



TOTAL FIRE GROUP LTD

Fire Risk Assessment

Conducted at:

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



05 July 2022



Certificate Number	LS	0244483
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Fire Risk Assessment
Provider (SP205)

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 05/07/2022
Part 6	Recommended date for review of the fire risk assessment 05/07/2023

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

Signed (for and on behalf of the issuing Approved organisation)	
Job Title	Senior Fire Safety Consultant
Date	18/07/2022

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 **Tuesday, 5 July 2022**

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

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

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

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

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

Contact Details

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

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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:

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

Responsible person(s):

Wythenshawe Community Housing Group (WCHG).

Person(s) consulted and landline contact number:

Diane Burrell (Facilities Manager).
0161 946 9191.

Fire Risk Assessor:

Luke Saul BSc (Hons), AIFireE, MIFSM, Tier 3 Nationally Accredited Fire Risk Assessor N438

Audited by:

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

Date fire risk assessment was conducted:

Tuesday, 5 July 2022

Time:

09:30.

Date of last FRA or FRA Review (if known)

05 Jul 2021

Suggested date for next review:

July 2023

Fire risk assessment limitations:

A type 3 (Non-Destructive) Fire Risk Assessment (as detailed in the latest guidance document Fire Safety in Purpose Built Blocks of Flats) has been completed with access to flats 14 (third), 25 (fifth), 35 (seventh), 29 (eighth), 47 (ninth). The aforementioned Fire Safety in Purpose Built Blocks of Flats Guidance has been referred to in the formulation of this report.

The biomass boiler room was accessed at the time of the assessment, as was each room in the old caretaker's area of the building. In the community areas of the building our assessor accessed the kitchenette, community room, sewer room and electrical room, however there were several other cupboards in the community area which our assessor could not access due to keys not being available for these (the locks appear to have been changed).

A sample of electrical risers and other service riser cupboards were inspected on each floor, with at least 50% of riser cupboards per floor being accessed.

Where false ceilings were observed as present on the ground floor, a sample of areas above were inspected in order to determine the standards of compartmentation to adjoining areas.

There was no access to the roof of the premises as our assessor was not provided with keys to do so, nor a permit to work in this area by WCHG.

At the time of the assessment, contractors were on site to carry out flat entrance door replacement and replacement/fire stopping of the panels above these doors. A mixture of old, existing flat entrance doors and the new flat entrance doors were installed during the assessment.

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:

12 including the ground floor.

2.2 Approximate building footprint:

500m²

2.3 Details of Construction and Premises:

Hollyhedge Court is high rise, general needs and purpose built block of flats which was built in 1962. The building has a concrete frame with brick infill panels, a mineral wool external wall insulation/render system and curtain wall glazing. Floors are of solid concrete construction. The roof is flat. Internally, the ceilings are solid in the majority, with only the ground floor possessing areas of false ceiling.

The twelfth floor functions as the lift motor room and is accessed via a hatch on the eleventh floor. Each of the upper floors serving flats is of the same layout. This consists of a lift lobby off which flats are directly accessed. Also adjoining this lobby are 2 electrical cupboards, a sprinkler valve cupboard, a pipe service riser cupboard and a dry riser cupboard. An FD30s door from each lobby provides access to a permanently vented corridor, off which are further FD30s doors to a bin chute and the staircase which serves all floors. At ground floor level the staircase discharges into the main entrance lobby, from which there are 2 final exits. The ground floor is of a unique layout, this consisting of the lift lobby with adjoining flats, old caretaker's area, service/electrical risers, community facilities and biomass boiler room. The old caretaker's area is made up of a corridor off which is an electrical room, store cupboard, water pump room and cleaners/sluice room. The community facilities area is accessible via the lift lobby and a short corridor adjoining the lift lobby provides access to a community kitchenette, community room, server room and electrical room. The community room is currently being used as a site office for contractors working on the premises. There were several cupboards adjoining the community area corridor which could not be accessed at the time of the assessment, as detailed in Section 1. The bin room is externally accessed to the front of the building. A common BS5839-1 fire alarm system is installed which spans throughout the majority of the premises common areas, including many electrical cupboard risers. This system also extends into flats as detailed below. It has been confirmed that this system has been configured to be silent and to function as an emergency alert system for use by the Fire and Rescue Service. A separate BS5839-1 fire alarm system is installed in the biomass boiler room. Emergency lighting is installed throughout the premises escape routes. A sprinkler system is installed which extends throughout each resident flat and also covers some of the plant and community areas on the ground floor. A number of resident flats were accessed (as specified in Section 1) and the layout of each of these was very similar, this consisting of a flat entrance door opening into a hallway, off which were bedrooms, store cupboards, a living room and bathroom/shower areas. Some flats were slightly different in that the toilet and shower room were separated and in one case the shower room had been converted to a store room. The flats were otherwise the same. The kitchens were inner rooms, with the living room serving as the access room. Also adjoining each living room was an enclosed balcony. The standard of fire alarm system in each flat was generally BS5839-6 Grade D LD1 with the exception of the enclosed balcony where no automatic detection was installed. A BS5839-1 heat detector was also installed in each hallway and this was linked to the communal fire alarm system.

2.4 Occupancy/Purpose Groups

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

2.5 Approximate maximum number of persons:

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:

<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	Yes
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.

Significant findings have been raised in relation to compartmentation breaches and deficiencies to fire doors, in addition to some storage at the base of the staircase. 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

A comprehensive BS5839-1 fire alarm system is installed which is monitored and would lead to early summoning of the Fire and Rescue Service. Although a number of breaches and compartmentation defects have been observed these were generally small in size and the standard of compartmentation within the building is still considered to be high overall. 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

IDENTIFYING THE FIRE HAZARDS

4.1	Are suitable arrangements in place to manage the elimination or reduction of risks from dangerous substances? (Article 12)?	N/A
4.2	Are there suitable additional emergency measures provided to safeguard all relevant persons from emergencies related to dangerous substances in or on the premises? (Article 16) ?	N/A
4.3	Have combustible or flammable materials used or stored in the premises been identified?	Yes
4.4	Are all combustible or flammable materials stored or stacked safely?	Yes
4.5	Has consideration been given to reduce the quantity held or has the use of non-combustible materials been considered?	Yes
4.6	Are all substances stored away from ignition sources?	Yes
4.7	Where flammable stores are provided, are they adequately ventilated and correctly marked?	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.
4.3-4.6	 <p>A clearly identifiable, metal COSHH cupboard is located in the water tank and pump room, which is situated within the restricted access old caretaker's area.</p>

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

5.0 Interior Furnishings: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
5.1, 5.3-5.4	With the exception of a metal bench in the entrance lobby, the furniture within the common areas was located in the community room, currently in use as a site office. The furniture within the community room, although not labelled to show compliance with current regulations, was in acceptable condition. Where there is any doubt about furniture and other furnishings complying with the Furniture and Furnishing Regulations (Fire Safety) 1988, it is the duty of the responsible person to confirm the standard with the suppliers of new furniture.

