

TOTAL FIRE GROUP LTD

Fire Risk Assessment

Conducted at:

Montgomery House
Hawthorne Road
Oldham
Greater Manchester
OL8 3QG



UPRN: 0808700132000

05 August 2025

Certificate Number	LS	0500010
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Life Safety Fire Risk Assessment
Silver Approved Scheme
CERTIFICATE OF CONFORMITY



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

SCHEDULE		
Part 1	NSI Life Safety Fire Risk Assessment Silver Approved Organisation	
	Total Fire Group Ltd	
	BAFE Registration Number	
	NSI 00330	
Part 2	Name of Client	
	First Choice Homes Oldham	
Part 3	Address of premises for which the fire risk assessment was carried out	
	Montgomery House, Hawthorne Road, Oldham, Greater Manchester, OL8 3QG	
	Part or parts of the premises to which the fire risk assessment applies	
	The common parts only.	
Part 4	Brief description of the scope and purpose of the fire risk assessment	
	In compliance with Article 9(1) of the RRFSA 2005.	
Part 5	Effective date of the fire risk assessment	05/08/2025
Part 6	Recommended date for review of the fire risk assessment	05/08/2026

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

Signed (for and on behalf of the issuing Approved organisation)	
Job Title	Senior Fire Safety Consultant
Date	18/08/2025

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

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

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

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

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

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

Note.

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

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TERMS AND CONDITIONS OF BUSINESS

Montgomery House, Hawthorne Road, Oldham, Greater Manchester, OL8 3QG

This fire risk assessment is in accordance with the full Terms and Conditions provided with our quotation that should be read in full. The risk assessment should not be relied upon by any person other than the customer/client named herein. i.e. if the premises are sold to a third party. This fire risk assessment is made without prejudice to any requirements made by Local Authority, Building Control or by the local Fire Authority. Fire assessment and evaluation of risk is a dynamic and evolving process. The Assessment that we have prepared is based on the appearance of the premises/building, number of employees, internal layout and information provided on **Tuesday, 5 August 2025**

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.

Contact Details

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1.0 Fire Risk Assessment Details

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

First Choice Homes Oldham

22 Union Street, Oldham, Lancashire, OL1 1BE

and relates only to the premises of:

Montgomery House, Hawthorne Road, Oldham, Greater Manchester, OL8 3QG

Responsible or Accountable person(s):

First Choice Homes Oldham.

Person(s) consulted and landline contact number:

Thomas Garret accompanied the assessor at the time of the fire risk assessment. Thomas Garret@fcho.co.uk.

Fire Risk Assessor:

Ethan Davies BSc (Hons), MIFSM, Tier 3 IFSM Level Fire Risk Assessor (N665)

Validated by:

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

Date fire risk assessment was conducted:

Tuesday, 5 August 2025

Time:

10:00 am.

Date of last FRA or FRA Review (if known)

19 Aug 2024

Suggested date for next review:

August 2026

Fire risk assessment limitations:

A type 3 common parts and flats (Non-Destructive) Fire Risk Assessment (as detailed in the latest guidance document Fire Safety in Purpose Built Blocks of Flats) has been completed with access available to flat 29. The assessor and FCHO staff

attempted to access more flats but was not able to gain access.

Access was previously gained into the lift motor room during the previous fire risk assessment. The ground floor plant rooms, store cupboards, and the drying rooms on each floor were accessed, as well as the under-stairs electrical cupboard on the ground floor, and the externally accessed bin refuse room.

A head and shoulders observation was undertaken above the false ceilings on the ground floor towards the staircase.

No access was gained into the store cupboards at the rear on the ground floor. However, it was advised that these are no longer in use.

The assessment of the fire performance of the external wall construction and cladding is excluded from this fire risk assessment. Where required, it is recommended that advice is sought from a qualified and competent specialist on the nature of, and fire risks associated with, the external wall construction, including any cladding on this building. This exclusion is consistent with advice provided by the Fire Industry Association (FIA), specifically within the document 'FIA Guidance on the Issue of Cladding and External Wall Construction in Fire Risk Assessments for Multi-Occupied Residential Premises'. Where it is determined that a detailed assessment of an external wall is required, this should be carried out by specialists in accordance with PAS 9980.

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 was not observed.

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

Note

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

2.0 General Premises Details

2.1 Number of floors:

Eleven - ground floor and ten upper floors.

2.2 Approximate building footprint:

400m²

2.3 Details of Construction and Premises:

Montgomery House is said to have been built in the late 1960s. The previous FRA advised that the building is constructed in brick and reinforced concrete with concrete floors, a flat roof, and a single concrete staircase. Two passenger lifts are provided at the ground floor lobby each serving alternate floors, with both having a minimal level of control for firefighter use. They are not considered firefighting lifts. A dry-rising main is provided with the inlet on the exterior face of the building by the main entrance and outlets on each landing within the lift lobby. The building fire precautions appear to have been built to the recommendations in CP3 Part iv. Each floor lobby provides access to 4 flats, a single stair, a lift, and two permanently ventilated landings (drying rooms) on each end of the building. The ventilated landings have been partly enclosed due to the installation of gas boiler outlets to reduce exhaust build-up and are separated from the lobby by fire-resisting construction and new FD30s self-closing fire doors. Individual flats accessed have FD30s self-closing composite doors, a hallway approach to habitable rooms, and have been fitted with a residential sprinkler system, and mains-powered smoke and heat alarms with internal battery backup.

There is no fire alarm system in the common area although a heat alarm connected to each flat has been fitted in the ventilated landings (2 per landing). Emergency lighting is provided on the escape routes and there is a stay-put policy in the event of a fire.

The single-protected staircase doors have been renewed with new FD30s self-closing fire doors. The previous FRA advised that the wall panels adjacent to the staircase fire doors have been upgraded with fire-resisting construction. The staircase discharges into the ground floor lift lobby which has two separate ways out to fresh air. The ground floor also comprises storerooms, a disused boiler room (now sprinkler tank room) unused workshop, a WC, and a caretaker's office with all doors kept locked when not in use. The previous FRA advised that the external render and EPS insulation have been replaced with mineral wool insulation with cement-based render rainscreen.

2.4 Occupancy/Purpose Groups

The premises are classed as Purpose Group 1a Residential (Flat) as defined by Building Regulations Approved Document B 2019 (amended 2020 and 2022)

2.5 Approximate maximum and minimum number of persons:

85 (based on 2 persons per flat, plus employees)

2.6 Approximate maximum number of employees at any one time:

5

2.7 Maximum number of members of the public:

40 flats assuming 2 per flat, 80 persons.

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	Yes
Comments	
Flats are general needs. Residents may be present with any combination of disabilities throughout the premises. The Responsible Person for the premises 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 evident. None reported at the time of the fire risk assessment.

2.10 Any other relevant building details: i.e. Does the building have any ancillary uses, such as commercial or community activities? If yes provide details

None.

3.0 Overall Risk Rating

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

Risk to Life: Tolerable.

The External Wall System has been remediated and other works such as internal fire compartmentation works have been undertaken throughout the block. The sprinkler system and evacuation alert system (EACIE) are now installed and commissioned, and there are additional heat alarms on the ventilated landings. These measures are assessed as suitable risk reduction measures. Although there are two recommendations and a commentary that require action. The previous issues that affected the confinement of fire have been rectified. The risk to life is considered to be tolerable at the time of the fire risk assessment.

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

Risk to Property: Tolerable

Installations for sprinklers and evacuation alert systems have been installed and fully commissioned. There are no known large amounts of combustibles stored within the premises, and compartmentation works have been undertaken. The risk to property is considered to be tolerable at the time of the fire risk assessment.

Risk to Business Continuity:

N/A

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

4.0 Dangerous, Flammable, Combustible Materials & Substances

IDENTIFYING THE FIRE HAZARDS

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

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

Ref	FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
4.0-4.2	Questions 4.1 to 4.2 relate to substances and materials which are subject to the "Dangerous Substances and Explosive Atmosphere Regulations 2002" (DSEAR). 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?	N/A
5.2	Where appropriate are they retreated with flame retardant chemicals (theatre curtain etc.) or made from inherently flame retardant materials?	N/A
5.3	Are all items located away from ignition sources?	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	FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
5.1	At the time of this Fire Risk Assessment, the common areas were free of furniture and combustible furnishings.
5.4	At the time of this Fire Risk Assessment, the small amount of furniture in the caretaker's room/office was found to be in satisfactory condition. Where there is any doubt about furniture and other furnishings, 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?	No
6.2	Are all heaters fitted with suitable guards and located in positions away from combustible materials?	N/A
6.3	Are all heaters free from naked flames?	N/A
6.4	Has the use of safer alternatives been considered?	N/A
6.5	Are systems in place to ensure appliances are tested, repaired and maintained on a regular basis in accordance with the Electricity at Work Regulations, 1989?	N/A
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?	N/A
6.9	Are all appliances turned off when the area is unoccupied?	N/A
6.10	Are all appliances protected by the correct fuse rating?	N/A
6.11	Are systems in place to isolate any appliance with a blown fuse?	N/A
6.12	Are all appliances free from visible signs of overheating?	N/A
6.13	Are multi-point adapters and extension leads kept to a minimum?	N/A
6.14	Are all cables (where can be seen) on walls, floors, ceilings correctly secured, so as not to pose an entrapment risk to firefighters?	Yes
6.15	Are cables free from mechanical damage?	N/A
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 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	FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
6.1-6.3	There was no heating system or portable electrical equipment within the common areas. It is reasonable to assume that all flats are fitted with their own independent heating systems.
6.5, 6.7, 6.10	There was no portable electrical equipment within the common areas, however, the caretaker's room/office, may have items subjected to portable appliances testing. As part of FCHO standard responses, they carry out portable appliance testing every 2 years. It is highlighted that not all electrical devices need to be the subject of an annual PAT. The Health and Safety Executive (HSE) advocates a proportionate, risk-based approach to the maintenance of portable electrical appliances within the workplace. This guidance is simple and easy to follow and can be found on the HSE website "Maintaining Portable Electrical Equipment in a low-risk environment".
6.6	As part of FCHO standard responses, electrical safety checks/EICRs are carried out every 5 years.
6.14	The previous fire risk assessment noted that some of the metal trunking on the ground floor was seen to be open/missing sections of panelling, this was observed on the ground floor and within the ground floor room leading to the sprinkler tank area. At the time of the fire risk assessment it was observed that this action had been completed. The conduits had been secured.
6.20	With the exception of taking control of the lift cars, the lifts do not have any other facilities provided to aid firefighters (see 12-11-12.13). It is understood that a monthly function test is carried out on the fireman's control switch on each lift, with the results of the test recorded. Records were not observed at the time of the fire risk assessment.
6.20	As part of FCHO standard responses, all gas heating equipment is tested on a 10-month cycle, including gas air heaters and boilers. All records are stored within Property Portfolio and are monitored via 138D report and Power BI. Also, all legal compliance records are stored on the shared drive and updated as soon as maintenance/service records are sent to FCHO. Remedial works are picked up and completed as soon as possible. These completed works are recorded and stored with the maintenance documents. Documentation was not viewed on this assessment
6.21	Lightning protection is provided on the building. As part of FCHO standard responses, these are tested every 12 months.

7.0 Persons at Risk		
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 or PCFRAs been prepared for all relevant persons and visitors that may reasonably be expected to resort to the premises?	Yes
7.6	Are disabled refuges provided?	No
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.)	N/A
7.12	Are notices in place to inform of restricted access areas?	N/A
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.).	No

