TOTAL FIRE GROUP

Wythenshawe
Community Housing Group

TOTAL FIRE GROUP LTD

Fire Risk Assessment Review

Conducted at:

Village 135
3 Hollyhedge Court Road
Wythenshawe
Manchester
M22 4GW

05 September 2019

Fire Industry Association

BAFE FIRE SAFETY REGISTER
Fire Risk Assessment Provider (SP205)

NSI SILVER
UKAS PRODUCT CERTIFICATION 0142

TOTAL FIRE GROUP

Contents

TERMS AND CONDITIONS OF BUSINESS

Village 135, 3 Hollyhedge Court Road, Wythenshawe, Manchester, M22 4GW

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, 5 September 2019**

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. TFS Ltd accepts no liability where the recommended review date in the fire risk assessment has been exceeded.

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

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is given within the Assessment, but you should review the Assessment sooner should there be any reason to suspect it is no longer valid, if a significant change takes place or if a fire occurs.

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

Part 2: References and Methodology Index

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

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

Part 2: References and Methodology Index continued

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

Wythenshawe Community Housing Group
Wythenshawe House, 8 Poundswick Lane, Wythenshawe, Manchester, Greater Manchester, M22 9TA

and relates only to the premises of:

Village 135, 3 Hollyhedge Court Road, Wythenshawe, Manchester, M22 4GW

1.0 Fire Risk Assessment Details

Responsible person(s):

Wythenshawe Community Housing Group.
Ms Diane Burrell, Facilities Manager.
Ms Amanda Seals, Senior Manager.

Person(s) consulted and landline contact number:

Ms Amanda Seals, Senior Manager.

Fire Risk Assessor:

Gary Hutchinson BEng(Hons) Fire Engineering, MIFireE, Nationally Accredited Fire Risk Assessor (NAFRA 0140)

Audited by:

Mark O'Meara DMS, Eng Tech, MIFireE, MIFSM, NAFRA (Nationally Accredited Fire Risk Assessor 0143)

Date fire risk assessment was conducted:

Thursday, 5 September 2019

Time:

09:40

Date of last FRA or FRA Review (if known)

03 Dec 2018

Suggested date for next review:

September 2020

Fire risk assessment limitations:

A Type 3 common parts and flats (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 available to flat(s) 13, 74, 71, 105, 124 and guest bedrooms 1-4 in blocks B and C. Due to the vulnerabilities and disability of some of the residents along with the care support provided, the guidance "Fire Safety in Specialised Housing" is also considered.

A sample of suspended ceiling tiles and access hatches was lifted to carry out a head and shoulders inspection of the ceiling voids.

The building is relatively new with handover taking place in April 2017; substantial passive fire protection work has been carried out following previous recommendations and this fire risk assessment is not a full building compliance check to ensure compliance with the Building Regulations. Where areas have been identified that appear not to comply with Approved Document B, these have been highlighted within the report.

A large sample of locked service risers in each block was accessed however, not all services or penetrations traversing fire resisting compartments were 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 were provided for observations.

This fire risk assessment review forms part of the ongoing fire safety management of the building and should be read in conjunction with the fire risk assessment dated above.

Note

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

2.0 General Premises Details

2.1 Number of floors:

Hub - 2 storeys with roof garden.
Block A, Redwood is 5 storeys approximately 12.9 m top floor height.
Block B, Cedar is 8 storeys approximately 22.5 m top floor height.
Block C, Hawthorn is 6 storeys approximately 16.1 m top floor height.
Block D, Oak is 4 storeys approximately 9.7 m top floor height.

2.2 Approximate building footprint:

The overall site covers approximately 3500m^2

2.3 Details of Construction and Premises:

Village 135 is an extra care sheltered residential development consisting of two sites on either side of Hollyhedge Road, Wythenshawe, joined by a footbridge at second-floor level. The development consists of four blocks of accommodation and a community Hub between the two sites.

At the centre of the development is a double height ground floor communal Hub and roof garden linking two apartment blocks, A (Redwood) and B (Cedar). Block A consists of 31 apartments over five storeys and Block B with 50 apartments over eight storeys, with the ground floor containing plant rooms, landlords service areas and two guest apartments.

The linked site on the opposite side of Hollyhedge Road consists of two blocks, C (Hawthorn) and D (Oak) with C comprising 38 apartments over six storeys and block D with 16 apartments over four storeys.

