## Regulatory Reform (Fire Safety) Order 2005

# Fire Risk Assessment

This template has been provided to assist the Responsible Person with the preparation of a Fire Risk Assessment and is not intended for commercial profit or gain. It may not be suitable for use in some large or complex premises.

Whilst every care has been taken to ensure the adequacy and suitability of this template, the company accepts no responsibility for any content added, edited or deleted by the user. Use of this template will not automatically guarantee the completed risk assessment will be regarded as “suitable and sufficient”.

For further assistance, please refer to the company’s Fire Risk Assessment Template Guidance at the back of this document.

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| **Responsible Person:***(Employer or other person having control of the relevant premises)* | Clive Owen Director, Kathryn James, Depot Manager  |
| **Address of Premises:** | Unit 2B & 2C, Springhill Industrial Estate, Coventry,  |
| **Postcode:** | CV7 8HN |
| **Assessor Name:** | Sean Whittle FCIPD |
| **Date of Fire Risk Assessment:** | **15th November 2023** |
| *(This risk assessment should be reviewed annually or at such earlier time as there is reason to suspect that it is no longer valid or there has been a significant change in the matters to which it relates).* |
| **Subsequent Review Dates** |
| **Reviewed by:** | Clive Owen – Loo Hire Director  | **Date:** |  |
| **Reviewed by:** | Kathryn James – Office Manager | **Date:** |  |
| **Reviewed by:** |  | **Date:** |  |

### General Information

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| **The Premises** |
| **Number of floors in building:***(To include basements)* | 2 - 1 - in workshop/warehouse leading to mezzanine floor area which contains storage and office |
| **Approximate floor area: (m²)** *(To include all floors of responsibility)* | Yard 1 between two buildings = 620 m²Yard 2 rear of workshop = 410 m²Yard 3 = 220 m²Offices/canteen =237 m²workshop/warehouse = 237 m²Total Site = 1504 m² |
| **Brief details of construction:***(Date of construction, brick, timber, purpose built or converted)* | Office Brick / Worksop /Warehouse Brick  |
| **Primary usage:** *(e.g. Hotel, Shop)* | Loo Hire storage sites for vehicles and equipment  |
| **Secondary usage:** *(e.g. Kitchen, Bar, Function Room, Offices)* | None |

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| **Occupancy Profile** |
| Maximum number of persons in the **most highly occupied compartment** to be affected by an uncontrolled fire within 30 minutes, assuming no evacuation. | **WEEKDAYS** | **WEEKENDS** |
| 00:00 to 04:00 | 0 | 00:00 to 04:00 | 0 |
| 04:00 to 08:00 | A | 04:00 to 08:00 | 0 |
| 08:00 to 12:00 | A | 08:00 to 12:00 | 0 |
| 12:00 to 16:00 | A | 12:00 to 16:00 | 0 |
| 16:00 to 20:00 | A | 16:00 to 20:00 | 0 |
| 20:00 to 24:00 | 0 | 20:00 to 24:00 | 0 |
| **Enter range: A= <20, B=20-49, C=50-99, D=100-1000, E=>1000, 0= None** |
| **Description of Occupants** | **Mobility Issues** | **0** | **Average Mobility** | **6** | **Vulnerability****Issues** | **0** |

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| **Occupants Especially at Risk from Fire** |
| **Sleeping occupants:***(Details of numbers - public/staff)* | 0 |
| **Disabled occupants:***(Personal Emergency Evacuation Plans in use when necessary)* | 0 |
| **Occupants in remote areas:***(Lone working/isolated areas)* | 0 |
| **Young person’s:** *(Individual Risk Assessment provided for those persons under 16 years old)* | 0 |
| **Others:** *(Details of Elderly/Infirm/Mental Ability)* | 0 |
| **Visitors** | 0 |
| **Occupants whose first language is not English** | 0 |

# Identified Fire Hazards

# And Primary Control Measures

Note: On the following pages, where the answer is '**Yes**', please describe in the Identified Hazards boxes below. Where the answer is '**No**', please complete the deficiencies boxes below. Where the answer is '**N/A'**, please describe in the General Comments box provided.

