



TOTAL FIRE GROUP LTD

Fire Risk Assessment Interim Review

Conducted at:

Village 135
3 Hollyhedge Court Road
Wythenshawe
Manchester
M22 4GW



24 July 2020



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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 **Friday, 24 July 2020**

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
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 as owner and as having control in the premises.

Person(s) consulted and landline contact number:

Ms Amanda Seals, Senior Manager.

Fire Risk Assessor:

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

Audited by:

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

Date fire risk assessment was conducted:

Friday, 24 July 2020

Time:

09.00

Date of last FRA or FRA Review (if known)

08 Feb 2020

Suggested date for next review:

February 2021

Fire risk assessment limitations:

A Type 3 common parts and flats (Non-Destructive) Fire Risk Assessment Review (using the latest MHCLG, NFCC guidance and the document Fire Safety in Purpose Built Blocks of Flats) has been completed with access available to flat(s) 55. Due to the vulnerabilities and disability of some of the residents along with the care support provided, the guidance "Fire Safety in Specialised Housing" is also considered.

This interim review has been carried out following installation of fire alarm sounders to all apartments as recommended in the last fire risk assessment review; a sample of cable penetrations have been observed on-site and through contractors photographs. A full review of the whole building and all previous recommendations was not conducted and this interim review should be read in conjunction with the review dated above. Most of the findings are repeated in this review for consistency and some may have been addressed.

There were no outstanding notices of deficiencies/enforcement action from the enforcing authority.

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

Note

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

2.0 General Premises Details

2.1 Number of floors:

Hub - 2 storeys with roof garden.

Block A, Redwood is 5 storeys approximately 12.9 m top floor height.

Block B, Cedar is 8 storeys approximately 22.5 m top floor height.

Block C, Hawthorn is 6 storeys approximately 16.1 m top floor height.

Block D, Oak is 4 storeys approximately 9.7 m top floor height.

2.2 Approximate building footprint:

The overall site covers approximately 3500m²

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 center 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 release devices.

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

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

2.4 Occupancy/Purpose Groups

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

2.5 Approximate maximum number of persons:

282.

2.6 Approximate maximum number of employees at any one time:

12 consisting of up to 6 care staff and 6 WCHG staff. At night a minimum of 2 care and 1 WCHG staff are present.

2.7 Maximum number of members of the public:

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

2.8 Occupants at Special Risk:

<i>Sleeping occupants</i>	
Persons familiar with the premises	Yes
Persons unfamiliar with the premises	Yes
<i>Occupants with disabilities</i>	
Mobility-impaired	Yes
Hearing-impaired	Yes
Learning difficulties	Yes
Occupants in remote areas	No
Others	No
Comments	
<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 on taking up residence and regularly reviewed. Residents are encouraged to have a health and wellbeing check carried out by Greater Manchester Fire and Rescue community support staff.</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 is likely to be identified and any relevant PEEP produced.</p> <p>The latest 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 significant finding 9.13.</p>	

2.9 Fire Loss Experience

None.

3.0 Overall Risk Rating

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

Risk to Life: Moderate.

There are a number of significant findings with an individual moderate risk rating and the overall risk to life is considered moderate.

However, when the significant findings and recommendations identified within this Fire Risk Assessment are addressed the risk to life will be reduced to tolerable.

The risk rating has been determined after considering the fire risk rating matrix in section 17.0. In these premises it is considered that the risk of a fire occurring is unlikely and the likely consequences of harm from fire (should one occur) are moderate harm.

Risk to Property: Moderate

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

Risk to Business Continuity: Tolerable

A business continuity plan is in place.


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

4.0 Dangerous, Flammable, Combustible Materials & Substances

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
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
4.0	Residents identified as using medical oxygen within their apartment have a warning sign placed on entry to the apartment. 
4.1-4.2	Questions 4.1 and 4.2 relate to substances and materials which are subject to the "Dangerous Substances and Explosive Atmosphere Regulations 2002" (DSEAR). No substances or materials falling into the above regulations are stored or used inside the premises.
4.8-4.10	The refuse bins are stored at the ground floor level internally with secure door external doors.

5.0 Interior Furnishings

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

5.0 Interior Furnishings: Finding(s)

Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
5.1	<p>All soft furnishings in the common areas are relatively new and a sample of labels was observed indicating the furniture to be fire retardant.</p> <p>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. There is no furniture in the corridors where direct access into apartments is provided.</p>

6.0 Heating and Electrical Appliances

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

6.0 Heating and Electrical Appliances: Finding(s)

Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
6.1	The building is provided with biomass heated hot water central heating.
6.5	Portable electric appliances in the Hub and communal rooms have been tested in April 2019.
6.5	The mobility scooter chargers in both scooter storerooms have labels indicating they are subject to a periodic PAT test as previously recommended.
6.6	The main electrical installation will be due for re-test in 2021 and the residential apartments in 2026.
6.7	There is a policy in place preventing the use of personal portable electrical equipment within the common areas. One piece of equipment authorised for use (karaoke machine) has undergone a PAT test.
6.10-6.11	It is assumed appliances are fitted with the correct fuses as they are relatively new. The site manager is available to deal with any localised failure of portable equipment.
6.18	Kitchen staff previously confirmed the kitchen filters are regularly removed and cleaned.
6.20	The automatic opening ventilators for smoke control are serviced and tested by a specialist with records held by WCHG facilities department and were not observed by our consultant. See significant finding 8.5.
6.21	Lightning protection systems are serviced periodically. Records are held electronically on internal systems.

7.0 Persons at Risk Audit

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

7.0 Persons at Risk Audit: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
7.2	From the original fire strategy report, the occupancy of the communal Hub space is based on a floor space factor of 1.5 m ² 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 ² per person, the Hub is considered to safely accommodate up to 280 persons depending on furniture layout. All normal and emergency exits should remain clear of obstructions for their full width.
7.5	Residents are constantly monitored by staff and undergo a well-being check when necessary and at periodic intervals. During the well-being check, any issues regarding the mobility or capacity to respond to the emergency procedures are assessed and PEEPs formulated where necessary. In identifying any vulnerable persons in case of fire, a Person Centred Fire Risk Assessment is carried out and risk reduction measures implemented where necessary. Prior to the previous fire risk assessment review in February 2020, a review of all PEEPs has been made and updated. Further to the findings regarding the external cladding systems, staff have engaged with all residents to explain the reasons for the scaffolding 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 apartment.
7.5-7.8	<p>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.</p> <p>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 or escape)</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>The outcomes of the PCFRA will assist the Responsible Person to formulate an effective emergency plan for those premises.</p> <p>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.</p> <p>The NFCC guide is available at: https://www.nationalfirechiefs.org.uk/News/nfcc-launches-specialised-housing-guidance</p> <p>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.</p> <p>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.</p> <p>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.</p>
7.6-7.7	A number of "Evacuation chairs" have been provided and strategically placed in escape stairs where disabled refuges are located. The location of the nearest two evacuation chairs is displayed by the communications point in each disabled refuge not provided with an evacuation chair as previously recommended. Evacuation chair training for staff has been arranged and is due to take place by way of refresher training by an external provider.
7.8-7.9	It was confirmed fire drills for staff are carried out and recorded. Records of fire drills were not observed by our consultant on this occasion.
7.10-7.11	Public, visitors and contractors are required to sign in.
7.12	Restricted areas are kept locked.
7.14	Two guest rooms are provided on each of the ground floors of blocks B and C.


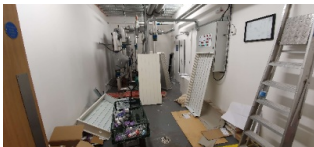
8.0 Escape

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

8.0 Escape: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	Observation
8.5	The latest industry guidance has identified issues with electromagnetic holding devices for smoke vents which can have an unpredictable performance leading to failure under fire conditions. Such failure can occur due to a loss of power to the devices, or through the magnetic fields of the devices being weakened as temperatures in and around the smoke shaft increase. Such a failure during a fire is likely to render the escape route untenable placing relevant persons at risk of harm.
	Recommended Actions
8.5	<p>The competent persons responsible for testing and maintaining the smoke ventilation system should be consulted to confirm the method of operation with regard to the use of electromagnetic holding devices as part of any smoke ventilation shaft installation. Where installed, the system should be reviewed with consideration being given to replacing these devices with a more robust form of vent actuator.</p> <p>Where a repair cannot be carried out immediately, a review of the fire risk assessment should be carried out to determine whether mitigation measures should be put in place. The local Fire and Rescue Service should also be informed and consulted on the planned mitigation measures.</p>
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
8.5	The roof garden was observed to be unlocked and keys are provided on hooks by each entrance door. The procedure when opening the garden is to unlock both doors of the garden to provide alternative exits. Albeit not essential as there is a substantial distance between the escape routes within the open air and any fire is highly unlikely to present a significant risk to persons on the roof garden. The correct keys were observed, as with the last review, to be in position by each door.
8.5	Article 17 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to provide a suitable system of maintenance for any facilities, equipment and devices so that they are maintained in good working order.
8.6	The corridors and escape routes were observed free from obstructions and unauthorised combustible materials, and a very high standard of housekeeping is being maintained.
8.11	A weekly means of escape check is carried out and recorded. Domestic and maintenance staff are moving around the common areas throughout each day and any issues are dealt with immediately.

