

# REGULATORY REFORM (FIRE SAFETY) ORDER 2005

## PERIODIC REVIEW OF FIRE RISK ASSESSMENT

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Responsible person (e.g. employer) or person having control of the premises: *Graham Care Group*

Address of premises: *Hazeldene House Nursing Home  
and Care Suites  
Romford Road  
PEMBURY  
Kent  
TN2 4AY*

Tel: *018 9282 3018*

Person(s) consulted: *Mrs L Cousins (Registered Manager)  
Mr A Rabbitt (Maintenance)*

Assessor: *Steve Woodford GFireE MIFPO  
Institution of Fire Engineers  
Registered Assessor.*

Date of this fire risk assessment review: *11 April 2016*

Date of last fire risk assessment review: *31 March 2015*

Date of previous fire risk assessment: *31 March 2015*

Suggested date for review<sup>9)</sup>: *11 April 2017*

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

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<sup>9)</sup> The original fire risk assessment should be reviewed again by a competent person by the date indicated above or at such earlier time as there is reason to suspect that it is no longer valid or if there has been a significant change in the matters to which it relates, or if a fire occurs.

## GENERAL INFORMATION

1. Significant changes identified since the time of the previous fire risk assessment in respect of:
  - 1.1 The premises:  
*None*
  - 1.2 The occupancy:  
*None*
  - 1.3 The occupants (including occupants especially at risk from fire):  
*No change.*  
*Residents: Registered – 80 (eighty)*  
*Staff: Day - 30 (thirty) Night – 9 (Nine) Total – 70 (seventy)*
  - 1.4 Fire loss experience:  
*None.*
  - 1.5 Application of fire safety legislation:  
*The Regulatory Reform (Fire Safety) Order 2005 enforced by Kent Fire and Rescue Service.*
  - 1.6 Other relevant information:  
*Premises registered under Health and Social Care Act 2008 enforced by Care Quality Commission.*

## FIRE HAZARDS AND THEIR ELIMINATION OR CONTROL

2. Significant changes in measures to prevent fire since the time of the fire risk assessment:  
*None necessary since previous risk assessment*

3.1 Are there adequate measures to prevent fire? Yes  No

3.2 Comments and hazards observed:  
***Mains electrical installation – New build 2012.***  
***It is recommended that a full inspection and test is carried out by a competent electrical engineer every five years.***

***Portable appliance testing – Ongoing.***  
***Kitchen – 6 monthly***  
***All other areas – Annually.***

4.1 Are housekeeping and maintenance adequate? Yes  No

4.2 Comments and deficiencies observed:  
***Satisfactory***

## FIRE PROTECTION MEASURES

5.1 Significant changes in fire protection measures since the time of the fire risk assessment:  
***None***

6.1 Are the means of escape from fire adequate? Yes  No

6.2 Comments and deficiencies observed:  
***The means of escape arrangements provided are satisfactory however refer to Pages 8 and 9 regarding management and maintenance.***

7.1 Are compartmentation and linings satisfactory? Yes  No

7.2 Comments and deficiencies observed:  
***Generally satisfactory however refer to Page 8 and 9 regarding management and maintenance.***

8.1 Is there reasonable emergency escape lighting? <sup>10)</sup> Yes  No

8.2 Comments and deficiencies observed:  
***Self-contained battery luminaires appearing to conform to British Standard 5266: Part 1.***

9.1 Are there adequate fire safety signs and notices? Yes  No

9.2 Comments and deficiencies observed:  
***Generally satisfactory however refer to Pages 8 and 9 for comment.***

***All signs and notices conform to the Health and Safety (Safety Signs and Signals) Regulations 1996.***

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<sup>10)</sup> Based on visual inspection only.

10.1 Are the means of giving warning of fire adequate? <sup>11)</sup> Yes  No

10.2 Comments and deficiencies observed:

***The fire alarm is an analogue addressable system appearing to conform to British Standard 5839: Part 1 comprising sounders, manual call points.***

***The automatic detection coverage appears to meet a Category L1 standard.***

11.1 Is the provision of fire extinguishing appliances adequate? Yes  No

11.2 Comments and deficiencies observed:

***Satisfactory provision***

12.1 Comments on other fixed fire protection systems?

***None***

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<sup>11)</sup> Based on visual inspection only.

## MANAGEMENT OF FIRE SAFETY

- 13.1 Significant changes in management of fire safety since the time of the fire risk assessment:

*Staff fire training provider to be confirmed.*

*Fire safety managed by Mrs L Cousins – Registered Manager  
Firesure UK Limited appointed to carry out fire risk assessment.*

*< > appointed to deliver staff fire safety training.*

*Southern Care Maintenance appointed to service and maintain fire systems and portable fire fighting equipment.*

- 14.1 Are arrangements for management of fire safety adequate?