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| **Electrical Sources of Ignition** |
| Measures taken to prevent fires of electrical origin. |
| **Fixed installation periodically inspected and tested?***(e.g. every 5 years)* | **YES** | **NO** |
| **Portable appliance testing carried out on a risk assessed basis?** | **YES** | **NO** |
| **Suitable policy in place regarding the use of personal electrical appliances?** | **YES** | **NO** |
| **Suitable limitation and management of trailing leads and adaptors?** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| None identified  | Portable Fire Alarm system | None  |
| **Deficiencies:** | **Remedial Action Required:** |
| none | none |

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| **Smoking** |
| Measures taken to prevent fires as a result of smoking. |
| **Smoking prohibited in the building?** | **YES** | **NO** |
| **Smoking permitted in appropriate areas?** | **YES** | **NO** |
| **Suitable arrangements for those who wish to smoke?** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| None | Smoking is away from ignition sources and buildings  | None  |
| **Deficiencies:** | **Remedial Action Required:** |
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| **Arson/Deliberate Ignition** |
| **Basic security against arson by outsiders or other persons appears reasonable.** *(If specific advice on security (including security against arson) is required, the advice of a security specialist should be obtained).* | **YES** | **NO** |
| **Is there the potential for fire load/combustibles in close proximity to the premises available for ignition by outsiders?** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| None identified at time of assessment | Yard open, buildings are locked.Business is of the main roadAll combustibles are locked away. Back storage area behind Workshop is locked  | None |
| **Deficiencies:** | **Remedial Action Required:** |
| None | None |

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| **Portable Heaters** |
| **Portable heaters are used within the premises.** | **YES** | **NO** |
| **Is the use of the more hazardous type (i.e. radiant bar fires or LPG appliances) avoided?** | **YES** | **NO** |
| **Are suitable measures taken to minimise the hazard of ignition of combustible materials due to these heaters?** | **N/A** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| None identified at time of assessment  | Boiler fed radiators  | none |
| **Deficiencies:** | **Remedial Action Required:** |
| None | None |
| **General Comments:** |
| **Erasure all portable heaters are PAT tested every 3 years**  |

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| **Fixed Heating Installations** |
| **Fixed heating installations such as boilers are used within the premises.** | **YES** | **NO** |
| **Are fixed heating installations subject to regular maintenance?** | **N/A** | **YES** | **NO** |
| **Are suitable measures taken to minimise the hazard of ignition of combustible materials due to these heaters?** | **N/A** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| None identified at time of assessment | Boiler is serviced annually and away from combustible materials in the Warehouse  | None |
| **Deficiencies:** | **Remedial Action Required:** |
| No record of annual boiler service was observed | Ensure annual service of boiler |
| **General Comments:** |
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| **Cooking** |
| Measures taken to prevent fires as a result of cooking. |
| **Filters cleaned or changed, and ductwork cleaned regularly?** | **N/A** | **YES** | **NO** |
| **Suitable extinguishing appliances available?***(e.g. Fire blanket, Wet Chemical etc)* | **N/A** | **YES** | **NO** |
| **Suitable Shut Down Procedures in place?** | **N/A** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| None identified at time of assessment | None cooking on site – microwave in kitchen area | None  |
| **Deficiencies:** | **Remedial Action Required:** |
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| **General Comments:** |
| **Kitchen area was generally clean and tidy**  |

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| **Lightning** |
| **The building has a lightning protection system.** | **YES** | **NO** |
| **Is the lightning protection system subject to a suitable maintenance regime?** | **N/A** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| None identified at time of assessment | All lighting working and emergency lighting maintained annually  | None |
| **Deficiencies:** | **Remedial Action Required:** |
| No record of when emergency lighting was last tested | Ensure emergency lighting is tested annually  |
| **General Comments:** |
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| **Dangerous Substances** |
| **Dangerous substances are, or could be used or stored, within the premises?***(i.e. Substantial quantities of alcohol, white spirits, other flammable liquids or materials)* | **N/A** | **YES** | **NO** |
| **A risk assessment has been carried out as required by the Dangerous Substances and Explosive Atmospheres Regulations 2002?** | **N/A** | **YES** | **NO** |
| **Stored in suitable areas and containers away from potential sources of ignition, to include issues of chemical reactivity and compatibility.** | **N/A** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| Fuel / oxyacetylene / butane gas  | Fuel is in Workshop and away from ignition sourcesoxyacetylene / butane gas are stored correctly in cages outside in yard | None |
| **Deficiencies:** | **Remedial Action Required:** |
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| **General Comments:** |
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| **Housekeeping** |
| Standards of housekeeping. |
| **Combustible materials appear to be separated from ignition sources?** | **YES** | **NO** |
| **Appropriate storage of hazardous materials?** | **N/A** | **YES** | **NO** |
| **Escape routes kept clear of any combustibles (storage /furniture)** | **YES** | **NO** |
| **Appropriate measures for the safe storage and disposal of waste?** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| None identified at time of assessment | All escape routes were clear at time of visit Depot map visible and escape routes identified Alarm system tested regularly and recorded  | None |
| **Deficiencies:** | **Remedial Action Required:** |
| There was some rubbish bins full and some items were left in walkways and could prevent safe exit  | Ensure all bins re emptied regularly and all items are stored away safely – but introducing IAuditor in 2022 will ensure fortnightly check to identify issues and remind employees etc to keep site clean and free from possible obstacles |
| **General Comments:** |
| **The general housekeeping on site was good and the kitchen area was clean and tidy as were the toilet facilities.**  |