7.0 Persons at Risk: Finding(s)	
Ref	FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.

Ref	COMMENTARY
7.0, 7.3, 7.7	Identification of vulnerable residents in purpose-built flats with regard to escape provision As part of the fire safety management plan, it is critical that “adequate provisions” are provided for the evacuation of any disabled users. The fire safety for the building needs to take into account the disabled occupants who may have access to the premises. Purpose-built flats are afforded enhanced levels of compartmentation; these enhanced levels of fire compartmentation are generally considered “adequate provisions” that allow occupants to remain in the non-fire-affected compartment in the event of a fire elsewhere. Any failings discovered in the fire compartmentation jeopardise the evacuation strategy either locally to a flat/ floor or within the whole building and protection measures would need to be reviewed immediately. Where a simultaneous evacuation strategy is in place the Responsible Person must make reasonable provisions for the safe escape of all persons. There is no requirement under the Fire Safety Order for the Responsible Person to consider the means of escape from within persons flat considered a “private dwelling”, unlike the duty for protection required within the common parts for all persons. A flat occupied by any person including a vulnerable or disabled person is separate from this duty if they are unable to self evacuate from a fire affecting their flat. Irrespective of the legislation, two distinct evacuation stages are considered; 1. Evacuation from the dwelling on fire - The Specialized Housing Guide is intended to assist Responsible Persons for purpose-built blocks of flats where disabled and vulnerable persons are housed and the recommendations in the guide go beyond the scope of the legislation. The guide recommends measures for the protection of vulnerable residents from a fire within their own flats. A disabled person living in a block of flats is best served with a Person-Centred Fire Risk Assessment (PCFRA), which may or may not lead to a Personal Evacuation Emergency Plan (PEEP), but, even if it does where trained persons are able to assist, the PCFRA will achieve far more in terms of the safety for a disabled person from the risk of fire in their own flat than focussing purely on the much more narrow issue of a PEEP. In all cases, it is likely to lead to a Personal Rescue Emergency Plan (PREP). 2. Moving through and evacuating from the common parts. - Many persons with mobility impairment will be able to leave their own flat but may be unable to evacuate from the building (e.g. because of difficulty in negotiating stairs). In this connection, two matters need to be considered, namely relatively safe refuges and the use of existing lifts subject to the assessment of risk. Following consultation with the residents: • Every resident who voluntarily self-identifies to the Responsible Person as unable to self-evacuate should be subject to a PCFRA. This may lead to a PEEP or a PREP. • The assessment should differentiate between a person who is unable to self-evacuate from their flat and a person who is able to get out of their flat but is unable to evacuate from a relatively safe area (staircase or refuge) • Where a PEEP is the outcome of a PCFRA it should look to implement building safety measures where reasonably practicable to ensure that those with impairments have a plan for evacuation and should only require rescue in circumstances where this main plan cannot be implemented. • It should not be implied a successful evacuation will always be possible, and rescue is never needed; in some cases of severe disability, evacuation or rescue by FRS will be the only option. • Responsible persons should add information to the Premises Information Box (PIB) that they are aware of, for example, where they have been notified about a person with mobility impairments who has not self-declared or has refused a PCFRA/ PEEP. • Clarity may be necessary on whether the Responsible Person would be fulfilling the duties under the Fire Safety Order if all vulnerable persons have not been considered and given to opportunity to self-declare mobility impairments. • The PIB rescue information for the fire and rescue service is not the same as a PCFRA/ PEEP; this applies even where a PCFRA/ PEEP is declined since the amount of information required can vary and the PEEP/ PCFRA is particular to that person. • The PCFRA/ PEEP should feed into a review of the premise's fire risk assessment. • If the use of refuge areas is to be relied on as part of a PEEP, details about the method of communication from the place of safety should be included. • PCFRA/ PEEP should be reviewed as soon as practicable if the resident indicates a change in circumstances to the Responsible Person. A regular review of PCFRA/PEEPs is also required to mitigate the risk of changes to circumstances going unnoticed because residents have not updated the Responsible Person. • It is important that the Responsible Person understands that any PEEP, PREP, or PCFRA may require the building's Fire Risk Assessment to be informed and updated. Personal plans for fire emergencies: PEEP (Personal Emergency Evacuation Plan) - Is the term normally understood for a generally non-residential building to provide a plan separate and in addition to the normal fire plan which may include assistance to evacuate from the building by trained persons available at all times the disabled person is expected in the premises. This type of plan is generally ineffective and not recommended in purpose-built blocks of flats that do not have sufficient permanent staff on site. Reliance on friends and non-resident family members as part of a PEEP may place a vulnerable person or their nominated assistant at greater risk of harm as they may not be available at the critical time or be sufficiently trained to make a suitable dynamic assessment of the risks presented. PCFRA (Person-Centred Fire Risk Assessment) - The person-centred approach, based on a PCFRA, relates to the safety of residents who are at high risk from fire in their own accommodation; as such, this risk assessment and measures identified by it are outside the scope of the Fire Safety Order. The assessment is designed to reduce the potential fire hazards as far as possible depending on the personal circumstances of the disabled person, thus reducing the risk of fire, and may also include a PREP. PREP (Personal Rescue Emergency Plan) - This term is born out from a PCFRA and is generally where a disabled person is in need of rescue by the fire and rescue service when all other risk reduction measures have failed. For an outbreak of fire elsewhere other than the disabled person's flat the probability of implementing such a plan is greatly reduced. This is unlikely to arise unless there are building failures, such as loss of compartmentation.

7.1, 7.3, 7.8	The building is occupied as general needs flats, therefore fire drills and associated staff procedures are not required. Residents of the flats may have a range of disabilities but will be familiar with the means of access and egress which is used on a regular basis. New residents should be encouraged to have a home fire safety check by the local authority Fire and Rescue Service where it is considered that they may be vulnerable in the event of a fire. Specific measures regarding residents with any disabilities identified can be discussed and implemented following the home fire safety check in conjunction with relevant local community services. Where it is known that persons cannot self-evacuate, further fire safety measures may be needed. Information regarding the assistance of any mobility-impaired residents is included in a SIB, (Secure Information Box) sited in the ground floor lobby which is easily accessible by the fire and rescue service.
7.3, 7.6-7.7	The person consulted advised that FCHO representatives visit all residents within the block every year to ensure up-to-date information is in place. They now have a process whereby everyone who has been identified as vulnerable, a PCFRA will be put in place, and the information will be updated within the SIB. The vulnerable persons list was reviewed at the time of the fire risk assessment.
7.10	Access to the building is controlled and visitors to residents will be allowed access where required. The escape routes are clearly signed. Other contractors and visitors gain access from the caretaker or are approved contractors for FCHO who will have been given any necessary information in advance.
7.11	First Choice Homes Oldham in-house contractors are trained in basic fire awareness. Information to other approved contractors is provided prior to undertaking any work.
7.12	Restricted areas are secured by locked doors which are locked by FCHO staff or cleaners when not in use.

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

8.0 Means of Escape: Finding(s)	
Ref	FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.

Ref	COMMENTARY
8.2	The permanent vent at the head of the stairs has an insect screen mesh on the inside and remains clear of dust and debris.
8.2	Analysis of smoke entering the lobby was undertaken on previous FRAs which is still considered current: The risk of persons being trapped in their flats by smoke from a fire that reaches the lobby outside from a fire originating in an adjacent flat is likely to be reduced if the travel distance from any one flat exit door to a place of safety is limited. The doors opening onto the drying rooms (ventilated landings) may be used by the fire and rescue service on their arrival for venting smoke in the lobby but little benefit from the vents can be gained for residents escaping as drying room doors would need to be opened prior to and during their escape. This risk is reduced when the travel distance is short as accepted in the case of diagram 3.9b in the Approved Document B Vol1 to the Building Regulations (HM Government, 2019). The original travel distance recommended at the time of construction is approximately the same under current guidance (15 feet or 4.5m) from a flat entrance door to a smoke stop door to a place of relative safety; in this case the staircase door. The rationale in this instance, for keeping travel distances short is that should any smoke enter the escape route as people leave the flat of fire origin, other neighbouring flats on the same floor may also leave. Studies regarding tenability limits have shown that a significant proportion of people will turn back from escaping where the smoke optical density (D) is greater than 0.2 D.m⁻¹ which equates to 5m visibility. It was deduced from these past studies that there is some relationship between smoke optical density and the concentrations of irritant and asphyxiant gases in fires and it was considered that at a smoke tenability limit of 0.2 (5m visibility), the majority of fires remain tenable with respect to asphyxiant gases for at least 30 minutes. (BSI, 2004). It could be reasonably expected that a quantity of smoke may enter the lobby as the occupants escape. The self-closing entrance door to the flat of fire origin would close behind the escaping occupants thus restricting further smoke spread into the lobby. It is likely that most residents (3 other flats on the same floor) who become aware of the fire prior to the arrival of the fire and rescue service, and if they so choose, could make their way across the lobby to the stairs in less than a minute where the smoke optical density in all likelihood is 0.2 or less and the stair door 5m away in the furthest point is visible. For fire events where there may be a greater degree of smoke obscuring the route across the lobby (density >0.2) or a resident is disabled and unable to cross the lobby at normal speed accepted for escape purposes, they are advised to stay put in their flat, a place of relative safety until the flat of fire origin is dealt with by the fire and rescue service. <u>The LGA guidance makes benchmark recommendations for existing blocks of flats with unsatisfactory smoke control.</u> <i>In single stairway blocks with corridor or lobby approach requiring smoke ventilation, and with travel distances of 7.5 to 10m, Opening Vents (OV) in corridors or lobbies are acceptable up to six storeys in height. If this travel distance exceeds 10m, or the number of storeys exceeds six, or the ventilation is provided in the stairway and not the corridor or lobby, Automatic Opening Vents (AOV) or Permanent Vents (PV) are required.</i> Montgomery House is over six storeys however the travel distance across the lobby is less than the 7.5-10m recommended. It is within 5m, and the potential tenability limits are discussed above. Also, there are facilities for manually opening vents (doors to the ventilated drying rooms). Given the constraints of the existing design and age of the building, the risks are considered similar to a floor of a flat located in a small single-stair residential building where it is acceptable for an unventilated lobby with a travel distance of 4.5m. Enhancements by the replacement of old benchmark fire doors with composite FD30s self-closing fire doors together with compensatory enhanced automatic fire detection and warning to the drying rooms and adjacent flats provide significant risk reduction measures against the benchmark design. The installed residential sprinklers will significantly enhance the risk reduction measures further. Sprinklers can buy crucial additional time in firefighting operations which may mean that evacuations are not necessary in the first place. Also, the installed and commissioned Evacuation Alert System (EAS) for use by the FRS is likely to further enhance safety by providing an early automatic method to evacuate any floor based on operational decisions by the FRS officer in charge. Based on what is reasonably practicable, there are several interrelated issues and potential fire scenarios that make upgrading the lobbies in line with current guidance not reasonably practicable given the fire safety improvement measures already implemented. The consideration of the risk of harm is to persons who leave or wish to leave their flat before the arrival of the fire service when the smoke has entered the lobby as the occupants of the flat of fire origin have evacuated. This risk to persons is acknowledged and shown to be tolerable based on the guidance of people's movement through smoke where the escape distance is relatively short (4.5m). Further smoke is held back from the fire origin potentially by internal flat doors and ultimately by the self-closing flat entrance door which is designed to maintain its integrity for a sufficient time to allow the fire and rescue service to arrive and deal with the fire. The small level of risk reduction gain (to lessen the density of smoke) for the significant measures that would be needed to suitably ventilate the lobby may be seen as grossly disproportionate. This is because of the existing fire protection measures (upgraded fire doors, AFD, and sprinklers), a fire is unlikely to make the lobby untenable prior to the arrival of the fire and rescue service. It could be argued that the addition of a smoke ventilation system adds another layer of safety to the overall package of fire protection measures, and this would be true and applicable if for example one of those layers fails e.g. the flat entrance door does not close fully allowing a greater density of smoke into the lobby. There is however a limit to what is reasonable in how many layers of fire protection are necessary and it could also be argued that if the "belt and braces" approach is taken, how many failures in the system are realistically considered, and what if a smoke control system fails at the critical time? It has already been established that a high proportion of people will travel through smoke with a visibility of 5m. This is the distance across the lobby from the furthest flat entrance door so adding further measures to something that has already been established as suitable is not proportionate to the risk. In the event that a resident wishes to leave and the lobby has become untenable due to a failure of one of the layers of fire protection, the inbuilt safety factor where residents are safe to retreat into their flats to relative safety whilst the fire is dealt with will come into play. Given the level of management for this building, it is unrealistic to expect a series of failures in the layers of fire protection. Note: The permanent smoke vents are separated from the lobby by self-closing fire doors.
8.7	At the time of the fire risk assessment, the communal areas were free from any combustible/items.

8.7	The previous FRA raised an action in relation to UK fire incident information being published warning of the increase in fire incidents involving Lithium Batteries used in electric scooters, and E-bikes, and for residents to be informed of the current precautions. The previous FRA action has not been signed off as complete on Aurora. However, the person consulted advised that FCHO have sent letters to all residents of the block to inform them of the safe use and storage of said bikes/scooters.
8.7	For information: Lithium Batteries - Electric scooters, and E-bikes With an increased use of e-bikes and e-scooters, comes a corresponding fire safety concern associated with their charging and storage. The use of these products is expected to continue to rise. Some fire services and fire investigators have seen a rise in e-bike and e-scooter battery fires. On occasions batteries can fail catastrophically, they can 'explode' and/or lead to a rapidly developing fire. Precautions when charging: • Follow the manufacturer's instructions when charging and always unplug your charger when it is finished charging. • Ensure you have working smoke alarms. If you charge or store your e-bike or e-scooter in a garage or kitchen ensure you install detection, heat alarms rather smoke detectors for these areas is recommended. • Charge batteries whilst you are awake and alert so if a fire should occur you can respond quickly. Do not leave batteries to charge while you are asleep or away from the home. • Always use the manufacturer approved charger for the product, and if you spot any signs of wear and tear or damage buy an official replacement charger for your product from a reputable seller. • Do not cover chargers or battery packs when charging as this could lead to overheating or even a fire. • Do not charge batteries or store your e-bike or e-scooter near combustible or flammable materials. • Do not overcharge your battery – check the manufacturer's instructions for charge times. • Do not overload socket outlets or use inappropriate extension leads (use uncoiled extensions and ensure the lead is suitably rated for what you are plugging in to it). • In the event of an e-bike, e-scooter or lithium-ion battery fire – do not attempt to extinguish the fire. Get out, stay out, call 999. Precaution with storage: • Avoid storing or charging e-bikes and e-scooters on escape routes or in communal areas of a multi occupied building. If there is a fire, it can affect people's ability to escape. • Responsible Persons should consider the risks posed by e-bikes and e-scooters where they are charged or left in common areas such as means of escape, bike stores and mobility scooter charging rooms. They may wish to offer advice to residents on the safe use, storage and charging of these products. • Store e-bikes and e-scooters and their batteries in a cool place. Avoid storing them in excessively hot or cold areas. • Follow manufacturer's instructions for the storage and maintenance of lithium -ion batteries if they are not going to be used for extended periods of time. The batteries work by moving lithium particles between a negative and positive electrode to charge and discharge. To allow those particles to move easily, they are suspended in pressurised cells inside the batteries filled with volatile and flammable chemicals. The movement of the particles causes heat as the battery is charged and discharged. If the battery was badly designed or improperly used or installed, that heat can ignite the chemicals, causing flames or explosions. Damage to the thin walls that keep the different parts of the battery separate can also lead to short circuits and a corresponding heat build-up.
8.12	Final exit doors are used regularly by residents and it can be reasonably expected that any fault would be reported. Regular checks are carried out by the mobile caretaker however these are not recorded unless a defect is reported.
8.18	The front door is fitted with electromagnetic locks. The door is fitted with a dual push button release that has been confirmed to release on the loss of power and is configured to release the doors in an emergency.
8.22	The devices are fitted onto the main entrance door and all residents and their visitors should be familiar with their operation which is indicated.