The Hub is accessed by residents from neighbouring apartment blocks and members of the local community via the main entrance; it includes seating areas where light refreshments and meals can be served, community groups can meet and small events take place. A hair and beauty salon is located at one end of the Hub. Access by residents into the apartment blocks is controlled by access keys/fobs. The roof garden and other communal spaces are for residents access only.

Residents are housed in apartments incorporating their own cooking and sanitary facilities and have been designed specifically for persons who might require assistance, e.g. elderly people and where some form of assistance by 24 hours on-site care staff is available. The fire strategy for the residential parts is based on a stay safe (defend in place with additional 24 hour staff response) strategy with the Hub and common parts a simultaneous evacuation strategy with the fire alarms and staff procedures configured accordingly.

Surrounded by gardens and lawns to the side and rear of each site is a car park. The buildings are fitted with comprehensive automatic fire detection and emergency lighting systems together with manual and automatic smoke ventilation systems and electronic door control and release devices.

The apartments accessed are all similar in layout with FD30s entrance doors on free swing automatic self-closing devices linked to the fire alarm. A heat detector is linked to the common system and provided in the hallway. Doors leading to habitable rooms are free swing FD20/30 fire doors and each flat is provided with a self-contained interlinked BS 5839 Pt. 6 smoke and heat alarms which are linked to the care call system and monitored 24 hours a day. Extract vents are provided in the bathrooms and kitchens which connect direct to atmosphere without traversing compartment walls/floors. The as-built plans indicate the layout of all flats is similar and it can be reasonably assumed the construction standard of 60 minutes fire resistance has been implemented due to recent passive fire surveys and remedial work by independent specialists.

The guest bedrooms have no cooking facilities with bathroom only provided.

2.4 Occupancy/Purpose Groups

The premises are classed as Purpose Group 2b Residential (other) as defined by Building Regulations Approved Document B 2006 Table D1.

2.5 Approximate maximum number of persons:

282.

2.6 Approximate maximum number of employees at any one time:

12 consisting of up to 6 care staff and 6 WCHG staff. At night a minimum of 3 care staff are present.

2.7 Maximum number of members of the public:

270 residents based on two per flat which is highly unlikely. Also resident's visitors.

2.8 Occupants at Special Risk:

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

Comments

It is not known if new tenants who occupy the flats have any disabilities but an assessment towards their ability to react to a fire within the premises is undertaken on taking up residence and regularly reviewed. Residents are encouraged to have a health and wellbeing check carried out by Greater Manchester Fire and Rescue community support staff.

Regular talks are provided for the residents which cover all aspects of the emergency procedures.

There are four guest apartments located on the ground floor, two in Cedar and two in Hawthorn. Each has a fire procedure posted within the apartment on the action to take on hearing the fire alarm. Permission is required to book the guest apartment and any person with a significant disability is likely to be identified and any relevant PEEP produced.

2.9 Fire Loss Experience

None.

3.0 Overall Risk Rating

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

Risk to Life: Tolerable.

There are a number of significant findings with an individual moderate risk rating however, given that the majority affects a particular area, the overall risk to life across V135 is considered 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 slight harm.

Risk to Property: Moderate

The recent information regarding the exterior cladding means a fire may spread further affecting more of the property and the overall risk to property is considered moderate. A substantial amount of remedial fire stopping and fire door upgrade work has taken place since initial construction and resolving the issue with the cladding will reduce the overall risk to property to tolerable.

Risk to Business Continuity: Tolerable

A business continuity plan is in place.

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

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

4.0 Dangerous, Flammable, Combustible Materials & Substances: Finding(s)	
Ref	**SIGNIFICANT FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
4.0	Residents identified as using medical oxygen within their apartment have a warning sign placed on entry to the apartment. 
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))	Yes
5.2	Where appropriate are they retreated with flame retardant chemicals (theatre curtain etc.) or made from inherently flame retardant materials?	N/A
5.3	Are all items located away from ignition sources?	Yes
5.4	Is all furniture in a good condition i.e. free from tears in covers, burns or discolouring from heat?	Yes

5.0 Interior Furnishings: Finding(s)	
Ref	**SIGNIFICANT FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
5.1	All soft furnishings in the common areas is relatively new and a sample of labels were observed indicating the furniture to be fire retardant.