9.0 The Confinement of Fire

9.1	Are all escape routes and compartments protected by fire resistant walls and doors where required?	Yes
9.2	Are all fire doors self-closing, kept locked shut where appropriate and in good condition?	No
9.3	Are all fire doors fitted with smoke seals and intumescent strips where required?	No
9.4	Do wall & ceiling linings meet the required surface spread of flame classes? e.g. Class O on escape routes	Yes
9.5	Have any breaches in the fire resistance (walls, floors and doors) been fire stopped with appropriate fire resisting materials?	Yes
9.6	Have there been any structural alterations within the past 12 months?	Yes
9.7	Were the requirements of the Building Regulations followed and a completion certificate issued?	No
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?	Yes
9.15	Are the premises secure from any potential fire hazards outside susceptible to arson attack that could affect the building?	Yes
Automatic Hold Open Devices		
9.16	Are any fire doors fitted with automatic door release devices?	Yes
9.17	Are the devices fitted to any critical doors? e.g. onto stairs in a single staircase building	No
9.18	Is smoke detection provided within the area located near to the door release device? (Consider to L3 standard?)	Yes
9.19	Are all non-self-contained devices linked to the fire alarm system and released on actuation?	Yes
9.20	Are any self-contained, acoustically actuated door hold open devices fitted?	No
9.21	Are all devices tested regularly and the results recorded? (At least once a week)	Yes
9.22	Are all doors released at night or when the area is unoccupied?	N/A
9.23	Are all devices tested in accordance with the manufactures relevant standard to ensure satisfactory operation?	Yes

9.0 The Confinement of Fire: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	Observation
9.2	<p>The following fire door defects are identified for remedial action:</p> <ul style="list-style-type: none"> Block C Hawthorn refuse room inner lobby door not closing fully. Block B Cedar refuse room inner door wedged open, the outer door not closing fully. <p>Fire doors that do not close on activation of the fire alarm may allow smoke to spread throughout the escape route placing relevant persons at risk of harm.</p>
	Recommended Actions
9.2	Arrange for the doors identified to be adjusted/repaired.
	Observation
9.13	<p>Following guidance from the Ministry of Housing Communities and Local Government (MHCLG), investigations into the external cladding system are underway. An analysis of the materials used with regard to their combustibility and flame-retardant properties along with specific installation and positioning has been carried out by Tenos Fire Safety Engineers who have recommended further investigations to be carried out by the specialist contractors on the following:</p> <ul style="list-style-type: none"> Zinc cladding HPL Prodema cladding Spandrel panels External wall insulation materials Cavity barriers and fire-stopping <p>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.</p> <p>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 MHCLG guidance recommends the risk of external fire spread should be considered for all residential buildings regardless of top floor height.</p> <p>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 MHCLG guidance where combustible materials prohibited in buildings over 18m are deemed suitable in low rise buildings and 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 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 to that of Blocks A & B.</p> <p>The current investigations by specialist contractors are likely to determine the remedial measures required. 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.</p>
	Recommended Actions
9.13	On completion of the investigations by specialist cladding contractors, any recommendations should be fully implemented. 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 recommended Blocks C & D are examined and included in the remedial measures recommended for Blocks A & B.
	Observation
9.14	<p>The following areas were identified as having unauthorised combustible storage that increases the fire hazard:</p> <ul style="list-style-type: none"> The lobby leading to the Block B refuse room. (Photo 1) The electrical switch room in Block B Cedar. The water pump room in Block C Hawthorn. (Photo 2) <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">  <p>1.</p> </div> <div style="text-align: center;">  <p>2.</p> </div> </div>
	Recommended Actions
9.14	Arrange for the items to be removed, the doors kept locked, and a regular check made to ensure the areas remain clear of stored items.

Ref	RECOMMENDATIONS
	<i>Observation</i>
9.2	The threshold gap at the base of the entrance door to apartment 117 is in excess of 15mm. No access was made by our consultant however a thick pile carpet is fitted on the inside of the apartment which appears to be in contact with the bottom of the door and may restrict the spread of smoke in the event of a fire. The door was not confirmed to self close effectively.
	<i>Recommended Actions</i>
9.2	At the next weekly fire alarm test, the door to apartment 117 should be in the open position with the automatic self closer in the free swing mode. A check should be made that the door closes freely against the rebate on activation of the fire alarm. Where necessary any findings reported should be remedied as a matter of priority.
	<i>Observation</i>
9.3	The cross corridor door on the 4th floor in Hawthorn has a loose combined strip and seal at the meeting edge of the double doors.
	<i>Recommended Actions</i>
9.3	Arrange for the combined strip and seal to be firmly fixed into the rebate.

Ref	COMMENTARY
9.0	Previously identified, a significant number of fire doors had excessive threshold gaps which have been rectified in a number of ways. A timber strip added to the base of the door, a threshold floor plate or timber strip (on locked cupboards) fixed to the floor covering or a mechanical "drop-down" threshold seal has been fitted according to the size of the gap found.
9.2	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.
9.2	<p>Fire door checks are currently carried out on a periodic basis. It is important that a doorsets' fire resistance performance is measured and is routinely and professionally assessed; recently 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:</p> <ul style="list-style-type: none"> • 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. <p>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.</p> <p>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.</p> <p>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.</p> <p>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</p>
9.2	Apartment 124 in Oak, the entrance door is left in the open position to allow easy access and egress for the disabled resident. This is considered suitable because the door is controlled by a free-swing self-closing device and on activation of the automatic fire warning system the door will automatically close. Should the occupant require assistance, the procedure is for care staff to respond and assist without taking personal risk.
9.7	A report by Tenos on matters of compliance of external cladding with Building Regulations has been produced and following recommendations, contractors are in the process of opening up areas of the façade to check material combinations and presence of cavity breaks etc against as-built details. Observations so far have revealed deficiencies and issues with foam insulation and HPL cladding combinations, spandrel panelling and missing or defective cavity breaks. Interim measures have been verbally suggested and implemented and are further documented in this fire risk assessment review. When the full extent is known remedial measures are to be taken to ensure compliance with current Building Regulations approved guidance.
9.13	<p>MHCLG guidance</p> <p>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.</p> <p>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 no longer 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:</p> <ul style="list-style-type: none"> • 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 to allow for extended evacuation times. <p>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.</p>
9.13-9.14	Article 8 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to take general fire precautions to ensure the safety of relevant persons.

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.
9.14	The car park adjacent to Block B has barriers to prevent cars from parking in close proximity to the facade as previously recommended.

10.0 Fire Alarm System

FIRE SAFETY PROVISIONS

10.1	Is the premises provided with a fire alarm system?	Yes
10.2	Is it possible to define the alarm system category? (L1- L5 etc.)	Yes
10.3	Is the fire alarm or category suitable for the risk and premises type?	Yes
10.4	Does the system conform to standards appropriate to the purpose group for the premises/building use? i.e. BS 5839 Pt. 1 or BS 5839 Pt. 6 etc.	Yes
10.5	Are sufficient fire alarm call points and detectors provided?	Yes
10.6	Can the alarm be raised without placing anyone at risk?	Yes
10.7	Are all call points visible, unobstructed?	Yes
10.8	Are all fire alarm sounders of the same type, giving the same alarm signal? The signal should be distinct from all other alarms or signals in the workplace to avoid confusion.	Yes
10.9	Where required does the system have a voice alarm? i.e. large places of assembly	N/A
10.10	Can the alarm be heard throughout all areas of the premises?	Yes
10.11	Has a suitable fire zone plan been provided adjacent to the fire panel where necessary? i.e. complex premises or care homes	Yes
10.12	Is the alarm system under a regular maintenance programme by a qualified fire alarm engineer?	Yes
10.13	Are there systems in place to ensure the system is tested weekly from a different call point?	Yes
10.14	Are all fire alarm tests, faults and maintenance schedules recorded?	Yes

10.0 Fire Alarm System: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
10.2	<p>The system installed within each apartment appears to conform to BS 5839 Part 6; 2013 to at least Grade C category LD 2 standard with a heat detector located in the kitchen and a smoke alarm in the hallway of each flat. The system is linked to the "Dect" care call phones with each member of care staff carrying a receiver and call point in the reception/ office. A fully addressable BS 5839 part 1 fire detection and warning system is installed within the common areas with a linked heat detector and 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 common areas within the block of activation.</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 interim review.</p> <p>The updated cause and effect was verbally confirmed to achieve the following:</p> <ul style="list-style-type: none"> • 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 • on activation of the common fire alarm system, staff receive a notification at the DECT panel and mobile handsets • on activation of the full alarm in Block A, the evacuation sounders in A and the Hub sound • on activation of the full alarm in Block B, the evacuation sounders in B and the Hub sound • activation in the Hub, the evacuation sounders in A & B + Hub sound • on activation of the full alarm in Block C, the evacuation sounders in C & D sound and the fire panel in the Hub provides an audible warning • on activation of the full alarm in Block D, the evacuation sounders in C & D sound and the fire panel in the Hub provides an audible warning <p>A full evacuation can be manually activated at the fire panel by staff or the F&RS. This procedure has previously been verbally agreed between Fire Safety Inspecting Officers from GMFRS and Ms Amanda Seals.</p>
10.10	<p>The common fire alarm has been extended to provide sounders inside the hallway of the apartments to achieve 75dBA as recommended to support the simultaneous evacuation in each block. (this would not be a requirement of the system under a stay put strategy and is considered an interim measure until external cladding/insulation replacement). Care staff are trained to assist mobility-impaired residents of the affected zone/s</p> <p>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"> • On confirmation of fire via the social alarm communication system, or • No response from the resident via the social alarm communication system, or • Activation of a manual fire alarm call point, or • 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. • Loss of communication between staff member in charge and investigating staff.
10.12-10.14	<p>Fire alarm maintenance procedures are in place with regular weekly tests carried out and recorded in the fire log book. All staff take part in the fire alarm tests on a rotational basis to ensure familiarity with interpreting and operating the fire control panels and Dect phone system.</p>

11.0 Emergency Escape Lighting

11.1	Has the provision of emergency lighting been considered? Working hours, windowless areas, open access areas>60m ² , toilets>8m ² .	Yes
11.2	Is emergency lighting provided in accordance with guidance relevant to the purpose group for the premises? (BS5266, ADB Table 9)	Yes
11.3	Does it illuminate escape routes, exits, corridors, hazards or obstructions, changes in floor level, signs, fire alarm call points and firefighting equipment?	Yes
11.4	Is the emergency lighting beyond the final exit adequate so that persons can reach a place of safety?	Yes
11.5	Are routine checks carried out in accordance with the appropriate standard to which the system conforms – i.e. daily, monthly, 6 monthly and annual checks?	Yes
11.6	Are records of maintenance kept?	Yes
11.7	Is normal lighting adequate and in working order?	Yes

11.0 Emergency Escape Lighting: Finding(s)

Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
11.5	Emergency lighting maintenance procedures are in place and periodic tests of the system are carried out and recorded.

12.0 Fire Fighting Equipment, Systems & Fixed Installations

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

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

Ref	SIGNIFICANT FINDINGS
	Observation
12.5	<p>A number of portable fire extinguishers (listed below) located in locked areas appear to have been missed on the last annual service. The date indicating the last service is recorded as 2/18 on each extinguisher. Fire equipment that is not serviced and tested as recommended may not be relied upon in time of an emergency and may place the operator at risk of harm.</p> <ul style="list-style-type: none"> Hawthorn refuse room Main electrical room on the ground floor of block B Cedar
	Recommended Actions
12.5	Arrange for the extinguishers listed to be serviced by a competent person and the service records updated.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
12.3	Portable firefighting equipment would not be generally sited in the corridors to flats as this may pose a risk to residents leaving their flat on fire and returning with a fire extinguisher placing them at increased risk where not trained. However, the premises are staffed 24 hours a day with staff responding to any fire alarm and the availability of fire equipment is considered suitable.
12.5	Firefighting equipment is regularly serviced with the latest date of February 2019 indicated on each device which forms the basis for the annual servicing schedule. Weekly checks on the equipment are carried out by the building manager.
12.5	Article 17 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to provide a suitable system of maintenance for any facilities, equipment and devices so that they are maintained in good working order.
12.10	Dry risers are provided.

