



**Brighton & Hove
City Council**

**POLICY, RESOURCES & GROWTH
COMMITTEE
ADDENDUM**

4.00PM, THURSDAY, 30 NOVEMBER 2017

**COUNCIL CHAMBER, HOVE TOWN HALL, NORTON ROAD,
HOVE, BN3 3BQ**

ADDENDUM

ITEM

Page

74A NIGHT SHELTER PROPOSAL

1 - 56

Report of the Executive Director for Health & Adult Social Care (copy attached).

Contact Officer: Andy Witham

Tel: 01273 291498

Ward Affected: Regency

Subject:	Night Shelter Proposal		
Date of Meeting:	30 November 2017		
Report of:	Executive Director Health & Adult Social Care		
Contact Officer:	Name:	Andrew Witham	Tel: 01273 291498
	Email:	andrew.witham@brighton-hove.gov.uk	
Ward(s) affected:	Regency		

FOR GENERAL RELEASE

Note: By reason of the special circumstances, and in accordance with section 100B(4)(b) of the 1972 Act, the Chair of the meeting has been consulted and is of the opinion that this item should be considered at the meeting as a matter of urgency for the following reason, that to enable the proposals to be implemented in time a decision was required at the meeting on the 30th November.

The special circumstances for non-compliance with Council Procedure Rule 3, Access to Information Procedure Rule 5 and Section 100B(4) of the Local Government Act 1972 (as amended), (items not considered unless the agenda is open to inspection at least five days in advance of the meeting) were that the information necessary to complete the report was not finalised in time and delaying the item to the next meeting of the Committee would frustrate the implementation of the proposals in time. The Chair has been consulted and agreed that because of the foregoing special circumstances report should be considered at this meeting.

1. PURPOSE OF REPORT AND POLICY CONTEXT

1.1 This report is to inform members that following the decision taken at Budget Council in February this year and subsequent research by a cross party working group, part of the Brighton Centre has been identified for use this winter as a night shelter to increase the city's capacity to reduce rough sleeping on the streets. Members are advised also to note the content of the risk assessment attached as an appendix to this report in the context that the safety of any vulnerable adult and staff/volunteers using the night shelter is of paramount importance.

2 RECOMMENDATIONS

2.1 That the committee:

- a) Agrees the planned use of part of the Brighton Centre in support of cross party agreement given in February this year to identify and provide a night shelter over the winter months to provide support to rough sleepers in the city;
- b) Note the content of the service model at Appendix 1, risk assessment at Appendix 2 and that the implementation of the proposals is subject to

complying with any health and safety, planning and other regulatory requirements;

- c) Authorise the Executive Directors for Adult Social Care & Health, Neighbourhoods, Communities and Housing and Economy, Environment & Cultures to take all steps necessary of incidental to the implementation of the proposals.
- d) Note that an evaluation report will be submitted to this committee in summer 2018 on the utilisation of the night shelter and impact of its availability.

3 CONTEXT/ BACKGROUND INFORMATION

- 3.1 The Council adopted the Rough Sleeping Strategy in 2016. The strategy has the vision of ensuring no one has the need to sleep rough by 2020. The strategy promotes amongst its five priorities:
 - Prevent Homelessness and Rough Sleeping
 - Improving Health
- 3.2 Acknowledging the significant challenge this city faces in addressing rough sleeping on our street and the particular vulnerability of this client group, Budget Council in February 2017 carried unanimously a Notice of Motion to ...*contribute towards basic facilities and infrastructure to allow the use of empty council buildings by rough sleepers, as agreed by all parties...* A petition and report was then considered and agreed by PR&G on 4th May with respect to 'using empty council buildings for rough sleepers' and a cross party working group was set up to look at the options available to provide a night shelter for the winter
- 3.3 Following consideration of a number of locations, both council and privately owned, part of the Brighton Centre has been identified for the provision of the night shelter through the coming winter with the physical characteristics of its location, design and accommodation meeting the required purposes. The proposed space is the syndicate wing of the Brighton Centre which has a separate entrance to the rear. The intended use of this space will not impact upon other uses and the normal programme of events will continue unaffected.
- 3.4 The temporary use of part of the Brighton Centre for a night shelter does not require planning permission as the change of use, ie from part of a conference/exhibition centre to a night shelter, is not considered to constitute "development" in planning terms.
- 3.5 The night shelter will open from Sunday 10th December and run through continuously to Sunday 11th February with a possible break of a few days in mid-January. Options to address this short period and extend the night shelter availability through to late March are still being explored. The shelter will provide an opportunity for professional agencies to engage with rough sleepers to provide support including engaging with them directly in addressing any presenting health and support issues.
- 3.6 The service model attached at Appendix 1 addresses the staffing, security, and other associated costs of using the Centre. A risk assessment has also been provided at Appendix 1. This is a working document and as such will continue to be revised through the mobilisation stage and while the shelter remains open.

4 FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

- 4.1 One-off funding of £0.035m was identified at February 2017 Budget Council to meet costs associate with the security and basic facilities for the use of empty council buildings by rough sleepers. Additional one off capital funding of £0.100m was also set aside for infrastructure costs and conversion costs for the use of council buildings to be converted to provide Night Shelter facilities. No further budgets have been identified to support ongoing revenue costs or additional capital investment in the event the costs exceed the funding available. Additional funding will also need to be identified if the Night Shelter is extended beyond the original dates proposed in this report.

Finance Officer consulted: Rob Allen

Date: 28.11.2017

Legal Implications:

- 4.2 The proposed night shelter facility is within the Council's powers and in accordance with the Council's policies. Given the fact that implementation of the proposals cuts across many officer delegations and Council policies, and given its corporate implications, it is appropriate that the decision to authorise the opening of the shelter at the venue for a limited period is authorised by the Policy, Resources & Growth Committee.
- 4.3 The implementation of the proposals needs to comply with any planning, health and safety and other regulatory requirements.
- 4.4 The temporary use of part of the Brighton Centre for a night shelter does not require planning permission as the change of use, i.e. from part of a conference/exhibition centre to a night shelter, is not considered to constitute "development" in planning terms. This is because in order to amount to development any change of use would have to be "material". Whether a change of use is material is a matter of planning judgment taking into account the planning consequences that would flow from the proposed use, for example any effect the new use would have on the character and amenity of the surrounding area. In making such an assessment a comparison needs to be made between the existing and proposed uses.
- 4.5 Having considered the detail of the proposed use the Head of Planning and the Council's Senior Planning Solicitor consider that the night shelter would not have a significant impact on its vicinity due, inter alia, to the maximum number of rough sleepers to be accommodated, the duration and hours of the use, the management proposals for those refused entry and/or congregating outside, the fact that the access to be used (Russell Road) is in a non – residential area and that adjoining streets currently generate significant footfall and activity, often late at night. In these circumstances the change of use is not assessed to be material.

Lawyer consulted: Abraham Ghebre-Ghiorghis

Date: 26.11.2017

Equalities Implications:

- 4.6 Access to the Shelter will be made through referrals by the Street Outreach Service provided by St Mungo's who will ensure that referrals are targeted at those most in need.

