FRANKHAM RMS

Fire Risk Assessment

Hazeldene House

Romford Road

Pembury

Kent TN2 4AY

16th April 2021

Fire Risk Assessment Report

Date of Assessment	16/04/2021
Fire Risk Assessment strategic review frequency	Annual due 16/04/2022
Name of Assessor	Helen Dillon Tier 3 (NAFRAR) 2021, MIFSM CFPA Europe Dip
Building	Hazeldene House
Address	Hazeldene House, Romney Road, Pembury, Kent TN2 4AY

** The periodic review is subject to the risk remaining the same as that encountered at the time of this assessment, if the risk changes then a review may be required earlier than the date given above.*


Applicable Fire Safety Legislation:

The Regulatory Reform (Fire Safety) Order 2005 (RRO)

UPRN: NA

Contents

Building Description and Use

Building Use	
What are the premises used for?	Residential Care Home.
Type of occupancy (single or multiple)	Single.
Days and hours of which building is in use and any out of hours activities that take place?	24 hours a day, 7 days a week.
Approximate maximum number of occupants	81 residents.
Approximate maximum number of employees at any one time	12 Carers & 3 Nurses during the day shift. 6 Carers & 3 Nurses during the night shift. Other employees during daytime/normal working hours – 3 x housekeeping, 1 x laundry, 3 x kitchen staff, 1 x maintenance, 3 x activities staff, 1 sales, 1 home manager , 1 deputy manager and 1 admin.
Approximate maximum number of members of the public at any one time	Number of visitors unknown, currently at low levels due to COVID restrictions.
Number of fire wardens / fire marshals on site	All staff have been provided with fire safety training and would carry out appropriate fire warden roles in accordance with the local procedures.
Are occupants familiar with the layout?	Staff are familiar, residents would be accompanied if necessary.
Is the premises used by people whose mobility/hearing/cognition maybe impaired?	Residents may suffer from physical frailty or dementia/mental illness.
Are the premises used for sleeping accommodation?	Yes.
Are young persons employed within the premises?	No.
Are there any occupants working in remote areas of the workplace, or working outside normal operating hours?	No.
Evacuation Strategy – e.g. phased, simultaneous etc.	Phased Evacuation.
The Responsible Person is Hazeldene House Manager (Alison Purkiss). The identity of the person who has responsibility for fire safety at the premises and the identity of the competent person appointed by Hazeldene House to assist them to undertake the preventative and protective measures was Mihai Cazacu (Maintenance).	

Building Description	
Age of Building	Approximately 8 years old.
Brief details of construction	Brick and concrete constructed four storey (including basement level) building with a pitched roof.
Approximate area in sqm of building footprint	Unknown
Description of layout (include number of fire exits & stairs etc)	The main entrance is located centrally with bedrooms, and lounges on each floor. There is also a hairdressers (shut at the time of the assessment) and various offices. The basement also contains the kitchen, laundry, plant room, staff room and toilets and a day centre (also closed at the time of the assessment) is located on the lower ground floor. The stairs at either end of the building cover lower ground floor, ground and first floor levels, the central stair covers the lower ground floor, ground and first floor as well as the basement. Exits are available to open air at ground, lower ground and basement levels. Exits are also available from the lounge on the lower ground floor leading onto a secure decked area, staff have keys to the gate to the ramp area, staff also have keys for other exits which are kept locked for resident's safety.
Number of floors ground and above	3 (including lower ground level)
Number of floors below ground	1
State parts of building assessed – detail areas not assessed/visited and reason(s)	All areas were included.
Date of previous FRA and are all actions complete and signed off?	20th May 2019, no actions raised.