6.0 Heating and Electrical Appliances		
6.1	Are portable or fixed heaters used?	Yes
6.2	Are all heaters fitted with suitable guards and located in positions away from combustible materials?	Yes
6.3	Are all heaters free from naked flames?	Yes
6.4	Has the use of safer alternatives been considered?	N/A
6.5	Are systems in place to ensure appliances are tested, repaired and maintained on a regular basis in accordance with the Electricity at Work Regulations, 1989?	Not Known
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?	Not Known
6.11	Are systems in place to isolate any appliance with a blown fuse?	Yes
6.12	Are all appliances free from visible signs of overheating?	Yes
6.13	Are multi-point adapters and extension leads kept to a minimum?	Yes
6.14	Are walkways or escape routes free from trailed cables?	Yes
6.15	Are cables free from mechanical damage?	Yes
6.16	Do signs indicate all electrical hazards?	Yes
6.17	Are reasonable measures taken to prevent fires as a result of cooking?	N/A
6.18	Are filters changed and ductwork cleaned regularly?	N/A
6.19	Are suitable extinguishing appliances available?	N/A
6.20	Are legal or other requirements for testing, maintenance & record keeping complied with for equipment such as lifts, hoists, escalators, air handling systems, heating boilers, pressure vessels etc.?	Yes
6.21	Do the premises have a lightning protection system? (where required)	Yes
6.22	Have other potential sources of heat not listed above been considered?	N/A

6.0 Heating and Electrical Appliances: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	Observation
6.5, 6.10	 <p>No PAT testing labels were observed as fitted to any of the portable electrical appliances in the commonly used facilities (e.g. the community room and kitchenette), therefore it could not be confirmed whether or not PAT testing had been carried out.</p>
	Recommended Actions
6.5, 6.10	<p>It is recommended that systems, for example PAT testing, are put in place to ensure appliances in communally used areas are tested, repaired and maintained on a regular basis in accordance with the Electricity at Work Regulations, 1989. 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."</p>

Ref	COMMENTARY
6.0	WCHG have an empty homes policy to ensure any void or empty flats have their gas and electricity disconnected.
6.0	 <p data-bbox="236 450 1070 472">Isolation and emergency stop switches for the lifts are located in the lift motor room.</p>
6.1	 <p data-bbox="236 831 1453 891">The flats are heated by a communal biomass heating system with a gas backup. Water heater vessels are installed within cupboards in flat bathrooms.</p>
6.6	 <p data-bbox="236 1249 1497 1332">WCHG informed our assessor that fixed electrical installations on the premises were last serviced on 11/06/2021 and this was reflected by labels affixed to electrical installations observed on the premises, as shown in the photograph. It was confirmed to our assessor that both the common area and the flat electrical installations are serviced on a 5 yearly basis.</p>
6.16	 <p data-bbox="236 1691 1177 1720">Suitable electrical hazard signage was provided to service riser cupboards, where appropriate.</p>
6.17	Only refreshment facilities are provided in the community kitchenette on the ground floor, such as a kettle and fridge.

6.20		
6.20	<p>Biomass and gas heating systems on the premises are serviced on an annual basis, with this last having been carried out on 16/05/2022.</p>	
6.20	<p>There are 2 lifts in the building, one that serves odd floors and one which serves evens. Both of the lifts serve the top floor and the ground floor. The lifts are serviced on a monthly basis by a competent person and are also checked on a weekly basis to ensure they default to ground floor level on activation of the common BS5839-1 fire alarm system.</p>	
6.20	<p>Lightning protection is installed and is serviced annually by a competent person. The last service date was 04/2022.</p>	
6.22	<p>There are no solar or PV systems fitted to this building.</p>	

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?	Yes
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)

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

Ref	COMMENTARY
7.1, 7.3, 7.8	<p>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.</p>
7.3	<p>WCHG communicated to our assessor that they currently have a means of identifying vulnerable persons within the building, detailed as follows:</p> <p>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'.</p> <p>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.</p> <p>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.</p>

7.3, 7.5, 7.7

Identification of vulnerable residents in purpose-built flats with regard to escape provision:

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

1. Evacuation from the dwelling on fire - [NFCC Specialised Housing Guidance](#) is intended to assist Responsible Persons for purpose-built blocks of flats where disabled and vulnerable persons are housed, and the recommendations in the guide go beyond the scope of the legislation. The guide recommends measures for the protection of vulnerable residents from a fire within their own flats. A disabled person living in a block of flats is best served with a Person-Centred Fire Risk Assessment (PCFRA), which may or may not lead to a Personal Evacuation Emergency Plan (PEEP), but, even if it does where trained persons are able to assist, the PCFRA will achieve far more in terms of the safety for a disabled person from the risk of fire in their own flat than focusing purely on the much more narrow issue of a PEEP. In all cases, it is likely to lead to a Personal Rescue Emergency Plan (PREP).
2. 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.

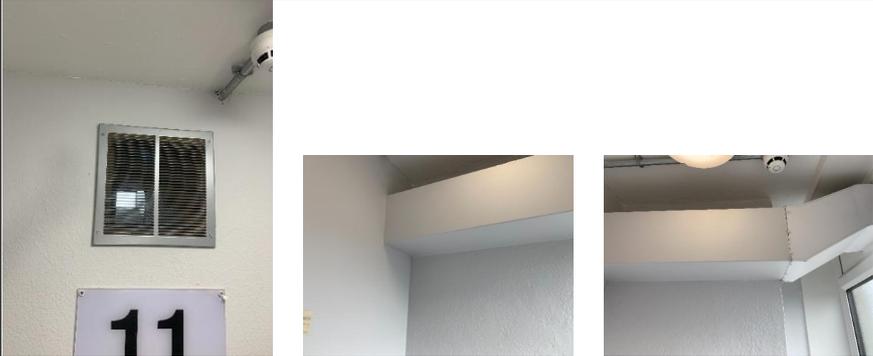
PCFRA (Person Centred Fire Risk Assessment) - The person-centred approach, based on a PCFRA, relates to the safety of residents who are at high risk from fire in their own accommodation; as such, this risk assessment and measures identified by it are outside the scope of the Fire Safety Order. The assessment 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.