Risk and Opportunity Management Implications:

- 4.7 Detailed risk assessment included at Appendix 2

SUPPORTING DOCUMENTATION

Appendices:

1. Outline Service Model
2. Night Shelter Risk Assessments

Documents in Members' Rooms

1. None

Background Documents

1. Rough Sleeping Strategy 2016-2020

Appendix 1

Night Shelter Provision Brighton Centre, Brighton & Hove

Introduction

For the coming winter period, the council has committed to opening a short term night shelter to accommodate up to 30 rough sleepers. A range of buildings have been considered including both private and council owned premises. The Brighton Centre is viewed as the most suitable option due to the size, availability and location. This venue offers the opportunity for a shelter to be open from 7pm to 8am, on a referral only basis for up to 30 people who are rough sleeping in the city.

Venue

It is proposed to use the first floor East Wing (entrance and exit from Russell Road) for the night shelter. The venue is available from 10 December 2017 to 14^h January, then from the 20^h January 2018 to 20^h February 2018. The shelter will be open from 7pm to 8am.

An interim venue is being sought for the January dates and from 21st February to the end of March 2018 when the Brighton Centre is unavailable. The venue will accommodate 30 people in one large room. The foyer outside the main room has access to toilets and the area will also be used to serve food and drinks.

Access to the rest of the venue will be sealed off or locked. The building itself presents little risk. It is an operational building and has a good standard of housekeeping. The main stair access and rear fire escape stairs are in good condition with no obvious slip or trip hazards or unguarded falls. There appears to be adequate lighting for the proposed use. The whole area is on a system of emergency lighting so a level of lighting will still be available in the event of a fire affecting the main supply. The space is also covered by a comprehensive fire alarm system.

The proposal from the Brighton Centre is to lock the bottom doors into the entrance lobby to maintain separation with the building. This does not affect the means of escape. It will restrict access to the lift, however the key for the door will be with the night shelter manager so access can be provided if required. If we have staff or clients on site who require the lift, disabled evacuation chairs will need to be provided for use in the event of a fire. The disabled evacuation chairs and necessary training can be provided by the H&S team.

Insurance

Existing cover applies with some concerns which will be addressed in the risk assessment.

Staffing

The staff and service will be managed by experienced council employed managers. There will be a staff team made up of care and support staff who will be employed through an agency to run the service. Their role will be to manage the health and safety and welfare of all the people in the building. Security staff will manage the building, the door policy and access to the shelter.

Staffing will be:

-
- Two support workers 6.30pm (for 7pm opening) to 8am
- A team leader from 6.30pm to 11.00pm
- Two security guards for the entire night shift
- On call council staffing is still to be decided

- Continuity of support for rough sleepers, from day to night, will be provided by the St Mungo's team (see "Referrals and service model" below)

We are working with the Councils HR department on expediting a fast track process to employ support staff from local services to work at the night shelter. The Guidant Group, the council's specialist recruitment agency, is leading on recruiting senior staff and agency support workers.

Volunteers

A significant number of enquiries have been received from people wanting to volunteer or donate goods. This is being coordinated by the Charity Link Project Worker (a council post funded through a successful DCLG grant) to determine how best this additional resource can support the work of the night shelter.

Referrals and service model

Referrals into the service will be made by the Rough Sleeper Outreach Team, which is a council commissioned service, delivered by St Mungo's. The St Mungo's team will identify people who need respite from rough sleeping and can manage in a shared environment. Most will have a local connection, but some may require shelter while reconnection options are explored. So far enough suitable people have been identified to run the night shelter at full capacity. Women are being prioritised, in recognition of their additional vulnerability while sleeping on the streets, and will make up a third of the clients offered night shelter accommodation.

St Mungo's will provide skilled and experienced support workers to work with clients on a housing plan and ensuring they are accessing appropriate services to meet their needs with the aim to move them off the streets. The individual plans and register of attendance will be recorded on the new multiagency ICT system Bthink. St Mungo's will also be present during sign in and at the start of the night during the first week at the night shelter. This is to provide continuity for rough sleepers from the support offered by St Mungo's during the day to the support provided by the newly established night shelter team.

It should be noted that staff will prioritise shifts for SWEP should that be opened due to severe weather. The night shelter will still open if there are sufficient agency staff. People staying at the night shelter will be eligible for SWEP as well so will have continuous night shelter.

The venue will be closed during the day. People will be directed to existing homeless and rough sleeper services in the city during this time. There will be no smoking or visitors while the service is open. People will be able to leave their belongings in the venue in the day, but will be asked to take anything valuable with them. Pets will not be a barrier to accessing the night shelter but will be looked at on a case by case basis.

Food

There are no cooking or kitchen facilities in the East Wing. Prepared food will be delivered to the venue and washing up will need to be taken off site each day. A number of options are being explored. Weekend provision is proving most challenging. As mentioned above, hot drinks and food will be managed by staff in the lobby area.

Bedding

The council will source beds (sun lounger or camp bed style) plus bedding for each person staying at the night shelter. 40 duvets have already been pledged by a donor. Laundry services for bedding and clothes are being arranged.

Risk Assessments

Risk Assessments are being compiled as living documents which will need to be reviewed and updated as the scheme progresses. This work is being done with the Corporate H&S team having oversight. The Fire Risk Assessment is also in the process of being compiled and we are confident that it will not present any significant issues. Council corporate H&S have been in touch with East Sussex Fire and Rescue to inform them of our proposals and will continue to liaise.

All Risk Assessments will be shared with the Brighton Centre to ensure compatibility with their processes and to ensure that the proposals do not impact on their business. The Brighton Centre is being very helpful and we are all working together to deliver this service in a positive and safe way.

Summary

The service will operate from 10 December 2017 to 20 February 2018. An evaluation of the night shelter will be carried and a report submitted to PR&G in the summer 2018. This report will look at the utilisation of the shelter and impact of its availability.



**Brighton & Hove
City Council**

Fire Risk Report

Brighton and Hove City
Council

Syndicate Wing

Brighton Centre

Kings Road

Brighton, BN1 2GR

Survey Date 25 Nov 2017

Surveyed By Grant Ritchie

Review Period 1 yr

Review Date Nov 2018

Report Date 07 Nov 2017

Responsible Person

Type of Building

Use of Premises

No. of floors (inc grd) 2

Approx size m²

359.5m²

113m²

Brief details of construction

FIRE LOSS EXPERIENCE

OTHER RELEVANT INFORMATION

RELEVANT FIRE LEGISLATION

Approx no. of Employees	x
Approx no. of Children	NA
Approx no. of Volunteers	x
Approx total max no.	x

Sleeping Occupants	30
Disabled Occupants	0
Occupants in Remote Areas/Lone Workers	NA
Young Persons	tbc
Others	tbc
Occupancy Numbers	40

Overview

The Syndicate Wing is part of the Brighton Centre Complex. The Wing is arranged over two floors and is accessed by both stairs and a lift. The Wing is separated from the main building by pairs of fire resisting doors providing 1hrs fire separation.

