

REGULATORY REFORM (FIRE SAFETY) ORDER 2005

PERIODIC REVIEW OF FIRE RISK ASSESSMENT

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

Address of premises: *Hawkinge House
Hurricane Way
HAWKINGE
Kent
CT18 7SS*

Tel: *013 0389 0100*

Person(s) consulted: *Mr C Ruddock (Maintenance Manager)
Mr W Barber (Maintenance)*

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

Date of this fire risk assessment review: *12 December 2017*

Date of last fire risk assessment review: *6 December 2016*

Date of previous fire risk assessment: *8 February 2012*

Suggested date for review⁹⁾: *12 December 2018*

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.

⁹⁾ 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by a competent person by the date indicated above or at such earlier time as there is reason to suspect that it is no longer valid or if there has been a significant change in the matters to which it relates, or if a fire occurs.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:
*The extension is due for completion and occupation in the near future.
A separate fire risk assessment of the extension has been carried out on the 12 December 2017.*
 - 1.2 The occupancy:
None
 - 1.3 The occupants (including occupants especially at risk from fire):
None
Staff: Day - 36 (thirty six) Night - 9 (nine) Total – 105 (one hundred and five)
 - 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/audit

3.1 Are there adequate measures to prevent fire? Yes No

3.2 Comments and hazards observed:

Mains electrical installation – last test date – new system installed in 2011.

It is recommended that the installation be tested and inspected by an electrical contractor every five years.

Portable appliance testing – tested at least bi-annually.

Gas fires central heating system and cooker regularly serviced – date of last Gas Safety Certificate - < >

4.1 Are housekeeping and maintenance adequate? Yes No

4.2 Comments and deficiencies observed:

Generally satisfactory however refer to outstanding matters set out in the previous fire risk assessment/audits and raised on Page 9.

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:

Generally satisfactory however refer to recommendations on Page 9.

7.1 Are compartmentation and linings satisfactory? Yes No

7.2 Comments and deficiencies observed:
None

8.1 Is there reasonable emergency escape lighting? ¹⁰⁾ 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:
Refer to Page 8 regarding notices on fire doors.

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

¹⁰⁾ Based on visual inspection only.

10.1 Are the means of giving warning of fire adequate? ¹¹⁾ Yes No

10.2 Comments and deficiencies observed:

Analogue addressable fire alarm system conforming to British Standards 5839: Part 1 comprising sounders, manual call points and automatic detection. Category L1

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

11.2 Comments and deficiencies observed:

Satisfactory

12.1 Comments on other fixed fire protection systems?

None

¹¹⁾ 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:
None.

*Fire safety is managed by Mr T Mullan – Registered Manager.
Staff fire safety training is now carried out by Lifetime Training.
Firesure UK Limited appointed to carry out fire risk assessment.
Fire Action Limited appointed to service and maintain all fire safety system and equipment including the dry rising main.*

- 14.1 Are arrangements for management of fire safety adequate? Yes No

Comments and deficiencies observed:

In general, satisfactory however refer to comments on Page 7 Item 18.2.

It is noted and accepted that all fire doors in corridors fitted with a hold-open device remain open overnight.

- 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.

Evacuation pads have been provided to assist with the emergency evacuation in the event of an incident.

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.

Details should be recorded.

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

16.2 Comments and deficiencies observed:
Although records were not available for audit it is understood that all staff receive regular fire safety training every 6 months.
Regular fire drills are carried out with limited information recorded. Refer to Page 9 for comment on the information recorded.
It should be confirmed and recorded that each member of staff takes 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 comments in 18.2 below.

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

18.2 Comments and deficiencies observed:
Reference fire drills – appropriate information should be recorded.
I would refer you to the fire risk assessment dated 8 February 2012, Page 23 Item 7 and 23.1 Item 8.

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 Page 7 Item 18.1 of the 2016 fire risk assessment audit regarding fire drill records.

I have enclosed a fire drill record form which may be of some assistance.

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 – presenting a significant risk - to be addressed as a matter of urgency.

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
Ground Floor			
1 Reference the fire door to the Aurora Sensory Relaxation Centre. The door should not be wedged open. It is acceptable to fit an approved hold-open device linked or activated by the fire alarm system to the door.	1		
2 The self-closing devices to the following fire doors require adjustment so as to close the door effectively onto the stops. a) Laundry – In b) Room 1 c) Room 6 d) Room 14	1		
3 Reference the fire door to the sluice opposite room 6. Damage to the door below the handle requires attention so as to maintain the integrity of the door.	2		
4 Reference the wheelchair parking area off the open plan central area. a) This area should not be used to store boxes or other similar combustible items. b) The charging of batteries is acceptable in this area during the day. This should not take place overnight.	1		
Second Floor			
5 Reference the ground floor nurses station. The self-closing device requires adjustment so as to close the door effectively on to the stops.	1		

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