



TOTAL FIRE SERVICES LTD

Fire Risk Assessment Review

Conducted at:

West View Court
Wythenshawe
Manchester M22
4LQ



17 June 2019



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TERMS AND CONDITIONS OF BUSINESS

West View Court, Wythenshawe, Manchester, M22 4LQ

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 **Monday, 17 June 2019**

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

We have assessed the risk of fire to ensure legislative compliance and safety of relevant persons and have provided you with our Assessment. Ownership and implementation of the assessment is vital. We accept no responsibility for loss, damage or other liability arising from a fire, loss or injury due to the failure to observe the safety observance and practices identified in our Assessment. The Responsible Person will always remain responsible for the outcome of the Fire Risk Assessment or its review. We highlight that we recommend a periodic fire risk assessment review regardless of any changes in the structure, nature of business and employees. TFS Ltd accepts no liability where the recommended review date in the fire risk assessment has been exceeded.

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

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

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

Part 2: References and Methodology Index

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

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

Part 2: References and Methodology Index continued

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:

West View Court, Wythenshawe, Manchester, M22 4LQ

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1.0 Fire Risk Assessment Details

Responsible person(s):

Wythenshawe Community Housing Group, 307 Greenwood Road, Wythenshawe, M22 9HD.

Person(s) consulted and landline contact number:

D Burrell, Facilities Manager 0161 946 9191.

Date fire risk assessment was conducted:

Monday, 17 June 2019

Time:

12.30 p.m.

Date of last FRA or FRA Review (if known)

05 Jul 2018

Suggested date for next review:

June 2020

Fire risk assessment limitations:

A Type 3 (Non-Destructive) Fire Risk Assessment (as detailed in the latest guidance document Fire Safety in Purpose Built Blocks of Flats) has been completed with access available into Flat 67. The Community Centre is included in this assessment. Access was made into the lift motor room. All the plant and ancillary rooms including the bio-mass room on the ground floor were viewed. A large sample of the riser cupboards throughout the premises was inspected. No access was made into the area above the false ceiling in the entrance area due to the height.

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

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

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

Note

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

2.0 General Premises Details

2.1 Number of floors:

9 including the ground floor. Plus the plant room on the roof.

2.2 Approximate building footprint:

540m²

2.3 Details of Construction and Premises:

The premises are a high rise residential block with deck access to the flats. They were constructed with concrete floors and stairway with external brick facings. The single stairway is located in the middle of the premises and leads into an open area on the ground floor between the main entrance and the Community Centre. The electricity room is located within this open area. The plant room for the bio-mass heating system is located on the gable end at the rear of the Community Centre. Adjacent to the entrance but with external access only is the caretaker's office, the bin room and the pump room. There is also a plant room on the roof. The entrance area contains two lifts and access into the communal laundry. A dry rising main is provided for fire service use in the stairway which is permanently ventilated. There is a fire alarm and detection system provided and emergency lighting is fitted throughout.

At the time of this assessment, the installation of two new lifts was nearing completion. The new lifts are provided with an emergency back-up generator that is located at the rear of the premises adjacent to the bio-mass room.

2.4 Occupancy/Purpose Groups

The premises are classed as Purpose Group 1a Residential (Flat) as defined by Building Regulations Approved Document B 2006 Table D1.

2.5 Approximate maximum number of persons:

144 residents assuming an average of 2 persons per flat.

2.6 Approximate maximum number of employees at any one time:

Limited to maintenance/administration staff that may visit the premises.

2.7 Maximum number of members of the public:

Limited to visitors to the residents.

2.8 Occupants at Special Risk:

<i>Sleeping occupants</i>	
Persons familiar with the premises	Yes
Persons unfamiliar with the premises	No
<i>Occupants with disabilities</i>	
Mobility-impaired	Yes
Hearing-impaired	Yes
Learning difficulties	Yes
Occupants in remote areas	No
Others	No
Comments	
Flats are general needs. Residents may be present with any combination of disabilities throughout the premises. WCHG should provide information and regularly remind tenants on the fire procedures by providing leaflets and where necessary encouraging new tenants to have a home fire safety check by the local fire service. Specific measures regarding tenants with any disabilities identified can be discussed and implemented following the home fire safety check in conjunction with relevant local community services.	

2.9 Fire Loss Experience

None known.

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.

This assessment has highlighted issues regarding the standard of the individual flat entrance doors. The risk to life is therefore considered to be moderate.

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

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

Risk to Property: Tolerable

The compartmentation within the premises means that any fire should be confined to the flat/area of origin until the Fire and Rescue Service can intervene. The risk to property is considered to be tolerable.

Risk to Business Continuity:

N/A

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

4.0 Dangerous, Flammable, Combustible Materials & Substances

AUDIT: IDENTIFYING THE FIRE HAZARDS

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

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

Ref	SIGNIFICANT FINDINGS
	None.

Ref	RECOMMENDATIONS
	None.

Ref	COMMENTARY
4.1-4.2	Questions 4.1 and 4.2 relate to substances and materials which are subject to the "Dangerous Substances and Explosive Atmosphere Regulations 2002" (DSEAR). No substances or materials falling into the above regulations are stored or used inside the premises.