The Wing has been designed to operate as either a combined element of the main Brighton Centre or a stand alone space.

As the Wing is intended for conference facility it can easily accommodate the numbers of service users and staff we are considering.

The Wing is provided with an adequate fire alarm and system of emergency lighting.

Although not designed for this I see no fire related risk that should prevent the proposed use as a night shelter.

As the Wing is part of the Brighton Centre it falls under the main buildings maintenance regime.

The Brighton Centre has a good standard of housekeeping and appropriate testing procedure.

A significant element of successful fire safety management is staff training and awareness. As the Shelter is still being established some of these issues will need to be addressed when staff are identified.

I recommend in the report that staff induction includes both Shelter managers and the Brighton Centre Building manager to ensure a understanding of both the service and the surrounding.

I further recommend that this assessment is reviewed when the Shelter has opened to ensure that the items which cannot currently be assessed have been adequately addressed.

The risk assessment identifies the risk as **moderate** *"It is essential that efforts are made to reduce the risk. Risk reduction measures should be implemented within a defined time period"*

In my opinion the risk will reduce to **tolerable** *"No major additional controls required. However, there might be a need for improvements that involve minor or limited cost"* when the staff are appointed and recommended training and controls are put in place.

1.9 Fire Risk Assessment

Fire Hazards and Their Elimination or Control

1.0 ELECTRICAL SOURCES OF IGNITION

1.1	Reasonable measures taken to prevent fires of electrical origin?	<input type="text" value="yes"/>
1.2	Suitable limitation of trailing leads and adapters?	<input type="text" value="yes"/>
1.3	Suitable policy regarding the use of personal electrical appliances?	<input type="text" value="yes"/>
1.4	Free from any other electrical hazards?	<input type="text" value="Yes"/>

2.0 SMOKING

2.1	Reasonable measures taken to prevent fires as a result of smoking?	<input type="text" value="yes"/>
2.2	Smoking prohibited in the building, including 'No Smoking' signage?	<input type="text" value="no"/>

Smoking is prohibited however no signage provided.

2.3	Smoking prohibited in appropriate areas?	<input type="text" value="yes"/>
2.4	Suitable arrangements for those who wish to smoke?	<input type="text" value="yes"/>
2.5	This policy appeared to be observed at time of inspection?	<input type="text" value="yes"/>
2.6	Free from any other smoking hazards?	<input type="text" value="yes"/>

3.0

ARSON

3.1	Does basic security against arson by outsiders appear reasonable (1)?	<input type="text" value="yes"/>
3.2	Is the external perimeter to the building free from combustible materials (i.e. rubbish, contractor's waste, etc.)?	<input type="text" value="yes"/>
3.3	Free from any other arson hazards?	<input type="text" value="yes"/>

4.0**PORTABLE HEATERS AND HEATING INSTALLATIONS**

4.1

Is the use of portable heaters avoided as far as practicable?

4.2

If portable heaters are used is the use of the more hazardous type (e.g. radiant bar fires or lpg appliances) avoided?

4.3

If portable heaters are used are suitable measures taken to minimize the hazard of ignition of combustible materials?

4.4

Free from any other portable heaters and heating installation hazards?

5.0**COOKING**

5.1

Are reasonable measures taken to prevent fires as a result of cooking?

5.2

Filters changed and ductwork cleaned regularly?

5.3 Suitable extinguishing appliances available?

5.4 Free from any other cooking hazards?

6.0 LIGHTNING

6.1 Does the building have a lightning protection system?

7.0 HOUSEKEEPING

7.1 Combustible materials appear to be separated from ignition sources?

There is a good standard of housekeeping in the Bton Centre

7.2 Avoidance of unnecessary accumulation of combustible materials or waste?

7.3 Avoidance of inappropriate storage of hazardous materials?

7.4 Free from any other housekeeping issues?

8.0	HAZARDS INTRODUCED BY OUTSIDE CONTRACTORS AND BUILDING WORKS
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8.1	Are fire safety conditions imposed on outside contractors?	<input type="text" value="yes"/>
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8.2	Is there satisfactory control over works carried out in the building by outside contractors (including "hot work" permits)?	<input type="text" value="yes"/>
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8.3	If there are in house maintenance personnel, are suitable precautions taken during "hot work", including use of hot work permits?	<input type="text" value="yes"/>
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8.4	Free from any other hazards introduced by outside contractors and building works?	<input type="text" value="yes"/>
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9.0	DANGEROUS SUBSTANCES
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9.1	If dangerous substances are, or could be, used, has a risk assessment been carried out, as required by the Dangerous Substances and Explosive Atmospheres Regulations 2002?	<input type="text" value="na"/>
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10.0	OTHER SIGNIFICANT FIRE HAZARDS
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10.1	Are there any other significant fire hazards that warrant consideration including process hazards that impact on general fire precautions?	<input type="text" value="no"/>
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Fire Protection Measures

11.0

MEANS OF ESCAPE FROM FIRE

- 11.1 It is considered that the building is provided with reasonable means of escape in case of fire.
The Syndicate Wing is provided with two Fire Exits at each level which lead to a suitable exit via a protected staircase.
- 11.2 Adequate design of escape routes?
The escape routes are adequate for the size and layout of the building
- 11.3 Adequate provision of exits?
The room is separated by demountable partition. This partition includes a exit door leading to an adjacent space. In its current configuration the room capacity is 120 people.
- 11.4 Exits easily and immediately operable where necessary?
To limit access to the main building some doors will be secured. It is recommended that before the shelter opens staff walk the building and exit routes through to the final exit to ensure they are unlocked and available.
- 11.5 Fire exits open in direction of escape where necessary?
- 11.6 Avoidance of sliding or revolving doors as fire exits where necessary?
- 11.7 Satisfactory means for securing exits?
See 11.4 above

11.8	Reasonable distances of travel where there is a single direction of travel?	<input style="border: 1px solid black; padding: 2px 10px;" type="text" value="NA"/>
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Alternative exits are available from all parts of the room it is proposed to use.

11.9	Reasonable distances of travel where there are alternative means of escape?	<input style="border: 1px solid black; padding: 2px 10px;" type="text" value="yes"/>
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11.10	Suitable protection of escape routes?	<input style="border: 1px solid black; padding: 2px 10px;" type="text" value="Yes"/>
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It is proposed to use the front fire exit route as an entrance. This is acceptable however it is recommended that the amount of combustible material is kept to a minimum and that any furniture used is kept to a minimum and arranged so to not impede escape.

11.11	Suitable fire precautions for all inner rooms?	<input style="border: 1px solid black; padding: 2px 10px;" type="text" value="NA"/>
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11.12	Escape routes unobstructed?	<input style="border: 1px solid black; padding: 2px 10px;" type="text" value="yes"/>
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See 11.10

11.13	It is considered that the building is provided with reasonable arrangements for means of escape for disabled people.	<input style="border: 1px solid black; padding: 2px 10px;" type="text" value="No"/>
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If service users who are unable to use the stairs are present evacuation chairs will be required to be located on each exit route. Any disabled service user will require a personal emergency evacuation plan PEEP

12.0	DOORS
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12.1	Are all internal and final exit fire doors and associated features, (e.g. hinges; self closers; other ironmongery; glazing; door frames; strips and seals; etc. fully compliant?) (2)	<input style="border: 1px solid black; padding: 2px 10px;" type="text" value="yes"/>
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The internal doors are maintained in an adequate condition and regularly checked by site maintenance staff.