6.0 Heating and Electrical Appliances		
6.1	Are portable or fixed heaters used?	Yes
6.2	Are all heaters fitted with suitable guards and located in positions away from combustible materials?	Yes
6.3	Are all heaters free from naked flames?	Yes
6.4	Has the use of safer alternatives been considered?	N/A
6.5	Are systems in place to ensure appliances are tested, repaired and maintained on a regular basis in accordance with the Electricity at Work Regulations, 1989?	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?	Yes
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?	N/A

6.0 Heating and Electrical Appliances: Finding(s)	
Ref	**SIGNIFICANT FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	Observation
6.5	The mobility scooter chargers in both scooter store rooms do not have labels indicating they are subject to a periodic PAT test. Regular electrical checks on the equipment will identify any potential problems and reduce the risk of a fault that may lead to ignition.
	Recommended Actions
6.5	It is recommended that the mobility scooter charges are included in the periodic PAT test. Residents should be given advanced warning to ensure their equipment is available for test.
Ref	**COMMENTARY**
6.1	The building is provided with biomass heated hot water central heating.
6.5	Portable electric appliances in the Hub and communal rooms have been tested in April 2019.
6.6	The main electrical installation will be due for re-test in 2021 and the residential apartments in 2026.
6.7	There is a policy in place preventing the use of personal portable electrical equipment within the common areas. One piece of equipment authorised for use (karaoke machine) has undergone a PAT test.
6.10-6.11	It is assumed appliances are fitted with the correct fuses as they are relatively new. The site manager is available to deal with any localised failure of portable equipment.
6.18	Kitchen staff previously confirmed the kitchen filters are regularly removed and cleaned.
6.20	The automatic opening ventilators for smoke control are serviced and tested by a specialist with records held by WCHG facilities department and were not observed by our consultant.
6.21	Lightning protection systems are serviced periodically. Records are held electronically on internal systems.

7.0 Persons at Risk Audit		
7.1	Does the actual occupancy of the premises/building conform with the occupancy figures contained in the relevant guide for the type of premises/purpose group?	Yes
7.2	Are the management/responsible person(s) aware of the occupancy restrictions for all rooms within the premises? i.e. function rooms, bars, conference facilities	No
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?	Yes
7.6	Are disabled refuges provided?	Yes
7.7	Are members of staff trained in the evacuation of disabled or mobility impaired persons?	Yes
7.8	Are fire evacuation drills conducted at least annually, taking into account all employees, shift and casual workers, visitors and contractors where appropriate?	Yes
7.9	Are the results recorded? (People involved, time taken, learning outcomes).	Yes
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.).	Yes

7.0 Persons at Risk Audit: Finding(s)	
Ref	**SIGNIFICANT FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
7.2	From the original fire strategy report, the occupancy of the communal Hub space is based on a floor space factor of 1.5 m² per person. However the initial proposal for the kitchen serving this area is designed for up to 100 persons. Based on the floor space and the 1.5 m² per person, the Hub is considered to safely accommodate up to 280 persons depending on furniture layout. All normal and emergency exits should remain clear of obstructions for their full width.
7.5	Residents are constantly monitored by staff and undergo a well-being check when necessary and at periodic intervals. During the well-being check any issues regarding the mobility or capacity to respond to the emergency procedures are assessed and PEEPs formulated where necessary. In identifying any vulnerable persons in case of fire, a Person Centred Fire Risk Assessment is carried out and risk reduction measures implemented where necessary.
7.6-7.7	A number of "Evacuation chairs" have been provided and strategically placed in escape stairs where disabled refuges are located. The location of the nearest two evacuation chairs is displayed by the communications point in each disabled refuge not provided with an evacuation chair as previously recommended.
7.8-7.9	Previously recommended, a fire drill has taken place on 19/07/2018 of the common areas to ensure staff are fully conversant with their duties. A fire alarm occurred during this fire risk assessment and a partial evacuation was observed by our consultant with staff carrying out their designated duties to resolve the alarm in a controlled manner. All staff should be kept familiar with the fire alarm and evacuation procedures and an annual drill is recommended.
7.10-7.11	Public, visitors & contractors are required to sign in.
7.12	Restricted areas are kept locked.
7.14	Two guest rooms are provided on each of the ground floors of blocks B and C.

