



# TOTAL FIRE GROUP LTD

## Fire Risk Assessment

Conducted at:

Village 135  
3 Hollyhedge Court Road  
Wythenshawe  
Manchester  
M22 4GW



08 February 2022



Certificate Number	LS	0224230
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Life Safety Fire Risk Assessment  
Silver Approved Scheme  
CERTIFICATE OF CONFORMITY



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

SCHEDULE		
Part 1	<b>NSI Life Safety Fire Risk Assessment Silver Approved Organisation</b>	
	Total Fire Group Ltd	
	<b>BAFE Registration Number</b>	
	NSI 00330	
Part 2	<b>Name of Client</b>	
	Wythenshawe Community Housing Group Limited	
Part 3	<b>Address of premises for which the fire risk assessment was carried out</b>	
	Village 135, 3 Hollyhedge Court Road, Wythenshawe, Manchester, M22 4GW	
	<b>Part or parts of the premises to which the fire risk assessment applies</b>	
	The common parts and communal areas only.	
Part 4	<b>Brief description of the scope and purpose of the fire risk assessment</b>	
	In compliance with Article 9(1) of the RRFSA 2005.	
Part 5	<b>Effective date of the fire risk assessment</b>	08/02/2022
Part 6	<b>Recommended date for review of the fire risk assessment</b>	08/02/2023

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.

<b>Signed (for and on behalf of the issuing Approved organisation)</b>	
<b>Job Title</b>	Senior Fire Safety Consultant
<b>Date</b>	

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.
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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.
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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

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 **Tuesday, 8 February 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.

## Part 2: References and Methodology Index

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

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

## Part 2: References and Methodology Index continued

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

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

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

**and relates only to the premises of:**

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

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## 1.0 Fire Risk Assessment Details

**Responsible person(s):**

Wythenshawe Community Housing Group (WCHG) as owner and as having overall control within the premises.

**Person(s) consulted and landline contact number:**

Ms Amanda Seals, (Senior Manager.) 0161 946 9581  
Neil Summerton (Building Consultant for WCHG)

**Fire Risk Assessor:**

David Hilliard GFireE, FS Dip L4. MIFSM, Tier 3 Nationally Accredited Fire Risk Assessor 0266

**Audited by:**

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

**Date fire risk assessment was conducted:**

Tuesday, 8 February 2022

**Time:**

10:00

**Date of last FRA or FRA Review (if known)**

22 Feb 2021

**Suggested date for next review:**

February 2023

**Fire risk assessment limitations:**

A type 3 (Non-Destructive) Fire Risk Assessment (using the latest NFCC guidance document Fire Safety in Specialised Housing,) has been completed with access available to Flats 10, 23, 78, 118, 127, 130 & all four Guest Rooms. Only Flat 130 was occupied at the time of this FRA. The MHCLG guidance has also been considered.

There was no access to any loft space or roof void. The premises have flat roofs and for the purpose of this inspection, it was advised that there are no accessible roof spaces. There was no access to the ceiling hatches at the top of the staircases as these were locked and no key was available. Many false ceiling tiles throughout the premises common parts were lifted to assess the compartmentation above. There was no lift motor room to access as the motors are housed in the lift shafts. With the exception of Hawthorn Block, all plant rooms, mains electrical intake rooms and ancillary service rooms that were identified, were opened and seen. A selection of service risers were also opened and seen. Both the mobility scooter rooms located in blocks A and D were accessed. The building and project consultant for WCHG accompanied our assessor during the course of his visit and provided access.

The assessment of the fire performance of the external wall construction and any 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. The consultant has followed Fire Industry Association (FIA) Guidance note of June 2020. It must also be noted that extensive surveys have already been conducted on the external wall systems by TENOS, accredited fire engineers and the reports submitted to WCHG.

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

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

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

#### **Note**

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

## 2.0 General Premises Details

### 2.1 Number of floors:

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:

Blocks A & B (Redwood and Cedar) 2300m<sup>2</sup>

Blocks C & D (Oak and Hawthorn) 1300m<sup>2</sup>

Total area of site = 3600m<sup>2</sup>

### 2.3 Details of Construction and Premises:

Village 135 is extra care sheltered residential development consisting of two sites on either side of Hollyhedge Road, Wythenshawe, joined by a footbridge at the 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 original "stay put" fire strategy was revoked and changed to simultaneous evacuation on a block by block basis as an interim measure due to non-compliant cladding systems 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 auto 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 and sounder is linked to the common fire alarm system and provided in the hallway. Doors leading to the habitable rooms in the apartments are free swing FD20/30 fire doors and each flat is provided with self-contained interlinked BS 5839, Pt. 6 smoke and heat detector / alarms, which are linked to the care call system and monitored 24 hours a day. Extraction vents are provided in the bathrooms and kitchens which connect directly to the outside atmosphere without traversing compartment walls or floors. The as-built plans previously seen indicate the layout of all flats is similar and it can be reasonably assumed that the construction standard of 60 minutes fire resistance has been implemented, due to the recent passive fire surveys and remedial works carried out by independent specialists.

The guest bedrooms have no cooking facilities with bathrooms only provided. It was seen and stated that a sprinkler system has been approved for installation that complies with BS 9251 and the retro fitting has begun in some empty apartments, so as to provide an example of workmanship.

**2.4 Occupancy/Purpose Groups**

The premises are classed as Purpose Group 2b Residential (other) as defined by Building Regulations Approved Document B 2019 (amended 2020)

**2.5 Approximate maximum number of persons:**

282 (Residents and staff)

270 (Residents in 135 two bed apartments.)

**2.6 Approximate maximum number of employees at any one time:**

12 Consisting of up to 6 Premier Care staff and 6 WCHG staff.

At night a minimum of 2 Premier Care and 1 WCHG staff are present.

**2.7 Maximum number of members of the public:**

135 (Based on 1 visitor per apartment.)

## 2.8 Occupants at Special Risk:

<b><i>Sleeping occupants</i></b>	
Persons familiar with the premises	Yes
Persons unfamiliar with the premises	Yes
<b><i>Occupants with disabilities</i></b>	
Mobility-impaired	Yes
Hearing-impaired	Yes
Learning difficulties	Yes
Occupants in remote areas	No
Others	Yes
<b>Comments</b>	
<p>The premises is a sheltered housing / extra care scheme and it is possible that the 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. Current guidance on required fire safety standards in sheltered housing / extra care schemes are detailed in the NFCC Fire Safety in Specialised Housing Guide, which indicates in Part B Key Points that the recommendations in the guide for sheltered / extra care schemes are based on the assumption that normally residents are able to escape unaided from their own flats and can make their way unaided to a place of safety, using the common means of escape. However, it was stated that there are some residents who require assistance to evacuate, but 24 hour care staff are aware of these residents and are fully practiced in the emergency evacuation procedures which are in place. Appropriate PEEPs have been formulated for these residents.</p> <p>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 when first 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.</p> <p>Regular talks are provided for the residents which cover all aspects of the emergency procedures.</p> <p>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 are likely to be identified and any relevant PEEPs produced.</p> <p>Note; The previous MHCLG guidance for residential buildings below 18m highlights the risk of external fire spread, should be considered to take into account the vulnerability of residents. Remedial actions may be required in buildings below 18m previously considered compliant under the Building Regulations where there is a risk to the health and safety of residents. See the significant finding at Section 9.13.</p>	

## 2.9 Fire Loss Experience

None reported or evidence seen.

### 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.**

Generally, the fire safety standards within the premises are good and the building has a good standard of fire alarm and automatic detection in the common areas and apartments. There is more than one direction of travel from most points within the building to a place of safety and entry to the building is controlled. However, there are some findings and recommendations mentioned in this report that require attention and therefore, the overall risk to life is considered to be moderate at this present time.

It was also reported that some of the residents would not be able to self evacuate from their own dwelling without assistance from carers and therefore, the risk to life for that / those residents is considered to be substantial, where a fire is involved within their own apartments.

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: Moderate**

A fire should normally be able to be confined to its room / flat of origin until the arrival of the fire and rescue service. The recent information provided regarding the exterior cladding means a fire may be able to spread further than necessary and affect more of the property than normal, as such, the overall risk to the property is considered as moderate. A substantial amount of remedial fire stopping and fire door upgrade work has taken place since the initial construction phase and resolving the current issues mentioned in this assessment, along with the exterior cladding changes will reduce the overall risk for the property to tolerable.

**Risk to Business Continuity:**

N/A

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

## 4.0 Dangerous, Flammable, Combustible Materials & Substances

### IDENTIFYING THE FIRE HAZARDS

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

## 4.0 Dangerous, Flammable, Combustible Materials & Substances: Finding(s)

Ref	SIGNIFICANT FINDINGS
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None.

Ref	RECOMMENDATIONS
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None.

Ref	COMMENTARY
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4.0 Residents identified as using medical oxygen within their apartment have a warning sign placed on the entry door to the apartment. This information regarding medical Oxygen users is also held on an information sheet for any attending fire crews attention.



4.1-4.2 Questions 4.1 to 4.2 relate to substances and materials which are subject to the "Dangerous Substances and Explosive Atmosphere Regulations 2002" (DSEAR). 4.3 to 4.10 relate to combustible materials. No substances or materials of significant quantities, falling into the above categories or regulations, were seen or are known to be stored or used inside the premises.

4.8-4.10 The refuse bins are stored at the ground floor level internally, within a fire separated bin room and with secure external access doors provided.

## 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
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None.

Ref	RECOMMENDATIONS
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None.

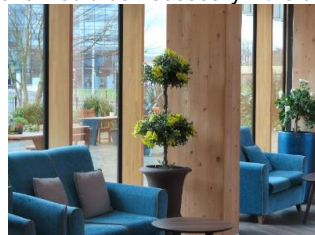
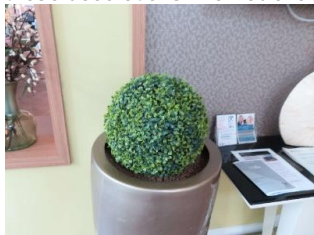
Ref	COMMENTARY
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5.1, 5.4 All soft furnishings and furniture seen in the common areas are relatively new and a sample of labels were observed indicating the furniture to be of a reputable fire retardant standard. All furniture seen was found to be in good condition and free from any rips and tears.



Upholstered chairs and occasional tables are located in lift lobbies which are separated from the protected escape corridors by self-closing fire-resisting doors and alternative exit routes are provided from the corridors. These chairs provided to assist residents while they wait for the lift or for transport. There were no obvious sources of ignition within the lift lobbies and the stairs are protected by AOVs and smoke detection.

5.2 Some artificial plants were seen in various locations, but it is believed that these are to a fire retardant standard and at the time of this FRA the building consultant for WCHG was making enquiries in order to confirm the suitability and flame retardancy of these decorations. Remedial actions would be necessary if the decorations were not to an approved standard.



WCHG should follow up the enquiry and confirm that the artificial decorations / plants are to an approved flame retardant standard.





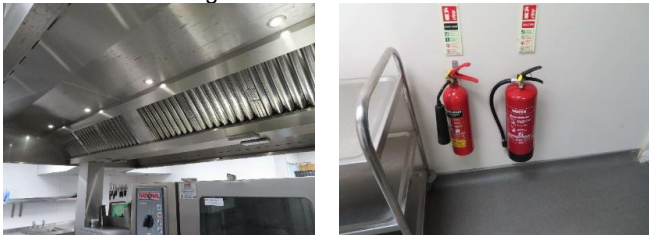

## 6.0 Heating and Electrical Appliances

<b>6.1</b>	Are portable or fixed heaters used?	Yes
<b>6.2</b>	Are all heaters fitted with suitable guards and located in positions away from combustible materials?	Yes
<b>6.3</b>	Are all heaters free from naked flames?	Yes
<b>6.4</b>	Has the use of safer alternatives been considered?	N/A
<b>6.5</b>	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
<b>6.6</b>	Has the premise's electrical system undergone electrical safety checks?	Yes
<b>6.7</b>	Is there a procedure to prevent the use of unauthorised portable appliances?	Yes
<b>6.8</b>	Is the ventilation of all appliances adequate?	Yes
<b>6.9</b>	Are all appliances turned off when the area is unoccupied?	Yes
<b>6.10</b>	Are all appliances protected by the correct fuse rating?	Yes
<b>6.11</b>	Are systems in place to isolate any appliance with a blown fuse?	Yes
<b>6.12</b>	Are all appliances free from visible signs of overheating?	Yes
<b>6.13</b>	Are multi-point adapters and extension leads kept to a minimum?	Yes
<b>6.14</b>	Are walkways or escape routes free from trailed cables?	Yes
<b>6.15</b>	Are cables free from mechanical damage?	Yes
<b>6.16</b>	Do signs indicate all electrical hazards?	Yes
<b>6.17</b>	Are reasonable measures taken to prevent fires as a result of cooking?	Yes
<b>6.18</b>	Are filters changed and ductwork cleaned regularly?	Yes
<b>6.19</b>	Are suitable extinguishing appliances available?	Yes
<b>6.20</b>	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
<b>6.21</b>	Do the premises have a lightning protection system? (where required)	Yes
<b>6.22</b>	Have other potential sources of heat not listed above been considered?	Yes

## 6.0 Heating and Electrical Appliances: Finding(s)

Ref	SIGNIFICANT FINDINGS
None.	

Ref	RECOMMENDATIONS
None.	

Ref	COMMENTARY
6.1	The building is provided with a biomass heated, hot water central heating system.
6.5	<p>It was noted that Portable Appliance Testing (PAT) is regularly carried out on an annual basis as organised by Wythenshawe Community Housing Group. Test labels on some appliances indicated testing was last carried out during April 2021.</p>  <p>It is highlighted that not all electrical devices need to be the subject of an annual portable appliance test (PAT). The Health and Safety Executive (HSE) advocates a proportionate, risk-based approach to the maintenance of portable electrical appliances within the workplace. This guidance is simple and easy to follow and can be found on the HSE website "Maintaining Portable Electrical Equipment in a low risk environment".</p>
6.5	The mobility scooter chargers in both scooter storerooms have labels indicating they are subject to a periodic PAT test as previously recommended.
6.6	<p>Mains electrical system testing is required and is included on a 5-year programme. All records are stored on the WCHG data systems. Evidence was seen that the mains electrical intakes had been tested and checked in accordance with BS 7671 by AB Building and Electrical Ltd during November 2021.</p> <p>A label within a flat indicated that the residential installations had been tested during November 2021, in accordance with BS 7671.</p> 
6.7	There is a policy in place preventing the use of personal portable electrical equipment within the common areas.
6.10-6.11	It is assumed appliances are fitted with the correct fuses as they are relatively new and have been PAT tested. The site manager is available to deal with any localised failure of portable equipment if required.
6.17-6.19	<p>Kitchen staff confirmed that the kitchen extraction filters are regularly removed and cleaned and that the extraction ductwork is routinely cleaned by a professional contractor on a scheduled basis. All aspects of the kitchen were clean and tidy and well maintained at the time of this FRA. Appropriate extinguishers were provided including a Wet Chemical Ext and Fire Blanket. Filters above the range in the commercial kitchen and wall mounted extinguishers.</p> 
6.20	The automatic opening ventilators (AOVs) for smoke control are serviced every six months and tested by a specialist contractor (Dyer Environmental Controls Ltd) with records held by WCHG facilities department. The vents are observed weekly during the alarm tests by the facilities team. This was previously confirmed by the scheme manager Amanda Seals. Evidence of testing and service was seen by our assessor. The AOVs were last serviced by Dyer during October 2021.
6.20	The washers and dryers in the communal laundries appeared to be clean and in good condition with clean filters at the time of this fire risk assessment.
6.21	<p>The lightning protection systems are maintained and serviced periodically by PTSG. Records are held electronically on WCHG internal systems.</p> <p>Lightning earth rod point and test label nearby.</p> 
6.22	At the time of this fire risk assessment, no other sources of heat, such as (e.g. candles, cigarettes or un-authorised domestic appliances,) were seen within the common areas.


