TOTAL FIRE GROUP LTD

Fire Risk Assessment

Conducted at:

Rountree House
Manchester Street
Oldham
Greater Manchester
OL9 6HF

UPRN: 1302803122000

01 September 2025

Certificate Number	LS	0500188

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**	
	Rountree House, Manchester Street, Oldham, Greater Manchester, OL9 6HF	
	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 RRFSO 2005.	
Part 5	**Effective date of the fire risk assessment**	01/09/2025
Part 6	**Recommended date for review of the fire risk assessment**	01/09/2026

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)	M. E. ÒMeara
Job Title	Senior Fire Safety Consultant
Date	15/09/2025

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, Moreton-in-Marsh, GL56 0RH

1. This certificate is used subject to NSI Regulations and Rules of the NSI LIFE SAFETY FIRE RISK ASSESSMENT SILVER Approval Scheme.

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).

TOTAL FIRE GROUP

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TERMS AND CONDITIONS OF BUSINESS

Rountree House, Manchester Street, Oldham, Greater Manchester, OL9 6HF

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 **Monday, 1 September 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
Total Fire Group Ltd Suite 312, Waters Meeting Business Park, Britannia Way Bolton BL2 2HH
01204 697990 info@totalfiregroup.org

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:

Rountree House, Manchester Street, Oldham, Greater Manchester, OL9 6HF

Responsible or Accountable person(s):

First Choice Homes Oldham (FCHO).

Person(s) consulted and landline contact number:

Alex Swift. Fire Safety Manager.

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:

Monday, 1 September 2025

Time:

10:00 AM.

Date of last FRA or FRA Review (if known)

02 Sep 2024

Suggested date for next review:

September 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 flats 6 and 113.

Access was gained into the rooftop plant rooms and roof area, the basement plant rooms, the lower ground electrical room, and the externally accessed bin refuse room.

A good selection/sample of the riser cupboards, dry riser cupboards, and sprinkler valve cupboards were opened and viewed. One of the pipework shafts within the staircase lobby opposite the riser cupboards was opened and viewed inside during the previous assessment.

All bin refuse rooms on each floor were accessed. The office/staff flat on the basement level was accessed (noted as flat 6).

Access was gained to the store room on the lower ground level, the externally accessed store room, and the low-level understairs cupboard.

No access was gained to the externally accessed electrical substation attached to the building. This is owned by an external electrical company (Electricity North West) and does not form part of this FRA.

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 and "as built" plans issued on completion of the building/alterations were not observed.

This fire risk assessment 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:

Nineteen, with basement, lower ground, ground floor and sixteen upper floors.

2.2 Approximate building footprint:

485m^2

2.3 Details of Construction and Premises:

Rountree House is said to have been built in the late 1960s and is located on a sloping site with two floors below the main ground access level. The previous FRA noted that the building is constructed of steel-reinforced concrete beams, columns, brick walls, concrete floors, a flat roof, and a single concrete staircase. Two lifts are provided at the ground floor lobby, each serving alternate floors with authorised access to be basement only. A dry-rising main is provided with the inlet on the exterior face of the building at the basement level and outlets on each staircase landing lobby. Each floor lobby provides access to a lift, the refuse chute room, the escape stair, and 4 flats which have been fitted with FD30s composite fire door sets with integral letterbox plates and spy holes. However, the ground floor has 3 flats, and the lower ground has 2 flats (69 flats in total).

There is a fire alarm system in the common areas which is operational and a silent system. Emergency lighting is provided on the escape routes and there is a stay-put policy in the event of a fire.

The protected staircase has two self-closing fire doors with strips and smoke seals forming a protected lobby that is ventilated. There are windows secured shut at all levels of the staircase which is vented at the top via a louvred door to the roof level. The lower ground floor comprises a storeroom, plant rooms, and two flats. The locked basement consists of one disused flat, now a caretaker's room, a storeroom, and a domestic water pump and sprinkler tank room. The lift motor room is located at the roof level. The refuse chute is accessed from a ventilated room on each floor landing with the bin room accessed from outside at the basement level.

The flats accessed have FD30s self-closing composite fire doors, a hallway approach to habitable rooms with timber doors, and a smoke alarm in the hallway and lounge with a heat alarm in the kitchen. The kitchen is ventilated by an openable window and the bathroom vents into a common shunt duct.

A sprinkler system is installed throughout the flats and ancillary areas.

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:

143 (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:

Limited to resident’s visitors.

2.8 Occupants at Special Risk:

Sleeping occupants	
Persons familiar with the premises	Yes
Persons unfamiliar with the premises	No
Occupants with disabilities	
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 were reported at the time of 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: Moderate.

There are findings/recommendations in relation to the confinement of fire and wayfinding signage. Due to the nature of the findings, the risk to life is considered to be moderate at the time of this fire risk assessment.

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

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

Risk to Property: Moderate

New installations for sprinklers and evacuation alert systems have been installed and fully commissioned. There is adequate ventilation, no known large amounts of combustibles are stored within the premises, and all risk rooms are reasonably constructed for fire-resistance. For these reasons, the risk to property is considered to be tolerable.

Risk to Business Continuity:

N/A

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

4.0 Dangerous, Flammable, Combustible Materials & Substances		
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 were found stored or used inside the premises.
4.10	Residents are required to dispose of their own domestic waste down the refuse chute. The common areas are almost daily checked by the mobile caretakers.

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

5.0 Interior Furnishings: Finding(s)	
Ref	**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 (flat 6) 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?	Yes
6.2	Are all heaters fitted with suitable guards and located in positions away from combustible materials?	Yes
6.3	Are all heaters free from naked flames?	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?	Yes

6.0 Heating and Electrical Appliances: Finding(s)	
Ref	**FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
6.1, 6.3	The lower ground floor contains the gas main boilers for the block and feeds hot water to all the flats where a heat exchanger measures consumption and distributes domestic hot water and central heating around the flat. The gas supply is confined to the boiler room.
6.5, 6.7, 6.10	There was no portable electrical equipment within the common areas, however, the caretaker's room/office (flat 6), 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. A label on one of the electrical consumer units noted the latest service as 08/2023, with the next one due in 5 years.
6.20	With the exception of taking control of the lift cars, the lifts do not have any other facilities provided to aid firefighters normally expected in a residential building of this height (see 12-11-12.13). A monthly function test is carried out on the fireman's control switch on each lift. The results of the test are recorded.
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	The previous fire risk assessment noted that there were members of the public sleeping in the communal areas on the 5th floor. At the time of the fire risk assessment this was no longer the case. FCHO have confirmed that this issue has been rectified.
7.0, 7.3, 7.7	**Considerations for disabled and older person evacuation** **PCEP** (Person-Centred Emergency Plans). These have now been incorporated into a British Standard, namely BS 9792:2025 Fire Risk Assessment – Housing – Code of Practice. These are plans that capture the actions to be taken in the event of a fire, tailored to the specific requirements and characteristics of an individual resident. Note, this could be, for example, a personal emergency evacuation plan (PEEP) or a personal emergency action plan (PEAP). **PEAP** (Personal Emergency Action Plan). This is a tailored document that outlines the specific actions an individual should take in the event of a fire. It is designed for residents who may face challenges evacuating independently due to physical, cognitive, or sensory impairments **PEEP** (Personal Emergency Evacuation Plan). The term normally refers to a generally non-residential building to provide a plan separate and in addition to the normal building fire plan, which may include assistance to evacuate from the building by trained person/s who is/are always available when 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 permanent staff on site. However, a PEEP is not exclusive to non-residential buildings. A PEEP that does not rely upon outside assistance to aid escape is likely to be suitable for any vulnerable and disabled person, including building residents. **PCFRA** (Person-Centred Fire Risk Assessment). The person-centred approach, based on a PCFRA, relates to the safety of residents who are at elevated risk from fire in their own accommodation; as such, this type of 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 of a PCFRA and generally where a disabled person needs 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 entrance foyer and which is easily accessible by the fire and rescue service.
7.3	**Extract from the previous fire risk assessment that should be considered when the FRA is reviewed:** Upon accessing flat 132 on the 13th floor, a large number of items were being stored in the flat. The person consulted advised that this resident is classed as a hoarder, and has been visited by the fire service. Also, advice has been given to the resident, with some items removed from the hallway of the flat. Neighbourhood Housing Teams are also involved in providing support for the individual.
7.3, 7.6-7.7	The previous FRA raised an action in relation to vulnerable persons not being offered a person-centred fire risk assessment. The previous FRA action has not been signed off as complete on Aurora. However, 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 with be put in place, and the information will be updated within the SIB.
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 previous FRA raised an action in relation to staircase windows being locked with handles removed to prevent the windows from easily being opened, and for keys/handles to be provided in the SIB. The previous FRA action has not been signed off as complete on Aurora. However, the person consulted advised that the fire service has been consulted and that a handle has been provided in the SIB for fire service use. This is a generic handle that can be manually added to the window unit to enable all windows to be opened for venting purposes. The permanent smoke vents (PV) in the stair lobby are smaller in area than the minimum recommended. Some smoke may enter the stair and stair lobby as the fire service operations to deal with the fire commence and delivery hoses cause the fire doors to be slightly ajar. Should the stair lobby become smoke-logged during firefighting operations where the PV cannot vent the smoke at the rate at which it is being produced/spreading, the fire service is able to enhance the smoke venting further by the use of the door opening onto the ventilated refuse chute room to assist in evacuation/ rescue where necessary. Should smoke enter the staircase, openable windows can also be used for ventilation by the fire service. Currently, the staircase windows are locked with the handles removed so that they cannot be easily opened. The window handles have been removed to prevent items from being thrown from the windows. **However; If future renovation works occur, it would be advisable to provide AOVs in the staircase/staircase lobbies between the stairs/lift lobby and the flats with a minimum free area of 1.5 m². In the opinion of our assessor, it is not considered necessary to raise an action for this at this moment in time and instead should be raised following future renovation works.**  
8.2	The head of the staircase is fitted with a door that has a louvred vent. In the roof area, there is a permanent vent.  
8.2	As previously recommended, the void compartment on each floor within the stair lobbies has been opened and a metal protective grille installed to provide a through flow to the externally mounted permanent vent to allow any smoke entering the lobby to vent to outside.  
8.2	The previous fire risk assessment noted that it was observed that the window in the stairs on the basement landing and the 10th floor were covered with plywood and/or damaged. At the time of the fire risk assessment it was observed that this action had been completed and the glazing had been replaced.

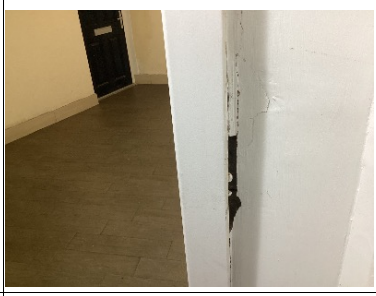
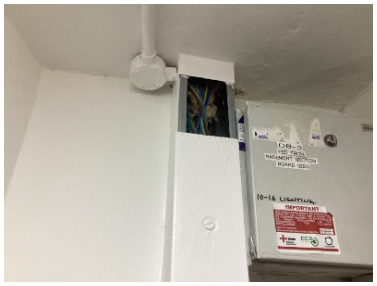
8.2	There is damaged glazing to a window on one of the lower ground floors. This may result in the window being covered with plywood, similar to the recommendation seen in the previous assessment.
8.5	At the time of the fire risk assessment within flat 113 there was an excess of storage within the entrance hallway that made it difficult to walk through. The assessor advised FCHO staff to tell the tenant to reduce the amount of storage in this area.
8.7	During the previous assessment the person consulted advised that FCHO had sent letters to all residents of the block to inform them of the safe use and storage of electric bikes/scooters.
8.7	**For information:** Lithium Batteries - Electric scooters, and E-bikes With 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 alarm rather than 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 un-coiled 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 the 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're 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.
8.7	The communal area was clear and sterile of unauthorised items at the time of this assessment.
8.7	At the time of the fire risk assessment, there were multiple issues regarding storage within the bin rooms on a number of floors. At the time of the fire risk assessment the assessor spoke with the team that is responsible for maintaining the cleanliness within the block. They began their removal process of all these items on the same day as the fire risk assessment. FCHO staff accompanied the assessor while on-site and were aware of the items and risks associated.
8.12	Final exit doors are used regularly by residents and it can be reasonably expected that any fault would be reported. The mobile caretaker carries out daily checks that are not recorded unless faults are reported.
8.18	The doors with electromagnetic securing devices with dual push button releases have been confirmed to release on the loss of power and are configured to release the doors in an emergency.
8.18	The previous fire risk assessment raised an action that the gate from the escape route at the basement level of the building is fitted with an electromagnetic lock. To exit the premises a singular push-to-exit button is located adjacent to the gate, with no clear override switch fitted. At the time of the fire risk assessment, it was observed that the gate has since been fitted with an emergency override. 

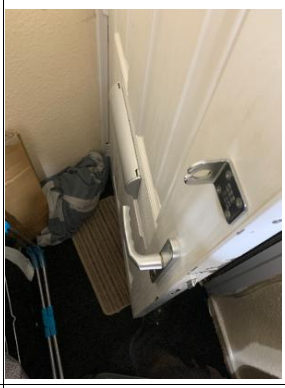
8.22	The devices are fitted onto the main entrance door and all residents and their visitors should be familiar with their operation which is indicated.

