

**FIRE RISK ASSESSMENT
PARK AVENUE CLOSE, CROOK
COUNTY DURHAM,
DL15 9JR**

DECEMBER 2024



STORM TEMPEST
PROPERTY CONSULTANCY

Reference: 4560-09-24-PA

Prepared by:

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Version: 2

Prepared for:

Believe Housing
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CONTENTS

		Page(s)
1	Introduction	2
2	The Premises	6
3	Fire Hazards	10
4	Means of Escape	13
5	Compartmentation	14
6	Fire Alarm & Detection System	16
7	Emergency Lighting	17
8	Fire Safety Signs & Notices	18
9	Management Procedures	19
 Appendix		
1	Fire Risk Assessment	
2	Action Plan	



1.0 INTRODUCTION

Unique Identifier:	9157941.
Client UPRN:	2PARA1.
The Client:	Believe Housing.
Instruction:	This fire risk assessment of the building was undertaken in accordance with an instruction received from Emma Jorgenson, Compliance Manager, Believe Housing.
Responsible Person:	Alan Smith, Chief Executive, Believe Housing.
Other Responsible Persons:	Emma Jorgenson, Compliance Manager, Believe Housing.
Competent Person Appointed by Responsible Person:	Storm Tempest Ltd., 3 Apollo Court, Koppers Way, Monkton Business Park South, Hebburn, Tyne and Wear. NE31 2ES.
The Premises / Extent of Site:	Park Avenue Close, Crook, County Durham, DL15 9JR.
Person Responsible for Fire Safety on Premises:	Emma Jorgenson, Compliance Manager, Believe Housing.
Person(s) Consulted:	Chris Turnbull (visit was unaccompanied)
Fire Risk Assessor:	Paul Anderson, BEng (Hons), MIFireE, FRACS.
Validator:	David Stilling BSc (Hons), MCIOB, CMaPS, AssocRICS, FSIDip, AIFireE, MIFSM, FDIS, FRACS.
Date of Validation:	18 th December 2024.



Date of Assessment: 17th December 2024.

Date of Previous Fire Risk Assessment: 5th January 2024. Carried out by Pennington Choices Limited.

Is There an Alterations Notice in Force: No

Scope and Purpose of the Fire Risk Assessment: The Regulatory Reform (Fire Safety) Order 2005 [RR(FS)O] applies to all non-domestic premises, including any voluntary sector and self-employed people with premises separate from their homes.

A fire risk assessment is an organised and methodical look at your premises. The fire risk assessment procedure identifies the activities carried out at the premises and assesses the likelihood of a fire starting. The aim of a fire risk assessment is to:

- Identify the hazards.
- Reduce the risk of those hazards causing harm to as low as reasonably practicable.
- Decide what physical fire precautions and management policies are necessary to ensure the safety of people in your premises if a fire does start.

The fire risk assessment was carried out in accordance with the Department for Communities and Local Government (DCLG) 'sleeping accommodation' guidance document in addition to the NFCC National Fire Chiefs Council Fire Safety in Specialised Housing guide.

This building has been audited to highlight to the Client, any non-compliant issues with regard to relevant aspects of UK fire safety legislation and best practice. The principal documents relevant to this building being:

- The Building Regulations 2010 Approved Document B – Fire Safety 2019 edition incorporating 2020 and 2022 amendments – for use in England,
- BS9999 2017 Code of practice for fire safety in the design, management and use of buildings
- BS9991 2015 Fire safety in the design, management and use of residential buildings – Code of practice



- NFCC National Fire Chiefs Council Fire Safety in Specialised Housing guide.
- Local Government Association - Fire safety in purpose-built blocks of flats (hereafter referred to as the LGA Guide)
- HM government Fire Safety Risk Assessment – Sleeping Accommodation
- LACORS – Housing – Fire Safety – Guidance on fire safety provisions for certain types of existing housing
- Fire Safety Act 2021
- Fire Safety (England) Regulations 2022
- The Building Safety Act 2022: Section 156
- Housing Act 20024

This report is intended to assist you in compliance with Article 9 of the Regulatory Reform (Fire Safety) Order 2005 (the 'Fire Safety Order'), which requires that a risk assessment be carried out.

Limitations of the
Fire Risk
Assessment:

The RR(FS)O places a burden of responsibility firmly on the head of a 'responsible person' with regard to the fire safety of the occupants of the premises to which they have been assigned. The responsible person is required to co-ordinate all fire safety related issues including the carrying out of a fire risk assessment and production of associated documentation. The responsible person may nominate a 'competent person' to assist in the implementation of any measures deemed necessary to ensure the fire safety of the occupants of the premises.

There are many factors that impact upon what may constitute adequate measures to assess the fire safety of the occupants. Storm Tempest Ltd are not the responsible person and are unable to determine, on behalf of the organisation, the steps it should or must take to comply with its duties under the RR(FS)O. The fire risk assessment will cover all of the areas within the property. We will also comment upon the areas surrounding the building.

This report is for the use of the party to whom it is addressed and should be used within the context of instruction under which it has been prepared.

