



TOTAL FIRE GROUP LTD

Fire Risk Assessment

Conducted at:

Moorcot Court Bideford Drive Wythenshawe Manchester M23 0QW



16 June 2022







Certificate Number	LS	0244300
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Life Safety Fire Risk Assessment Silver Approved Scheme CERTIFICATE OF CONFORMITY



This certificate is issued by the Approved Company named in Part 1 of the Schedule in respect of the fire risk assessment provided for the person(s) or organisation named in Part 2 of the Schedule at the premises and / or part of the premises identified in Part 3 of the schedule.

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

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

Signed (for and on behalf of the issuing Approved organisation)	M. E. ÔMean
Job Title	Senior Fire Safety Consultant
Date	27/06/2022

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

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

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

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

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

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

Note.

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



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TERMS AND CONDITIONS OF BUSINESS

Moorcot Court, Bideford Drive, Wythenshawe, Manchester, M23 0QW

This fire risk assessment is in accordance with the full Terms and Conditions provided with our quotation that should be read in full. This fire risk assessment is made without prejudice to any requirements made by Local Authority, Building Control or by the local Fire Authority. Fire assessment and evaluation of risk is a dynamic and evolving process. The Assessment that we have prepared is based on the appearance of the premises/building, number of employees, internal layout and information provided on Thursday, 16 June 2022

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

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

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

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

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



1.0 Fire Risk Assessment Details

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

Wythenshawe Community Housing Group Limited Wythenshawe House, 8 Poundswick Lane, Wythenshawe, Manchester, Greater Manchester, M22 9TA
and relates only to the premises of:
Moorcot Court, Bideford Drive, Wythenshawe, Manchester, M23 0QW
Responsible person(s):
Wythenshawe Community Housing Group (WCHG).
Person(s) consulted and landline contact number:
Diane Burrell (Facilities Manager). 0161 946 9191.
Fire Risk Assessor:
Luke Saul BSc (Hons), AlFireE, MIFSM, Tier 3 Nationally Accredited Fire Risk Assessor N438
Audited by:
Mark O'Meara DMS, Eng Tech, MIFireE, MIFSM, Tier 3 Nationally Accredited Fire Risk Assessor 0143
Date fire risk assessment was conducted:
Thursday, 16 June 2022
Time:
09:30.

Date of last FRA or FRA Review (if known)

21 Jun 2021

Suggested date for next review:

June 2023

Fire risk assessment limitations:

A type 3 (Non-Destructive) Fire Risk Assessment (as detailed in the latest guidance document Fire Safety in Purpose Built Blocks of Flats) has been completed with access to flats 28 (third), 37 (fourth), 61 (sixth), 61 (seventh), 70 (eighth). Access was made into the lift motor room above the eighth floor, however there was no access to the roof itself due to our assessor not having the required keys and a permit from WCHG.



As no access was available to the roof our assessor was unable to view the BMS room. There was also no access to the old caretaker's office adjoining the lift lobby at ground floor level as no keys were provided to this room. The open deck serving the seventh floor flats had a boarded ceiling, above which it could be seen that services had been ran. The area above this boarding could not be accessed without carrying out a destructive risk assessment, which was not undertaken at this time. The same was the case with some boarded riser areas adjoining the open decks.

A large sample of the riser cupboards (minimum of 2 per floor) were accessed along with the laundry, the site office and the plant rooms at the rear of the premises.

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:

9 including the ground floor.

2.2 Approximate building footprint:

550m²

2.3 Details of Construction and Premises:

Moorcot Court was built in 1969 and is a high rise residential block consisting of 70 flats which are accessed via open decks. The premises is of concrete frame construction with brick infill panels and curtain wall glazing including spandrel panels (works in the process of being undertaken in relation to this, as detailed in Section 9.13). Floors and walls are of concrete construction and the building has a flat roof.

The building is rectangular in shape and each of the upper floors is of the same layout. This layout consists of a lift lobby incorporating the single staircase adjoining all floors. The single staircase has a means of permanent ventilation at its head. There are 2 lifts in the lift lobby, both serving all floors. A door from each lift lobby opens onto the open deck area serving flats, adjoining which are 2 flats to one side of the open deck and 6 flats to the other. A refuse chute room is accessible via a door on each open deck, as is a service riser cupboard adjacent to the refuse chute room. Additional service riser cupboards a present by the flats, adjoining the open decks. On the ground floor the layout is slightly different, with a laundry and an old (no longer staffed) caretaker's office adjoining the lift lobby. A rear exit from the building provides access to some ground floor flats, in addition to the mains gas meter cupboard, a flat which has been converted to a site office during current contractor works, a tank room and hip room.

A number of resident flats were accessed (as specified in Section 1) and the layout of each of these was the same, this consisting of the entrance door opening into a hallway, off which was a kitchen, a store cupboard and a living room. A lobby adjoining the living room provided access to a bedroom and a bathroom. The bedroom is therefore an inner room, with the living room serving as the access room. Also adjoining the living room is an enclosed balcony area. Each flat was provided with a BS5839-6 Grade D fire alarm system to an LD1 standard of coverage. A BS5839-1 type heat detector was also observed as installed in each of the flat entrance hallways and this has been confirmed to be part of the common area fire alarm system which has been reconfigured to be silent and to function as an emergency alert system for use by the Fire and Rescue Service. Also extending throughout each flat was a sprinkler system, which appeared to be fed by 2 tanks in a room adjoining the ground floor deck serving flats. This sprinkler system was also observed to serve some areas such as the laundry.

Emergency lighting is installed throughout the common areas, including plant.

2.4 Occupancy/Purpose Groups

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

2.5 Approximate maximum number of persons:

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

2.6 Approximate maximum number of employees at any one time:

Limited to occasional visits by cleaning and maintenance staff.



2.7 Maximum number of members of the public:

Limited to visitors to the residents.



2.8 Occupants at Special Risk:

	Persons familiar with the premises	Yes
	Persons unfamiliar with the premises	No
Occupants with disabilities		
	Mobility-impaired	Yes
	Hearing-impaired	Yes
	Learning difficulties	Yes
	Occupants in remote areas	No
	Others	Yes

Flats are general needs. Residents may be present with any combination of disabilities throughout the premises. WCHG should provide information and regularly remind tenants on the fire procedures by providing leaflets and where necessary encouraging new tenants to have a home fire safety check by the local fire service. Specific measures regarding tenants with any disabilities identified can be discussed and implemented following the home fire safety check in conjunction with relevant local community services.

2.9 Fire Loss Experience

WCHG informed our assessor that there has previously been a fire in Flat 53, however could not confirm the date. It was reported that there was only smoke damage to the kitchen, with no further spread.



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 with regards to some aspects of the building's compartmentation, however overall the standard of compartmentation was observed to be high. The building also has a common, monitored fire alarm system which would enable early summoning of the Fire Service. 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

As detailed above, some issues have been identified relating to compartmentation, however overall the standard was high and the monitored fire alarm system should result in the Fire Service being summoned swiftly. The risk to property is therefore considered to be tolerable.