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.	Yes
8.7	Do any inner rooms exist?	Yes
8.8	Are vision panels provided between the inner room & access room and is it adequate?	Yes
8.9	If the vision between the inner room and the access room is inadequate is smoke detection provided within the access room?	Yes
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	Yes
8.19	Do entry control devices conform to the category of actuation for the purpose group that the particular premises/building currently operates within?	Yes
8.20	Is the emergency operation of the door lock stated by appropriate signage?	Yes
8.21	Have all persons in the assessment area received instructions on how the devices operate in the event of an emergency?	Yes

8.0 Escape: Finding(s)	
Ref	**SIGNIFICANT FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
8.5	The roof garden was observed to be unlocked and keys are provided on hooks by each entrance door. The procedure when opening the garden is to unlock both doors of the garden to provide alternative exits. Albeit not essential as there is a substantial distance between the escape routes within the open air and any fire is highly unlikely to present a significant risk to persons on the roof garden. The correct keys were observed, as with the last review, to be in position by each door.
8.6	The corridors and escape routes were observed free from obstructions and unauthorised combustible materials, and a very high standard of housekeeping is being maintained.
8.11	A weekly means of escape check is carried out and recorded. Domestic and maintenance staff are moving around the common areas throughout each day and any issues are dealt with immediately.

9.0 The Confinement of Fire

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

9.0 The Confinement of Fire: Finding(s)	
Ref	**SIGNIFICANT FINDINGS**
	Observation
9.2	The following fire door defects are identified for remedial action: • Block B Cedar, the 5th floor cross corridor door is catching on the carpet and not closing when the hold open device is released. • Block C Hawthorn, the 5th floor lift lobby door is catching on the carpet and not closing when the hold open device is released. Fire doors that do not close on activation of the fire alarm may allow smoke to spread throughout the escape route placing relevant persons at risk of harm.
	Recommended Actions
9.2	Doors that have had remedial work to close the threshold gap which are obstructed from closing by the floor covering or uneven floor should be adjusted. Where a timber piece has been added to the bottom of the door simply planing the bottom of the door may create an unsuitable threshold gap and a mechanical "drop-down" threshold seal should be considered to allow for uneven floor levels.
	Observation
9.3	The following fire doors were observed to have defects to the intumescent strips and smoke seals or the seals appeared ineffective in preventing smoke and fire spread: Redwood (Block A) • none identified as defective. Cedar (Block B) • 5th floor lift lobby door, the flexible edge smoke seal is deteriorating. Hawthorn (Block C) • None identified as defective. Oak (Block D) • None identified as defective. In the event of an outbreak of fire, it may not be contained to the compartment of origin and spread beyond the doors placing persons at risk of harm.
	Recommended Actions
9.3	Replace the seals listed, where necessary fit a suitably sized smoke seal fitted to seal the gap whilst not hampering the doors from closing fully under the action of the self-closing device. See commentary 9.3 regarding fire doors.
Ref	**RECOMMENDATIONS**
	None.