Fire Risk
Assessment Type
Undertaken:

Type 3



Recommended Review Period:	The RR(FS)O does not stipulate the required review period for a particular building. It should also be borne in mind that this FRA may cease to be valid when a material alteration takes place, when a significant change occurs in the “given” factors that were taken into account when the FRA was carried out or a significant change in fire precautions occurs. We recommend a review of this type of building annually.
Recommended Renewal Period:	Not exceeding four years from the date of this fire risk assessment.
Areas / Locations Not Accessed / Inspected & Further Action Required:	We were unable to access the boiler room and the scooter store with the key provided. We recommend that the client accesses this area to inspect the fire safety measures within.
Revisit Undertaken:	No
Previous Recommendations:	The client has supplied Storm Tempest with the previous Fire Risk Assessment for these premises. Should there be any recommendations previously identified which are still to be addressed, we will highlight these in Appendix 2.
Prioritisation of Recommendations:	<p>To assist in the development of a strategy and action plan for addressing recommendations in the fire risk assessment report, a priority rating is attached to each recommendation. The following is an explanation of each rating:</p> <p>High Priority: Immediate action required to prevent risk to the health and safety of relevant persons.</p> <p>Medium Priority: Planned action to improve fire safety within the premises.</p> <p>Low Priority: Features that comply with current regulations but which the responsible person may consider upgrading.</p>



2.0 THE PREMISES

2.1	Building Use:	Residential sleeping accommodation
2.2	Occupancy Profile:	Sheltered accommodation
2.3	Building Location:	Park Avenue Close, Crook, County Durham, DL15 9JR.
2.4	Property Designation:	Detached
2.5	Approx. Maximum No. of Occupants at Any One Time:	92, based on two occupiers per apartment.
2.6	Approx. Maximum Nr. of Employees at Any One Time:	No employees on site at the time of the assessment.
2.7	Staff / Occupant Ratio During Day:	NA
2.8	Staff / Occupant Ratio During Night:	NA
2.9	Number, Description & Location of any Non-Ambulant Occupants:	We are not aware, nor has the client made us aware of any non-ambulant occupiers.
2.10	Any Other Comments:	NA

Occupants Especially at Risk From Fire

2.11	Sleeping Occupants:	Yes
2.12	Occupants in Remote Areas:	Occasional contractors
2.13	Location of Any Non-Ambulant Occupants:	Unknown



2.14	Young Persons:	Potential for young persons to visit the premises.	
2.15	No of Flats / Bedrooms:	46	
2.16	Year Built:	2012.	
2.17	No of Storeys:	4	
2.18	Approximate Floor Area of Each Storey (m ²):	Basement	0
		Lower Ground	0
		Ground	2600
		First	2600
		Second	2070
		Third	0
		Fourth	0
2.19	No. of Floors at Ground Level & Above:	3	
2.20	No. of Floors Entirely Below Ground Level:	None	
2.21	Floors on which Car Parking is Provided:	None	
2.22	Any Other Comments:	Park Avenue Close is sheltered housing accommodation for the over 60s, built in 2012. The premises consist of a three-storey building, with an approximate height of 8m, running north to south, with a two story east to west elevation accessed from a central location off the three-storey section.	

Construction Details

2.23	Construction:	Timber frame construction.
2.24	Roof Covering:	Weatherproof membrane, exact material unknown.
2.25	Roof Structure:	Sloping
2.26	Roofline Material:	NA



2.27	Rainwater Goods:	Plastic/Upvc.
2.28	External Walls:	Assumed brick and block.
2.29	External Wall Finishes:	Combination of brick and cementitious render.
2.30	Are There any Existing Spandrel Panels:	<p>Some sections of the building façade are fitted with spandrel panels/infill panels. Such panels can be provided for both functional and aesthetic purposes. Schedule 1 Section B4(1) of the Building Regulations 2010 requires that: "The external walls of the building shall adequately resist the spread of fire over the walls and from one building to another, having regard to the height, use and position of the building". It is not readily apparent what materials are present.</p> <p>The client should check the materials used in the spandrel panels to ensure they do not present a risk of fire spread over the wall.</p>
2.31	Is a fire risk appraisal and assessment of Cladding / External Wall Construction Required:	The building is such that the risk of fire spread up the external wall is sufficiently low that a FRAEW is not considered necessary.
2.32	Is Cladding Type Known to Pose a Major Hazard in The Event of a Fire:	NA
2.33	Are balconies constructed from combustible materials present:	NA
2.34	Windows:	UPVC double glazed
2.35	External Doors:	Metal framed with glazed panels.
2.36	Internal Walls/Finish:	Combination of solid brick with plaster finish and timber studwork overlaid with plaster board. Painted finish.