Findings of the Fire Risk Assessment

Recommendations

This section comments on those aspects of the assessment identified in the main body of the report as requiring attention. It is recommended that the following recommendations are implemented:

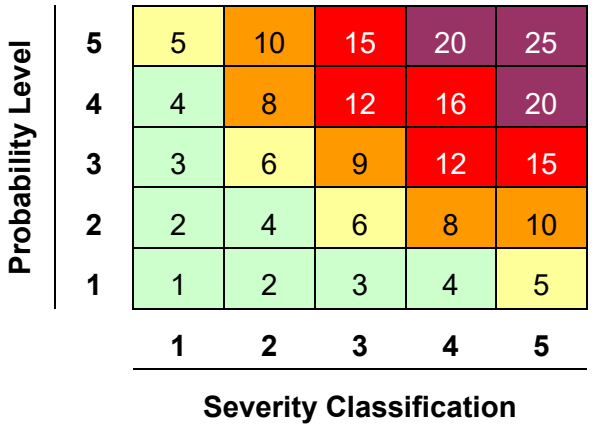
Qu Ref	Priority	Issue and recommendation	Action by whom	Date action taken
14.1	P2	There was evidence of the use of expanding foam in the plant room and some small gaps around the conduit containing the cabling in some of the electrical cupboards. ***It should be confirmed that the foam used in the plant room will provide adequate fire stopping for it's application, alternatively fire rated batt should be used, it should also be ensured that appropriate intumescent collars have been fitted where applicable. It should also be ensured that appropriate fire stopping is in place where electrical cables pass through floor levels. All fire stopping should be carried out by an appropriately accredited company with certification provided.***		
20.3	P2	The fire procedures state that staff report to the fire alarm panel and the duty manager dispatches 2 staff members to the location of the fire to carry out an evacuation if necessary. Other homes have adopted slightly different procedures which involve staff in resident's areas reporting to the nurse's offices. Walkie talkies have been provided by the fire alarm panel and to the nurse's offices, kitchen, laundry and any other areas that are remote from the main fire alarm panel. This enables the duty manager/person at the main fire alarm panel to identify the location of the activation from the panel and issue instructions immediately depending on the location of the fire. This is considered to be a very effective way of responding to a fire alarm and allocating appropriate resource to the relevant area quickly. ***Consideration should be made to adopting a procedure similar to this in this building.***		

Qu Ref	Priority	Issue and recommendation	Action by whom	Date action taken
20.9	P2	No Personal Emergency Evacuation Plans were provided at the time of the assessment. ***Personal Emergency Evacuation Plans should be provided to identify resident's specific evacuation needs. It is recommended that a RAG (red, amber, green) system be adopted with a red rating for residents requiring physical support from two or more members of staff, amber for those requiring one staff member's physical assistance and green for any residents that may only need verbal prompting or indeed no additional support at all. This will help to ensure that appropriate staffing/occupancy levels are maintained in order to enable progressive horizontal evacuation to take place if required.***		
20.9	P2	Whilst during the day it is likely that there will be sufficient numbers of staff present to begin the progressive horizontal evacuation process should it become necessary, it is not clear if sufficient staff will be present during the night shift. ***It is recommended that site specific training be organised to carry out a role play of fires in certain locations within the building during a night shift so that staff can confirm that the procedures are appropriate and that there are sufficient staffing/occupancy levels to enable this. Please note that current guidance requires a compartment to be evacuated of all residents within 2.5 minutes.***		
22.3	P2	Last monthly emergency lighting test 24/3/21. 33 lights were identified as not working. ***It should be ensured that any failures identified in the monthly emergency lighting tests are replaced.***		
22.3	P2	There was no evidence provided to confirm that a 3 hour annual discharge has been undertaken of the emergency lighting. ***It should be confirmed that the emergency lighting has had a 3 hour discharge test within the last 12 months in accordance with BS5266.***		

Note: The significant findings are considered to be the whole of this fire risk assessment, including all commentary made in the respective sections of the document. Those items that have been identified as requiring remedial action in order to reduce the risk to life or serious injury to as low as reasonably practicable, within and around the building, will be listed in the action plan above.

Fire Risk Rating Matrix

The following risk rating matrix is used to enable semi-quantification of the itemised fire safety deficiencies (hazards) that were found during the recent survey of the premise.



The matrix allows the identified significant fire hazards to be classified in terms of the harmful or unwanted consequences (severity) that the hazard would cause, if it were to occur and also the likelihood (probability) that such harm will occur. These factors are considered with due regard to the existing fire safety features and procedures (controlling measures), which are either incorporated within the building design or procedurally implemented within the premise.