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 intumescing 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?	Yes
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?	No
	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.	N/A
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
	Observation
9.1, 9.8	It was observed at the time of the fire risk assessment that there was damage to the wall next to the door leading to the refuse rooms on the lower ground floor and the 14th floor. Where there is damage to walls around a doorframe, this may allow for the spread of fire or products of combustion, placing persons at risk of harm. **Note**: FCHO are aware of this issue and has confirmed it is due to the ventilation within the refuse room slamming the door.  
	Recommended Actions
9.1, 9.8	It is recommended that the wall be repaired to the same level of fire resistance as the surrounding structure.
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 fire stopped to the same level of fire resistance as the surrounding wall.
	Observation
9.8	It was observed at the time of the fire risk assessment that there were open conduits within communal areas on the ground, first and 10th floor. There was also a missing cover on the electrical box within the refuse room on the lower ground floor.   
	Recommended Actions
9.8	It is recommended that the conduits be sealed and the electrical box cover be replaced.

Ref	COMMENTARY
9.1	The boiler room has an FD30s fire door fitted. The room contains the mains gas intake and gas-powered boilers and is considered an area of special fire hazard. With the exception of the gas supply to the boilers, there is a limited amount of combustible materials in the room. The room is fitted with sprinklers that are universally accepted to reduce the severity of the risk in the event of a fire occurring The sprinklers are considered to mitigate the risk of fire spreading and the FD30s door is considered suitable as opposed to upgrading the door to FD60 standard.
9.1-9.2	There is no roof void compartmentation to consider as the building has a flat roof as seen onsite.
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. 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-minute fire-resisting doorsets report undertaken by Warrington Fire was viewed. The conclusions from that report advise that if the NFS 30-minute 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 Warrington fire that they would provide a minimum of 30 minutes fire resistance integrity performance and insulation (subject to section 20 of the report). A report from Exova Warrington fire was also viewed, 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 123's entrance was advised to be a newer door set to FD30s. These are the types of doors that the existing ones will be replaced with should they become damaged. The layout of the flats includes a hallway with bedrooms (a mixture of 1/2 bedrooms), a bathroom, and a lounge leading off at the end of the hallway. The kitchen is accessed off the lounge. The door to the lounge appears to be the original door and with some fitted with spring-loaded or rising butt hinges as would have been fitted at the time of construction. The remaining internal doors are of timber hollow core construction.  
9.1, 9.5-9.6	All doors to the communal areas, including refuse chute rooms, lobby 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, 9.5-9.6, 9.8	Article 14 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to ensure that emergency routes and exits can be used as quickly and safely as possible. Article 8 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to take general fire precautions to ensure the safety of relevant persons. This includes measures to reduce the risk of fire on the premises and the risk of the spread of fire on the premises.
9.1, 9.5-9.6, 9.8	**Extract from previous fire risk assessment:** Previously noted fire protection improvement works included: • fire stopping of services in the common area and within flats following a detailed passive fire protection survey. **Onsite observations within flats and the common areas confirmed that works have been undertaken.** • inspecting the function and operation of all the flat entrance door self-closing devices and installing overhead-type devices where the concealed jamb self-closer is defective (left in situ). Where the concealed jamb self-closer has been removed, this has been replaced with a new one of the same specification to maintain the integrity of the fire door. **Onsite observations of flat entrance doors accessed confirmed either concealed / overhead self-closers to be in situ.** • inspection and remediation of the fire door frame to wall gaps, cutting back expanding foam, and re-sealing with approved fire-stopping material. **This was advised to have been completed.** • replacing the smoke and heat alarms within each flat with new BS 5839 pt.6 category D1, LD2 standard with the addition of an interlinked heat alarm in the ventilated landings. **Onsite observations within the flats accessed confirmed that the common fire detection and alarm system extends to within the flat hallways, grade D smoke alarms are installed in the hallway and lounge area, and a heat detector in the kitchen.**

9.1, 9.8	**For future reference:** At the time of the fire risk assessment, it was observed that there was foam filling a breach leading towards flat 104. However, this foam is to cover a hole in the void behind the bin chute and it was seen at the time of the assessment, on a lower floor, that there was a wall to separate the flat and this area. **2025 update**: This was seen on the 3rd, 10th and 13th floor also.  
9.1, 9.8	The previous fire risk assessment raised an action that onsite observations above flat entrance doors on floors 11 and 4, showed some of the doors may still have expandable foam in-between the door frame and walls. At the time of the fire risk assessment, Thomas Garret confirmed that this action had been completed.
9.1, 9.8	A section of brick wall is exposed in the bin room on the 7th floor. No obvious breaches were observed 
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 effect 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
9.5	The previous fire risk assessment raised an action that the lounge door and transom glazing within flat 94 have been heavily damaged. At the time of the fire risk assessment Thomas Garret confirmed that this action had been completed.
9.8	Onsite observations showed that plant rooms, riser cupboards (sampled observations only), bin rooms, and other areas were adequately fire-stopped including the cabling and pipework for the sprinkler system and Emergency Alert System system. Although no access was gained in the boxed-in sections throughout, the store room on the lower ground level, and the externally accessed store room, the person consulted advised that all boxed-in areas that contain the utilities and pipework installations, and storerooms have been fire-stopped where they penetrate compartment walls. The store room on the lower ground level is no longer in use and contains a corridor with store cupboards accessed from it, and the externally accessed store room is only used for material storage.   

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.
9.8, 9.11	Kitchen ventilation in the flats accessed is provided by way of an openable window with a commonly connected vent in the bathroom and WC connected to a common vent duct which has previously been verbally confirmed to be a "Shunt Duct" type configuration. The person consulted on this visit also confirmed this to be correct, and that these shafts and ducts were checked as part of the compartmentation works for the block. The vent from the bathroom into the ducting was found sealed within the shaft along with a pipe collar installed. Roof-mounted extract fans were also viewed and confirmed to provide extraction for the vents. Pipes were observed within a couple of the bathroom cupboards/shafts and the mains electrical supply cable in the electric cupboard has been fire-stopped with contractor labels visible. Photos reused from previous assessment. Examples of completed fire stopping within the flats, and of the "Shunt Duct" type configuration within the bathroom shaft, along with the extraction unit on the roof level. 
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.
9.16	The general housekeeping in the premises is of a good standard.

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. A contractor checks the operation of the spring-loaded gates six monthly. The chute rooms on each landing are checked regularly and are protected by self-closing fire doors. 
9.18	The previous fire risk assessment noted that both the entrance door and gate on the lower ground floor were unable to be secured. At the time of this fire risk assessment, it was seen that this action has been completed.
9.27	From a non-invasive external visual inspection, the building façade construction appears to be of brick/masonry. 
9.29	The England Regulations 2022, article 11: The responsible person in relation to a high-rise residential building must provide the local fire and rescue authority by electronic means with the documents specified in— (a) regulation 5 (design and materials in external walls); and (b) regulation 6 (floor plans and building plan). Alex Swift has confirmed to the assessor that all information in relation to the building facade is given to GMFRS via their website/portal.

10.0 Automatic Fire Detection		
10.1	Where a fire alarm system is required has one been provided?	Yes
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.	Yes
10.7	Are sufficient call points and detectors provided?	Yes
10.8	Can the alarm be raised without placing anyone at risk?	N/A
10.9	Are all call points visible, unobstructed?	Yes
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?	Yes
10.15	Are there systems in place to ensure the system is tested weekly from a different call point?	Yes
10.16	Are all fire alarm tests, faults and maintenance schedules recorded?	Yes

10.0 Automatic Fire Detection: Finding(s)	
Ref	**FINDINGS**
	None.
Ref	**RECOMMENDATIONS**
	None.
Ref	**COMMENTARY**
10.1	The previous assessment noted that the fire alarm panel was showing a fault. At the time of the fire risk assessment the panel was free from faults. This action has been completed.
10.1-10.6	There is a BS5839-1 fire alarm system provided within the common areas, with heat detection extended to flat hallways. The fire alarm panel is located in the lift lobby on the ground floor and was confirmed to be a silent system that is linked to a call centre should the system activate. Provided there is effective compartmentation and means of escape, 'general needs' blocks of flats will not normally require a communal fire alarm. See 10.12's recommendation. 
10.2	The previous fire risk assessment raised an auction that the lounge detector head within flat 94 was found damaged and hanging down. This flat has been brought up to standards and the action has been completed.
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. One of the flats accessed (flat 94) had one detector hanging down in the lounge area, see recommendation. As part of their standard responses, detection is checked during FCHO annual inspection (to the representative sample of flat accessed) as well as during the annual gas safety check where results are documented on the CP12. FCHO also send 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.
10.7	The previous assessment noted that there was a damaged detector head within the bin room on the ground floor. This detector head has been replaced; this action has been completed.
10.12	FCHO have confirmed that there are flashing beacons and sounders within ancillary areas to alert persons working. This recommendation has been completed.
10.14-10.16	As part of FCHO standard responses, all part 1 fire alarm systems are tested every 6 months. Part 1 systems that are monitored are also tested weekly at different call points. Documentation was not observed on this assessment. However, the assessor observed the fire alarm system being tested at the time of the fire risk assessment.

11.0 Emergency Escape Lighting		
11.1	Has the provision of emergency lighting been considered? Working hours, windowless areas, open access areas>60m2, toilets>8m2.	Yes
11.2	Is emergency lighting provided in accordance with guidance relevant to the purpose group for the premises? (BS5266, ADB)	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.

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?	No
	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?	Yes
	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	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.
12.5	Firefighting equipment has been serviced as per the previous finding within the fire risk assessment. Date of service 03/2025.
12.6-12.8, 12.10	A dry riser is installed with outlets in each ventilated landing lobby. The dry riser inlet is located by the basement entrance door. As part of FCHO standard responses, where installed dry risers are subject to 6 monthly checks: full pressure check and visual inspection.  
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/flat 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 previous FRA raised an action in relation to the sprinklers being inspected on a regular schedule to ensure that they are available and functional at all times. The previous FRA action has not been signed off as complete. 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.
12.8-12.9	A sprinkler system has been installed in the building. In each flat, there are concealed sprinkler heads located in most rooms. In addition, there are also sprinkler heads located in some of the plant areas. There are control valves for each floor in the bin refuse rooms that adjoin the lift/flat lobbies. A pump and water tank for the sprinkler system have been provided in the water pump room on the basement level.

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. It was confirmed by Thomas Garret that the lift will go to the ground floor and open upon activation of the alarm, from there the fire service is able to control the lift and go floor to floor if needed. 
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, Thomas Garret confirmed that this action has been completed.
12.14	An Evacuation Alert System (EACIE) is installed within the building which is separate from the fire detection and alarm system. 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**
	Observation
13.15	It was observed at the time of the fire risk assessment that wayfinding signage is missing from the 9th-floor staircase. Where such wayfinding signage is absent this may disorientate and delay firefighters in reaching the required area of the building, placing persons at risk of harm. **Note:** FCHO have confirmed that this signage has been ordered. 
	Recommended Actions
13.15	It is recommended that wayfinding signage is provided on the premises staircase(s) which will adequately assist attending firefighters in identifying their location within the building. Such signage should be clearly visible in low light or smoky conditions and it may be prudent to provide such signage at low level due to the possibility of smoke layers. It should be noted that when the signage is installed it becomes a duty to maintain it.
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 provide 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	Article 38 of the Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to ensure the premises and any facilities equipment or devices provided in respect of the premises for use or the protection of firefighters are suitably maintained.
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?	Yes
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.

15.0 Fire Safety Management		
15.1	Are there an adequate number of appointed competent persons and arrangements (under Article 18 of the RRFSO) in place to assist the responsible person in the management and implementation of the preventative and protective measures? (safety assistance)	Yes
15.2	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	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.
15.6-15.7	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.
15.9, 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 Manger, 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.**

Fire Emergency Plan FLATS

STAY PUT POLICY

GENERAL ADVICE TO RESIDENTS

This building has been built in such a way as to protect the people in it if a fire breaks out.

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

AT ALL TIMES

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

IF A FIRE BREAKS OUT IN YOUR FLAT

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

- Do not stay behind to try to put the fire out, unless you have received suitable training.
- Tell everybody else in your flat about the fire and get everybody to leave.
- Close the front door and leave the building.
- CALL THE FIRE SERVICE.

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

- It will usually be safe for you to stay in your own home.
- You must leave your home if smoke or heat affects it OR you are instructed to do so by the Fire Service. Close all doors and windows.

CALLING THE FIRE SERVICE

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

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

1) Dial 999.

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

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

Rountree House, Manchester Street, Oldham, Greater Manchester, OL9 6HF

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

THE ABOVE PROCEDURE SHOULD BE COMMUNICATED TO EACH RESIDENT.

