

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: *Harpwood House Residential Care Home
Seven Mile Lane
Wrotham
SEVENOAKS
Kent
TN15 7RY*

Tel: *01732 882282*

Person(s) consulted: *Mrs T Edwards (Registered Manager)*

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

Date of this fire risk assessment review: *17 March 2017*

Date of last fire risk assessment review: *N/A*

Date of previous fire risk assessment: *November 2012 (Carried out by previous owner)*

Suggested date for review⁹⁾: *17 March 2017*

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by a competent person by the date indicated above or at such earlier time as there is reason to suspect that it is no longer valid or if there has been a significant change in the matters to which it relates, or if a fire occurs.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:
None
 - 1.2 The occupancy:
None
 - 1.3 The occupants (including occupants especially at risk from fire):
Residents: Registered – 56 (fifty six).
Staff: Day- 11 (eleven) Night – Currently 3 (three) increasing to 4 (four).
Visitors 5 (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.
Reference the fire alarm routine.
The following amendment to the day routine now applies.
The fire service will be contacted immediately the fire alarm activates.
All staff should be made aware of the change.

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 – It is recommended that the system be inspected and tested by a competent electrical engineer every 5 years.

Portable appliance testing – annual – ongoing. Providing regular checks are carried out this may be extended to once every 2 (two) years.

The gas fires central heating system is regularly serviced.

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:

All matters raised on Pages 22 to 22.8 of the 2016 fire risk assessment have been addressed and signed-off within the document.

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 Page 8 to 10 regarding management and maintenance.

7.1 Are compartmentation and linings satisfactory? Yes No

7.2 Comments and deficiencies observed:
Generally satisfactory however refer to Pages 8 to 10 regarding management and maintenance.

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

Refer to Page 10 item 7 for comment.

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:

The fire alarm system appears to conform to British Standards 5839: Part 1 comprising sounders, manual call points.

It is not confirmed that the system automatic detection coverage meets a Category 1 standard.

Refer to Page 9 Items 2 and 4 for comment.

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

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:

Fire safety managed by Mrs T Edwards – Registered Manager.

Firesure UK Limited appointed to carry out fire risk assessment.

Lifetime Training appointed to deliver staff fire safety training.

MMH Services Limited appointed to service and maintain the fire alarm and emergency lighting systems.

3MG Fire Protection appointed to service and maintain the portable fire fighting equipment.

- 14.1 Are arrangements for management of fire safety adequate?

Yes No

Comments and deficiencies observed:

Generally satisfactory however refer to comments raised on 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.

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 worst case scenario ie. Minimum staffing levels and residents asleep to ensure that the affected 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 appropriate records were not available to audit it is understood that all staff receive two levels of training. One delivered by a trainer and the other via an e-learning programme. Each member of staff receives training every 6 months.

Fire drills are carried out however records should contain more detail. Please find attached drill record form that may be of some assistance.

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:
Emergency lighting system – Monthly function and inspection to be carried out and the results recorded.
Staff drills – refer to 16.2 above.
Fire doors – such doors should be inspected and tested at least monthly.

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 2016 fire risk assessment.

The majority of matters raised have been addressed.

Management matters outstanding were discussed during the visit should be addressed and signed – off.

Should you have any questions regarding the above please feel free to contact me.

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
Ground Floor			
1. Reference the following doors. a) Cross-corridor fire door adjacent rooms 1 and 7. b) Cross-corridor fire door adjacent room 9. Gaps exist between sections of the cold smoke seals and door frame with the door closed. These should be replaced. In addition, seals that have been over-painted should be replaced.	2		
2. Reference the activities store. The fire alarm system should be extended to include automatic fire detection in this area.	3		
First Floor			
3. Reference the following doors. a) Door to the pad store opposite room 42. b) Room 40. Gaps exist between sections of the cold smoke seals and door frame with the door closed. These should be replaced.	3		
4. Reference the archive room (access not available in 2016). a) Gaps exist between sections of the cold smoke seals and door frame with the door closed. These should be replaced.	3		
b) The fire alarm system should be extended to include automatic fire detection in this area.	3		
5. Reference the cleaner cupboard (access not available in 2016). Gaps exist between sections of the cold smoke seals and door frame with the door closed. These should be replaced.	3		

	Priority (where applicable)	Action by whom	Date action taken
<p>6. <i>Reference the access room to the boiler room (access not available in</i> <i>a) re the set of doors into the corridor.</i> <i>Gaps exist between sections of the cold smoke seals and door frame with the door closed.</i> <i>These should be replaced.</i></p>	2		
<p>7. <i>Reference the boiler room.</i> <i>a) It should be confirmed that the enclosure to this area is complete, without openings that would allow fire or smoke to enter other parts of the building.</i> <i>b) Reference the fire door.</i> <i>Gaps exist between sections of the cold smoke seals and door frame with the door closed.</i> <i>These should be replaced.</i> <i>In addition, a notice KEEP LOCKED SHUT should be provided and sited on the outside face of the door.</i></p>	2		
<p>8. <i>Reference the lift motor room (access not available in 2016).</i> <i>Gaps exist between sections of the cold smoke seals and door frame with the door closed.</i> <i>These should be replaced.</i></p>	2		
<p><i>General</i></p> <p>9. <i>Re the provision of nurse's stations.</i> <i>The location, risk and fire safety provisions are considered acceptable.</i></p>	3		