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| **Hazards Introduced by Contractors and Building Works** |
| **Fire safety conditions have been imposed on both external contractors and in-house maintenance staff?** | **YES** | **NO** |
| **Is there satisfactory control over works including use of hot work permits, where appropriate, carried out in the building by external contractors?****Give details:** | **YES** | **NO** |
| **If there are in-house maintenance personnel, are suitable precautions taken during works carried out by them, including use of hot work permits, where appropriate?****Give details:** | **N/A** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| None identified at time of assessment | All contractors provide suitable insurance and RAMS prior to work being undertaken | None |
| **Deficiencies:** | **Remedial Action Required:** |
| None | None |
| **General Comments:** |
| **None** |

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| **Other Significant Fire Hazards that Warrant Consideration** |
| **Are there any other fire hazards that warrant consideration within the premises?***(This to include any fire hazards from any process; heat producing, spark or friction generating, chemical or other process which has the capacity to ignite, create excessive or rapid heat or generate oxidising or flammable gas)* | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| At time of Assessment no hazards identified | All fire hazards from all processes on site are adequately controlled | None  |
| **Deficiencies:** | **Remedial Action Required:** |
| None | None |
| **General Comments:** |
| **None** |

# Arrangements for Evacuation

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| **Evacuation Strategy** |
| Typical evacuation strategies within the premises are likely to involve one or more of the following arrangements. **State which strategies have been adopted.** |
| **Single Stage Evacuation** **It is reasonably expected that all relevant persons in the premises are able to (and will) evacuate immediately to a place of total safety.** | **YES** | **NO** |
| **Progressive Horizontal Evacuation****Relevant persons are dependent on staff to assist with their escape.** **Provisions have been made to move such persons from an area affected by fire, through a fire resisting barrier to an adjoining fire protected area on the same level, where they can wait in a place of safety whilst the fire is dealt with, or await further evacuation down a protected route to total safety.** ***NOTE: Progressive Horizontal Evacuation is subject to the following***Protected areas should be designed to provide:* Sufficient capacity to accommodate the number of occupants who will need to use them. For this purpose, a protected area should be sufficient capacity to accommodate its normal occupants and the occupants of the largest adjoining protected area.
* Progressive movement away from a fire via sequential adjoining protected areas.
* Means for escape via stairway(s) should this become necessary.

The number and size of the protected areas depends on a number of factors:* the time it will take to evacuate people from the area of a fire to an adjacent protected area;
* the number of people to be evacuated;
* the level of any mobility impairment;
* the number of staff to assist in evacuation;
* the fire protection arrangements;
* layout of the premises; and
* location and number of staircases.
 | **YES** | **NO** |

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| **Delayed Evacuation** |
| **Relevant persons are dependent on staff to assist with their escape however it is not desirable or practical to evacuate persons (e.g. due to medical conditions or treatments). Such persons may remain within their rooms whilst the fire is dealt with and the danger has passed.*****NOTE: Delayed Evacuation is subject to the following***Bedrooms to be enclosed in an enhanced level of fire-resisting construction (protected bedrooms).A protected bedroom should be of 60-minute fire-resisting construction and the door should be fire-resisting and fitted with a self-closing device. In addition the escape route from the protected bedroom(s) to the adjoining protected areas, refuge or final exit (including any stairway) will also require an increased level of fire protection to allow access for staff to assist with subsequent evacuation from the protected bedroom(s). If necessary, the door may be fitted with electromechanical hold-open or free swing devices that operate immediately the fire alarm actuates.If provision of such fire resistance is not possible, you may be able to show through your risk assessment that alternative measures to limit the growth and spread of the fire are appropriate, such as an automatic fire suppression system supported by robust staff response procedures.Any resident who is initially left in a fire protected bedroom should be accompanied by a Carer. As such, the total number of residents awaiting evacuation in protected bedrooms should be less than the number of staff on duty. It is imperative that if some less able residents are left in protected bedrooms to await evacuation, then other staff know which rooms have been evacuated and those which still contain residents and where necessary are able to notify the fire and rescue service when they arrive.Arrangements for delayed evacuation should only be based on a pre-planned basis. | **YES** | **NO** |