7.6		<p>Refuge signage is provided in the corridors between lobbies serving flats and the staircase. This is consistent with Section 70.11 of the Fire Safety in Purpose Built Blocks of Flats guidance, which states: 'Many older and disabled residents will find it difficult to use stairs in the event of a fire, and additional measures may need to be considered. These could include temporary safe refuge areas or spaces within existing protected lobbies and stairs'. It should be noted that these areas may be considered TEMPORARY refuge areas only and persons should not be encouraged to wait in these areas for rescue.</p>
7.10-7.11	<p>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.</p>	
7.12	<p>Restricted areas are secured by locked doors which are locked by WCHG staff or cleaners when not in use.</p>	

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.	No
8.7	Do any inner rooms exist?	No
8.8	Are vision panels provided between the inner room & access room and is it adequate?	N/A
8.9	If the vision between the inner room and the access room is inadequate is smoke detection provided within the access room?	N/A
8.10	Are all emergency exits doors unlocked and available at all times when the premises are occupied?	Yes
8.11	Are all final exit doors checked (opened) on a regular basis? Are the outcomes recorded?	Yes
8.12	Is the door furniture provided appropriate for the purpose group of the premises i.e. public buildings, licensed premises etc.?	Yes
8.13	Are floor and stairway surfaces in good condition and free from slip and trip hazards?	Yes
8.14	Do all final exits lead to a place of safety?	Yes
8.15	Are external escape paths clear of obstructions?	Yes
Electronic Door Release Devices		
8.16	Are all escape doors free from electro-mechanical door locks devices?	No
8.17	Are all escape doors free from electro-magnetic door locks devices?	No
8.18	Where electronic/electrical door control devices are fitted do they meet the installation criteria given in BS 7273 Pt. 4 2015	No
8.19	Do entry control devices conform to the category of actuation for the purpose group that the particular premises/building currently operates within?	Yes
8.20	Is the emergency operation of the door lock stated by appropriate signage?	Yes
8.21	Have all persons in the assessment area received instructions on how the devices operate in the event of an emergency?	Yes

8.0 Escape: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	Observation
8.6	 <p>A mobility scooter was being stored in the staircase enclosure at the time of the assessment, at its base. 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.</p>
	Recommended Actions
8.6	Arrangements should be made for the mobility scooter to be removed from the common area and the resident to whom it belongs should be educated regarding storage in the common area accordingly.
	Observation
8.17-8.18	 <p>The exception to commentary 8.17-8.18 with regards to provision of suitable green box emergency overrides by electromagnetically secured doors were the external gates close to the final exit from the building. It was observed that the gate is electromagnetically secured and, although a 'push button to exit' system was provided, there was no green box emergency override present. Persons must pass through this gate to reach a place of ultimate safety away from the perimeter of the building and, should this gate fail to release for some reason (e.g. residual power remaining), then persons may remain trapped behind the security fencing near to the building, placing them at risk of harm.</p>
	Recommended Actions
8.17-8.18	It is recommended that green box emergency overrides are installed adjacent to the external gates near to final exits.
Ref	RECOMMENDATIONS
	Observation
8.16	It was noted at the time of the assessment that none of the doors between the staircase and the corridors serving flats were electromechanically secured (as is normally intended), with the exception of the second floor. It could be that this is due to the presence of the faults on the fire alarm panel whilst contractors carry out work on the premises however this could not be confirmed at the time of the assessment.
	Recommended Actions
8.16	In order to prevent unauthorised access to the flats from the stair, ensure all of the doors into these areas electromechanically secure when not in use, as intended. Where there is an issue with the second floor electromechanical lock jamming this should be rectified.

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 metal ducting which in turn vents direct to outside, passing through the refuse chute room on its way. WCHG have engaged third parties to confirm that this method of smoke ventilation is adequate. Smoke modelling 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.</p>
8.5	 <p>A louvred door provides a means of permanent ventilation to the lift motor room.</p>
8.5	 <p>The corridor between the lobby serving flats and the staircase is provided with permanent ventilation, as is the refuse chute room.</p>
8.6	<p>A metal bench is located in the main entrance lobby, where the staircase serving all of the floors discharges. The presence of this item is not considered to significantly increase the risk to life of the residents, however close attention should be paid with regards to prevention of any additional items being placed in the area.</p>
8.6	 <p>A sofa was observed in the common area outside flat 30 (sixth floor) at the time of the assessment, however a contractor present informed our assessor that this flat was being emptied as it was newly void and that the sofa was soon to be removed.</p>
8.6, 8.17-8.18	<p>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.</p>

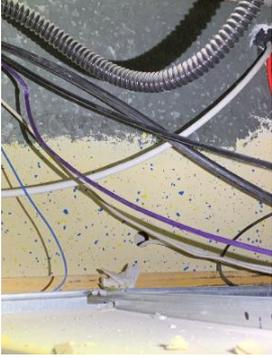
8.10, 8.12		<p>The fastenings on the internal side of the existing flat entrance doors were key operated, however our assessor has observed the new flat entrance doors which were in the process of being installed and these were provided with thumb turn devices.</p>
8.11		<p>WCHG informed our assessor that weekly escape route checks are carried out, as are weekly final exit door checks. These are recorded electronically. Final exit doors are also used regularly by residents and it can be reasonably expected that any fault would be reported.</p>
8.16		<p>Electromechanically secured doors separate the staircase from the corridors serving flats and these require fob access in the direction towards the flats. In the direction of escape, a suitable push pad device is provided leading into the stair.</p>
8.16		<p>The door into the biomass boiler room is electromechanically secured and has a thumb turn type fastening on the internal side.</p>
8.17-8.18		<p>WCHG have confirmed that the electromagnetic door lock release mechanisms are checked weekly, with this recorded electronically. They are also serviced/tested every six months.</p>
8.17-8.18		<p>Two final exit doors from the building, both located at the base of the staircase serving the upper floors, were electromagnetically secured and were accompanied by suitable green box emergency overrides. It was confirmed that secured doors (whether electromechanical or electromagnetic) are configured to release upon activation of the fire alarm system.</p>

9.0 The Confinement of Fire

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

9.0 The Confinement of Fire: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	Observation
9.1	Several cupboards adjoining the corridor serving the community areas/server room could not be accessed at the time of the assessment. It appeared that this was due to locks having been replaced and our assessor not having the correct keys to access these areas. Where there are inaccessible areas it was not possible for our assessor to confirm the sufficiency of the fire safety provisions in and around them. Where such provisions do not meet the required standard, persons may be placed at risk of harm.
	Recommended Actions
9.1	It is recommended that the cupboards adjoining this corridor which have different locks installed are accessed and that it is confirmed that they are provided with suitable FD30s doors and fire stopping within (where appropriate).
	Observation
9.1	 <p>The gas service riser cupboard adjacent to flat 7 (first floor) is provided with an intumescent grille. Intumescent grilles would not prevent the spread products of combustion prior to reaching the temperature required to seal, meaning that some products of combustion may be able to enter the escape route and place persons at risk of harm.</p>
	Recommended Actions
9.1	It is recommended that the door is replaced/grille is sealed to 30 minutes fire resistance.
	Observation
9.1-9.2	 <p>3. The following doors have issues identified with regards to their ability to self-close:</p> <ol style="list-style-type: none"> 1. Community area kitchenette - This door was not locked and did not have a self-closing device. Either keep locked and provide 'Fire Door Keep Locked' signage or install a self-closing device. 2. Community room itself - This door was not locked and did not have a self-closing device. Either keep locked and provide 'Fire Door Keep Locked' signage or install a self-closing device. 3. Automatic door between the lift lobby and staircase enclosure was staying open at the time of the assessment and was not self-closing. Requires remedial works to ensure it is effectively self-closing once used. <p>In the event of a fire where self-closing devices are not present or do not function as required there is the potential for products of combustion to spread, placing persons at risk of harm.</p>
	Recommended Actions
9.1-9.2	It is recommended that remedial works are carried out to each of the identified doors in the manner detailed above.