### 7.0 Persons at Risk Audit

<b>7.1</b>	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
<b>7.2</b>	Are the management/responsible person(s) aware of the occupancy restrictions for all rooms within the premises? i.e. function rooms, bars, conference facilities	Yes
<b>7.3</b>	Have the requirements of the Equality Act 2010 (permanent or temporary disabilities) for ALL persons been assessed and complied with where reasonable?	Yes
<b>7.4</b>	Have all disabled staff members been consulted and where agreed PEEPs. been prepared?	N/A
<b>7.5</b>	Have standard PEEPs. been prepared where disabled members of the public or visitors may reasonably be expected to resort to the premises?	Yes
<b>7.6</b>	Are disabled refuges provided?	Yes
<b>7.7</b>	Are members of staff trained in the evacuation of disabled or mobility impaired persons?	Yes
<b>7.8</b>	Are fire evacuation drills conducted at least annually, taking into account all employees, shift and casual workers, visitors and contractors where appropriate?	Yes
<b>7.9</b>	Are the results recorded? (People involved, time taken, learning outcomes).	Yes
<b>7.10</b>	Is the access of relevant persons controlled at all times? i.e. are public, visitors & contractors required to sign in?	Yes
<b>7.11</b>	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
<b>7.12</b>	Are notices in place to inform of restricted access areas?	Yes
<b>7.13</b>	Are there designated fire marshals where appropriate for all areas to ensure all relevant persons are accounted for following an emergency?	Yes
<b>7.14</b>	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
7.0	This Fire Risk Assessment is provided as part of the duties imposed on the responsible person under the Fire Safety Order (FSO). The level of risk to an individual within their own flat in which the FSO is considered not to apply (except for certain exceptions) does not directly influence the overall risk to life for the parts covered by the FSO. Any risk identified to an individual should be reduced to as low as reasonably practicable. (ALARP)
7.0	<p>For Information; The individual resident's flats fall outside the scope of the fire safety order. Where vulnerable residents have been identified within their own home, it is recommended that Wythenshawe Community Housing Group identifies the extent of their legal obligations to each resident and where possible liaise with each of the resident's individual care provider, family and social services to ensure that a suitable 'care package' is provided which meets the resident's individual needs. It is difficult to be specific on each package since the resident may or may not agree to such care interventions in their own home. The local community fire safety department will also engage with vulnerable residents as part of their risk reduction strategies and can offer valuable advice and assistance in home safety.</p> <p>Where relevant persons are unable to self-evacuate the following areas should be considered:</p> <ul style="list-style-type: none"> <li>• Rehousing the residents to more suitable accommodation.</li> <li>• The provision of staff 24/7 to assist the residents to safety if required.</li> <li>• Removal of ignition sources, matches, lighters, candles, cooker, toaster etc.</li> <li>• Enforcing a no smoking policy within the residents dwelling.</li> <li>• Ensuring all electrical appliances are subject to PAT testing.</li> <li>• Provision of fire retardant furniture, bedding, curtains etc.</li> </ul> <p>As with private dwellings or individual flats in other social housing, the fire safety order was not envisaged to extend intrusively into private dwellings and impose unnecessary burdens on such providers of these dwellings.</p>
7.2	<p>From the original fire strategy report, the occupancy of the communal Hub space is based on a floor space factor of 1.5 m<sup>2</sup> 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 m<sup>2</sup> 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 any furniture or obstructions for their full width across the exits and on approach.</p>
7.4	There are currently no disabled staff members.
7.5	<p>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 (Personal Emergency Evacuation Plans) 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, prior to any PEEPs.</p> <p>A review of all PEEPs is made on a regular basis and updated where necessary.</p> <p>Further to the findings regarding the external wall cladding systems, staff have engaged with all residents to explain and confirmed the fire evacuation procedures. To reduce the risk of an outbreak of fire further, all personal electrical equipment has been subject to a PAT and all residents advised not to smoke in their apartments.</p>



- 7.5-7.8 Independent living sheltered housing is intended for people with a particular set of needs. While fire safety design in such buildings includes consideration of the implications of these needs for means of escape and other fire safety measures, it cannot cater for situations where due to changing circumstances a person is unable to respond to the fire warning system or self-evacuate. In circumstances where vulnerabilities are known or become apparent, Wythenshawe Community Housing Group should consider whether additional fire safety measures are necessary or if the existing measures are actually suitable for the residents.
- The primary tool for establishing relevant risk reduction measured for residents identified as vulnerable is via Person-Centred Fire Risk Assessment (PCFRA) as detailed in NFCC guidance Fire Safety in Specialised Housing. This should not be confused with a PEEP (Personal Emergency Escape Plan,) which may include the provision of some form of assistance to be alerted for escape.
- The guidance for independent living sheltered schemes is based on the assumption that residents are able to escape unaided from their own flat and can make their way to a place of safety using the common means of escape.
- Support plans and risk assessments should be completed when residents move in and reviewed periodically on a formal basis; additional fire safety measures can be implemented/recommended where necessary when identified during the assessment of a resident. Where necessary a home fire safety check by the local community fire safety officers may be arranged.
- Where residents are identified as vulnerable, NFCC guidance provides recommendations to housing providers for suitable risk reduction measures for vulnerable residents in their properties using the PCFRA. This guidance also provides advice on suitable additional fire protection facilities and gives advice on reducing the impact of fire in the flat/ building.
- The outcomes of the PCFRA will assist the Responsible Person to formulate an effective emergency plan for those premises.
- Following a PCFRA, the information should be made available to the Fire and Rescue Service on arrival at the premises by keeping it in a 'premises information box', which can only be unlocked by the Fire and Rescue Service or unlocked remotely by a Telecare ARC at the main entrance.
- The NFCC guide is available at the following link: <https://www.nationalfirechiefs.org.uk/News/nfcc-launches-specialised-housing-guidance>
- As an independent living environment, reliance on **"assistance" from the fire service to evacuate as part of the escape strategy cannot and should not be relied upon.** There may be unknown factors which could lead to a delay which would place persons expecting assistance to be placed at risk of harm especially in the absence of permanent staff.
- Regular reviews on the health and mobility of the residents should be carried out to determine their needs and whether they are able to respond to the fire alarm and self-evacuate. In the event of persons being assessed as "unable to evacuate without assistance" more enhanced fire protection measures, or utilising care staff to assist or suitable alternative accommodation in conjunction with family and social services ought to be obtained where their needs can be addressed. **Where enhanced evacuation procedures are implemented, staff should be suitably trained and procedures tested with trial evacuations to confirm the procedures are suitable with the available staff.** When a resident becomes so vulnerable in the event of a fire that they are no longer suited to this type of accommodation, it would be more appropriate that they are accommodated in a care home, where sufficiently trained staff can provide assistance in the event of a fire.
- 7.6-7.7 A number of "Evacuation chairs" have been provided and strategically placed in escape stairs where disabled refugees 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.
- Evacuation chair training for staff has been provided by an external provider.
- EVAC Chair at top of a staircase.
- 
- 7.7 It was noted that the care team have recently changed and are now provided by Premier Care. It was also confirmed that the care team are currently receiving appropriate training with regards to the evacuation procedures at Village 135, as stated by the office staff and the care team member present.
- 7.8-7.9 It was confirmed by the scheme manager that regular fire drills for staff are carried out periodically and recorded. However, no records of fire drills were observed by our consultant on this occasion.
- 7.10-7.11 Visitors and staff are required to sign in and fire safety information is available at reception in the main foyer area. Access for contractors is controlled by WCHG.
- 7.12 Restricted areas are kept locked at all times.
- 7.13 The WCHG scheme management on site previously stated that several members of staff have been trained as Fire Marshals, including some care team staff and that suitable procedures were in place to respond to a fire emergency. However, no Fire Marshal list was on display as all the trained staff are known to the management team.
- 7.14 Two guest rooms are provided on each of the ground floors of blocks B and C. Four guest rooms in total.

## 8.0 Escape

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




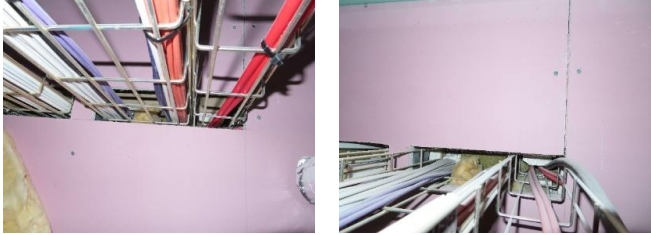
## 8.0 Escape: Finding(s)

Ref	SIGNIFICANT FINDINGS
None.	
Ref	RECOMMENDATIONS
None.	
Ref	COMMENTARY
8.5	<p>The roof garden area above the Hub (Skylark Terrace) was observed 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. Additionally suitable fire alarm sounders are in position on the exterior walls of the roof garden. Residents would be aware of the fire alarm sounding in the building.</p>
8.5	<p>Staircases are provided with Automatic Opening Vents (AOVs) at the top level, which are tested weekly by maintenance staff and serviced every six months by Dyer Environmental Controls Ltd. Most corridors are provided with smoke shafts which are linked to the fire alarm and which are also occasionally tested and serviced. Other corridors have manually openable windows at the end.</p>
8.5	<p>As previously identified; It has been confirmed and evidence was seen that the windows at the end of the residential corridors are provided with manually openable locks / catches which can be opened if required by the fire service. The T Key that enables this process is located in the Fire Emergency red box, located in the entrance foyer, for use by fire crews. The corridors are also fitted with auto opening vents in the form of smoke shafts that are linked to the smoke detection or can be operated manually by the fire service.</p> <p>T Key in red box in the foyer and example of smoke shaft at end of communal corridor.</p> <div data-bbox="236 795 885 1028" data-label="Image">  </div>
8.5, 8.10, 8.16-8.18	<p>The main entrance doors are provided with a sliding power assisted opening mechanism. Assurance was provided that these are linked to the fire alarm and open upon its activation. A 'Green Box' emergency override is also installed adjacent to the doors and opens the doors when activated.</p> <p>Some final exit doors from the common areas are provided with magnetic locks and power assisted openers. They are linked to the fire alarm and release upon its activation. They are also provided with a 'Green Box' emergency override device in accordance with current guidance and which releases the locks, allowing the doors to be pushed open if required. The call points and release buttons were also shielded to prevent accidental actuation.</p> <p>Examples of Green Box overrides adjacent to exit doors.</p> <div data-bbox="236 1243 885 1473" data-label="Image">  </div>
8.6	<p>The corridors and escape routes were observed to be free and clear from any obstructions and un-authorised combustible materials at the time of this FRA. A very high standard of housekeeping was seen to be maintained throughout.</p>
8.11	<p>A weekly means of escape check is carried out by staff and recorded. Domestic and maintenance staff are moving around the common areas throughout the premises each day and any maintenance issues are reported and dealt with immediately.</p>

## 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?	Not Known
9.3	Are all fire doors fitted with smoke seals and intumescent strips where required?	Yes
9.4	Do wall & ceiling linings meet the required surface spread of flame classes? e.g. Class O on escape routes	Yes
9.5	Have any breaches in the fire resistance (walls, floors and doors) been fire stopped with appropriate fire resisting materials?	No
9.6	Have there been any structural alterations within the past 12 months?	No
9.7	Were the requirements of the Building Regulations followed and a completion certificate issued?	N/A
9.8	Are all ducts fitted with effective fire dampers where required?	Yes
9.9	Are all fire exits underneath and within 1.8m horizontal or 9m vertically of any external escape stair, fire resisting and self-closing?	N/A
9.10	Is glazing within the above distances fire resisting and fixed shut?	N/A
9.11	Is there a procedure for all premises/areas to be checked at the end of a working period for potential fire hazards?	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
<b>Automatic Hold Open Devices</b>		
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?	No
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
	<b>Observation</b>
9.2	<p>During the course of this assessment the 'Free Swing' door closers on the apartments were demonstrated, but it could not be confirmed that the entrance doors would close in the event of a flat fire, as it was not known if the 'Free Swing' devices / self-closers are definitely connected to the new Part 6 smoke detectors that have been installed. If the doors do not self-close it will allow the products of combustion from an apartment fire onto the escape routes and place persons at serious risk of harm.</p> <p>Example of Free Swing closer on inside of apartment door.</p> <div data-bbox="236 427 890 660">  </div>
	<b>Recommended Actions</b>
9.2	<p>WCHG ought to investigate this further and confirm that all the Free Swing self-closers are linked to the new smoke detection (BS 5839, Pt-6) in the hallway of the apartments, or take remedial actions to remedy the findings. It is essential that the flat doors fully self-close if smoke is detected within a flat, so as to protect the common areas / corridors.</p> <p><b>Note;</b> As an interim measure, all the Free Swing devices may have to be disabled or turned off, allowing the doors to fully self-close as normal, until this issue can be resolved.</p>
	<b>Observation</b>
9.5	<p>As previously identified; It was seen that there is still a hole in the compartment wall, <b>above the false ceiling</b> and door adjacent to the lifts, leading between the two blocks, <b>(Oak and Hawthorn)</b> where cables pass through <b>on Level 3</b> and which has not been fully sealed. This would allow the products of combustion to travel further than is necessary and affect the escape routes, placing persons at risk of harm during an emergency.</p> <p>Photos show gap on either side of compartment wall not correctly sealed.</p> <div data-bbox="236 996 890 1229">  </div>
	<b>Recommended Actions</b>
9.5	<p>The hole or gap ought to be suitably made up and sealed by using appropriate fire resisting materials on both sides of the compartment wall.</p>

### Observation

9.13 As previously identified; Following the previous guidance from the Ministry of Housing Communities and Local Government, (MHCLG), investigations into the external cladding systems have been completed. An analysis of the materials used with regard to their combustibility, along with specific installation and positioning has been carried out by Tenos Fire Engineers, who have submitted a report to WCHG and Galliford Try for actioning.