2.37	Ground Floor:	Concrete slab.
2.38	Upper Floors:	Timber.
2.39	Heating System:	Underfloor heating throughout.
2.40	No of Staircases:	Four, including main circulation staircase.
2.41	Passenger Lifts:	Two.
2.42	Fire Fighting Lifts:	None.
2.43	No of Final Exits:	Nine, including egress from the kitchen, dining room, lounge, main entrance and access to the boiler room.
2.44	Car Parking Facilities:	Carpark to front of the building.
2.45	Access for Fire & Rescue:	Fire service access to the front of the building and is in line with the requirements of Approved Document B. We could not identify the location of the nearest fire hydrant.
2.46	Does Building Have Lightning Protection:	Yes, we noted lightning tapes to the sides of the building.
2.47	Any Other Comments:	None



3.0 FIRE HAZARDS

Sources of Fuel

The sources of fuel within the premises were assessed as follows:

- | | | |
|-----|---|---|
| 3.1 | Electrical PVC insulation Throughout: | Yes. |
| 3.2 | Timber construction materials (in particular, within the roof space): | Unknown but assumed. |
| 3.3 | Typical Household Items Within Flats: | Yes. |
| 3.4 | Refuse Stored Within the Wheelie Bins: | Yes. Bins are kept in refuse rooms provided with automatic fire detection and 60 minutes fire rated walls with FD30 s doors. |
| 3.5 | Gas Boilers / Supply: | Underfloor heating. |
| 3.6 | Escape Route: | Carpeted throughout. Although there was no evidence during the inspection, the existing carpet found throughout communal areas was considered to be acceptable and in good condition. Walls and ceilings were noted to be painted with presumed water-based emulsion. We noted soft furnishings (chairs) located on the means of escape. We inspected a sample of the chairs and noted fire safety labels attached. |
| 3.7 | Dwellings: | Typical fuels associated with domestic living. |
| 3.8 | Sources of Oxygen: | Natural airflow through doors and windows etc. There were no chemicals with oxidising agents noted within the property. We are not aware of the use of medical oxygen within the building. |

Having regard to the occupancy profile, it is to be expected that at some time there will be a requirement for medical oxygen. When oxygen is in use, the client should advise the user to keep the oxygen device at least 3 metres away from any appliances that use an open flame and that they keep the device at least 1.5 metres away from other electrical appliances, such as television, hair dryer or electric



heater. Not to smoke or let anyone else smoke near them when they are using the device, do not use flammable liquids, such as cleaning fluids, paint thinner or aerosols when using the device and do not use oil-based emollients, such as Vaseline, when using the device, and that appropriate signage is displayed prominently, to advise emergency service of the use and location of the oxygen.

3.9 Any Other Comments: Possible roof covering.

Sources of Ignition

The sources of ignition within the premises were assessed as follows:

3.10	Fixed Electrical Wiring Installation – Communal Parts:	Yes
3.11	Fixed Electrical Wiring Installation – Dwellings:	Yes
3.12	Heating Systems:	Underfloor heating.
3.13	Portable Heaters:	None noted within the communal area.
3.14	Portable Appliances:	Within the communal kitchen.
3.15	Arson:	The risk of an arson attack is considered low. The entrance door was found to be locked at the time of the assessment.
3.16	Hot Works:	There were no hot works taking place at the time of the assessment. The client should ensure that there are adequate procedures in place to control the risk associated with hot works.
3.17	Smoking:	Smoking is prohibited within the premises other than with the individual flats. No evidence of illicit smoking noted.
3.18	Cooking:	Within apartments.
3.19	Housekeeping:	We did note a wheelchair being stored in the corridor adjacent to apartment 33.



In order to ensure that the build-up of materials does not continue to the point that the escape route is impeded/delayed, we recommend the item identified is removed.

- | | | |
|------|---|--|
| 3.20 | Typical Household Items
Within flats: | Yes |
| 3.21 | Other Significant Sources
/ Process Hazards: | None |
| 3.22 | Any Other Comments: | <p>With regard to the storage of items in the means of escape the client may choose to adopt a managed use approach. This will require the following steps to be taken by the client:</p> <ul style="list-style-type: none">➤ carry out a specific risk assessment taking into account the particular circumstances in the building➤ consider whether residents are disposed towards keeping 'rules', and avoid 'managed use' where this is not the case➤ ensure that there are clearly defined 'do's and don'ts' that residents can easily follow➤ only apply it where there is a suitable standard of fire protection – particular cares should be taken when applying it to situations such as single stairway buildings and 'dead end' corridors➤ limit it to buildings in which the main elements of structure are made of concrete, brick and other non-combustible materials. |



4.0 MEANS OF ESCAPE

- 4.1 The building and means of escape provision have been designed on the assumption that the stairwells, corridors, and lobbies remain sterile.
- 4.2 Internally: The vertical means of escape consists of four staircases that discharge to open air on the ground floor. An accommodation stair, this staircase would be the normal evacuation route, and two escape stairs situated at the east side of the building serve all upper floors. An escape stair, situated to the west of the building serves the ground and first floor. Horizontal means of escape is via protected corridors into the staircases on the upper floors and via exits directly to open air on the ground floor. All flats discharge directly into the corridors.
- Emergency fire exits are provided at the base of each of the three escape staircases, within the lounge, dining room, kitchen and circulation corridor opposite apartment 18.
- 4.3 Externally: All exits, with the exception of the door leading to the plant room access to a level base from where there is access to a place of ultimate safety.
- 4.4 External Escape Stairs: N/A
- 4.5 Disabled Person Egress: It is the Responsible Person's duty to ensure suitable provision is made for disabled persons within the property to ensure that they can escape in the event of a fire.
- 4.6 Any Other Comments: We noted, within the fire safety document box, information regarding occupiers that will require assistance to evacuate. A Person-Centred Fire Risk Assessment may be appropriate if a tenant has been identified as especially vulnerable and at risk from fire hazards in their property. Where a vulnerable person has been identified as requiring assistance, the client should work with the person or their representative to help reduce the risk from fire and where necessary involve other agencies. The aim of which is to ensure that any additional fire safety measures required are in place.