	Observation
9.1, 9.14	 <p>5. Issues were observed relating to a number of doors and their ability to lock/secure, detailed as follows:</p> <ol style="list-style-type: none"> 1. Electrical cupboard adjoining corridor serving community areas (ground floor). 2. Electrical and sprinkler cupboards by flat 50 close but do not lock/secure (tenth floor). 3. Electrical cupboard adjacent to flat 48 closes but does not secure shut (ninth floor). 4. Sprinkler cupboard adjacent to flat 39 does not lock shut (eighth floor). 5. Metal electrical cupboard on escape route (may not be in use anymore) door outside flat 43 was ajar (eighth floor). 6. Electrical cupboard by flat 38 closes but does not lock shut (seventh floor). 7. Sprinkler valve cupboard by flat 30 does not lock (sixth floor). <p>Although closed if found open at the time of the assessment, these doors could re-open and compromise the escape route, whilst also enabling unauthorised access. This could place persons at risk of harm.</p>
	Recommended Actions
9.1, 9.14	It is recommended that the locks to the doors above are replaced/repared so that they securely close and lock. It should be noted that the above issues were identified based upon checking a sample of cupboards throughout the building, therefore consideration may be given to checking the cupboards throughout the building for the same defects, carrying out repairs where necessary.
	Observation
9.3	The automatic door between the lift lobby and the staircase enclosure (ground floor) is not provided with intumescent strips/cold smoke seals. In the event of a fire, the absence of strips and seals would enable products of combustion to spread into the stair, placing persons at risk of harm.
	Recommended Actions
9.3	It is recommended that intumescent strips and cold smoke seals are fitted to this door.

<p>9.5</p>	<p>Observation</p>      <p>1. 1. 2.</p> <p>8. 10.</p> <p>Breaches in compartmentation were observed in a number of areas within the building, detailed as follows:</p> <ol style="list-style-type: none"> 1. In the void space above the community kitchenette accessible via a hatch, to adjoining areas (ground floor). 2. In the wall over the community room corridor into the lift lobby, small cable breach and breach in metal noted (ground floor). 3. Corner of riser cupboard by flat 48 (ninth floor). 4. Electrical cupboard by flat 30 small hole in existing fire stopping (sixth floor). 5. Riser cupboard adjacent flat 26, breach in existing fire stopping (fifth floor). 6. Electrical cupboard by flat 15, breach in existing stopping (third floor). 7. Gap in existing stopping in sprinkler valve cupboard (third floor) - this is considered low risk however should be considered for remedial works whilst others are being carried out in the building. 8. Electrical cupboard by flat 13 (second floor). 9. Dry riser cupboard (first floor) behind wooden beam). 10. Service riser cupboard by flat 7 (first floor). <p>Where there are breaches in compartmentation these may enable the spread of products of combustion to different areas, placing persons at risk of harm.</p> <p>Recommended Actions</p> <p>It is recommended that the identified breaches in compartmentation are fire stopped by a competent person to 60 minutes fire resistance. It should be noted that the breaches identified are from a sample (albeit rather large) of the riser cupboards throughout the building and consideration should be given to investigating the remaining riser cupboards, applying fire stopping where appropriate, if there is reason to believe that other breaches may be present.</p> <p>Observation</p>    <p>9.5</p> <p>In many of the electrical and riser cupboards inspected throughout the building, some form of foam appears to have been used to fill gaps. It could not be confirmed whether the foam was fire resisting or if it had been applied in a manner which would provide suitable means of fire stopping to the areas. Where unsuitable products are used for the purpose of fire stopping this may enable the spread of a fire/products of combustion, placing persons at risk of harm.</p> <p>Recommended Actions</p> <p>Confirm the foam is fire resisting/applied appropriately in line with manufacturer's and best practice guidelines or use a competent person to reapply appropriate fire stopping products (60 minutes fire resistance) to these areas.</p>
<p>9.5</p>	<p>Confirm the foam is fire resisting/applied appropriately in line with manufacturer's and best practice guidelines or use a competent person to reapply appropriate fire stopping products (60 minutes fire resistance) to these areas.</p>

Observation	
9.14	 <p>The sprinkler valve cupboard adjacent to flat 25 was being used for storage of combustible waste at the time of the assessment. Where such waste is present it may contribute to the development of a fire which has spread to the cupboard, placing persons at risk of harm.</p>
Recommended Actions	
9.14	It is recommended that the cupboard is checked and, if still present, the waste is removed.
Ref	RECOMMENDATIONS
	None.

Ref	COMMENTARY
9.1	At the time of the assessment contractors were in the process of removing the panels above flat entrance doors, as part of the flat entrance door replacement. The majority of this panel space was being filled by a solid block type material, however there were gaps left through which services passed. A fire stopping contractor was due shortly to fire stop around the services, however in the mean time temporary stopping was provided in the form of packing the gaps around services with Rockwool.
9.1	It was noted that the doors to the cleaner/sluice room and the sprinkler tank room were not fire doors however were kept locked. These rooms are considered to be low risk (cleaner/sluice contained only a mop/sink and the sprinkler room relevant equipment). The doors also adjoin the corridor serving the old caretaker's area, which itself has an FD30s door separating it from the lift lobby/escape route which would be used by the residents. For these reasons, replacement of the doors is not considered as required at this time.
9.1	 <p>As was recommended at the time of the previous fire risk assessment, a new fire resisting hatch appears to have been installed between the eleventh floor and the lift motor room.</p>
9.1-9.2	The door to the biomass boiler room is a self-closing metal door with a large rebate.
9.1-9.3	<p>WCHG have confirmed to our assessor that common area fire doors are checked 6 monthly and resident fire doors are checked annually. Criteria included for checking are as follows:</p> <ul style="list-style-type: none"> • Gaps. • FR glass. • Letter plates. • Self-closing devices. • Intumescent strips and cold smoke seals. • Overall condition. <p>The checks are logged on a portable electronic device which transports the records to WCHG central data systems.</p>
9.1-9.3	 <p>Flat entrance door replacements were being carried out throughout the premises at the time of the assessment. Our assessor accessed several flats where these doors had been replaced and it was observed that the doors were FD30s with self-closing metal letterboxes approximately midway down their length. It was observed that none of the fire doors had yet been fitted with self-closing devices and the site manager (spoken to whilst assessing Brownley Court 1 day prior) confirmed that a contractor was due shortly to install these across the premises.</p>
9.1-9.3	'Performance Doorset Solutions Fireguard' door designs are currently being installed to flat entrances throughout the premises and WCHG provided our assessor with test information carried out by Warrington Fire for these doors. Page 32 of the field application test report states that 'if the Performance Doorset Solutions Fireguard door design, constructed in accordance with the specifications documented in this field of application report, were tested in the appropriate configuration in accordance with BS EN 1634-1:2014+A1:2018, it is our opinion that they would provide a minimum of 30 minutes integrity and insulation, as appropriate'.
9.1-9.3, 9.5, 9.14	Article 8 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to take general fire precautions to ensure the safety of relevant persons. This includes measures to reduce the risk of fire on the premises and the risk of the spread of fire on the premises.
9.1, 9.5	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. The majority of the fire stopping and compartmentation work throughout the premises was observed to be of a high standard. Exceptions to these high standards have been detailed within significant finding 9.5.