Risk to Business Continuity:

N/A

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



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

4	4.0 Dangerous, Flammable, Combustible Materials & Substances: Finding(s)
Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
4.1-4.2	Questions 4.1 and 4.2 relate to substances and materials which are subject to the "Dangerous Substances and Explosive Atmosphere Regulations 2002" (DSEAR). No substances or materials falling into the above regulations are stored or used inside the premises.



	5.0 Interior Furnishings	
5.1	Are all interior furnishings made from fire resisting materials? (The Furniture and Furnishings (Fire) (Safety) Regulations 1988 (as amended in 1989 & 1993))	N/A
5.2	Where appropriate are they retreated with flame retardant chemicals (theatre curtain etc.) or made from inherently flame retardant materials?	N/A
5.3	Are all items located away from ignition sources?	N/A
5.4	Is all furniture in a good condition i.e. free from tears in covers, burns or discolouring from heat?	N/A

	5.0 Interior Furnishings: Finding(s)
Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
5.1	At the time of the Fire Risk Assessment, the common areas were free from furniture.



	6.0 Heating and Electrical Appliances	
6.1	Are portable or fixed heaters used?	No
6.2	Are all heaters fitted with suitable guards and located in positions away from combustible materials?	N/A
6.3	Are all heaters free from naked flames?	N/A
6.4	Has the use of safer alternatives been considered?	N/A
6.5	Are systems in place to ensure appliances are tested, repaired and maintained on a regular basis in accordance with the Electricity at Work Regulations, 1989?	Yes
6.6	Has the premise's electrical system undergone electrical safety checks?	Yes
6.7	Is there a procedure to prevent the use of unauthorised portable appliances?	Yes
6.8	Is the ventilation of all appliances adequate?	Yes
6.9	Are all appliances turned off when the area is unoccupied?	Yes
6.10	Are all appliances protected by the correct fuse rating?	Yes
6.11	Are systems in place to isolate any appliance with a blown fuse?	Yes
6.12	Are all appliances free from visible signs of overheating?	Yes
6.13	Are multi-point adapters and extension leads kept to a minimum?	Yes
6.14	Are walkways or escape routes free from trailed cables?	Yes
6.15	Are cables free from mechanical damage?	Yes
6.16	Do signs indicate all electrical hazards?	Yes
6.17	Are reasonable measures taken to prevent fires as a result of cooking?	Yes
6.18	Are filters changed and ductwork cleaned regularly?	N/A
6.19	Are suitable extinguishing appliances available?	Yes
6.20	Are legal or other requirements for testing, maintenance & record keeping complied with for equipment such as lifts, hoists, escalators, air handling systems, heating boilers, pressure vessels etc.?	Yes
6.21	Do the premises have a lightning protection system? (where required)	Yes
6.22	Have other potential sources of heat not listed above been considered?	Yes



6.0 Heating and Electrical Appliances: Finding(s)		
Ref	SIGNIFICANT FINDINGS	
	None.	
Ref	RECOMMENDATIONS	
	None.	



Ref	COMMENTARY
6.0	Isolation switches for the lifts are located in the lift motor room.
6.1	There is no heating provided in the communal areas, however gas central heating is provided in the flat which is currently being used as the site office. The boilers serving flats are communal and water heating vessels are contained within
6.5, 6.10	cupboards in resident flats. Portable appliance testing (PAT) is regularly carried out on appliances that are the responsibility of WCHG. It is highlighted that not all electrical devices need to be the subject of an annual PAT. The Health and Safety Executive (HSE) advocates a proportionate, risk-based approach to the maintenance of portable electrical appliances within the workplace. This guidance is simple and easy to follow and can be found on the HSE website 'Maintaining Portable Electrical Equipment in a low risk environment'.
6.6	WCHG have informed our assessor that servicing for the electrical installations for the building was last carried out on 19/11/2017, however some labels on site which displayed a date of 09/02/2022 (as pictured above). All records and certification relating to such servicing is stored on WCHG systems.
6.9	It would be impractical to turn off/isolate many of the appliances in use within the building when the area is unoccupied, such as in plant and laundry spaces.
6.17, 6.19	A kitchen is provided within the area currently used as a site office (which is usually a standard flat). Fire extinguishers belonging to the contractors working on the premises were present in this area.
6.19	Danger Electric shock risk Suitable hazard signage was fitted to service risers across the premises.
6.20	All gas installations have safety checks carried out on a 10 month rolling programme of work. The lifts are serviced on a monthly basis. Laundry equipment is also maintained under a service contract. All records relating to this testing and maintenance is held centrally on WCHG systems.
6.21	The lightning protection system is tested on an annual basis, with this last having been carried out in 04/2022. Servicing records are held on WCHG systems.
6.22	No other sources of ignition were identified during this assessment and there are no solar panels fitted to this building.



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



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



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



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

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

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

Following consultation with the residents:

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

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

Personal plans for fire emergencies:

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

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

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



7.10-7.11	Contractor access is controlled by WCHG. A signing in book is not necessary. Visitors to the flats are the responsibility of the
	tenants. Where necessary, health and safety information relating to this building may be provided by WCHG to attending
	contractors, prior to them accessing the premises.
7.12	Restricted areas are secured by locked doors which are locked by WCHG staff or cleaners when not in use.



	8.0 Escape	
8.1	Do travel distances meet the criteria given in the relevant HM Government guide and recognised industry norms and guidelines?	Yes
8.2	Are there a sufficient number of exits of suitable width from each area/room for the persons present?	Yes
8.3	Can you ordinarily expect the Fire Service to arrive in the event of a fire whist the fire is in the room of origin?	Yes
8.4	Can you expect the premises to be evacuated within the standard times for the type of construction?	Yes
8.5	Are all escape routes available and accessible at all times?	Yes
8.6	Are all escape routes and stairways free from undesirable items? (E.g. portable heaters, cooking appliances, furniture, coat racks, vending/gaming machines, photocopiers, mirrors.	No
8.7	Do any inner rooms exist?	No
8.8	Are vision panels provided between the inner room & access room and is it adequate?	N/A
8.9	If the vision between the inner room and the access room is inadequate is smoke detection provided within the access room?	N/A
8.10	Are all emergency exits doors unlocked and available at all times when the premises are occupied?	Yes
8.11	Are all final exit doors checked (opened) on a regular basis? Are the outcomes recorded?	Yes
8.12	Is the door furniture provided appropriate for the purpose group of the premises i.e. public buildings, licensed premises etc.?	Yes
8.13	Are floor and stairway surfaces in good condition and free from slip and trip hazards?	Yes
8.14	Do all final exits lead to a place of safety?	Yes
8.15	Are external escape paths clear of obstructions?	Yes
	Electronic Door Release Devices	
8.16	Are all escape doors free from electro-mechanical door locks devices?	Yes
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	
	Storage was observed on the open deck area by flat 15 (second floor). It is acknowledged that this is the 'end of row' open deck flat and persons would not have to pass it, however this could encourage other residents to store items on the open deck near to their flats, in turn placing persons at risk of harm.
	Recommended Actions
8.6	It is recommended that the storage is removed from the open deck serving flats, with the resident advised accordingly.
	Observation
8.17-8.18	The ground floor flats and plant are accessed to the rear of the building. Persons in this area must pass back through the
	ground floor lift lobby to reach the street and ultimate safety, as access to the rear of the building is fenced in and is padlocked in order to prevent unauthorised access. It was noted that although the electromagnetically secured door from rear of the building leading back into the lift lobby had a fob point for access however no accompanying green box override. In the absence of a suitable override, there is the potential for persons to become trapped at the rear of the building, placing them at risk of harm.
	Recommended Actions
8.17-8.18	Confirm that the electromagnetically secured door back into the common area is double poled and would fail on activation of the common fire alarm (guaranteeing access), provide a suitable green box override or provide a means of ensuring persons at the rear of the building could reach ultimate safety on the street to the front at all material times.
Ref	RECOMMENDATIONS
	None.