13.0 Fire Safety Signs and Notices

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

13.0 Fire Safety Signs and Notices: Finding(s)

Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
13.10	The door to central store was observed to be kept locked with signs fixed as previously recommended. An electromagnetic lock has been fitted with suitable emergency override on the escape side of the door.

14.0 General Fire Safety Procedures

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

14.0 General Fire Safety Procedures: Finding(s)

Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
14.1, 14.4	Any reports of fire or false alarms should be fully investigated and where necessary control measures implemented to reduce the possibility of further occurrences. Following any outbreak of fire, the Fire Risk Assessment should be reviewed to identify if any further risk reduction measures are necessary.
14.3	False alarms have occurred within apartments due to cooking and residents informed of the measures to reduce the occurrence of false alarms. Due to the staff investigation procedures in place there has been no escalation and the fire service has not been unnecessarily called.
14.7	The WCHG Housing Manager is the nominated person on-site responsible for ensuring the fire precautions are implemented and managed correctly on behalf of WCHG who has the overall responsibility.
14.8	The local Fire and Rescue Service have visited on a number of occasions to carry out familiarisation visits for the gathering of operational information, community visits to advise residents on home fire safety and fire protection officers have visited to advise on any requirements following the Grenfell tower block fire.

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

15.0 Fire Safety Management: Finding(s)	
Ref	SIGNIFICANT FINDINGS
	Observation
15.13	A documented fire safety plan was not observed nor confirmed given the originally written procedure was based around a stay-put strategy; the revised procedures should be clearly documented based on the commentary 15.12-15.13 which was verbally confirmed to be currently the case. Persons may take inappropriate action in the event of a fire placing themselves and others at risk of harm.
	Recommended Actions
15.13	Where necessary it is recommended the fire safety plan is updated and clearly documented in order for any member of staff, resident, visitor or contractor to read to gain a full understanding. Relevant persons should be informed of the plan or any changes where necessary. Regular checks and fire drills ought to be carried out to ensure the plan is current and effective.
Ref	RECOMMENDATIONS
	Observation
15.13	During the meeting 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. 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. 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 providing emergency information is available on the arrival of the FRS.
	Recommended Actions
15.13	Re-evaluation and constant monitoring by way of practice fire drills for care & housing management staff to ensure suitable levels of staff are available whilst a simultaneous evacuation strategy remains in force. Prepare (high level) vulnerable person information that 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. Arrange for a consultation with the local fire safety inspecting officer to discuss the findings within this fire risk assessment review, in particular, reverting back to a stay-put strategy and the reduction of housing management staff at that time.

Ref	COMMENTARY
15.1	Competent contractors and staff are employed to maintain and manage the fire protection and fire prevention systems.
15.2-15.4	<p>All staff including care staff have recently received fire marshal training with a record maintained on their personal file. Records of fire marshal training were not observed.</p> <p>All staff and residents have recently been informed of the evacuation procedures, the reasons for and the health and safety requirements surrounding the scaffolding erected for the investigation of the cladding system. This was followed up with a door knock on all residents doors to ensure all have been informed. During the door knock, the apartment entrance doors were checked and all portable electrical equipment in each apartment and smoke alarms were tested by Friday 14th February.</p>
15.5-15.6	Previously confirmed, all approved contractors are provided as part of the service level agreement and are expected to have been vetted to satisfy these requirements. Any work carried out by contractors that affects the fire compartmentation for the installation of cables and pipework is carried out by approved contractors who are instructed to provide before and after photos along with the methods and materials used to fire stop any holes on completion. An example of photos on an email (Texon) of recent cabling work was observed by our consultant and appeared to be a satisfactory standard.
15.13	Article 15 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to establish and where necessary give effect to appropriate procedures including safety drills to be followed in the event of serious and imminent danger to relevant persons and where necessary nominate a sufficient number of competent persons to aid evacuation.

15.13	<p>Fire Strategy - STAY PUT v Simultaneous evacuation Village 135 and legal duty to provide sufficient staff.</p> <p>Stay Put</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>Due to external wall cladding system and the potential for a fire to breach the compartmentation a simultaneous evacuation strategy is currently in operation.</p> <p>Simultaneous Evacuation</p> <p>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:</p> <ul style="list-style-type: none"> • 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 <p>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 system.</p> <p>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 themselves.</p>
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16.0 Fire Emergency Plan

16.1	Do the premises have a fire procedure/emergency plan and is it suitable for the numbers of staff and the processes carried on within the premises?	Yes
16.2	If the premises operates a "stay put" policy, is this suitable?	No
16.3	In multi-occupied buildings do all the fire /emergency plans complement each other?	N/A

16.0 Fire Emergency Plan: Finding(s)

Ref	SIGNIFICANT FINDINGS	
	None.	
Ref	RECOMMENDATIONS	
	Observation	
16.2	The Stay Put (stay safe) fire strategy as designed is not fit for purpose due to the materials used in the construction of the external facade. This has previously been revoked and a simultaneous strategy implemented as an interim measure.	
	Recommended Actions	
16.2	Following the survey of the materials used in the build up of the facade all the recommendation made by the specialist contractor/ fire engineering consultants should be implemented prior to any return to a stay put fire strategy.	
Ref	COMMENTARY	
16.1	For simultaneous fire evacuation purposes, the following areas are to be considered a full evacuation zone on manual (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

Fire Emergency Plan FLATS

FULL EVACUATION

GENERAL ADVICE TO RESIDENTS

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

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

AT ALL TIMES

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

IF A FIRE BREAKS OUT IN YOUR FLAT

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

- Do not stay behind to try to put the fire out, unless you have received suitable training.
- Tell everybody else in your flat about the fire and get everybody to leave.
- Close the front door and leave the building.
- Raise the alarm by using a 'break glass' call point. (IF FITTED)
- Alert your neighbours IF SAFE TO DO SO
- CALL THE FIRE SERVICE.

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

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

CALLING THE FIRE SERVICE.

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

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

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

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

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

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

THE ABOVE PROCEDURE SHOULD BE COMMUNICATED TO EACH RESIDENT.

17.0 Risk Analysis, Priority Ratings and Fire Risk Ratings

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

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

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

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

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

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

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

FIRE RISK RATING MATRIX

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

18.0 Summary of Findings

FRARef	Hazard or Defect	Action Required	Hazard Priority	Risk Rating	Action By	Review Date	Contractor Completed
8.5	The latest industry guidance has identified issues with electromagnetic holding devices for smoke vents.	The competent persons responsible for testing and maintaining the smoke ventilation system should be consulted to confirm the method of operation with regard to the use of electromagnetic holding devices as part of any smoke ventilation shaft installation.	P2 - previously identified	Moderate	Jayne Russell		11 May 2020
9.2	Fire door defects are identified for remedial action.	Arrange for the doors identified to be adjusted/repared.	P2 - previously identified	Moderate	Pete Burke		24 Apr 2020
9.13	Following guidance from the Ministry of Housing Communities and Local Government (MHCLG), investigations into the external cladding system have begun.	Should WCHG require the "stay put" fire strategy to be implemented on completion of the remedial measures it is recommended Blocks C & D are examined and included in the remedial measures recommended for Blocks A & B.	P2 - previously identified	Moderate	Amanda Seals		
9.14	Areas were identified as having unauthorised combustible storage that increases the fire hazard.	Arrange for the items to be removed, the doors kept locked, and a regular check made to ensure the areas remain clear of stored items.	P3 - previously identified	Moderate	Amanda Seals		05 Mar 2020
12.5	A number of portable fire extinguishers located in locked areas appear to have been missed on the last annual service.	Arrange for the extinguishers listed to be serviced by a competent person and the service records updated.	P2 - previously identified	Moderate	Jayne Russell		10 Feb 2020
15.13	A documented fire safety plan was not observed nor confirmed.	Where necessary it is recommended the fire safety plan is updated and clearly documented in order for any member of staff, resident, visitor or contractor to read to gain full understanding.	P2 - previously identified	Moderate	Amanda Seals		20 Apr 2020

19.0 Recommendations

FRARef	Observation	Recommended Action	Risk Rating	Contractor Completed
9.2	The threshold gap at the base of the entrance door to apartment 117 is in excess of 15mm.	At the next weekly fire alarm test, the door to apartment 117 should be in the open position with the automatic self closer in the free swing mode. A check should be made that the door closes freely against the rebate on activation of the fire alarm.	Moderate	
9.3	The cross corridor door on the 4th floor in Hawthorn has a loose combined strip and seal at the meeting edge of the double doors.	Arrange for the combined strip and seal to be firmly fixed into the rebate.	Moderate	01 Apr 2020
15.13	During the meeting 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.	See full recommendations and commentary 15.13.	Moderate	
16.2	The Stay Put (stay safe) fire strategy as designed is not fit for purpose.	Following the survey of the materials used in the build up of the facade all the recommendation made by the specialist contractor/ fire engineering consultants should be 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.