9.5

Where the level of fire stopping or fire resisting construction is found to be below an acceptable standard remedial fire stopping work should be carried out. Breaches in fire resisting construction should be filled with suitable fire resisting materials to maintain the standard of fire resistance of the surrounding structure in accordance with BS 476 Pt 22 or BS EN 1364 Pt 1 to 6. The use of third party accredited passive fire protection contractors and products should ensure any remedial actions will be to the required standard in the most cost effective manner.

The Responsible Person ought to have in place a system for ensuring that the integrity of any passive fire protection measures is not compromised when building alterations are carried out e.g. for the installation of new pipes, cables and other services. Records of these should be maintained for future inspection by auditors and enforcement agencies.

One common available fire stopping product is expanding fire resisting foam. To avoid unnecessary costs, the universal use of expanding fire resisting foam products should be used with caution and in strict accordance with the manufacturer's recommendations to achieve the required fire resistance. Generally, expanding foam products are tested as narrow linear gap seals and will not work in a large penetration seal. The Guide to Inspecting Passive Fire Protection for Fire Risk Assessors produced by The Association for Specialist Fire Protection advises that PU expanding fire resisting foam products should only be used to seal linear gaps between walls and walls / floors / ceilings. It cannot be used to seal pipe or cable penetrations unless tested for that end-use application. In this case, other more appropriate fire stopping products should be used. It is recommended where rectifying life safety compartmentation issues that third party accredited contractors, who have been accredited to undertake the particular aspect of works, using appropriate third party accredited products is considered.

Note:

Compartmentation - Compartment walls and floors should form a complete barrier to fire between compartments they separate and have the appropriate fire resistance.

Fire Stopping - If compartmentation is to be effective, every joint or imperfection of fit, or opening to allow services to pass through the compartment, should be adequately protected to the same standard of fire resistance by sealing or fire stopping so that the fire resistance of the compartment is not impaired.

9.8



WCHG have confirmed that Allied Protection Ltd has completed fire stopping and compartmentation works to prevent fire spread via the common bathroom and shower room 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 in the early stages of a fire they are considered an acceptable method of preventing fire spread. Documentary and photographic evidence is available to evidence the works carried out by Allied Protection Ltd and are held by WCHG.

9.8



Kitchen extraction and grilles within the enclosed balcony areas of each flat appeared to lead directly to outside.

9.13



A product sheet certificate has been provided to our assessor for the external wall insulations (EWI) system fitted to the building. This is a TERMOK8 external wall insulating render system comprising of mechanically fixed mineral wool dual density or mineral wool lamella insulation slabs, with supplementary adhesive, reinforced basecoat and either render or brick slip finishes. The product certification states a reaction to fire classification of A2-s1, d0 in accordance with EN 13501-1, which exceeds the minimum requirements for a building with a storey above 18m as detailed in Section 10.6 of Approved Document B Volume 1 (this minimum requirement is A2-s3, d2).

In addition to provision of this product sheet, WCHG provided our assessor with an external façade report for the building, carried out by 'High Rise Fire Safety' in 02/2018. This certification states on page 5 of the report that 'The cladding affixed to the external façade of the premises is made up of layers of materials that individually, and collectively, have limited or non-combustible fire ratings as defined in Appendix A (A6 & A7) of Approved Document B of the Building Regulations'. The report then goes on to confirm that the cladding will not contribute to fire spread on the building.

Previous fire risk assessments have confirmed that the enclosed balconies have curtain wall glazing which is aluminium framed with clear and opaque glazing throughout.

9.14



In the externally accessed 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, in order to prevent fire spread up the chute. The fusible link is checked six monthly by an appointed contractor, with a label indicating that this was last carried out on 11/04/2022.

10.0 Fire Alarm System

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

10.0 Fire Alarm System: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	<i>Observation</i>
10.10	Our assessor could not access the roof, therefore could not determine whether a sounder linked to the fire alarm system was provided in this area, nor could they confirm that, where provided, such a sounder is programmed to be audible. In the absence of such a sounder or where it is silent on the fire alarm's activation (as much of the system now is), persons working on the roof may be placed at risk of harm.
	<i>Recommended Actions</i>
10.10	Confirm the presence of or provide a sounder linked to the BS5839-1 fire alarm system on the roof and ensure it is of sufficient audibility to provide persons working on the roof with a warning in case of fire.
Ref	RECOMMENDATIONS
	<i>Observation</i>
10.3-10.5	Manual call points were provided throughout the common areas which are regularly accessed by the residents. Our assessor understands that whereas detectors are silent when activated, the manual call points may be clearly audible. This may result in frequent false alarms and may result in faults or similar showing on the fire alarm.
	<i>Recommended Actions</i>
10.3-10.5	It is recommended that the manual call points in the common areas which are accessed by residents are removed if they result in an audible alarm sounding on activation. It is noted that where manual call points remain in areas accessible only to staff members these may remain as audible, so long as they only sound in the area of operation, not throughout the whole building.