9.0 The Confinement of Fire

9.1	Are all escape routes and compartments protected by fire resistant walls and doors where required?	No
9.2	Where required, are the compartment walls of top floor compartments extended through the roof void and suitably sealed at the roof?	N/A
9.3	Is there a procedure for monitoring and maintaining existing fire resisting construction and fire stopping, in particular, pre-contractual agreements prior to any alterations work on site?	Yes
9.4	Is there a procedure in place to regularly check the condition of fire resisting doors and doorsets?	Yes
9.5	Are all fire doors self-closing, kept locked shut where appropriate and in good condition?	No
9.6	Are all fire doors fitted with smoke seals and intumescent strips where required?	Yes
9.7	Is there reasonable limitation of linings to escape routes that might promote fire spread?	Yes
9.8	From a non-invasive inspection, is there potential for fire and smoke spread through routes such as doors, walls, vertical shafts, service ducts, service penetrations, venting systems, cavities, and voids?	Yes
9.9	Have there been any structural alterations within the past 12 months?	No
9.10	Were the requirements of the Building Regulations followed and a completion certificate issued?	N/A
9.11	Are all ducts fitted with effective fire dampers where required?	No
9.12	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
9.13	Is glazing within the above distances fire resisting and fixed shut?	N/A
9.14	Is there a procedure for all premises/areas to be checked at the end of a working period for potential fire hazards?	N/A
9.15	Are the premises free from risk posed by adjacent properties? (Uncontrolled fly tipping, overgrown vegetation or poor housekeeping)	Yes
9.16	Are there any other premises features or hazards that could affect fire development or spread?	No
9.17	Is there potential for fire and smoke spread into the premises from an external fire?	No
9.18	Does basic security against arson by outsiders appear reasonable?	Yes
Automatic Hold Open Devices		
9.19	Are any fire doors fitted with automatic door release devices?	No
9.20	Are the devices fitted to any critical doors? e.g. onto stairs in a single staircase building	N/A
9.21	Is smoke detection provided within the area located near to the door release device? (Consider to L3 standard?)	N/A
9.22	Are all non-self-contained devices linked to the fire alarm system and released on actuation?	N/A
9.23	Are any self-contained, acoustically actuated door hold open devices fitted?	No
9.24	Are all devices tested regularly and the results recorded? (At least once a week)	N/A
9.25	Are all doors released at night or when the area is unoccupied?	N/A
9.26	Are all devices tested in accordance with the manufactures relevant standard to ensure satisfactory operation?	N/A
External Wall Systems		
9.27	Has the risk of external fire spread been considered? Consider external cladding, wall systems, external render and balconies.	Yes
9.28	Has there been any previous examination of the building's external wall system or cladding? If yes provide details.	Yes
9.29	Has the information on the EWS or any changes to it, been sent to the Fire and Rescue Service?	Yes

9.0 The Confinement of Fire: Finding(s)	
Ref	FINDINGS
	None.
Ref	RECOMMENDATIONS
	Observation
9.1	It was observed at the time of the fire risk assessment that there were small drill holes next to a number of flat entrance doors. This is more than likely due to a doorbell being installed. 
	Recommended Actions
9.1	FCHO should monitor these holes throughout the property, and where they are deemed excessive or may lead into the flats, they should be firestopped to the same level of fire resistance as the surrounding wall.
	Observation
9.5	The metal unit in the drying room adjacent to flat 17 was found to be left open. This was confirmed to house TV aerials. 
	Recommended Actions
9.5	It is recommended that this unit be kept locked shut.

Ref	COMMENTARY
9.1	The previous FRA raised an action in relation to the bathroom windows of flats that open up into the drying rooms being mechanically screwed/fixd shut, as there is a low risk that ambient temperature smoke from a smouldering fire may spread beyond the flat of fire origin via open bathroom/ WC windows to affect a neighbouring flat which may lead to a slight risk of harm to the immediate neighbouring resident/s. This is comparable to smoke spreading externally via an open window and re-entering the building through another open window at a different level. The previous FRA action has not been signed off as complete on Aurora. However, as an alternative to the other recommendations and to totally prevent the risk of any smoke spread via the windows no matter how small, the windows have been mechanically (screwed/nailed) sealed shut thus preventing any ambient smoke spread from flat to flat horizontally. The risk of smoke spreading vertically via open windows on the external wall would remain the same. Sprinkler systems are activated by heat from the fire, and release water onto it. They are designed to prevent the fire from growing so that much less smoke and heat are produced and people have more time to escape. In many cases, a sprinkler system will put the fire out. The installation of the residential sprinkler system in the flats/ventilated landing is highly likely to reduce the risk of fire spreading across the ventilated landing. In the unlikely event of fire spreading onto the ventilated landing before the sprinklers become effective, the addition of a heat detector located in the landing provides an early warning of fire for the immediate neighbouring resident/s. The ventilation area has been increased by the removal of sections of acrylic sheeting following previous recommendations bearing in mind advice from the gas engineer, thus allowing a greater volume of smoke to ventilate to the atmosphere from the landing. The risk of harm to relevant persons is assessed as low due to the mitigating measures taken above. However; If future renovation works occur, or window units become damaged, it would be advisable to upgrade the bathroom window units to ones that are fixed shut and provide 30 minutes of fire resistance. It is noted prior to the installation of sprinklers, a previous serious top floor flat fire which likely achieved flashover when the lounge window failed did not spread to or across the ventilated landing. See 9.11, 9.16's commentary. 
9.1	The previous fire risk assessment raised an action that the bathroom window to flat 18 on the 5th floor was smashed and covered with a thin piece of plywood. At the time of the fire risk assessment, this window had been repaired.
9.1-9.2	There is no roof void compartmentation to consider as the building has a flat roof as confirmed by the person consulted, and also by an aerial view on Google Maps.
9.1, 9.5-9.6	The ground floor lift lobby double doors along with other communal doors are FD30s self-closing doors.

9.1, 9.5-9.6	From the flats accessed, the layout is the same as noted in the flats previously accessed. The entrance doors appear to be robust FD30s self-closing composite fire doors which are a good fit and close fully under the action of the self-closing devices (however, see 9.5's significant finding on a couple not closing/missing self-closers). The person consulted advised that the doors are around 7-10 years old and FCHO has confirmed that these types of doors are only fire tested from one side, and a decision had been made to replace these when they become damaged, which is understood to all have been consulted with the fire service. Test evidence of the performance of the door was available and viewed. A 30 minutes fire resisting doorset report undertaken by Warrington Fire was viewed. The conclusions from that report advise that if the NFS 30 minutes doorset design, constructed in accordance with the specifications documented in the report, were to be tested in accordance with BS476-22:1987, it is the opinion of Warringtonfire that they would provide a minimum of 30 minutes fire resistance integrity performance and insulation (subject to section 20 of the report). The report is valid from 10/10/2019 - 10/10/2024, in which a new report would need to be issued. A report from Exova Warrington fire was also viewed by the previous assessor, to show the test evidence of the performance of the doorset which was dated 15/04/2014 to show that the doorsets had passed the required fire tests. Flat 22's entrance door was different from the rest, however, the person consulted advised that the door is a fire-rated door and was upgraded within the last 2 years with intumescent fire and cold smoke sealed and a self-closing device. (This flat is owned by the tenant.) It was also confirmed that this door is on the list for replacement and has had a new letterbox fitted alongside a new self-closing device. 
9.1, 9.5-9.6	All doors to the communal areas, including doors to drying rooms, staircase doors, etc., were seen to be in a good state of repair, working correctly and fully self-closing at the time of this FRA.
9.1, 9.5, 9.8	The previous fire risk assessment noted that the 5th-floor refuse chute door did not fully shut when tested on-site. At the time of the fire risk assessment, it was observed that this action had been completed.
9.1, 9.5, 9.8	The previous fire risk assessment noted that it was observed that the entrance doors to flats 24 and 35 were not able to self-close fully and unaided into the doorframe. It was confirmed by Thomas Garret at the time of the fire risk assessment that both doors have been adjusted and this action has been completed.
9.1, 9.8	Where the level of fire stopping or fire resisting construction is found to be below an acceptable standard remedial fire stopping work should be carried out. Breaches in fire resisting construction should be filled with suitable fire resisting materials to maintain the standard of fire resistance of the surrounding structure in accordance with BS 476 Pt 22 or BS EN 1364 Pt 1 to 6. The use of third party accredited passive fire protection contractors and products should ensure any remedial actions will be to the required standard in the most cost effective manner. The Responsible Person ought to have in place a system for ensuring that the integrity of any passive fire protection measures is not compromised when building alterations are carried out e.g. for the installation of new pipes, cables and other services. Records of these should be maintained for future inspection by auditors and enforcement agencies. One common available fire stopping product is expanding fire resisting foam. To avoid unnecessary costs, the universal use of expanding fire resisting foam products should be used with caution and in strict accordance with the manufacturer's recommendations to achieve the required fire resistance. Generally, expanding foam products are tested as narrow linear gap seals and will not work in a large penetration seal. The Guide to Inspecting Passive Fire Protection for Fire Risk Assessors produced by The Association for Specialist Fire Protection advises that PU expanding fire resisting foam products should only be used to seal linear gaps between walls and walls / floors / ceilings. It cannot be used to seal pipe or cable penetrations unless tested for that end-use application. In this case, other more appropriate fire stopping products should be used. It is recommended where rectifying life safety compartmentation issues that third party accredited contractors, who have been accredited to undertake the particular aspect of works, using appropriate third party accredited products is considered. Note: Compartmentation - Compartment walls and floors should form a complete barrier to fire between compartments they separate and have the appropriate fire resistance. Fire Stopping - If compartmentation is to be effective, every joint or imperfection of fit, or opening to allow services to pass through the compartment, should be adequately protected to the same standard of fire resistance by sealing or fire stopping so that the fire resistance of the compartment is not impaired.

9.4	The person consulted advised that a quarterly check by BM Trada trained FCHO operatives of all communal fire doors and the exterior of all flat entrance doors is carried out. It was advised that during the quarterly inspection, a number of flats are accessed and checked to confirm the internal fire precautions and the condition of the self-closing device and internal face of the doors with the aim of inspecting fully all flat entrance doors in a 12-month period. Also advised is that information on the residents is collected as part of the flat checks such as vulnerabilities that would prevent them from escaping. Further advice on routine inspection and maintenance of fire-resisting doors can be found in BS 8214 and LGA guidance Fire Safety in Purpose Built Flats section 82. Note Regulation 10 of the Fire Safety (England) Regulations 2022 gives further advice on additional information about fire doors to be given to residents. https://www.gov.uk/government/publications/fire-safety-england-regulations-2022/fact-sheet-fire-doors-regulation-10
9.6	The cold smoke seals on the staircase and drying room doors throughout the block were different in some areas (white seals) and were advised to be approved seals. These were added to solve the airflow problem.
9.8	Onsite observations showed that ground-floor plant rooms, ancillary rooms, bin rooms, and other areas were adequately fire-stopped including areas above the false ceiling on the ground floor and within the trunking and boxed-in sections (sampled only). 
9.9-9.10, 9.16, 9.27	FCHO provided a Building Regulations Certificate of Completion to a previous assessor for the stripping off the render and insulation, renewing with a compliant system, and renewing the windows, doors, and roof lining. Carrying out any remedial works required to roof edge protection/balustrade & balcony balustrading. The completion date is noted as 19/05/2021, with the works deemed to comply with the Building Regulations.
9.11	Under Regulation 38 (formally 16B) of the Building Regulations the designer/principle contractor is required to handover, to the end user, "as built" information regarding the systems and protection measures for the safe operation of the building. This information was not available to the consultant at the time of the fire risk assessment. It should include the design and fire protection measures incorporated into the ventilation system. 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.

9.11, 9.16	The previous FRA confirmed and noted the below, which is considered to still be relevant and correct: Background to building changes degrading the compartmentation between neighbouring flats. Prior to 2006, it is assumed benchmark fire compartmentation between the flats had been breached where PVC windows and ventilation ducting had been installed. On a previous Fire Risk Assessment dated 1st October 2013 the overall risk to life was assessed and recommendations were prioritised to protect the escape route for residents in a flat adjacent to a flat involved in fire and spreading into the ventilated landing. To compound this issue, each flat had subsequently been fitted with an individual gas water heating appliance with the flue routed through the ventilated landing. The permanently ventilated louvred landings had been sealed with acrylic sheeting to prevent combustion gasses from accumulating in the landing reducing the smoke clearance capability of the vents. Following the fire risk assessment review dated 09/10/2015 consultation took place with Greater Manchester Fire and Rescue Service fire engineering department regarding the provisions to ventilate the landings and to provide cross ventilation of the lobbies. It was recommended that a substantial part of the acrylic sheeting be removed without compromising the gas safety regulations regarding the backflow of combustion flue gasses. It was agreed by all parties, albeit not strictly conforming to current guidance, that the acrylic be removed from floor level up to approximately 1m on each ventilated landing. (the flues are fitted at a high level). Under the current circumstances, the risk to life for persons in a flat opposite (across the ventilated landing) a flat on fire is increased compared to the norm. Should there be smoke spread via open windows in the ventilated landing some smoke may percolate into the neighbouring flat. Each flat is fitted with a mains-powered smoke alarm which is checked and tested on an annual basis, this is likely to alert the occupant who can then take the appropriate action and escape via the landing and staircase which is designed and likely to be smoke-free in the early stages of a fire. This scenario is similar to a fire breaking out within the neighbouring flat and the smoke alarm warning the occupants and therefore not considered a significant increase in the risk to life. The main difference is that the occupants have no control over what the occupants of the neighbouring flat do in relation to preventing an outbreak of fire. To reinstate 60 minutes of fire resistance between all the flats abutting the ventilated landing was not considered reasonably practicable against the reduction to the level of life risk in a neighbouring flat and a moderate risk may have to be accepted for an individual flat occupant until alternative proposals can be implemented. In order to reduce that life risk further to a tolerable level significant fire protection improvement work was required to make the windows and ventilation ductwork in the ventilated landings 60 minutes fire resistant and to provide high-level natural ventilation by the removal/repositioning of the acrylic sheeting on the louvres. A compartment fire with total involvement of a top floor flat which breached the external window and balcony doors appears not to have affected the uPVC windows and ventilation ductwork to the ventilated landing. These appeared to have been in the closed position during the fire. It is considered fortunate on that occasion that the windows were closed thus preventing smoke from entering the common ventilated landing and spreading further into the adjacent flat via open windows. Photos of the previous fire show smoke staining the internal part of the bathroom and WC window frames.  The work to install sprinklers in the flats and common landings is completed. This together with extending each individual flat fire detection system by the addition of a linked heat alarm on the landing as previously recommended is considered to be a suitable risk reduction measure in lieu of 60 minutes fire resistance between flats across a ventilated landing. Heat detectors are considered suitable as the uPVC frames and windows present a barrier to cool ambient smoke and any significant heat affecting the glass and uPVC would be detected and a warning provided to allow neighbouring residents to leave their flat via the lift landing lobby without suffering harm. The ventilated landing and lift landing lobby are separated by 30 minutes fire resisting construction and self-closing doors.
9.16	The refuse chute is protected within the externally accessed bin room by means of a spring-loaded gate, connected to a fusible link. The metal gate slides across the base of the refuse chute to provide fire separation if the temperature from a fire in a bin causes the link to melt. The operation of the spring-loaded gates is checked six monthly by a contractor. The drying rooms where the chute hatches are located are checked regularly and are protected by self-closing fire doors.
	The general housekeeping in the premises is of a good standard.