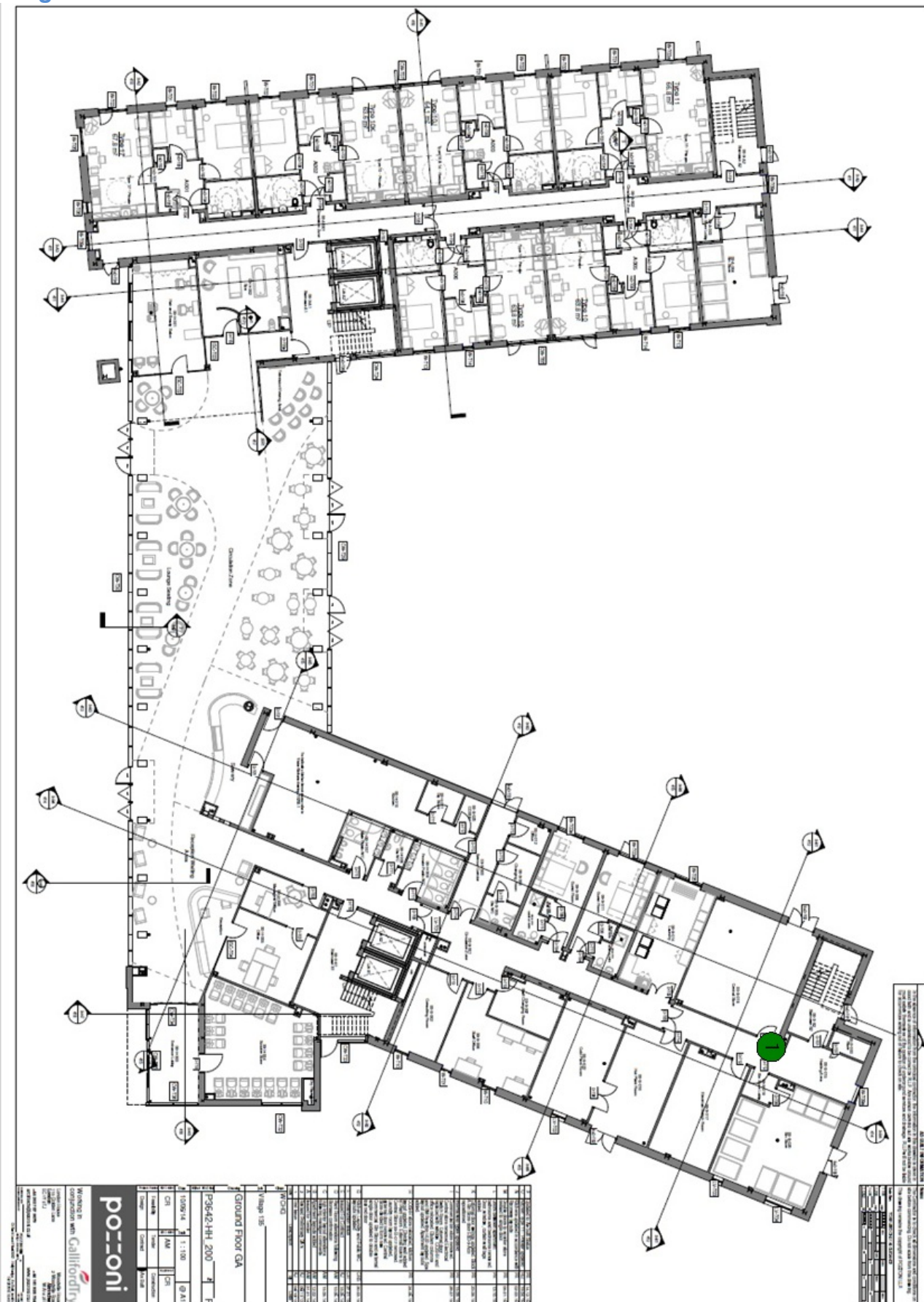
IT IS FOR THE RESPONSIBLE PERSON TO DETERMINE WHETHER THE USE OF THE PREMISES, THE NATURE OF THE OCCUPANTS, THE PROPERTY PROTECTION, DAY TO DAY OPERATIONS AND THE FIRE SAFETY MANAGEMENT WOULD BE ENHANCED BY THE IMPLEMENTATION OF ANY RECOMMENDATIONS. THEY DO NOT CONSTITUTE A SIGNIFICANT FINDING.

20.0 Commentaries

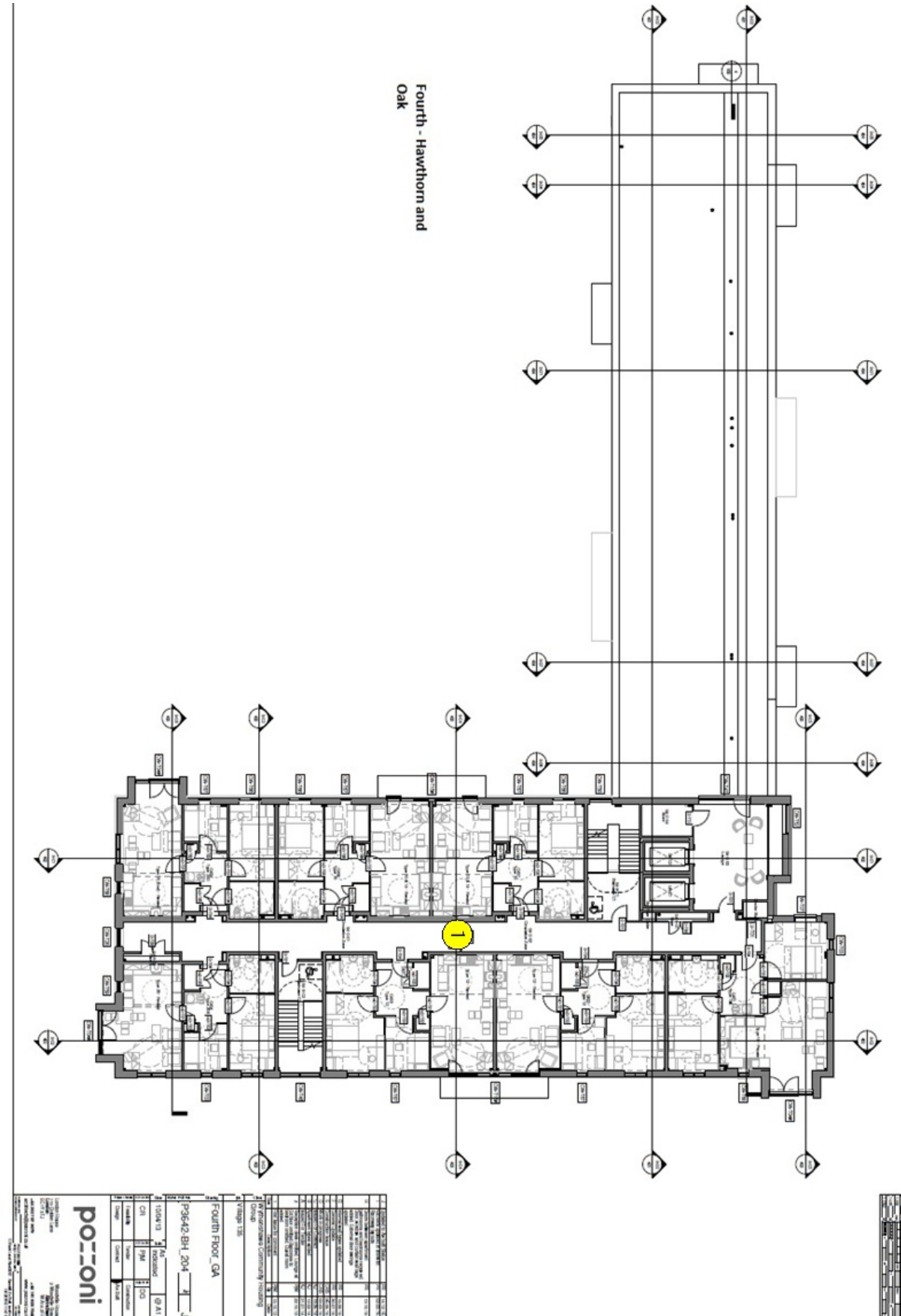
FRARef	Observation	Recommended Action	Risk Rating	Contractor Completed
THERE WERE NO COMMENTARIES.				