17.0 Risk Analysis, Priority Ratings and Fire Risk Ratings

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

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
9.1, 9.8	It was observed at the time of the fire risk assessment that there was damage to the wall next to the door leading to the refuse rooms on the lower ground floor and the 14th floor.	It is recommended that the wall be repaired to the same level of fire resistance as the surrounding structure.	P2	Moderate			
13.15	It was observed at the time of the fire risk assessment that wayfinding signage is missing from the 9th-floor staircase.	It is recommended that wayfinding signage is provided on the premises staircase(s) which will adequately assist attending firefighters in identifying their location within the building.	P3	Moderate			

19.0 Recommendations

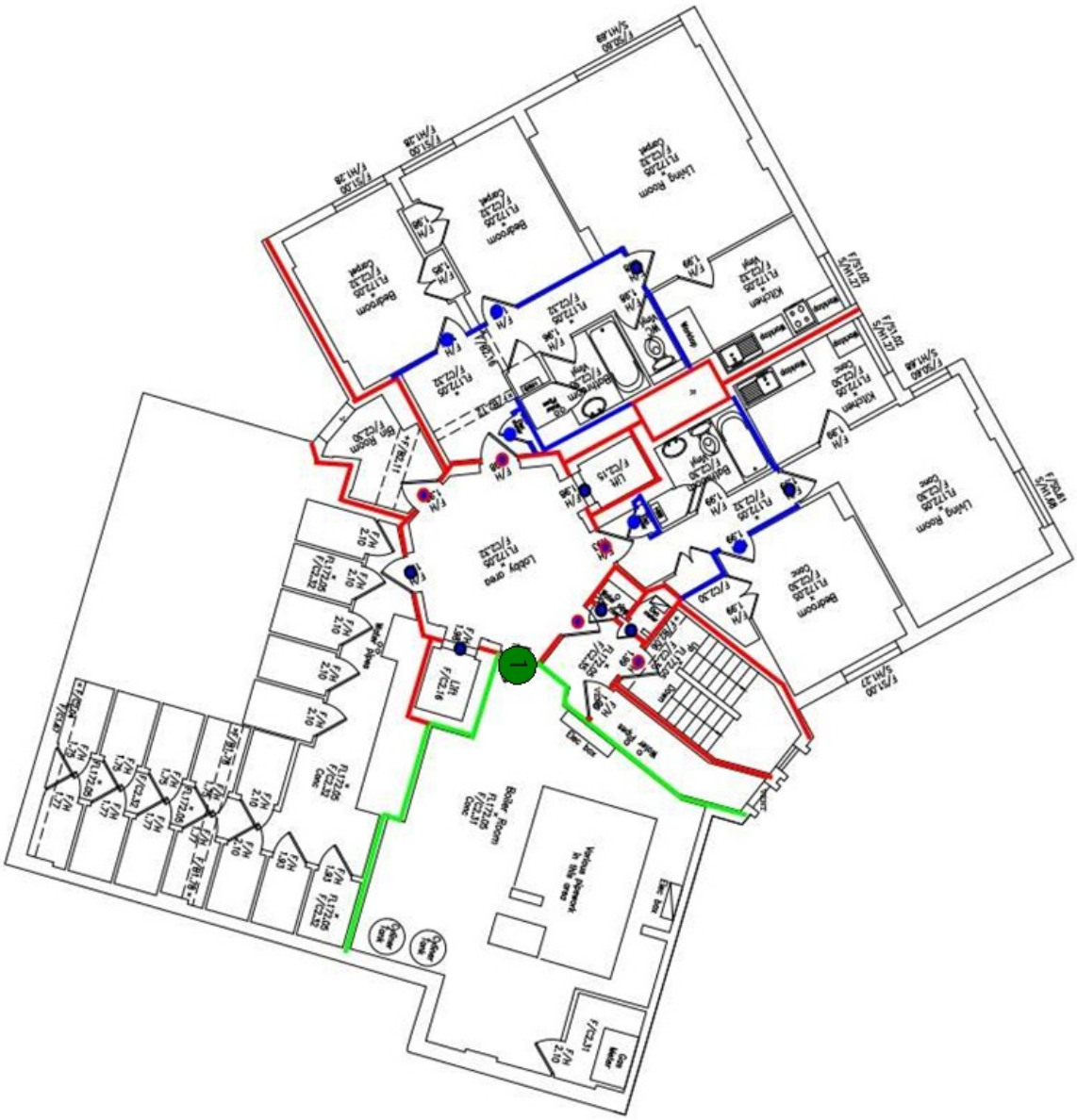
Ref	Observation	Recommended Action	Risk Rating	Contractor Completed
9.1	It was observed at the time of the fire risk assessment that there were small drill holes next to a number of flat entrance doors. This is more than likely due to a doorbell being installed.	FCHO should monitor these holes throughout the property, and where they are deemed excessive or may lead into the flats, they should be fire stopped to the same level of fire resistance as the surrounding wall.	Moderate	
9.8	It was observed at the time of the fire risk assessment that there were open conduits within communal areas on the ground, first and 10th floor. There was also a missing cover on the electrical box within the refuse room on the lower ground floor.	It is recommended that the conduits be sealed and the electrical box cover be replaced.	Moderate	

20.0 Commentaries

Ref	Observation	Recommended Action	Risk Rating	Contractor Completed
8.2	There is damaged glazing to a window on one of the lower ground floors. This may result in the window being covered with plywood, similar to the recommendation seen in the previous assessment.	It is recommended that the glazing be replaced. This has been raised as a low-level commentary action as the damaged glazing does not affect the window's ability to be opened.	Tolerable	