COMMENTARY Ref 8.5 The above photograph shows the permanently open vents at the head of the stairs that are provided for smoke ventilation. These vents are considered acceptable. 8.5 The door onto the roof from the lift motor room provides a means of permanent ventilation. 8.5 Steps on the internal staircase are nosed, ensuring clear visibility for those using them. 8.6, 8.17-8.18 Article 14 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to ensure that emergency routes and exits can be used as quickly and safely as possible. 8.10, 8.12 From the internal side of flat entrance doors, it was observed that there were a mixture of thumb turn devices and key 8.11 Final exit doors are used regularly by residents and it can be reasonably expected that any fault would be reported. Such doors are also checked by a member of staff on a weekly basis and this is recorded electronically. 8.17-8.18 The front (to street) and the rear (to plant and ground floor flats) exits from the ground floor lift lobby are automatic and are electromagnetically secured. From the internal lift lobby side these exits are provided with suitable green box overrides.



	9.0 The Confinement of Fire	
9.1	Are all escape routes and compartments protected by fire resistant walls and doors where required?	No
9.2	Are all fire doors self-closing, kept locked shut where appropriate and in good condition?	No
9.3	Are all fire doors fitted with smoke seals and intumescing strips where required?	Yes
9.4	Do wall & ceiling linings meet the required surface spread of flame classes? e.g. Class O on escape routes	Yes
9.5	Have any breaches in the fire resistance (walls, floors and doors) been fire stopped with appropriate fire resisting materials?	No
9.6	Have there been any structural alterations within the past 12 months?	No
9.7	Were the requirements of the Building Regulations followed and a completion certificate issued?	N/A
9.8	Are all ducts fitted with effective fire dampers where required?	N/A
9.9	Are all fire exits underneath and within 1.8m horizontal or 9m vertically of any external escape stair, fire resisting and self-closing?	N/A
9.10	Is glazing within the above distances fire resisting and fixed shut?	N/A
9.11	Is there a procedure for all premises/areas to be checked at the end of a working period for potential fire hazards?	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	
9.1	Windows to flat bathrooms along the open deck had composite type panels in their lower portion and it appeared that many of these windows could be fully opened. This would compromise the protection of the open decks, which should be fire resisting
	and, where appropriate, fixed shut up to a height of 1.1m, this as detailed in Section 59.5 of the LGA Fire Safety in Purpose Built Blocks of Flats guidance. Where the open decks are inadequately protected persons may be placed at risk of harm.
9.1	Recommended Actions All bathroom windows should be made fixed shut up to a height of 1.1m. WCHG should also confirm that the composite panels within the windows provide a minimum of 30 minutes fire resistance or should arrange for remedial works as appropriate.
	Observation
9.1	A number of the service riser cupboards accessed were ill fitting or damaged, resulting in them not being able to close. Where these cupboards are unable to close this compromises the adjoining open deck escape route, placing persons at risk of harm.
	Recommended Actions
9.1	It is recommended that a survey of the service riser cupboards is carried out and, where these cannot be fully closed, remedial works should be carried out as appropriate. Observation
9.1	The letterbox to flat 43 had been boarded up and it is assumed that this is due to damage sustained/the letterbox being missing. Where the protection offered by the flat entrance door is compromised, persons may be placed at risk of harm.
	Recommended Actions
9.1	It is recommended that a competent person attends site to carry out remedial/replacement works to replace the letterbox.



Observation 9.1 A security door is fitted between the ground floor lift lobby and the laundry room. It could not be confirmed whether this will provide sufficient fire resistance and, where this is the case, persons may be placed at risk of harm. Recommended Actions The door to the laundry should be to FD30s standard and it is recommended that this standard is confirmed or remedial works 9.1 are carried out to ensure such a standard is provided. Observation 9.1-9.2 It is observed that there are composite construction fire doors installed to flat entrances. The previous fire risk assessment detailed that investigations have been carried out and these doors have not met the performance level in the Building Regulations with regard to fire resistance and smoke control from both sides. A number of manufacturer's flat entrance fire doors have previously failed fire tests when subjected to fire on both sides of the door despite being certified as FD30s compliant. The flat doors could not be confirmed as meeting current test evidence and certified as FD30s door assemblies conforming to BS476-22 (compatible door, frame, ironmongery, hardware etc.) and fitted with a positive-action self-closing device. Flat entrance fire doors should have test evidence demonstrating they meet the performance requirement in the Building Regulations guidance for fire resistance and smoke control from both sides. Where a flat entrance door is not self-closing or does not provide the relevant degree of fire resistance, a fire in a flat may prejudice the common means of escape as the doors may not form an effective barrier against the products of combustion placing relevant persons at risk of harm. Recommended Actions 9.1-9.2 If doors meet current test evidence and are certified as FD30s door assemblies conforming to BS476-22 (compatible door, frame, ironmongery, hardware etc), fitted with a positive-action self-closing device and installed in accordance with the manufacturer's instruction based on the original test specimen then no further action is necessary. The previous fire risk assessment indicates that this is not the case for these. Where it is known that the fire doors fitted do not have test evidence demonstrating they meet the performance requirement in the Building Regulations guidance for fire resistance and smoke control from both sides, then they should be replaced with fully compliant FD30s doors (compatible door, frame, ironmongery, hardware etc.) and fitted with a positive-action self-closing device. Any doors identified as damaged at any time should be immediately replaced/repaired as appropriate. As an interim measure, ensure all doors have a self-closing device installed. For further information and guidance regarding composite flat entrance doors, see commentary 9.1-9.2. Observation 9.1-9.2 The glazing within the flat entrance door to flat 53 was smashed. Where glazing is damaged this may affect the door's performance, placing persons at risk of harm in the event of a fire. Recommended Actions 9.1-9.2 It is recommended that a competent person attends site to carry out remedial/replacement works as appropriate.