5.0 Interior Furnishings

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

5.0 Interior Furnishings: Finding(s)

Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
5.1, 5.4	There was no furniture within the common areas such as the balconies and stairway. The furniture in the Community Room was in a satisfactory condition. Where there is any doubt about furniture and other furnishings complying with the Furniture and Furnishing Regulations (Fire Safety) 1988, it is the duty of the responsible person to confirm the standard with the suppliers of new furniture.

6.0 Heating and Electrical Appliances

6.1	Are portable or fixed heaters used?	Yes
6.2	Are all heaters fitted with suitable guards and located in positions away from combustible materials?	Yes
6.3	Are all heaters free from naked flames?	Yes
6.4	Has the use of safer alternatives been considered?	N/A
6.5	Are systems in place to ensure appliances are tested, repaired and maintained on a regular basis in accordance with the Electricity at Work Regulations, 1989?	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?	N/A
6.18	Are filters changed and ductwork cleaned regularly?	N/A
6.19	Are suitable extinguishing appliances available?	N/A
6.20	Are legal or other requirements for testing, maintenance & record keeping complied with for equipment such as lifts, hoists, escalators, air handling systems, heating boilers, pressure vessels etc.?	Yes
6.21	Do the premises have a lightning protection system? (where required)	Yes
6.22	Have other potential sources of heat not listed above been considered?	N/A

6.0 Heating and Electrical Appliances: Finding(s)

Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
6.1	There is no heating within the common areas. The Community Centre is heated by a separate central heating system. The individual flats are provided with a communal bio-mass heating system that has a gas back-up.
6.5	Portable appliance testing (PAT) is regularly carried out. Appliances in the Community Centre kitchen did not have PAT test labels. However, they looked like new items and therefore may not yet be due to be tested. It is highlighted that not all electrical devices need to be the subject of an annual PAT. The Health and Safety Executive (HSE) advocates a proportionate, risk-based approach to the maintenance of portable electrical appliances within the workplace. This guidance is simple and easy to follow and can be found on the HSE website "Maintaining Portable Electrical Equipment in a low risk environment."
6.5-6.6	Mains electrical tests are carried out. The date of the last test recorded for the high rise block was 3.10.17. and the date of the last test recorded for the Community Centre was 11.6.19.
6.20	All gas installations have safety checks carried out on a 10 month rolling programme of work. The lifts and laundry facilities are all maintained under contract. Records are kept on WCHG systems.
6.21	The lightning protection system is tested on an annual basis. The tests are recorded and all records are stored on WCHG 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	N/A
7.3	Have the requirements of the Equality Act 2010 (permanent or temporary disabilities) for ALL persons been assessed and complied with where reasonable?	Yes
7.4	Have all disabled staff members been consulted and where agreed PEEPs. been prepared?	N/A
7.5	Have standard PEEPs. been prepared where disabled members of the public or visitors may reasonably be expected to resort to the premises?	N/A
7.6	Are disabled refuges provided?	N/A
7.7	Are members of staff trained in the evacuation of disabled or mobility impaired persons?	N/A
7.8	Are fire evacuation drills conducted at least annually, taking into account all employees, shift and casual workers, visitors and contractors where appropriate?	N/A
7.9	Are the results recorded? (People involved, time taken, learning outcomes).	N/A
7.10	Is the access of relevant persons controlled at all times? i.e. are public, visitors & contractors required to sign in?	Yes
7.11	Are relevant persons made aware of the fire and health and safety procedures on arrival? (i.e. fire procedure/building plan adjacent to signing in book etc.)	Yes
7.12	Are notices in place to inform of restricted access areas?	Yes
7.13	Are there designated fire marshals where appropriate for all areas to ensure all relevant persons are accounted for following an emergency?	N/A
7.14	Is sleeping accommodation provided for the staff, public, temporary residents etc.? (Hotels, boarding houses, probation hostels etc.).	N/A

7.0 Persons at Risk Audit: Finding(s)

None.

Observation

7.0

The above photograph shows a list of the flat numbers and indicates which flats have residents who may need assistance to evacuate should a fire occur. The list is kept in the red fire documents box located on the wall adjacent to the fire alarm panel. There is no requirement for such information in general needs flats. But where a decision is made to provide such information it must be kept up to date. The only date on this list is 14.11.13. and therefore it is probably out of date. Where this information is incorrect it may lead to the fire service directing their limited resources to a location where they are not required and thereby place other persons at risk of harm.

Recommended Actions

- 7.0 It is recommended that the fire service is consulted as to whether they require this information or not. Should they require this information then it must be kept up to date and be accurate. It should be reviewed on a regular basis and the date of the review should be stated.
- 7.1 The building is general needs flats and individual PEEP's, evacuation drills and staff procedures are not required.
- 7.3 Residents may be present with any combination of disabilities throughout the premises. Individual PEEPs are not considered appropriate for general needs flats. 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 should be undertaken on taking up residence.
- 7.8 Various members of the WCHG staff including the caretaker are on the premises at different times. They are all familiar with the layout of the premises including the exit routes. Evacuation drills are not considered to be necessary.
- 7.10-7.11 Entry is controlled by the residents who are informed of any visitors via the intercom located adjacent to the main entrance door. Contractors are organised and controlled by WCHG.