12.2 Avoidance of wedging open of fire doors?

12.3 Can all emergency doors be easily and immediately opened by any person in an emergency without a key, card, code or digital lock?

13.0 MEASURES TO LIMIT FIRE SPREAD AND DEVELOPMENT

13.1 It is considered that there is compartmentation of a reasonable standard (3)

13.2 It is considered that there is reasonable limitation of linings that might promote fire spread.

13.3 As far as can reasonably be ascertained, fire dampers are provided as necessary to protect critical means of escape against passage of fire, smoke and combustion products in the early stages of a fire? (3), (4)

13.4 Where applicable, is there two door separation between the basement and ground floor level?

There is lobby protection between the Syndicate Wing and the main building.

14.0

EMERGENCY ESCAPE LIGHTING

14.1

Reasonable standard of emergency escape lighting system provided? (5)

yes

15.0

FIRE SAFETY SIGNS AND NOTICES

15.1

Reasonable standard of fire safety signs and notices i.e. fire action notices, directional signage, final fire exit signage, fire door signage, etc.?

yes

The basic level of signage is appropriate.

16.0 MEANS OF GIVING WARNING IN CASE OF FIRE

16.1 Reasonable manually operated electrical fire alarm system provided?

16.2 Automatic fire detection provided?

16.3 Extent of automatic fire detection generally appropriate for the occupancy and fire risk?

The fire alarm appears to be of a L2 Standard.

16.4 Remote transmission of alarm signals?

The alarm is monitored by 24hr security in addition to a direct dial to a monitoring service

6) Based on visual inspection, but no audibility tests or verification of full compliance with relevant British Standard carried out.

17.0 MANUAL FIRE EXTINGUISHING APPLIANCES (WHERE PROVIDED)

17.1 Reasonable provision of portable fire extinguishers?

17.2 Hose reels provided?

Are all fire extinguishing appliances readily accessible?

17.3 It is recommended that fire extinguishers are located in supervised staff areas and not distributed into the general space to avoid misuse.

18.0

RELEVANT AUTOMATIC FIRE EXTINGUISHING SYSTEMS

na

19.0

OTHER RELEVANT(7) FIXED SYSTEMS AND EQUIPMENT

19.1

Is there smoke control, (ventilation for means of escape), provided in stairwells?

na

19.2

Is there a wet/dry riser within the building?

No

Not required for the Syndicate Wing specifically

19.3

Suitable provision of fire fighters switch(es) for high voltage luminous tube signs, etc.

na

Management of Fire Safety

20.0

PROCEDURES AND ARRANGEMENTS

20.1 Fire safety is managed by: (8)

Duty Managers

20.2 Competent person(s) appointed to assist in undertaking the preventive and protective measures (i.e. relevant general fire precautions)? (9)

yes

9

Fire Procedures

20.3 Is there a suitable Emergency Evacuation Plan (EEP) for the property?

yes

There is a EEP for the building however a simple procedure for the night shelter is required

20.4	Are there suitable arrangements for summoning the fire and rescue service?	yes
20.5	Are there suitable arrangements to meet the fire and rescue service on arrival and provide relevant information, including that relating to hazards to fire fighters?	yes
20.6	Are there suitable arrangements for ensuring that the premises have been evacuated?	yes
20.7	Is there a suitable fire assembly point(s)? <i>A suitable assembly point will need to be identified for the Night Shelter</i>	yes
20.8	Are there adequate procedures for evacuation of any disabled people who are likely to be present? <i>As proposed any evacuation for clients who use a wheel chair will require the use of an evacuation chair. This will need to be identified in a procedure and suitable training given.</i>	
20.9	Persons nominated and trained to use fire extinguishing appliances? <i>It is not currently BHCC policy to encourage the use of PFFE</i>	no
20.10	Persons nominated and trained to assist with evacuation, including evacuation of disabled people? <i>TBC when staffing identified</i>	NO
20.11	Appropriate liaison with fire and rescue service (e.g. by fire and rescue service crews visiting for familiarisation visits)? <i>ESFR have been advised of the proposed Night Shelter. They know the Centre well and make regular visits</i>	Yes
20.12	Effective liaison and communication between two or more responsible persons Liaison between the Shelter Manager and Bton Centre staff will need to be set up on appointment of Shelter personal	TBC

20.13 Other procedures relating to fire in place?

yes

21.0 TRAINING AND DRILLS

- | | | | |
|------|--|--|----|
| 21.1 | Have all staff been given adequate fire safety instruction and training on induction?
<i>Staff will have a briefing form the Centre Building Manager including hearing the operation of the fire alarms</i> | <table border="1"><tr><td>No</td></tr></table> | No |
| No | | | |
| 21.2 | Have all staff been given adequate fire safety awareness training?
<i>If staff are current BHCC staff they are likely to have received training in the recent months however fire awareness refresher is recommended as part of staff induction to the Night Shelter.</i> | <table border="1"><tr><td>NO</td></tr></table> | NO |
| NO | | | |
| 21.3 | Are all staff given adequate periodic refresher training at suitable intervals?
<i>See above</i> | <table border="1"><tr><td>NA</td></tr></table> | NA |
| NA | | | |

Where training is given does it provide information, instruction or training on the following:

- | | | | |
|------|--|---|-----|
| 21.4 | Fire risks in the premises?
<i>This is to be included in the staff induction</i> | <table border="1"><tr><td>TBC</td></tr></table> | TBC |
| TBC | | | |
| 21.5 | The fire safety measures in the building?
<i>This is to be included in the staff induction</i> | <table border="1"><tr><td>TBC</td></tr></table> | TBC |
| TBC | | | |
| 21.6 | Action in the event of fire?
<i>This is to be included in the staff induction</i> | <table border="1"><tr><td>TBC</td></tr></table> | TBC |
| TBC | | | |
| 21.7 | Action on hearing the fire alarm signal?
<i>This is to be included in the staff induction</i> | <table border="1"><tr><td>TBC</td></tr></table> | TBC |
| TBC | | | |
| 21.8 | Method of operation of manual call points?
<i>This is to be included in the staff induction</i> | <table border="1"><tr><td>TBC</td></tr></table> | TBC |
| TBC | | | |

21.9	Location of fire extinguishers? <i>This is to be included in the staff induction</i>	TBC
21.10	Means for summoning the fire and rescue service? <i>This is to be included in the staff induction</i>	TBC
21.11	Identity of persons nominated to assist with evacuation (i.e. fire wardens/evac buddy)? <i>This is to be included in the staff induction</i>	TBC
21.12	Identity of persons nominated to use fire extinguishing appliances?	no