5.0 COMPARTMENTATION

Fire Doors

5.1 The Regulatory Reform (Fire Safety) Order 2005 / Fire Safety Act 2021 makes it a legal requirement to ensure that fire resisting doors and escape doors are correctly installed and adequately maintained in order for them to be fit for purpose. BS9999 states that all fire doors should be inspected every six months. However, depending on the type of building the “responsible person” is required to influence the frequency of fire door inspections subject to their use. The responsible person should ensure an adequate routine for inspections and maintenance is in place and should be undertaken by a competent person.

5.2 Dwelling Doors: We accessed apartments 12, 30, 34, 52 and 53 and noted that the doors are timber, fitted with combined intumescent and smoke seals to the frame rebate, 1.5 pair of fire rated hinges, face mounted low energy swing free door closers, fitted to the external face of the door, letter box aperture fitted with intumescent liners, door viewer, lever handle with thumbturn. All apartment entrance doors were inspected externally, and no damage was noted .

5.3 Communal Doors: Communal doors are timber fire doors held open by magnetic hold open devices linked to the fire alarm. No damage was noted to the doors.

It could not be confirmed that fire door information to the effect that (a) fire doors should be kept shut when not in use; (b) residents or their guests should not tamper with the self-closing devices; and c) residents should report any faults or damages with doors immediately to the responsible person is provided to residents. This is required to be provided to new residents when they first move in and reissued annually to all residents. Management should confirm that it provides information about fire doors, as required by the Fire Safety (England) Regulations 2022, to new residents when they move in and reissue this to all residents annually. The fire door information provided should be to the effect that (a) fire doors should be kept shut when not in use; (b) residents or their guests should not tamper with the self-closing devices; and (c) residents should report any faults or damages with doors immediately to the responsible person.



Ceilings / Walls / Floors

- 5.4 Ceilings: No breaches noted.
- Surface linings of walls and ceilings on any circulation spaces should meet the classifications B-s3, d2 as identified within approved document B of the building Regulations 2019. The internal walls are finished with an assumed water based finish.
- 5.5 Walls: No breaches noted.
- 5.6 Floors: No breaches noted.
- 5.7 Any Other Comments: We investigated the fire resisting construction within the means of escape up to the underside of the ceiling and above the ceiling in the following areas:
- Above the door to apartment 49 and noted evidence of fire stopping,
 - Above the ceiling in the refuse room opposite apartment 5 and noted evidence of fire stopping,
 - Within the riser in the drying room and noted evidence of fire stopping,
 - Above the cross-corridor door leading to apartments 40-44 and noted evidence of fire stopping,
 - Above the suspended ceiling the refuse room opposite apartment 23 and noted evidence of fire stopping
 - Above the suspended ceiling to the toilets on the ground floor and noted evidence of fire stopping.



6.0 FIRE ALARM AND DETECTION SYSTEM

- | | | |
|-----|-----------------------------|---|
| 6.1 | System Type - Common Parts: | L2 with manual call points. |
| 6.2 | System Type – Dwellings: | Within the apartments accessed we noted LD2. |
| 6.3 | Panel Location: | Entrance lobby. Multi-zone addressable panel. |
| 6.4 | Zone Plan: | Adjacent to panel. |
| 6.5 | Faults: | None. |
| 6.6 | Any Other Comments: | None. |



7.0 EMERGENCY LIGHTING

- 7.1 System Type: 3 hour, self-contained, non-maintained and maintained.
- 7.2 Internal Areas: Throughout means of escape
- 7.3 External Areas: Above final exit doors.
- 7.4 Faults: None.
- 7.5 Any Other Comments: None.



8.0 FIRE SAFETY SIGNS & NOTICES

8.1 All signage / instructions that are provided within the premises should be in a form that persons at risk can reasonably be expected to understand. Consideration should be given to those who have disabilities or conditions that may give rise to misunderstanding of the signage, and where required, be multi-lingual.

8.2 Fire Action Notices: Fire action notices are installed within the means of escape

8.3 Directional Signage: See 8.9

8.4 Final Exits: See 8.9

8.5 Fire Door Signage: Fire doors are fitted with adequate signage

8.6 Smoking: No smoking signage installed within means of escape

8.7 External Exits: See 8.9

8.8 Assembly Point: Identified within car park.

8.9 Any Other Comments: We noted several issues with the fire safety signage throughout the building. We are aware that a fire safety signage survey was carried out on 3rd January 2024. The client should take account of the report and undertake all recommendations.



9.0 MANAGEMENT PROCEDURES

- | | | |
|-----|--|--|
| 9.1 | Fire Loss Experience: | We have not been advised of any fires or near misses at this premises. |
| 9.2 | Do Permit to Work Systems Exist: | There was no evidence of any permit to works in the building at the time of the assessment. A permit to work is appropriate in situations of high hazard/risk. The client should ensure that where necessary, there is a formal procedure confirming that a safe system of work is being followed. |
| 9.3 | Are Routine in-house Inspections of Fire Precautions Undertaken: | No evidence available.