For information; Blocks A & B are treated as a single building under the Building Regulations and should conform fully to the recommendations for residential buildings with a top floor over 18m in height. Blocks C & D top floors are less than 18m in height and parts of the external cladding system may have conformed to the recommendations. **However, the latest guidance recommends the risk of external fire spread should be considered for all residential buildings regardless of top floor height.**

Whilst many of the provisions in the Approved Document B (ADB) for means of escape from flats with a top storey below 18m are applicable to sheltered housing, the nature of the occupancy may necessitate some additional fire protection measures as to those recommended in ADB. This is reiterated in the previous MHCLG guidance where combustible materials prohibited in buildings over 18m are deemed suitable in low rise buildings, yet they still present a risk to residents who may require substantial assistance to evacuate in the event of a fire. Therefore, because it has been confirmed that some residents in Blocks C or D do require substantial assistance to escape, **a similar standard of materials used in remediating the external wall cladding system should be specified for Blocks C & D as well as to that of Blocks A & B.**

The current investigations by specialist contractors Tenos Fire Engineers have determined what actions are required and it was reported to our consultant that remedial and restorative works are planned to take place during 2022. These would involve the removal and replacement of any combustible insulation, the removal of the HPL boarding and the replacement of the spandrel panels. It was not determined exactly when the works would begin, only that they are imminent. Because of the current potential for external fire spread a "Stay Put" strategy may expose residents to increased risk of harm from a fire. The previously recommended and instigated interim measure of whole block full evacuation on 2nd knock / confirmation of fire, is considered a suitable interim measure to reduce the risk of harm to all relevant persons. Photos show examples of different cladding types on external walls.



### Recommended Actions

9.13 WCHG ought to ensure that the recommended works are fully implemented and completed, so as to ensure that the exterior walls systems are made safe. This would enable the blocks to return to the Stay Put fire strategy as originally intended.

**Note;** It is likely the same cladding system materials are used on Blocks C & D as those on A & B and should WCHG require the "Stay Put" fire strategy to be implemented on completion of the remedial measures, it is highly recommended that Blocks C & D are examined and also included in the same remedial measures and restorative works being implemented for Blocks A & B.

Ref

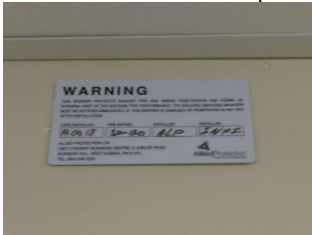
RECOMMENDATIONS

None.

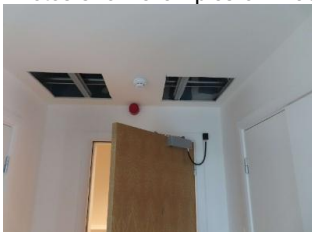
Ref	COMMENTARY
9.1-9.3	It was seen that the apartments accessed are fitted with a self-closing FD30s fire door of a good standard. The doors are believed linked to the alarm system on auto self-closers. Internal rooms within the apartment were also fitted with a good standard of FD30 notional doors. A suitable type of letter plate is fitted below the midway point, half way down the main access door to the flats, these have sprung loaded and sealed flaps both internally and externally. It is assumed that all the access doors to the apartments / flats in the premises are of the same standard. <b>However, see the finding above at Section 9.2</b>
9.1-9.3	It was identified that the doors to both the mobility scooter stores are that of an FD30s standard, but the scooter store is quite large and contains more than six scooters that are on charge. However, the doors do not open directly onto an escape routes, but rather into the entrance lobbies at the front. This was considered acceptable by our consultant, as a fire in the room would be quickly detected and should not pose any significant risk to life for the residents within the blocks, as alternative escape routes would be available to the sides and rear and the main entrance foyers are lobbied. Staff are on site 24 hours a day and any alarm activations are quickly investigated. Door to scooter store in Cedar and Redwood. Adjacent reception.



9.1, 9.5	It was noted and seen in many areas that remedial compartmentation and fire stopping works have been carried out since the initial construction phase, by Air Fire Control during November 2017 and Allied Protection Services during April 2018. Many areas above the false ceilings, in ancillary service rooms and in riser shafts, where pipes and services pass through compartment walls / ceilings, were seen to have been fire stopped and appropriately compartmented with fire resisting materials. Photos show some examples of remedial fire stopping throughout the premises.
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9.1, 9.5	<b>Invasive Compartmentation Survey:</b> For information; It was seen and explained by Neil Summerton, the buildings consultant, that an invasive survey is currently taking place throughout all the blocks, in order to confirm that fire stopping and compartmentation is suitable and sufficient, especially above the ceilings within the apartments. Evidence of this work was seen by our consultant in several locations. The survey and works are being carried out TENOS fire engineers and Galliford Try construction. Sampling of the works in order to check the quality and standards is also undertaken by an accredited inspector for Galliford Try. (Steve Calvert) Photos show examples of invasive survey works above the ceilings in Flat 78.
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9.2 Fire door checks are currently carried out on a periodic basis by the facilities staff. It is important that a doorsets' fire resistance performance is measured and is routinely and professionally assessed; Previously released recommendations from the Grenfell Phase 1 inquiry recommends inspecting self-closers every 3 months. This is considered onerous based on the occupant profile and the level of day to day management and interaction with the residents and should be done as part of at least a six monthly programme of planned preventive maintenance. These inspections are aimed at identifying defects such as:

- missing or ineffective self-closing devices and door seals (defective or missing self-closing devices should be replaced as a high priority)
- 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 that 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.

Other opportunities, such as when flats become vacant or change tenancy, should be used to inspect the condition of compartmentation and to undertake fire safety improvements where necessary.

**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 inspection.**

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. <https://www.local.gov.uk/fire-safety-purpose-built-flats>

9.2, 9.5, 9.13 Article 8 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to take general fire precautions to ensure the safety of relevant persons. This includes measures to reduce the risk of fire on the premises and the risk of the spread of fire on the premises.

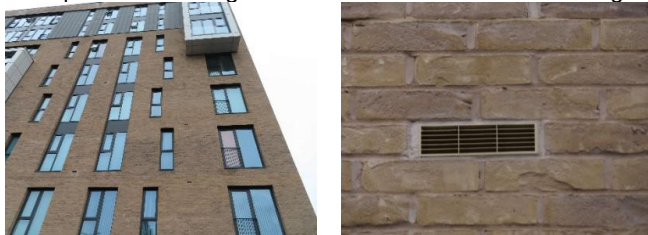
Article 14 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to ensure that emergency routes and exits can be used as quickly and safely as possible.

9.8 No common ventilation ductwork between the apartments was observed throughout the buildings. Ventilation grills can be seen on the outside walls of the buildings, that appear to be in line with and to vent from the kitchen's and bathroom's extraction systems within the apartments. This was confirmed by the WCHG building consultant to be the standard and design for the flats, as the ventilation ducting passes through the ceiling cavities, direct to outside and is independent to each apartment.

Under Regulation 38 (formally 16B) of the Building Regulations the designer/principle contractor is required to handover, to the end user, "as built" information regarding the systems and protection measures for the safe operation of the building. This information should include the design and fire protection measures incorporated into the ventilation systems.

If there are reasons to suspect the fire resistance within the building has not been sufficiently maintained then the responsibility to provide this technical information rests with the duty holder / responsible person.

Example of vents and grills on the external walls of the buildings.



9.13 It was noted that there are two balconies on the Cedar block, adjacent to the roof top garden area, but it was made clear that the use of these is controlled by the premises management team and access is only allowed at certain times. Residents do not have general access to these areas. No sources of ignition are allowed on these areas and the balconies were seen to be free of any combustibles at the time of this FRA.

Balconies on the Cedar Block adjacent to roof top garden.



- 9.13 For Information:- A report by Tenos fire engineers on matters of compliance of external cladding with Building Regulations has been produced and following recommendations, contractors have proceeded to open up areas of the façade to check material combinations and presence of cavity breaks etc, against as-build details. Observations so far have revealed deficiencies and issues with foam insulation, Prodema and HPL cladding combinations, spandrel panelling and missing or defective cavity breaks. Interim measures suggested have been implemented and are further documented in this and the previous fire risk assessment reviews. Remedial measures are to be taken during 2022 so as to ensure compliance with current Building Regulations approved guidance. This was confirmed by Neil Summerton (Building Consultant for WCHG) and examples of the ongoing investigations and works were seen by our assessor during the course of this FRA. Photos show examples of where investigations have taken place within the walls and cladding.



9.13 **MHCLG guidance:-**

Although the Expert Panel's advice does not explicitly cover all types of external wall systems for residential buildings below 18m, the risk of external fire spread should be considered as part of the fire risk assessment for these buildings. The expert panel recommends the fire risk assessment should take into account a number of factors other than height and material type, including the vulnerability of residents, location of escape routes, and the complexity of the building.

Whilst materials used on residential buildings with a top storey below 18m may be deemed to comply, the original design fire strategy indicated a "Stay Put" strategy was to be the basis for the building design. The latest findings regarding the cladding systems used indicated that there is a likelihood that the external wall may assist in fire spread that is likely to affect more than one apartment. The "Stay Put" strategy is predicated on the assumption that an outbreak of fire in an apartment should be contained and other neighbouring residents are safe to remain in their apartments. This is now less likely due to the cladding system employed. (The current building evacuation procedure on 2nd knock mitigates against external fire spread ensuring persons are warned of fire and need to evacuate at the earliest opportunity.) Therefore, a Stay Put strategy is currently not valid.

Remedial actions may be required in the buildings below 18m formerly deemed to comply with the Building Regulations where there is a risk to the health and safety of residents. With regard to the current interim simultaneous evacuation procedure, the following is assessed:

- The vulnerability of residents- there is a range of abilities amongst the residents from those who are fit and able to self-evacuate to ones who need substantial assistance from staff.
- Location of escape routes- these are relatively simple and straightforward with stairs provided with disabled refuge points and communications systems. A fire spreading externally is unlikely to affect more than one exit staircase in the early stages of a fire and prior to the arrival of the F&RS. A fire is unlikely to spread internally due to the compartmentation.
- The complexity of the building- the layout of the common escape routes from apartment entrance doors provide for two directions of escape with several intermediate areas of relative safety which allow for extended evacuation times.

Note; 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 latest fire strategy. All apartments have now been fitted with common fire alarm sounders to provide the requisite sound levels within each apartment.

- 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. Additionally cleaning staff regularly use the bin stores and help keep them tidy.
- 9.14 The car park adjacent to Block B now has barriers and markings to prevent cars from parking in close proximity to the façade of the building, as previously recommended. Cars parked away from Block B.



- 9.14 As previously identified; The loose wiring above the false ceiling in the Scooter Store of Oak and Hawthorn blocks has been confirmed to have been made secure during March 2021. Information on Aurora reflected the completion of this action.
- 9.22 Corridor doors held open on auto door release devices are not released at night, to allow the free movement of the residents, but the doors are routinely tested and are linked to the fire alarm system. Detectors were seen to be in place in close proximity to the doors on the corridors.

## 10.0 Fire Alarm System

<b>10.1</b>	Is the premises provided with a fire alarm system?	Yes
<b>10.2</b>	Is it possible to define the alarm system category? (L1- L5 etc.)	Yes
<b>10.3</b>	Is the fire alarm or category suitable for the risk and premises type?	Yes
<b>10.4</b>	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
<b>10.5</b>	Are sufficient fire alarm call points and detectors provided?	Yes
<b>10.6</b>	Can the alarm be raised without placing anyone at risk?	Yes
<b>10.7</b>	Are all call points visible, unobstructed?	Yes
<b>10.8</b>	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
<b>10.9</b>	Where required does the system have a voice alarm? i.e. large places of assembly	N/A
<b>10.10</b>	Can the alarm be heard throughout all areas of the premises?	Yes
<b>10.11</b>	Has a suitable fire zone plan been provided adjacent to the fire panel where necessary? i.e. complex premises or care homes	Yes
<b>10.12</b>	Is the alarm system under a regular maintenance programme by a qualified fire alarm engineer?	Yes
<b>10.13</b>	Are there systems in place to ensure the system is tested weekly from a different call point?	Yes
<b>10.14</b>	Are all fire alarm tests, faults and maintenance schedules recorded?	Yes



### 10.0 Fire Alarm System: Finding(s)

Ref	SIGNIFICANT FINDINGS
None.	

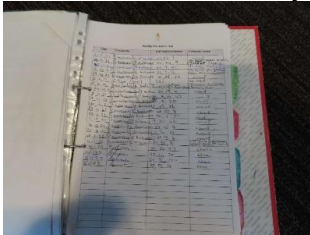
Ref	RECOMMENDATIONS
None.	

Ref	COMMENTARY
10.1-10.4	<p>The system now installed within each apartment appears to conform to BS 5839, Part 6; 2013 to at least Grade D, category LD1 standard, with a heat detector located in the kitchens and a smoke alarm in the hallway and each habitable room 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.</p> <p>A fully addressable BS 5839, Part 1, fire detection and warning system is installed within the common areas, which appears to be to a minimum of L2 standard, with a linked heat detector and separate sounder located in the hallway of each flat. The automatic fire detection and warning system installed in the common areas sounds an alarm to initiate a simultaneous evacuation of all the common areas within the individual block of activation.</p>
10.3, 10.5	<p><b>Detectors in Flats:</b></p> <p>For information; Current guidance strongly recommends that all circulation spaces within independent living flats, in sheltered or extra care schemes, are fitted with interlinked smoke detection that is local to the flat. This category of fire alarm system LD1, within the flats provides the best standard of life protection for the residents of the flats and ought to be the standard found throughout the building, however, it must be noted that the alarm system must continue to also be linked directly to the Telecare / Warden Alert system, to ensure that any alarm activations within the flats are responded to appropriately and immediately. This standard has been recommended due to the infirmity of many of the residents, as it should provide them with a decreased detection time and allow for a greater chance of escape.</p> <p><b>Note:- This standard and category of detection within the flats / apartments was introduced by the NFCC Specialised Housing Guide during 2017, when this building was already under construction. It has been recommended as the best standard, so as to provide the optimum level of life cover and should be regarded as the ultimate goal to aim for, for all existing sheltered and extra care schemes.</b></p>
10.3, 10.5	<p>As previously identified; The Part-6 fire alarm and detection system within the apartments has been upgraded and new detectors have been installed throughout. This brings the localised alarm and detection within the apartments / flats up to the current recommended levels in the NFCC Specialised Housing Guide and now conforms to category LD1. <b>See also the finding at Section 9.2</b></p>
10.6	<p>The automatic fire detection and warning system cause and effect has been updated as previously recommended. The updated cause and effect was not available to view by our consultant at the time of this review.</p> <p>The updated cause and effect was verbally confirmed to achieve the following:</p> <ul style="list-style-type: none"> <li>• on activation of an apartment (local) smoke alarm, sounders operate in the apartment of activation and staff receive a notification at the DECT panel and mobile handsets</li> <li>• on activation of the common fire alarm system, staff receive a notification at the DECT panel and mobile handsets</li> <li>• on activation of the full alarm in Block A, the evacuation sounders in A and the Hub sound</li> <li>• on activation of the full alarm in Block B, the evacuation sounders in B and the Hub sound</li> <li>• activation in the Hub, the evacuation sounders in A &amp; B + Hub sound</li> <li>• on activation of the full alarm in Block C, the evacuation sounders in C &amp; D sound and the fire panel in the Hub provides an audible warning</li> <li>• on activation of the full alarm in Block D, the evacuation sounders in C &amp; D sound and the fire panel in the Hub provides an audible warning</li> </ul>
10.10	<p>A full evacuation can be manually activated at the fire panel by staff or the F&amp;RS. This procedure has previously been verbally agreed between Fire Safety Inspecting Officers from GMFRS and Ms Amanda Seals.</p> <p>The common fire alarm system has previously been extended to provide Part 1 sounders inside the hallway of the apartments, so as to achieve 75dB at the bedhead, as recommended to support the simultaneous evacuation in each block. (This would <b>not</b> be a requirement of the system under a Stay Put strategy and is considered an interim measure until external cladding / insulation replacement and remediation is complete.) Care staff are trained to assist mobility-impaired residents of the affected zone/s. As an interim measure, the existing staff, on confirmation of a fire, assist (where necessary) residents in the vicinity of the confirmed fire to commence evacuation of the affected block. Priority is given first to the affected floor level, progressing to the floor above, until all floors above have been evacuated. One member of staff remains at the fire panel to meet and inform the fire service on arrival.</p> <p>On activation of a smoke detector in an apartment and notification to staff on the Dect phones, the person in charge at the fire alarm panel remains in contact with investigating care staff to confirm the cause ASAP. Should the communication be lost before confirmation of cause, the full alarm is activated and the fire service called.</p> <p>The Fire and Rescue Service are summoned without delay on one of the following events:-</p> <ul style="list-style-type: none"> <li>• On confirmation of fire via the social alarm communication system, or</li> <li>• No response from the resident via the social alarm communication system, or</li> <li>• Activation of a manual fire alarm call point, or</li> <li>• Activation of an automatic heat/multi-sensor detector in the entrance hall of an apartment which is connected to the building's common (BS 5839 Part 1) fire alarm system.</li> <li>• Loss of communication between staff member in charge and investigating staff.</li> </ul>