Appendix

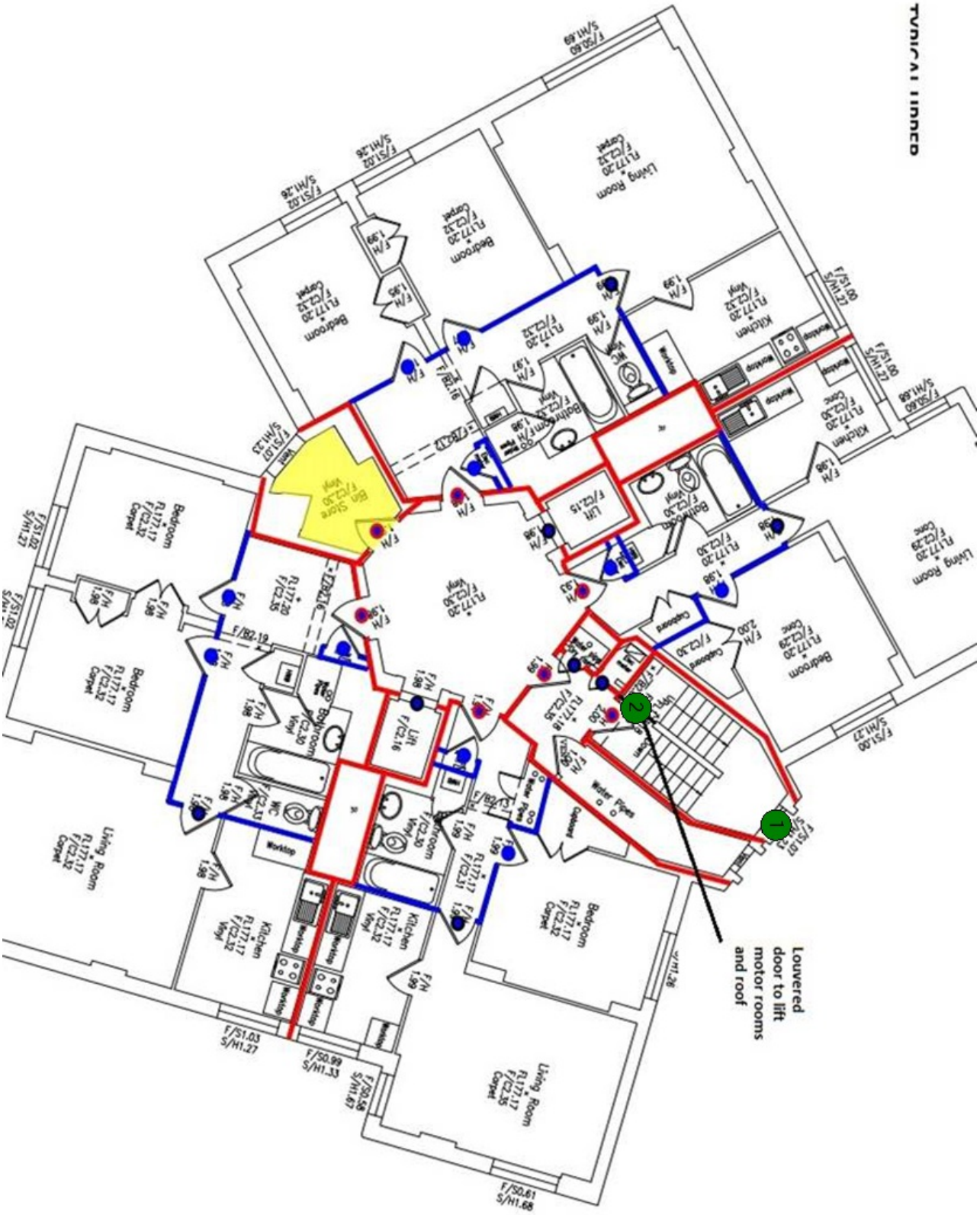
Lower Ground Floor



1 The Confinement of Fire - 9.1

No Image

16th floor



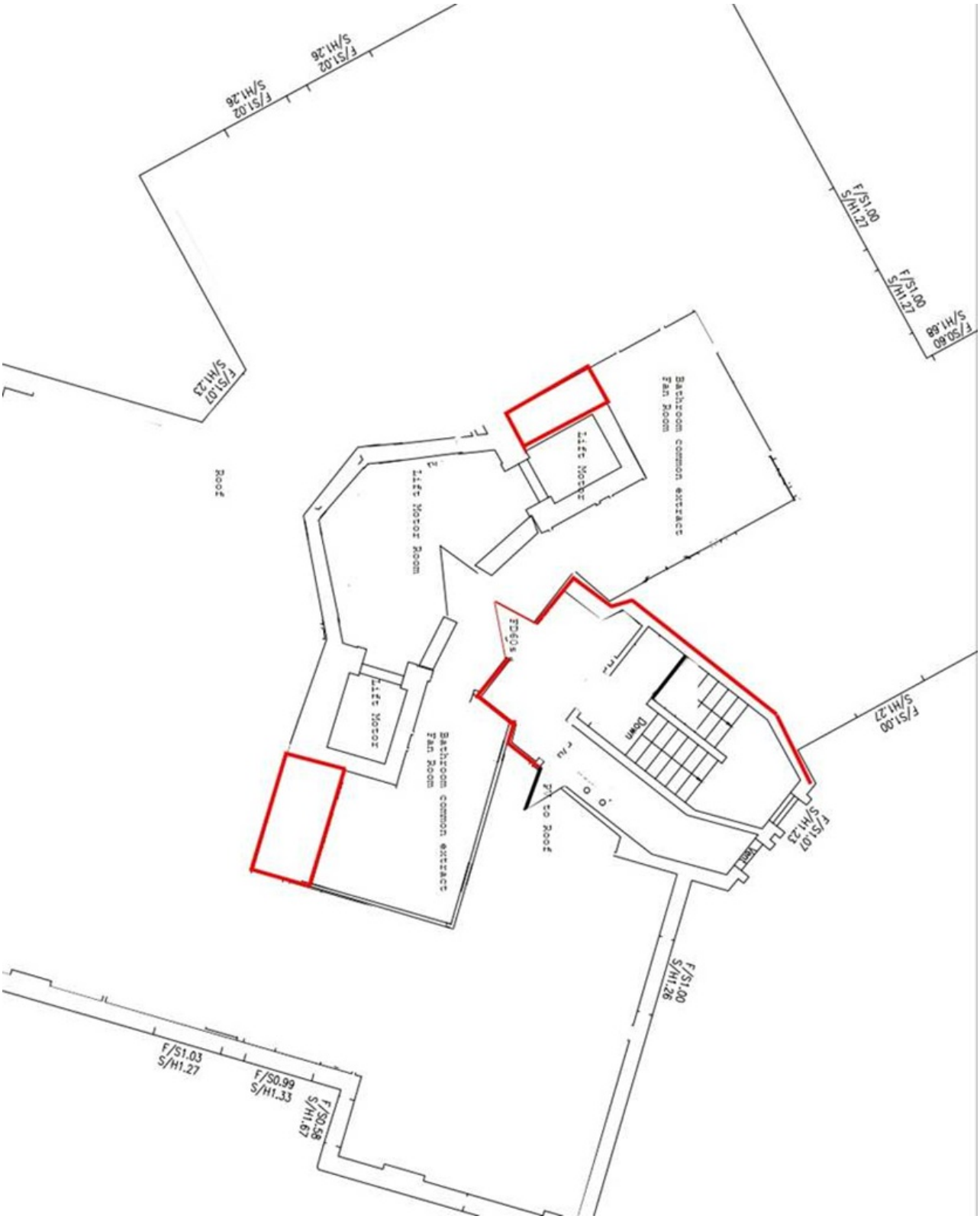
1 Means of Escape - 8.2

No Image

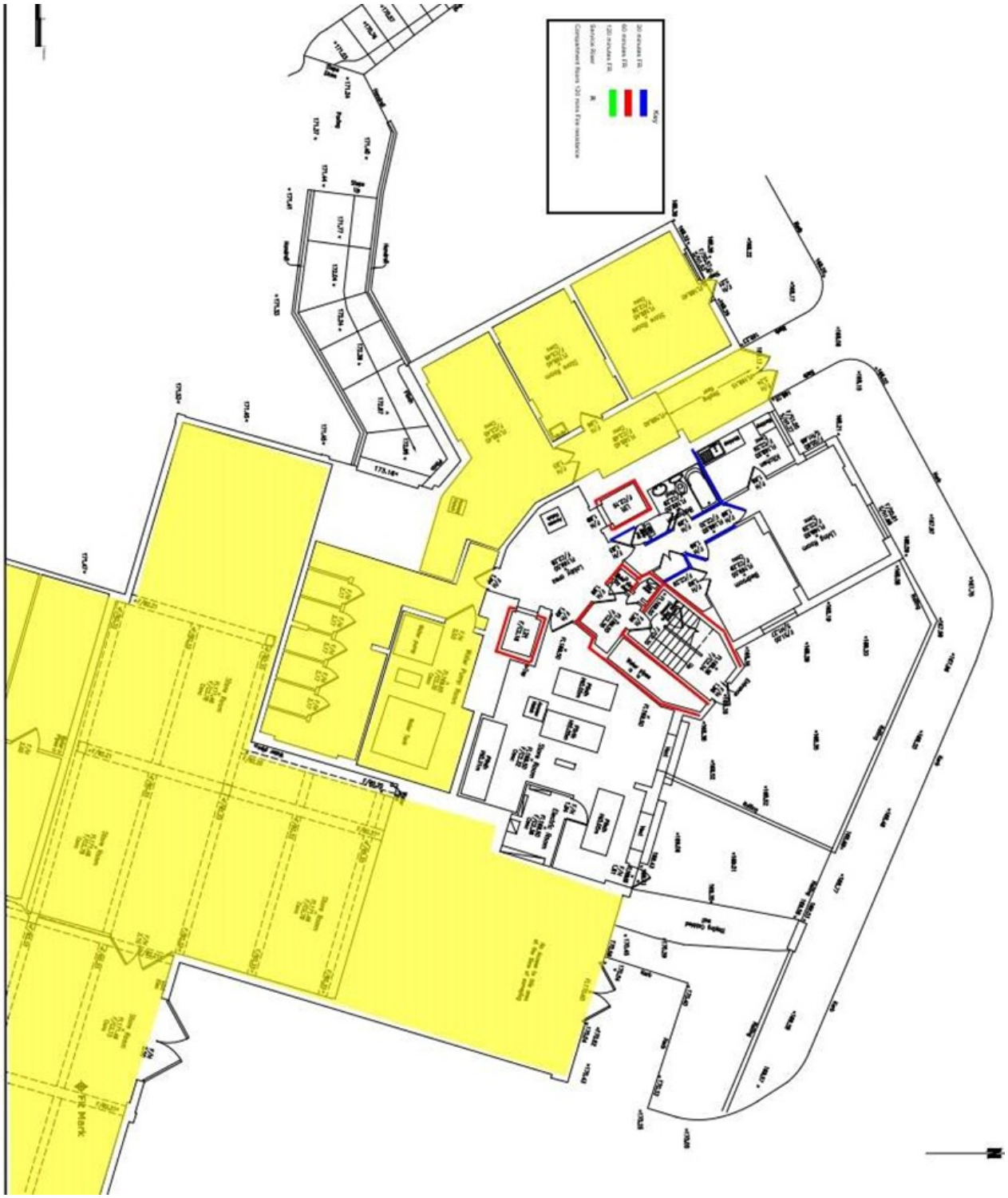
2 Means of Escape - 8.2

No Image

Lift Motor room with staircase PV

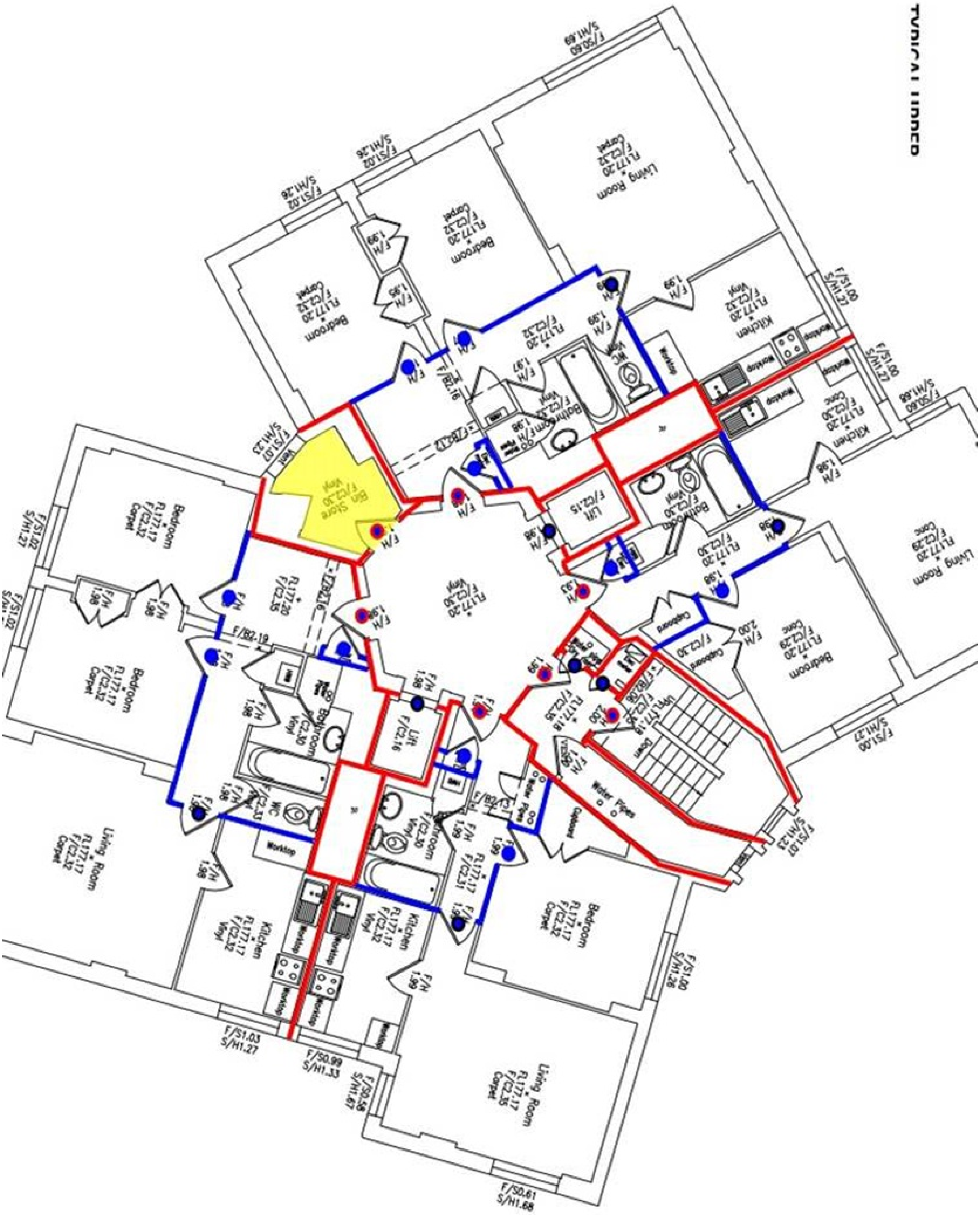


Basement

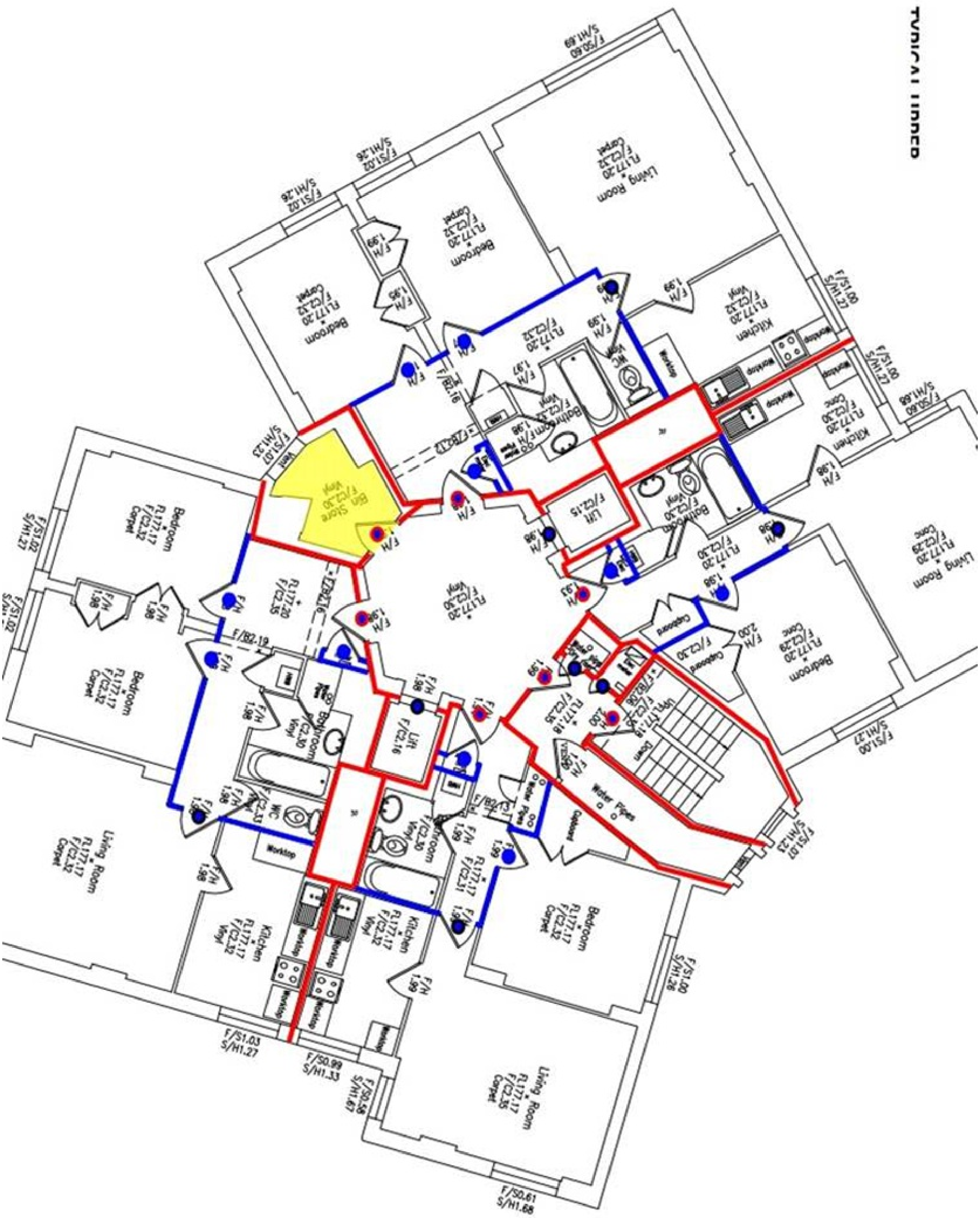


Ground floor

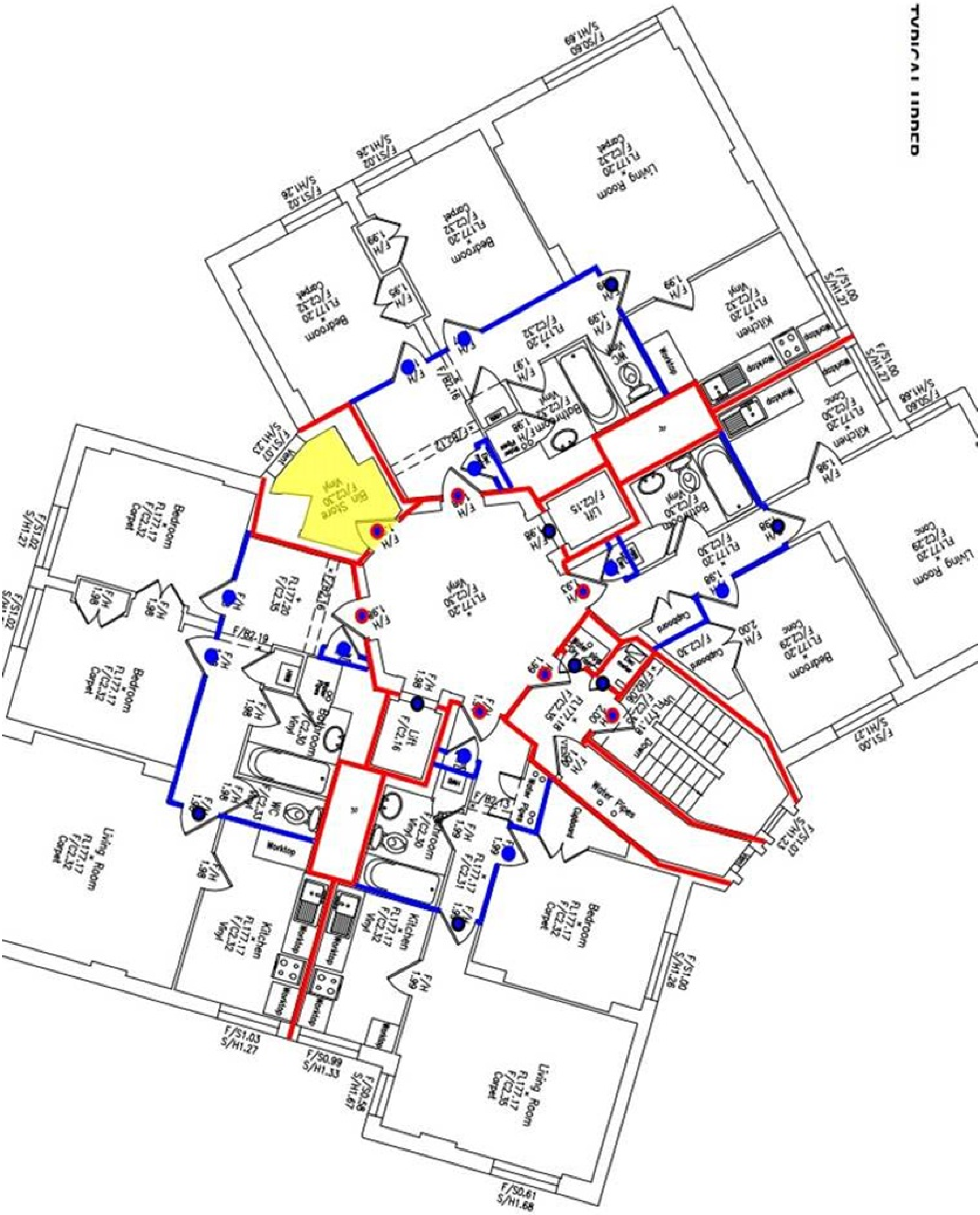
1st floor



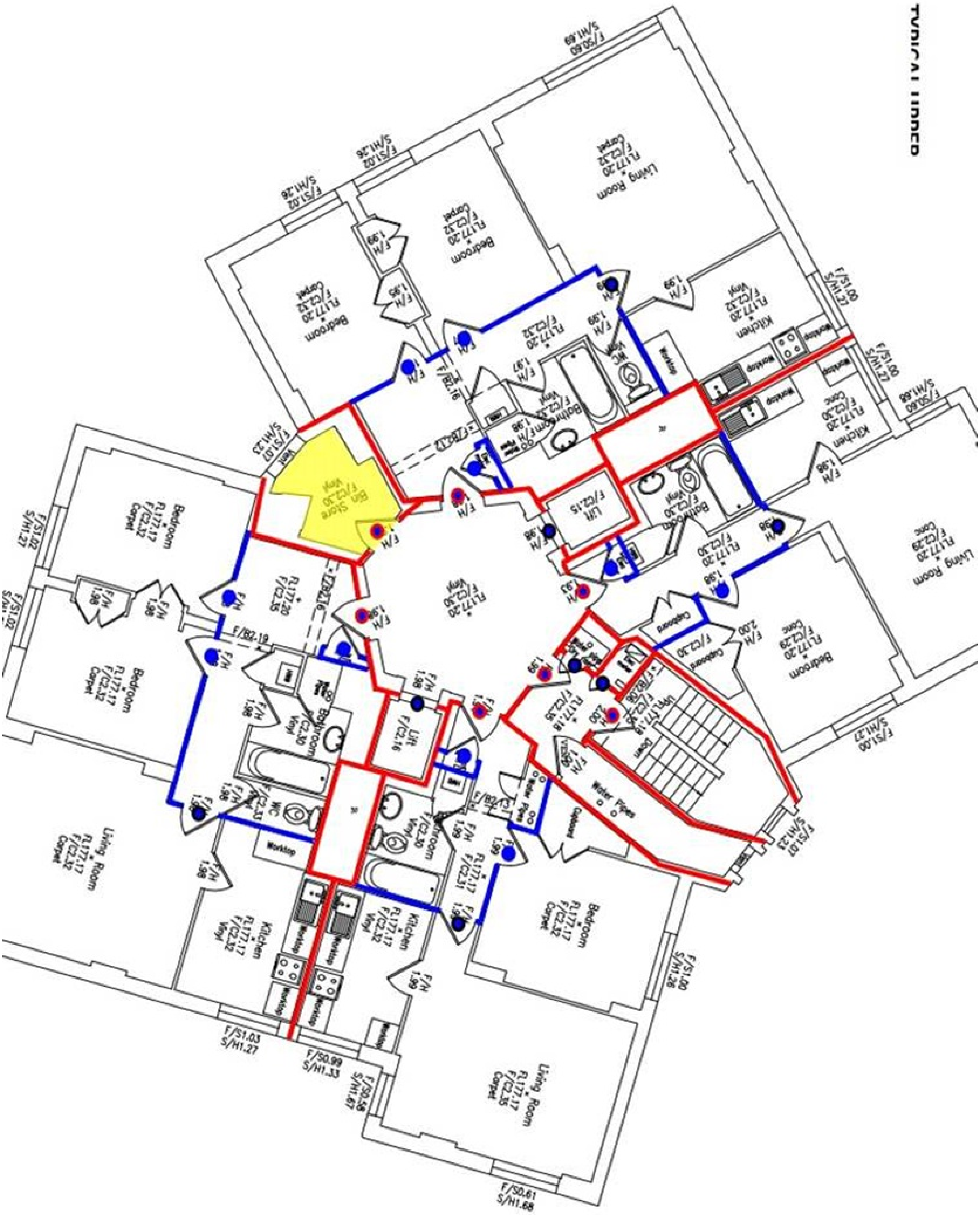
2nd floor



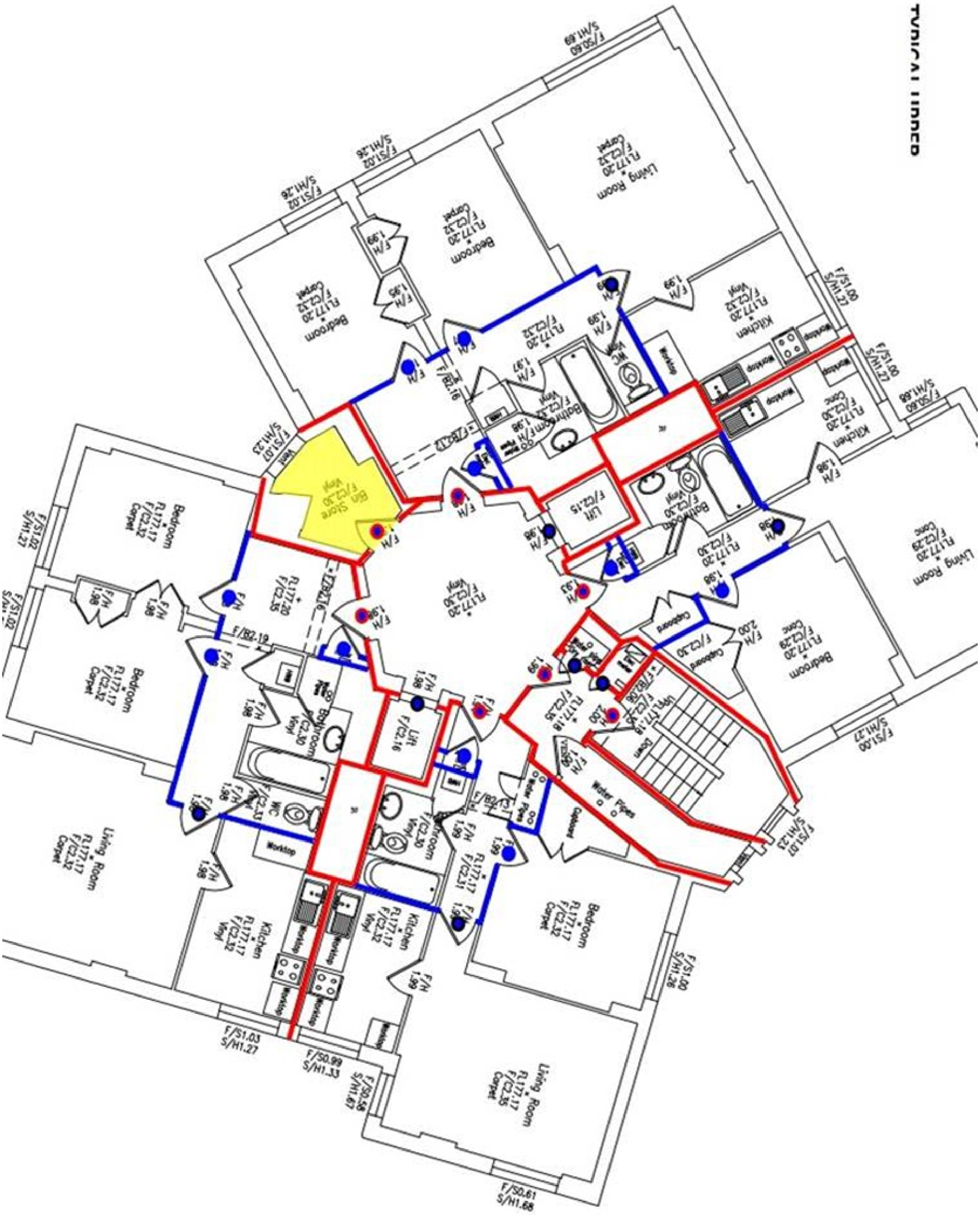
3rd floor



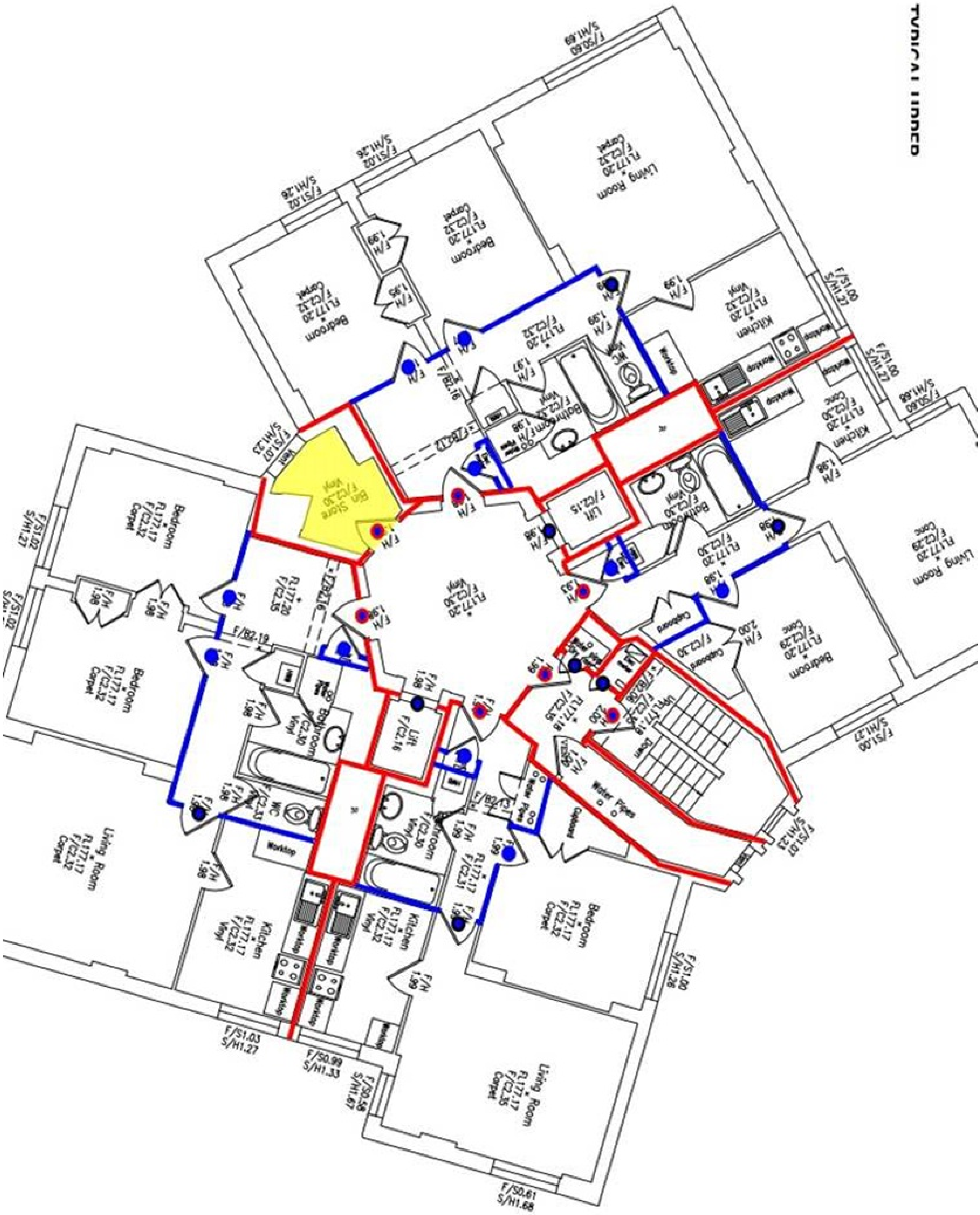
4th floor



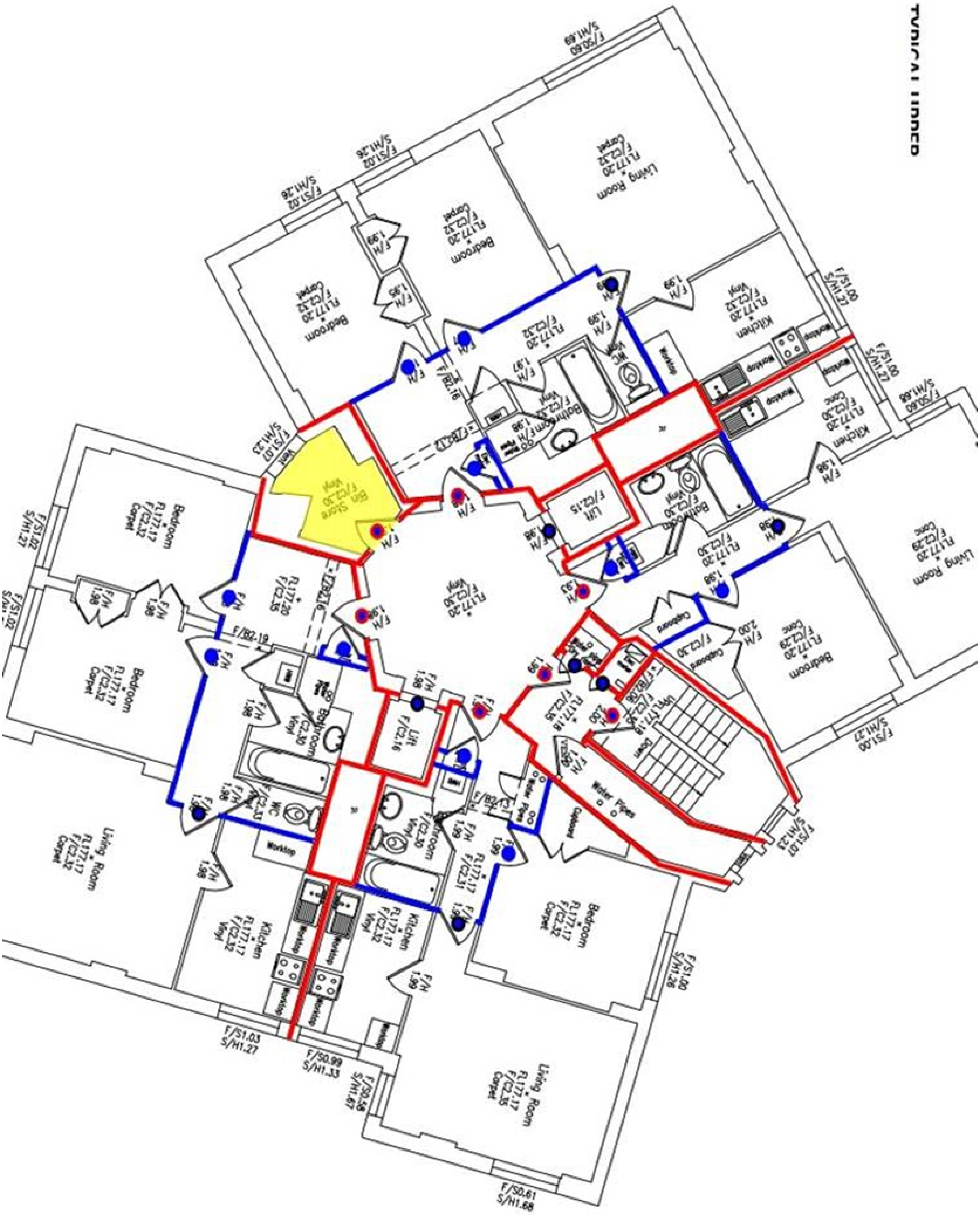
5th floor


Living Room
Bedroom
Kitchen
Bathroom
Lift
Bin Store
Water Pipes
Worktop
Cupboard