There was no evidence available at the time of the assessment to show that routine in-house inspections of fire precautions, including fire doors, are undertaken. The fire protection measures including, fire doors need to be maintained in good condition and efficient working order. It is therefore necessary, to have in place arrangements for routine inspection, testing and maintenance, a typical check list is provided in the Home Office guide "A guide to making your small block of flats safe from fire". |
| 9.4 | Is There a Suitably Located Premises Information Box Provided: | Not required |
| 9.5 | Are There Procedures in Place To Keep The Premises Information Box Up To Date: | NA |
| 9.6 | Any Other Comments: | None |

Evacuation

- | | | |
|-----|--|--|
| 9.7 | Current Policy: | Stay put within apartments, full evacuation within the communal parts. |
| 9.8 | Is Current Policy Considered Suitable: | Yes |



Other than the displayed Fire Action notices within the premises, there is no other evidence available regarding communication with the occupants. The Fire Safety (England) Regulations 2022 became law on 23rd January 2023. The regulations require the responsible person to provide all residents, regardless of the height of the building, with 'fire safety instructions' as well as providing these to new residents as soon as reasonably practicable after they move into the premises. The fire safety instructions that must be disseminated are extremely basic, relating to the evacuation strategy (i.e. stay put or simultaneous evacuation), how to report a fire incident. Additionally, specific information must be provided to all residents regarding the safe use of fire doors. It could not be confirmed that residents are provided with a copy of the fire safety instruction notice for the premises detailing the evacuation strategy in place, how to report a fire, and what action to take once a fire has occurred. This is required to be issued to new residents when they first move in and be reissued annually to all residents. Management should confirm that residents are provided with a copy of the fire safety instruction notice for the premises detailing the evacuation strategy in place, how to report a fire, and what action to take once a fire has occurred. This is required to be issued to new residents when they first move in and be reissued annually to all residents.

9.9	Personal Emergency Evacuation Plans:	NA
9.10	Occupant Communication:	Fire Action notices on display within the means of escape
9.11	Any Other Comments:	None

Training

9.12	Staff:	We were unable to view any staff training records at the time of the visit. The client should ensure that adequate training is provided to all staff commensurate with their role. For the majority of staff where no significant risks have been identified and there are limited numbers of staff, information and instruction may simply involve an explanation of the fire procedures and how they are applied. This should include showing staff the fire-protection arrangements, including the
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designated escape routes, the location and operation of the fire-warning system and any other fire related equipment provided, such as fire extinguishers, and how to care for and evacuate vulnerable persons.

- 9.13 Fire Drills: Not required. While fire drills are used in many commercial buildings to reinforce fire awareness training, it is neither practical nor necessary to carry them out in sheltered and extra care housing, even if there is a communal fire alarm system. However, tenants in sheltered housing may benefit from being invited to discuss a pre-planned scenario.
- 9.14 Any Other Comments: None

Equipment / Equipment Maintenance

- 9.15 Fire Alarm & Detection System: The last recorded inspection of the fire alarm system was on the 05/04/2024. The last recorded test of the fire alarm system was on the 11/12/2024.
- The client should ensure that the fire alarm system is serviced at 6 monthly intervals in accordance with BS 5839.
- 9.16 Emergency Lighting System: The emergency lighting is required to be tested and maintained in accordance with BS5266 which requires monthly short duration tests and annual full discharge tests which should be detailed in a Fire Logbook.
- There were no records on site to confirm that the emergency lighting system is tested and serviced in accordance with BS5266. The client should ensure that the emergency lighting system is subject to testing and servicing in accordance with BS5266 and a record of the test kept.
- 9.17 Passenger Lifts: No records of servicing of the lifts available.
- 9.18 Fire Extinguishers: Serviced April 2024.
- 9.19 Fire Blankets: NA
- 9.20 Hose Reels: NA



- 9.21 Fire Fighting Lifts: None provided
- 9.22 Heating System: There was no evidence available to confirm that the gas supply and appliances within the building are subject to appropriate servicing and testing by a person who is, or employed by, a member of a class of persons approved by the HSE under regulation 3 of the Gas Safety (Installation and Use) Regulations 1998 as amended, e.g. a Gas Safe registered gas engineer.
- The client should examine their maintenance records to ensure up to date certification of gas safety inspections for equipment and supply. If this cannot be confirmed the client should arrange to have the gas supply and equipment serviced as a matter of urgency. Failure to do so could result in the increased risk from a fire due to faulty equipment.
- 9.23 Laundry Equipment: A label attached to the dryers show that they were last serviced on the 24/05/2022 and were due a service on the 24/5/2023.
- Whilst the laundry equipment is not of the commercial type it is expected that it will be used more frequently than if it were in a domestic environment so, in addition to the user checks, we recommend the laundry equipment is subject regular servicing by a competent person. Failure to do so could result in the increased risk from a fire in the dryer.
- 9.24 Evacuation Alert Systems: None provided
- 9.25 Automatic Exit Doors: None provided
- 9.26 Electric Hoists: Within the assisted bathroom. There was no record that the lifting equipment is subject to appropriate servicing. The client should ensure that the lifting equipment is subject to appropriate servicing.
- 9.27 Fixed Electrical Wiring Installation: All electrical installations are required to be tested regularly to the standards defined by the IET Wiring Regulations (BS 7671). The mains electrical supply and distribution installation and wiring (common areas and rented dwellings) should be tested at least every five years by a registered NICEIC contractor to satisfy compliance with the



requirements of the Electricity at Work Regulations 1989 in addition to the IET Wiring Regulations BS7671:2018 18th edition. Labels attached to the electrical distribution panel confirmed the date of the last test was 19/11/2024.