Appendix

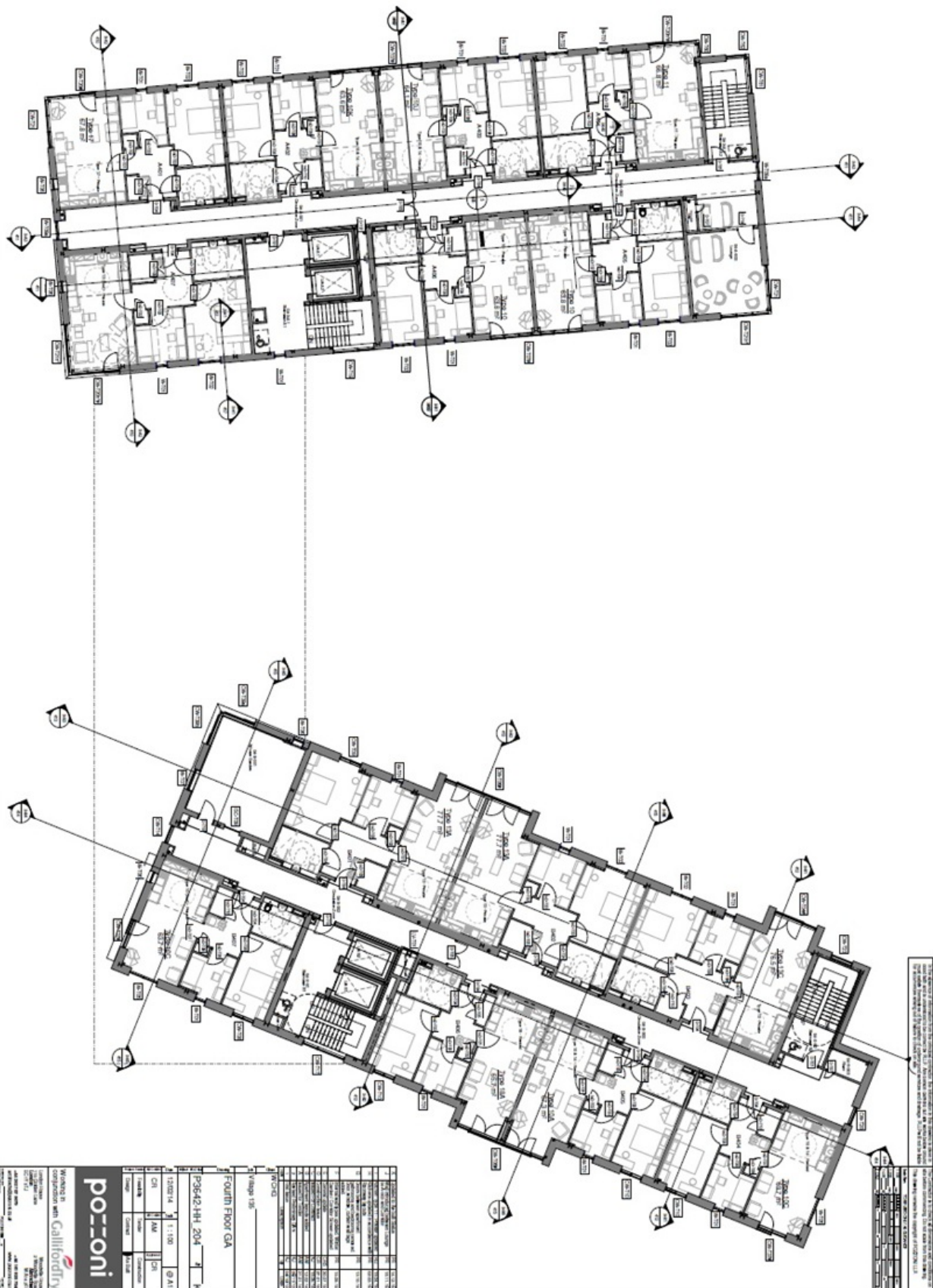
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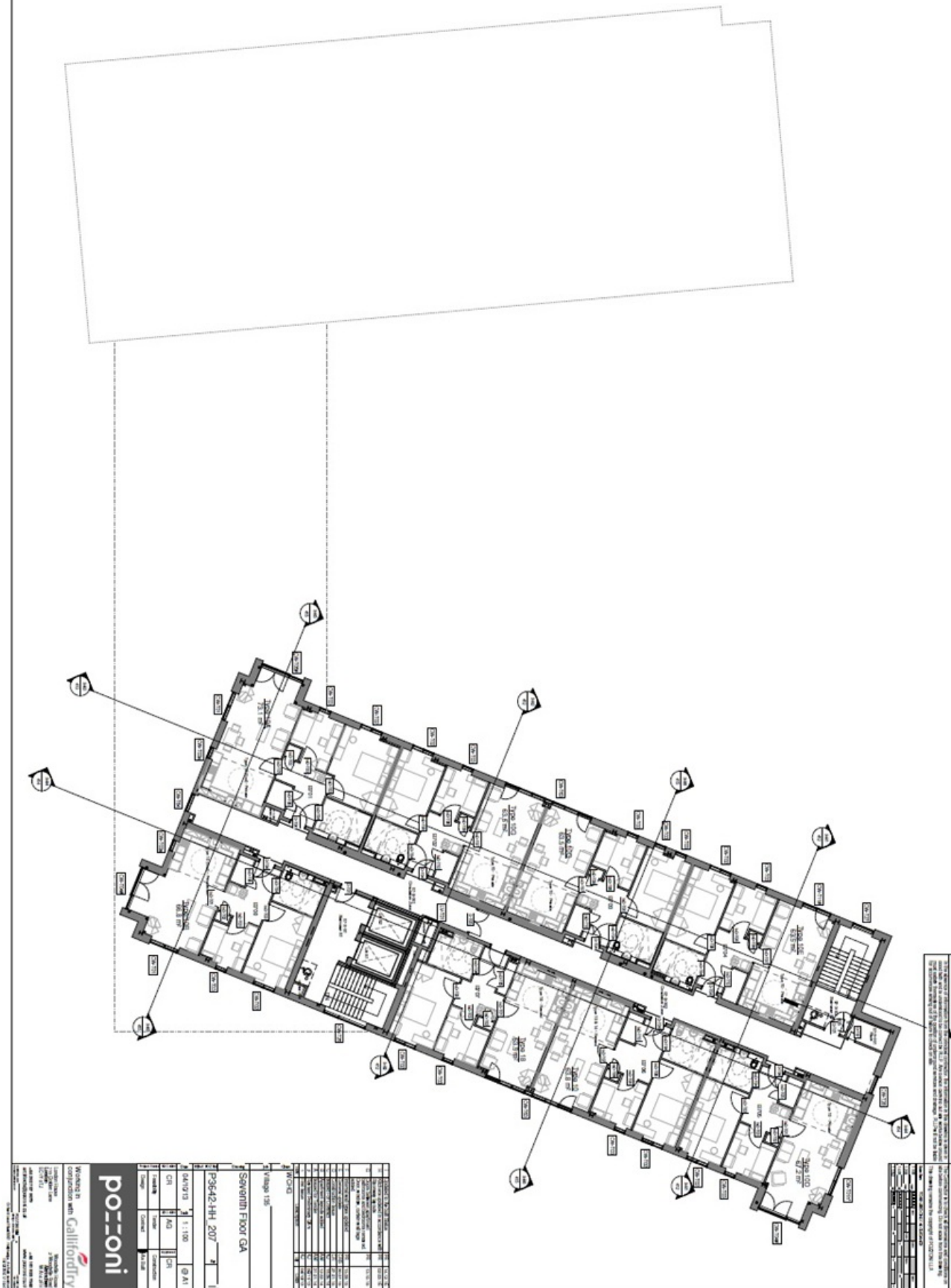


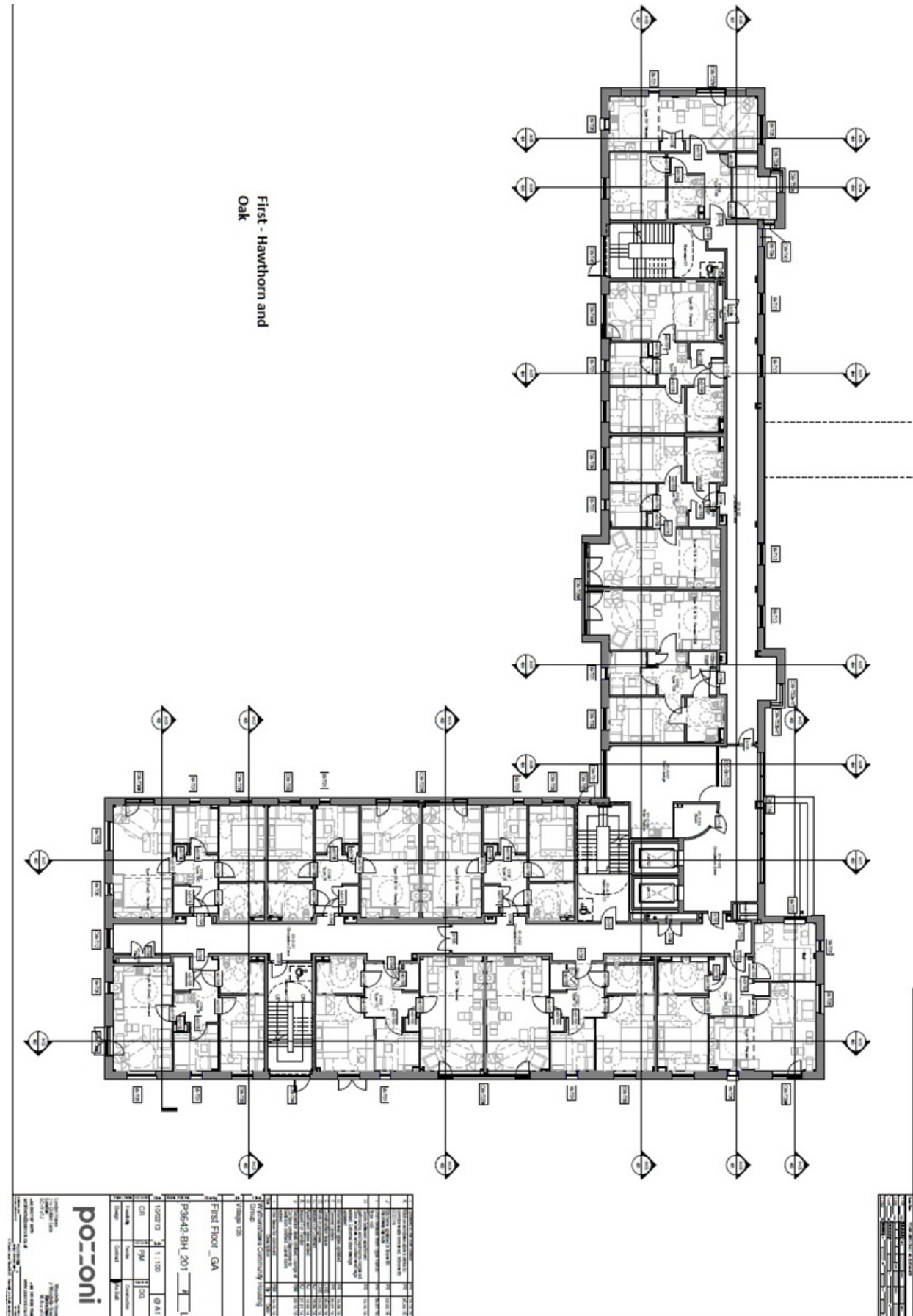
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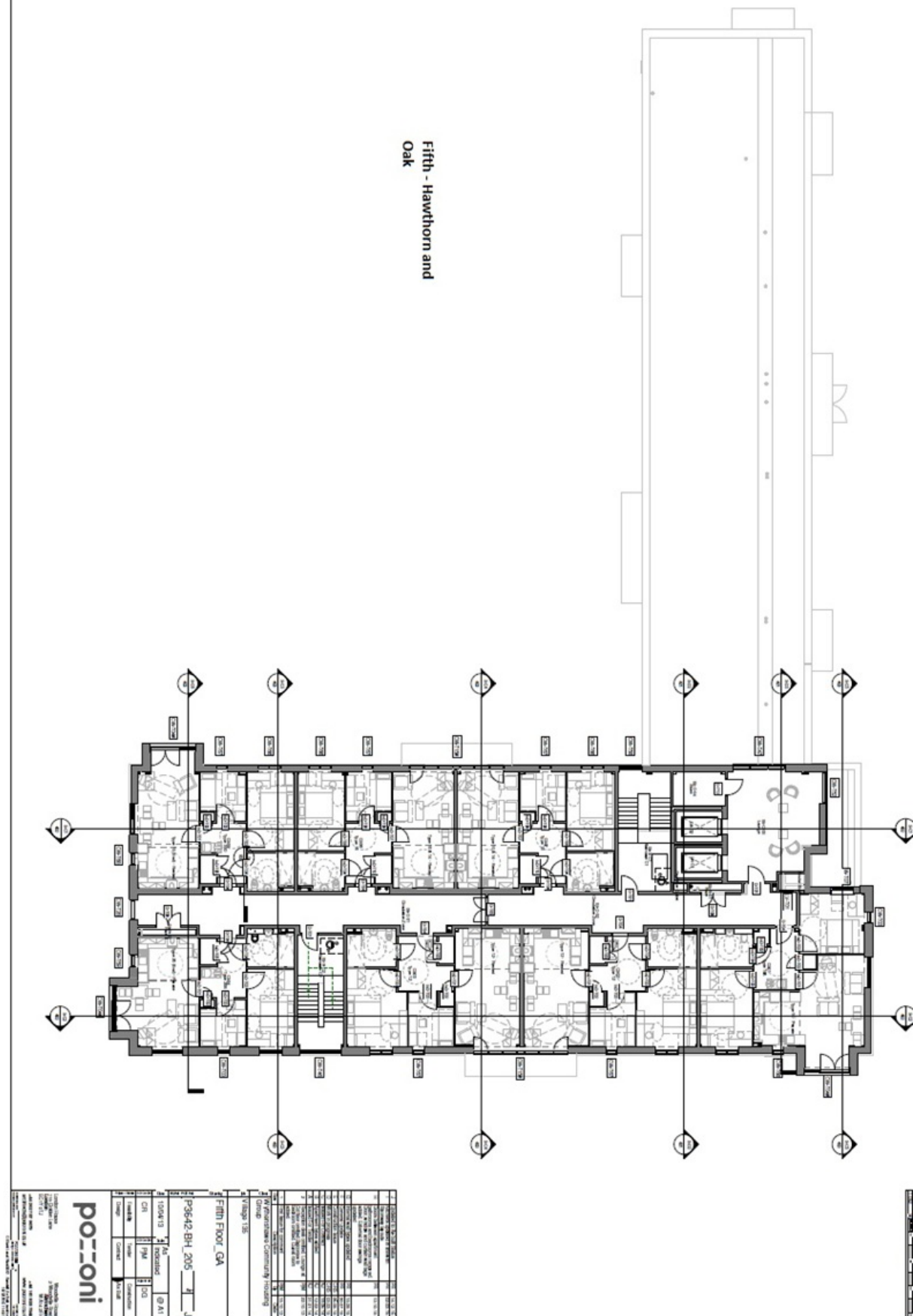