10.11 Suitable fire alarm Zone Plans are provided adjacent to each alarm panel in the blocks.



10.12-10.14 Fire alarm maintenance procedures are in place with regular weekly tests carried out by staff and recorded in the fire log book, kept in the red box in the foyer. The alarm system is under a regular three monthly maintenance and testing schedule carried out by the alarm engineers from MONO Fire and Security. 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. The AOVs are tested weekly along with the fire alarm, the weekly test are recorded. Evidence of testing and service was provided and seen by our assessor. The last date of service by MONO alarm engineers was carried out during January 2022. Photo shows record of weekly alarm tests.



### 11.0 Emergency Escape Lighting

11.1	Has the provision of emergency lighting been considered? Working hours, windowless areas, open access areas>60m <sup>2</sup> , toilets>8m <sup>2</sup> .	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?	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
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None.

Ref	RECOMMENDATIONS
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None.

Ref	COMMENTARY
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11.1 Emergency Lighting is installed throughout and the provision is considered suitable and appeared in good condition where seen.

11.5-11.6 Annual inspections of the Emergency Lighting systems are undertaken by a qualified engineer from an appointed contractor. The EL system is also tested monthly by maintenance staff in accordance with current standards and records kept in the fire log book. Any faults are reported through the appropriate channels. Records of testing were seen. The date of the last service was recorded as March 2021.



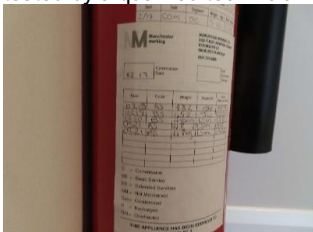



For information, it is recommended that the emergency lighting is tested in accordance with BS 5266, Emergency Lighting and would typically include:-

- A visual check;
- A monthly function test of each unit with a "fishtail" test key;
- An annual test by a suitably qualified and competent person;
- The test results ought to be recorded in a suitable log book.

## 12.0 Fire Fighting Equipment, Systems & Fixed Installations

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

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

Ref	SIGNIFICANT FINDINGS
None.	
Ref	RECOMMENDATIONS
None.	
Ref	COMMENTARY
12.3	<p>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 as they are not trained. However, the premises are staffed 24 hours a day, with trained staff responding to any fire alarm and the current availability of fire fighting equipment is considered suitable. The accommodation extinguishers are generally sited in stairwells and not in the immediate vicinity of flat entrance doors.</p> 
12.4-12.5	<p>All of the extinguishers seen, were checked and serviced annually by a qualified engineer from Manchester Working Ltd and new extinguishers by Complete Fire Ltd. They are checked monthly by the facilities staff and the results recorded. The last annual test / service date was carried out in October 2021. Photo shows record of extinguisher service.</p> 
12.5	<p>As previously identified; The extinguishers on Level 3 of Oak and Hawthorn, adjacent to the lifts, have now been serviced and tested by a qualified technician.</p> 
12.6, 12.9	<p><b>New Sprinkler Installation:</b></p> <p>It was stated and explained by the building consultant for WCHG that a new sprinkler installation was being installed throughout the premises and inside all the apartments. Work had already begun, the installation work was being carried out by ARGUS Sprinklers and the installation will comply with BS 9251 / 2021. An example of the sprinkler installation was seen in Flat 78. Photo shows part of pipework and sprinkler head above ceiling in Flat 78.</p> 
12.6, 12.10	<p>Fire fighter dry rising mains are located in each block, so as to provide a fire fighting facility due to the size and layout of the blocks. The dry risers are tested annually by a contractor. Photos show examples of Dry Riser inlet and an outlet in a stairwell.</p>  

### 13.0 Fire Safety Signs and Notices

13.1	Do signs indicate all final exits?	Yes
13.2	Can the final exit or a directional sign be identified from any position in the assessment area?	Yes
13.3	Are all signs in the correct position, suitably fixed and directional arrows correct? (Can the way out be found just by using signs alone?)	Yes
13.4	Are the signs the correct size for the areas where they are located?	Yes
13.5	In places of public assembly are all escape signs illuminated on maintained luminaires?	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?	Yes
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
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None.

Ref	RECOMMENDATIONS
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None.

Ref	COMMENTARY
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- 13.1-13.3 All the current fire safety signage throughout the building was found to be satisfactory and in good order at the time of this fire risk assessment.
- 13.6-13.8 Fire Action notices are displayed in appropriate locations, such as in staff work areas and service rooms and also on the inside of the apartment / flat entry doors, so as to remind the staff and residents. Suitable action notices were also seen on the inside of Guest Bedrooms. Residents are also made aware of the fire procedures by regular updates from the management team. It was also noted that there are no fire action notices by the manual call points within the common / communal areas inside the premises, but the scheme manager stated that the reason for this was the constant presence of staff on site 24 hrs per day and the fact that any alarm activation would be attended and managed by the staff present. Photos show fire action notices on the inside of a flat and guest bedroom entry doors.



- 13.11 Fire Assembly Point signs are displayed in the appropriate locations.



- 13.12 "No Smoking" signs are displayed as required by The Smoke Free (Premises and Enforcement) Regulations 2006. The only smoking allowed is within the residents' own flats. There is No Smoking allowed within any communal area or circulation space.

### 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	There have been no reports of any fires within the past 12 months. 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	Some false alarms have previously occurred within apartments due to cooking or careless actions by residents. False alarms are recorded and kept in the red box in the foyer. Residents have been informed of the measures to help reduce the occurrence of false alarms. Due to the staff investigation procedures in place there has been no escalation and the fire service has not been unnecessarily called. The last false alarm was recorded as the 1st October 2021.
14.7	The Wythenshawe Community Housing Group scheme manager is the nominated person on-site responsible for ensuring that the fire precautions are implemented and managed correctly on behalf of WCHG who have the overall responsibility.
14.8	The local Fire and Rescue Service (GMFRS) have visited on a number of occasions and continue to visit in order to carry out familiarisation, for the gathering of operational information, community visits to advise residents on home fire safety and fire protection officers have also regularly visited to advise on any current requirements. WCHG continue to liaise with the fire service on a regular basis whilst the ongoing remedial works take place, regarding the exterior cladding systems. See Section 9.13
14.11	The important files and documents that would enable continuity are stored securely in the scheme manager's office near the entrance foyer. The scheme manager also stated that many of these records and files are also backed up electronically and stored remotely on WCHG's own computer data systems.



<b>15.0 Fire Safety Management</b>		
<b>15.1</b>	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
<b>15.2</b>	Have all staff been trained in how to call the Fire Service, use of fire extinguishers, evacuation procedures and basic fire awareness?	Yes
<b>15.3</b>	Do all new employees receive basic fire procedure and induction training on the date of appointment?	Yes
<b>15.4</b>	Are records of fire safety training kept?	Yes
<b>15.5</b>	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
<b>15.6</b>	Is a "permit" to work procedure in place for contractors etc.?	Yes
<b>15.7</b>	Where an alterations notice is in force has the enforcing authority been informed prior to any significant changes being made?	N/A
<b>Fire Marshals &amp; Fire Plans</b>		
<b>15.8</b>	Are fire marshals required to take charge of a fire incident and liaise with the Fire Service where required?	Yes
<b>15.9</b>	Is there a list of fire marshals displayed in all locations where required?	N/A
<b>15.10</b>	Are systems in place to provide identification for fire marshals during an emergency where required?	Yes
<b>15.11</b>	Has a suitable fire assembly point been designated? (i.e. free from traffic hazards, radiated heat and free movement away from the premises)	Yes
<b>15.12</b>	Do the premises require a fire plan in order to evacuate?	Yes
<b>15.13</b>	Are there clearly defined written procedures to be followed in the event of a fire in the form of an emergency plan?	Yes
<b>15.14</b>	Is a fire plan displayed throughout the premises where required?	Yes
<b>15.15</b>	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
	<p><b>Observation</b></p> <p>As previously identified; During the previous meetings to discuss the fire procedures following the installation of fire alarm sounders in all apartments and the intention that following the removal of the external cladding/insulation, it is envisaged a return to a Stay-Put fire strategy would be implemented. Currently the minimum number of staff (2 care staff and one from housing management) are available on a 24-hour basis. The care staff are instructed to respond to a fire alarm activation and assist with the evacuation of vulnerable residents in the affected area. The housing manager coordinates and meets with the fire and rescue service (FRS) on their arrival to provide up to date information.</p> <p>On the reintroduction of a Stay-Put fire strategy, it is envisaged that the provision of 24-hour cover by housing management would not be required, <b>providing that suitable emergency information is available</b> on or for the arrival of the FRS.</p> <p><b>Recommended Actions</b></p> <p>WCHG should continue to re-evaluate and constantly monitor, by way of practicing fire drills for the care &amp; housing management staff, so as to ensure sufficient levels of staff are always available whilst a simultaneous evacuation strategy remains in force.</p> <p>Prepare (high level) vulnerable person information and ensure that it is kept up to date for use by the FRS. The information should be kept in a secure box/location known to the FRS. The information should include, but not be limited to, the location of vulnerable persons, the assistance that may be required, the block, the floor and apartment number.</p> <p>Arrange for a consultation with the local fire safety inspecting officer to discuss the findings within this fire risk assessment, in particular, with the view to reverting back to a Stay-Put strategy and the reduction of housing management staff at that time.</p>
15.13	
15.13	

Ref	COMMENTARY
15.1	WCHG employ competent and approved persons to carry out works, maintenance and servicing of their preventative and protective fire safety measures.
15.2-15.4	<p>All staff including care staff have recently received fire procedure training with a record maintained on their personal file. Records of fire training were not observed this time, but assurance of this was previously provided by the scheme manager Amanda Seals and also stated this time by the office staff present. It was also stated that the care team are now provided by Premier Care as of 2022.</p> <p>All staff and residents have been informed of the evacuation procedures, the reasons for and the health and safety requirements surrounding any remediation works, for the investigation of the cladding systems or the installation of the sprinkler systems. This was also followed up with a door knock on all residents doors to ensure all have been informed. This current situation and liaising with the occupants continues and is still in place.</p>
15.5-15.6	<p>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 provide before and after photos along with the methods and materials used to fire stop any holes on completion.</p> <p>At the time of this fire risk assessment it was reported that Galliford Try (construction contractors) are continuing with survey work throughout the whole premises and remedial fire stopping works are carried out where necessary.</p>
15.9-15.10	A list of fire marshals is not displayed as it was considered that this would not serve any purpose. The fire marshals are controlled by and known to all the WCHG management. Training is provided along with suitable means of identification. These were seen by our consultant at the time of this FRA.
15.11	The fire assembly points have been designated as the rear Car Park area for Oak and Hawthorn and the front garden area for Redwood and Cedar. However during inclement weather, it is the opinion of our assessor that residents could assemble in the central Hub lounge / dining area (with alternative exits to the outside) and await further instructions during a full fire evacuation.

### Stay Put:

The consequences to residents of a fire within their own accommodation in specialised housing are no greater than for those of similar vulnerability living in other forms of housing. In any block of flats, it is important to distinguish between the concepts of evacuation and rescue. In extra care housing, only the flat of fire origin needs to be evacuated (at least in the first instance). If a resident of that flat is unable to evacuate themselves, rescue by the fire and rescue service may, ultimately, be necessary. This is no different from the situation that would arise if that resident were living in a flat in a general needs block or a bungalow, nor does this imply any failure of the emergency plan for the premises. Widespread evacuation of extra care housing should not normally arise. If it does become necessary, this may reflect a failure in compartmentation, necessitating involvement of the fire and rescue service.

Compartmentation requires a higher standard of fire resistance than that normally considered necessary simply to protect the escape routes. This is to ensure that a fire should be contained within the flat of fire origin. Accordingly, residents of those flats remote from the fire are safe to stay where they are. Indeed, in the majority of fires in blocks of flats, residents of other flats never need to leave their flats.

This is the essence of the 'stay-put' strategy that underpins the fire safety design. Accordingly, the evacuation strategy is such that only those at immediate risk need to escape, i.e. those within the flat of fire origin, but those remote and unaffected by the fire can remain in their flats.

However, inevitably, fires do occur in which, for operational reasons, the fire and rescue service decides to evacuate residents from other flats in the building. Fortunately, these are rare. In specialised housing blocks, the time it takes to evacuate other residents is likely to be longer than in the case of general needs blocks. For this reason, the early attendance of the fire and rescue service is especially important in the case of specialised housing. This highlights a key difference between specialised housing blocks and those used for general needs accommodation. In extra care housing, remote monitoring of fire alarm signals forms a significant part of the fire strategy for such accommodation.

In extra care schemes, in which it is normally the case that care staff will be present on a 24-hour basis, there are insufficient staff to effect evacuation of all residents. While undoubtedly any member of staff present at the time of fire would, to the extent that they are trained to assist a resident in moving away from danger, there is no suggestion that they can effect evacuation of all other residents, particularly after the smoke has entered the escape routes. However, they can play a vital role in filtering out false fire alarm signals, so indirectly facilitating the more extensive use of smoke detectors, and, subject to early enough warning of fire, might be able to assist a resident to leave a flat in which there is a fire, while not putting themselves at undue risk.