- 9.28 Portable Appliances: Evidence of portable appliance testing in the kitchen dated August 2024.
- 9.29 Lightning Protection System: We are unable to confirm when the lightning protection system was last subject to servicing.
- We recommend the lightning protection system is subject to regular testing in accordance with "BS EN 62305-1:2006 Protection against Lightning: General Principles". And records are retained on site for inspection by relevant persons.
- 9.30 Any Other Comments: We noted a dry riser with outlets on all upper floors and automatically opening smoke vents to the ends of corridors and within top floor of each protected stair.
- There were no records available confirming the testing and servicing of the dry riser and automatically opening vents.
- The client should ensure that the dry riser and automatically opening vents are tested and serviced in accordance with BS 9990 and BS 7346 respectively.

Logbook / Records

- 9.31 Is a Fire Logbook Available on Site: Yes. The keeping of accurate and time-chronicled records is essential to demonstrate that all reasonable precautions and all due diligence has been taken to comply with the requirements of fire safety law.
- 9.32 Is Logbook Fully Complete & Legible: No. There was no record of the testing and servicing of the emergency lighting.
- 9.33 Any Other Comments: None



Security

9.34 CCTV: Within the entrance lobby.

9.35 Access Control: Door locked

9.36 Any Other Comments: None

Cooperation & Communication

9.37 Other Premises Occupiers: NA

9.38 Occupiers in Adjacent
Premises: NA

9.39 Emergency Services: County Durham & Darlington Fire & Rescue Service. The nearest fire station is located approximately 0.5 miles distance at Peases Way, Crook.

9.40 Any Other Comments: None



Fire Risk Assessor Paul Anderson, BEng (Hons), MIFireE, FRACS, Dip FD.
Signed

.....
On Behalf of Storm Tempest Ltd.

Validator Dave Stilling BSc (Hons) MCIOB, AssocRICS, CMaPS, FSIDip, AIFireE, DipFD, FRACS, MIFSM.
Signed

.....
On Behalf of Storm Tempest Ltd.

Date 18th December 2024.

APPENDIX 1
FIRE RISK ASSESSMENT





FIRE RISK ASSESSMENT

Likelihood of fire occurring	Potential consequences of fire		
	Slight Harm	Moderate harm	Extreme harm
Low	Trivial	Tolerable	Moderate
Medium	Tolerable	Moderate	Substantial
High	Moderate	Substantial	Intolerable

Taking into account the fire prevention measures observed at the time of this risk assessment, it is considered that the hazard from fire (likelihood of fire) at these premises is:

Low		Medium	x	High	
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Low	Unusually low likelihood of fire as a result of negligible potential sources of ignition.
Medium	Normal fire hazards (e.g. potential ignition sources) for this type of occupancy, with fire hazards generally subject to appropriate controls (other than minor shortcomings).
High	Lack of adequate controls applied to one or more significant fire hazards, such as to result in significant increase in likelihood of fire.

Taking into account the nature of the premises and the occupants, as well as the fire protection and procedural arrangements observed at the time of this fire risk assessment, it is considered that the consequences for life safety in the event of fire would be:

Slight Harm		Moderate Harm	x	Extreme Harm	
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In this context, a definition of the above terms is as follows:

Slight Harm	Outbreak of fire unlikely to result in serious injury or death of any occupant (other than an occupant sleeping in a room in which a fire occurs).
Moderate Harm	Outbreak of fire could foreseeably result in injury (including serious injury) of one or more occupants, but it is unlikely to involve multiple fatalities.
Extreme Harm	Significant potential for serious injury or death of one or more occupants.

Accordingly, it is considered that the risk to life from fire at these premises is:

Moderate Risk



(Note that, although the purpose of this section is to place the fire risk in context, the above 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 following action plan. The fire risk assessment should be reviewed regularly.)

Risk level	Action
Trivial	No action is required and no detailed records need be kept.
Tolerable	No major additional fire precautions required. However, there might be a need or reasonably practicable improvements that involve minor or limited cost.
Moderate	<p>It is essential that efforts are made to reduce the risk. Risk reduction measures, which should take cost into account, should be implemented within a defined time period.</p> <p>Where moderate risk is associated with consequences that constitute extreme harm, further assessment might be required to establish more precisely the likelihood of harm as a basis for determining the priority for improved control measures.</p>
Substantial	Considerable resources might have to be allocated to reduce the risk. If the premises are unoccupied, it should not be occupied until the risk has been reduced. If the premises are occupied, urgent action should be taken.
Intolerable	Premises (or relevant area) should not be occupied until the risk is reduced.