Training for Persons with Special Responsibilities

21.13	Are staffs with special responsibilities (e.g. fire wardens/evac buddies/fire risk assessors) given additional training? <i>The Shelter manager / supervisor will need to have an induction from the Brighton Centre Building Manager. In addition the Shelter manager / supervisor will have responsibility for the evacuation plan and therefore will need to be briefed as to its contents.</i>	TBC
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Fire Drills

21.14	Are fire drills carried out at appropriate intervals? <i>The Centre has a regular process of drilling. In view of the likely clients it is not recommended that drills are undertaken when clients are in occupation however all staff should have a practice drill including sounding the alarm</i>	TBC
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When the employees of another employer work in the premises:

21.15	Is their employer given appropriate information (e.g. on fire risks; general fire precautions; and fire extinguisher training (if appropriate))?	TBC
21.16	Is it ensured that the employees are provided with adequate instructions and info? <i>See above</i>	TBC

22.0**TESTING, MAINTENANCE AND RECORDS**

22.1	Weekly fire alarm tests?	<input type="text" value="yes"/>
22.2	Periodic servicing of fire detection and alarm system? <i>Inspection regime certificated by a engineer</i>	<input type="text" value="yes"/>
22.3	Monthly visual inspection of emergency lighting system?	<input type="text" value="yes"/>
22.4	Periodic servicing of emergency lighting system? <i>Inspection regime certificated by a engineer</i>	<input type="text" value="yes"/>
22.5	Monthly visual inspection of fire extinguishing appliances (Inc. hoses where applicable)?	<input type="text" value="yes"/>
22.6	Annual maintenance of fire extinguishing appliances (Inc. hoses where applicable)? <i>Serviced by engineer under contract</i>	<input type="text" value="yes"/>
22.7	Periodic inspection of external escape staircases and gangways? <i>A new set of stairs has been provided.(Please see the comment regarding uninsulated glazing)</i>	<input type="text" value="yes"/>
22.8	Weekly and monthly testing, six monthly inspection and annual testing of fire lifts?	<input type="text" value="na"/>

22.9	Periodic inspection of sprinkler installations? <i>Sprinklers cover loading bay and car park only..</i>	yes
22.10	Routine checks of final exit doors and/or security fastenings? <i>These checks are made and recorded by the site manager</i>	yes
22.11	Wet/dry riser annual inspection?	yes
22.12	Annual inspection of fire doors? (Resident front doors excluded) <i>Regular checks and repairs by site maintenance staff</i>	yes
22.13	Annual gas safety certificate?	yes
22.14	Fixed electrical wiring and installation certificate?	yes
22.15	Annual inspection and test of lightning protection system?	yes
22.16	Annual portable appliance testing (PAT)? <i>Checked in accordance with Local Authority guidance on frequency.</i>	yes
22.17	Annual fixed heating installations?	yes

22.18	Annual Evacuation Chair service records? <i>This will be provided if required depending on client need</i>	TBC
22.19	Personal Emergency Evacuation Plan (PEEP)? <i>This will be provided if required depending on client need</i>	TBC
22.20	Regular review of the fire risk assessment <i>This FRA will be reviewed prior to operation but when staff are appointed and during the operation of the shelter.</i>	yes
22.21	Curtains and furnishings?	NA
22.22	Other relevant inspections or tests? <i>Certification Dates</i>	

The overall risk level for this building is calculated by the multiplying the likelihood of fire with the potential consequences that may result from a fire. This takes the building type and use, occupants, level of fire protection afforded, management arrangements, etc. into account:

Likelihood of fire -

Medium

High	Lack of adequate controls applied to one or more significant fire hazards, such as to result in significant increase in likelihood of fire.
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).
Low	Unusually low likelihood of fire as a result of negligible potential sources of ignition.

Potential level of harm -

Medium

Extreme	Outbreak of fire is likely to result in serious injury or death of any occupant.
Moderate	Outbreak of fire could foreseeably result in injury (including serious injury) of one or more occupants, but it is unlikely to involve multiple fatalities.
Slight	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).

Overall Risk

Medium

	Extreme	Moderate	Slight
High	Intolerable	Substantial	Moderate
Medium	Substantial	Moderate	Tolerable
Low	Moderate	Tolerable	Trivial

Intolerable Building (or relevant area) should not be occupied until the risk is reduced.

Substantial Considerable resources might 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.

Moderate

It is essential that efforts are made to reduce the risk. Risk reduction measures should be implemented within a defined time period. Where moderate risk is associated with consequences that constitute extreme harm, further assessment might be required.

Tolerable No major additional controls required. However, there might be a need for improvements that involve minor or limited cost.

Trivial No action is required and no detailed records need be kept.

With controls in place residual risk rating is:

Moderate

(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 should be addressed by implementing all recommendations. The fire risk assessment should be reviewed regularly.)

1.10 References

The following is a list of useful reference documentation that may be considered as 'Benchmark standards' and which have, where relevant, been referred to for the purposes of producing this report and risk assessment:

Fire risk assessment guides:

- A. Fire Safety Risk Assessment (Offices and Shops)
- B. Fire Safety Risk Assessment (Factories and Warehouses)
- C. Fire Safety Risk Assessment (Sleeping Accommodation)
- D. Fire Safety Risk Assessment (Residential Care Premises)
- E. Fire Safety Risk Assessment (Educational Premises)
- F. Fire Safety Risk Assessment (Small and Medium Places of Assembly)
- G. Fire Safety Risk Assessment (Large Places of Assembly)
- H. Fire Safety Risk Assessment (Theatres, Cinemas and Similar Premises)
- I. Fire Safety Risk Assessment (Open Air Events and Venues)
- J. Fire Safety Risk Assessment (Healthcare Premises)
- K. Fire Safety Risk Assessment (Transport Premises and Facilities)
- L. Fire Safety Risk Assessment (Animal Premises and Stables)
- M. Fire Safety in Purpose Built Blocks of Flats

Building Regulations:

- N. Building Regulations – Approved Document B
- O. Building Regulations – Approved Document M

British Standards

- P. British Standard 9999 – Code of Practice for Fire Safety in the Design, Management and Use of Buildings

