

FIRE RISK ASSESSMENT Extra Care (Independent Living) (v3. November 2016)

Regulatory Reform (Fire Safety) Order 2005 Category of Premises against the FSO 2005: Sleeping Accommodation

The purpose of this report is to provide an assessment of the risk to life from fire in the building, and, where appropriate, to make recommendations to ensure compliance with fire safety legislation. The report does not address the risk to property or business continuity from fire.

The Regulatory Reform (Fire Safety) Order applies to the common areas of the building and the fire safety facilities provided in support of the building.

Responsible Person	Housing & Care 21
Extra Care Court Name	Callendar Court
Court Address	Callendar Court, Beacon Lough Estate, Gateshead. NE9 6RR
Court Manager (Fire Safety Manager)	Ingrid Korsan
Fire Risk Assessor	Barrie Callaghan
Date of Fire Risk Assessment	9th Feb 2018
Date of Previous Fire Risk Assessment	14th Feb 2017
Suggested date for review 15 months or sooner if:	Feb 2019
• Any structural or material change to the premises;	None
• A change of work practice;	None
• A near miss or fire incident;	None
• A significant change in staff levels.	None
NB.	Information in yellow highlighted cells should be taken from the Occupancy Profile document completed by the Extra Care Court Manager.

1.	THE BUILDING	
1.1	Number of floors	12

1.2	Brief details of construction	Refurbished multi-storey building comprising pre-cast concrete panels on reinforced concrete frame. External walls finished in insulated render. All services to flats are electric plus single gas boiler to single storey communal block. 40 Flats over 12 floors
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2. THE OCCUPANTS (2.4 - 2.8 taken from FRA - Occupancy Profile)		
2.1	Maximum number sleeping within individual flats (approximate)	2
2.2	Maximum number of employees at any one time (approximate)	2 Care provided by GMBC Care Service max No 5
2.3	Maximum number of visitors/others at any one time (assumed)	80
2.4	Service users classified as 'low'	6
2.5	Service Users classified as 'moderate'	3
2.6	Service Users classified as 'Substantial'	17
2.7	Service Users classified as 'Critical'	7
2.8	How many Personal Emergency Evacuation Plans (PEEPs) are in place?	38, 3 VOID's, 2 in hospital

3. EVACUATION STRATEGY AND TRAINING <i>The Court Manager will be given adequate training and instruction on the scope and requirements for the fire duties to be undertaken – L2 Fire Safety Manager</i> <i>Questions 3.2 – 3.9 should be taken from the Occupancy Profile document completed by the Court Manager</i>		
3.1	What is the current Fire Evacuation Strategy?	Stay Put with Delayed evacuation form Zones and Communal. <i>A delayed or stay put evacuation strategy requires the residents to remain in their individual flats until such time as a decision is made (usually by the fire service) to partly or fully evacuate the building, moving the residents to a place of safety. Evacuation strategies are detailed in the Fire Risk Management document.</i>
3.2	Does the written Fire Evacuation Plan/Action in the event of a fire cover both day and night time?	Yes
3.3	Have adequate numbers of fire wardens been appointed for both day and night time, attended relevant training?	Yes
3.4	Are all staff familiar with the Fire Evacuation Strategy?	Yes
3.5	Does the Service User Criteria (SUC) document reflect customer's individual evacuation arrangements?	Yes
3.6	Has staff training been provided on specific matters necessary for the implementation of individual PEEPs i.e. moving a person in an electric wheelchair	Yes
3.7	Is the current staffing level considered adequate to ensure the safe and prompt evacuation of relevant service users to a place of safety within a reasonable time?	Yes

3.8	Is the Fire Evacuation Strategy considered to be suitable and operationally viable taking into account the premises, the occupancy and staffing levels?	Yes
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Comments and hazards observed:

The buildings fire safety organisation operates a delayed evacuation policy for the residents in the event of a fire alarm on the premises. This requires each tenant to remain in their individual flat units until such time as the decision is made to partly or fully evacuate the building moving tenants to a place of safety. The requirement for the delayed evacuation procedure is set out in the Housing & Care 21 Fire Safety Policy Document which is kept up to date by the Court Manager.