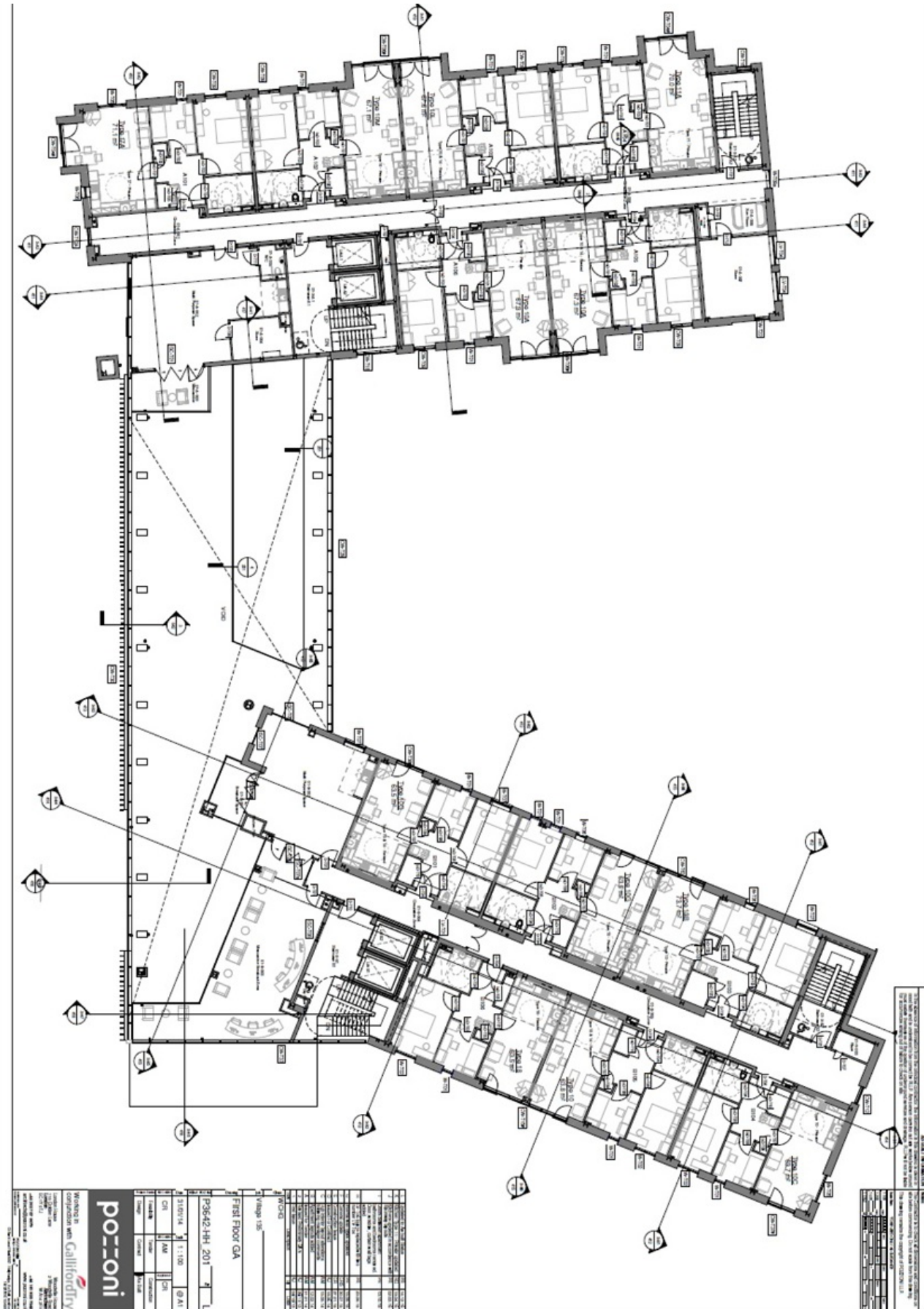
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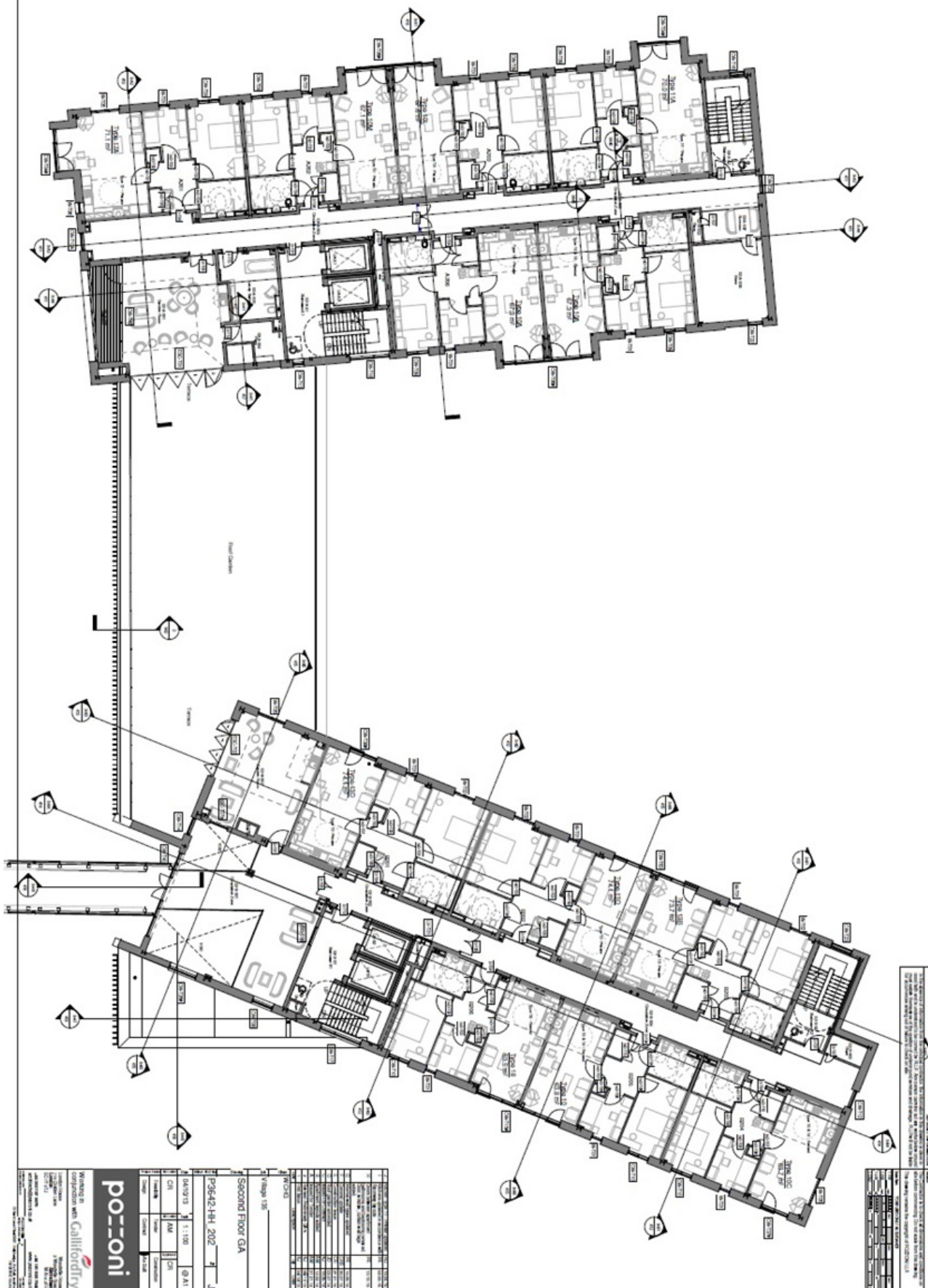