Q. British Standard 5839:part 1 – Fire Alarm Systems/Associated Equip

R. British Standard 5266 – Emergency Lighting Systems

S. British Standard EN3 and 5306 – Fire Extinguishing Equipment

T. British Standard 5499 – Fire Safety
Signs

U. British Standard 8214 – Fire Door Assemblies

V. British Standard 476 – Fire Testing of Structural
Elements

Legislation

V. British Standard 476 – Fire Testing of Structural
Elements

V. British Standard 476 – Fire Testing of Structural
Elements

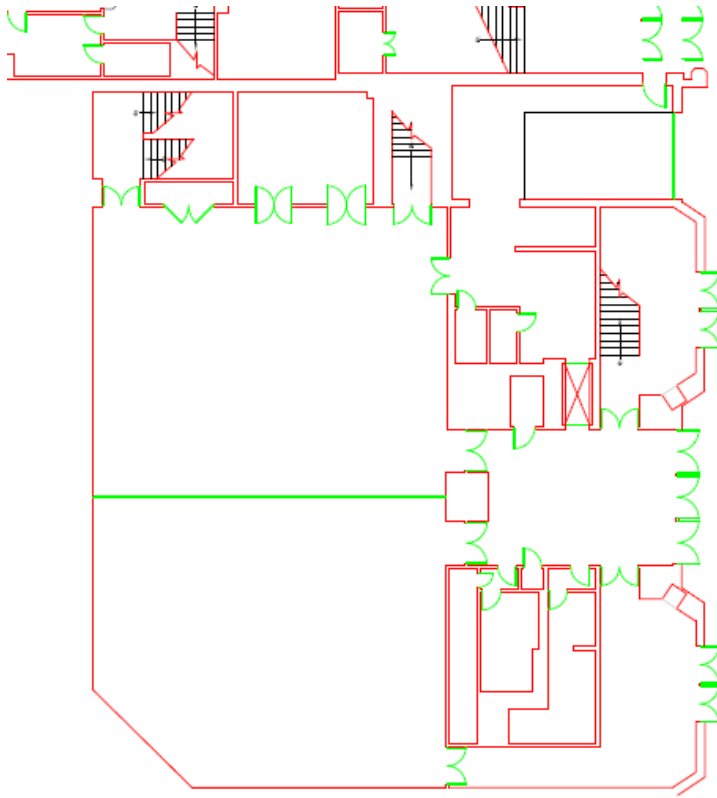
V. British Standard 476 – Fire Testing of Structural
Elements

FIRE ACTION PLAN

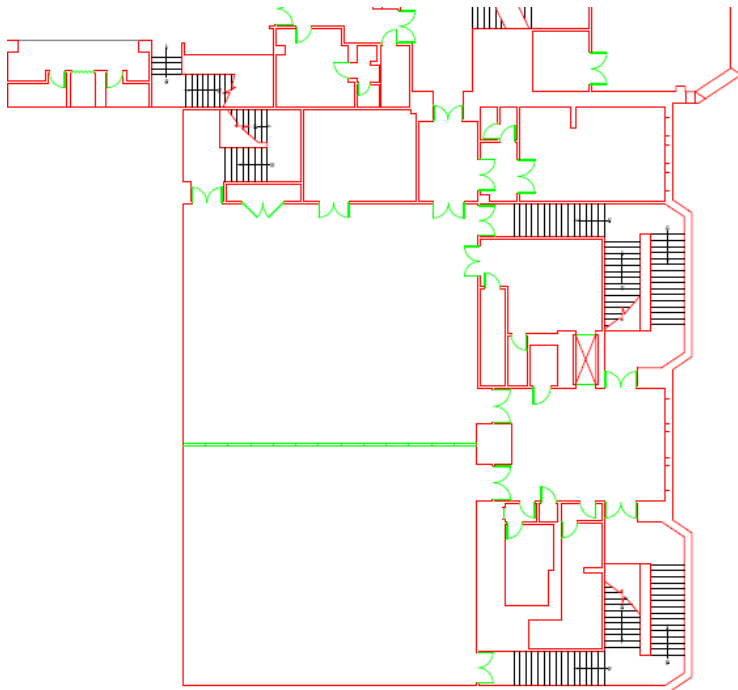
No.

Risk

Code	Risk Description	Sub Element	Comment



Level 1



Level 2

Risk Assessment Form Version: V2 28/11/17

For further info on risk assessment see: BHCC Risk Assessment Guidance

To calculate Risk Rating (R): assess the likelihood (L) of an accident occurring against the **most likely** impact (I) the accident might have, taking into account

Task / Activity Covered by the assessment	Delivery of a Night shelter Service at the Brighton Centre			Likelihood (L)	X	Impact (I)
Workplace	Syndicate Wing Brighton Centre			Almost Impossible	1	Insignificant (minor injury, no time off)
Date of Assessment	27.11.17	Date Assessment to be reviewed		Unlikely	2	Minor (non-permanent injury, up to 7 days off)
Person Completing	Emily Ashmore	Manager	Sue Forrest	Possible	3	Moderate ((injury causing more than 7 days off)
Staff involved in assessment	Karen Leenders, Sue Forrest, Andrew Witham, Grant Ritchie, Alison Pitts			Likely	4	Major ((death or serious injury)
				Almost Certain	5	Catastrophic (multiple deaths)
				Low =1-3	Moderate = 4-7	Significant = 8-14
						High = 15-25

What are the significant, foreseeable, hazards? <i>(the dangers that can cause harm)</i>	Who is at Risk?	Current control measures <i>(What is already in place/done)</i>	Risk Rating			What additional controls can be put in place to reduce the risk further?	Revised Risk Rating			Sign as done
			L	I	R		L	I	R	
E.g Slip, trip or fall on wet flooring	- Staff - Visitors etc.	- Barrier matting - Wet floor signs - No running rules (in schools)	3	2	6	- Introduce non-slip flooring to areas by external doorways - Provide cleaning/drying equipment for staff	2	1	2	
Service User related risks to other users of the Night shelter and Staff										

1.	Substance Use – risk of overdose	Service users	<ul style="list-style-type: none"> • Service users will be informed at point of referral that the service is dry, i.e. that no substances or alcohol should be used on site. • Service users will be informed that use of alcohol or substances on site could lead to exclusion. • Where service users are known to be substance users there will be a completed risk assessment identifying this risk and a risk mitigation plan will have been drawn up. • All staff to have first aid training and to be briefed prior to working at the service on identifying markers of an opiate overdose. • Toilets will be locked and access will be via staff to minimise risks. 	4	4	16	<ul style="list-style-type: none"> • All service users to receive a welcome and introduction from a staff member outlining the service offer and code of conduct (see attached) • All staff to be trained in the use of naloxone • The provision of naloxone pens on site • Toilets will be fitted with UV lights to frustrate injecting on site. • Pavilions in-reach will be on offer 	4	3	12	S
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2.	Substance use – risks of coercion of vulnerable adults, dealing on the premises and related aggression issues	Service users and staff	<ul style="list-style-type: none"> • Service users to be informed at the point of referral that the project is dry, i.e. that no substances or alcohol should be used on site. • Service users will be informed that dealing or suspicion of dealing could lead to exclusion • Police to be informed of the location and dates of the night shelter being active and a request for a marker on the property • Where a service user is known to be at risk this will form part of the risk assessment provided on referral and an appropriate risk mitigation plan will have been drawn up. 	3	4	12	<ul style="list-style-type: none"> • Staff to receive ‘dealing with aggression and violent behaviour’ and de-escalation training • Supervisory staff on site for each shift, and senior staff on call each night for advice and assistance • All service users to receive service offer and code of conduct, see attached. • Staff to receive safeguarding training and be aware of the process for raising a safeguarding concern • Pavilions in reach will be on offer 	3	4	12	S
3.	Substance and alcohol use and related health issues <ul style="list-style-type: none"> • Fitting • Unconsciousness and breathing issues • Long term health issues, e.g. liver damage, infectious blood borne illnesses 	Service users	<ul style="list-style-type: none"> • Service users who are or appear to be under the influence of alcohol or substances to be placed on enhanced welfare checks • Service users to be offered support in accessing health services • Where service users are known to be substance users there will be a completed risk assessment identifying this risk and a risk mitigation plan will have been drawn up. 	4	4	16	<ul style="list-style-type: none"> • Provision of in reach medical care • Staff to receive safeguarding training and be aware of the process for raising a safeguarding concern • Pavilions in reach will be on offer 	3	4	12	S