9.27-9.28

The previous FRA advised:

The external façade consisting of cement-based rendered EPS insulation has been removed and replaced with a rendered mineral wool insulation without any cavities.

Flats are provided with balconies that are part of the original structure and constructed of non-combustible materials. First Choice Homes Oldham displays a document that states not to use or store BBQs, gas cylinders, or anything flammable on the balconies.

Some residents may store combustible household items excessively on the balcony which was not observed during the assessment. This forms part of the monthly common area check. The balconies observed were not unduly cluttered with household items with some having outdoor furniture and pot plants.

Although not viewed on this assessment, it was previously advised that documentary evidence was obtained by FCHO from the principal contractor confirms that the materials forming part of the external wall conform to European Classification A2-S1 d0 or A1, classified in accordance with BS EN 13501-1:2007+A1:2009.



10.0 Automatic Fire Detection

10.1	Where a fire alarm system is required has one been provided?	No
10.2	Is there suitable provision of automatic detection within the flats?	Yes
10.3	Is there a procedure in place to ensure fire detection within residents' flats are routinely checked, to ensure they have not been tampered with?	Yes
10.4	Is it possible to define the detection system category? (L1- L5 etc.)	N/A
10.5	Is the automatic fire detection suitable for the risk and premises type?	N/A
10.6	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.	N/A
10.7	Are sufficient call points and detectors provided?	N/A
10.8	Can the alarm be raised without placing anyone at risk?	N/A
10.9	Are all call points visible, unobstructed?	N/A
10.10	Are all fire alarm sounders of the same type, giving the same alarm signal? The signal should be distinct from all other alarms or signals in the workplace to avoid confusion.	N/A
10.11	Where required does the system have a voice alarm? i.e. large places of assembly	N/A
10.12	Can the alarm be heard throughout all areas of the premises?	N/A
10.13	Has a suitable fire zone plan been provided adjacent to the fire panel where necessary? i.e. complex premises or care homes	N/A
10.14	Is the fire alarm system under a regular maintenance programme by a qualified fire alarm engineer?	N/A
10.15	Are there systems in place to ensure the system is tested weekly from a different call point?	N/A
10.16	Are all fire alarm tests, faults and maintenance schedules recorded?	N/A

10.0 Automatic Fire Detection: Finding(s)	
Ref	FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
10.1	Detection has been installed in all the ventilating landings, bathroom windows have been fixed shut, and the sprinkler system has been fully installed and commissioned. It has also been advised that residents receive regular communications in relation to fire safety.
10.1	No fire alarm system is provided within the common areas. Provided there is effective compartmentation and means of escape, 'general needs' blocks of flats will not normally require a communal fire alarm. Automatic fire detection has however been provided in all of the drying rooms linked individually to each flat.
10.2-10.3	The scope of the Regulatory Reform (Fire Safety) Order 2005 does not cover internal parts of the flats. In general, the resident flats accessed were provided with BS5839-6 Grade D LD2 fire alarm systems, and a sounder in the hallway linked to the EACIE, and as part of their standard responses, FCHO has confirmed that all blocks with three or more stories are currently in the process of being upgraded to LD2 detection coverage. As part of their standard responses, detection is checked during FCHO annual inspections (to the representative sample of flats accessed) as well as during the annual gas safety check where results are documented on the CP12. FCHO also sends out regular communications to its customers to ensure they report missing or faulty detection within their homes. Due to the above process and physically seeing detection in flats accessed, it is reasonable to assume that this is representative of the remainder of the flats.
10.12	It was observed that there is a system installed within the roof area, the fire alarm panel can be accessed on the top floor inside the drying room and appeared healthy at the time of the fire risk assessment showing no faults. The coverage and the type of fire alarm system can be determined with the commissioning certificate given to FCHO at the time of installation. 

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)	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	FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
11.1-11.3	It was not possible to ascertain the exact level of illumination but the coverage appeared to be satisfactory, and the installations are assumed to comply with relevant standards.
11.5-11.6	As part of FCHO standard responses, all emergency lighting systems are tested every 6 months (a 3-hour discharge test and a 1-hour discharge test), with a monthly test undertaken. Records were not observed at the time of the fire risk assessment.
11.7	There were issues regarding normal lighting within the ground-floor plant room area. This was reported by Thomas Garret at the time of the fire risk assessment. He also confirmed that the likelihood of a person working in this area is low.

12.0 Fire Fighting Equipment, Facilities, Systems & Fixed Installations

Firefighting Equipment		
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
Firefighting and Firefighter Facilities		
12.6	Are firefighting and firefighter facilities provided, tested and maintained? (Dry/wet rising mains, SIB's, wayfinding signage)	Yes
12.7	Are all systems fully operational and functional?	Yes
12.8	Are all security devices functional? (Sprinkler valves, wet & dry rising mains padlocked etc.)	Yes
12.9	Where sprinklers are fitted are all heads clear of obstructions (500mm clear of stock) and functional?	Yes
12.10	Where firefighting shafts or fire mains are provided are the locations of the inlets/outlets in line with current guidance?	N/A
Firefighting Lifts		
12.11	Are lifts provided for the use of firefighters or evacuation?	Yes
12.12	Are all lift controls functional, tested and maintained?	Yes
12.13	Are any defects to the lift(s) reported to the Fire and Rescue Service? (defects that would affect or impact firefighting operations)	Yes
Facilities and Systems		
12.14	Is there an Emergency Alert System (EAS) for use by the Fire and Rescue Service? If the EAS is not in accordance with BS8629 can it be adapted to provide an EAS on the floor of fire origin, selected floors, or full evacuation? Please provide details.	Yes
12.15	Have up to date floor and building plans been provided to the Fire Service in electronic format, detailing key building information, location of firefighting facilities and equipment?	Yes
12.16	Where appropriate, has a Secure Information Box (SIB) been provided with up to date info, and access keys? Is it in a suitable secure location for access by the Fire Service?	Yes

12.0 Fire Fighting Equipment, Facilities, Systems & Fixed Installations: Finding(s)	
Ref	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. Plant room areas are provided with extinguishers, which are considered acceptable and serviced. The last service was done in March 2025.
12.6-12.8, 12.10	A dry riser is installed with outlets located on the lobby areas to flats. The landing valve leather securing straps that help to prevent unnecessary water discharge when the riser is charged are correctly located. The dry riser inlet is located by the entrance door to the block. As part of FCHO standard responses, where installed dry risers are subject to 6 monthly checks: full pressure check and visual inspection. Records were not observed at the time of the fire risk assessment. 
12.6, 12.15-12.16	As part of FCHO standard responses, where installed Secure Information Boxes (SIB) are reviewed every 3 months during quarterly building inspections, this includes ensuring information remains relevant, keys and code remain current and vulnerability information is maintained up to date, the approach has been agreed with GMRFS local fire crews. The SIB in the lift lobby area on the ground floor was accessed on this visit to find that it contains information specifically for the fire service, including any information regarding vulnerable residents and floor plans. It is reasonable to assume the fire service carries a key to gain access to the box. It must be noted that the responsibility for updating the information with regard to any vulnerable tenants remains with FCHO. Therefore, FCHO should ensure that the information stored in the SIB is kept up-to-date and regularly reviewed.
12.8	The person consulted advised that the sprinkler system had been fully commissioned in January 2023, and the system undergoes a monthly visual inspection and annual pressure test. Documentation was not viewed on this assessment.
12.11-12.13	Lifts with a Fireman's Switch function are provided on the two lifts within the building. Fireman's lifts were installed before fire-fighting lift standards were made available, incorporating only simple means to recall the lift to a designated floor, with no complex lift controls or protection measures for fire and rescue service use, also known as a fire service lift. Where the term "firemen's lift" is used it refers to a lift installed in accordance with BS 2655-1970 or BS 5655-1986 for use by the fire and rescue service. Firefighters will use a dynamic risk assessment on the use of the lift operationally due to the limited facilities it provides. The person consulted advised that the fire control function is in use and only brings the lifts to the ground floor. 
12.11-12.13	The previous fire risk assessment recommended that the details on the standard of the lifts be updated in the on-arrival information contained within the SIB so that it is available for the Fire and Rescue Service to ensure that they are aware of the standard of both lifts. At the time of the fire risk assessment, Alex Swift confirmed that this action has been completed.

12.14

An Evacuation Alert System (EACIE) is installed within the building. The EACIE is equipped with facilities for use by the Fire and Rescue Services (FRS), enabling them to send an evacuation signal to the whole or a selected part of the building by means of sounders or similar devices. Sounders are provided in the hallway of each flat that is linked to this system.



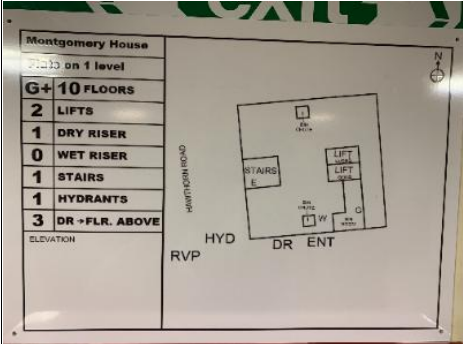
13.0 Fire Safety Signs and Notices

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?	N/A
13.6	Are fire action notices displayed prominently and completed fully throughout the premises?	Yes
13.7	Are all fire action notices similar throughout the premises?	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?	N/A
13.10	Are all fire doors signed appropriate to their use i.e. Fire Door Keep Locked Shut, Fire Exit Keep Clear etc.?	Yes
13.11	Where required, are external fire assembly points signs prominently displayed?	N/A
13.12	Are "No Smoking" signs and procedures in place to ensure there is no smoking in work or public places? (The Smoke Free (Premises and Enforcement) Regulations 2006)	Yes
13.13	Are all signs legible and in good condition?	Yes
13.14	Do all signs comply with the EN 7010:2011 where necessary?	Yes
13.15	Has wayfinding signage been provided to clearly indicate floor levels, flat numbers from within the staircase(s) and each floor level?	Yes
13.16	Is the signage in line with the ADB revisions 2020?	Yes

13.0 Fire Safety Signs and Notices: Finding(s)	
Ref	FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
13.0	Suitable 'Do Not Use Lift in the Event of Fire' signage is provided within the lift/flat lobbies on each floor.
13.1-13.4	Directional signage was observed in the common areas. This building has a single staircase serving the upper floors and residents will be familiar with access and egress from the building.
13.6-13.8	A suitable 'stay safe' fire action notice was provided in the common areas throughout the block to indicate the strategy of the building. Although this doesn't incorporate instructions should residents hear the BS8629 Evacuation Alert System, the person consulted advised that when the system was commissioned information was given to the residents on what they should do on hearing the alarm, and FCHO also provided relevant information as part of the annual FRA information and letters as reminders. 
13.11	The premises is operating on a Stay Put policy, but if evacuation is necessary, an appropriate assembly point would be designated as outside the main gates away from the building.
13.12	"No smoking" signs are displayed as required by The Smoke-Free (Premises and Enforcement) Regulations 2006.
13.15-13.16	Floor indication numbers have been painted on the lower part of the wall by the stair door on all floors to aid identification by firefighters when ascending the stairs. This includes the flat/lift lobby areas. Also, wayfinding signage that has the floor number and directional signage to the flats, including flat numbers, is displayed in the staircase enclosure. They appear to be mounted at the recommended height as per ABD and are all visible and in good condition. Supplementary signage is also present, with signage outside the lift area on the ground floor to indicate which floors the two lifts access. 

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?	N/A
14.4	Where necessary has any action been taken to prevent reoccurrence?	N/A
14.5	Have there been any incidents of deliberate ignition by employees or arson attacks?	No
14.6	Are procedures in place to inform relevant persons of the need to report any potential fire hazards?	Yes
14.7	Is there a fire policy for the premises/organisation that clearly defines the roles and responsibilities of who will contribute to overall fire safety management?	Yes
14.8	Has the fire service inspected or had any formal meetings, familiarisation visits, operational crew/CFS visits within the last 12 months?	No
14.9	Were any recommendations, enforcement or prohibition notices served?	N/A
14.10	Have all recommendations and notices been complied with?	N/A
14.11	Is adequate access provided for fire service vehicles in the event of an emergency?	Yes

14.0 General Fire Safety Procedures: Finding(s)	
Ref	FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
14.1-14.5	Since the previous fire risk assessment was undertaken there have been no reports of fire that our assessor was made aware of and there was no evidence of any fires having occurred. Any reports of fire or false alarms should be fully investigated and where necessary control measures implemented to reduce the possibility of further occurrences. Following any outbreak of fire affecting the premises, the Fire Risk Assessment should be reviewed to identify if any further risk reduction measures are necessary.
14.6-14.7	As part of their standard responses, FCHO has a Fire Safety Compliance Policy that is reviewed regularly. This is supported by a detailed Fire Management Plan which clearly defines roles and responsibilities and details every aspect of managing fire safety.
14.7	The overall responsibility for fire safety rests with the Chief Executive of FCHO.
14.8	Our assessor was not made aware there were any outstanding notices of deficiencies/enforcement action from the enforcing authority. The significant findings of this Fire Risk Assessment should form the basis of an action plan and be implemented within the recommended timescales. The significant issues identified may become enforceable if not actioned in a reasonable period of time.
14.11	An override/fire control switch is provided externally above the entrance gate and door to the building for use by the fire service. 
14.11	A building information board showing key building facilities is displayed in the lift lobby area on the ground floor. This shows: • Number of floors. • Stating the flats are on 1 level. • Number of lifts. • Number of dry risers. • Number of stairs. • Location of nearest fire hydrant. 