Severity Classification		
Class	Degree	Consequence
1	Minor	No serious injuries; little or no damage to property
2	Moderate	Injury/s not requiring hospitalisation; remedial work required to property
3	Serious	Injury/s requiring hospitalisation; significant damage to property
4	Major	Permanent injury/s or disablement; major damage to property
5	Catastrophic	One or more fatalities; total loss of property

Probability Level		
Level	Degree	Probability of Exposure to Harm
1	Improbable	No known instances of such an event occurring
2	Remote	Unlikely to occur, but still possible
3	Occasional	Likely to occur at some stage in the foreseeable future
4	Probable	Likely to occur frequently or within 1 year
5	Almost certain	Very likely to occur frequently and/or in the near future unless actively prevented

The product of the severity and probability factors will equate to a specific risk rating for each identified hazard. The following band matrix can then be used to assign a comparative degree of risk (Very Low, Low, Medium High or Very High) to each individual fire safety deficiency. This will assist in determining the extent of any necessary additional controlling measures, as well as the timescale in which an action should be formulated by Graham Care Group to address issues identified.

The table below provides timescales for remedial action proportionate to the risk.

Degree of Risk	Risk Rating Score	Priority Level for Action	Timescales to Review & Formulate Management Action Plan for Remedial Action
Very High	20 to 25	P1X	Immediate
High	12 to 16	P1	Within 2 weeks
Medium	8 to 10	P2	Within 1 month
Low	5 to 6	P3	Within 3 months
Very Low	1 to 4	P4	Within 6 months

Identification of People at Risk

People at Risk							
1.1	Any particular user group at risk?			Yes	☑	No	☐
1.2	Are there any employees or contractors working in remote areas of the workplace?			Yes	☐	No	☑
1.3	Is the building used for sleeping purposes?			Yes	☑	No	☐
1.4	Are there people whose mobility is impaired?	Unknown	☐	Yes	☑	No	☐
1.5	Have people been identified to assist mobility impaired people leave the site?	N/A	☐	Yes	☑	No	☐
1.6	Are there people who have visual or hearing impairments?	Unknown	☑	Yes	☐	No	☐
1.7	Are there people with cognitive impairments?	Unknown	☐	Yes	☑	No	☐
1.8	Are there elderly or young children?	Unknown	☐	Yes	☑	No	☐
1.9	Is the building occupied by people familiar with the layout?			Yes	☑	No	☐
1.10	Is the building occupied by manageable numbers of staff / visitors?			Yes	☑	No	☐
	Comments: As a residential care home the residents would be considered to be at risk. Generic Emergency Evacuation Plans are included in the emergency evacuation plan. It is considered that there are sufficient staff present to be able to assist with a phased evacuation should it become necessary, however see 20.9.						

Fire Hazards and their Elimination or Control

Electrical Sources of Ignition						
2.1	Reasonable measures taken to prevent fires of electrical origin?			Yes	☑	No ☐
2.2	Suitable policy regarding the use of personal electrical appliances?	N/A	☐	Yes	☑	No ☐
2.3	Suitable limitation of trailing leads and adapters?	N/A	☐	Yes	☑	No ☐
2.4	Fixed wiring installation testing undertaken?			Yes	☑	No ☐
	Comments: Electrical sources of ignition were well maintained, PAT testing had been completed on all equipment inspected in October 2020 and the hard wiring installation inspection was undertaken on 01/05/2018 and found to be satisfactory.					

Smoking						
3.1	Was there evidence of clandestine smoking or disused smoking materials in the public parts of the premise?			Yes	☐	No ☑
3.2	Are smoking bins provided externally? If yes are they regularly emptied?			Yes	☐	No ☑
	Comments: No smoking site, no issues identified with current occupancy profile.					

Portable Heaters and Heating Installations						
4.1	Is there naked flame, portable heaters or radiant heaters in use? If yes, specify			Yes	☐	No ☑
4.2	Are suitable measures taken to minimise the hazard of ignition from the use of portable heaters?	N/A	☐	Yes	☑	No ☐
	Comments: The use of any portable heaters would be minimised and subject to management control.					