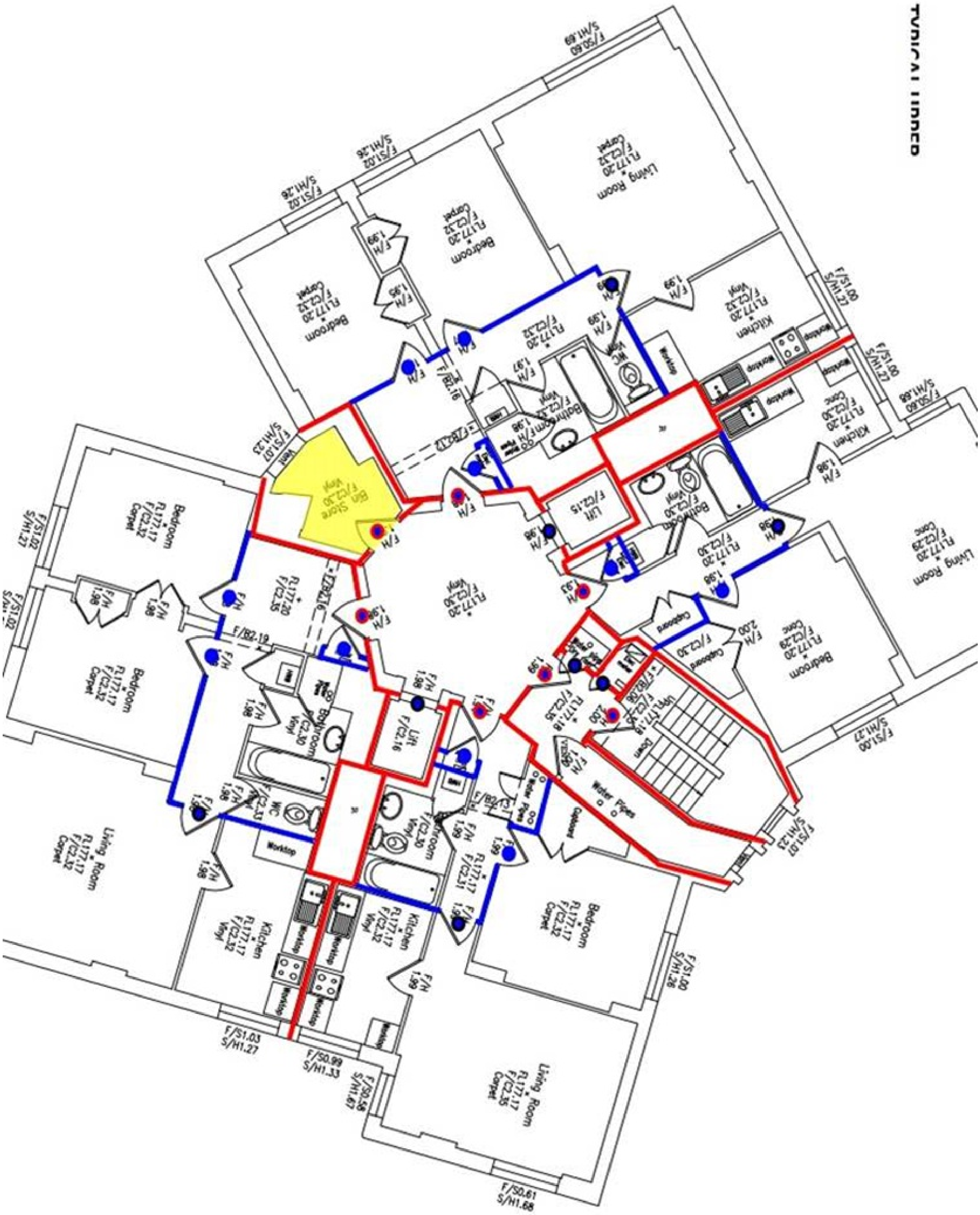
6th floor



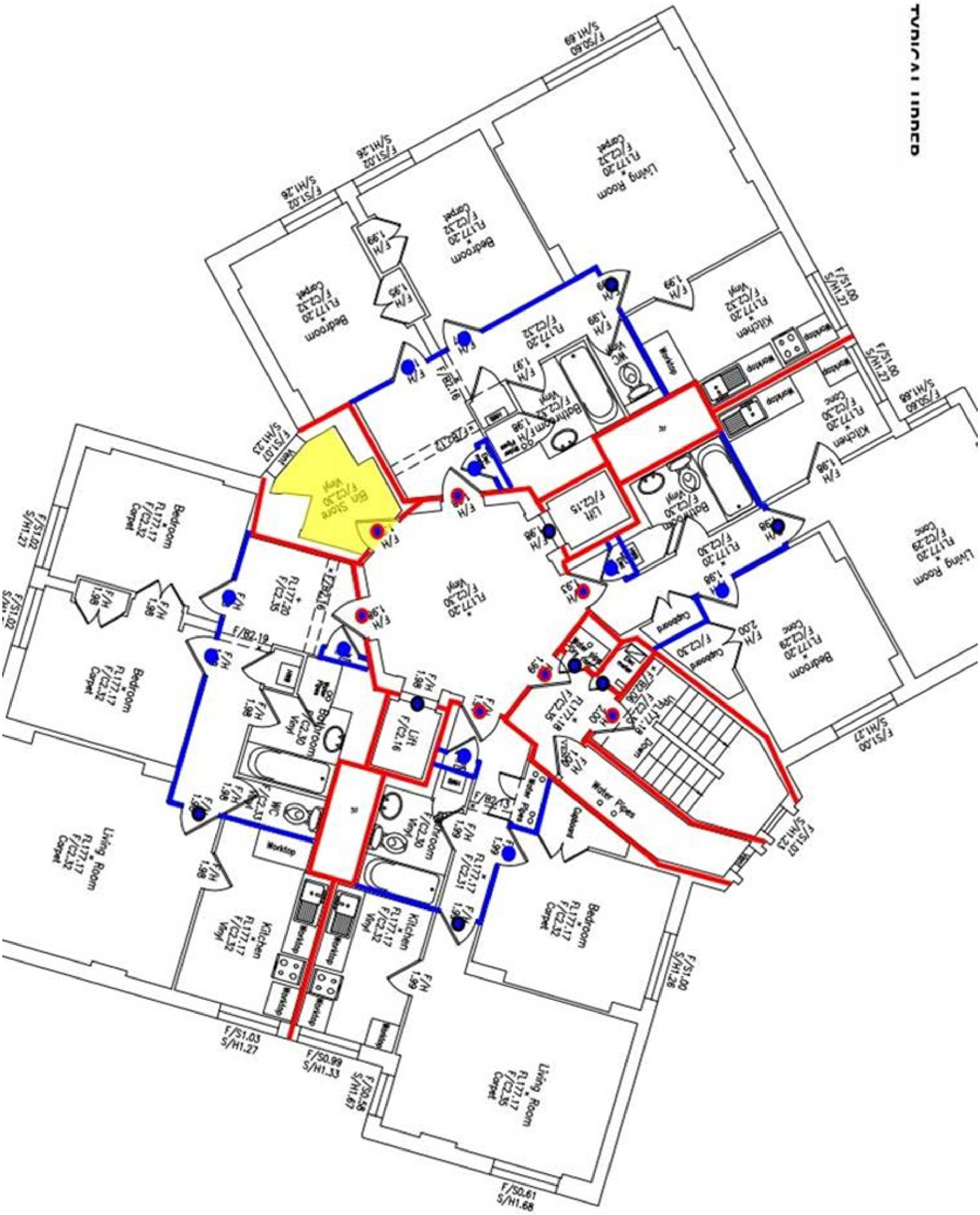
7th floor



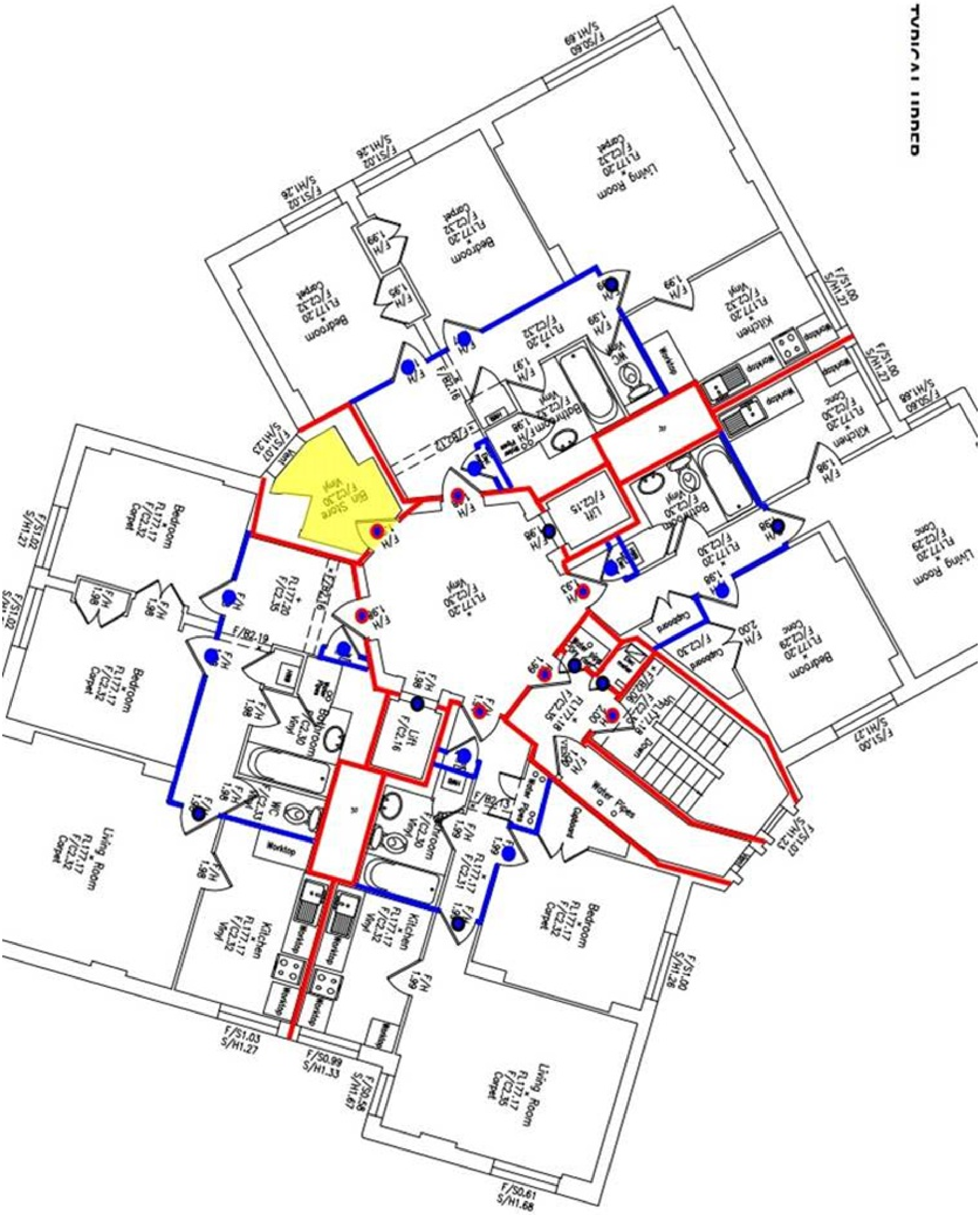
8th floor



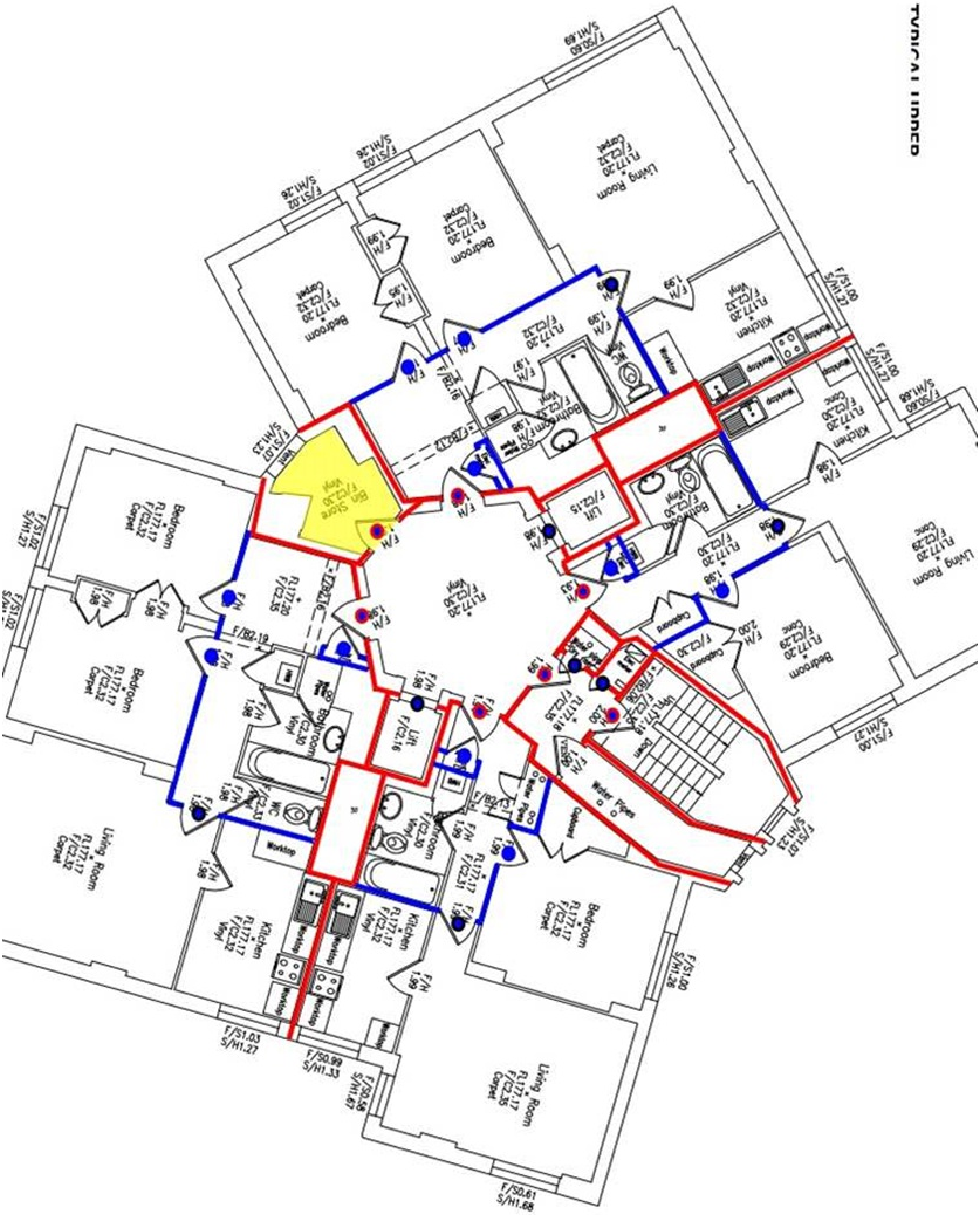
9th floor


Bedroom
Living Room
Kitchen
Bathroom
Bin Store
Lift
Water Pipes
Worktop
Cupboard

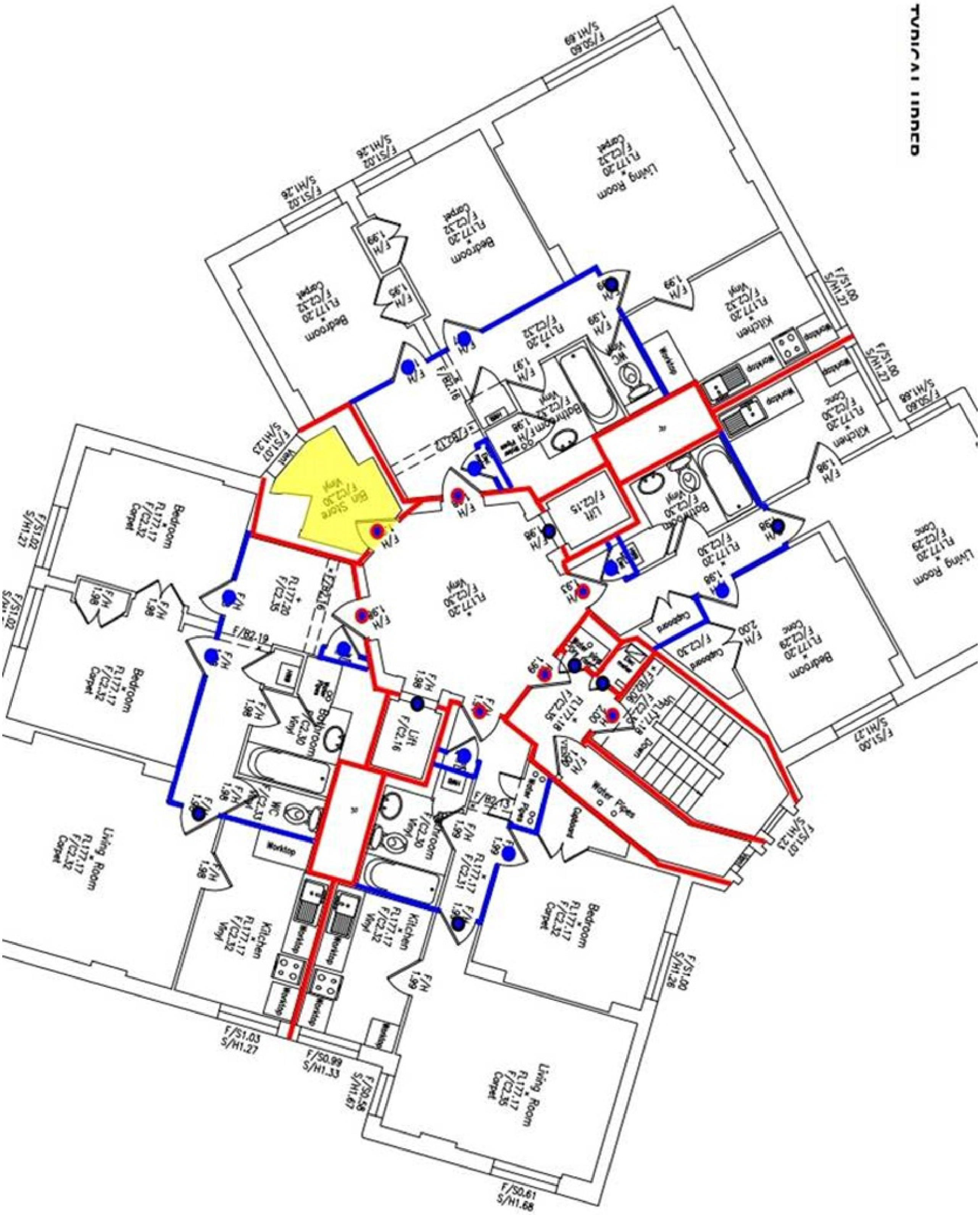
10th floor



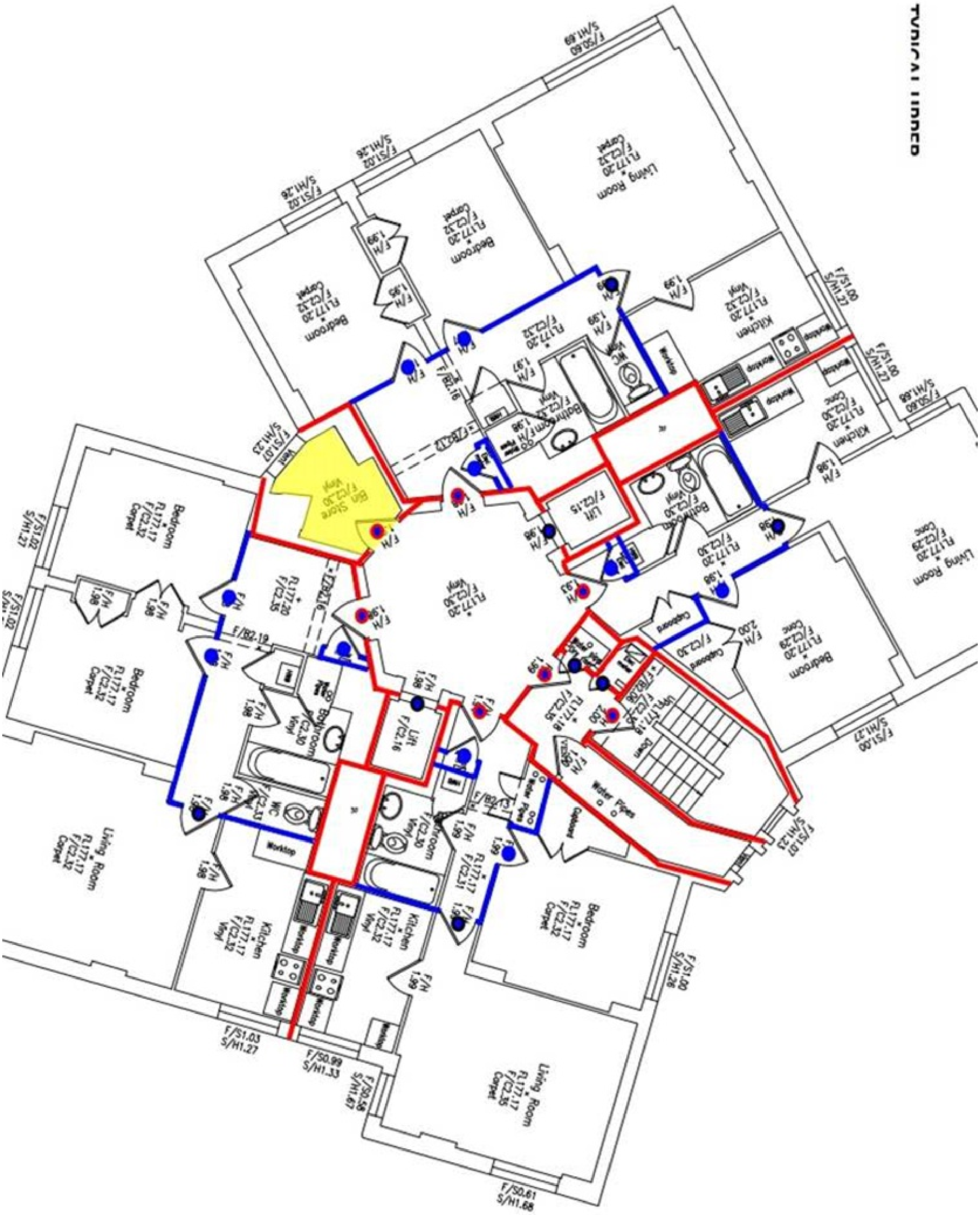
11th floor


Living Room
Bedroom
Kitchen
Bathroom
Lift
Bin Store
Water Pipes
Cupboard
Worktop

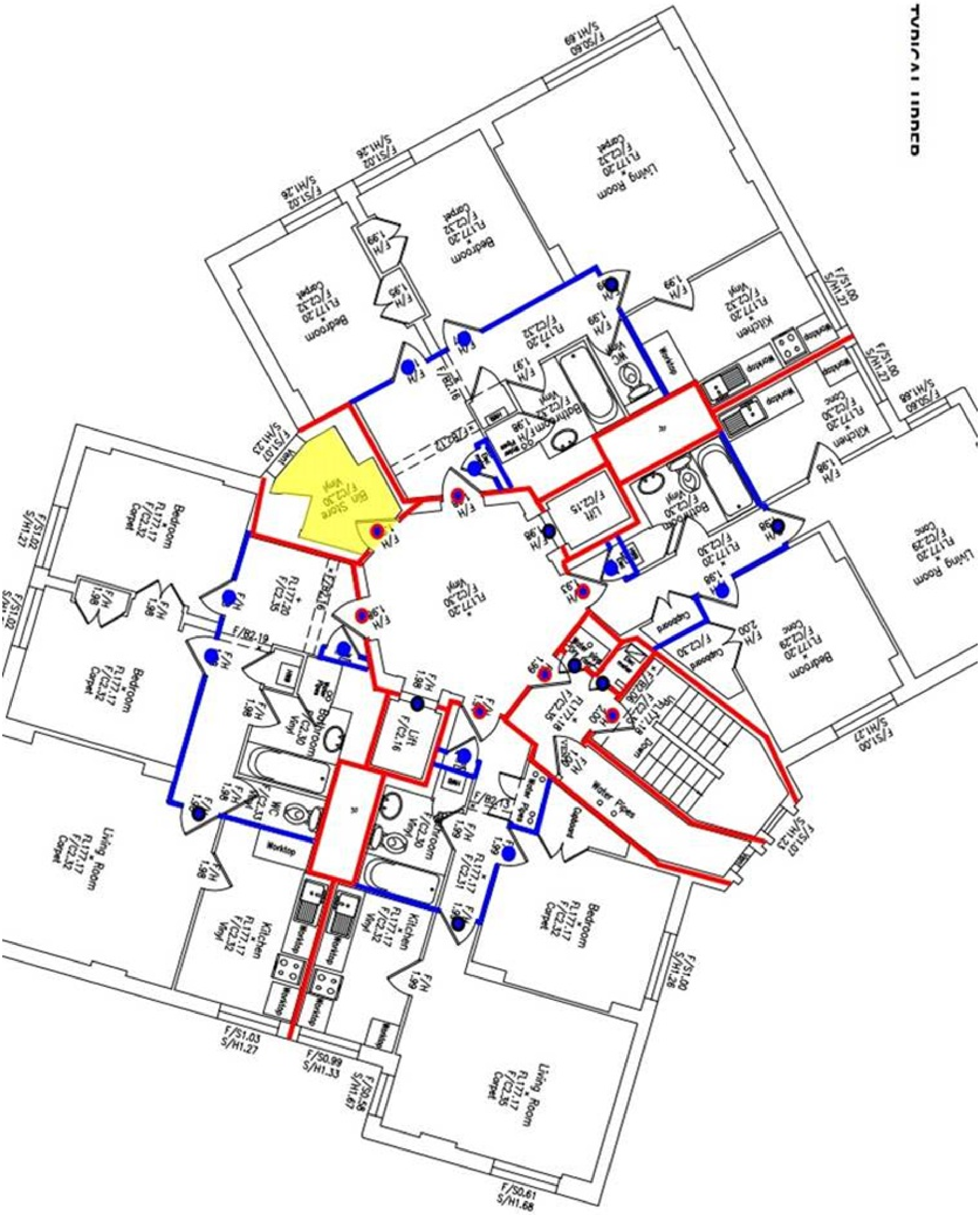
12th floor


Living Room
Bedroom
Kitchen
Bathroom
Bin Store
Lift
Worktop
Cupboard
Water Pipes
Down

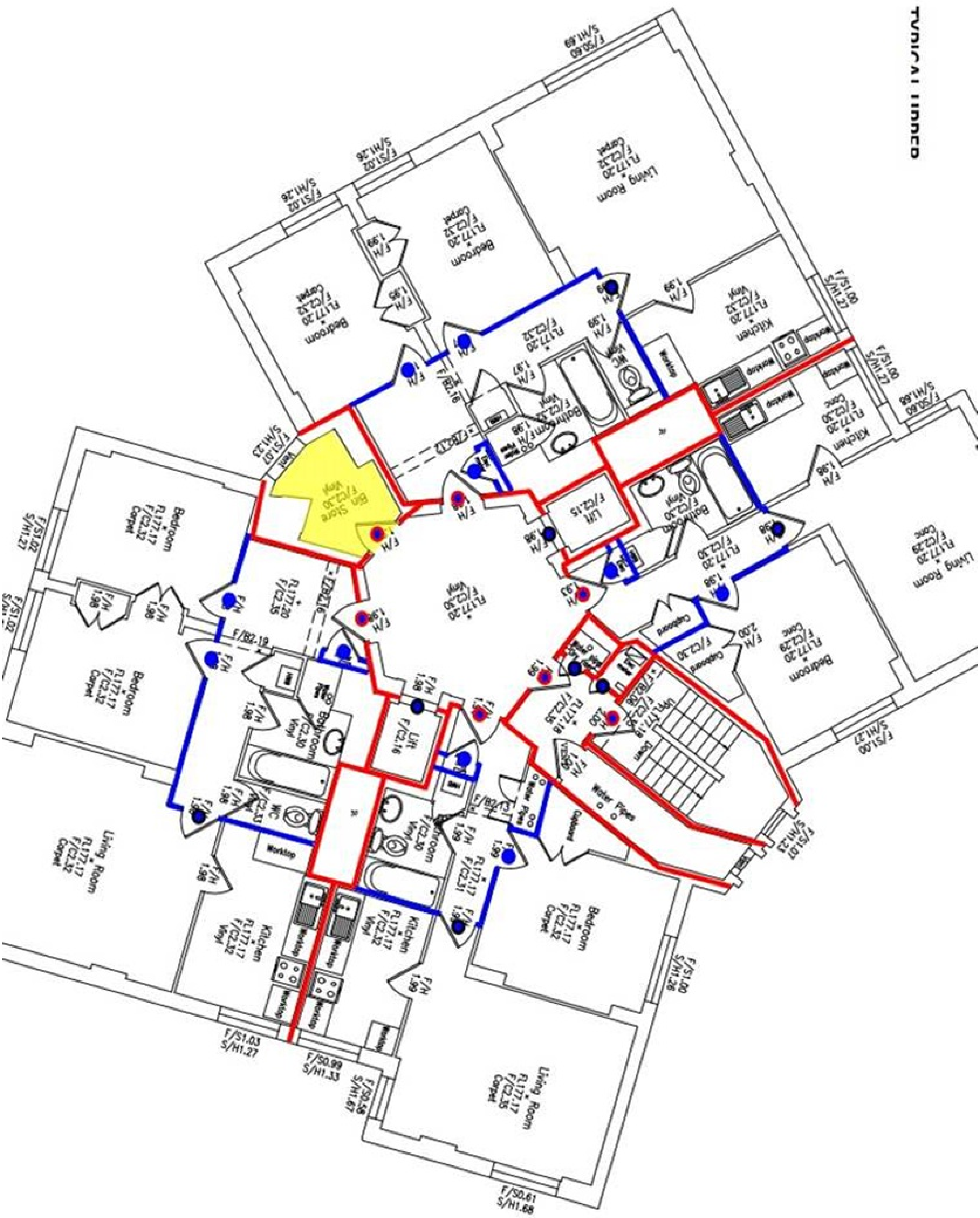
13th floor



14th floor

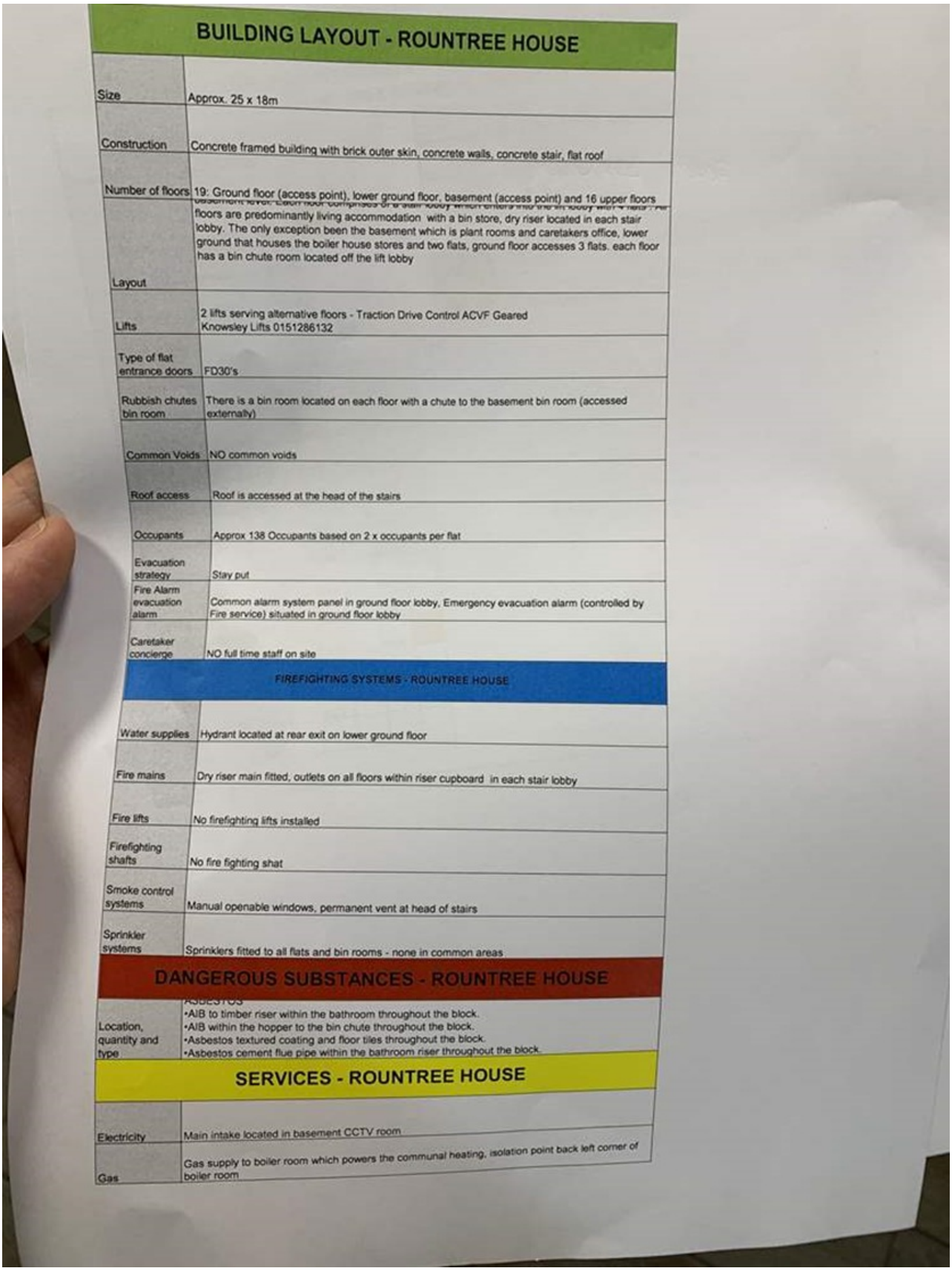

Living Room
Bedroom
Kitchen
Bin Store
Lift