8.0 Escape

8.1	Do travel distances meet the criteria given in the relevant HM Government guide and recognised industry norms and guidelines?	Yes
8.2	Are there a sufficient number of exits of suitable width from each area/room for the persons present?	Yes
8.3	Can you ordinarily expect the Fire Service to arrive in the event of a fire whilst the fire is in the room of origin?	Yes
8.4	Can you expect the premises to be evacuated within the standard times for the type of construction?	Yes
8.5	Are all escape routes available and accessible at all times?	Yes
8.6	Are all escape routes and stairways free from undesirable items? (E.g. portable heaters, cooking appliances, furniture, coat racks, vending/gaming machines, photocopiers, mirrors).	No
8.7	Do any inner rooms exist?	Yes
8.8	Are vision panels provided between the inner room & access room and is it adequate?	N/A
8.9	If the vision between the inner room and the access room is inadequate is smoke detection provided within the access room?	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	Observation
8.6	 The above photographs show a settee on the eighth floor balcony and a bicycle on the second floor balcony. Both these items contain combustible materials and both would be a trip/obstruction hazard for persons evacuating the flats and for the fire service attending the incident. It is noted that WCHG have a "zero" tolerance policy regarding items being left in the common areas including the access balconies of their flats.
8.6	Recommended Actions All items should be removed from the balconies. The residents should be reminded of WCHG's "zero" tolerance policy regarding items being left in the common areas and the reason why it is there. If not already doing so, regular checks of the balconies should be undertaken and recorded.
None.	
8.2, 8.10	An additional final exit has been created in the bio-mass room. It is located on the right-hand side of the room and the door can be opened without the use of a key.
8.5	 The photograph above shows the top of the single stairway and the permanently open vent area of approximately 0.8m² required for smoke ventilation purposes. Although this is less than the required area of 1m², the door leading onto the balcony on the top floor can be opened to increase the ventilation. This arrangement is acceptable at this time.
8.5, 8.10, 8.17	The electro-magnetic locks located on the main entrance/exit door and on the communal laundry door are linked to the fire alarm and conform to BS 7273 part 4. The emergency override mechanisms are checked weekly. They are also serviced/tested every six months.
8.6	Article 14 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to ensure that emergency routes and exits can be used as quickly and safely as possible.
8.11	Final exit doors are used regularly by residents and it can be reasonably expected that any fault would be reported.

9.0 The Confinement of Fire

9.1	Are all escape routes and compartments protected by fire resistant walls and doors where required?	Not Known
9.2	Are all fire doors self-closing, kept locked shut where appropriate and in good condition?	Not Known
9.3	Are all fire doors fitted with smoke seals and intumescent strips where required?	Not Known
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?	No
9.7	Were the requirements of the Building Regulations followed and a completion certificate issued?	N/A
9.8	Are all ducts fitted with effective fire dampers where required?	Not Known
9.9	Are all fire exits underneath and within 1.8m horizontal or 9m vertically of any external escape stair, fire resisting and self-closing?	N/A
9.10	Is glazing within the above distances fire resisting and fixed shut?	N/A
9.11	Is there a procedure for all premises/areas to be checked at the end of a working period for potential fire hazards?	N/A
9.12	Are the premises free from risk posed by adjacent properties? (Uncontrolled fly tipping, overgrown vegetation or poor housekeeping)	Yes
9.13	Has the risk of external fire spread been considered? Consider external cladding, wall systems, external render and balconies.	Yes
9.14	Are there any other premises features or hazards that could affect fire development or spread?	Yes
9.15	Are the premises secure from any potential fire hazards outside susceptible to arson attack that could affect the building?	Yes
Automatic Hold Open Devices		
9.16	Are any fire doors fitted with automatic door release devices?	No
9.17	Are the devices fitted to any critical doors? e.g. onto stairs in a single staircase building	N/A
9.18	Is smoke detection provided within the area located near to the door release device? (Consider to L3 standard?)	N/A
9.19	Are all non-self-contained devices linked to the fire alarm system and released on actuation?	N/A
9.20	Are any self-contained, acoustically actuated door hold open devices fitted?	No
9.21	Are all devices tested regularly and the results recorded? (At least once a week)	N/A
9.22	Are all doors released at night or when the area is unoccupied?	N/A
9.23	Are all devices tested in accordance with the manufactures relevant standard to ensure satisfactory operation?	N/A