Lightning Protection						
5.1	Is there a lightning protection system; if so, are records available to confirm that is routinely checked?			Yes	☐	No ☑
	Comments: No lightning protection noted.					

Cooking						
6.1	Are reasonable measures taken to prevent fires as a result of cooking?	N/A	☐	Yes	☑	No ☐
6.2	Are filters changed and ductwork cleaned regularly?	N/A	☐	Yes	☑	No ☐
6.3	Suitable extinguishing appliances available?	N/A	☐	Yes	☑	No ☐
	Comments: The kitchen staff are suitably trained and it is understood that a contract is in place for the annual deep clean, however no records were seen at the time of the assessment. Appropriate extinguishers and automatic detection provided in the kitchen.					

Fire History & Arson								
7.1	Has there been a history of fire incidents in the building?	Unknown	☐	Yes	☐	No	☑
7.2	Does basic security against arson by outsiders appear reasonable?			Yes	☑	No	☐
7.3	Is there an absence of unnecessary fire load in close proximity to the building or available for ignition by outsiders?			Yes	☑	No	☐
	Comments: No known incidents of fire. Secure building with no unnecessary fire load in close proximity to the building.						

Housekeeping							
8.1	Is the standard of housekeeping adequate?			Yes	☑	No	☐
8.2	Combustible materials appear to be separated from ignition sources?			Yes	☑	No	☐
8.3	Avoidance of unnecessary accumulation of combustible materials or waste?			Yes	☑	No	☐
8.4	Appropriate storage of hazardous/flammable materials?	N/A	☑	Yes	☐	No	☐
8.5	Avoidance of inappropriate storage of combustible materials?			Yes	☑	No	☐
8.6	Are all escape routes clear of combustible materials?			Yes	☑	No	☐
8.7	Is there any upholstered furniture located in the premises and if so; is there evidence to indicate that it complies with the Furniture and Furnishings (Fire) (Safety) Regulations 1988 (as amended in 1989 and 1993)?	N/A	☐	Yes	☑	No	☐
	Comments: All areas were clear at the time of the assessment with no significant issues noted.						

Hazards Introduced by Outside Contractors and Building Works								
9.1	Are fire safety conditions imposed on outside contractors?	Unknown	☐	Yes	☑	No	☐
9.2	Is there satisfactory control over works carried out on the premises by outside contractors (including “hot work” permits)?	Unknown	☐	Yes	☑	No	☐
9.3	If there are in-house maintenance personnel, are suitable precautions taken during “hot work”, including use of “hot work” permits?	NA	☐	Yes	☑	No	☐
	Comments: Most maintenance carried out internally with any contractors managed appropriately.							

Dangerous Substances								
10.1	Are the general fire precautions adequate to address the hazards associated with dangerous substances used or stored within the premises?	N/A	☐	Yes	☑	No	☐
10.2	If so, has a specific risk assessment been carried out, as required by the Dangerous Substances and Explosive Atmospheres Regulations 2002?	N/A	☐	Yes	☑	No	☐
	Comments: Currently no oxygen in use.							

Other Significant Fire Hazards That Warrant Consideration								
11.1	Other significant fire hazards that warrant consideration including process hazards that impact on general fire precautions?			Yes	☐	No	☑
11.2	Are processes carried out which give rise to a significant fire risk?			Yes	☐	No	☑
	Comments: None noted.							