Observation 9.2 Minor damage was observed towards the base of flat 51's (sixth) entrance door. It could not be confirmed whether or not this minor damage would affect the door's performance, however if it would then this has the potential to place persons at risk of Recommended Actions 9.2 It is recommended that a competent person attends site to inspect the door and determine whether or not repairs are required. Where required this should be organised and completed promptly. Observation 9.2 The fire door between the lift lobby and the open deck and eighth floor level was not effectively self-closing. Where doors are not effectively self-closing they may enable products of combustion to spread onto the adjoining escape route, placing persons at risk of harm. Recommended Actions 9.2 It is recommended that remedial works are carried out by a competent person so as to ensure the door is effectively selfclosing. Observation 9.2 As detailed in the previous fire risk assessment, the letterbox to flat 24 was missing. Where the fire door set is compromised it may not provide adequate protection to the adjoining escape route, placing persons at risk of harm. Recommended Actions It is recommended that a competent person attends site to carry out appropriate replacement/repair to replace the letterbox. 9.2



Observation 9.2 As was detailed at the time of the previous fire risk assessment, the flat entrance door to flat 9 had been boarded to cover damage. Where damaged, fire door sets may not afford the required standard of protection to the adjoining escape route, placing persons at risk of harm. Recommended Actions 9.2 It is recommended that the door is replaced/repaired as appropriate so that it affords 30 minutes protection to the adjoining escape route. Observation 9.5 Breaches in service risers were identified in the following locations: 1. By flats 39 and 40 (as previously identified) on the fifth floor. 2. Second floor electrical riser. Ground floor electrical room. Where breaches in compartmentation enable the spread of products of combustion, persons may be placed at risk of harm. Recommended Actions 9.5 It is recommended that fire stopping works are carried out in these areas, where considered appropriate. Note - Where services passing through ceilings are part of a 'shaft' as portrayed in Section 7.23 and Diagram 7.1 of Approved Document B (ADB) Volume 1, fire stopping will not be required. However, where there is potential for products of combustion to spread to other areas of the building in the absence of such fire stopping. Observation 9.5 A breach in the concrete ceiling on the open deck near to flat 34 appeared to lead into the flat. Where there are such breaches in compartmentation this may enable the spread of products of combustion, placing persons at risk of harm. Recommended Actions 9.5 It is recommended that the breach is fire stopped to 60 minutes fire resistance. Observation 9.14 An electrical room adjoining the lift motor room contained quantities of combustible waste, some of which was in close proximity to electrics which had been left exposed. Where combustibles are in the presence of sources of ignition there is increased potential for a fire and therefore placing persons at risk of harm. Recommended Actions 9.14 The waste should be removed and the room kept clear of combustibles.



	Observation
9.14	Combustibles were observed as stored within a number of service riser cupboards on the premises. Where combustibles are stored within risers they may provide a means of fuelling a fire which has spread into the riser areas, placing persons at risk of harm.
	Recommended Actions
9.14	The service riser cupboards should be surveyed and should be cleared where any storage/waste is identified.
Ref	RECOMMENDATIONS
9.13	Observation
	As recommended at the time of the previous fire risk assessment, a number of works relating to the building's external façade were observed to be in the process of being undertaken. Moorcot Court had been scaffolded in order to carry out the following works: 1. Roof replacement. 2. Walkway balcony panels replacement (currently appear timber and to be replaced with steel panels). 3. Window replacements containing spandrel panels. 4. Water pipe boxing risers to be replaced with steel framed construction. 5. All associated fire stopping relating to any penetrations that were previously hidden and undetected.
	It has been confirmed to our assessor that the replacement spandrel panels in the new window frames are manufactured by
	'Proteus' and the model is 'SP' which is A2-s1, d0 to BS EN-13501.
9.13	Recommended Actions Ensure all Regulation 38 information relating to the work being carried out is obtained by WCHG and is held on secure data
	systems.
	Observation
9.14	A number of doors to service risers could be closed but did not lock upon closure.
	Recommended Actions
9.14	It is recommended that the service riser cupboards are repaired and, where they do not lock/secure on closing, receive remedial works to do so. This would reduce the potential for persons to gain unauthorised access.



COMMENTARY Ref 9.1 Service risers and refuse chute rooms adjoining the open deck areas are provided with high and low level intumescent grilles. Although these will not seal in the early stages of a potential fire, therefore enabling passage of smoke and other products of combustion, the flats are accessed via open deck therefore this is considered acceptable. A boarded window adjoined the ground floor deck to the rear. A significant finding has not been raised for its repair for fire 9 1 safety purposes as there is sufficient space for persons to pass the flat away from the building. 9.1-9.2 Determining the risk priority for fire doors WCHG have plans in place for a four year replacement programme for their flat entrance doors that are of composite construction and do not meet the Building Regulations performance requirements. Current guidance states that when doors are identified for replacement the fire risk assessment ought to determine a risk based approach on how urgently such doors should be replaced within the particular building. A judgement is made based on the likelihood of a fire occurring, then spreading and the consequences affecting the relevant persons. In making this judgement the following non-exhaustive list outlines some of the issues which have been considered: • The likelihood of a fire occurring in the common landing area and affecting the flat entrance door and subsequently the The likelihood of a flat fire affecting the common area and thus adjacent flats prior to Fire and Rescue Service The condition and design of the existing flat entrance door (nominal smoke and fire resistance). The internal layout of the flat (that may assist in fire/smoke containment). The installation of smoke alarms within the flats. The installation of a fire alarm in the common area. The floor height of the highest occupied flat. Alternative exit routes and their availability (escape windows, balcony or multiple stairs). The size of the client's housing stock and competing priorities. The national picture regarding fire doors and their supply (Is it likely doors can be replaced on the suggested timescales?). A risk comparison against general housing and high rise residential tower blocks. 9.1-9.2 The flat entrance doors form part of the fire protected escape route and fall within the scope of the Fire Safety Order. Where additional assurance that existing or proposed fire door sets meet the current benchmarks is desired, professional advice can be sought. Using an independent UKAS accredited certification body whose engineers are qualified and adhere to the latest Passive Fire Protection Federation guidance would be a good way of securing this professional advice. Where it is known that the fire doors fitted do not have test evidence demonstrating they meet the performance requirement in the Building Regulations guidance for fire resistance and smoke control from both sides, then they should be replaced with fully compliant FD30s doors (compatible door, frame, ironmongery, hardware etc). Reference is made to Annex C of BSEN1634-1 - 'Fire resistance and smoke control tests for door and shutter assemblies, openable windows and elements of building hardware', which states "Doorsets made from other or composite materials are specifically excluded from this annex as there is not sufficient evidence of their behaviour in fire to be able to provide guidance on the weakest side against fire attack". This statement is re-enforced by a study conducted by the MHCLG 'GRP composite fire doors test results' in 2019 (GRP Composite Fire Doors Test Results), which sampled and tested a number of fire doors from a total of 9 composite door manufacturers. The test conclusion was that there was a performance issue with GRP composite 30 minute fire doors across the market. Although the MHCLG Guidance 'Annex A: Assurance and Assessment of Fire Doors' has been withdrawn and can no longer be directly referred to, it is still considered that Appendix A of this document provides an indication of the process required to prioritise the replacement of composite flat entrance doors in a building. Further advice on routine inspection and maintenance of fire resisting doors can be found in BS 8214 and LGA guidance Fire Safety in Purpose Built Flats section 82.