Ref	COMMENTARY
9.0	Previously identified, a significant number of fire doors had excessive threshold gaps which have been rectified in a number of ways. A timber strip added to the base of the door, a threshold floor plate or timber strip (on locked cupboards) fixed to the floor covering or a mechanical "drop-down" threshold seal has been fitted according to the size of the gap found.
9.1	The 600 mm x 600 mm steel access hatches provided on the upper floors to block B Cedar to access the kitchen flue extract have been sealed as previously recommended. The type of mastic sealant used was not confirmed by our consultant and is assumed to be the correct fire resisting type based on the recommendations made and previous fire stopping work carried out.
9.1-9.3	It is important that a doorsets' fire resistance performance is measured and is routinely and professionally assessed, LGA guidance recommends inspecting fire doors every 6 months as part of a programme of planned preventive maintenance. These inspections are aimed at identifying defects such as: • missing or ineffective self-closing devices and door seals • damaged doors or frames or incorrect repairs • removal of locks/fittings without suitable repairs to the integrity of the doors • poorly fitting doors caused by distortion or shrinkage, or because of wear and tear • newly fitted, but inappropriate, door furniture • doors which have been replaced using non-fire-resisting types. Flat entrance doors should be included in this programme. Where leasehold flats are involved, this will only be possible if there is the legal right of access, by means of a condition within the lease to carry this out. It is recommended that any new leases include such a condition. Where defects are reported, it is important that action is taken within an appropriate timescale and that they are not simply left to the next six-monthly inspection. The responsible person should arrange to replace flat entrance doorsets if they have concerns that they do not meet the fire or smoke resistance performance in current guidance. Concerns with performance may be triggered by a few factors including lack of test evidence, evidence of sub-standard performance in testing, visual damage, wear and tear, the age of the door, or significant findings in the fire risk assessment etc 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 Article 8 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to take general fire precautions to ensure the safety of relevant persons.
9.2	The inner doors to the refuse room on the ground floor of Redwood, Cedar and Hawthorn were latching and closing fully against the rebate as previously recommended.
9.2	Apartment 124 in Oak was previously identified with a roll of paper tissue wedging the door from closing. Staff were made aware of this issue and the door is left in the open position to allow easy access and egress for the disabled resident. This is considered suitable because the door is controlled by a free-swing self-closing device and on activation of the automatic fire warning system the door will automatically close. Should the occupant require assistance, the procedure is for care staff to respond and assist without taking personal risk.
9.5	During the previous fire risk assessment reviews, deficiencies were found in the fire resisting construction. A passive fire protection survey had been undertaken by specialist contractors and some remedial works undertaken as recommended. Further recommendations were made and the main contractor, Galliford Try commissioned an independent passive fire protection survey of all the blocks. At the time of the previous fire risk assessment review, the independent passive fire protection inspector from Exova had carried out a follow up to check that all fire stopping had been carried out to a suitable standard. Further inspections have been carried out to confirm the identified breaches have been suitably fire stopped by specialist contractors. The certification for the fire protection work has been provided to the Responsible Person.
9.5	The void above the suspended ceiling in the 7th floor Cedar lift lobby was observed and the cable previously identified has been suitably fire stopped. 
9.7	It was previously confirmed that the Building Regulations completion certificate has been issued and is included within the building information pack (CDs)

9.13	Following the issuing of MHCLG advice notes regarding assessment of material other than ACM cladding panels installed on the external face of the building, WCHG has received a report from a fire engineer advising that aspects of the façade on Blocks A and B are unlikely to comply with Building Regulations. One concern is that should a fire occur and that fire breaks out of the room/area of origin via the window/door and spreads to these external panels, it may travel up or along the external face of block A or B in the area the panels are located and possibly spread back into the premises by damaging those panels or through open or damaged windows placing occupants remote from the initial fire at risk of harm. Following a meeting with Fire and Rescue Service representatives, who were generally comfortable with the current arrangements in terms of staff coverage, alarm configuration and evacuation strategy, interim measures etc were not recommended. Advise was given that a fire risk assessment review should consider any recommendations on appropriate action or changes required. Village 135 is unlike a high rise residential tower block in that staff are present 24 hours a day. A comprehensive fire detection and warning system linked to staff handsets and an off-site alarm receiving centre (ARC) is installed throughout which provides an immediate indication for staff to respond in accordance with the fire strategy. On activation of the fire warning system, staff are alerted on their DECT phone and respond to investigate. On confirmation of a fire, a backup call (in addition from the ARC) is made to the fire service and evacuation of the affected zone commences. It could not be confirmed if the whole block evacuation signal could be triggered manually in block A and B, see Significant Finding 10.10. By initiating a full evacuation of the block A or B on confirmation of a fire is likely to reduce the risk to occupants from a fire spreading externally. Due to the layout and construction of each block (A & B) unless the central Hub and associated compartments are involved in fire it is unlikely the facades of blocks A and B would become involved in fire spread in the early stages of a fire and not before the arrival of significant fire service resources. Therefore during a whole block evacuation, it is reasonable to assume the Stay Put (stay safe) advice be continued for the unaffected blocks. (A, C and D or B, C and D) A considerable amount of remediation work to the fire-resisting construction, fire stopping to services and fire resisting doors, means an outbreak of fire is likely to be contained within the compartment of origin protecting internal escape routes until the arrival of the Fire and Rescue Service. The external face of the building is not 100% covered with cladding materials and in the unlikely event of the external face becoming involved in fire, an evacuation of that zone is highly likely to have commenced moving all persons in the affected zone initially to a place of relative safety and then on to ultimate safety away from the danger area. Therefore, subject to the outcome from Significant Finding 10.10, from a life safety perspective, the fire risk to relevant persons is not considered to present a significant risk under the current fire strategy.
9.14	The bin compound to the apartments is a secure area. All waste sites are regularly cleared with lockable bin stores used. All waste is collected on a weekly basis. The area is monitored with CCTV and weekly inspections undertaken by the Site Officer.