9.0 The Confinement of Fire: Finding(s)

Ref	SIGNIFICANT FINDINGS
	Observation
9.1-9.3	It could not be ascertained if flat entrance doors are fitted with self-closing devices and conformed to FD30s standard. On inspection, the entrance doors fitted are not the original benchmark doors and it could not be ascertained if the replacements conform to FD30s standard. The entrance doors were of solid composite construction with a letterbox and plate to the middle, however, our consultant was unable to confirm if the entrance door provides the relevant degree of fire resistance (30 minutes). The frames are fitted with a seal that does not appear to be a recognised cold smoke seal and it is not clear if intumescent strips are provided. All other entrance doors appeared similar and there were no visible signs of damage when viewed from the common area. A number of manufacturer's flat entrance fire doors have been identified to fail the approved fire tests (July 2018) when subjected to fire on both sides of a composite door despite being certified as FD30s compliant. The flat doors could not be confirmed as meeting current test evidence and certified as FD30s door assemblies conforming to BS 476-22 (compatible door, frame, ironmongery, hardware etc.) and fitted with a positive-action self-closing device. Flat entrance fire doors should have test evidence demonstrating they meet the performance requirement in the Building Regulations guidance for fire resistance and smoke control from both sides. Where a flat entrance door is not self-closing or does not provide the relevant degree of fire resistance, a fire in a flat may prejudice the common means of escape as the doors may not form an effective barrier against the products of combustion placing relevant persons at risk of harm.
	Recommended Actions
9.1-9.3	WCHG should reference the manufacturer's test evidence/certification and documentation for existing and proposed fire doorsets. "Any test evidence used to substantiate the fire resistance rating of a door should be carefully checked to ensure that it adequately demonstrates compliance and is applicable to the adequately complete installed assembly. Small differences in detail (such as glazing apertures, intumescent strips, door frames and ironmongery etc.) may significantly affect the rating". If the doors meet current test evidence and are certified by the person carrying out the installation as follows, then no further action is necessary; • FD30s door assemblies conforming to BS 476-22 (compatible door, frame, ironmongery, hardware etc.) • fitted with a positive-action self-closing device and, • installed in accordance with the manufacturer's instruction based on the original test specimen Where it is known that the fire doors fitted do not have test evidence demonstrating they meet the performance requirement in the Building Regulations guidance for fire resistance and smoke control from both sides, then they should be replaced with fully compliant FD30s doors (compatible door, frame, ironmongery, hardware etc.) and fitted with a positive-action self-closing device and installed in accordance with the manufacturer's instruction based on the original test specimen. Where a long term door replacement program is initiated a check and where necessary a positive action self-closing device should be installed as a priority. See commentary 9.1-9.3 regarding determining the risk priority.
	Observation
9.5, 9.14	During this assessment materials for use in the installation of the lifts were found in some of the storage cupboards on the mid landings on the stairway and in the access room to the lift motor room. The smoke detector in the access room to the lift motor room was fitted with a dust cap to avoid false alarms. If the materials are not removed they may provide fuel for a fire and the dust cap on the smoke detector may result in a delay in raising the alarm should a fire occur. In addition, there may be fire stopping that requires completing. In all these instances, persons may be put at risk of harm.
	Recommended Actions
9.5, 9.14	Once the work on the new lifts has been completed, WCHG should ensure that all fire stopping required following the installation of the lifts and the emergency generator has been carried out. They should also ensure that all waste and unused materials are removed from the premises and that any blanking caps fitted that may have been fitted to smoke detectors are removed. It is noted that WCHG are aware of these requirements and that they were included in the tenders for the work.
Ref	RECOMMENDATIONS
	None.

Ref	COMMENTARY
9.1-9.3	Determining the risk priority for fire doors Ministry of Housing, Communities & Local Government (MHCLG) advice note 16 is issued for housing providers where doorsets are made from other (not timber or metal) or composite materials and identified as unlikely to conform to test requirements. The guidance also states that when doors are identified for replacement the fire risk assessment ought to determine a risk based approach on how urgently such doors should be replaced within the particular building. A judgement is made based on the likelihood of a fire occurring, then spreading and the consequences affecting the relevant persons. • In making this judgement the following non exhaustive list outlines some of the issues which have been considered: • The likelihood of a fire occurring in the common landing area and affecting the flat entrance door and subsequently the flat • The likelihood of a flat fire affecting the common area and thus adjacent flats prior to Fire and Rescue Service intervention • The condition and design of the existing flat entrance door (nominal smoke and fire resistance) • The internal layout of the flat (that may assist in fire/smoke containment) • The installation of smoke alarms within the flats • The installation of fire alarm in the common area • The floor height of the highest occupied flat • Alternative exit routes and their availability (escape windows, balcony or multiple stairs) • The size of the clients housing stock and competing priorities • The national picture regarding fire doors and their supply (Is it likely doors can be replaced on the suggested timescales?) • A risk comparison against general housing and high rise residential tower blocks. In the case of this residential building at the time of this fire risk assessment the overall risk is determined in section 3 above, however, the risk priority given to this significant finding taking into account all the relevant factors is a moderate risk meaning the outbreak of fire is unlikely and any consequences for harm are moderate. Whilst not presenting a serious risk the issue would detract from the overall impact on the fire safety provisions within the premises. On the issue of flat entrance fire doors, it is acknowledged by the independent Expert Panel setup following the Grenfell Tower fire, supported by the National Fire Chiefs Council - "the risk to public safety remains low", the suggested period for addressing this significant finding is given as P3 (see section 17) and a medium to long term improvement programme is suggested for this issue.
9.1-9.3, 9.5, 9.14	Article 8 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to take general fire precautions to ensure the safety of relevant persons. This includes measures to reduce the risk of fire on the premises and the risk of the spread of fire on the premises.
9.1, 9.5	As highlighted previously compartmentation works have been carried throughout the premises by Allied Protection Ltd. They are an accredited passive fire protection contractor and they have provided WCHG with documentary/photographic evidence of their work. Following the installation of the fire alarm system, further fire stopping was required. This was carried out by Flame Hold Ltd who are also an accredited passive fire protection contractor. They have also provided WCHG with documentary/photographic evidence of their work.
9.2	All the flat entrance doors are checked during the annual gas safety checks. The checks include: • that they are fitted with a working self-closing device, • that they fully close into the rebate, • that they are fitted with intumescent strips and cold smoke seals • that the door has not been damaged.
9.2-9.3	 As part of the passive fire protection work carried out by Allied Protection Ltd, new fire doors were fitted in various locations throughout the premises. This includes all the riser doors on the balconies which are FD 60s, fitted using 3 hinges, suitably signed, provided with intumescent grills and are kept locked shut.
9.5	 Allied Protection Ltd have previously completed the fire stopping and other compartmentation work. Fire stopping has been carried out in all areas including the riser cupboards, above the false ceiling in the main entrance lobby, the caretaker's room and all other ancillary rooms such as the community room. Trunking and conduit have also been fire stopped internally where they pass through compartment walls and floors. The fire stopping is suitably labeled and WCHG have been provided with documentary evidence of the work carried out.