15.0 Fire Safety Management

15.1	Are there an adequate number of appointed competent persons and arrangements (under Article 18 of the RRFSSO) in place to assist the responsible person in the management and implementation of the preventative and protective measures? (safety assistance)	Yes
15.2	Has an Accountable Person been appointed? Where there is more than one accountable person, are there procedures in place ensuring that all accountable persons co-operate with each other?	Yes
15.3	Have all staff been trained in how to call the Fire Service, use of fire extinguishers, evacuation procedures and basic fire awareness?	N/A
15.4	Do all new employees receive basic fire procedure and induction training on the date of appointment?	N/A
15.5	Are records of fire safety training kept?	N/A
15.6	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
15.7	Is a "permit" to work procedure in place for contractors etc.?	Yes
15.8	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		
15.9	Are fire marshals required to take charge of a fire incident and liaise with the Fire Service where required?	N/A
15.10	Is there a list of fire marshals displayed in all locations where required?	N/A
15.11	Are systems in place to provide identification for fire marshals during an emergency where required?	N/A
15.12	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
15.13	Do the premises require a written fire emergency plan detailing the roles and responsibilities in order to safely evacuate?	N/A
15.14	Where required, is the fire emergency plan displayed on the premises?	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	FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
15.1-15.2	FCHO employs competent persons to carry out service and maintenance of all preventative and protective services.
15.3	The principal mode of evacuation for the residential accommodation is that only the occupants of the flat/apartment of fire origin will evacuate. This standard approach reflects the degree of compartmentation present in this building. Information on the building and any specific hazards and fire safety measures are provided for the Fire and Rescue Service during familiarisation visits and also placed in the secure information box.
15.3-15.5	It is understood that the premises is not staffed, except for occasional maintenance and cleaner visits.
15.6-15.7	As part of their standard responses, FCHO has procurement processes in place to ensure that work undertaken by external contractors considers fire safety (where applicable). FCHO operation staff have training to ensure their work does not introduce fire hazards and promotes reporting of any findings to the Property Safety Team. Also noted is that FCHO does have a permit-to-work system. Should the Responsible Person appoint their own contractors for any building works, it is advised that they confirm their competence to undertake the proposed works. To ensure appropriate competencies and quality of work it is advised that the contractor has suitable Third-Party Accreditation. Their impact on the building should be closely monitored with regard to (amongst others), damage to party walls, the introduction of sources of ignition and combustible materials, the blocking of exit routes, or fire doors being wedged open. If hot work is to be undertaken, ensure the contractor has appropriate risk assessments, method statements, and fire extinguishers in place before commencing the work. Carry out an inspection of the work area at least 30 minutes after the works have finished, to check for any hot spots.
15.6-15.7	It should be noted that works carried out on fire protection systems ought to be carried out by competent persons in accordance with the relevant standard for the system being repaired/installed. The person carrying out such alteration/installation is duty bound under Article 5 (3) of the Regulatory Reform Fire Safety Order 2005 where so far as the requirements relate to matters within their control during installation repair and maintenance.
15.9, 15.12	Given the 'stay put' policy that is adopted in the block of flats, assembly at a designated place serves little purpose. Only persons affected by the fire will escape to outside the building where the fire service will arrive once called.
15.13-15.14	For this block, fire action notices will be considered sufficient with regard to the provision of the evacuation strategy information. See 13.6-13.8.
15.15	As part of their standard responses, FCHO has an emergency call-out service where a manager takes the responsibility out of hours. With the call-out pack key members of staff have their personal numbers should an emergency arise. This includes the Building Safety Manager, Fire Safety Manager, and Fire Safety Officer.

16.0 Fire Evacuation Plan

16.1	Is there a current, suitable fire evacuation procedure for all residents (and occupants) to follow in the event of a fire, and has this been communicated to all residents?	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 evacuation procedures complement each other?	N/A

16.0 Fire Evacuation Plan: Finding(s)

Ref	FINDINGS
	None.
Ref	RECOMMENDATIONS
	None.
Ref	COMMENTARY
16.1-16.2	If necessary, residents can be evacuated floor by floor using the control and evacuation equipment (EACIE), but this is only to be operated by the fire and rescue service.
16.1-16.2	The Fire Safety Order requires that there should be a suitable emergency action plan for the premises. The Fire Safety (England) Regs 2022, also requires the Responsible Person to display and communicate the fire actions to all residents. Fire safety instructions must be provided in a conspicuous part of the building. The instructions must be in a comprehensible form that residents can reasonably be expected to understand and should cover the following: • The evacuation strategy for the building (e.g. stay put or simultaneous evacuation); • Instructions on how to report a fire (e.g. use of 999 or 112, the correct address to give to the fire and rescue service, etc.); • Any other instruction that informs residents what they must do when a fire has occurred. In addition, these instructions should be provided to residents when first occupying their flat and reissued to all existing residents at periods not exceeding 12 months. Residents ought to have a clear understanding of what actions to take should a fire situation change and they need to evacuate the building. It is not implied that those not directly involved who wish to leave the building should be prevented from doing so.

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:

Note: The time scales given below are for the responsible person(s) to take action on the findings NOT the time scale to complete the resulting works from the findings.

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 life safety fire resistance, ineffective fire doors, insufficient or complete failure of fire alarm, emergency lighting or smoke venting systems.
Priority 2 (P2)	A lesser breach of the Fire Safety Order or property risk, which if not resolved may present a risk of fire or injury. Failure to reduce the risk could result in a moderate injury to relevant persons. Compliance may still be required to satisfy enforcing authorities but longer time scales are given, such as 2 to 4 months.
Examples include:	Breaches in compartmentation. Firefighting equipment missing or defective, minor defects to the fire alarm or emergency lighting systems.
Priority 3 (P3)	Poor practices or features that whilst not presenting a serious risk would detract from the overall impact on the fire safety provisions within the premises. Also includes provision or practices and features that are preferable over and above the minimum standards required under the Fire Safety Order. Time scales are variable and could be up to 12 months. The acts or omissions would normally be tolerable but actions should still be implemented to maintain the risk level at a tolerable level.
Examples include:	Missing or incomplete fire signage, incomplete maintenance logs.

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 finding identified has been given an appropriate risk rating, which is then prioritised accordingly on the action plan.

Once all the findings have been identified the premises are given an overall **Life** and **Property** 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 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

Ref	Hazard or Defect	Action Required	Hazard Priority	Risk Rating	Action By	Review Date	Contractor Completed
THERE WERE NO FINDINGS OTHER THAN THE INFORMATION IN THE COMMENTARY SECTIONS AND RECOMMENDATIONS BELOW							

19.0 Recommendations

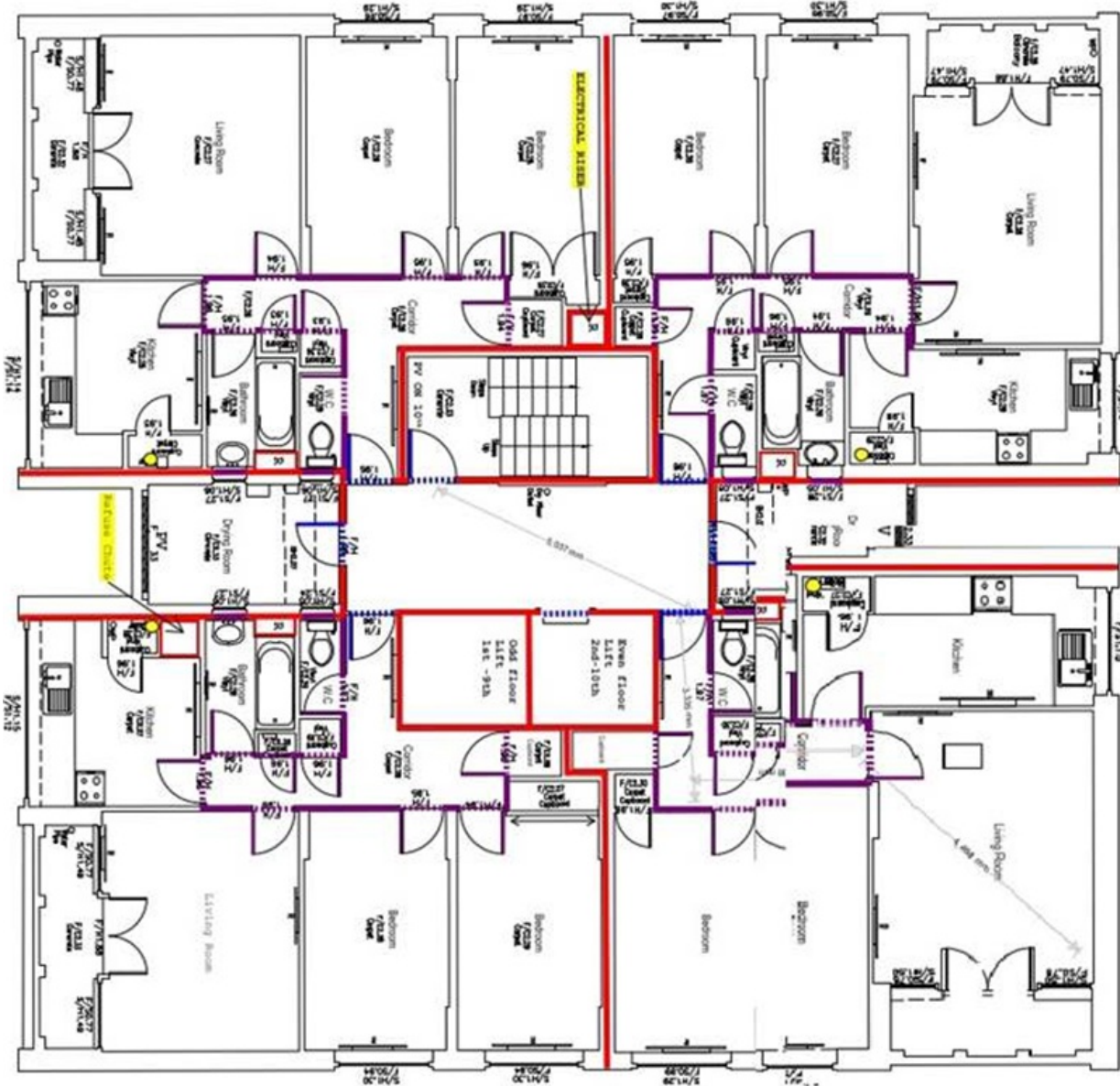
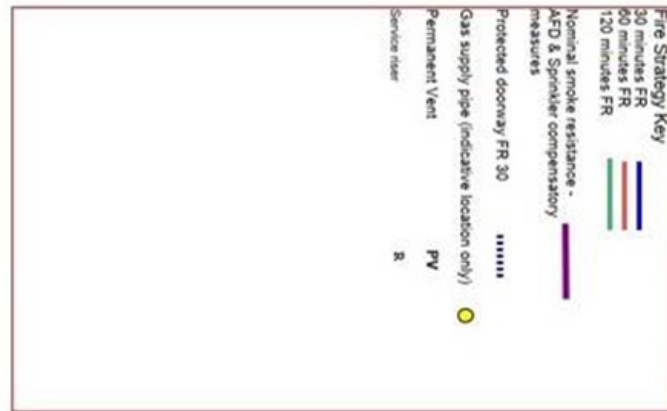
Ref	Observation	Recommended Action	Risk Rating	Contractor Completed
9.1	It was observed at the time of the fire risk assessment that there were small drill holes next to a number of flat entrance doors. This is more than likely due to a doorbell being installed.	FCHO should monitor these holes throughout the property, and where they are deemed excessive or may lead into the flats, they should be firestopped to the same level of fire resistance as the surrounding wall.	Moderate	
9.5	The metal unit in the drying room adjacent to flat 17 was found to be left open.	It is recommended that this unit be kept locked shut.	Moderate	