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

flat entrance door sets.



9.1-9.3 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:

- Gaps.
- FR glass.
- Letter plates.
- Self-closing devices.
- Intumescent strips and cold smoke seals.
- Overall condition.

The checks are logged on a portable electronic device which transports the records to WCHG central data systems.

9.1-9.2, 9.5, Article 8 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to take general fire precautions to 9.14 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.

As highlighted previously, compartmentation works have been carried throughout the premises by Allied Protection Ltd and, at 9.1, 9.5 a later date. Flamehold. They are accredited passive fire protection contractors and they have provided WCHG with documentary/photographic evidence of their work. 9.2

The flat entrance door to flat 61 was being wedged at the time of the assessment due to temperature.

9.3



The strip and seal on the top edge of the electrical cupboard (fifth floor) was loose and appeared to be coming off. The service riser cupboard by flat 43 (fifth floor) was missing a strip and seal.

Where the level of fire stopping or fire resisting construction is found to be below an acceptable standard remedial fire 9.5 stopping work should be carried out. Breaches in fire resisting construction should be filled with suitable fire resisting materials to maintain the standard of fire resistance of the surrounding structure in accordance with BS 476 Pt 22 or BS EN 1364 Pt 1 to 6. The use of third party accredited passive fire protection contractors and products should ensure any remedial actions will be to the required standard in the most cost effective manner.

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

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

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

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



9.8





In the flats that were viewed during this and previous Fire Risk Assessments, it was confirmed that the ventilation arrangements for the kitchen and bathroom were located on the external wall onto the open deck and did not pass through any other compartmentation. The extraction passes out of the flats at high level, therefore does not affect persons escaping past. It was observed at the time of the assessment that vents were being lined with fire stopping materials.

9.14







In the bin room on the ground floor, the bin in use is located adjacent to a lid that has a fusible link which enables the lid to selfclose over the bin should a fire occur. This is to prevent the fire, smoke and toxic gases spreading up the chute. The fusible link is checked annually by an appointed contractor and a label indicated that this was last carried out on 19/04/2022.

Recycling bins for the premises are located in the secured, fenced ground floor deck area to the rear of the premises.

9.15 9.15



CCTV is provided in the common areas, including on the open decks.



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



	10.0 Fire Alarm System: Finding(s)
Ref	SIGNIFICANT FINDINGS
	Observation
10.5	The resident of flat 61 (seventh) had removed the BS5839-6 Grade D detector from their hallway due to it chirping (likely due to low battery). In the absence of sufficient automatic detection the activation of the fire alarm system may be delayed, placing persons at risk of harm.
	Recommended Actions
10.5	It is recommended that a new BS5839-6 Grade D smoke detector is installed in this flat hallway and is interlinked with existing detection. Although it is acknowledged that the inside of flats does not fall under the Regulatory Reform (Fire Safety) Order 2005, a significant finding has been generated due to the perceived risk to life.
	Observation
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.
	Recommended Actions
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
	Observation
10.3-10.5	Manual call points were provided throughout the common areas which are regularly accessed by the residents. Our assessor understands that whereas detectors are silent when activated, the manual call points are clearly audible. This may result in
	frequent false alarms and may result in faults or similar showing on the fire alarm panel.
40 0 40 5	Recommended Actions
10.3-10.5	It is recommended that the manual call points in the common areas which are accessed by residents are removed if they result in an audible alarm sounding on activation. It is noted that where manual call points remain in areas accessible only to staff members these may remain as audible, so long as they only sound in staff/plant areas, not throughout the whole building.



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). One of the recommendations made in the Grenfell Tower Inquiry Phase 1 report published in October 2019 recommends that 'all high-rise residential buildings (both those already in existence and those built in the future) be equipped with facilities for use by the Fire and Rescue Services (FRS), enabling them to send an evacuation signal to the whole or a selected part of the building by means of sounders or similar devices'. Such systems should be separate from any fire detection and warning system as recommended in BS 8629. The evacuation strategy has reverted to a stay-put strategy. The common area fire detection system is configured as a silent system under normal operating mode and the fire panel control and indicating equipment (CIE) is provided for use by the FRS for manually alerting individual or multiple floors to evacuate should the need arise during firefighting operations. On activation of a fire/smoke detector or call point within the common area, a signal is sent to the CIE in the entrance foyer and then transmitted to an offsite receiving centre where a call is made to the FRS for a response to the building. The system was configured following consultation with GMFRS. It is not in accordance with the recommendations of British Standard 8629:2019, Code of Practice for the Design, Installation, Commissioning and Maintenance of Evacuation Alert Systems for use by the Fire and Rescue Service in Buildings Containing Flats.
10.1-10.5	All of the resident flats accessed were provided with BS5839-6 Grade D LD1 fire alarm systems (with the exception of that detailed within significant finding 10.5) and WCHG have previously confirmed that this provision is consistent throughout all of the flats in the building.
10.1-10.5	The common area fire alarm and detection system incorporated smoke detection throughout commonly used areas and heat detection in the hallways of each resident flat. The fire alarm panel for the system is located in the lift lobby at ground floor level and appeared healthy at the time of the assessment. It was confirmed to our assessor that the system is addressable. Further
10.10	detail regarding the fire alarm system and its purpose within the building is provided in commentary 10.0. Article 13 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to ensure the premises are, to
10.10	the extent appropriate equipped with appropriate fire detection and alarms.
10.11	MOORCOT COURT 6 14 22 23 30 38 46 -54 -70
10.12-10.14	A suitable building and zone plan is provided adjacent to the fire alarm panel. The fire alarm/emergency alert system is tested weekly by the staff from WCHG's Facilities Department. A record of the test
10.12-10.14	is kept electronically on WCHG's systems. The maintenance of the system is carried out by an approved contractor and is also recorded (last carried out 04/05/2022).