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| **Written copies of Evacuation Procedures are located as follows:** |
| **Staff notice boards/ Back Office / in Reception / employee canteen** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| None identified at time of assessment | H&S Notice board in the general office and workshop containing all policies and site evacuation maps  | None |
| **Deficiencies:** | **Remedial Action Required:** |
| Not up to date  | Ensure all documentation is up to date – this will be captured when monthly IAuditor is undertaken in Jan 2024 |

# Provision of Elements of Fire Safety as Secondary Control Measures

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| **Means of Escape** |
| **It is considered that the premises are provided with reasonable means of escape in case of fire. Identify the means of evacuation and attach a plan.***(This can be a hand drawn plan)* | **YES** | **NO** |
| **Adequate design of escape routes?** | **YES** | **NO** |
| Reasonable distances of travel when: |
| **1. Where there is escape in a single direction? State the distance of maximum travel** | **YES** | **NO** |
| **2. Where there are alternative means of escape? State the distance of travel** | **YES** | **NO** |
| **Suitable protection of escape routes? (Fire resisting construction)** | **YES** | **NO** |
| **Adequate provision of exits? State the capacity of each exit** | **YES** | **NO** |
| **Exits easily and immediately open-able where necessary without the use of a key?** | **YES** | **NO** |
| **Escape routes unobstructed?** | **YES** | **NO** |
| **It is considered that the premises are provided with reasonable arrangements for means of escape for disabled people. Describe the arrangements below:** | **YES** | **NO** |
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| **Does the evacuation plan fit with the floor space factors?** | **YES** | **NO** |
| **Identify dead end corridors. Are the appropriately covered?** | **YES** | **NO** |
| **Identify inner rooms. Are the appropriately covered?** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| At time of Assessment no hazards identified | Fire Exits all clear and escape routes clearly identified  | None |
| **Deficiencies:** | **Remedial Action Required:** |
| Fire Exit in Kitchen leading to outside needs to have sign identifying a step  | Sign required – warning employees exiting of the step on other side of the door and to take care when exiting building in event of evacuation  |

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| **Measures to Limit Fire Spread and Development** |
| It is considered that there is: |
| **Compartmentation of a reasonable standard (fire resisting). Identify compartmentation** | **YES** | **NO** |
| **Reasonable limitation of linings that may promote fire spread. (Walls and ceilings)** | **YES** | **NO** |
| **As far as can be reasonable ascertained, fire dampers are provided in ducts or vents as necessary to protect critical means of escape routes against passage of fire, smoke and combustion products in the early stages of a fire?** | **N/A** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| At time of Assessment no hazards identified | There are fire doors in main office to compartmentalise areas | None |
| **Deficiencies:** | **Remedial Action Required:** |
| None | None |
| **General Comments:** |
| **There is reasonable compartmentalisation on site**  |

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| **Emergency Escape Lighting** |
| **It is considered that there is a reasonable standard of emergency escape lighting to ensure safe use of escape routes complying to BS5266** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| At time of Assessment no hazards identified | Emergency lighting present and tested and maintained annually | None |
| **Deficiencies:** | **Remedial Action Required:** |
| No record of when emergency lighting last checks  | Ensure emergency lighting needs to be checked and result recorded annually |

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| **Fire Safety Signs and Notices** |
| **It is considered that there is a reasonable standard of fire safety signs and notices. This to include fire exit, fire resisting door and hazard signage. The signage should comply to Health & Safety (Signs and Signals) Regulations BS1996** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| At time of Assessment no hazards identified | All site signage was excellent  | None  |
| **Deficiencies:** | **Remedial Action Required:** |
| None | None |