The evacuation policy should only operate in a single block at a time and only in the block where the fire alarm has originated; there is not a requirement to evacuate further blocks at any one time for a fire activation in a single block.

There are concerns that the escape from the Lounge leads to a raised patio from which disabled residents cannot get down the steps and away from the building.

4. DETAILS OF FIRE LOSS		
Date	Location	Details
		None recorded

5.	FIRE HAZARDS – ELIMINATION & CONTROL	YES / NO
5.1	Are reasonable measures taken to prevent fires of an electrical origin? Specifically:	Yes
5.1.1	• Fixed installations periodically inspected and tested? (last inspection date)	8/12/16
5.1.2	• Portable appliance testing carried out? (last inspection date)	8/12/16
5.1.3	• Suitable policy regarding the use of personal electrical appliances?	Yes
5.1.4	• Suitable limitation in the use of trailing leads and adapters?	Yes
Comments and hazards observed: Electrical testing has increase to Bi Annual due Dec 2018		
5.2	Are reasonable measures taken to prevent fire as a result of smoking? Specifically:	
5.2.1	• Is smoking prohibited in the building?	Yes
5.2.2	• Is smoking prohibited in appropriate areas?	Yes
5.2.3	• Are there suitable arrangements for those who wish to smoke?	no
5.2.4	• Is there any evidence of breaches to the smoking policy?	Yes

Comments and hazards observed:

Smoking should not be permitted within any of the buildings common areas or public rooms. Smoking is **not** permitted within any of the common or public areas of the building, but is permitted within individual flats.

There are cigarette burns to the entrance lobby carpeting, confirming that a number of residents are smoking within the building itself.

The Court has had a new CCTV system with additional cameras included to increase the coverage around the Court.

There is not external smoke shelter for the Court, and the Main entrance is in a very exposed location, and distracts residents from stepping out of the court to smoke

There are burn marks on the carpet around the entrance doorway which suggests that some residents or visitors to the Court are smoking within the entrance foyer to the Court.

The Court Manager has made numerous attempts to have this practice stopped but the residents that are doing this have been verbally abusive towards her and it now requires action from Senior Management.

Meetings have been held with Gateshead Care Services to look at the possibility of relocating the 2 residents but due to their physical & mental needs they are deemed as being unsuitable for re-location.

H & C 21 are to review the use of a non-combustible floor covering within the entrance lobby to reduce the risk

The comments above in italics remain the same

5.3	Does the basic security against arson by outsiders appear reasonable?	Yes
5.3.1	<ul style="list-style-type: none"> Is there an absence of unnecessary fire loading in close proximity to the building or available for ignition by others? 	Yes

Comments and hazards observed:

Cigarette bin for staff relocated away from Bin store entrance

5.4	Is the use of portable heaters avoided as far as possible?	Yes
5.4.1	If portable heaters are used: <ul style="list-style-type: none"> is the use of the more hazardous type (eg. radiant bar fires or LPG appliances) avoided? are suitable measures taken to minimise the hazard of ignition of combustible materials? 	Yes Yes
5.4.2	Are fixed heating installations subjected to regular maintenance?	Yes

Comments and hazards observed:

All heating, hot water installations and domestic cooking equipment are checked and serviced on an annual basis to ensure that the equipment is fully serviceable and safe. The GF area is heated from a small plant room which is only accessible off an external entrance and does not open directly into the Court

5.5	Are reasonable measures taken to prevent fires as a result of cooking? Specifically:	Yes
	<ul style="list-style-type: none"> filters changed and ductwork cleaned regularly? suitable fire extinguishing appliances available? 	Yes Yes

Comments and hazards observed:

Cooking does take place in each of the private flat units in domestic kitchens.

The restaurant is served by a full commercial kitchen with fan hood. The fan hood and accessible ductwork is regularly inspected and cleaned by catering staff, inaccessible parts are cleaned on annual basis under contract.

There is a small domestic kitchen off the residents lounge. No cooking takes place in this area.

Cooking also takes place within each of the private flat units in domestic kitchens.

The firefighting equipment is adequate for these locations.