Yes  No

Comments and deficiencies observed:

*Refer to Page 7 Item 18.2.*

- 15.1 Are fire procedures adequate?

Yes  No

Comments and deficiencies observed:

*Personal Emergency Evacuation Plans (PEEPs) are in place for all residents that would require assistance in the event of a fire evacuation.*

*Portable evacuation equipment is provided.*

*Should you wish to consider alternative equipment I would recommend that you consider Albac Mats and Ski Pads.*

*The number required would be based upon the number of residents in each compartment, the level of assistance required and the target evacuation time.*

*Equipment may be sited within stairs or adjacent the fire alarm control panel.*

*It is recommended that the time taken to evacuate residents from a fire affected area should be re-assessed at regular intervals. This should take account of worse case scenario ie.*

*Minimum staffing levels and residents asleep to ensure that the effected area can be evacuated within a reasonable period of time.*

*Using the principal of progressive evacuation a reasonable period of time for these premises is 5-8 minutes.*

16.1 Are the arrangements for staff training and fire drills adequate? Yes  No

16.2 Comments and deficiencies observed:

*Although not available for audit it is understood that all staff receive two levels of training. One delivered by an external trainer and the other via an e-learning programme.*

*Individual members of staff should receive the training at 6 monthly intervals.*

*Regular fire drills are carried out. Each member of staff should take part in at least one fire drill annually.*

17.1 Are the arrangements for testing and maintenance of fire protection systems and equipment adequate? Yes  No

17.2 Comments and deficiencies observed:

*In general satisfactory, however refer to 18.2 below.*

18.1 Are there adequate records of testing, maintenance, training and drills? Yes  No

18.2 Comments and deficiencies observed:

*Fire alarm –*

*Tested weekly.*

*Tested and examined by a fire alarm engineer every 6 months.*

*Emergency lighting -*

*Tested monthly.*

*Tested and examined by an emergency lighting contractor at least annually.*

*Training - Each member of staff should receive fire safety training every six months.*

*Drills – Refer to 16.2 above*

*Drill Records – 14 April 2015 – 24 staff attended. 20 January 2016 x2 drills – 43 staff attended.*

*Fire doors – To be tested and examined at regular intervals. Recommended monthly.*

*Portable fire fighting equipment – Tested and examined by contractor annually.*

*Examined ‘in house’ – Recommended monthly.*

*Internal means of escape routes including final exit doors – Recommended weekly.*

*External escape routes – Recommended weekly.*

*The fire safety log record should record all relevant information.*

## FIRE RISK ASSESSMENT

On the basis of the criteria set out in the original fire risk assessment, it is considered that the current risk to life from fire at these premises is:

Trivial  Tolerable  Moderate  Substantial  Intolerable

## ACTION ON PREVIOUS ACTION PLAN

Have all previous recommendations been satisfactorily addressed?

Yes

No

Brief details of recommendations not yet implemented.

*Reference the 2014 and 2015 fire risk assessments.*

*There are a number of outstanding items that require immediate attention.*

*Unless a revised completion date has been entered in the document these items should be addressed as a matter of urgency.*

*Please contact me should you wish to discuss this matter further.*



## NEW ACTION PLAN

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

Trivial

Tolerable

Definition of priorities (where applicable):

*Priority 1 – to be completed as soon as reasonably practicable.*

*Priority 2 – to be completed within 3 months.*

*Priority 3 – to be completed within 6 months*

*The above time-scales are recommendations only. Should you wish to set alternative completion dates the assessor would be pleased to discuss the matter further and offer advice.*

	Priority (where applicable)	Action by whom	Date action taken
<i>Basement</i>			
<i>1. Reference the fire door to the kitchen. The self-closing device should be re-instated immediately.</i>	<i>1</i>		
<i>Lower Ground</i>			
<i>2. Reference the fire doors to the linen room adjacent Room 2. One of the doors requires attention so as to close over the carpet.</i>	<i>1</i>		
<i>3. Reference the fire door to the sluice room. Sections of the cold smoke seals fitted to the door/frame are ineffective and should be replaced.</i>	<i>3</i>		
<i>Ground Floor</i>			
<i>4. Reference the fire doors to the linen room adjacent Room 29. Sections of the cold smoke seals fitted to the door/frame are ineffective and should be replaced.</i>	<i>3</i>		
<i>5. Reference the cross corridor fire doors adjacent Room 55. The doors require attention so as to close fully on to the door stops.</i>	<i>1</i>		
<i>First Floor</i>			
<i>6. Reference the fire door to the stair opposite Room 74. Sections of the cold smoke seals fitted to the door/frame are ineffective and should be replaced.</i>	<i>3</i>		