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| **Means of Giving Warning in Case of Fire** |
| **Reasonable manually operated fire warning system provided? If yes give details:** *(e.g. Break glass call points, fire bell, air horn, klaxon etc)* | **YES** | **NO** |
| Break glass points in general office and workshop |
| **Automatic fire detection provided? If yes, to what Standard?** *(e.g. BS 5839 Part 1Grade L1/L2 etc.)* | **N/A** | **YES** | **NO** |
| Smoke alarms present in general office suitable to BS 5839  |
| **Extent of automatic fire detection generally appropriate for the occupancy and fire risk?** | **YES** | **NO** |
| **Remote transmission of alarm signals to a monitoring station or other?** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| At time of Assessment no hazards identified | Smoke alarms present in general office and kitchen area  | None |
| **Deficiencies:** | **Remedial Action Required:** |
| None | None |
| **General Comments:** |
| **Means of raising alarm on site in all areas was good and sufficient alarms**  |

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| **Manual Fire Extinguishing Appliances** |
| **Reasonable provision of portable fire extinguishers?** | **YES** | **NO** |
| **Are all fire extinguishing appliances readily accessible and unobstructed?***(i.e. mounted on walls or on appropriate bases)* | **YES** | **NO** |
| **Is suitable wall signage provided relevant to extinguisher?** | **YES** | **NO** |
| **Are hose reels provided?**  | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| At time of Assessment no hazards identified | Suitable portable fire extinguishers present around site and these are maintained annually using external contractor  | None |
| **Deficiencies:** | **Remedial Action Required:** |
| None | None |

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| **Relevant Automatic Fire Extinguishing Systems** |
| **Type of fixed system and location:** *(Inergen gas suppression systems, sprinklers/misting systems etc.)* | **N/A** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| At time of Assessment no hazards identified | N/A | None |
| **Deficiencies:** | **Remedial Action Required:** |
| None | None |

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| **Other Relevant Fixed Systems and Equipment** |
| **Type of fixed system and location:***(i.e. Dry/wet risers, fireman’s lift control, smoke ventilation, smoke curtains etc.)* | **N/A** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| At time of Assessment no hazards identified | N/A | None |
| **Deficiencies:** | **Remedial Action Required:** |
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| **General Comments:** |
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| **Firefighter Switch - High Voltage Luminous Tube Signs etc.** |
| **Suitable provision of fire fighters’ switches for high voltage luminous tube signs, etc.?***(To include location)* | **N/A** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| At time of Assessment no hazards identified | N/A | None |
| **Deficiencies:** | **Remedial Action Required:** |
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| **General Comments:** |
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# Management of Fire Safety

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| **Procedures and Arrangements** |
| **Fire safety is managed by:** | **Kathryn James – Office Manager**  |
| **Deputy or assistant:** | **TBC** |
| **Are competent person(s) appointed to assist in undertaking the preventative and protective measures?***(i.e. relevant general fire precautions)* | **YES** | **NO** |
| **State name and responsible element of fire safety:** |
| **Clive Owen – Loo Hire Director**  | **Overall responsibility**  |
| Kathryn James – Office Manager  | **Daily responsibility**  |
|  |  |
| **Is there a suitable record of the fire safety arrangements?** | **YES** | **NO** |
| **Appropriate fire procedures in place?** | **YES** | **NO** |
| **Are procedures in the event of a fire appropriate and properly documented?** | **YES** | **NO** |
| **Are there suitable arrangements for summoning the Fire and Rescue Service?** | **YES** | **NO** |
| **Are there suitable arrangements to meet the F&RS on arrival and provide relevant information, including that relating to hazards to fire fighters?** | **YES** | **NO** |
| **Is there a plan of the building available indicating basic layout and any areas of significant risk?** | **YES** | **NO** |
| **Are there suitable arrangements for ensuring that the premises have been evacuated?** | **YES** | **NO** |
| **Is there a suitable fire assembly point(s)?** | **YES** | **NO** |
| **Are there adequate procedures for evacuation of any disabled people who are likely to be present?** | **YES** | **NO** |
| **Persons nominated and trained to assist with evacuation, Including evacuation of disabled people?** | **YES** | **NO** |
| **Appropriate liaison (if necessary) with Fire and Rescue Service Rescue Service crews visiting for familiarisation visits?** | **YES** | **NO** |
| **Routine in-house inspections of fire precautions (eg in the course of health and safety inspections)?** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| At time of Assessment no hazards identified |  |  |
| **Deficiencies:** | **Remedial Action Required:** |
| No Deputy identified  | Appoint a Fire Deputy and Fire Marshal |