APPENDIX 2 ACTION PLAN



Note:

Severity for each action identified as follows:


Red:	Extreme Harm
Orange:	Moderate Harm
Green:	Slight Harm



Introduction

MEDIUM	1	
<p style="text-align: center;">No photo</p>		<p>Fire Risk Assessors Observations:</p> <p>We were unable to access the boiler room and the scooter store with the key provided.</p>
		<p>Recommended Action:</p> <p>We recommend that the client accesses this area to inspect the fire safety measures within.</p>
Date First Identified:	17/12/2024	
Date of FRA:	17/12/2024	
Rectify Within: (months)	3	

Premises

LOW	2	
		<p>Fire Risk Assessors Observations:</p> <p>Some sections of the building façade are fitted with spandrel panels/infill panels. Such panels can be provided for both functional and aesthetic purposes. Schedule 1 Section B4(1) of the Building Regulations 2010 requires that: "The external walls of the building shall adequately resist the spread of fire over the walls and from one building to another, having regard to the height, use and position of the building". It is not readily apparent what materials are present.</p>
		<p>Recommended Action:</p> <p>The client should check the materials used in the spandrel panels to ensure they do not present a risk of fire spread over the wall.</p>
Date First Identified:	17/12/2024	
Date of FRA:	17/12/2024	
Rectify Within: (months)	6	

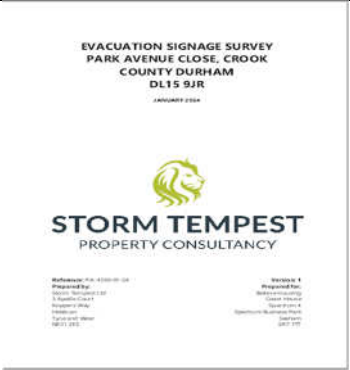


Compartmentation

LOW	3	
No photo		Fire Risk Assessors Observations:
		It could not be confirmed that fire door information to the effect that (a) fire doors should be kept shut when not in use; (b) residents or their guests should not tamper with the self-closing devices; and c) residents should report any faults or damages with doors immediately to the responsible person is provided to residents. This is required to be provided to new residents when they first move in and reissued annually to all residents.
Date First Identified:	17/12/2024	Recommended Action: Management should confirm that it provides information about fire doors, as required by the Fire Safety (England) Regulations 2022, to new residents when they move in and reissue this to all residents annually. The fire door information provided should be to the effect that (a) fire doors should be kept shut when not in use; (b) residents or their guests should not tamper with the self-closing devices; and (c) residents should report any faults or damages with doors immediately to the responsible person.
Date of FRA:	17/12/2024	
Rectify Within: (months)	6	



Fire Safety Signs and Notices

MEDIUM	4	
		Fire Risk Assessors Observations: We noted several issues with the fire safety signage throughout the building. We are aware that a fire safety signage survey was carried out on 3 rd January 2024.
Date First Identified:	17/12/2024	Recommended Action: The client should take account of the report and undertake all recommendations.
Date of FRA:	17/12/2024	
Rectify Within: (months)	3	

Management Procedures

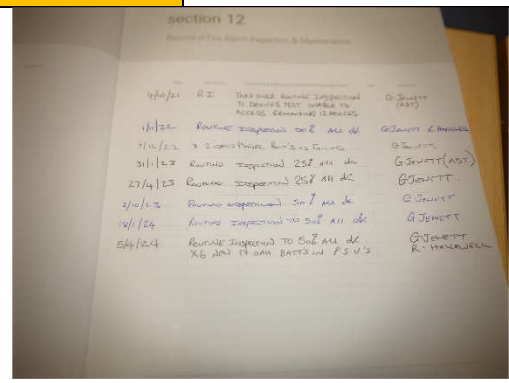
LOW	5	
No photo		Fire Risk Assessors Observations: There was no evidence available at the time of the assessment to show that routine in-house inspections of fire precautions, including fire doors, are undertaken.
Date First Identified:	17/12/2024	Recommended Action: The fire protection measures including, fire doors need to be maintained in good condition and efficient working order. It is therefore necessary, to have in place arrangements for routine inspection, testing and maintenance, a typical check list is provided in the Home Office guide "A guide to making your small block of flats safe from fire".
Date of FRA:	17/12/2024	
Rectify Within: (months)	6	



LOW		6	
No photo			Fire Risk Assessors Observations:
			Other than the displayed Fire Action notices within the premises, there is no other evidence available regarding communication with the occupants. The Fire Safety (England) Regulations 2022 became law on 23 rd January 2023. The regulations require the responsible person to provide all residents, regardless of the height of the building, with 'fire safety instructions' as well as providing these to new residents as soon as reasonably practicable after they move into the premises. The fire safety instructions that must be disseminated are extremely basic, relating to the evacuation strategy (i.e. stay put or simultaneous evacuation), how to report a fire incident. Additionally, specific information must be provided to all residents regarding the safe use of fire doors. It could not be confirmed that residents are provided with a copy of the fire safety instruction notice for the premises detailing the evacuation strategy in place, how to report a fire, and what action to take once a fire has occurred. This is required to be issued to new residents when they first move in and be reissued annually to all residents.
			Recommended Action:
			Management should confirm that residents are provided with a copy of the fire safety instruction notice for the premises detailing the evacuation strategy in place, how to report a fire, and what action to take once a fire has occurred. This is required to be issued to new residents when they first move in and be reissued annually to all residents.
Date First Identified:		17/12/2024	
Date of FRA:		17/12/2024	
Rectify Within: (months)		6	