5.6	Does the building have a lightning protection system?	Yes
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Comments and hazards observed:
The lightning protection system is inspected every 11 months by a competent contractor

5.7	Other significant ignition sources that require consideration eg. oxygen/mobility scooters	Yes
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Comments and hazards observed:
The mobility Scooter Store is located of the main entrance foyer, with an electrically operated door. Charging is permitted within the scooter store.
There were no residents on Court that had any dependency on Oxygen at the time of the FRA see attached SUC sheet

5.8	Is the standard of housekeeping adequate? Specifically:	Yes
5.8.1	<ul style="list-style-type: none"> • combustible materials appear to be separated from ignition sources? • avoidance of unnecessary accumulation of combustible materials or waste? • appropriate storage of hazardous materials? • avoidance of inappropriate storage of combustible materials? 	Yes Yes Yes Yes
5.8.2	Has the Court Manager completed the routine in-house inspections of fire safety precautions and is this evidenced in the Fire Risk Management folder (see 15.1)?	Yes

Comments and hazards observed:

5.9	Is there satisfactory control over works carried out in the building by outside contractors (including 'hot work' permits?	Yes
5.9.1	Are fire safety conditions imposed on outside contractors?	Yes

Comments and hazards observed:
Housing and Care 21 contractors must have accreditation with a recognised Health & Safety body to ensure competency.

6.	FIRE PROTECTION MEASURES
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6.1	Is it considered that the building is provided with reasonable means of escape in case of fire? Specifically:	
6.1.1	Adequate provision of exits?	Yes
6.1.2	Exits easily and immediately openable where necessary?	Yes
6.1.3	Fire exits open in the direction of escape where necessary?	Yes
6.1.4	Avoidance of sliding or revolving doors as fire exits where necessary?	Yes
6.1.5	Suitable protection to escape routes?	Yes
6.1.6	Escape routes unobstructed?	Yes
6.1.7	Reasonable distance of travel where there is a single direction of travel?	Yes
6.1.8	Reasonable distance of travel where there are alternative means of escape?	Yes
6.2	Is it considered that the building is provided with reasonable arrangements for means of escape for disabled occupants? (see section 2)	No

Comments and hazards observed:

11. FIRE FIGHTING EQUIPMENT

11.1	Is the provision of portable fire extinguishers satisfy the Assured Advice from Cambridgeshire FRS?	Yes
11.2	Are hose reels provided in the premises? If 'yes' why are they provided and can they be removed?	No

Comments and hazards observed:

The Court has a dry riser at present, which will be utilised as part of planned sprinkler system

12. AUTOMATIC FIRE SYSTEMS i.e. suppression systems

12.1	What type of system is provided?	N/A
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Comments and hazards observed:

13. OTHER RELEVANT FIXED SYSTEMS

13.1	Type of system(s) provided? i.e. <ul style="list-style-type: none">Automatic/Manual/Mechanical or Natural Smoke Ventilation SystemsDry or wet risersFire-fighting lifts	Yes Yes No
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Comments and hazards observed:

14. ACCESS BY EMERGENCY SERVICES

14.1	Is adequate access available for Fire Service vehicles?	Yes
14.2	Are the locations of the fire assembly points away from the Fire Service vehicles access and parking areas?	Yes

Comments and hazards observed:

15. MANAGEMENT OF FIRE SAFETY

The court manager/Fire Safety Manager shall maintain the existing emergency fire evacuation plan and procedures which should clearly provide the details of how and who supervises the evacuation of the residents to another location if required, this should cover the entire 24 hour period.
The Court Fire Plan should be provided and located in the Fire Box. The plan should contain a Building Layout Plan indicating the locations of the main Gas Shut off valve for the building/main Electrical Isolation Switch/location of the Lift Motor Room and Service User Criteria document (including location of any gas Cylinders (oxygen) on the premises used by residents).