The role of the fire and rescue service does not extend to the routine evacuation of buildings. However, in buildings designed and maintained to ensure the safety of a 'stay-put' strategy, the need for evacuation of residents beyond accommodation within which the fire starts should not arise. As in the case of a single-family dwelling house, evacuation of a severely mobility impaired resident in whose accommodation the fire starts is, effectively, a rescue operation, which is the role of the fire and rescue service. Similarly, if a fire is such that evacuation of disabled residents beyond accommodation in which the fire starts becomes essential, this too involves operations akin to rescue. It follows from the above considerations that, where, in specialised housing, nominated staff are not on duty on a 24-hour basis to provide information to fire-fighters on their arrival about residents who cannot reliably evacuate themselves, fire-fighters should have ready access to this information on arrival in a secure location. There should be procedures for keeping the information up to date and ensuring that firefighters are aware of both the availability of the information and the means for accessing it rapidly on attendance. The information should form a high level (not detailed) indicating block/floor/apartment number and assistance required of the vulnerable residents who may not be able to self-evacuate.

Due to external wall cladding system and the potential for a fire to breach the compartmentation a **simultaneous evacuation strategy is currently still in operation.**

### Simultaneous Evacuation:

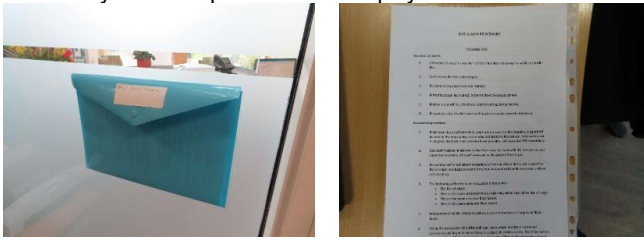
The role of the fire and rescue service **does not involve routine evacuation of premises.** Accordingly, in specialised housing with a simultaneous evacuation strategy, management of evacuation is not the responsibility of the fire and rescue service. If assistance is required for evacuation of residents beyond the accommodation in which fire starts, this should be provided by staff on the premises, though the fire and rescue service may be involved in the rescue of a person in whose accommodation a fire occurs. The fire and rescue service may also assist with evacuation if it is not completed by the time of their attendance. The minimum number of staff required to assist in an evacuation will be determined by factors such as:

- The numbers of vulnerable residents unable to self-evacuate to a place of "relative safety"
- The location of vulnerable residents
- The level of competence of staff gained through experience and evacuation training
- The construction and standard of fire compartmentation within the premises

Simultaneous evacuation is typically not applied to extra care housing unless there is inadequate compartmentation to support a 'Stay-Put' strategy. In purpose-built blocks of flats, experience has shown that most residents do not need to leave their flats when there is a fire elsewhere. Indeed, in some circumstances, they might place themselves at greater risk, or hinder fire-fighting operations, when they do so. As most sheltered and extra care housing schemes are, effectively, purpose-built blocks of flats, a 'Stay-Put' strategy is applicable for this type of accommodation on remediation of the external wall cladding/insulation systems.

In extra care housing with a simultaneous evacuation strategy, characteristics of residents need to be taken into account to ensure that, if residents cannot evacuate themselves, sufficient assistance to evacuate is available without the need for intervention by the fire and rescue service. There is a need to consider the evacuation capabilities of residents who are in accommodation other than that in which a fire occurs. **Sufficient assistance should be available at all material times, to ensure the safe evacuation of residents beyond the accommodation in which the fire starts, without the assistance of the fire and rescue service, unless all such residents can evacuate by themselves un-aided.**

15.13-15.14 The fire safety and evacuation plan has now been updated and placed available in a wallet for any persons to access, within the main office, on the ground floor of reception.  
Fire Safety Plan and procedure on display in the main office.



15.15 The premises are staffed 24 hours per day.

## 16.0 Fire Emergency Plan

<b>16.1</b>	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
<b>16.2</b>	If the premises operates a "stay put" policy, is this suitable?	No
<b>16.3</b>	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
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None.

Ref	RECOMMENDATIONS
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**Observation**

16.2 As previously stated; The Stay Put (stay safe) fire strategy as originally designed, continues to be not fit for purpose, due to some of the materials used in the construction of the external wall systems and façades. The Stay Put has previously been revoked and a simultaneous evacuation strategy implemented, as an interim measure. This continues at present while remediation works take place.

**Recommended Actions**

16.2 Following the survey of the materials used in the build up of the façades, which has now been submitted. All the recommendations made by the specialist contractors / fire engineering consultants, should be fully implemented, prior to any return to a Stay Put fire strategy.

Ref	COMMENTARY
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16.1 For simultaneous fire evacuation purposes, the following areas are to be considered as full evacuation zones on manual call point (MCP) activation or 2nd Knock, (two automatic detectors.)

Area of activation of MCP or double knock

Hub including salon, kitchen, offices and rooms overlooking the hub at 1st floor

Apartment in Block A

Common area in Block A including staff only areas

Apartment in Block B

Common area in Block B including staff only areas

Apartment in Block C

Apartment in Block D

Common area in Block C or D including staff only areas

Area of simultaneous full evacuation

Hub + Blocks A + B

Hub + Block A

Hub + Block A

Hub + Block B

Hub + Block B

Block C + D

Block C + D

Block C + D

16.1-16.2 The premises is currently operating on a Full Evacuation policy for the affected zones / buildings, managed by trained staff members. However, the premises has been designed to support a Stay Put policy and a Full Evacuation strategy may not be convenient or may prove awkward for some of the elderly residents. It would also prove difficult for the fire service to deal with a fire in a flat, if residents are in the process of evacuating when the fire service arrive. It was made clear to our consultant by the WCHG management, that the long term plan is to return the premises to a Stay Put policy, once all the findings and remedial works have been completed, especially with regards to any problem cladding or insulation on the external façades of the buildings.

Two example evacuation notices / action plans are provided below for information, one for the general communal areas and one for residents information, re the current Full Evacuation strategy and these should be communicated to all the occupants and staff members concerned.

## Fire Emergency Plan: General

On confirming that a fire exists raise the alarm, by Operating the nearest Break Glass 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, Staff and Visitors should move quickly and calmly to the nearest exit.

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

All Persons, Staff and Visitors **must not place themselves at risk.**

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

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

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

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

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

## **Fire Emergency Plan FLATS**

### **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 <b>2 to 4 months</b> .
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 <b>variable</b> and could be <b>up to 12 months</b> . 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.

<b>Definitions:</b>	
<b>Hazard:</b>	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.
<b>Risk:</b>	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.
<b>Harm:</b>	Physical injury, death, ill health, property and equipment damage and any form of associated loss, which could cause harm.
<p>To determine the risk rating two main areas are considered, the likelihood of an outbreak of fire and the potential for that outbreak to cause harm to persons, property and business continuity.</p> <p>The likelihood of fire outbreak is given a rating of highly unlikely, unlikely and likely, this is then multiplied by the harm potential rating of slight, moderate and serious harm.</p> <p>The level of fire risk is then quantified as <b>negligible, tolerable, moderate, substantial</b> or <b>intolerable</b>. The subjective risk rating is calculated and the risk level determined within the following parameters:</p>	
<b>Negligible Risk</b>	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.
<b>Tolerable Risk</b>	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.
<b>Moderate Risk</b>	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.
<b>Substantial Risk</b>	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.
<b>Intolerable Risk</b>	Where the combination of severity and probability is such that extreme harm or death will occur and there is a real threat of an outbreak of fire. Action must be taken to immediately reduce the risk, ideally to a tolerable level. If this cannot be achieved, then consideration must be given to prohibiting or limiting the use of all or part of the premises until such risks can be reduced. Reassessment is required following implementation of the immediate or interim control measures.

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

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

### FIRE RISK RATING MATRIX

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

## 18.0 Summary of Findings

FRARef	Hazard or Defect	Action Required	Hazard Priority	Risk Rating	Action By	Review Date	Contractor Completed
9.2	It could not be confirmed that the apartment entrance doors would close in the event of a flat fire, as it was not known if the 'Free Swing' devices / self-closers are definitely connected to the new Part 6 smoke detectors that have been installed.	Investigate this further and confirm that all the Free Swing self-closers are linked to the new smoke detection (BS 5839 Pt-6) in the hallway of the apartments, or take remedial actions to remedy the findings. See full finding and recommendation at Section 9.2	P1	Substantial			
9.5	It was seen that there is a hole in the compartment wall, above the false ceiling and door adjacent to the lifts, leading between the two blocks, (Oak and Hawthorn) where cables pass through on Level 3 and which has not been fully sealed.	Make up and seal the hole or gap by using appropriate fire resisting materials on both sides of the compartment wall.	P1 - previously identified	Moderate	Justin Gill		18 Mar 2021
9.13	Investigations into the external cladding systems have been completed. An analysis of the materials used with regard to their combustibility, along with specific installation and positioning has been carried out by Tenos Fire Engineers, who have submitted a report to WCHG and Galliford Try for actioning.	Ensure that the recommended works are fully implemented and completed, so as to ensure that the exterior walls systems are made safe. This would enable the blocks to return to the Stay Put fire strategy as originally intended. These works should also include Blocks C & D. See full details at Section 9.13	P2 - previously identified	Moderate	Amanda Seals		

## 19.0 Recommendations

FRARef	Observation	Recommended Action	Risk Rating	Contractor Completed
15.13	During the previous meetings to discuss the fire procedure following the installation of fire alarm sounders in all apartments and the intention following the removal of the external cladding/insulation, it is envisaged a return to a Stay Put fire strategy would be implemented.	WCHG should continue to re-evaluate and constantly monitor, by way of practicing fire drills for the care & housing management staff, so as to ensure sufficient levels of staff are always available whilst a simultaneous evacuation strategy remains in force. See full recommendations and commentary at Section 15.13	Moderate	
16.2	The Stay Put (stay safe) fire strategy as originally designed is currently not fit for purpose. See full details at Section 16.2	The survey of the materials used in the build up of the façades, has now been submitted. All the recommendations made by the specialist contractors / fire engineering consultants, should be fully implemented, prior to any return to a Stay Put fire strategy.	Tolerable	09 Apr 2020

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

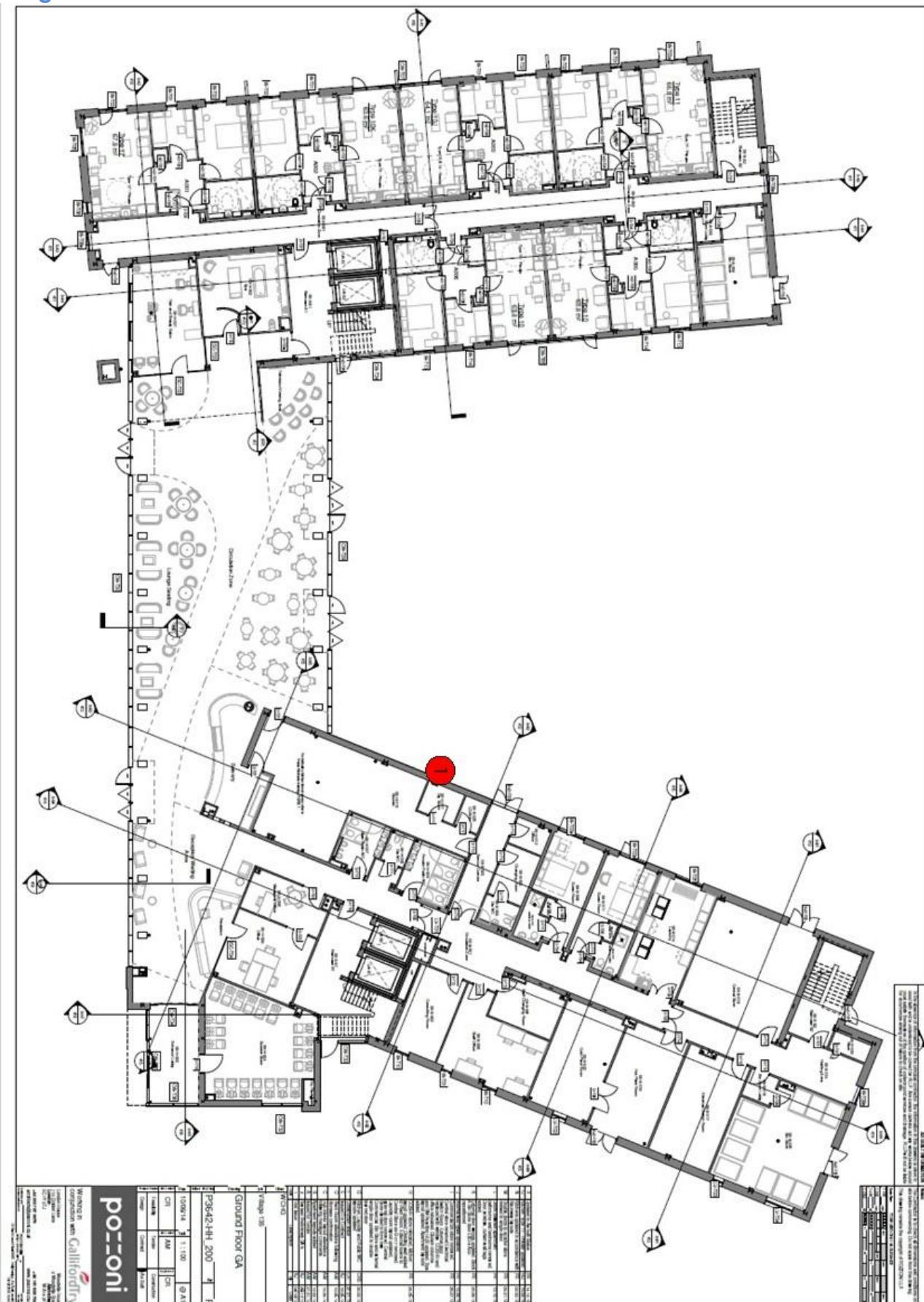
**IT IS FOR THE RESPONSIBLE PERSON TO DETERMINE WHETHER THE USE OF THE PREMISES, THE NATURE OF THE OCCUPANTS, THE PROPERTY PROTECTION, DAY TO DAY OPERATIONS AND THE FIRE SAFETY MANAGEMENT WOULD BE ENHANCED BY THE IMPLEMENTATION OF ANY RECOMMENDATIONS. THEY DO NOT CONSTITUTE A SIGNIFICANT FINDING.**

## 20.0 Commentaries

FRARef	Observation	Recommended Action	Risk Rating	Contractor Completed
5.2	Some artificial plants were seen in various locations, but it is believed that these are to a fire retardant standard and at the time of this FRA.	WCHG should follow up the enquiry and confirm that the artificial decorations / plants are to an approved flame retardant standard.	Tolerable	