9.5, 9.8	The use of third party accredited passive fire protection contractors and products should ensure any remedial actions will be to the required standard in the most cost effective manner. The Responsible Person ought to have in place a system for ensuring that the integrity of any passive fire protection measures is not compromised building alterations are carried out e.g. for the installation of new pipes, cables and other services. Records of these should be maintained for future inspection by auditors and enforcement agencies. One common available fire stopping product is expanding fire resisting foam. To avoid unnecessary costs, the universal use of expanding fire resisting foam products should be used with caution and in strict accordance with the manufacturer's recommendations to achieve the required fire resistance. Generally, expanding foam products are tested as narrow linear gap seals and will not work in a large penetration seal. Current guidance recommends PU expanding fire resisting foam products should only be used to seal linear gaps between walls and walls/floors/ceilings. It cannot be used to seal pipe or cable penetrations unless tested for that end-use application. It is recommended where rectifying compartmentation issues that third party accredited contractors, who have been accredited to undertake the particular aspect of works, using appropriate third party accredited products is considered.	
9.8	In the flats that were viewed, it was confirmed that the ventilation arrangements for the kitchen and bathroom were located on the external wall onto the balcony and did not pass through any other compartmentation.	
9.13	The external facade of the building is predominantly constructed of a non-combustible material (brick/ cement based render/concrete) and is unlikely to give rise to a significant risk to life to the occupants from a fire spreading externally either from windows below or other external sources.	
9.14		In the bin room on the ground floor, the bin in use is located adjacent to a lid that has a fusible link and closes over the bin should a fire occur preventing fire and smoke spread up the chute. The fusible link is checked annually. The photographs above show the new lid and fusible link above the bin that is in use and also an example of the new bin hoppers than have been installed on each floor.
9.14	The lift motor room is provided with a permanently open vent.	

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?	No
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.	No
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?	No
10.11	Has a suitable fire zone plan been provided adjacent to the fire panel where necessary? i.e. complex premises or care homes	Yes
10.12	Is the alarm system under a regular maintenance programme by a qualified fire alarm engineer?	Yes
10.13	Are there systems in place to ensure the system is tested weekly from a different call point?	Yes
10.14	Are all fire alarm tests, faults and maintenance schedules recorded?	Yes