Fire Protection Measures

Means of Escape from Fire						
12.1	It is considered that the building is provided with reasonable means of escape in case of fire.			Yes ☑	No ☐	
	More specifically:					
12.2	Adequate design of escape routes?			Yes ☑	No ☐	
12.3	Adequate provision of exits?			Yes ☑	No ☐	
12.4	Exits easily and immediately openable where necessary?			Yes ☑	No ☐	
12.5	Fire exits open in direction of escape where necessary?	N/A	☐	Yes ☑	No ☐	
12.6	Avoidance of sliding or revolving doors as fire exits where necessary?	N/A	☐	Yes ☑	No ☐	
12.7	Satisfactory means for securing exits?			Yes ☑	No ☐	
12.8	Reasonable distances of travel where there is a single direction of travel?	N/A	☐	Yes ☑	No ☐	
12.9	Reasonable distances of travel where there are alternative means of escape?	N/A	☐	Yes ☑	No ☐	
12.10	Suitable protection of escape routes?			Yes ☑	No ☐	
12.11	Suitable fire precautions for all inner rooms?	N/A	☐	Yes ☑	No ☐	
12.12	Escape routes unobstructed?			Yes ☑	No ☐	
12.13	Is adequate ventilation provided to secure the means of escape?	N/A	☐	Yes ☑	No ☐	
12.14	Are excessively long corridors appropriately sub divided with fire resisting construction?	N/A	☐	Yes ☑	No ☐	
12.15	It is considered that the building is provided with reasonable arrangements for means of escape for disabled occupants.	N/A	☐	Yes ☑	No ☐	
	Comments: The building is divided into different compartments which are used for phased evacuation. Staff will move residents from one compartment to another as necessary to get residents away from an affected area into a safe area in a neighbouring compartment. Should a full evacuation become necessary there are a number of exits available from the lower ground floor, ground floor and basement levels. Secure exit doors are openable by staff. The routes are all protected by fire rated doors.					

Emergency Escape Lighting								
13.1	Reasonable standard of emergency escape lighting system provided?	N/A	☐	Yes	☑	No	☐
13.2	Is reasonable external emergency lighting provided?	N/A	☐	Yes	☑	No	☐
	Comments: Emergency lighting provided throughout, from a visual inspection appeared to conform with BS5266.							

Measures to Limit Fire Spread and Development

Measures to Limit Fire Spread and Development						
14.1	Is compartmentation of a reasonable standard?		Yes	☐	No	☐
14.2	Reasonable limitation of linings that might promote fire spread?		Yes	☑	No	☐
14.3	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?	N/A ☑	Yes	☐	No	☐
14.4	From a visual inspection, do structural elements appear to be adequately protected to maintain fire resistance?		Yes	☑	No	☐

Comments:

From a visual inspection compartmentation appeared to be adequate.

14.1 There was evidence of the use of expanding foam in the plant room and some small gaps around the conduit containing the cabling in some of the electrical cupboards.

It should be confirmed that the foam used in the plant room will provide adequate fire stopping for it's application, alternatively fire rated batt should be used, it should also be ensured that appropriate intumescent collars have been fitted where applicable. It should also be ensured that appropriate fire stopping is in place where electrical cables pass through floor levels. All fire stopping should be carried out by an appropriately accredited company with certification provided.

The loft area was accessed in one side of the building, plans were provided which confirmed that compartmentation lines for the main compartments extended into the roof void above the main compartment zones. The compartmentation around the individual bedrooms had not been extended into the roof area.

Flat entrance Doors						
15.1	Are existing flat entrance doors adequate?			Yes	☑	No ☐
15.2	Are fire resisting self-closing doors functioning correctly?			Yes	☑	No ☐
15.3	Are there any security gates/grilles fitted? If so can they be opened from the inside without the use of a key and can they be breached by the fire service in under three minutes using hand held equipment?			Yes	☐	No ☑
	Comments: All bedroom doors are appropriately fire rated and are provided with self- closing/hold open devices linked into the fire alarm system.					

Communal Fire Doors (Cross Corridor and Riser)						
16.1	Are existing fire doors adequate?	N/A	☐	Yes	☑	No ☐
16.2	Are fire resisting self-closing doors unobstructed and functioning correctly?	N/A	☐	Yes	☑	No ☐
16.3	Are fire doors held open by devices linked to alarm system?	N/A	☐	Yes	☑	No ☐
16.4	Are non-self-closing fire doors kept locked when not in use?	N/A	☐	Yes	☑	No ☐
	Comments: All communal fire doors, including riser cupboards doors provided adequate fire resistance, those on hold open devices are tested weekly to ensure that they close fully into their frames.					