## Appendix

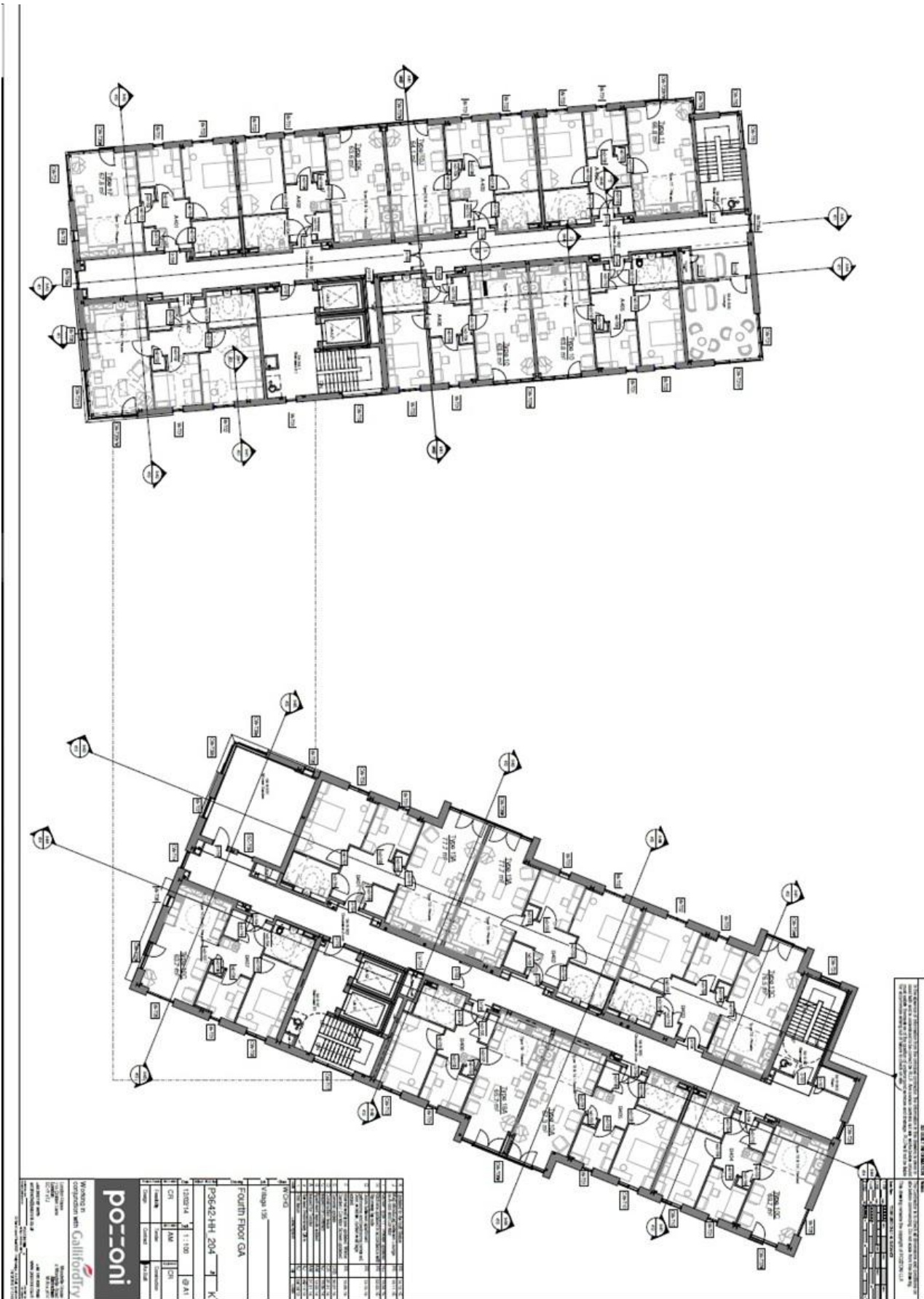
### HH ground



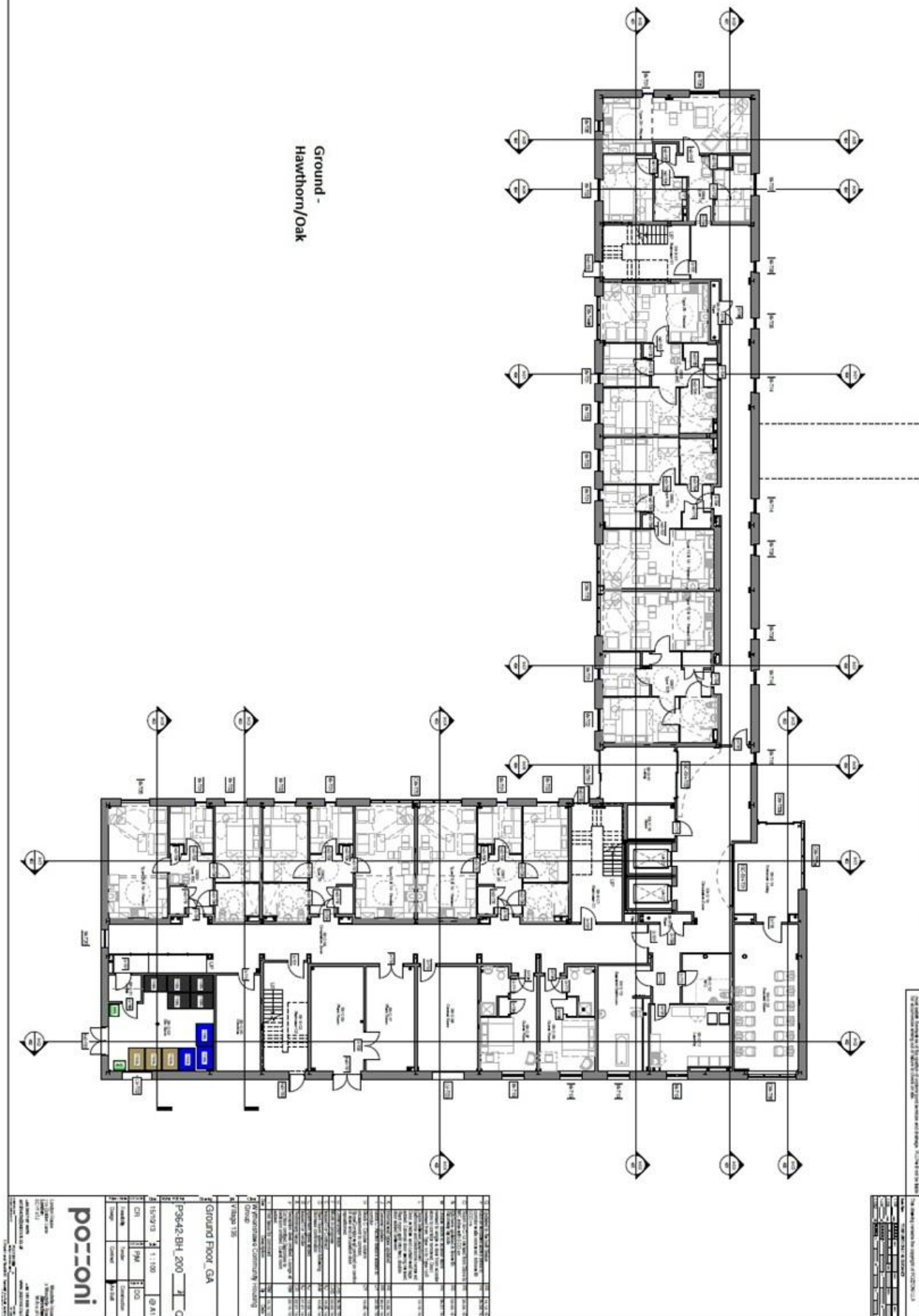


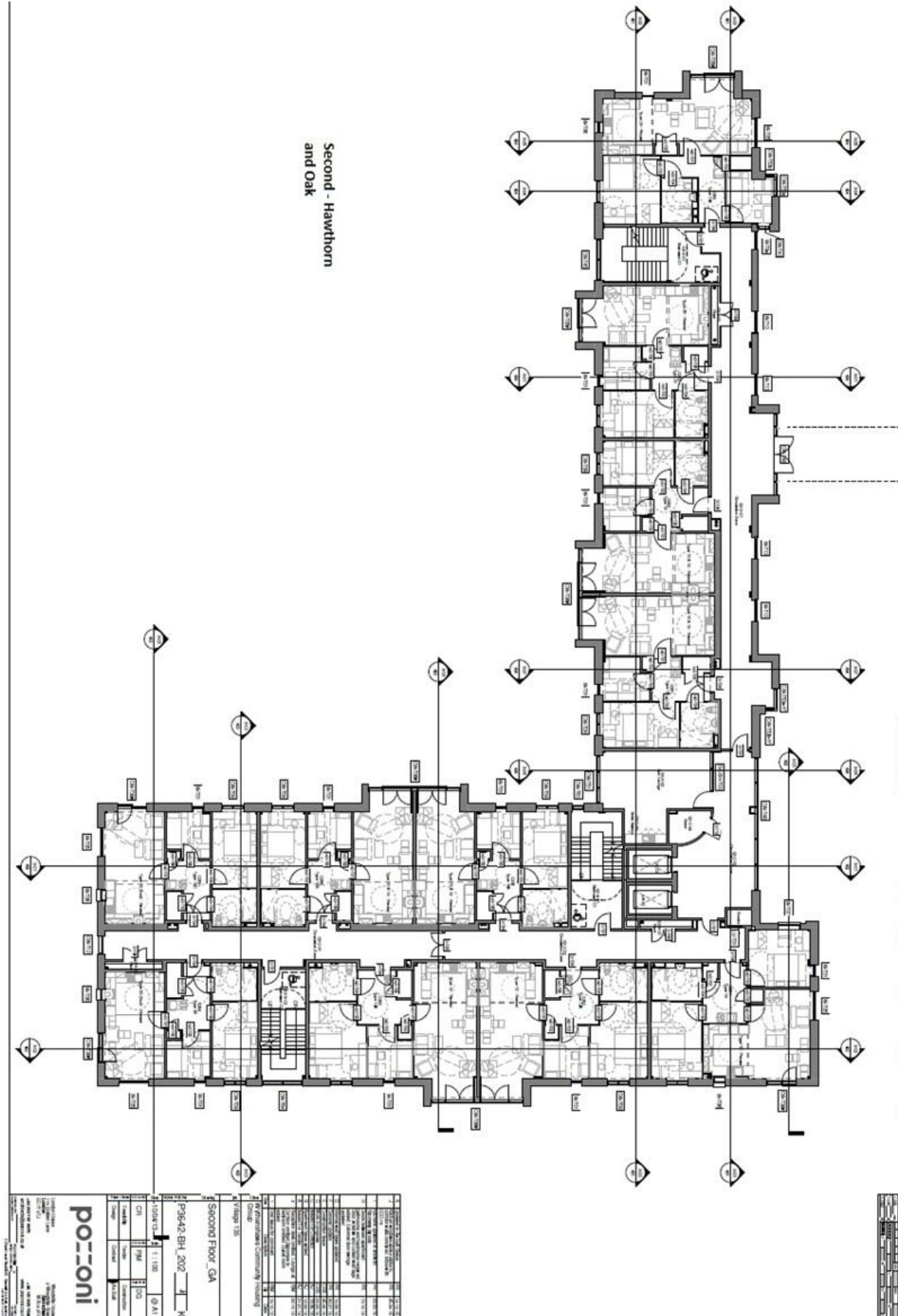
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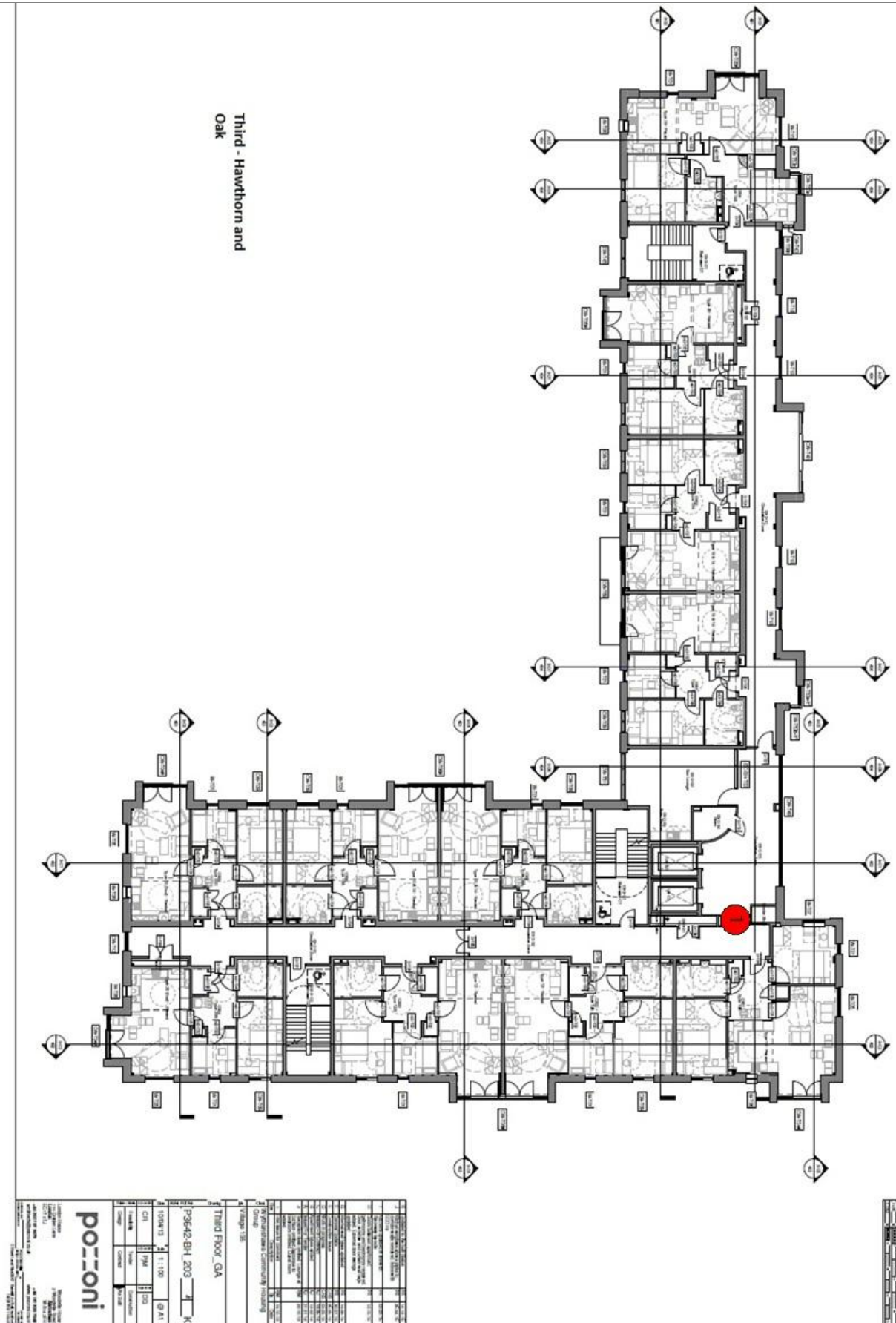