4	Substance and alcohol use and increased risk from others	Service users	<ul style="list-style-type: none"> • Service users who are or appear to be under the influence of alcohol or substances to be placed on enhanced welfare checks • Where service users are known to be substance users there will be a completed risk assessment identifying this risk and a risk mitigation plan will have been drawn up. 	4	3	12	<ul style="list-style-type: none"> • Staff to receive safeguarding training and be aware of the process for raising a safeguarding concern 	4	3	12	S
5.	Needle stick injuries	Service users and staff	<ul style="list-style-type: none"> • Service users to be informed at the point of referral that the project is dry, i.e. that no substances or alcohol should be used on site. • Sharps bins to be provided on site • Needle safe gloves to be provided (PPE)including to cleaning staff • Bedding to be packed and unpacked by service users • Where service users are known to be substance users there will be a completed risk assessment identifying this risk and a risk mitigation plan will have been drawn up. 	3	4	12	<ul style="list-style-type: none"> • All service users to receive a welcome and introduction from a staff member outlining the service offer and code of conduct (see attached) 	3	4	12	S

6.	Parasitic infestation, scabies, bed bugs, body lice etc.	Service users and staff	<ul style="list-style-type: none"> • Service users to have personal identified bedding • Bedding not to be used by more than one client without high temperature laundering between uses • Bedding to be packed and unpacked by service users • PPE to be provided as required • Where service users are known to have a parasitic infestation there will be a completed risk assessment identifying this risk and a risk mitigation plan will have been drawn up. This will include a referral to the hostel nursing team. 	2	2	4	<ul style="list-style-type: none"> • Provision of in reach medical care • Staff to receive safeguarding training and be aware of the process for raising a safeguarding concern 	2	2	4	L
7.	Sexual assault and harassment including coercive control and prostitution	Service users and staff	<ul style="list-style-type: none"> • Women, and men will be provided with different areas to sleep. • Waking night staff will ensure that sleep areas are monitored • Toilets will be locked and access will be via staff to minimise risks. • Service users to be risk assessed prior to referral and any identified risk issues to have a mitigation and management plan put in place. 	3	3	9	<ul style="list-style-type: none"> • All service users to receive a welcome and introduction from a staff member outlining the service offer and code of conduct (see attached) 	2	3	6	M

8.	Verbal abuse from others including hate speech	Service users and staff	<ul style="list-style-type: none"> Staff to receive 'dealing with aggression and violent behaviour' and de-escalation training 	3	2	6	<ul style="list-style-type: none"> All service users to receive a welcome and introduction from a staff member outlining the service offer and code of conduct (see attached) 	2	2	4	L
9.	Threats of violence and actual violence from others including risks of domestic violence and abuse	Service users and staff	<ul style="list-style-type: none"> Staff to receive 'dealing with aggression and violent behaviour' and de-escalation training Service users to be risk assessed prior to referral and any identified risk issues to have a mitigation and management plan put in place. 	3	4	12	<ul style="list-style-type: none"> All service users to receive a welcome and introduction from a staff member outlining the service offer and code of conduct (see attached) Staff to receive safeguarding training and be aware of the process for raising a safeguarding concern 	2	4	8	M
10.	Body fluid spills and associated risks of infection including blood borne infection	Service users and staff	<ul style="list-style-type: none"> PPE and body fluid spills kits to be provided Service to be dry, to limit the possibility of substance use and related blood spills All staff (including cleaning staff) to be trained in body fluid disposal and first aid 	3	3	9		3	3	9	S

11.	<p>Risk from dogs</p> <ul style="list-style-type: none"> • Risk of bites • Risk of parasitic infections • Allergy risk 	Service users and staff	<ul style="list-style-type: none"> • Only known dogs to be admitted to the nightshelter, any risk issues to be identified prior to admittance and a risk management plan to be put into place (e.g. dog and dog owner's sleep space to be further away from others if there is a known risk) • Where a service user or staff member has a known allergy appropriate PPE and risk management to be implemented. 	2	3	6	<ul style="list-style-type: none"> • Provision of street vets service 	2	2	4	L
12.	Burns from hot drinks	Service users and staff	<ul style="list-style-type: none"> • Drinks to be provided in a settled location • Staff and service users encouraged not to carry drinks with them • Hot drinks not provided to substance affected or drunk clients 	3	2	6					M
13.	<p>Physical ill health</p> <ul style="list-style-type: none"> • Sudden onset ill health • Worsening of a chronic condition 	Service users and staff	<ul style="list-style-type: none"> • Staff to be first aid trained • Senior staff on shift and senior staff on call for advice • Access to emergency services via 999 • Where a service user is known to be experiencing ill health this will form part of the risk assessment provided on referral and there will be a risk mitigation plan as part of this referral 	3	4	12	<ul style="list-style-type: none"> • Provision of in reach medical care – hostel nursing team – this will not manage sudden onset but may form part of a risk management plan 				S

14.	Risks of transmissible diseases including TB	Service users and staff	<ul style="list-style-type: none"> • Staff to be first aid trained • PPE to be provided • Where a service user is known to be unwell additional risk management to be implemented; Service users to be risk assessed prior to referral and any identified risk issues to have a mitigation and management plan put in place. 	2	3	6	<ul style="list-style-type: none"> • Provision of in reach medical care – hostel nursing team – this will not manage sudden onset but may form part of a risk management plan 			M	
15.	Medication – risks of others accessing prescription medication not prescribed to them, risk of others stealing medication not prescribed to them.	Service users and staff	<ul style="list-style-type: none"> • All service users to be offered a secure place to store their belongings including prescription medication 	3	4	12	<ul style="list-style-type: none"> • All service users to receive a welcome and introduction from a staff member outlining the service offer and code of conduct (see attached) 	2	4	8	M
16.	Mental ill health <ul style="list-style-type: none"> • Challenging or distressing behavioural presentations including voice hearing, delusion and suicidal ideation 	Service users and staff	<ul style="list-style-type: none"> • All staff to receive training in Mental Health Awareness • All staff to be provided with details of the out of hours numbers to access mental health support • Where a service user is known to be experiencing mental ill health/suicidal ideation additional risk management to be implemented; Service users to be risk assessed prior to referral and any identified risk issues to have a mitigation and management plan put in place. 	2	4	8	<ul style="list-style-type: none"> • Supervisory staff on site for each shift, and senior staff on call each night for advice and assistance • Provision of in-reach mental health care – MHHT This will not manage crisis care but may form part of a risk mitigation plan 	2	4	8	M