15.1	Is the Fire Risk Management folder in place and maintained? Specifically <ul style="list-style-type: none">Fire Safety Training	Yes Yes
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	• Fire Alarm System tests	Yes
	• Emergency Escape Lighting tests	Yes
	• Portable fire equipment	Yes
	• Fires and False Alarms	Yes
	• Fire Staff Evacuation 'Drills'	Yes
15.2	Is there a current Court Fire Plan in place?	Yes
15.3	Have all staff been provided with a basic level of fire safety training and instruction on induction?	Yes
15.4	Are all staff given periodic fire safety 'refresher training' at regular intervals?	Yes
15.5	Are staff 'fire drills' carried out at appropriate intervals?	Yes
15.6	Are third-party staff (i.e. carers/contractors) provided with appropriate instruction and training regarding fire safety management and evacuation arrangements?	Yes
15.7	Are the fire evacuation procedures clear to visitors etc.?	Yes
15.8	Are home fire safety checks by the local fire authority promoted within the court ?	yes
Comments and hazards observed: NOTE staff care is provide by Gateshead Council, and staff are not under the employee of H & C 21. Gateshead's staff work to there own Fire Safety procedures		

16.	TESTING AND MAINTENANCE	
16.1	Are the communal areas/workplace areas adequately maintained?	Yes
16.2	Are the following maintained and tested in accordance with the relevant standard:	Yes
	Emergency Lighting	Yes
	Fire Fighting Appliances	Yes
	Rising Main	Yes
	Sprinkler installation	N/A
16.3	Are routine checks of final fire exit doors and/or security fastenings undertaken?	Yes
16.4	Is the lightning protection system inspected annually and tested?	Yes
16.5	Is the smoke extraction system maintained and tested?	Yes
16.6	Other relevant inspections or tests: • •	
Comments and hazards observed:		

RISK LEVEL

NB: Although the purpose of this section is to place the fire risk in context, the approach to fire risk assessment is subjective and for guidance only. All hazards and deficiencies identified in this report should be addressed by implementing all recommendations contained in the Action Plan.

PROBABILITY/ fire hazard	Almost certain	5	10	15	20	25
	More likely than not	4	8	12	16	20
	Possible	3	6	9	12	15
	Less likely to happen	2	4	6	8	10
	Remote	1	2	3	4	5
SEVERITY/Potential consequences of fire		Minor injury or insignificant damage to property.	Injury, or slight damage to property	Serious injury, or limited damage to property	Serious injury or fatality. Critical damage to property	Multiple fatalities, catastrophic loss of business

Taking into account the fire safety measures, the nature of the building - it's use and occupants, fire safety protection and procedural arrangements observed at the time of this Fire Risk Assessment, it is considered that the risk level is: **Moderate**

Risk Level	Action	Tick
Slight harm	No action is required and no detailed records need be kept.	
Outbreak of fire unlikely to result in serious injury or death of any occupant (other than an occupant sleeping in a bedroom in which a fire occurs).	No major additional controls required. However, there may be a need for consideration of improvements that involve minor or limited cost.	
Moderate harm	Risk reduction measures should be implemented within a defined time period.	
Outbreak of fire could result in injury of one or more occupants, but it is unlikely to involve multiple fatalities.	Where moderate risk is associated with consequences that constitute extreme harm, further assessment may be required to establish more precisely the likelihood of harm as basis of determining the priority for improved control measures.	
Extreme harm	Considerable resources may have to be allocated to reduce the risk. If the building is unoccupied, it should not be occupied until the risk has been reduced.	
	If the building is occupied, urgent action should be taken. Building (or relevant area) should not be occupied until the risk is reduced.	

ACTION PLAN and significant findings

Court name:

Address:

It is considered that the following recommendations should be implemented in order to reduce fire risk to, or maintain it at the appropriate level.

Action	Description	Risk Level L/M/H	Assigned to: Person/Dept	Date for completion*
1	5.2.1 There are burn marks on the carpet around the entrance doorway which suggests that some residents or visitors to the Court are smoking within the entrance foyer to the Court. The Court Manager has made numerous attempts to have this practice stopped but the residents that are doing this have been verbally abusive towards her and it now requires action from Senior Management.	H	Housing Management	ASAP
2	6.2.1. The rear fire exit from communal lounge is via a paved platform served by steps (only means of getting to safety). A ramp suitable for wheelchairs should be provided to a designated point of safety. THIS REMAINS THE SAME.	M	Asset management	April 2018
3	7.1.1 & 7.2.1 Previous concerns over the compartmentation offered by the vertical service duct have been checked with a physical check of all duct doors for gaps and light penetration has been carried out by the inspection officer and all 22 doors provide a full smoke seal around the perimeter of the doors. Further work is required to fit intumescent seals around door hinge and lock positions will be carried out as part of the new sprinkler system planned for in 2018 The IT server fitted to FF service duct is to be relocated to adjacent office March 2018 Please see attached schedule of inspection for Internal doors	M	Asset Management	April 2018
4	7.1.1 & 7.2.1 Previous concerns over the compartmentation offered by the vertical service duct have been checked with a physical check of all duct doors for gaps and light penetration has been carried out by the inspection officer and all 22 doors provide a full smoke seal around the perimeter of the doors. Further work is required to fit intumescent seals around door hinge and lock positions will be carried out as part of the new sprinkler system planned for in 2018 The IT server fitted to FF service duct is to be relocated to adjacent office March 2018 Please see attached schedule of inspection for Internal doors	M	Asset Management	March 2018
5				
6				
7				
8				