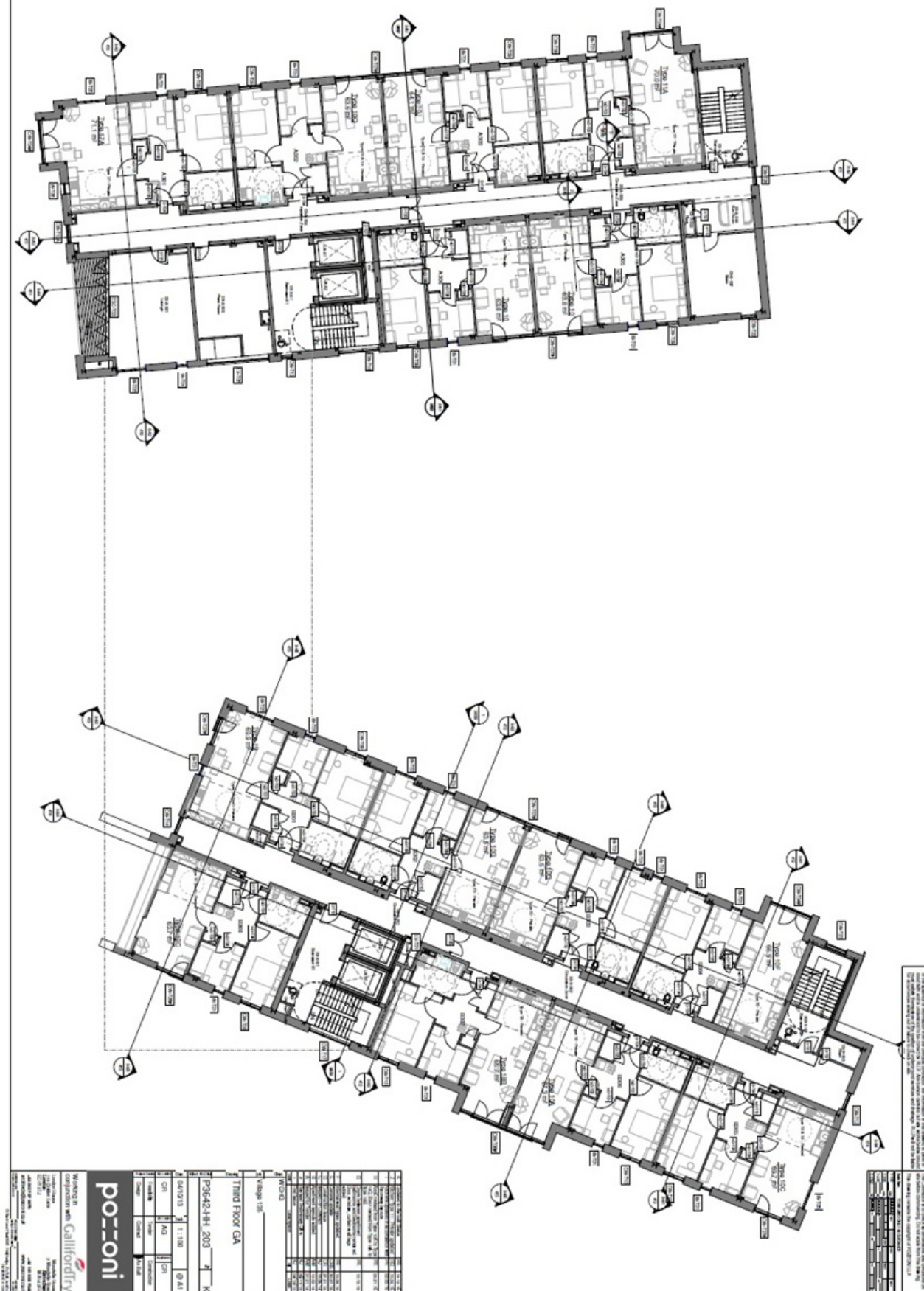


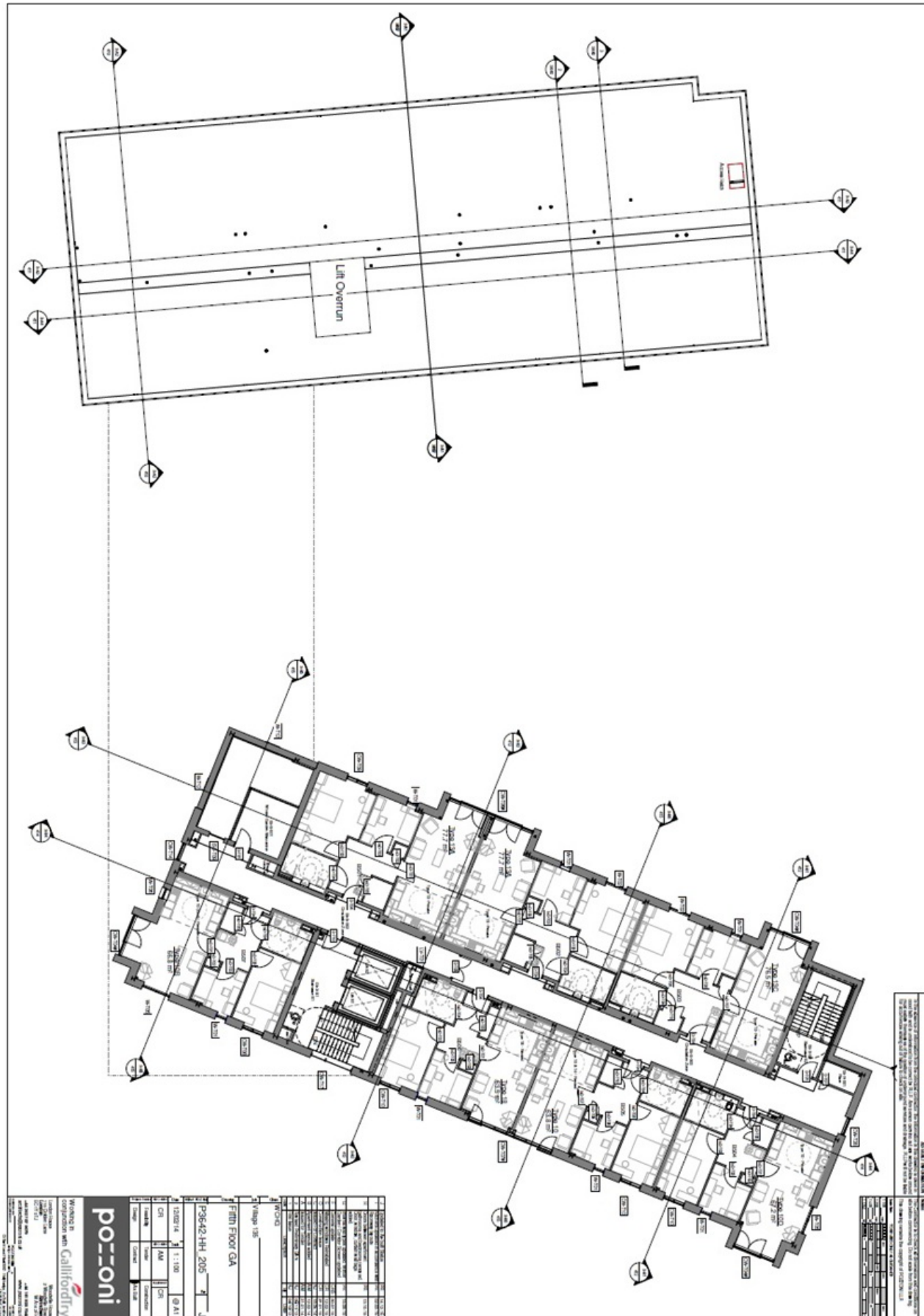


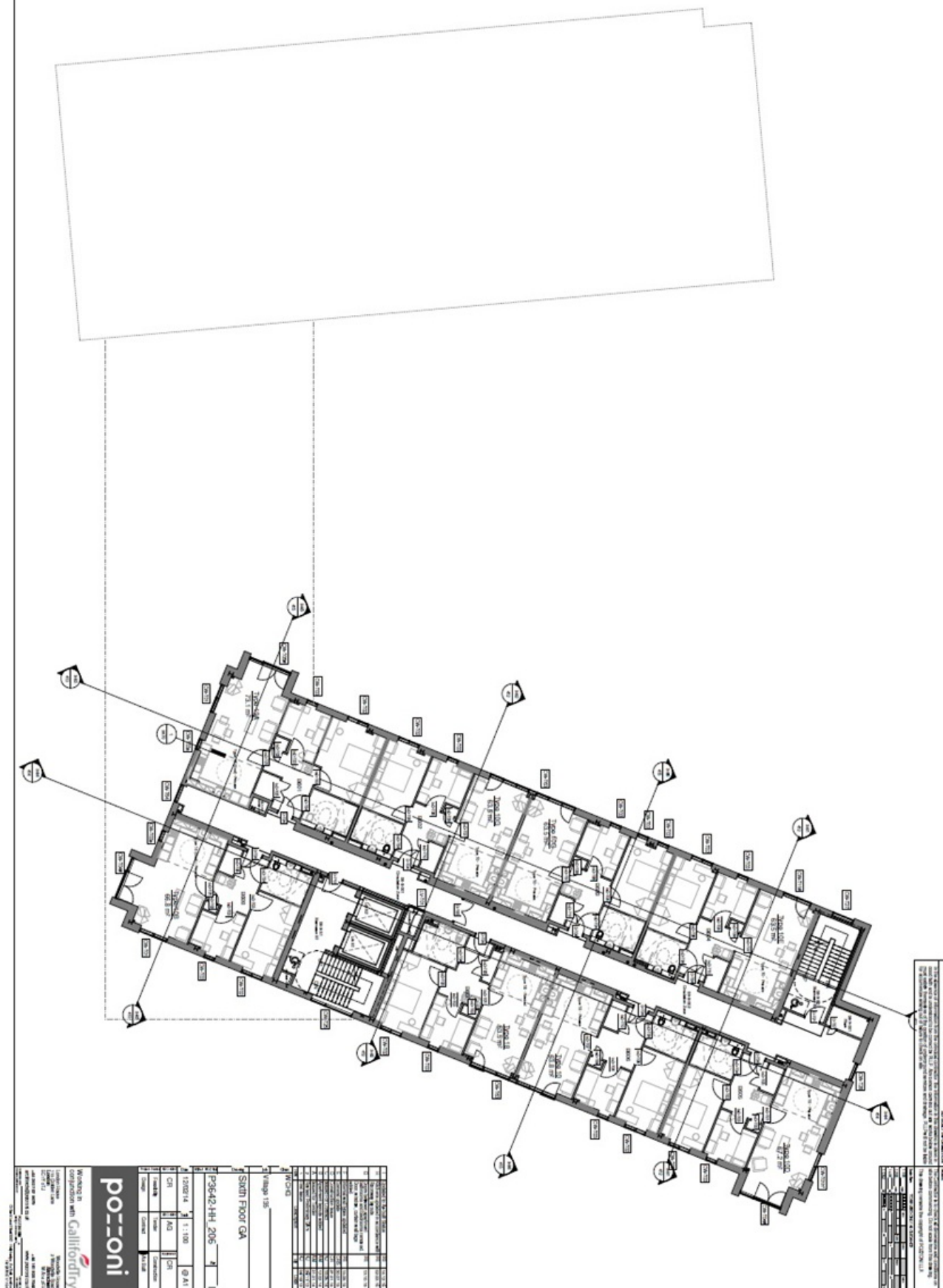




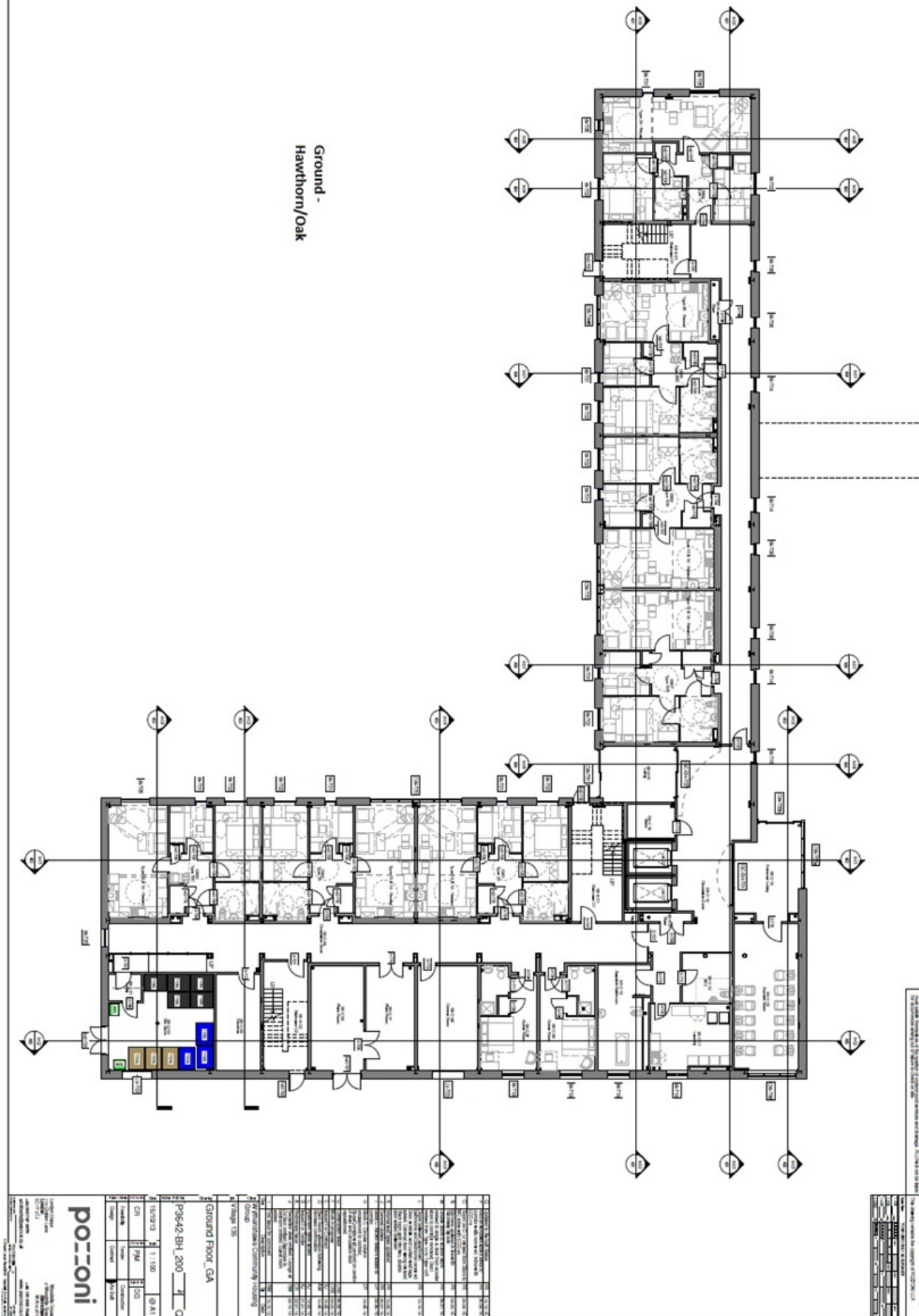