	11.0 Emergency Escape Lighting		
11.1	Has the provision of emergency lighting been considered? Working hours, windowless areas, open access areas>60m2, toilets>8m2.	Yes	
11.2	Is emergency lighting provided in accordance with guidance relevant to the purpose group for the premises? (BS5266, ADB)	Yes	
11.3	Does it illuminate escape routes, exits, corridors, hazards or obstructions, changes in floor level, signs, fire alarm call points and firefighting equipment?	Yes	
11.4	Is the emergency lighting beyond the final exit adequate so that persons can reach a place of safety?	N/A	
11.5	Are routine checks carried out in accordance with the appropriate standard to which the system conforms – i.e. daily, monthly, 6 monthly and annual checks?	Yes	
11.6	Are records of maintenance kept?	Yes	
11.7	Is normal lighting adequate and in working order?	Yes	

	11.0 Emergency Escape Lighting: Finding(s)	
Ref	SIGNIFICANT FINDINGS	
	None.	
Ref	RECOMMENDATIONS	
	None.	
Ref	COMMENTARY	
11.1-11.3	Suitable provision of emergency lighting was observed in the common areas, including on open deck areas.	
11.4	There is adequate borrowed light available externally for persons to reach a place of safety.	
11.5-11.6	Monthly testing of the emergency lighting system is carried out, with records held electronically. The system is also serviced annually, with this having last been carried out on 25/04/2022.	



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



	12.0 Fire Fighting Equipment, Systems & Fixed Installations: Finding(s)	
Ref	SIGNIFICANT FINDINGS	
	Observation	
12.6	When visiting the premises, it was clear that one of the two lifts serving the building was a firefighting lift of some sort. When our assessor was gathering information relating to this building, it was communicated that neither of the lifts had any firefighting functions. It could therefore not be confirmed that WCHG were fully aware of the types of lift present in the building and their capabilities with regards to firefighting. As different types of lifts provide different levels of safety and control of the lift for fighters, it is important that the correct details are available. Firefighters using a lift that does not provide a perceived level of safety would be placed at risk of harm which in turn may delay their operations placing residents (relevant persons) at risk of harm	
	Recommended Actions	
12.6	The standard of the two lifts should be confirmed and the details should be available for the Fire and Rescue Service to ensure that they are aware of the standard of both lifts. Although supporting information relating to the lifts was confirmed to be provided in the premises information box, this supporting information was viewed (in excel spreadsheet form) and does not appear to indicate that one of the lifts has firefighting capabilities. It should be ensured that information provided to the Fire Service clearly outlines the lift's capabilities in relation to firefighting.	
Ref	RECOMMENDATIONS	
10.0	Observation	
12.0	Any new draft fire strategies and proposed fire safety precautions to be installed in support of the fire strategy should take account of the recommendations from the Grenfell Tower Inquiry. There are a number of recommendations from the Grenfell Tower Inquiry that apply to this building. See also the commentary below at 12.0. Recommended Actions	
12.0	The following Grenfell Tower Inquiry recommendations should also be considered as part of the overall fire safety	
12.0	 improvement works within this premises: The installation of an Emergency Alert System for use by the Fire and Rescue Service. Low-level numbering of flats, floor levels, and emergency exit signage. Firefighting lift inspection and monthly firefighter control function tests. Prepare and regularly updating any PEEPs and include information on vulnerable persons and their PEEPs within the Premises Information Box. Provide fire safety instructions including how and when to evacuate the building in an easily understandable format with regards to the building and knowledge of the occupants. (e.g. Language etc) A check to ensure all fire door self-closers including flat entrance doors are operating effectively. This is being carried out by the Gas Safety Team. Note: The Fire Safety (England) Regulations 2022 (to be enacted in 2023) regulation 10 will require 3 monthly checks on all 	
	common area fire doors and on a best endeavour basis, annual checks to all flat entrance doors.	



Ref	COMMENTARY
12.0	Note: The Fire Safety (England) Regulations 2022 will implement the majority of the recommendations above made by the Grenfell Tower Inquiry in its Phase 1 report which required a change in the law. The regulations will come into force on 23 January 2023 following the publication of supporting guidance which is due later in 2022.
12.1	There is no requirement for fire extinguishers in the common areas of residential flats. It is not normally considered necessary to provide fire extinguishers or hose reels in the common parts of blocks of flats. Such equipment should only be used by those trained in its use. It is not considered appropriate or practicable for residents in a block of flats to receive such training. In addition, if a fire occurs in a flat, the provision of fire extinguishing appliances in the common parts might encourage the occupants of the flat to enter the common parts to obtain an appliance and return to their flat to fight the fire. Such a procedure is inappropriate.
12.1-12.3	
	CO2 firefighting equipment is provided in the plant areas of the building.
12.4-12.5	The fire extinguishers provided on the premises are checked monthly and serviced annually by an approved contractor. The last annual service was carried out on 10/09/2021. Records are kept on WCHG systems.
12.6	Article 38 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to ensure the premises and any facilities equipment or devices provided in respect of the premises for use or the protection of firefighters are suitably maintained.
12.6-12.7	AGM Market Marke
128 1210	A BS 9251 sprinkler system has been installed. In each flat, there are concealed sprinkler heads located in the hallway, the bedroom, the lounge, any enclosed balcony and the kitchen. A pump and water tank for the sprinkler system have been provided in the tank room, which is accessed via the rear of the building on the ground floor. The system is maintained and serviced by an approved contractor on a quarterly basis and Argus also attend weekly to visually check the sprinkler system.

12.8, 12.10





The dry rising main is both pressure tested and visually inspected annually with six months between the two visits. The tests and inspections are carried out by an approved contractor. Records are kept on WCHG systems. WCHG informed our assessor that the last test was carried out in 07/2021, however labels observed on the riser cupboards indicated a date of 01/2022 (it is therefore presumed that the last pressure test was 07/2021 and the last visual check in 01/2022). The dry riser outlets are provided on the half landings of the staircase and the inlet is on the external façade of the building, by the main entrance door.



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?	No
13.9	Where firefighting equipment or fire alarm call points are not clearly visible is their location highlighted by supporting signage?	N/A
13.10	Are all fire doors signed appropriate to their use i.e. Fire Door Keep Locked Shut, Fire Exit Keep Clear etc.?	Yes
13.11	Where required, are external fire assembly points signs prominently displayed?	N/A
13.12	Are "No Smoking" signs and procedures in place to ensure there is no smoking in work or public places? (The Smoke Free (Premises and Enforcement) Regulations 2006)	Yes
13.13	Are all signs legible and in good condition?	Yes
13.14	Do all signs comply with the EN 7010:2011 where necessary?	Yes



	13.0 Fire Safety Signs and Notices: Finding(s)
Ref	SIGNIFICANT FINDINGS
	Observation
13.8	The same played in the same of the same played in t
	An old version of the fire action notice showing incorrect instructions is displayed on the ground floor adjacent to the fire alarm panel, specifically stating that the fire alarm will sound if there is a fire on a certain floor (it is understood the system is now silent unless the Fire Service takes control). Persons reading this notice may take the wrong actions should a fire occur. This would place themselves and others at risk of harm.
	Recommended Actions
13.8	The old fire action notice displayed on the ground floor should be replaced with the new version of the notice, which accurately details the building's facilities and evacuation strategy.
Ref	RECOMMENDATIONS
	None.