Water Pipes
F/S1.03
S/H1.27
F/S0.99
S/H1.33
F/S0.61
S/H1.68

15th floor



Living Room
FL177.17
F/C2.35
Carpet
Kitchen
Bedroom
F/S1.03
S/H1.27
F/S0.99
S/H1.33
F/S0.61
S/H1.68
F/S1.00
S/H1.26

On-Arrival Information



BUILDING LAYOUT - ROUNTREE HOUSE	
Size	Approx. 25 x 18m
Construction	Concrete framed building with brick outer skin, concrete walls, concrete stair, flat roof
Number of floors	19: Ground floor (access point), lower ground floor, basement (access point) and 16 upper floors
Layout	floors are predominantly living accommodation with a bin store, dry riser located in each stair lobby. The only exception been the basement which is plant rooms and caretakers office, lower ground that houses the boiler house stores and two flats, ground floor accesses 3 flats. each floor has a bin chute room located off the lift lobby
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 room located on each floor with a chute to the basement bin room (accessed externally)
Common Voids	NO common voids
Roof access	Roof is accessed at the head of the stairs
Occupants	Approx 138 Occupants based on 2 x occupants per flat
Evacuation strategy	Stay put
Fire Alarm evacuation alarm	Common alarm system panel in ground floor lobby, Emergency evacuation alarm (controlled by Fire service) situated in ground floor lobby
Caretaker concierge	NO full time staff on site
FIREFIGHTING SYSTEMS - ROUNTREE HOUSE	
Water supplies	Hydrant located at rear exit on lower ground floor
Fire mains	Dry riser main fitted, outlets on all floors within riser cupboard in each stair lobby
Fire lifts	No firefighting lifts installed
Firefighting shafts	No fire fighting shat
Smoke control systems	Manual openable windows, permanent vent at head of stairs
Sprinkler systems	Sprinklers fitted to all flats and bin rooms - none in common areas
DANGEROUS SUBSTANCES - ROUNTREE HOUSE	
Location, quantity and type	ASBESTOS •AIB to timber riser within the bathroom throughout the block. •AIB within the hopper to the bin chute throughout the block. •Asbestos textured coating and floor tiles throughout the block. •Asbestos cement flue pipe within the bathroom riser throughout the block.
SERVICES - ROUNTREE HOUSE	
Electricity	Main intake located in basement CCTV room
Gas	Gas supply to boiler room which powers the communal heating, isolation point back left corner of boiler room