10.0 Fire Alarm System: Finding(s)

Ref	SIGNIFICANT FINDINGS
	Observation
10.3-10.6, 10.10	A BS 5839 Pt 1 automatic fire detection and alarm system has been installed within the common areas and linked into the hallway of the flats. The alarm is connected to an ARC (alarm receiving centre). It is not normally necessary in purpose-built flats to provide a common fire alarm, the system has been fitted to provide further protection and reassurance for residents. The fire alarm sounds on the floor of the actuation and pulses on the floors above and below. In the event of an actuation of the system, residents may enter a smoke filled area putting relevant persons at risk of harm.
	Recommended Actions
10.3-10.6, 10.10	It is recommended that consultation with the Fire and Rescue Service is carried out and the existing fire alarm system is reconfigured not to give an audible warning in the premises and an override device provided at the fire panel for use by the Fire and Rescue Service. See Commentary 10.0 below.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
10.0	As confirmed in the letter dated 18th June 2017, from the Department for Communities and Local Government to Local Authority Chief Executives & Housing Association Chief Executives, fire safety in purpose built blocks of flats is the guidance document used when assessing the fire safety provisions within a building of this type. This guidance does not require the provision of an audible fire alarm or a phased evacuation procedure in high rise flats and recommends a "Stay Put" fire strategy. The National Fire Chief Council (NFCC) also supports a "Stay Put" fire procedure in high rise blocks of flats. Total Fire Services Limited have completed extensive research with regard to the provision of fire alarms in high rise blocks of flats and have been involved in meetings with Greater Manchester Fire and Rescue Service, the conclusions reached are detailed below and are in accordance with a Draft British Standard to give requirements for common area fire alarm provision in high rise blocks; • The NFCC "stay put" policy is the standard policy in all high rise where interim measures are not recommended. • The installed fire alarm should be a monitored silent system and be used for mobilising the Fire and Rescue Service. • The fire alarm is not to be viewed as a fire alarm warning system but a facility for the fire service to manage an incident. • An override facility should be provided for the Fire and Rescue Service to generate an audible alarm. • Any fire alarm activation will be instigated and managed by the Fire and Rescue Service only. • Alarm sound levels are recommended to conform to those stated in the British Standard when published. • The advice given to residents should be updated when required.
10.1-10.4, 10.10	The existing fire alarm is a BS5389 Part 1 Category L1 system. This system which includes a heat detector with integral sounder installed in the hallway of each flat is monitored by an alarm receiving centre. The following information has previously been provided by WCHG: Cause & Effect, Single Stage Alarm • In the event of a detector(in the common parts and a flat's heat detector) or a call point being activated all sounders on that level will sound continually whilst sounders on one floor above and one floor below will pulse. • The alarm will continue until the reason for activation is removed and the system is reset. • Any activation is received via 'Custodian', who can call out GMFRS and liaise with Assure24 who, in the event of an activation are able to use CCTV and radio patrols to attend the area. • In the event of an actuation, all magnetic locks will release to open.
10.2	The Bio-mass room has its own BS5389 Part 1 Category L5 system. This alarm is monitored but by a different ARC than the alarm in the residential block.
10.5	Each flat has been provided with a BS 5389 Pt 6 Grade D LD 1 system with smoke detection in the bedrooms, living areas, lobby areas and with a heat detector in the kitchen. This was confirmed in Flat 67 when it was accessed by our assessor.
10.12-10.14	The fire alarm BS 5389 Pt 1 Category L1 system is tested weekly by the staff from WCHG's Facilities Department who provide records of the tests that are kept on-site and on WCHG's systems. The maintenance of the system is carried out by the contractor who installed the system which is also recorded. The fire alarm system in the bio-mass room is tested weekly by WCHG facilities staff and maintained by an appointed contractor. The appropriate records are kept on-site and on WCHG's systems.

11.0 Emergency Escape Lighting

11.1	Has the provision of emergency lighting been considered? Working hours, windowless areas, open access areas>60m2, toilets>8m2.	Yes
11.2	Is emergency lighting provided in accordance with guidance relevant to the purpose group for the premises? (BS5266, ADB Table 9)	Yes
11.3	Does it illuminate escape routes, exits, corridors, hazards or obstructions, changes in floor level, signs, fire alarm call points and firefighting equipment?	Yes
11.4	Is the emergency lighting beyond the final exit adequate so that persons can reach a place of safety?	N/A
11.5	Are routine checks carried out in accordance with the appropriate standard to which the system conforms – i.e. daily, monthly, 6 monthly and annual checks?	Yes
11.6	Are records of maintenance kept?	Yes
11.7	Is normal lighting adequate and in working order?	Yes

11.0 Emergency Escape Lighting: Finding(s)

Ref	SIGNIFICANT FINDINGS
None.	
Ref	RECOMMENDATIONS
None.	
Ref	COMMENTARY
11.4	There is adequate borrowed light available for persons to reach a place of safety.
11.5-11.6	Monthly and six monthly checks are undertaken by a qualified engineer from the appointed contractor. A record of the checks is kept on WCHG systems.

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?	No

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

Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
12.1	There are no fire extinguishers within the common areas. It is not normally considered necessary to provide fire extinguishers or hose reels in the common parts of blocks of flats. Such equipment should only be used by those trained in its use. It is not considered appropriate or practicable for residents in a block of flats to receive such training. In addition, if a fire occurs in a flat, the provision of fire extinguishing appliances in the common parts might encourage the occupants of the flat to enter the common parts to obtain an appliance and return to their flat to fight the fire. Such a procedure is inappropriate.
12.1, 12.4-12.5	Fire extinguishers are provided in plant and staff areas. They are checked monthly and serviced annually by an approved contractor. The annual service is due in November 2019. Records are kept in a log book on site and on WCHG systems.
12.10	The dry rising main is both pressure tested and visually inspected annually with six months between the two visits. The tests and inspections are carried out by an approved contractor. Records are kept on WCHG systems. The last pressure test took place in October 2018 and the last visual inspection took place in April 2019.