Action	Description	Risk Level L/M/H	Assigned to: Person/Dept	Date for completion*
9				
10				

*Action Plan Timescales	
High Risks	Action should be undertaken immediately or as quickly as practically possible and within three months by the identified lead person/department.
Moderate Risks	Action should be undertaken as quickly as is practically possible, usually within twelve months by the lead person/department. Where moderate risks form part of the planned programme of fire compartmentation upgrade works, these will be completed in line with Housing & Care 21's agreed risk based planned works strategy*.
Low Risks	Low risks will continue to be reviewed and should be actioned when practically possible.
Planned Works Strategy	Housing & Care 21 has a risk based fire compartmentation strategy: High risk schemes (3 stories and over) will be prioritised over low rise schemes. Category 2 schemes will be prioritised over category 1 schemes. Older schemes will be prioritised over newer schemes. Housing & Care 21 believes this approach is pragmatic, concentrating on the level of risk whilst committing substantial resources to court improvements.

Housing and Care 21 Roof Compartment and Fire Alarm Strategy

Where roof compartmentation may not align with flat to flat compartmentation, Housing and Care 21 are undertaking its fire evacuation strategy, fire alarm configuration and other fire protection measures. This review should be completed by April 2017 and any identified related risks will have appropriate actions scheduled thereafter.

Schedule of Doors inspection 8.2.18

Code BMS = Cold smoke Brush Seals making seal
BNMS = Cold smoke brushes not making seal

Floor	Location	Gap	Condition
11 th	Stairs	4-6mm	BMS
	Bin chute Inner	5mm	BNMS Replace brush strip and adjust as required
	Bin chute outer	4-6mm	BMS
10 th	Stairs	6mm	BMS
	Bin chute Inner	4-6mm	BNMS Replace brush strip and adjust as required
	Bin chute outer	2-8mm	BMS
9 th	Stairs	4mm	BMS
	Bin chute Inner	3mm	BNMS Replace brush strip and adjust as required
	Bin chute outer	4-6mm	BMS
8 th	Stairs	6-10mm	BMS
	Bin chute Inner	3-5mm	BNMS Replace brush strip and adjust as required
	Bin chute outer	3-8mm	BMS
7 th	Stairs	2 -10mm T-B	BMS
	Bin chute Inner	6-8mm	BNMS Replace brush strip and adjust as required
	Bin chute outer	6mm	BMS
6 th	Stairs	6mm	BMS
	Bin chute Inner	3-5mm	BNMS Replace brush strip and adjust as required
	Bin chute outer	6mm	BMS

5 th	Stairs	6mm	BMS
	Bin chute Inner	4mm	BMS
	Bin chute outer	5mm	BMS
4 th	Stairs	6mm	BMS
	Bin chute Inner	4mm	BNMS Replace brush strip and adjust as required
	Bin chute outer	6mm	BMS
3 rd	Stairs	6mm	BMS
	Bin chute Inner	4-6mm	BNMS Replace brush strip and adjust as required
	Bin chute outer	3-5mm	BMS
2 nd	Stairs	3-10mm	BMS over top half of door pack out & adjust hinges to bottom
	Bin chute Inner	3-8mm	BNMS over bottom 2/3rds
	Bin chute outer	4-10mm	BMS
1 st	Stairs	6mm	BMS
	Bin chute Inner	3mm	BNMS Replace brush strip and adjust as required
	Bin chute outer	6-10mm	BNMS Replace brush strip and adjust as required
GF	Stairs	4-6mm	BMS