	Building/Premises Risk Assessment and impact on staff and service users		•				•				
	Please see separate fire risk assessment for more detail. Fire risk assessment has found suitable control measures are in place.		•				•				
	Slips, trips and falls <ul style="list-style-type: none"> Including where clients are substance affected 	Service users and staff	<ul style="list-style-type: none"> Floors are in good condition with no trip hazards identified Stairs are necessary to access the nightshelter areas <ul style="list-style-type: none"> Where a client has mobility needs there is a lift – but there would need to be a PEEP for any service user unable to exit during a fire Where a client is substance affected and may present as at risk of falling the lift should be used and consideration given to how to enable the client to exit in the event of a fire 	2	4	8	<ul style="list-style-type: none"> Provision of evacuation chairs All staff to be trained in the use of evacuation chairs 	1	4	4	M
	Building being accessed by others, e.g. non risk assessed service users, or known associates. There is an unalarmed fire exit that would allow access if someone inside opened the door.	Service users and staff	<ul style="list-style-type: none"> CCTV monitoring is available but cannot be manned constantly 	3	4	12	<ul style="list-style-type: none"> Installation of an alarm on the fire door 	1	4	4	M

	Service users accessing restricted areas of the building including access via unalarmed fire door and cupboard holding bi-fold doors	Service users and staff	<ul style="list-style-type: none"> • Cupboard to be locked • Lift to be held at the ground floor by staff to prevent service users accessing it without supervision • Bottom doors to the lobby to be locked (no negative impact on fire exit routes) • Lavatories to be locked and access gained via staff to minimise potential risk issues 	1	4	4	•					M
	Lavatory and bathing provision inadequate to meet needs	Service users and staff	<ul style="list-style-type: none"> • First floor entrance lobby has one male, one female and one disabled access lavatory – this is considered sufficient • There are no showers but this is not considered necessary 	1	1	1	<ul style="list-style-type: none"> • Request provision from Anti-freeze mobile shower unit to allow service users to bathe. This unit has been fully risk assessed and will also allow laundry facilities to be provided 					L
	Provision of food, <ul style="list-style-type: none"> • risks of food poisoning • risks of burns, injuries etc. during food preparation 	Service users and staff	<ul style="list-style-type: none"> • Pre-prepared food only to be offered from reputable supplier with a good score on the door • No hot food to be offered 	1	4	4	<ul style="list-style-type: none"> • All staff to complete food handling course 					M

	Staff experience undue stress leading to sickness/ill health	Staff	<ul style="list-style-type: none"> • Provision of a separate welfare and rest area in the lobby area (staff will be provided with food as they will be unable to leave the building during their shifts) • Staff to receive induction, including building induction, and training as outlined in the risk assessment to minimise staff stress • Staff to receive appropriate supervision from their line manager • Staff to service user ratio in line with good practice guidelines • Supervisor on each shift and senior staff member available on call • Effective communication to meet safety needs – including provision of a staff mobile telephone, walkie talkies with panic buttons and effective handover with Brighton Centre staff/staff on the following shift • Risk management in place including risk plans for each client, safe word for staff to alert others to risk 	3	3	9	<ul style="list-style-type: none"> • Reflective practice to be provided monthly to the staff team 	2	3	6	M
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			<ul style="list-style-type: none"> • After each serious incident, or near miss (e.g. a client expressing suicidal ideation, a challenging or aggressive client incident) staff members will be debriefed by the manager and offered appropriate support • Senior staff to update all client risk assessments and this risk assessment after any incident or near miss and review risk mitigation plans as necessary • Staff will all be trained on the use of BHCC Threat Response Process, Client of Concern register and Incident Reporting Procedure 				•				
	Staff to service user ratio falls below acceptable levels due to staff sickness (including staff becoming unwell whilst on shift) or failing to attend work	Staff	<ul style="list-style-type: none"> • On call Senior to have access to emergency on call bank staff and/or attend the building to meet staffing needs • Best practice guidelines on staff to service user ratio to be met at all times to allow breaks and sickness cover (i.e. minimum 3 staff overnight with additional staff for welcome and breakfast) 	3	3	9	<ul style="list-style-type: none"> • Increase minimum overnight staffing to 4 waking night staff to allow for breaks and staff sickness/non attendance • Close the building when the service cannot be safely staffed 	2	3	6	M

	Staff being at risk on leaving the building/locking up	Staff	<ul style="list-style-type: none"> No lone working to be allowed- staff to lock up together Where risk incidents have occurred and a staff member feels they will be at risk on leaving the building the on call manager to be called and the staff member offered a taxi or other support safely leaving work Any risks or threats to staff to be reported to the police 	2	3	6	•				
	Community Impact/Risk to Local Authority Reputation		•				•				
53	Clients who have not been referred to the service attending and wanting to gain access, presents as risk to staff, risk to community and risk to reputation	Staff, community and reputation of local authority	<ul style="list-style-type: none"> Message that access to the service is only via St. Mungo's referral to be widely disseminated Provision of SWEP at a lower threshold than the nationally required level Building to be appropriately staffed with well trained workers who are able to manage difficult situations 	3	3	9	<ul style="list-style-type: none"> All service users to receive a welcome and introduction from a staff member outlining the service offer and code of conduct (see attached) Where a referred client is in breach of the code of conduct they may be asked to leave/denied entry with the agreement of the on call manager 	2	3	6	M

	Anti-social behaviour/noise nuisance from service users or known associates	Staff, service users, community and reputation of local authority	<ul style="list-style-type: none"> • Message that access to the service is only via St. Mungo's referral to be widely disseminated • The location of the building is not near residential areas, and is in an area of high night-time economy activity – any noise is likely to be within normal parameters for the area • Effective doorstep management policy in place • Good communication with the BHCC Anti-Social Behaviour Team for support and advice 	2	3	6	<ul style="list-style-type: none"> • All service users to receive a welcome and introduction from a staff member outlining the service offer and code of conduct (see attached) • Where a referred client is in breach of the code of conduct they may be asked to leave/denied entry with the agreement of the on call manager 				M
	Known associates of service users or others rough sleeping in the immediate area	Staff, service users, community and reputation of local authority	<ul style="list-style-type: none"> • Message that access to the service is only via St. Mungo's referral to be widely disseminated • Provision of SWEP at a lower threshold than the nationally required level • Effective doorstep management policy in place • Good communication with the BHCC Anti-Social Behaviour Team for support and advice 	3	3	9	<ul style="list-style-type: none"> • All service users to receive a welcome and introduction from a staff member outlining the service offer and code of conduct (see attached) • Where a referred client is in breach of the code of conduct they may be asked to leave/denied entry with the agreement of the on call manager 	2	3	6	M
	Negative engagement with the local press and/or local campaign groups	Staff, service users, community and reputation of local authority	<ul style="list-style-type: none"> • Proactive engagement with the press via the Communications Team • Positive engagement with local campaign groups by T4DC and The Passage Charity Link worker 	3	3	9	<ul style="list-style-type: none"> • Open day event to invite the press and members of the community to attend the nightshelter • Recruitment and engagement of volunteers from the community 	2	3	6	M

			•				•			
			•				•			