## BH Ground





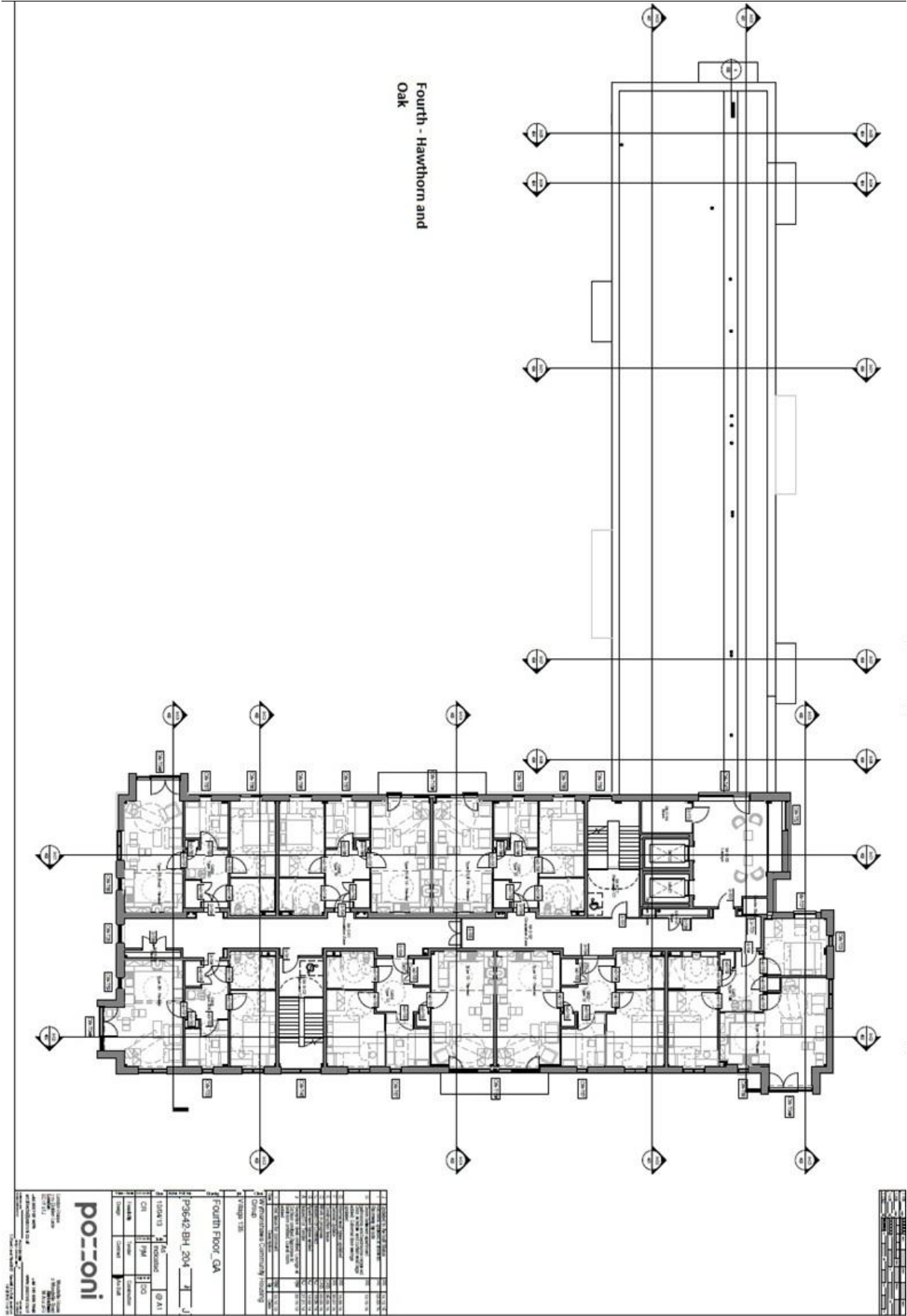




## 1 The Confinement of Fire - 9.5

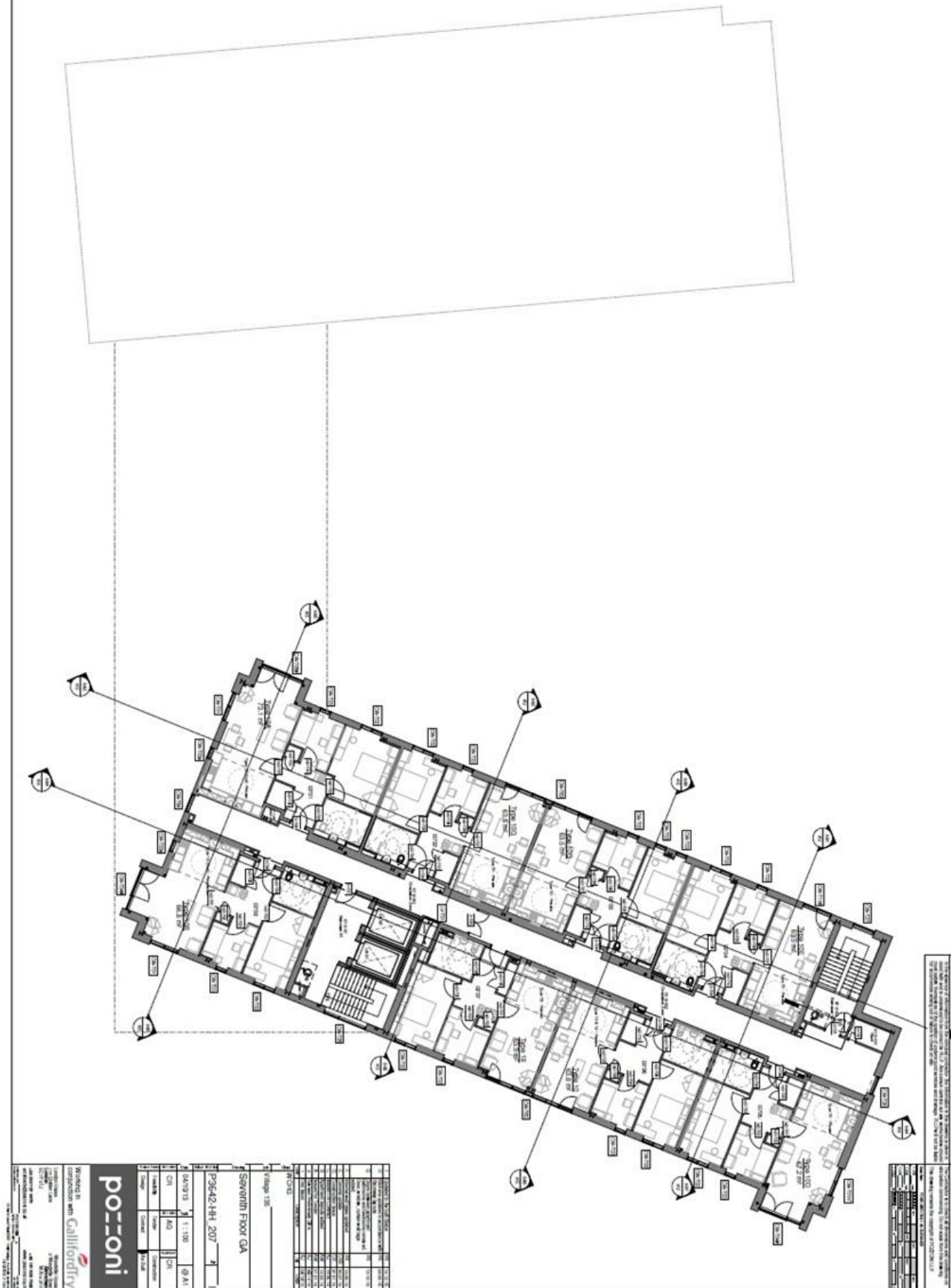


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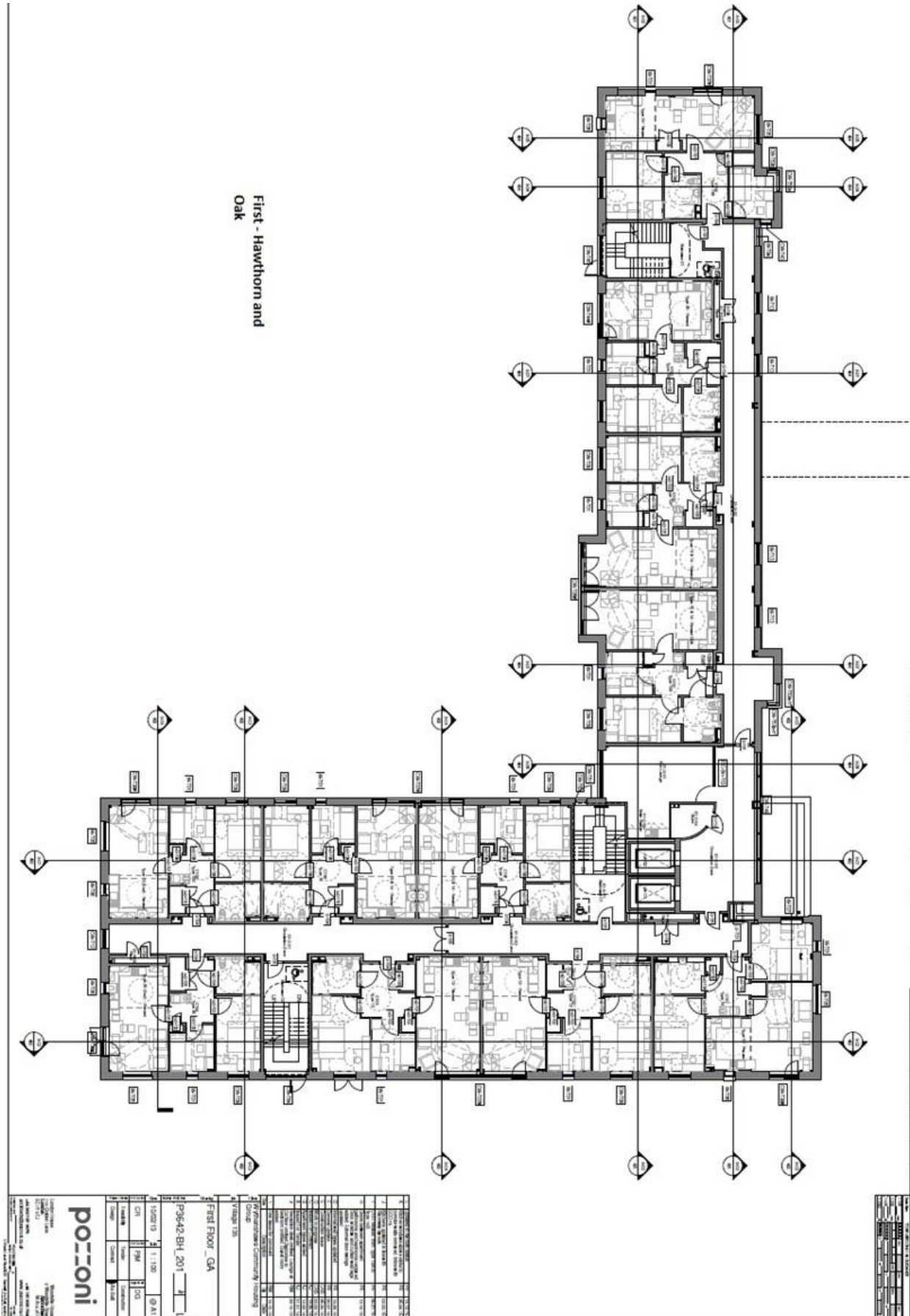