Ref	COMMENTARY
13.0	'In the event of fire do not use this lift' notices have been provided on each landing adjacent to the lift.
13.0	Wayfinding signage that has the floor number and directional signage to the flats, including flat numbers, is now displayed in the lift lobbies and on the stairway landings. These are not low level, however are considered satisfactory.
13.0	WORKSTOWN V PRI THE ACT OF THE A
10 1 10 1	An external notice by the main entrance to the building provides key information to attending firefighters.
13.1-13.4	Directional signage was observed in the common areas. This building has a single staircase and residents will be familiar with access and egress from the building.
13.8	Article 15 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to establish appropriate procedures including safety drills to be followed in the event of serious and imminent danger to relevant persons.
13.12	procedures including safety drills to be followed in the event of serious and imminent danger to relevant persons. No smoking
	Suitable 'No Smoking' signage was observed in the common area.



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

	14.0 General Fire Safety Procedures: Finding(s)	
Ref	SIGNIFICANT FINDINGS	
	None.	
Ref	RECOMMENDATIONS	
	None.	
Ref	COMMENTARY	
14.0	Although keys were not provided to our assessor for accessing of the premises information box (PIB) on the premises, WCHG have confirmed to our assessor that the PIB contains the following information: • Access keys for all areas.	
	 Personal Emergency Evacuation Reports (see Section 7.3). Passenger lift supporting information (see Section 12.6). Access codes. Asbestos refurbishment survey. 	
14.1-14.2	There have been no recent reports of fire that our consultant was made aware of and there was no evidence of any fires having occurred. Any reports of fire or false alarms should be fully investigated and where necessary control measures implemented to reduce the possibility of further occurrences. Following any outbreak of fire affecting the common areas, the Fire Risk Assessment should be reviewed to identify if any further risk reduction measures are necessary.	
14.3-14.4	All false, accidental and malicious actuations are recorded. System faults are corrected as soon as possible by the alarm contractor. Accidental and malicious actuations are passed to the Housing Manager who will arrange for the appropriate action to be taken.	
14.7	The Chief Executive for Wythenshawe Community Housing Group has the overall responsibility for fire safety related matters and management.	
14.8-14.9	Our assessor was informed that the local authority Fire Service visited the premises in 03/2022, however no information has been provided to our assessor regarding subsequent recommendations/advice from the Fire Service, therefore it is assumed that none were issued.	
14.11	All important documents and data regarding the premises are stored off-site.	
14.12	The Fire Service has been provided with access fobs for all WCHG high rise blocks.	



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

	15.0 Fire Safety Management: Finding(s)	
Ref	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 put) 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	employers agent and/or third party accredited organisation/person sign off work which may affect compartmentation on completion. In addition to the above, RAMS are submitted for contractor works and works are also assessed for any activities requiring	
	permit to work'. For major works the contractor has a permit license to manage the procedure and this is regularly audited.	
15.13-15.14	For this premises, accurate fire action notices will be considered sufficient with regards to provision of evacuation strategy information, as recommended in Section 13.6.	
15.15	There are 'out of hours' Emergency Procedures and Emergency Evacuation Procedures in place.	



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

	16.0 Fire Emergency Plan: Finding(s)
Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
16.1-16.2	The premises were constructed as purpose built flats. They incorporate compartmentation between each flat and between the flats and the escape route and this supports a 'stay put' policy. However, the comments in Section 9 should be noted and actioned where appropriate. WCHG have in place a 'stay safe' policy and have informed all the residents in their high rise residential buildings, via a newsletter/leaflet of the action they should take on discovering a fire or on hearing the Evacuation Alert System when it is activated by the Fire and Rescue Service.



Fire Emergency Plan FLATS STAY PUT POLICY

GENERAL ADVICE TO RESIDENTS

This building has been built in such a way as to protect the people in it if a fire breaks out.

The important thing to remember is that if the fire starts in your home, it is up to you to make sure that you can get out of it.

AT ALL TIMES

- Make sure that the smoke alarms in your flat are tested.
- Do not store anything in your hall or corridor, especially anything that will burn easily.
- Use the fixed heating system fitted in your home. If this is not possible, only use a convector heater in your hall or corridor. Do not use any form of radiant heater there, especially one with either a flame (gas or paraffin) or a radiant element (electric bar fire).

IF A FIRE BREAKS OUT IN YOUR FLAT

If you are in the room where the fire is, leave straightaway, together with anybody else, then close the door.

- Do not stay behind to try to put the fire out, unless you have received suitable training.
- Tell everybody else in your flat about the fire and get everybody to leave.
- · Close the front door and leave the building.
- · CALL THE FIRE SERVICE.

IF YOU SEE OR HEAR OF A FIRE IN ANOTHER PART OF THE BUILDING

- It will usually be safe for you to stay in your own home.
- You must leave your home if smoke or heat affects it OR you are instructed to do so by the Fire Service. Close all doors and windows.

CALLING THE FIRE SERVICE

The Fire Service should always be called to a fire, even if it only seems to be a small fire. This should be done straight away.

The way to call the fire service is by telephone as follows.

- 1) Dial 999.
- 2) When the operator answers give the telephone number you are ringing from and ask for the FIRE service.

When you are put through to the fire service, tell them clearly where the fire is:

Moorcot Court, Bideford Drive, Wythenshawe, Manchester, M23 0QW

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

THE ABOVE PROCEDURE SHOULD BE COMMUNICATED TO EACH RESIDENT.



17.0 Risk Analysis, Priority Ratings and Fire Risk Ratings

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

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

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

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



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

To determine the risk rating two main areas are considered, the likelihood of an outbreak of fire and the potential for that outbreak to cause harm to persons, property and business continuity.

The likelihood of fire outbreak is given a rating of highly unlikely, unlikely and likely, this is then multiplied by the harm potential rating of slight, moderate and serious harm.

The level of fire risk is then quantified as **negligible**, **tolerable**, **moderate**, **substantial** or **intolerable**. The subjective risk rating is calculated and the risk level determined within the following

parameters:

Negligible Risk	Where the combination of severity of harm and likelihood is very low and there is minimal risk to people's lives. The risk of a fire occurring is rare and the potential for fire spread is negligible, also where the overall fire safety management is of a high standard. No further action is normally required unless circumstances change. A reassessment should take place on the review date.
Tolerable Risk	Where the present systems, facilities or management procedures are reasonably satisfactory at the time of the assessment. Escape should be carried out unaided with effective fire safety management procedures in place. Possible minor actions may be required, with a reassessment being conducted at the review stage.
Moderate Risk The present systems, facilities or management is unsatisfactory in some areas. Where a fire coul the available time needed to evacuate may be reduced by the speed of the development of fire, als reaction time of occupants may be slower because of the type of persons present e.g. sleeping, e infirm or where there are large numbers of persons or complex escape routes. Remedial actions required with some control measures being implemented. A reassessment should be made once measures have been put in place.	
Substantial Risk	Where the combination of severity and probability is high and urgent action must be taken to reduce the risk. Where a fire is likely or highly likely to occur and the spread of fire development would be such that the available escape time would be substantially reduced. Premises identified with substantial risk areas will normally require the provision of considerable resources in the form of equipment, training, information and management to mitigate the risks.
Intolerable Risk	Where the combination of severity and probability is such that extreme harm or death will occur and there is a real threat of an outbreak of fire. Action must be taken to immediately reduce the risk, ideally to a tolerable level. If this cannot be achieved, then consideration must be given to prohibiting or limiting the use of all or part of the premises until such risks can be reduced. Reassessment is required following implementation of the immediate or interim control measures.