20.0 Commentaries

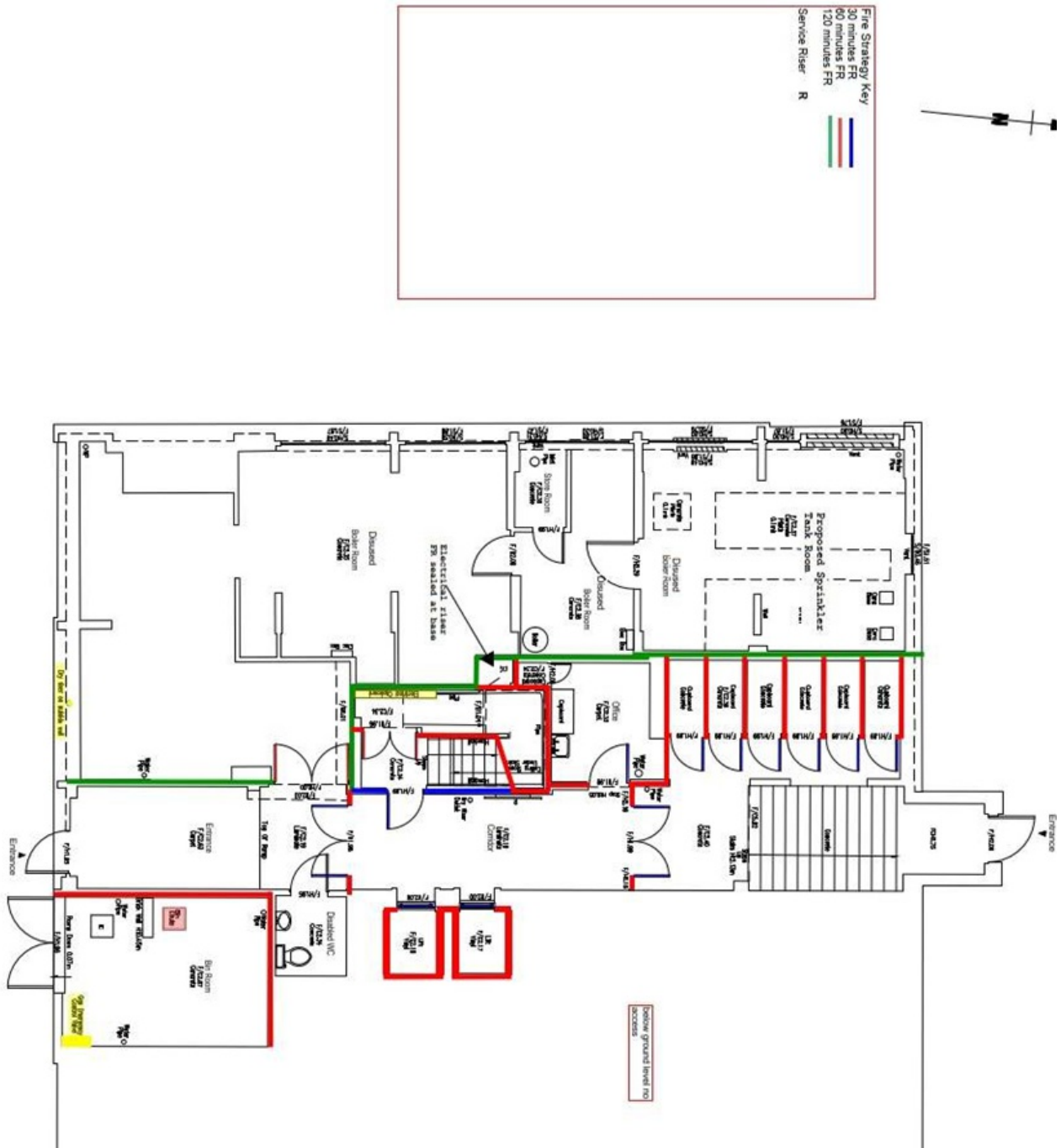
Ref	Observation	Recommended Action	Risk Rating	Contractor Completed
11.7	There were issues regarding normal lighting within the ground-floor plant room area. This was reported by Thomas Garret at the time of the fire risk assessment. He also confirmed that the likelihood of a person working in this area is low.	Ensure that the normal lighting is repaired in the ground-floor plant room area.	Tolerable	