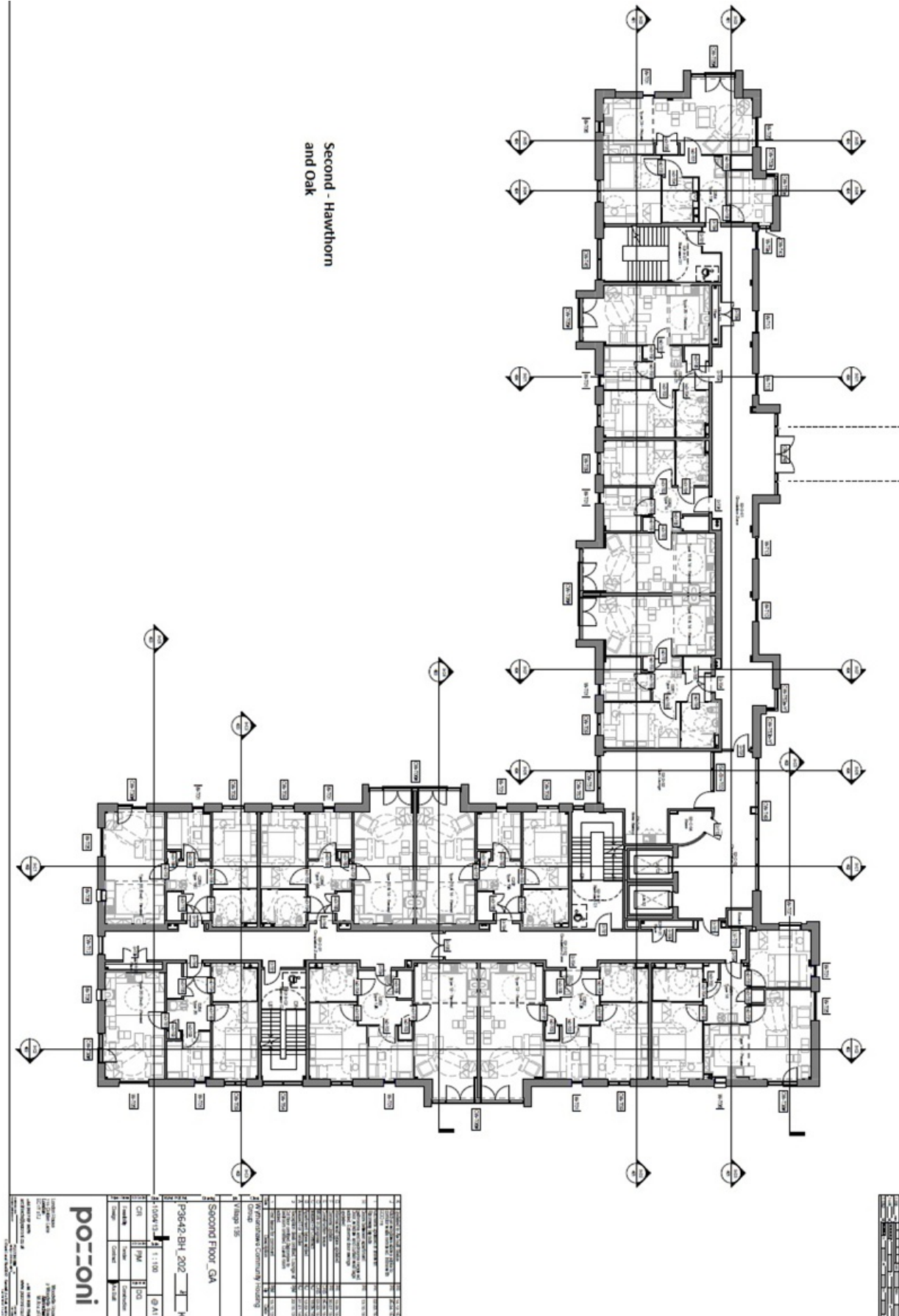


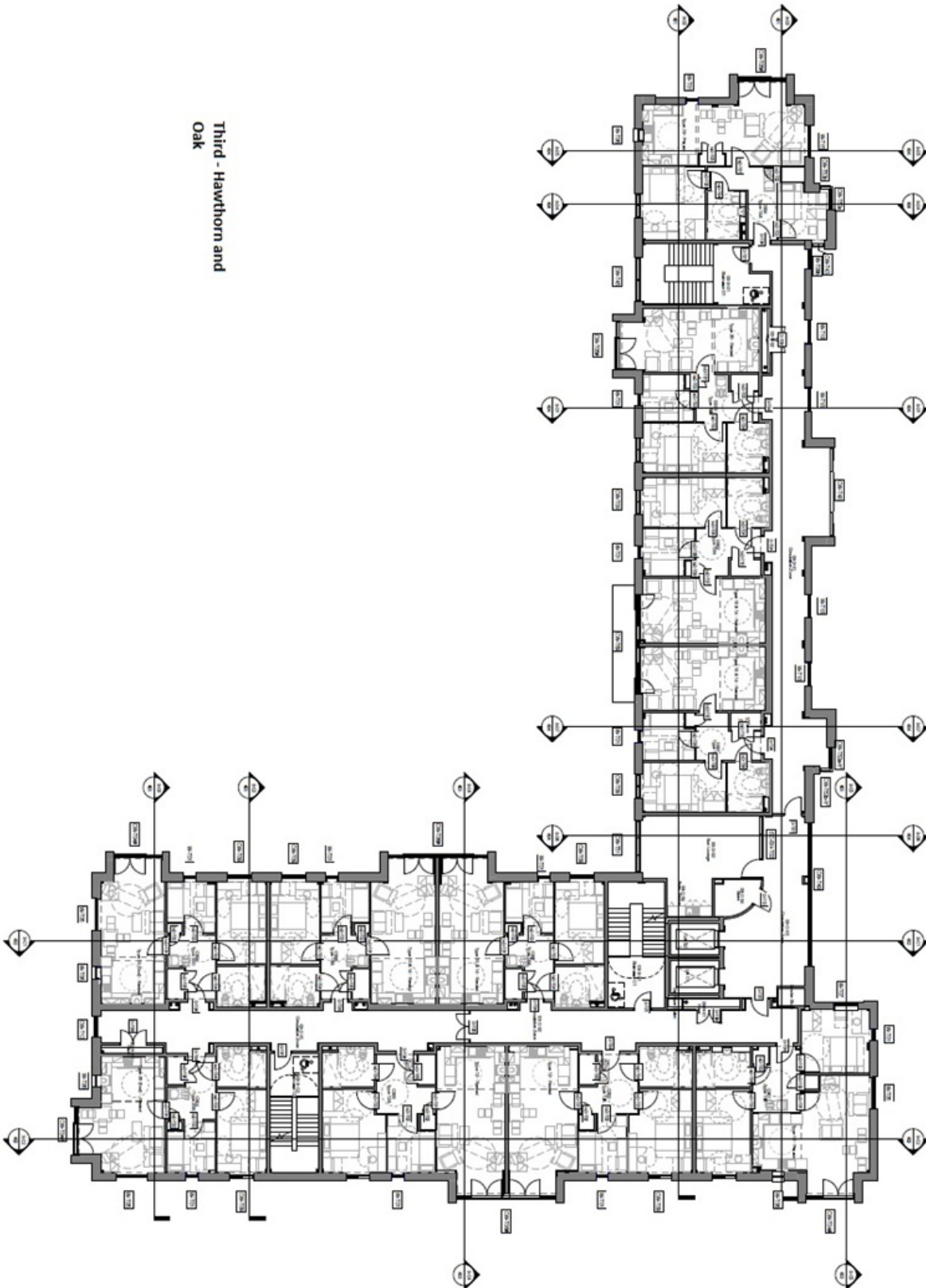




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