Fire Safety Signs and Notices

Fire Safety Signs and Notices								
17.1	Are suitable and sufficient exit and directional signs in place?	N/A	☐	Yes	☑	No	☐
17.2	Are internal fire doors and escape doors provided with appropriate fire signage?	N/A	☐	Yes	☑	No	☐
17.3	Is there suitable and sufficient signage to passive and active firefighting systems?	N/A	☐	Yes	☑	No	☐
17.4	Is there suitable external signage on external exit routes?	N/A	☐	Yes	☑	No	☐
17.5	Are clear fire action notices displayed and are they in accordance with the recommended evacuation strategy?	N/A	☐	Yes	☑	No	☐
	Comments: Appropriate signage provided throughout.						

Means of Giving Warning in Case of Fire

Means of Giving Warning in Case of Fire								
18.1	Reasonable manually operated electrical fire alarm system provided?	N/A	☐	Yes	☑	No	☐
18.2	Is automatic fire detection provided and if so, is it provided throughout the premises or part of the premises?	N/A	☐	Yes	☑	No	☐
18.3	Extent of automatic fire detection generally appropriate for the occupancy and fire risk?	N/A	☐	Yes	☑	No	☐
18.4	Remote transmission of alarm signals	N/A	☐	Yes	☐	No	☑
18.5	Is a zone plan displayed adjacent to the fire alarm panel and are the zones in line with compartment lines?	N/A	☐	Yes	☑	No	☐
	Comments: An addressable L1 category fire alarm system had been provided. Staff would call the fire service in the event of a fire occurring.							

Fire-Fighter Access and Fire-Fighting Equipment

Fire Fighter Access & Fire-Fighting Equipment								
19.1	Is the building provided with adequate vehicular access for firefighter deployment?	N/A	☐	Yes	☑	No	☐
19.2	Is the building provided with fire brigade drop key access?	N/A	☐	Yes	☐	No	☑
19.3	Is the building's drop key access functional?	N/A	☑	Yes	☐	No	☐
19.4	Reasonable provision of portable fire extinguishers suitable for the purpose?	N/A	☐	Yes	☑	No	☐
19.5	Are hose reels provided?	N/A	☐	Yes	☐	No	☑
19.6	Are there sprinklers or other fixed suppression systems?	N/A	☐	Yes	☐	No	☑
19.7	Is there any other fixed installation? e.g. dry rising mains, ventilation systems etc.	N/A	☐	Yes	☐	No	☑
	Comments: Appropriate access for fire fighters into the car park area, appropriate fire extinguishers provided.							

Management of Fire Safety

Procedures and Arrangements								
20.1	Competent person(s) appointed to assist in undertaking the preventive and protective measures (i.e. relevant general fire precautions)?			Yes	☑	No	☐
20.2	Is there a suitable record of the fire safety arrangements?			Yes	☑	No	☐
20.3	Appropriate fire procedures in place?			Yes	☑	No	☐
20.4	Are procedures in the event of fire appropriate and properly documented?			Yes	☑	No	☐
20.5	Are there suitable arrangements for summoning the fire and rescue service?			Yes	☑	No	☐
20.6	Is the building provided with a Premises Information Box (PIB)?	N/A	☐	Yes	☐	No	☑
20.7	Are there suitable arrangements for ensuring that the premises have been evacuated?	N/A	☐	Yes	☑	No	☐
20.8	Is there a suitable fire assembly point(s)?	N/A	☐	Yes	☑	No	☐
20.9	Are there adequate procedures for evacuation of any disabled people who are likely to be present?	N/A	☐	Yes	☐	No	☑
20.10	Persons nominated and trained to assist with evacuation, including evacuation of disabled people?	N/A	☐	Yes	☑	No	☐
20.11	Appropriate liaison with fire and rescue service (e.g. by fire and rescue service crews visiting for familiarization visits)?			Yes	☑	No	☐
20.12	Routine in-house inspections of fire precautions (e.g. in the course of health and safety inspections)?			Yes	☑	No	☐
20.13	Are suitable systems in place for reporting and subsequent restoration of safety measures that have fallen below standard?			Yes	☑	No	☐

Procedures and Arrangements

Comments:

This property has good fire safety management systems in place.

