fire and the potential for that outbreak to cause harm to persons, property and business continuity.</p> <p>The likelihood of fire outbreak is given a rating of highly unlikely, unlikely and likely, this is then multiplied by the harm potential rating of slight, moderate and serious harm.</p> <p>The level of fire risk is then quantified as negligible, tolerable, moderate, substantial or intolerable. The subjective risk rating is calculated and the risk level determined within the following parameters:</p>	
Negligible Risk	Where the combination of severity of harm and likelihood is very low and there is minimal risk to people's lives. The risk of a fire occurring is rare and the potential for fire spread is negligible, also where the overall fire safety management is of a high standard. No further action is normally required unless circumstances change. A reassessment should take place on the review date.
Tolerable Risk	Where the present systems, facilities or management procedures are reasonably satisfactory at the time of the assessment. Escape should be carried out unaided with effective fire safety management procedures in place. Possible minor actions may be required, with a reassessment being conducted at the review stage.
Moderate Risk	The present systems, facilities or management is unsatisfactory in some areas. Where a fire could occur and the available time needed to evacuate may be reduced by the speed of the development of fire, also where the reaction time of occupants may be slower because of the type of persons present e.g. sleeping, elderly or infirm or where there are large numbers of persons or complex escape routes. Remedial actions will be required with some control measures being implemented. A reassessment should be made once the control measures have been put in place.
Substantial Risk	Where the combination of severity and probability is high and urgent action must be taken to reduce the risk. Where a fire is likely or highly likely to occur and the spread of fire development would be such that the available escape time would be substantially reduced. Premises identified with substantial risk areas will normally require the provision of considerable resources in the form of equipment, training, information and management to mitigate the risks.
Intolerable Risk	Where the combination of severity and probability is such that extreme harm or death will occur and there is a real threat of an outbreak of fire. Action must be taken to immediately reduce the risk, ideally to a tolerable level. If this cannot be achieved, then consideration must be given to prohibiting or limiting the use of all or part of the premises until such risks can be reduced. Reassessment is required following implementation of the immediate or interim control measures.

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

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

FIRE RISK RATING MATRIX

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

18.0 Summary of Findings

FRARef	Hazard or Defect	Action Required	Hazard Priority	Risk Rating	Action By	Review Date	Contractor Completed
9.2	The fire resisting hatch doors that enable access to the lift motor room are damaged and no longer close and stay fully closed in the rebate.	The fire resisting hatch doors should be replaced or repaired.	P1	Moderate			
9.5	A small number of service riser cupboards which contained damaged fire stopping have been identified.	All breaches in compartmentation should be fire stopped. The work should be carried out using materials that are suitable for the location where they are to be used and should provide the same fire resistance as the structure where they are to be used in accordance with BS 476.	P1	Moderate			
9.13	The premises have an EWS and an EWI system, the EN classification, material specification, insulation and fixing method is unknown/not confirmed.	It is strongly recommended that you obtain advice from qualified and competent specialists on the nature of, and fire risks associated with, the external wall system and the external wall insulation system construction, fitted to this building.	P1	Moderate			
10.6	A smoke detector in the corridor to the community room is fitted with a dust cover.	The dust cover should be removed.	P1	Moderate			
10.12-10.14	Any additional break glass call points, alarm sounders and visible warnings installed in the lift motor room and/or on the roof, may not have been added to the testing and maintenance schedule.	WCHG should confirm that any additional break glass call points, alarm sounders and visible warnings installed in the lift motor room and/or on the roof, have been added to the testing and maintenance schedule.	P1	Moderate			
12.6	The standard of the existing lifts could not be determined.	See Significant Finding 12.0 for the actions required.	P1	Moderate			

19.0 Recommendations

FRARef	Observation	Recommended Action	Risk Rating	Contractor Completed
7.3	Personal Emergency Evacuation Plans are currently not required in high rise general need blocks of flats.	WCHG should consider guidance in the current HM Government consultation for the preparation of Personal Emergency Evacuation Plans (PEEPs) for residents who self identify that they are unable to self-evacuate.	Moderate	
12.0	The information currently available to the fire service at an incident may not be adequate to meet the standards set out in the FIA and NFCC Code of Practice.	It is recommended that WCHG should follow the FIA and NFCC code of practice and update the information available to firefighters as required consulting with the fire and rescue service where appropriate.	Moderate	

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

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

20.0 Commentaries

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