10.0 Fire Alarm System

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

10.0 Fire Alarm System: Finding(s)

Ref	SIGNIFICANT FINDINGS
	Observation
10.10	The current fire alarm cause and effect documentation was not observed by our consultant and whether any changes have been implemented since the original cause and effect was issued. A limited time (5 minutes) is allowed for investigation with the off site alarm receiving centre alerted to call the fire service on time out or lost communication. It is understood that on confirmation of a fire or any doubt, an evacuation of the affected zone commences (presumably the corridor of the affected block and any associated common area) On confirmation of a fire and due to the risk of potential external fire spread, it may be prudent to initiate a whole block fire evacuation in the affected block, either block A or block B to reduce the risk of harm. The facility by on duty staff to initiate a whole block evacuation was not confirmed.
	Recommended Actions
10.10	Confirm manually activating the fire alarm in a particular block (either Block A or Block B) initiates the full evacuation of the respective block. Where necessary contact the competent fire alarm engineer to arrange such a facility and to provide a suitable aid memoir adjacent to the panel for nominated staff to refer to when initiating an evacuation from the panel. Any amendment to the current staff fire procedures should be disseminated to all staff and confirmation obtained that all staff are fully conversant with the procedure and any specific duties assigned to them. The "Stay Safe" advice provided to the residents for incidents remote from the block they are in remains but should be supplemented with what to do if they hear the fire alarm in the block they are in.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
10.2	The system installed within each apartment appears to conform to BS 5839 Part 6; 2013 to at least Grade C category LD 2 standard with a heat detector located in the kitchen and a smoke alarm in the hallway of each flat. The system is linked to the "Dect" care call phones with each member of care staff carrying a receiver and call point in the reception/ office. A fully addressable BS 5839 part 1 fire detection and warning system is installed within the common areas with a linked heat detector located in the hallway of each flat. With the exception of the protected corridors, the automatic fire detection and warning system installed in the common areas sounds an alarm to initiate a simultaneous evacuation of all common areas following a short delay (5 minutes) to carry out an investigation. On activation of a second detector or manual call point, the alarm is raised in the common areas of the affected zone. This fire risk assessment review should be read in conjunction with the Cause and Effect provided as part of the completed building information and fire strategy.
10.10	Article 13 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to ensure the premises are, to the extent appropriate equipped with appropriate fire detection and alarms.
10.12-10.14	Fire alarm maintenance procedures are in place with regular weekly tests carried out and recorded in the fire log book. All staff take part in the fire alarm tests on a rotational basis to ensure familiarity with interpreting and operating the fire control panels and Dect phone system.

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 Table 9)	Yes
11.3	Does it illuminate escape routes, exits, corridors, hazards or obstructions, changes in floor level, signs, fire alarm call points and firefighting equipment?	Yes
11.4	Is the emergency lighting beyond the final exit adequate so that persons can reach a place of safety?	Yes
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**
11.5	Emergency lighting maintenance procedures are in place and periodic tests of the system are carried out and recorded.

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.)	No
12.7	Are all systems fully operational and under a maintenance programme?	N/A
12.8	Are all security devices functional? (Sprinkler valves, wet & dry rising mains padlocked etc.)	N/A
12.9	Where sprinklers are fitted are all heads clear of obstructions (500mm clear of stock) and functional?	N/A
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
12.5	A number of portable fire extinguishers (listed below) located in locked areas appear to have been missed on the last annual service. The date indicating the last service is recorded as 2/18 on each extinguisher. Fire equipment that is not serviced and tested as recommended may not be relied upon in time of an emergency and may place the operator at risk of harm. • A/C plant room in block A. • Main electrical room on the ground floor of block B • Main electrical room on the ground floor of block C. • The refuse room on the ground floor of block C.
	Recommended Actions
12.5	Arrange for the extinguishers listed to be serviced by a competent person and the service records updated.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
12.3	Portable firefighting equipment would not be generally sited in the corridors to flats as this may pose a risk to residents leaving their flat on fire and returning with a fire extinguisher placing them at increased risk where not trained. However, the premises are staffed 24 hours a day with staff responding to any fire alarm and the availability of fire equipment is considered suitable.
12.5	Firefighting equipment is regularly serviced with the latest date of February 2019 indicated on each device which forms the basis for the annual servicing schedule. Weekly checks on the equipment are carried out by the building manager.
12.5	Article 17 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to provide a suitable system of maintenance for any facilities, equipment and devices so that they are maintained in good working order.
12.10	Dry risers are provided.