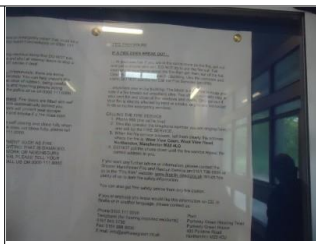
13.0 Fire Safety Signs and Notices

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 or maintained luminaires?	N/A
13.6	Are fire action notices displayed prominently and completed fully throughout the premises?	N/A
13.7	Are all fire action notices similar throughout the premises?	N/A
13.8	Does the content of the fire action notices reflect the actual procedure?	No
13.9	Where firefighting equipment or fire alarm call points are not clearly visible is their location highlighted by supporting signage?	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
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Observation

13.5-13.7	 The above fire notice was displayed in the entrance hall. It does not mention the fire alarm system or what action to take on hearing the fire alarm. It is therefore not suitable. Where insufficient or incorrect information is provided it may lead to persons taking the wrong course of action and thereby place themselves and others at risk of harm.
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Recommended Actions

13.5-13.7	Replace the existing fire notice with the notice that includes the information regarding the fire alarm.
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Ref	RECOMMENDATIONS
	None.

Ref	COMMENTARY
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13.0	"In the event of fire do not use his lift " notices have been provided on each landing adjacent to the lift.
13.5-13.7	Article 8 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to take general fire precautions so far as reasonably practical.

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?	N/A
14.12	Is adequate access provided for fire service vehicles in the event of an emergency?	Yes

14.0 General Fire Safety Procedures: Finding(s)

Ref	SIGNIFICANT FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
14.1-14.2	Since the original fire risk assessment was undertaken there have been no reports of fire that our consultant was made aware of and there was no evidence of any fires having occurred. Following any outbreak of fire affecting the common areas, the Fire Risk Assessment should be reviewed to identify if any further risk reduction measures are necessary.
14.3-14.4	All false, accidental and malicious actuations are recorded. System faults are corrected as soon as possible by the alarm contractor. Accidental and malicious actuations are passed via the Facilities Department to the appropriate department who will take the appropriate action.
14.7	The Chief Executive, Wythenshawe Community Housing Group, has the overall responsibility for fire safety related matters and management.
14.11	All important documents and data regarding the premises are stored off-site.
14.12	The Fire Service has been provided with access fobs for all WCHG high rise blocks.

15.0 Fire Safety Management		
15.1	Are there an adequate number of competent persons and arrangements (under Article 18 of the RRFSo) in place to assist the responsible person in the management and implementation of the preventative and protective measures? (safety assistance)	Yes
15.2	Have all staff been trained in how to call the Fire Service, use of fire extinguishers, evacuation procedures and basic fire awareness?	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?	N/A
15.9	Is there a list of fire marshals displayed in all locations where required?	N/A
15.10	Are systems in place to provide identification for fire marshals during an emergency where required?	N/A
15.11	Has a suitable fire assembly point been designated? (i.e. free from traffic hazards, radiated heat and free movement away from the premises)	N/A
15.12	Do the premises require a fire plan in order to evacuate?	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?	N/A
15.15	Are there procedures for calling out key staff during fire related emergencies outside of normal working hours?	Yes

15.0 Fire Safety Management: Finding(s)

Ref	SIGNIFICANT FINDINGS
None.	
Ref	RECOMMENDATIONS
None.	
Ref	COMMENTARY
15.1	WCHG employs competent persons to carry out service and maintenance and all preventative and protective services.
15.2-15.4	The members of the mobile caretaking and maintenance teams receive regular fire safety training at least every two years. A record of all training is kept by the HR Department.
15.5	As fires are more frequent during refurbishment and/or alteration, it is important that any additional risks are evaluated, particularly when the building is occupied. Contractors have a duty to carry out a risk assessment and inform the client of any significant findings and of the remedial measures identified. Their impact on the building should be closely monitored with regard to (amongst others), damage to party walls, and the introduction of sources of ignition and combustible materials, the blocking of exit routes or fire doors being wedged open.
15.5-15.6	Wythenshawe Works control all work carried out on WCHG properties whether by in house teams or external contractors. Permits to work are issued where appropriate.
15.15	There are "Out of hours" Emergency Procedures and Emergency Evacuation Procedures in place.

16.0 Fire Emergency Plan

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

16.0 Fire Emergency Plan: Finding(s)

Ref	SIGNIFICANT FINDINGS
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None.

Ref	RECOMMENDATIONS
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Observation

16.2	The current "Stay Safe" Policy includes the sounding of the fire alarm throughout the floor, including the individual flats, where the fire is located. The alarm also pulses on the floors above and below the fire floor. The sounding of the alarm inside the flats is a deviation from the "Stay Put" policy recommended in the guide fire safety in purpose built blocks of flats which is also the policy adopted by the National Fire Chiefs Council (NFCC). Although Greater Manchester Fire and Rescue Service are aware of the "Stay Safe" policy it has not been confirmed that they have accepted the policy in writing.
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Recommended Actions