MEDIUM	7	
No photo		Fire Risk Assessors Observations:
		We were unable to view any staff training records at the time of the visit.
Date First Identified:	17/12/2024	Recommended Action: The client should ensure that adequate training is provided to all staff commensurate with their role.
Date of FRA:	17/12/2024	
Rectify Within: (months)	3	

MEDIUM	8	
		Fire Risk Assessors Observations:
		The last recorded service of the fire alarm system was on the 05/04/2024.
Date First Identified:	17/12/2024	Recommended Action: The client should ensure that the fire alarm system is serviced at 6 monthly intervals in accordance with BS 5839.
Date of FRA:	17/12/2024	
Rectify Within: (months)	3	




MEDIUM	9	
No photo		Fire Risk Assessors Observations:
		There were no records on site to confirm that the emergency lighting system is tested and serviced in accordance with BS5266.
Date First Identified:	17/12/2024	Recommended Action: The client should ensure that the emergency lighting system is subject to testing and servicing in accordance with BS5266 and a record of the test kept.
Date of FRA:	17/12/2024	
Rectify Within: (months)	3	


MEDIUM	10	
No photo		Fire Risk Assessors Observations:
		There was no evidence available to confirm that the gas supply and appliances within the building are subject to appropriate servicing and testing by a person who is, or employed by, a member of a class of persons approved by the HSE under regulation 3 of the Gas Safety (Installation and Use) Regulations 1998 as amended, eg a Gas Safe registered gas engineer.
Date First Identified:	17/12/2024	Recommended Action: The client should examine their maintenance records to ensure up to date certification of gas safety inspections for equipment and supply. If this cannot be confirmed the client should arrange to have the gas supply and equipment serviced as a matter of urgency. Failure to do so could result in the increased risk from a fire due to faulty equipment.
Date of FRA:	17/12/2024	
Rectify Within: (months)	3	




MEDIUM	11	
No photo		Fire Risk Assessors Observations:
		Within the assisted bathroom. There was no record that the lifting equipment is subject to appropriate servicing.
Date First Identified:	17/12/2024	Recommended Action: The client should ensure that the lifting equipment is subject to appropriate servicing.
Date of FRA:	17/12/2024	
Rectify Within: (months)	3	

MEDIUM	12	
		Fire Risk Assessors Observations:
		A label attached to the dryers show that they were last serviced on the 24/05/2022 and were due a service on the 24/5/2023.
Date First Identified:	17/12/2024	Recommended Action: Whilst the laundry equipment is not of the commercial type it is expected that it will be used more frequently than if it were in a domestic environment so, in addition to the user checks, we recommend the laundry equipment is subject regular servicing by a competent person. Failure to do so could result in the increased risk from a fire in the dryer.
Date of FRA:	17/12/2024	
Rectify Within: (months)	3	



MEDIUM	13	
		Fire Risk Assessors Observations: We are unable to confirm when the lightning protection system was last subject to servicing.
Date First Identified:	17/12/2024	Recommended Action: We recommend the lightning protection system is subject to regular testing in accordance with "BS EN 62305-1:2006 Protection against Lightning: General Principles". And records are retained on site for inspection by relevant persons.
Date of FRA:	17/12/2024	
Rectify Within: (months)	3	

MEDIUM	14	
		Fire Risk Assessors Observations: There were no records available confirming the testing and servicing of the dry riser and automatically opening vents.
Date First Identified:	17/12/2024	Recommended Action: The client should ensure that the dry riser and automatically opening vents are tested and serviced in accordance with BS 9990 and BS 7346 respectively.
Date of FRA:	17/12/2024	
Rectify Within: (months)	3	

CERTIFICATE OF CONFORMITY

LIFE SAFETY FIRE RISK ASSESSMENT CERTIFICATE OF CONFORMITY



SSAIB Registered Provider: NBRI126

CERTIFICATE No. 9157941

This certificate is issued by the organisation 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.

PART 1 - ISSUER DETAILS

Issuing Organisation Name	Storm Tempest Limited
Bafe Registration no.	302806

PART 2 - CLIENT DETAILS

Customer's Name	Believe Housing
Address	Coast House Spectrum 4 Spectrum Business Park Seaham Durham SR7 7TT

PART 3 - CERTIFICATION DETAILS

Locations on premises to which this assessment applies	Park Avenue Close, Crook, County Durham, DL15 9JR.		
Scope and purpose of fire risk assessment	Life Safety Fire Risk Assessment		
Effective date of assessment	17/12/2024	Review Date	17/12/2025
Unique reference no.	9157941		

We, being currently a 'Certificated 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 the BAFE SP205 Scheme in respect of such fire risk assessment.

**Signed for and on behalf of
the issuing Certified Organisation**

Name: David Stilling

Date of Issue: 18/12/2024

Job Title: Director

Signature:



SSAIB (certification body) can be contacted at: 7 - 11 Earsdon Road, West Monkseaton, Whitley Bay, Tyne and Wear, NE25 9SX.
Tel: +44 (0) 191 296 3242 E-mail: certificate@ssaib.org Web: www.ssaib.org / www.ssaib.ie

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