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

13.0 Fire Safety Signs and Notices: Finding(s)	
Ref	**SIGNIFICANT FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
13.10	The door to central store was observed to be kept locked with signs fixed as previously recommended. An electromagnetic lock has been fitted with suitable emergency override on the escape side of the door.

14.0 General Fire Safety Procedures		
14.1	Has the premises been free from reports of any fire related incidents within the past 12 months?	Yes
14.2	Has action been taken to avoid reoccurrence?	N/A
14.3	Has the premises been free of any fire alarm actuations within the past 12 months?	No
14.4	Where necessary has any action been taken to prevent reoccurrence?	Yes
14.5	Have there been any incidents of deliberate ignition by employees or arson attacks?	No
14.6	Do all staff understand the need to report any potential fire hazards?	Yes
14.7	Has a person(s) been given the overall responsibility for fire safety related matters and management?	Yes
14.8	Have the fire service inspected the premises within the last 12 months?	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**
14.1, 14.4	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, the Fire Risk Assessment should be reviewed to identify if any further risk reduction measures are necessary.
14.3	False alarms have occurred within apartments due to cooking and residents informed of the measures to reduce the occurrence of false alarms. Due to the staff investigation procedures in place there has been no escalation and the fire service have not been unnecessarily called. During the fire risk assessment review a false alarm occurred in block B due to a person mistakenly pressing the manual call point next to an exit with door release controls. The cause was quickly identified by staff, a partial evacuation of the block took place and the alarm silenced and reset in accordance with the laid down procedures.
14.7	The WCHG Housing Manager is the nominated person on-site responsible for ensuring the fire precautions are implemented and managed correctly on behalf of WCHG who has the overall responsibility.
14.8	The local Fire and Rescue Service have visited on a number of occasions to carry out familiarisation visits for the gathering of operational information, community visits to advise residents on home fire safety and fire protection officers have visited to advise on any requirements following the Grenfell tower block fire.

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

15.0 Fire Safety Management: Finding(s)	
Ref	**SIGNIFICANT FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
15.1	Competent contractors and staff are employed to maintain and manage the fire protection and fire prevention systems.
15.2-15.4	All staff have recently received fire marshal training with a record maintained on their personal file. Records of fire marshal training were not observed.
15.5-15.6	Previously confirmed, all approved contractors are provided as part of the service level agreement and are expected to have been vetted to satisfy these requirements. Any work carried out by contractors that affects the fire compartmentation for the installation of cables and pipework is carried out by approved contractors who are instructed to provided before and after photos along with the methods and materials used to fire stop any holes on completion. An example of photos on an email (Texon) of recent cabling work was observed by our consultant and appeared to be a satisfactory standard.
15.12-15.13	The Village development is predominantly made up of sheltered accommodation apartments and is designed with a high degree of compartmentation to prevent the spread of fire. The evacuation strategy is split into two strategies depending on the location of an outbreak of fire; initially horizontal evacuation on an affected floor with a defend in place "stay safe" strategy for residents in apartments of unaffected blocks who are advised that they may stay if not affected but may also leave if they feel at risk, and a simultaneous evacuation strategy for an outbreak of fire in the common parts and in either block A or B on confirmation of a fire.

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?	Yes

16.0 Fire Emergency Plan: Finding(s)	
Ref	**SIGNIFICANT FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
16.1-16.3	The premises were constructed as purpose built flats with Building Regulations approval. They incorporate compartmentation between each flat and between the flats and the escape route and this supports a stay put policy in the unaffected blocks. An example fire emergency plan is enclosed. The hub and common parts operates a simultaneous evacuation strategy with the fire alarms and staff procedures configured accordingly. An example fire action notice is provided for these areas also. It is recommended that on confirmation of a fire in block A or B, that a full evacuation of the affected block is initiated due to issues with the external cladding. 24 hours support is provided with night care staff on duty. In the event of an alarm within an apartment a signal is transmitted on the care call system and relayed to the DECT phones the staff are issued with to allow a response to be made.