Ref	COMMENTARY
10.0	The common fire detection system is configured for the Fire and Rescue Service to also use as an Emergency Alert System (EAS). From 01/12/2022, a proposal made within The Fire Safety (England) Regulations 2022 will require all high-rise residential buildings (both those already in existence and those built in the future) to 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. This is also to be incorporated into Approved Document B when it re-released with its latest amendments. Such systems should be separate from any fire detection and warning system as recommended in BS8629. 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. Although it could be confirmed that detector heads are silent when activated, the same could not be confirmed for use of manual call points - see recommendation 10.3-10.5.
10.1	The BS5839-1 fire alarm system was showing 7 faults at the time of the assessment.
10.1-10.7	 <p>The biomass boiler room has its own BS5389-1 Category L5 system. This system consists only of automatic detection/manual call points within the biomass boiler room. It was confirmed to our assessor that this fire alarm system is not linked to the BS5839-1 fire alarm system which spans throughout the rest of the common areas, however this system is itself monitored. This would result in early summoning of the Fire and Rescue Service on its activation. The fire alarm panel for this system is within the biomass boiler room and was showing as healthy at the time of the assessment.</p>
10.1-10.7	The common area fire alarm and detection system incorporated smoke detection throughout the majority (except the biomass boiler room - see other commentary 10.1-10.7) and heat detection in the hallways of each resident flat. It was noted that in this building, detection linked to the common BS5839-1 system was only provided in the corridor serving the community room areas, not within each of the rooms adjoining this corridor. Instead, BS5839-6 Grade D interlinked detection was provided in this room to provide early warning to the occupants of those rooms. This is considered satisfactory. The fire alarm panel for the BS5839-1 fire alarm system is located at ground floor level in the staircase enclosure. 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.
10.4-10.5	In general, 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. One of the flats accessed (flat 14) was missing detection in the living room, however the provision of automatic detection to this flat still exceeds the minimum requirement and is considered acceptable.
10.5	Some BS5839-1 heat detection had been moved out of the flat entrance hallways and into the common area whilst the panels above the flat entrance doors were replaced/re-fire stopped. Our assessor was informed that this was because the detection had previously been affixed to the panel within the flat.
10.10	Article 13 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to ensure the premises are, to the extent appropriate equipped with appropriate fire detection and alarms.
10.11	Suitable zone/building plans are provided by the BS5839-1 panel in the staircase enclosure.
10.12-10.14	The fire alarm/emergency alert systems are 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 on a six monthly basis.

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)	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, including the plant and old caretaker's rooms.
11.4	There is adequate borrowed light available externally for persons to reach a place of safety.
11.5-11.6	Monthly testing of the emergency lighting system is carried out, with records held electronically. The system is also serviced annually, with this having last been carried out on 13/06/2022.

12.0 Fire Fighting Equipment, Systems & Fixed Installations

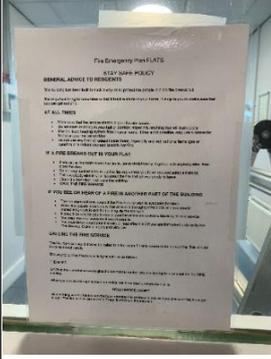
12.1	Where appropriate are adequate numbers of fire extinguishers provided? Consider floor area, special risks, minimum travel distance of 30m.	Yes
12.2	Are the correct types of extinguishers provided for the risks?	Yes
12.3	Are all extinguishers installed and sited in accordance with current guidance?	Yes
12.4	Are appropriate checks carried out on a monthly basis?	Yes
12.5	Are all extinguishers serviced by a qualified engineer every 12 months?	Yes
Fixed Installations		
12.6	Are any fixed firefighting installations provided? (Sprinkler systems, local gas flooding etc.)	Yes
12.7	Are all systems fully operational and under a maintenance programme?	Yes
12.8	Are all security devices functional? (Sprinkler valves, wet & dry rising mains padlocked etc.)	Yes
12.9	Where sprinklers are fitted are all heads clear of obstructions (500mm clear of stock) and functional?	Yes
12.10	Are firefighting shafts with dry or wet mains provided?	Yes

12.0 Fire Fighting Equipment, Systems & Fixed Installations: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	Observation
12.6	Both lifts have been fitted with a fire alarm interface that returns them to the ground floor. WCHG have informed our assessor that the lifts are standard lifts. As different types of lifts provide different levels of safety and control of the lift for fighters, it is important that the correct details are available. Firefighters using a lift that does not provide a perceived level of safety would be placed at risk of harm which could place residents (relevant persons) and risk of harm due to delays in rescues.
	Recommended Actions
12.6	The standard of the two lifts should be confirmed and the details should be available for the Fire and Rescue Service to ensure that they are aware of the standard of both lifts. Although supporting information relating to the lifts was confirmed to be provided in the premises information box, this supporting information was viewed (in excel spreadsheet form) and does not appear to confirm that the lift is not a firefighting lift and does not detail what functions the lift DOES have (e.g. the interface enabling the lift to be brought to ground floor). The supporting information should also clearly state that the lift is not a fireman's, firefighting or firefighters lift in line with BS2655-1970/1986, BS5588 or BS EN 81-72 respectively.
	Observation
12.10	The dry rising inlet is located on the building's external façade by the main entrance, however there is no signage currently denoting its presence. In the absence of such signage the time for firefighters to begin fighting a fire may be extended, placing persons at risk of harm.
	Recommended Actions
12.10	It is recommended that clear signage indicating the presence of the dry rising inlet is fitted.
Ref	RECOMMENDATIONS
	Observation
12.0	Any new draft fire strategies and proposed fire safety precautions to be installed in support of the fire strategy should take account of the recommendations from the Grenfell Tower Inquiry. There are a number of recommendations from the Grenfell Tower Inquiry that apply to this building. See also the commentary below at 12.0.
	Recommended Actions
12.0	<p>The following Grenfell Tower Inquiry recommendations should also be considered as part of the overall fire safety improvement works within this premises:</p> <ul style="list-style-type: none"> • The installation of an Emergency Alert System for use by the Fire and Rescue Service. • Low-level numbering of flats, floor levels, and emergency exit signage. • Firefighting lift inspection and monthly firefighter control function tests. • Prepare and regularly updating any PEEPs and include information on vulnerable persons and their PEEPs within the Premises Information Box. • Provide fire safety instructions including how and when to evacuate the building in an easily understandable format with regards to the building and knowledge of the occupants (e.g. Language etc). • A check to ensure all fire door self-closers including flat entrance doors are operating effectively. This is being carried out by the Gas Safety Team. <p>Note: The Fire Safety (England) Regulations 2022 (to be enacted in 2023) regulation 10 will require 3 monthly checks on all common area fire doors and on a best endeavour basis, annual checks to all flat entrance doors.</p>

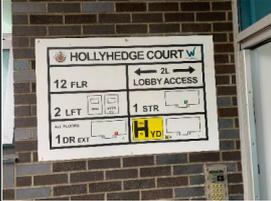
Ref	COMMENTARY
12.0	<p>Note: The Fire Safety (England) Regulations 2022 will implement the majority of the recommendations above made by the Grenfell Tower Inquiry in its Phase 1 report which required a change in the law. The majority of the regulations will come into force on 23/01/2023, however some have been brought forward in date for introduction on 01/12/2022 alongside a new release of Approved Document B incorporating the latest amendments. Those aspects which are to be introduced as of 01/12/2022 are detailed within the Circular Letter released by the Department for Levelling Up, Housing and Communities on 01/06/2022.</p>
12.1-12.3	 <p>CO2 and foam firefighting equipment is provided in the corridor serving the community facilities. The same is present in the old caretaker's areas. CO2 firefighting equipment is also installed in areas of specific risk such as the biomass boiler room and lift motor room.</p>
12.4-12.5	<p>Firefighting equipment is visually inspected on a monthly basis and was last serviced by Complete Fire on 06/09/2021. Records to evidence both the visually check and the annual service are held centrally by WCHG.</p>
12.6	<p>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.</p>
12.6-12.9	 <p>A BS9251 sprinkler system has been installed. In each flat, there are concealed sprinkler heads located in the hallway, each bedroom, the lounge, any enclosed balcony and the kitchen. In addition, there are also sprinkler heads located in some ground floor plant and community areas. There are control valves for each floor in riser cupboards which adjoin the lift lobbies. A pump and water tank for the sprinkler system have been provided in the sprinkler tank room which is within the old caretaker's area. A sprinkler panel and plan are provided by the fire alarm panel in the staircase enclosure at ground floor level. 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.</p>
12.8, 12.10	 <p>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 last pressure test took place on 08/07/2021 (now due). The dry riser inlet is on the building's external façade and outlets are provided at each floor level on the upper floors, adjacent to the lift lobbies.</p>
12.10	<p>Article 14 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person where necessary to ensure the escape routes are provided with adequate signage.</p>