The fire procedures state that staff report to the fire alarm panel and the duty manager dispatches 2 staff members to the location of the fire to carry out an evacuation if necessary. Other homes have adopted slightly different procedures which involve staff in resident's areas reporting to the nurse's offices. Walkie talkies have been provided by the fire alarm panel and to the nurse's offices, kitchen, laundry and any other areas that are remote from the main fire alarm panel. This enables the duty manager/person at the main fire alarm panel to identify the location of the activation from the panel and issue instructions immediately depending on the location of the fire. This is considered to be a very effective way of responding to a fire alarm and allocating appropriate resource to the relevant area quickly.

Consideration should be made to adopting a procedure similar to this in this building.

No Personal Emergency Evacuation Plans were provided at the time of the assessment.

Personal Emergency Evacuation Plans should be provided to identify resident's specific evacuation needs. It is recommended that a RAG (red, amber, green) system be adopted with a red rating for residents requiring physical support from two or more members of staff, amber for those requiring one staff member's physical assistance and green for any residents that may only need verbal prompting or indeed no additional support at all. This will help to ensure that appropriate staffing/occupancy levels are maintained in order to enable progressive horizontal evacuation to take place if required.

Whilst during the day it is likely that there will be sufficient numbers of staff present to begin the progressive horizontal evacuation process should it become necessary, it is not clear if sufficient staff will be present during the night shift.

It is recommended that site specific training be organised to carry out a role play of fires in certain locations within the building during a night shift so that staff can confirm that the procedures are appropriate and that there are sufficient staffing/occupancy levels to enable this. Please note that current guidance requires a compartment to be evacuated of all residents within 2.5 minutes.

The fire service attended the site on 17/09/2019 and were satisfied with the fire safety measures in place at the time of the visit.

Regular health and safety inspections are undertaken annually, last inspection August 2020.

Training and Drills								
21.1	Are all staff given adequate fire safety instruction and training on induction?			Yes	☑	No	☐
21.2	Are all staff given adequate periodic "refresher training" at suitable intervals?			Yes	☑	No	☐
21.3	Are staff with special responsibilities (e.g. fire wardens) given additional training?	N/A	☐	Yes	☑	No	☐
21.4	Are fire drills carried out at appropriate intervals?	N/A	☐	Yes	☑	No	☐
	Comments: All staff are provided with regular training including using the evacuation sledges. The fire alarm was activated on 23/02/2021 by burning toast, appropriate procedures were followed, however care staff stayed in the nursing areas. Although this is not in accordance with the current procedures please refer to section 20 regarding amending these procedures. Should there have been a need to begin evacuating these areas, the carers were already in place to begin the process. 6 fire drills are currently being undertaken each year to confirm fire procedures are understood by all staff, a night time drill was also undertaken on 3/2/2021.							
21.5	When the employees of another employer work in the premises: Is their employer given appropriate information (e.g. on fire risks and general fire precautions)?	N/A	☐	Yes	☑	No	☐
21.6	When the employees of another employer work in the premises: Is it ensured that the employees are provided with adequate instructions and information?	N/A	☐	Yes	☑	No	☐
21.7	Are persons nominated and trained to use fire extinguishing appliances?	N/A	☐	Yes	☑	No	☐
	Comments: It is understood that extinguisher training is provided as part of the general fire safety training.							

Testing & Maintenance

Testing & Maintenance								
22.1	Weekly testing and periodic servicing of fire detection and alarm system?	N/A	☐	Yes	☑	No	☐
22.2	Periodic servicing of fire detection and alarm system?	N/A	☐	Yes	☑	No	☐
22.3	Monthly and annual testing routines for emergency lighting?	N/A	☐	Yes	☐	No	☑
22.4	Annual maintenance of fire extinguishing appliances?	N/A	☐	Yes	☑	No	☐
22.5	Periodic inspection of external escape staircases and gangways?	N/A	☑	Yes	☐	No	☐
22.6	Six-monthly inspection and annual testing of rising mains?	N/A	☑	Yes	☐	No	☐
22.7	Weekly and monthly testing, six-monthly inspection and annual testing of fire-fighting lifts?	N/A	☐	Yes	☑	No	☐
22.8	Weekly testing and periodic inspection of sprinkler installations?	N/A	☑	Yes	☐	No	☐
22.9	Routine checks on Ventilation and Extraction System	N/A	☑	Yes	☐	No	☐
22.10	Has a 5 year electrical installation check taken place?	N/A	☐	Yes	☑	No	☐
22.11	Are portable appliances PAT tested – are records / labels present?	N/A	☐	Yes	☑	No	☐
22.12	Have gas safety checks / boiler inspections taken place?	N/A	☐	Yes	☑	No	☐