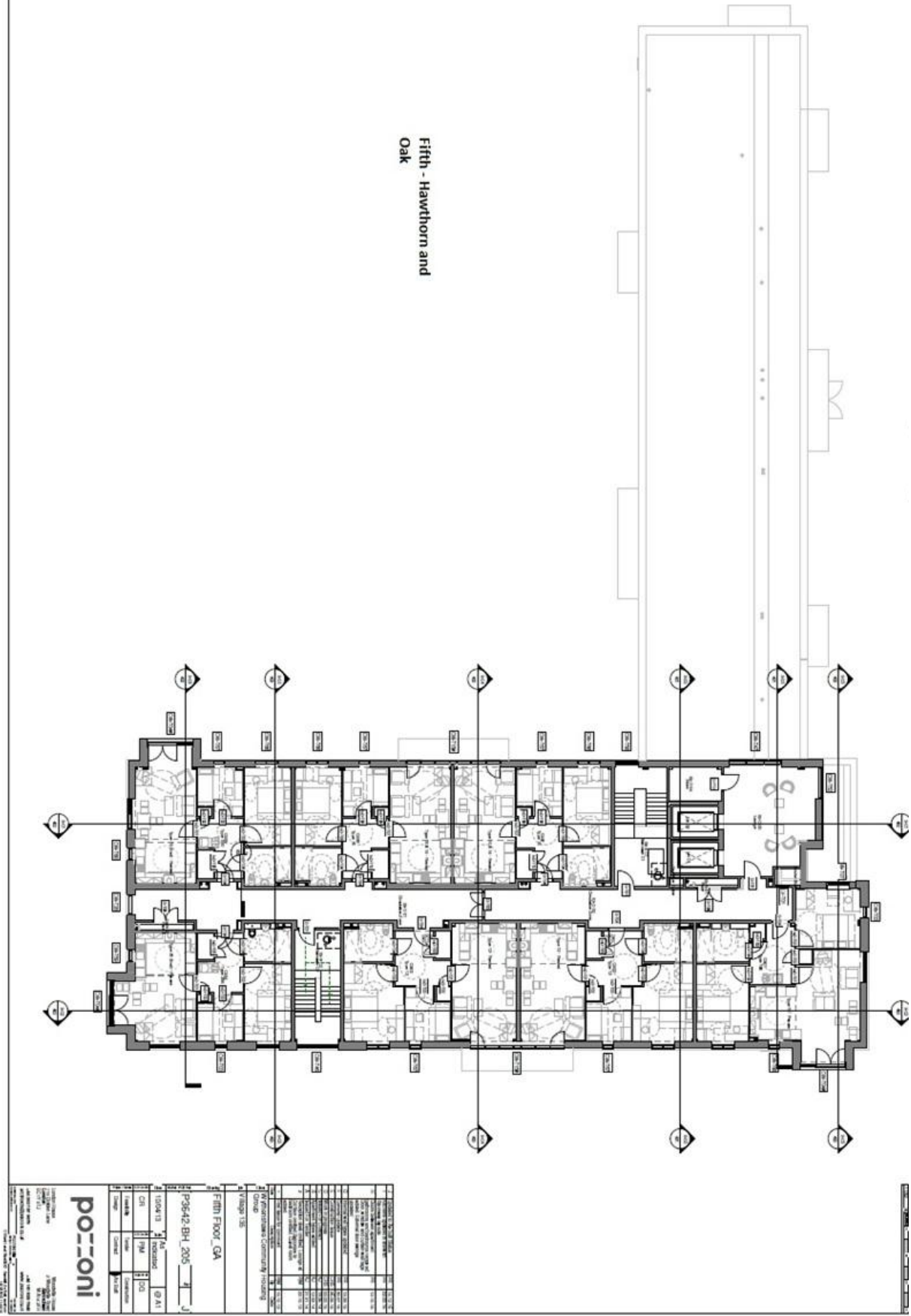
HH 7th



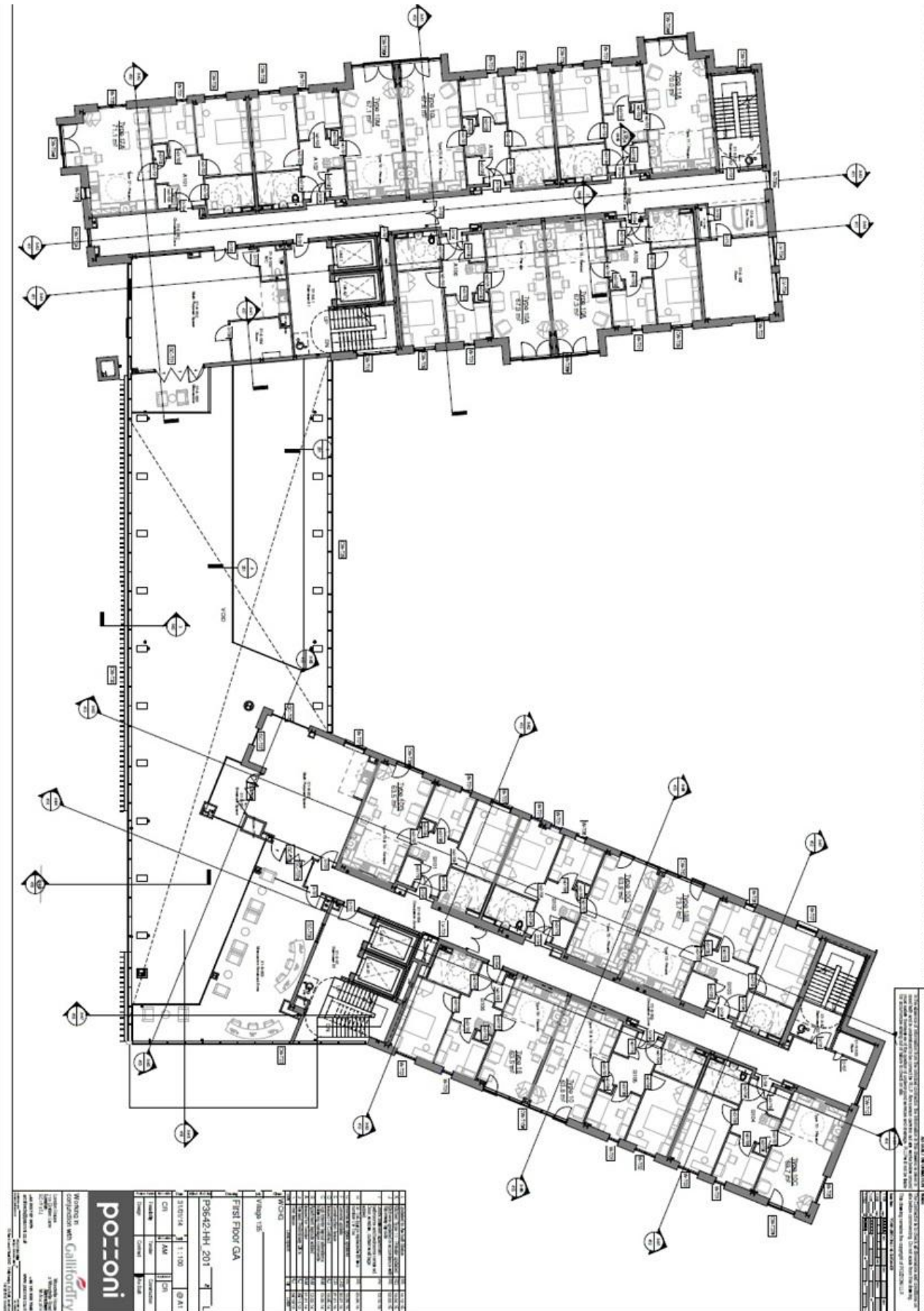
## BH 1st

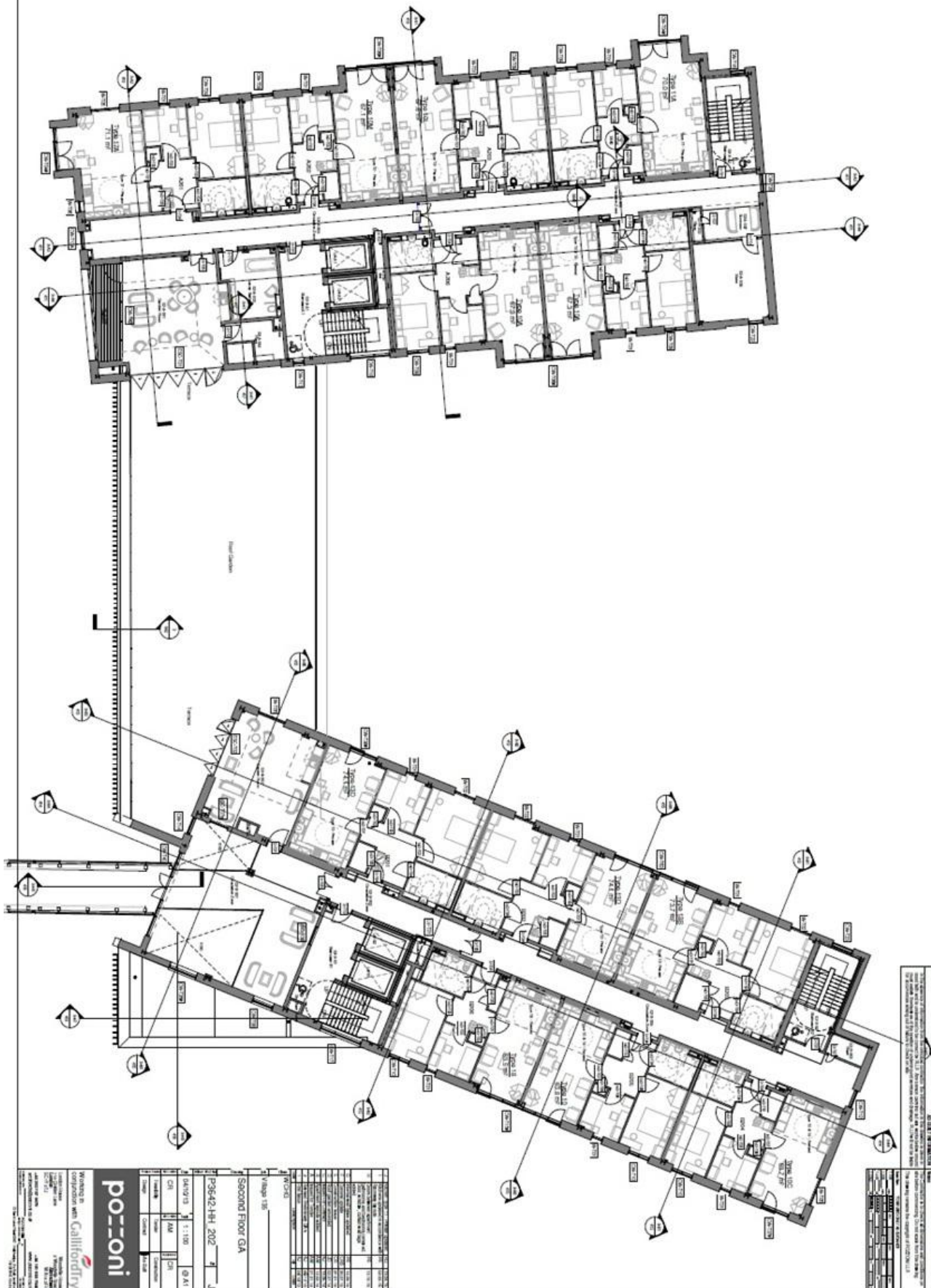


BH 5th



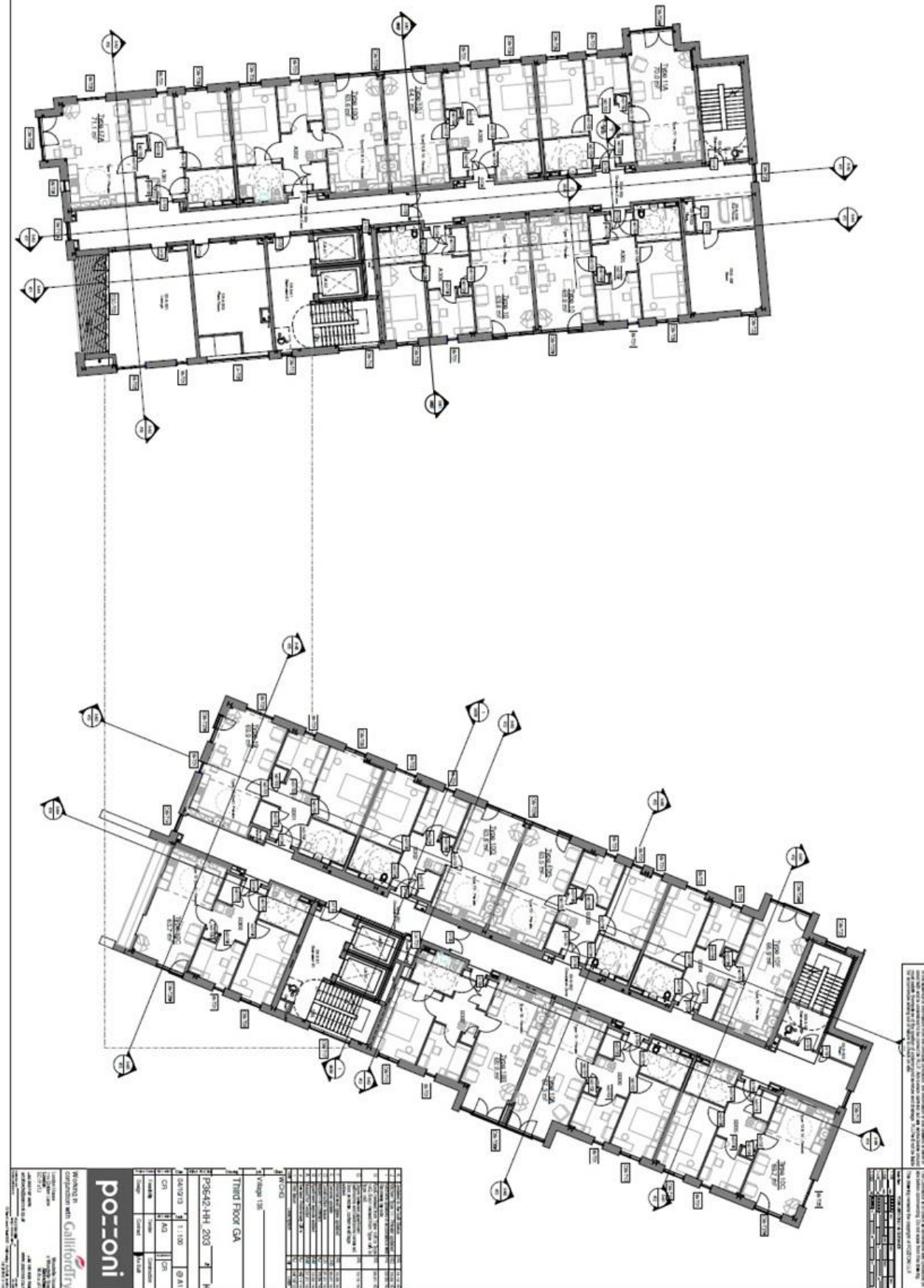




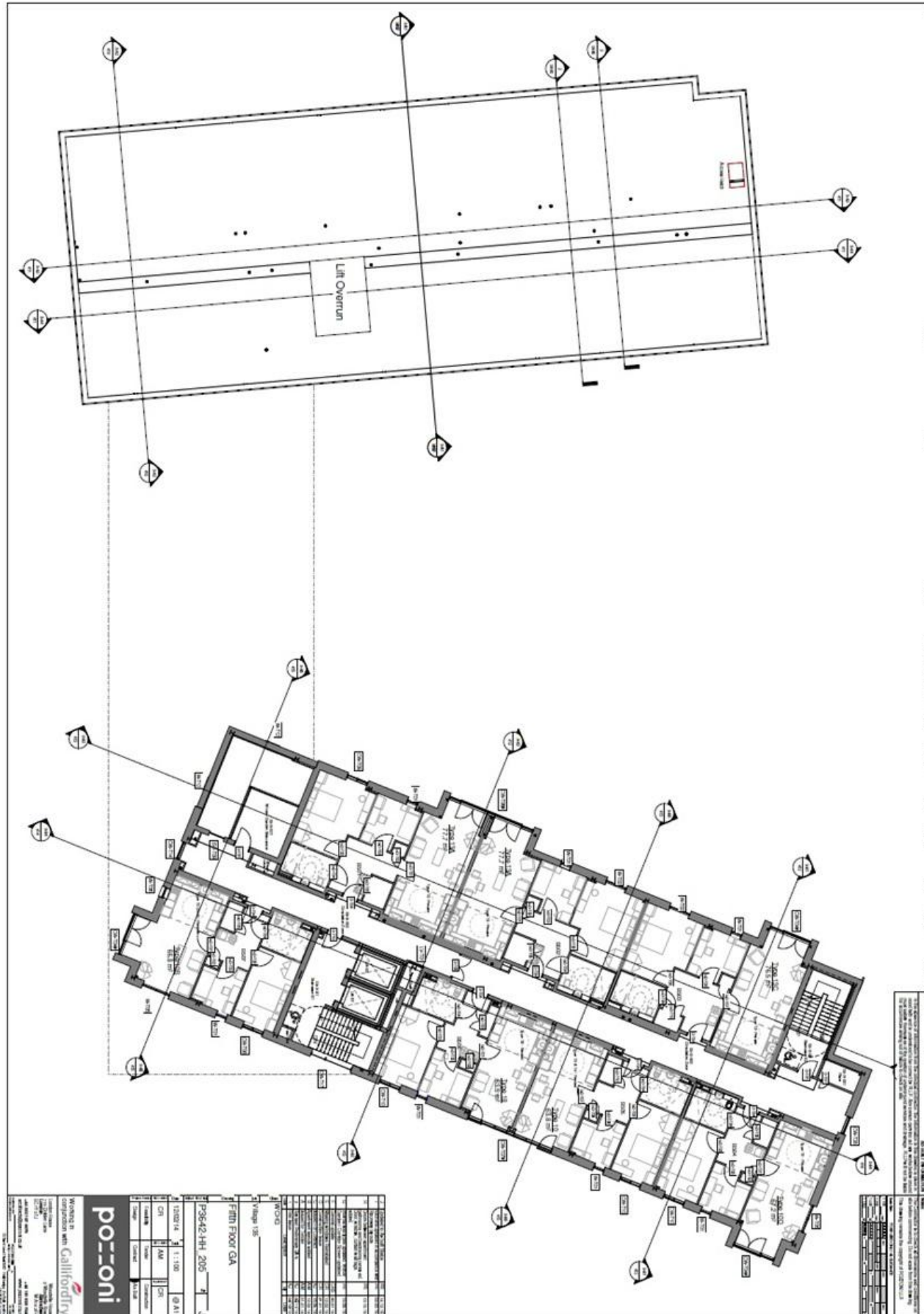




## HH 3rd



## HH 5th





## HH 6th