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

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

FIRE RISK RATING MATRIX

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



18.0 Summary of Findings

FRARef	Hazard or Defect	Action Required	Hazard Priority	Risk Rating	Action By	Review Date	Contractor Completed
8.6	Storage was observed on the open deck area by flat 15 (second floor).	It is recommended that the storage is removed from the open deck serving flats, with the resident advised accordingly.		Moderate			
8.17-8.18	It was noted that although the electromagnetically secured door from rear of the building leading back into the lift lobby had a fob point for access however no accompanying green box override.	Several options are available to ensure the safety of persons in this regard, as detailed in the full significant finding.	P2	Moderate			
9.1	Windows to flat bathrooms along the open deck had composite type panels in their lower portion and it appeared that many of these windows could be fully opened.	All bathroom windows should be made fixed shut up to a height of 1.1m. WCHG should also confirm that the composite panels within the windows provide a minimum of 30 minutes fire resistance or should arrange for remedial works as appropriate.	P1	Substantial			
9.1	A number of the service riser cupboards accessed were ill fitting or damaged, resulting in them not being able to close.	It is recommended that a survey of the service riser cupboards is carried out and, where these cannot be fully closed, remedial works should be carried out as appropriate.		Moderate			
9.1	damage sustained/the letterbox being missing.	It is recommended that a competent person attends site to carry out remedial/replacement works to replace the letterbox.	P2	Moderate			
9.1	A security door is fitted between the ground floor lift lobby and the laundry room.		P1	Moderate			
9.1-9.2	It is observed that there are composite construction fire doors installed to flat entrances. It has been determined as a result of investigations that the doors do not meet the required standard with regards to performance.			Moderate			
9.1-9.2	The glazing within the flat entrance door to flat 53 was smashed.	It is recommended that a competent person attends site to carry out remedial/replacement works as appropriate.	P1	Substantial			
9.2	Minor damage was observed towards the base of flat 51's (sixth) entrance door.	It is recommended that a	P2	Moderate			



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9.2	and eighth floor level was not effectively self-closing.	remedial works are carried out by a competent person so as to ensure the door is effectively self-closing.	P1	Moderate		
9.2	As detailed in the previous fire risk assessment, the letterbox to flat 24 was missing.	It is recommended that a competent person attends site to carry out appropriate replacement/repair to replace the letterbox.	P2 - previously identified	Moderate		
9.2	As was detailed at the time of the previous fire risk assessment, the flat entrance door to flat 9 had been boarded to cover damage.	It is recommended that the door is replaced/repaired as appropriate so that it affords 30 minutes protection to the adjoining escape route.	P1 - previously identified	Substantial		
9.5	Breaches in service risers were identified in the locations detailed within the full significant finding.	It is recommended that fire stopping works are carried out in these areas, where considered appropriate - see full significant finding.	P2	Moderate		
9.5	A breach in the concrete ceiling on the open deck near to flat 34 appeared to lead into the flat.	It is recommended that the breach is fire stopped to 60 minutes fire resistance.	P1	Moderate		
9.14	An electrical room adjoining the lift motor room contained quantities of combustible waste, some of which was in close proximity to electrics which had been left exposed.	removed and the room kept clear of combustibles.	P2	Moderate		
9.14	Combustibles were observed as stored within a number of service riser cupboards on the premises.	The service riser cupboards should be surveyed and should be cleared where any storage/waste is identified.	P2	Moderate		
10.5		It is recommended that a new BS5839-6 Grade D smoke detector is installed in this flat hallway and is interlinked with existing detection.	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.		Moderate		
12.6	The capabilities of the lifts provided on premises for firefighting purposes could not be clearly discerned.	See Significant Finding 12.0 for the actions required	P1 - previously identified	Moderate	Victoria Finn	02 Jul 2021
13.8	An old and now incorrect version of the fire action notice is displayed on the ground floor adjacent to the fire alarm panel.	floor should be replaced	P1 - previously identified	Moderate	Emma Atkin	18 Aug 2021



19.0 Recommendations

FRARef	Observation	Recommended Action	Risk Rating	Contractor Completed
9.13	As recommended at the time of the previous fire risk assessment, a number of works relating to the building's external façade were observed to be in the process of being undertaken - see full recommendation.	Ensure all Regulation 38 information relating to the work being carried out is obtained by WCHG and is held on secure data systems.	Moderate	
9.14	A number of doors to service risers could be closed but did not lock upon closure.	It is recommended that the service riser cupboards are repaired and, where they do not lock/secure on closing, receive remedial works to do so.	Moderate	
10.3-10.5	Manual call points were provided throughout the common areas which are regularly accessed by the residents. Our assessor understands that whereas detectors are silent when activated, the manual call points are clearly audible.	It is recommended that the manual call points in the common areas which are accessed by residents are removed if they result in an audible alarm sounding on activation.	Moderate	
12.0	Any new draft fire strategies and proposed fire safety precautions to be installed in support of the fire strategy should take account of the recommendations from the Grenfell Tower Inquiry.	The Grenfell Tower Inquiry recommendations should be considered as part of the overall fire safety improvement works within this premises. These are detailed in the full recommendation.	Moderate	

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

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



20.0 Commentaries

FRA Ref	Observation	Recommended Action	Risk Rating	Contractor Completed
8.10, 8.12	From the internal side of flat entrance doors, it was observed that there were a mixture of thumb turn devices and key operated locks.	During the next refurbishment or on next replacement of the flat entrance doors with key operated locks, consider provision of a thumb turn device or other which would enable the resident to quickly exit the flat without the requirement for a key. It is acknowledged that the inside of the flat is beyond the extent of the Regulatory Reform (Fire Safety) Order 2005 legislation.	Tolerable	
9.1	A boarded window adjoined the ground floor deck to the rear. A significant finding has not been raised for its repair for fire safety purposes as there is sufficient space for persons to pass the flat away from the building.	Consider repairing the window for security purposes.	Tolerable	
9.2	The flat entrance door to flat 61 was being wedged at the time of the assessment due to temperature.	Our assessor discussed this with the resident at the time of the assessment and the importance of allowing the door to self-close. The resident unwedged their door following the discussion. This has therefore not been raised as a significant finding, however WCHG should be aware of this for future checks and potential re-occurrence.		
9.3	The cold smoke seal on the top edge of the electrical cupboard (fifth floor) was loose and appeared to be coming off.	Consideration may be given to replacement of the strips and seals.	Tolerable	