Testing & Maintenance

Comments:

Last weekly fire alarm check 14/4/21.

Last fire alarm servicing 13/10/20.

Last monthly emergency lighting test 24/3/21. 33 lights were identified as not working.

It should be ensured that any failures identified in the monthly emergency lighting tests are replaced.

There was no evidence provided to confirm that a 3 hour annual discharge has been undertaken of the emergency lighting.

It should be confirmed that the emergency lighting has had a 3 hour discharge test within the last 12 months in accordance with BS5266.

Fire extinguishers last serviced October 2020.

Last hard wiring installation inspection 1/5/18.

Last PAT testing October 2020.

Last gas safety check 19/3/21.

Risk Level Estimator

Potential consequences of fire ⇒ Likelihood of Fire ⇓	Slight Harm	Moderate Harm	Extreme Harm
Low	Trivial risk	Tolerable risk	Moderate risk
Medium	Tolerable risk	Moderate risk	Substantial risk
High	Moderate risk	Substantial risk	Intolerable risk

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** ☑ **High** ☐

In this context, a definition of the above terms is as follows:

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 building 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** ☑ **Extreme harm** ☐

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 foresee-ably 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:

Trivial ☐ **Tolerable** ☐ **Moderate** ☑ **Substantial** ☐ **Intolerable** ☐

Comments:

A suitable risk-based control plan should involve effort and urgency that is proportional to risk. The following risk-based control plan is based on one advocated by BS 8800 for general health and safety risks:

Risk level	Action and timescale
Trivial	No action is required and no detailed records need be kept.
Tolerable	No major additional controls required. However, there might be a need for reasonably practicable improvements that involve minor or limited cost.
Moderate	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. 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.
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.
Intolerable	Building (or relevant area) should not be occupied until the risk is reduced.

(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.)

Document Control

Author	Helen Dillon	**Qualifications**	Tier 3 (NAFRAR) 2021, MIFSM CFPA Europe Dip
Signed		**Date**	21st May 2021
Verifier	David Calvert	Qualifications	MIFSM, TIFireE, CFPA (Eur) Dip NAFRAR Tier 3
Signed		Date	28/05/2021
Document Version	FRA LH PAS79 2017 v.1.0		

Appendix A – Photographs (if applicable)

Photograph	Section	Description
	14.1	Use of foam in the plant room.
	14.1	Use of foam in the plant room.
	14.1	Electrical cupboards.

Photograph	Section	Description
	14.1	Compartmentation lines not above bedrooms in loft
	14.1	Compartmentation lines above main compartments in the loft.

Life Safety Fire Risk Assessment Certificate of Conformity

This certificate is issued by the organization named in Part 1 of the schedule in respect of the fire risk assessment provided for the person(s) or organization named in Part 2 of the schedule at the premises and / or part of the premises identified in Part 3 of the schedule.

Frankham Risk Management Services

BAFE Registration Number: KENT204

Client: GLD Care

Address: Hazeldene House, Romney Road, Pembury, Kent TN2 4AY

Applies to all common areas (accessible to the assessor, at the time of the assessment).

The fire risk assessment is for life safety; it is suitable & sufficient and is compliant with the BAFE SP205 scheme.

Assessment Date: 16/04/2021

Review Date: 16/04/2022

Certificate Reference Number: 80338501

We, being currently a 'Certificated Organization' 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 Certificated Organization

Helen Dillon MIFSM CFPA (Europe) Dip – Head of Fire Risk Management

Date of issue 28/05/2021

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