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
Ref	None.
Ref	RECOMMENDATIONS
Ref	None.
Ref	COMMENTARY
13.0	 <p>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 at present.</p>
13.0	 <p>Suitable 'Do Not Use Lift in the Event of Fire' signage is provided within the lift lobbies.</p>
13.1-13.4	Directional signage was observed in the common areas. This building has a single staircase serving the upper floors and residents will be familiar with access and egress from the building.
13.6, 13.8	 <p>A suitable 'stay safe' fire action notice was provided in the common area by the main entrance. This captures the 'stay put' essence of the fire strategy whilst incorporating instructions should residents hear the BS8629 Evacuation Alert System sound.</p>
13.12	 <p>Suitable 'No Smoking' signage was observed in the common area.</p>

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

14.0 General Fire Safety Procedures: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
14.1-14.2	There have been no reports of fire that our consultant was made aware of and there was no evidence of any fires having occurred. Any reports of fire or false alarms should be fully investigated and where necessary control measures implemented to reduce the possibility of further occurrences. Following any outbreak of fire affecting the common areas, the Fire Risk Assessment should be reviewed to identify if any further risk reduction measures are necessary.
14.3-14.4	All false, accidental and malicious actuations are recorded. System faults are corrected as soon as possible by the alarm contractor. Accidental and malicious actuations are passed to the Housing Manager, who will arrange for the appropriate action to be taken.
14.7	The Chief Executive for Wythenshawe Community Housing Group has the overall responsibility for fire safety related matters and management.
14.8-14.9	Our consultant was not made aware there were any outstanding notices of deficiencies/enforcement action from the enforcing authority. The significant findings of this Fire Risk Assessment should form the basis of an action plan and be implemented within the recommended timescales. The significant issues identified may become enforceable if not actioned in a reasonable period of time.
14.11	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.
14.12	 <p>A building information board showing key building facilities is present by the main entrance. This shows:</p> <ul style="list-style-type: none"> • Number of floors. • Stating the 'lobby access' nature of the building. • Number of lifts. • Number of stairs. • Number of dry risers. • Location of nearest fire hydrant.

15.0 Fire Safety Management		
15.1	Are there an adequate number of competent persons and arrangements (under Article 18 of the RRFSO) in place to assist the responsible person in the management and implementation of the preventative and protective measures? (safety assistance)	Yes
15.2	Have all staff been trained in how to call the Fire Service, use of fire extinguishers, evacuation procedures and basic fire awareness?	N/A
15.3	Do all new employees receive basic fire procedure and induction training on the date of appointment?	N/A
15.4	Are records of fire safety training kept?	N/A
15.5	Are systems and procedures in place to control any new work, alterations or repairs to the premises, so that no fire hazards are introduced?	Yes
15.6	Is a "permit" to work procedure in place for contractors etc.?	Yes
15.7	Where an alterations notice is in force has the enforcing authority been informed prior to any significant changes being made?	N/A
Fire Marshals & Fire Plans		
15.8	Are fire marshals required to take charge of a fire incident and liaise with the Fire Service where required?	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?	No
15.13	Are there clearly defined written procedures to be followed in the event of a fire in the form of an emergency plan?	N/A
15.14	Is a fire plan displayed throughout the premises where required?	N/A
15.15	Are there procedures for calling out key staff during fire related emergencies outside of normal working hours?	Yes

15.0 Fire Safety Management: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
15.0	WCHG have confirmed to our assessor that they send out fire safety leaflets periodically, which detail the evacuation strategy (stay safe) for the building.
15.1	WCHG employs competent persons to carry out service and maintenance of all preventative and protective services.
15.2-15.4	Our assessor was informed that this premises is not staffed, except for occasional maintenance and cleaner visits.
15.5-15.6	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.
15.5-15.6	As fires are more frequent during refurbishment and/or alteration, it is important that any additional risks are evaluated, particularly when the building is occupied. The Responsible Person should ensure approved contractors are made aware of any risks and the precautions implemented to reduce the risks. Contractors should undertake risk assessments and implement control measures where necessary. Their impact on the building should be closely monitored with regard to (amongst others), damage to fire resisting walls, the introduction of sources of ignition and combustible materials, the blocking of exit routes or fire doors being wedged open. Where necessary a permit to work system should be used.
15.12-15.13	For this premises, fire action notices will be considered sufficient with regards to provision of evacuation strategy information, as recommended in Section 13.6, 13.8.
15.15	There are 'out of hours' Emergency Procedures and Emergency Evacuation Procedures in place.

16.0 Fire Emergency Plan

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

16.0 Fire Emergency Plan: Finding(s)

Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
16.1	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: General

On confirming that a fire exists raise the alarm, by operating a break glass manual call point.

Ensure the fire service is summoned by dialling 999 stating Fire at:

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

All persons should move quickly and calmly to the nearest exit.

Only fight the fire if it is small (no more than the size of a waste paper bin) AND if trained and it is safe to do so, with the appropriate fire extinguisher. If the fire is larger than a waste paper bin close the door to the fire.

Persons **must not place themselves at risk.**

Close all doors behind you to contain the fire and prevent the spread of smoke and toxic fumes.

Proceed to your designated assembly point or well clear of the building and away from any approach road likely to be used by emergency vehicles.

Ensure a roll call of all members of your department is taken to establish if all persons are accounted for.

Liaise with the fire service officer on arrival, giving details of number of persons unaccounted for, the location and extent of the fire.

Do not re-enter the building until authorised to do so by a Fire Service Officer.

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:

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

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

THE ABOVE PROCEDURE SHOULD BE COMMUNICATED TO EACH RESIDENT.