Fire Emergency Plan: General
On confirming that a fire exists raise the alarm, by operating the nearest fire alarm call point
Ensure the fire service is summoned by dialling 999 stating Fire at:
Village 135, 3 Hollyhedge Court Road, Wythenshawe, Manchester, M22 4GW
All persons should move quickly and calmly to the nearest exit.
Only fight the fire if it is small (no more that the size of a waste paper bin) AND if trained and it is safe to do so, with the appropriate fire extinguisher. If the fire is larger than a waste paper bin close the door to the fire.
Persons **must not place themselves at risk.**
Close all doors behind you to contain the fire and prevent the spread of smoke and toxic fumes.
Proceed to your designated assembly point or well clear of the building and away from any approach road likely to be used by emergency vehicles.
Ensure a roll call of all members of your department is taken to establish if all persons are accounted for.
Liaise with the fire service officer on arrival, giving details of number of persons unaccounted for, the location and extent of the fire.
Do not re-enter the building until authorised to do so by a Fire Service Officer.

TOTAL FIRE GROUP

Fire Emergency Plan FLATS

FULL EVACUATION

GENERAL ADVICE TO RESIDENTS

The evacuation plan for this building requires all residents to proceed to the assembly point when the communal fire detection and alarm system sounds. (IF FITTED) or a fire is discovered in the building.

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.
- Raise the alarm by using a 'break glass' call point. (IF FITTED)
- Alert your neighbours IF SAFE TO DO SO
- CALL THE FIRE SERVICE.

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

- You must also leave IMMEDIATELY if smoke or heat affects your home, or if you are told to do so by the fire service.
- If you are in any doubt, get out.

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:

Village 135, 3 Hollyhedge Court Road, Wythenshawe, Manchester, M22 4GW

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 two months or longer.
Examples include:	Firefighting equipment missing or defective, minor defects to the fire alarm or emergency lighting systems.
Priority 3 (P3)	Poor practices or features that whilst not presenting a serious risk would detract from the overall impact on the fire safety provisions within the premises. Also includes provision or practices and features that are preferable over and above the minimum standards required under the Fire Safety Order. Time scales are variable. The acts or omissions would normally be tolerable but actions should still be implemented to reduce the risk level to a negligible level.
Examples include:	Logbooks not completed or up to date, fire extinguishers not wall mounted.

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

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

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

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

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

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

parameters:

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

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

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

FIRE RISK RATING MATRIX

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

18.0 Summary of Findings

FRA Ref	Hazard or Defect	Action Required	Hazard Priority	Risk Rating	Action By	Review Date	Contractor Completed
9.2	Fire door defects are identified for remedial action.	Where a timber piece has been added to the bottom of the door simply planing the bottom of the door may create an unsuitable threshold gap and a mechanical "drop-down" threshold seal should be considered to allow for uneven floor levels.	P2	Moderate	Mike Richmond		
9.3	One fire door was observed to have defects to the intumescent strips and smoke seals.	Replace the seals listed.	P2	Moderate	Pete Burke		
10.10	The facility by on-duty staff to initiate a whole block evacuation was not confirmed, however this may be achieved by activating a manual call point.	Confirm manually activating the fire alarm in a particular block (either Block A or Block B) initiates the full evacuation of the respective block. See full recommendation.	P1	Moderate	Tom Jones		
12.5	A number of portable fire extinguishers located in locked areas appear to have been missed on the last annual service.	Arrange for the extinguishers listed to be serviced by a competent person and the service records updated.	P2	Moderate	Jayne Russell		

19.0 Recommendations

FRA Ref	Observation	Recommended Action	Risk Rating	Contractor Completed
6.5	The mobility scooter chargers in both scooter store rooms do not have labels indicating they are subject to a periodic PAT test.	It is recommended that the mobility scooter charges are included in the periodic PAT test. Residents should be given advanced warning to ensure their equipment is available for test.	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
7.8-7.9	All staff should be kept familiar with the fire alarm and evacuation procedures and an annual drill is recommended.	Where the evacuation procedures are initiated as a drill or a false alarm, whether partial or full zone, a fire drill record should be made of the staff involved, the approximate number of persons evacuating and any issues or learning points discovered during the evacuation.	Tolerable	
9.2	Apartment 124 in Oak is left in the open position to allow easy access and egress for the disabled resident. This is considered suitable because the door is controlled by a free-swing self-closing device.	Ensure that all staff are aware of the importance of ensuring that no obstructions are placed in the way of the swing of the fire door to prevent it from closing on activation of the fire alarm.	Moderate	