Appendix

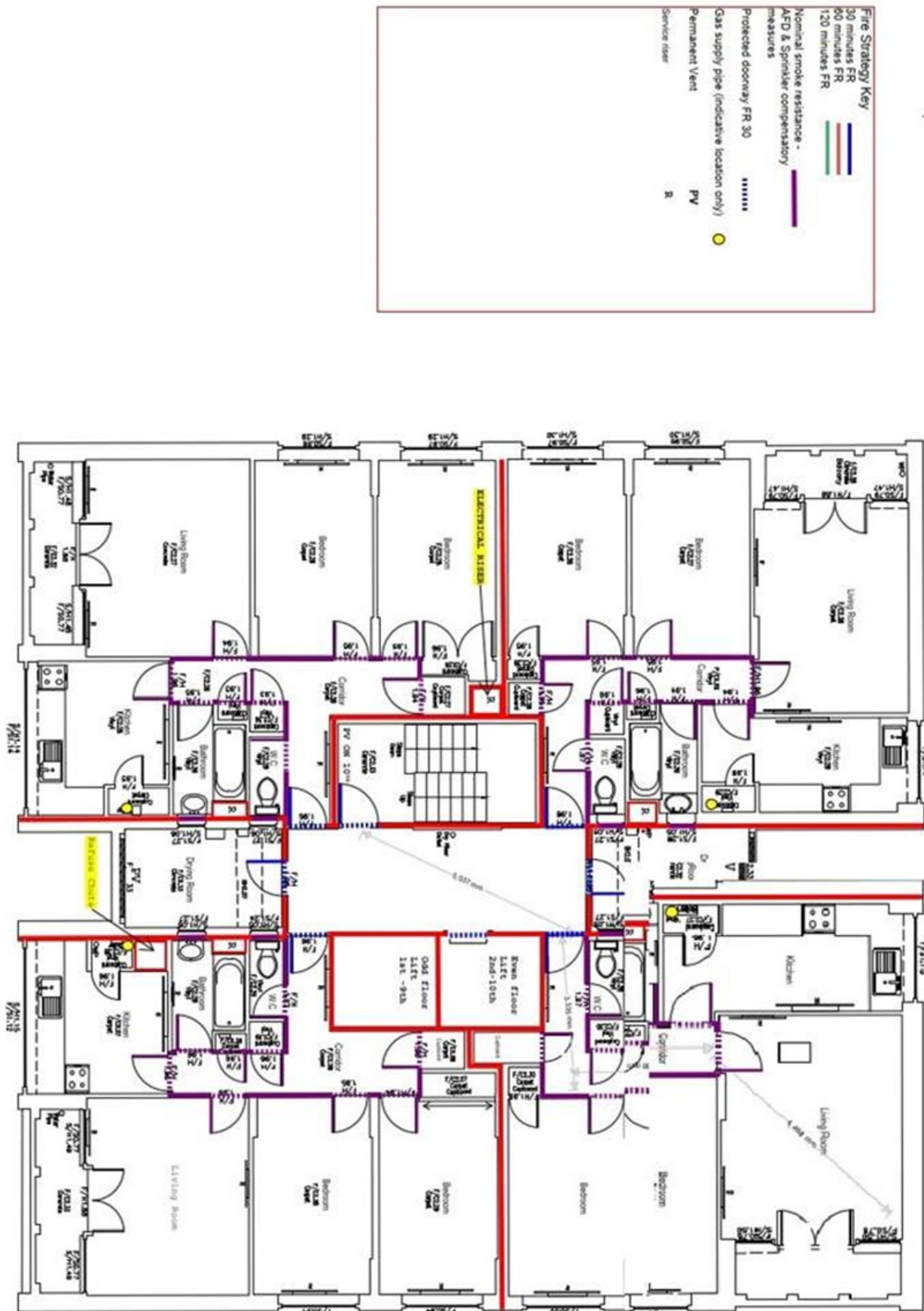
5th floor



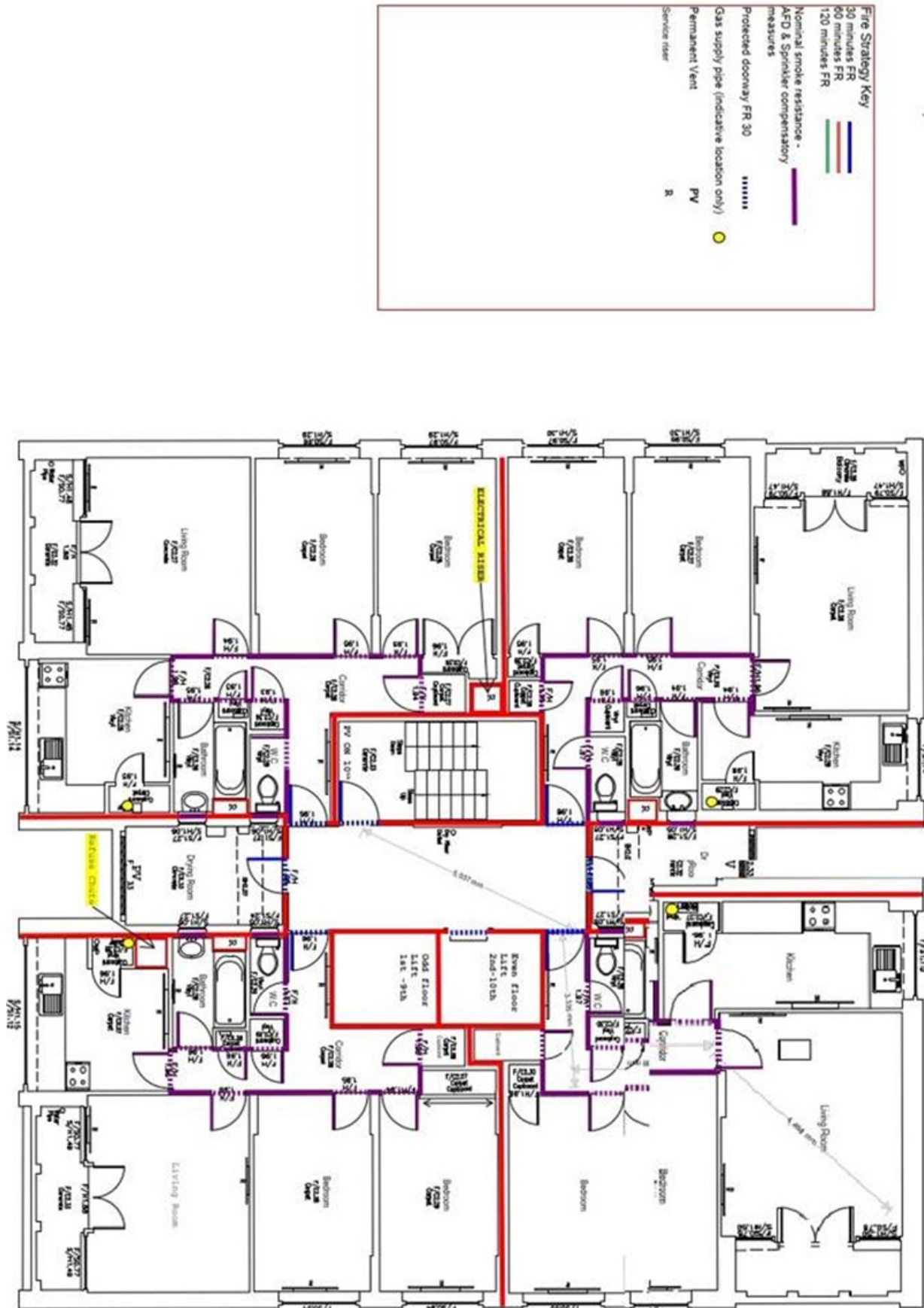
Ground floor



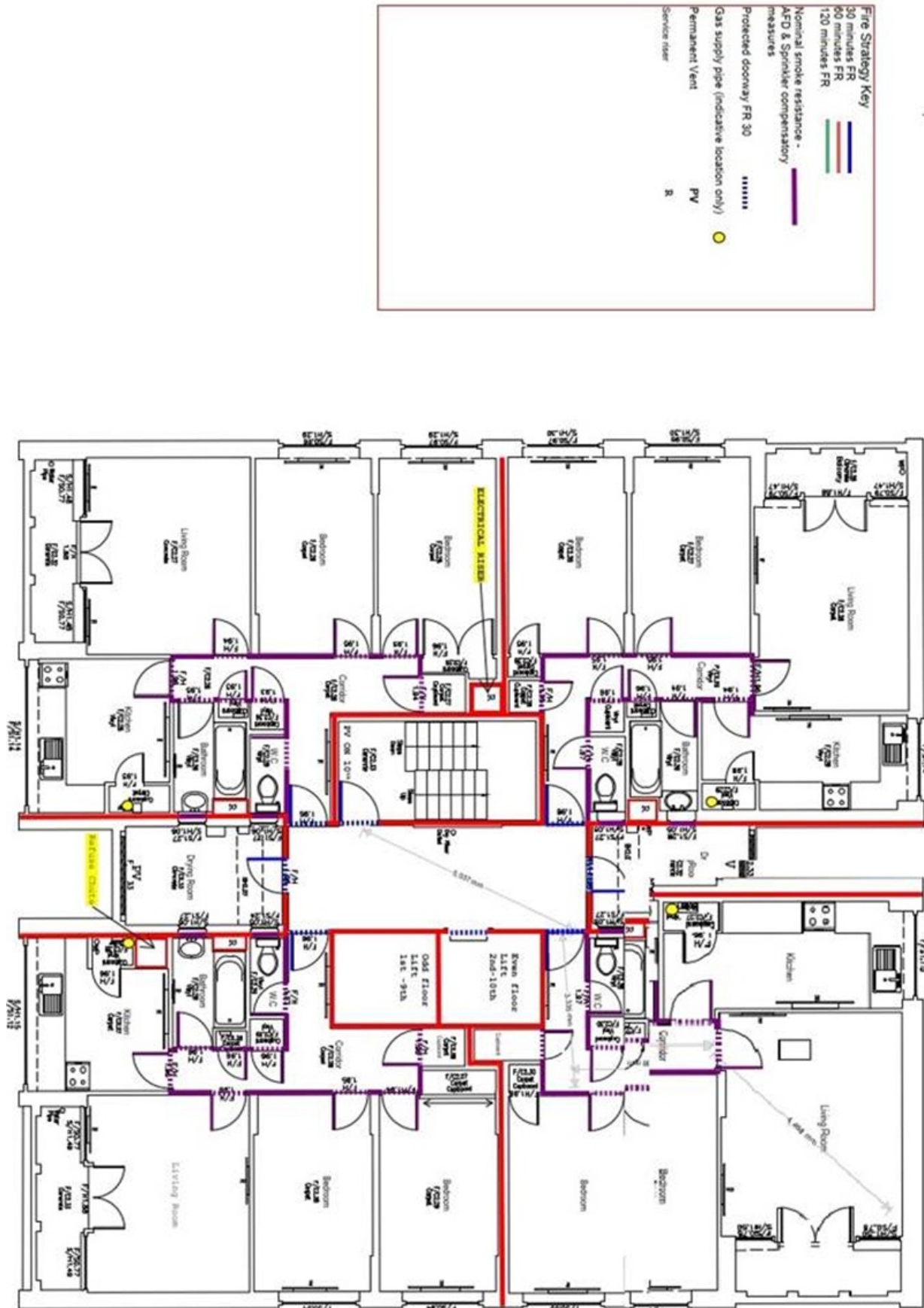
1st floor



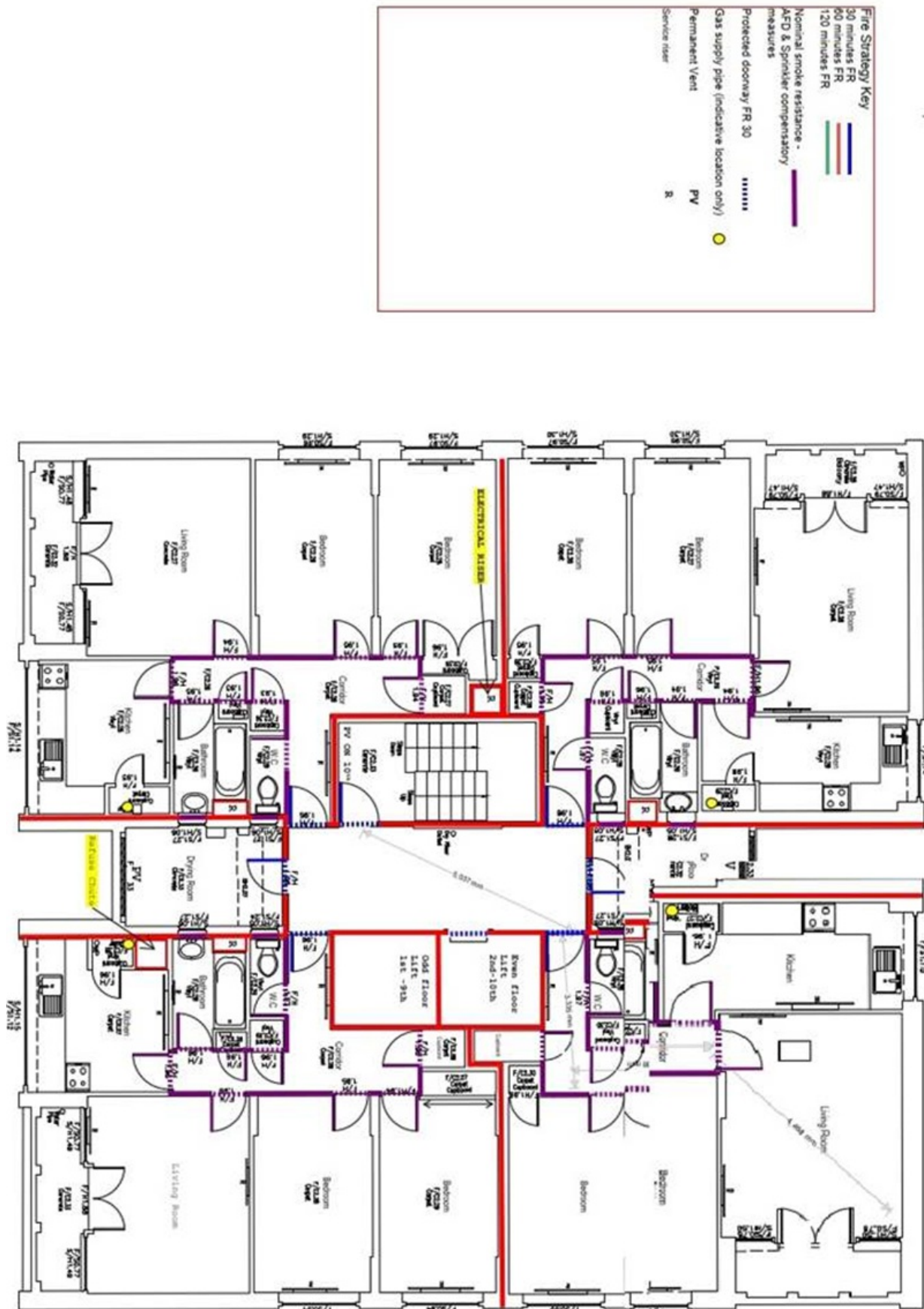
2nd floor



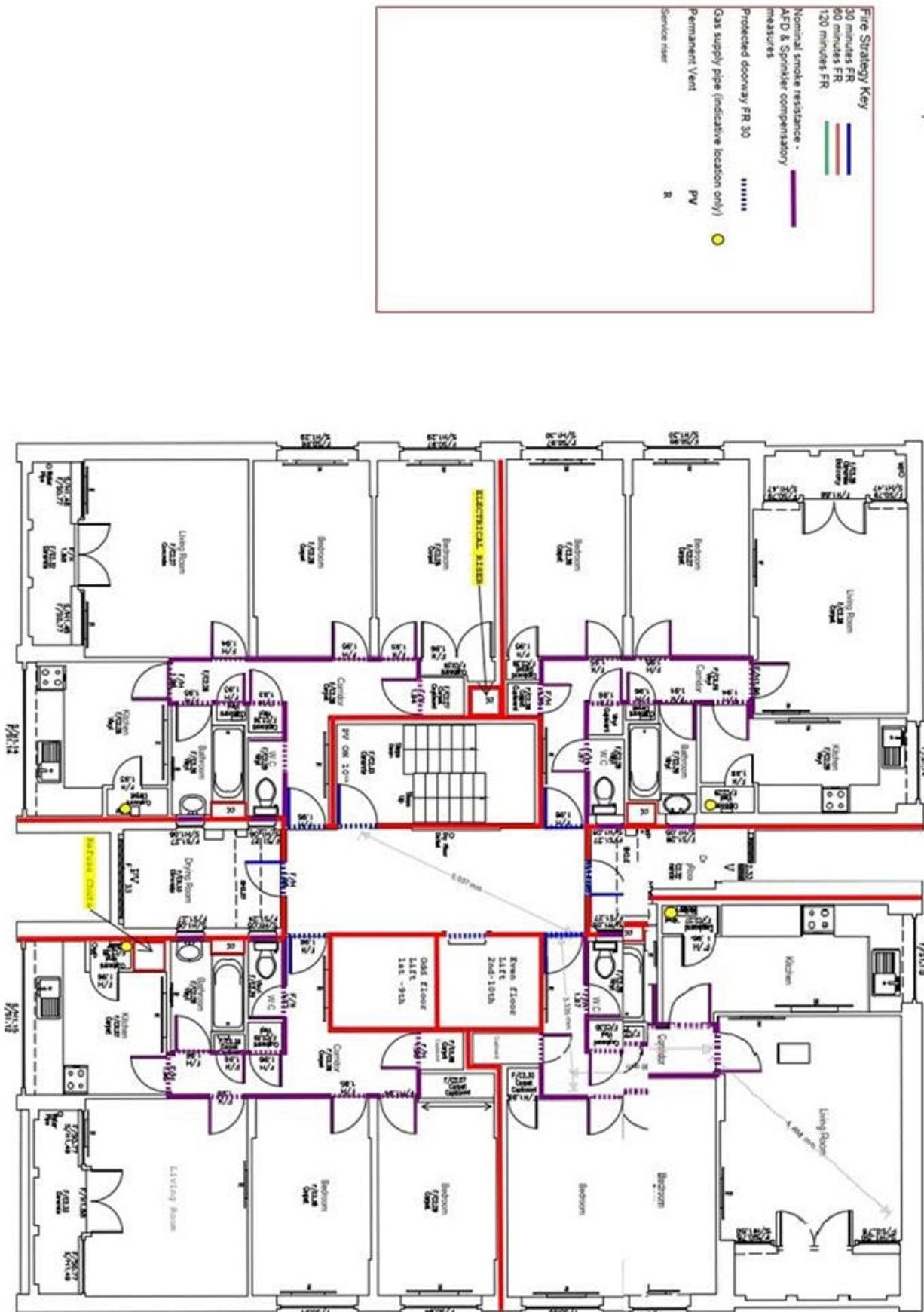
3rd floor



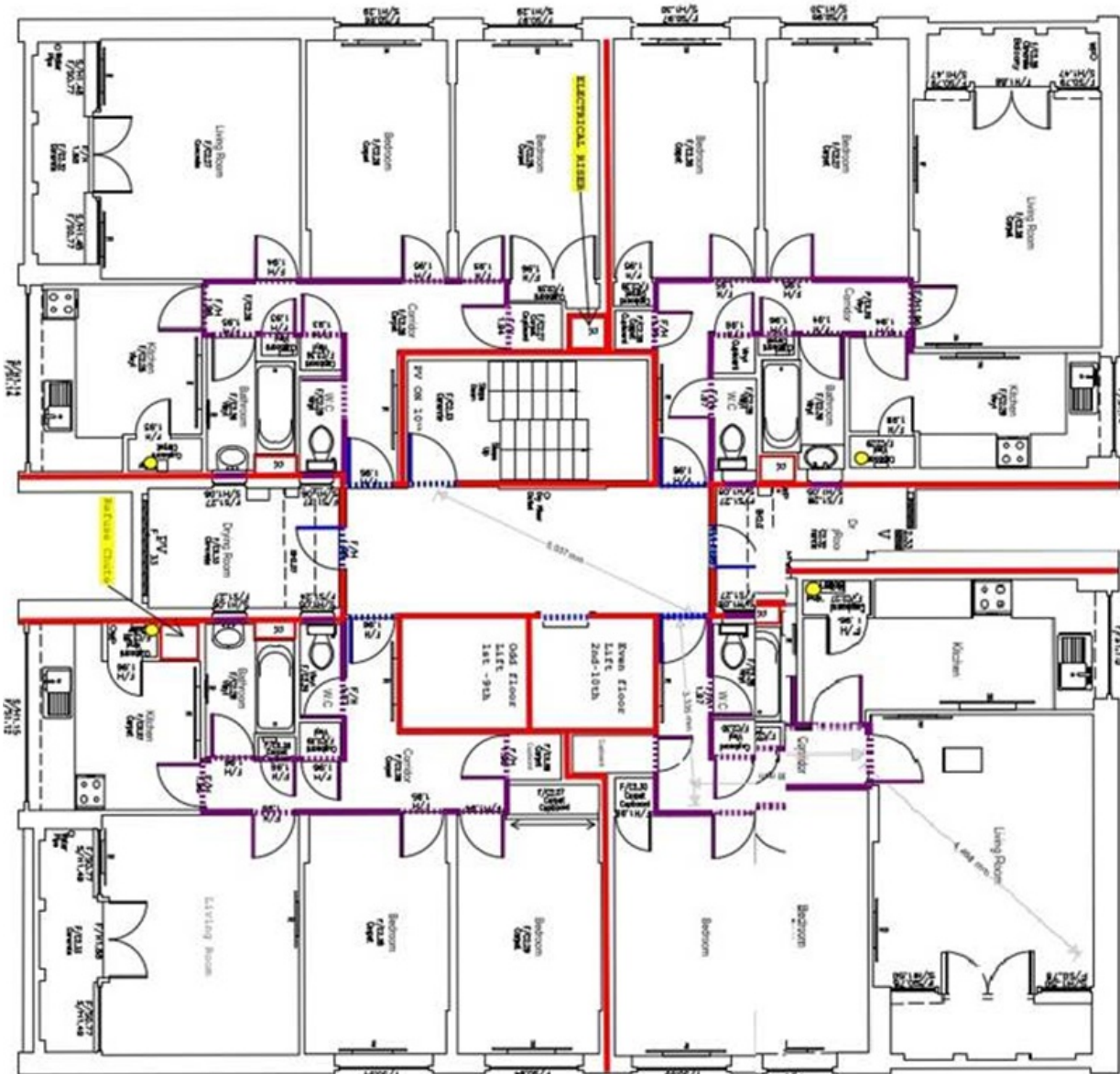
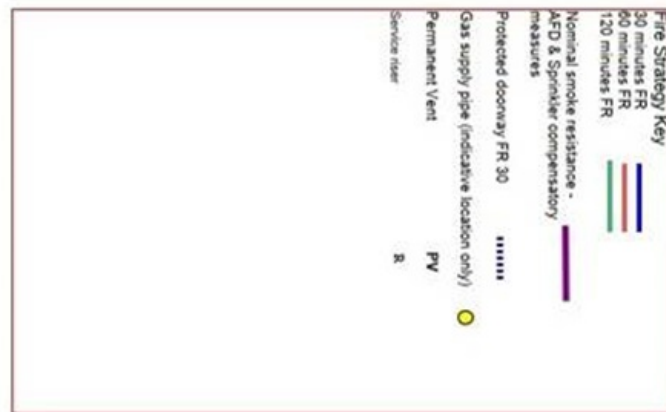
4th floor