17.0 Risk Analysis, Priority Ratings and Fire Risk Ratings

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

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

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

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

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

FRA Ref	Hazard or Defect	Action Required	Hazard Priority	Risk Rating	Action By	Review Date	Contractor Completed
8.6	A mobility scooter was being stored in the staircase enclosure at the time of the assessment, at its base.	Arrangements should be made for the mobility scooter to be removed from the common area and the resident to whom it belongs should be educated regarding storage in the common area accordingly.	P1	Substantial			
8.17-8.18	It was observed that the external gate near to final exit is electromagnetically secured and, although a 'push button to exit' system is provided, there was no green box emergency override present.	It is recommended that green box emergency overrides are installed adjacent to the external gates near to final exits.	P2	Moderate			
9.1	Several cupboards adjoining the corridor serving the community areas/server room could not be accessed at the time of the assessment. It appeared that this was due to locks having being replaced and our assessor not having the correct keys to access these areas.	It is recommended that the cupboards adjoining this corridor which have different locks installed are accessed and that it is confirmed that they are provided with suitable FD30s doors and fire stopping within (where appropriate).	P2	Moderate			
9.1	The gas service riser cupboard adjacent to flat 7 (first floor) is provided with an intumescent grille. Intumescent grilles would not prevent the spread products of combustion prior to reaching the temperature required to seal.	It is recommended that the door is replaced/grille is sealed to 30 minutes fire resistance.	P3	Moderate			
9.1-9.2	The doors detailed within the full significant finding have issues identified with regards to their ability to self-close.	It is recommended that remedial works are carried out to each of the identified doors in the manner detailed in the full significant finding.	P1	Moderate			
9.1, 9.14	Issues were observed relating to a number of doors and their ability to lock/secure, as detailed in the full significant finding.	It is recommended that the locks to the doors specified are replaced/repared so that they securely close and lock and consideration may be given to surveying all cupboards throughout the building for the same issues.	P2	Moderate			
9.3	The automatic door between the lift lobby and the staircase enclosure (ground floor) is not provided with intumescent strips/cold smoke seals.	It is recommended that intumescent strips and cold smoke seals are fitted to this door.	P2	Moderate			
9.5	Breaches in compartmentation were observed in a number of areas within the building, as detailed in the full significant finding.	It is recommended that the identified breaches in compartmentation are fire stopped by a competent person to 60 minutes fire resistance and consideration should be given to checking the riser cupboards throughout the building, applying fire stopping where appropriate.	P1	Moderate			

9.5	In many of the electrical and riser cupboards inspected throughout the building, some form of foam appears to have been used to fill gaps. It could not be confirmed whether the foam was fire resisting or if it had been applied in a manner which would provide suitable means of fire stopping to the areas.	Confirm the foam is fire resisting/applied appropriately in line with manufacturer's and best practice guidelines or use a competent person to reapply appropriate fire stopping products (60 minutes fire resistance) to these areas.	P1	Moderate			
9.14	The sprinkler valve cupboard adjacent to flat 25 was being used for storage of combustible waste at the time of the assessment.	It is recommended that the cupboard is checked and, if still present, the waste is removed.	P2	Moderate			
10.10	Our assessor could not access the roof, therefore could not determine whether a sounder linked to the fire alarm system was provided in this area, nor could they confirm that, where provided, such a sounder is programmed to be audible.	Confirm the presence of or provide a sounder linked to the BS5839-1 fire alarm system on the roof and ensure it is of sufficient audibility to provide persons working on the roof with a warning in case of fire.	P2	Moderate			
12.6	The levels of safety and control of the lifts for fighters could not be confirmed.	The lift supporting information should be added to in order to display the functions the lifts have which could be used by the Fire Service. The information should also clearly state that the lift is not a fireman's, firefighting or firefighters lift.	P1 - previously identified	Moderate			
12.10	The dry rising inlet is located on the building's external façade by the main entrance, however there is no signage currently denoting its presence.	It is recommended that clear signage indicating the presence of the dry rising inlet is fitted.	P2	Moderate			

19.0 Recommendations

FRARef	Observation	Recommended Action	Risk Rating	Contractor Completed
6.5, 6.10	No PAT testing labels were observed as fitted to any of the portable electrical appliances in the commonly used facilities (e.g. the community room and kitchenette), therefore it could not be confirmed whether or not PAT testing had been carried out.	It is recommended that systems, for example PAT testing, are put in place to ensure appliances in communally used areas are tested, repaired and maintained on a regular basis in accordance with the Electricity at Work Regulations, 1989.	Moderate	
8.16	It was noted at the time of the assessment that none of the doors between the staircase and the corridors serving flats were electromechanically secured (as is normally intended), with the exception of the second floor.	In order to prevent unauthorised access to the flats from the stair, ensure all of the doors into these areas electromechanically secure when not in use, as intended. Where there is an issue with the second floor electromechanical lock jamming this should be rectified.	Moderate	
10.3-10.5	Manual call points were provided throughout the common areas which are regularly accessed by the residents. Our assessor understands that whereas detectors are silent when activated, the manual call points may be clearly audible.	It is recommended that the manual call points in the common areas which are accessed by residents are removed if they result in an audible alarm sounding on activation.	Moderate	
12.0	Any new draft fire strategies and proposed fire safety precautions to be installed in support of the fire strategy should take account of the recommendations from the Grenfell Tower Inquiry.	The Grenfell Tower Inquiry recommendations should be considered as part of the overall fire safety improvement works within this premises. These are detailed in the full recommendation.	Moderate	

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

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

20.0 Commentaries

FRARef	Observation	Recommended Action	Risk Rating	Contractor Completed
8.6	A sofa was observed in the common area outside flat 30 (sixth floor) at the time of the assessment, however a contractor present informed our assessor that this flat was being emptied as it was newly void and that the sofa was soon to be removed.	Ensure the common areas remain free of storage following emptying of this void flat.	Tolerable	
9.1	It was noted that the doors to the cleaner/sluice room and the sprinkler tank room were not fire doors however were kept locked and were considered to present a low risk.	Where the doors are replaced as part of a general change/refurbishment, consider replacing with FD30s doors.	Tolerable	
9.1-9.3	Flat entrance door replacements were being carried out throughout the premises at the time of the assessment and the new doors had not yet had the self-closing devices fitted as these were being installed shortly after door installation.	The self-closing devices should be fitted to the new flat entrance doors as soon as practicable, as these are a key component with regards to prevention of fire and smoke spread.	Substantial	
10.1	The BS5839-1 fire alarm system was showing 7 faults at the time of the assessment.	Our assessor was advised that this was due to the contractor works being carried out on site and that the fire alarm system was returned to fully operational condition prior to contractors leaving at the end of each working day.	Tolerable	
10.5	Some BS5839-1 heat detection had been moved out of the flat entrance hallways and into the common area whilst the panels above the flat entrance doors were replaced/re-fire stopped.	It was confirmed to our assessor by a fire alarm contractor on site that once the panels above the flat entrance doors have been replaced the BS5839-1 detection will be re-fitted within the resident flats. Ensure this is carried out as soon as practicable.	Moderate	