16.2	If not already confirmed, written confirmation should be obtained from GMFRS that they have accepted the WCHG "Stay Safe" policy, and the resulting fire alarm cause and effect.
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Ref	COMMENTARY
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16.1-16.2	The fire-resisting construction of the flats means an outbreak of fire is likely to be contained within the flat of origin. The high degree of compartmentation means other residents are in a reasonably safe place within their own flat while a fire in an adjacent flat is dealt with. It is a requirement of the Fire Safety Order that there should be a suitable emergency plan for the premises. Rarely will it be necessary to have a more elaborate emergency plan than a simple fire action notice nor will it be universally necessary to display such notices. The Responsible Person should convey this information to tenants in other ways (e.g. through residents' handbooks/notice poster). Following the installation of the fire alarm and detection system within the premises, WCHG introduced a "Stay Safe" policy. This policy provides general and specific fire safety advice and highlights what actions the residents should take on discovering a fire or on hearing the fire alarm. The contents of the fire procedure have been sent to all residents and a suitable fire action notice should be displayed in the entrance hall to the premises. It is WCHG's responsibility to ensure that all relevant persons are aware of the actions to take on hearing the fire alarm, to manage all fire alarm actuations and to manage the resulting evacuation.
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17.0 Risk Analysis, Priority Ratings and Fire Risk Ratings

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

Priority 1 (P1)	A serious breach of the Fire Safety Order which if not actioned would significantly increase the risk of fire or injury. Failure to reduce the risk could result in substantial injury to relevant persons. Actions or omissions of this nature would normally constitute an offence liable to enforcement or prosecution actions by the Fire Authority. The time scales given are normally short – from immediate up to one month
Examples include:	Blocked or locked fire exits, serious breaches of required fire resistance, ineffective fire doors, insufficient or complete failure of emergency lighting or fire alarm systems.
Priority 2 (P2)	A lesser breach of the Fire Safety Order which if not resolved would present a risk of fire or injury. Failure to reduce the risk could result in a moderate injury to relevant persons. Compliance may still be required to satisfy enforcing authorities but longer time scales are given, such as two months or longer.
Examples include:	Firefighting equipment missing or defective, minor defects to the fire alarm or emergency lighting systems.
Priority 3 (P3)	Poor practices or features that whilst not presenting a serious risk would detract from the overall impact on the fire safety provisions within the premises. Also includes provision or practices and features that are preferable over and above the minimum standards required under the Fire Safety Order. Time scales are variable. The acts or omissions would normally be tolerable but actions should still be implemented to reduce the risk level to a negligible level.
Examples include:	Logbooks not completed or up to date, fire extinguishers not wall mounted.
The fire risk assessment process involves an assessment of the likelihood of an event (generally outbreak of fire) combined with an assessment of the severity should the event be realised, the severity being classified as negligible, tolerable, moderate, substantial or intolerable. Each significant finding identified has been given an appropriate risk rating, which is then prioritised accordingly on the action plan. Once all the significant findings have been identified the premises is given an overall risk rating based on the expert opinion, experience and training of the fire safety consultant conducting the assessment.	

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

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

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

FIRE RISK RATING MATRIX

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

18.0 Summary of Findings

FRA Ref	Hazard or Defect	Action Required	Hazard Priority	Risk Rating	Action By	Review Date	Contractor Completed
8.6	Items have been placed on the balcony by some of the residents	All items should be removed from the balconies. The residents should be reminded of WCHG's "zero" tolerance policy.	P1	Moderate	Simon Melloy		
9.1-9.3	Composite fire doors are installed which may not meet current certified test evidence to BS 476-22.	WCHG should reference the manufacturer's test evidence/certification and documentation for existing and proposed fire doorsets. See full recommendation.	P3	Moderate	Rob McDougall		
9.5, 9.14	Materials for use in the installation of the lifts were found in various locations, the smoke detector in the access room to the lift motor room was fitted with a dust cap and fire stopping may require completing.	WCHG should ensure that all required fire stopping is completed, that all waste and unused materials are removed from the premises and that any blanking caps fitted that may have been fitted to smoke detectors are removed.	P1	Moderate	Rob McDougall		
10.3-10.6, 10.10	An audible fire alarm is provided in the building, in the event of actuation of the system residents may enter a smoke filled area putting relevant persons at risk of harm.	It is recommended that consultation with the Fire and Rescue Service is carried out and the existing fire alarm system is reconfigured not to give an audible warning in the premises and an override device provided at the fire panel for use by the Fire and Rescue Service. See Commentary 10.0.	P1	Moderate	Simon Melloy		
13.5-13.7	The fire notice displayed in the entrance hall does not provide adequate information.	Replace the existing fire notice with the notice that includes the information regarding the fire alarm.	P1	Moderate	Simon Melloy		

19.0 Recommendations

FRA Ref	Observation	Recommended Action	Risk Rating	Contractor Completed
7.0	The list of persons who may require assistance is out of date.	If the list of persons who may require assistance is required then it should be kept up to date by being reviewed on a regular basis.	Moderate	
16.2	It has not been confirmed that the "Stay Safe" policy has been accepted in writing by GMFRS.	Written confirmation should be obtained from GMFRS that they have accepted the WCHG "Stay Safe" policy, and the resulting fire alarm cause and effect.	Moderate	

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

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

20.0 Commentaries

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