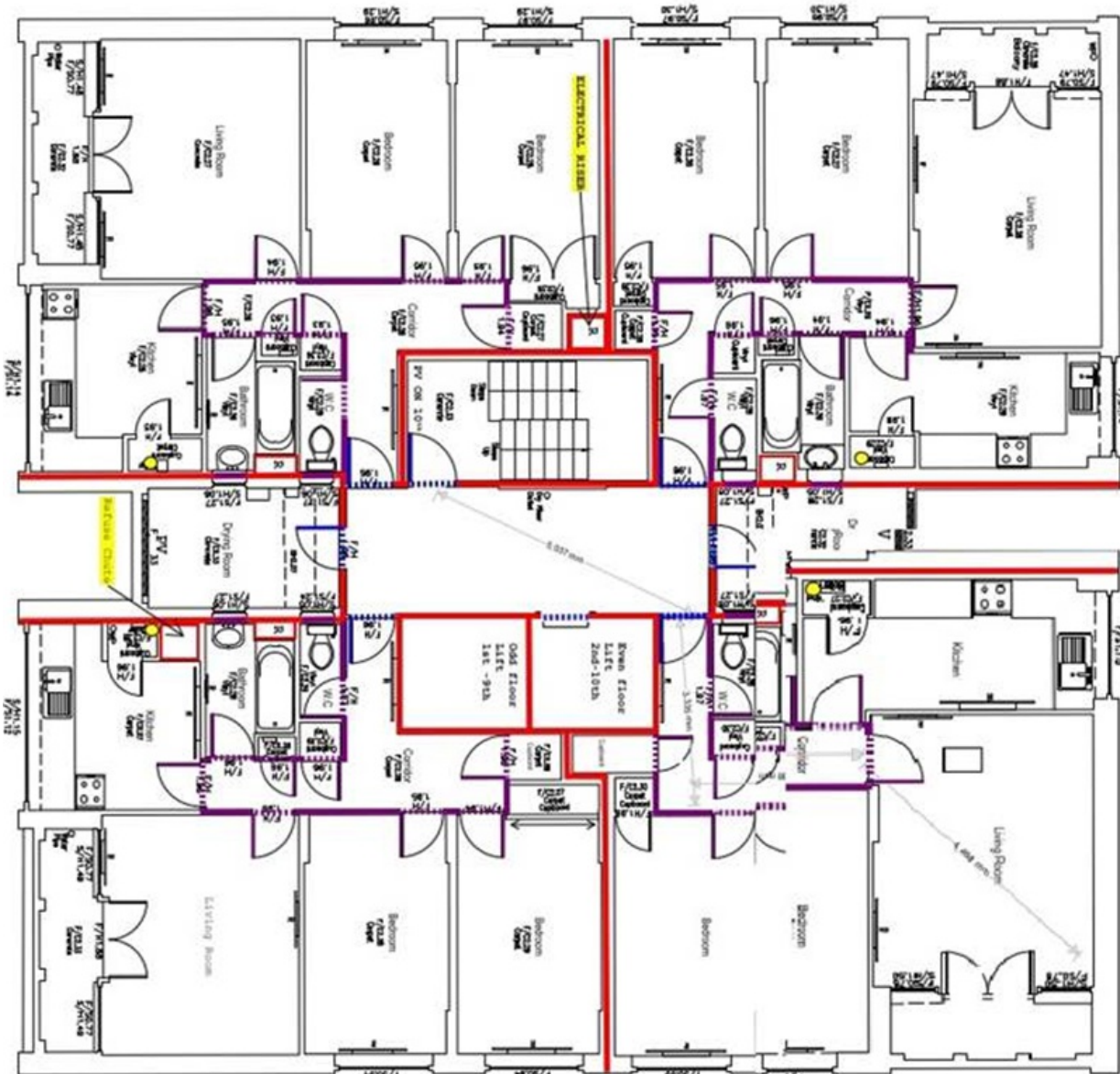
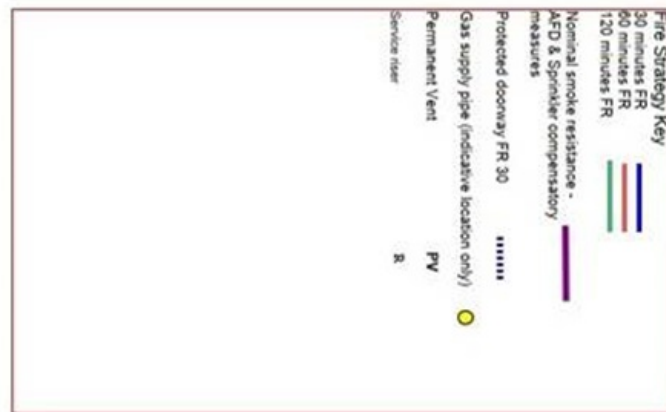
6th floor



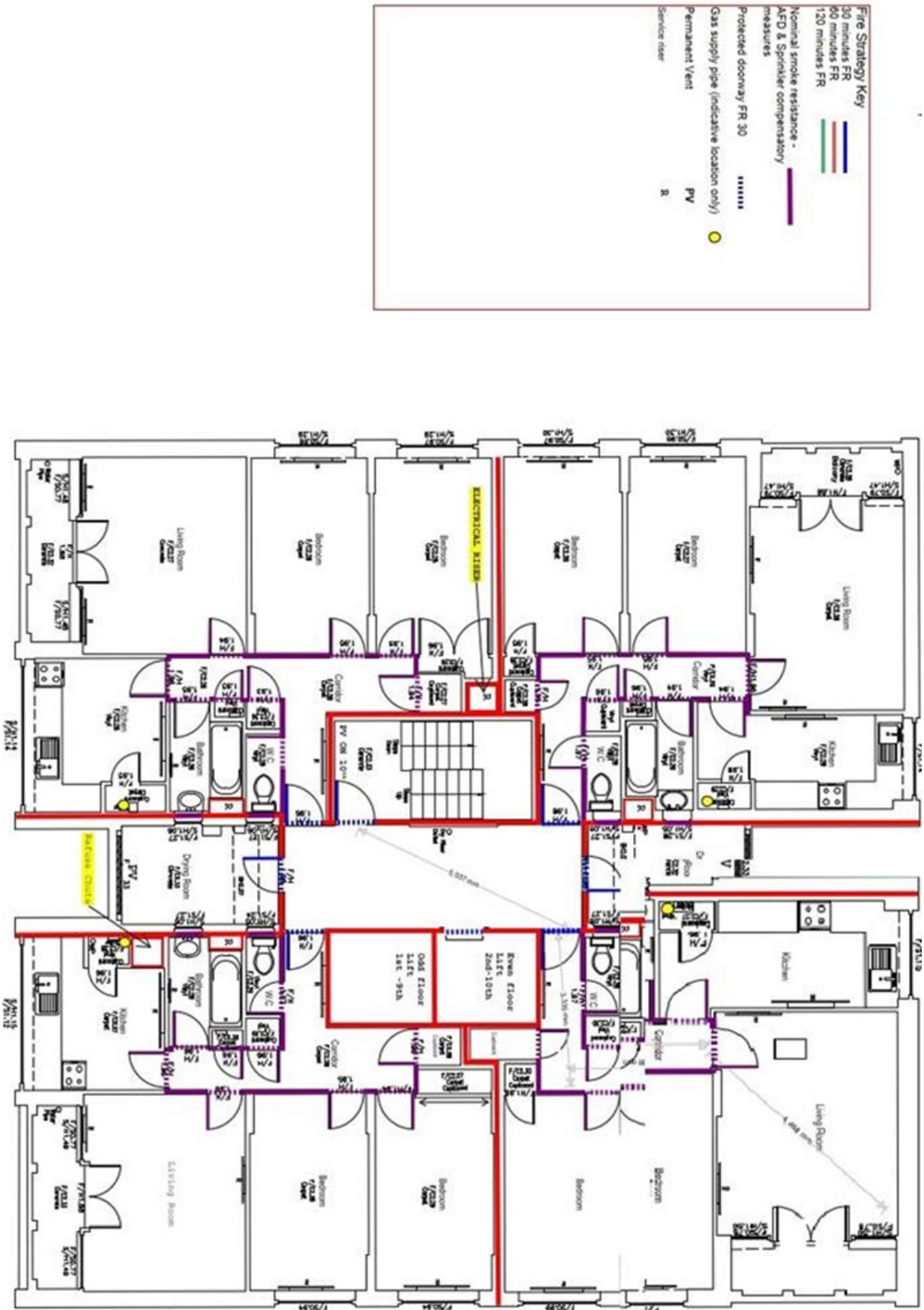
7th floor



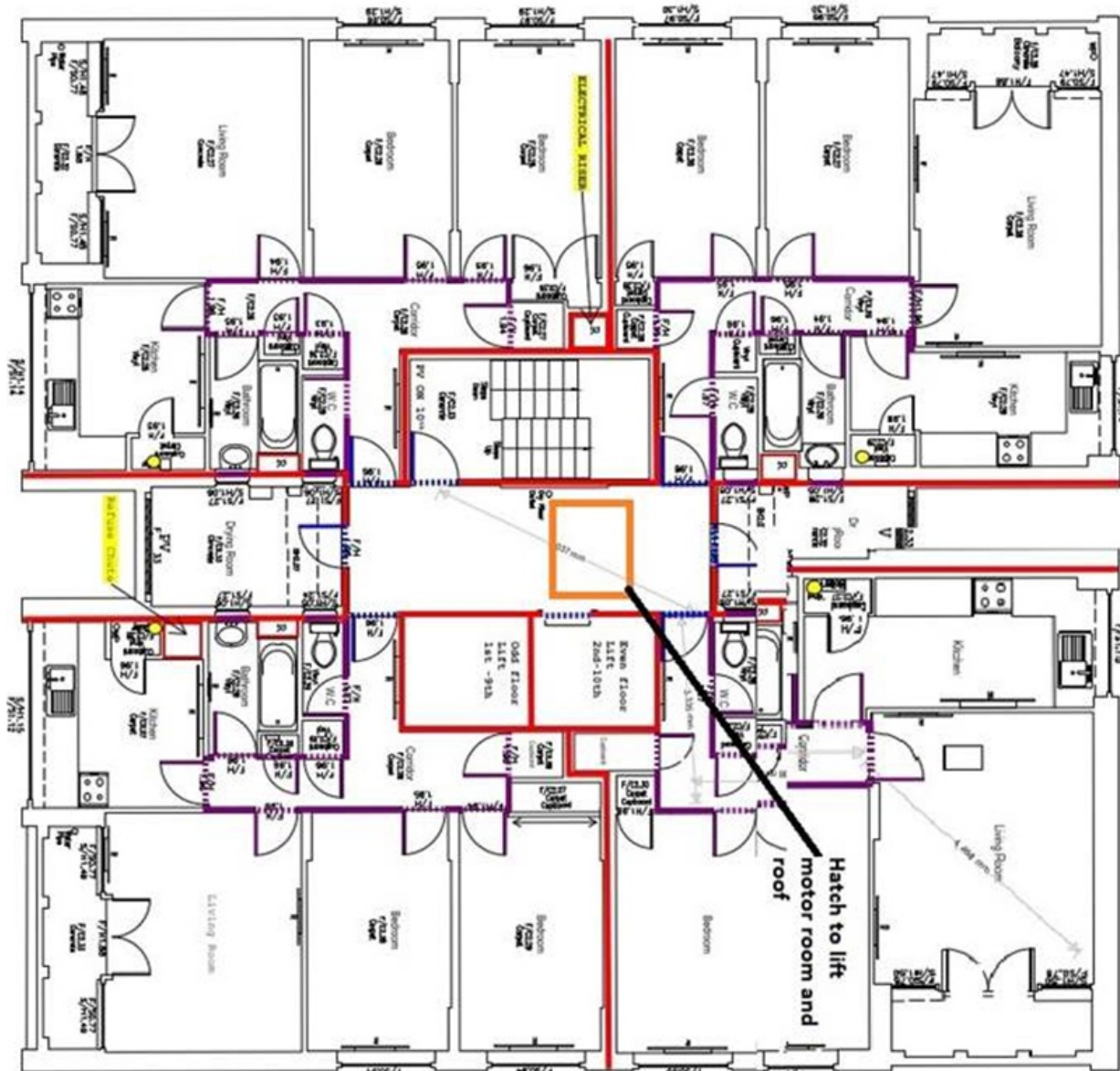
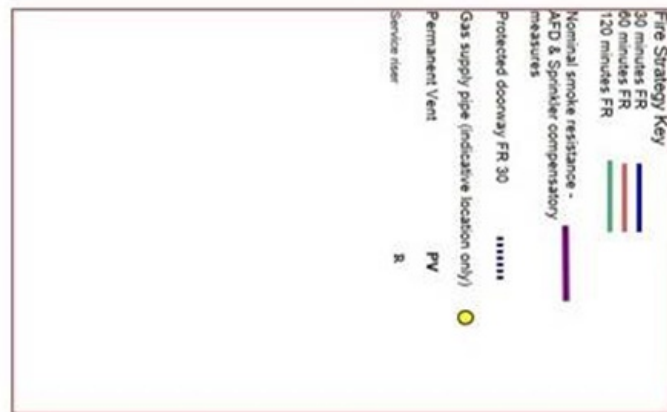
8th floor



9th floor



10th floor



On-Arrival Information

BUILDING LAYOUT - MONTGOMERY HOUSE	
Size	Approx. 20 x 20m
Construction	Concrete framed building with compliant insulated render, concrete walls, concrete stair, flat roof
Number of floors	11: Ground floor (access point) and 10 upper floors
Layout	Main entrance accessed from south elevation off Hawthorn Road. Each floor comprises of a lift lobby with door to stairs 2 x drying rooms and four flats. The only exception been the ground floor which has plant rooms stores, W.C. and caretakers office. Each floor has a bin chute room located within the drying room.
Lifts	2 lifts serving alternative floors - Traction Drive Control ACVF Geared Knowsley Lifts 0151286132
Type of flat entrance doors	FD30's
Rubbish chutes bin room	There is a bin chute located on each floor (within drying room) with a chute to the ground floor bin room (accessed externally)
Common Voids	NO common voids
Roof access	Roof is accessed through hatch on 10th floor lift lobby
Occupants	Approx 80 Occupants based on 2 x occupants per flat
Evacuation strategy	Stay put
Fire Alarm evacuation alarm	No common alarm system, Emergency evacuation alarm (controlled by Fire service) situated in ground floor lobby
Caretaker concierge	NO full time staff on site
FIREFIGHTING SYSTEMS - MONTGOMERY HOUSE	
Water supplies	Hydrant located next to front entrance
Fire mains	Dry riser main fitted, outlets on all floors within lift lobby
Fire lifts	No firefighting lifts installed
Firefighting shafts	No fire fighting shaft
Smoke control systems	Manual openable windows, permanent vent at head of stairs
Sprinkler systems	Sprinklers fitted to all flats and drying rooms - none in common areas
DANGEROUS SUBSTANCES - MONTGOMERY HOUSE	
Location, quantity and type	ASBESTOS • AIB to ceiling within the electric meter cupboard. • Asbestos floor tiles to the flats. • Asbestos cement water tanks to the flats. • Asbestos toilet cisterns to the flats.
SERVICES - MONTGOMERY HOUSE	
Electricity	Main intake located in old boiler room (ground floor caretakers office)
Gas	Gas supply to each individual flat. Gas boiler located in each property. The gas mains isolation valve is in the bin room to the right of the main entrance door