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| **Training and Drills** |
| **Fire safety training is managed by:** | **Kathryn James – Office Manager**  |
| **Deputy or assistant:** | **TBC** |
| **Are all staff given adequate fire safety instruction and training on induction?** | **YES** | **NO** |
| **Are all staff given adequate periodic ‘refresher’ training at suitable intervals? If yes, at what intervals?** | **YES** | **NO** |
| **Are all staff with special responsibilities** *(e.g. fire wardens and staff who assist with disabled people) given additional training?* | **YES** | **NO** |
| **Does all training for staff provide information, instruction, or training on the all the following? (If no, indicate which one/s in the deficiencies boxes below)** |
| * **Fire risks in the premises**
* **The general fire precautions in the building**
* **Action in the event of a fire?**
* **Action on hearing the fire alarm signal**
* **Method of operation of manual call points**
* **Location and use of fire extinguishers**
* **Means for summoning the fire and rescue service**
* **Identity of persons nominated to assist with evacuation.**
* **Identity of persons nominated to use fire extinguishing appliances**
 | **YES** | **NO** |
| **Are fire drills carried out at appropriate intervals and a record of such drills maintained?** | **YES** | **NO** |
| **Are there sufficient and adequate channels of communication of fire safety information between employer and employee?***(e.g. Health & Safety meetings, notice boards etc)* | **YES** | **NO** |
| **When the employees of another employer work in the premises, are they provided with adequate instructions and given appropriate information?***(e.g. on fire risks and fire safety measures)* | **YES** | **NO** |
| **Is there adequate co-operation and co-ordination between different Responsible Persons (Multi-Occupancy) to ensure compliance with the Fire Safety Order?** | **YES** | **NO** |

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| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| At time of Assessment no hazards identified |  |  |
| **Deficiencies:** | **Remedial Action Required:** |
| No Deputy identified  | Appoint a Fire Deputy and Fire Marshal |
| **General Comments:** |
|  |
| **Testing and Maintenance** |
| **Testing and Maintenance is managed by:** | **Kathryn James – Office Manager**  |
| **Deputy or assistant:** | **TBC** |
| **Adequate maintenance of workplace?** | **YES** | **NO** |
| **Weekly testing and periodic servicing of fire detection and alarm system to include ancillary equipment** *(e.g. door hold open devices, door locks etc)* | **YES** | **NO** |
| **Monthly and annual testing routines for emergency escape lighting?** | **N/A** | **YES** | **NO** |
| **Annual maintenance of fire extinguishing appliances?** | **YES** | **NO** |
| **Periodic inspection of external escape staircases and gangways?** | **N/A** | **YES** | **NO** |
| **Six monthly inspection and annual testing of rising mains?**  | **N/A** | **YES** | **NO** |
| **Weekly and monthly testing, six monthly inspection and annual testing of firefighting lifts?** | **N/A** | **YES** | **NO** |
| **Weekly testing and periodic inspection of sprinkler installations?** | **N/A** | **YES** | **NO** |
| **Routine checks of final exit doors and/or security fastenings?** | **YES** | **NO** |
| **Annual inspection and testing of lightning protection system?** | **N/A** | **YES** | **NO** |
| **Other relevant inspections or tests:** |
|  |

|  |  |  |
| --- | --- | --- |
| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| At time of Assessment no hazards identified |  |  |
| **Deficiencies:** | **Remedial Action Required:** |
| No Deputy identified  | Appoint a Fire Deputy and Fire Marshal |
| **General Comments:** |
|  |

|  |
| --- |
| **Recording** |
| Appropriate records held for: |
| **Fire drills?** | **YES** | **NO** |
| **Fire training?** | **YES** | **NO** |
| **Fire alarm tests?** | **N/A** | **YES** | **NO** |
| **Emergency escape lighting tests?** | **N/A** | **YES** | **NO** |
| **Maintenance and testing of other fire precaution systems?** | **N/A** | **YES** | **NO** |
| **Location of Records: (Available for inspection by Fire Authority if required) Give Details:** |
| **Located in general office in folder** |

|  |  |  |
| --- | --- | --- |
| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| At time of Assessment no hazards identified |  |  |
| **Deficiencies:** | **Remedial Action Required:** |
|  |  |
| **General Comments:** |
|  |

# Appendix

|  |
| --- |
| **Risk Types** |
| **Priority** | **Meaning** |
| **HIGH** | **Immediate priority to be actioned within 24 hours to 8 weeks**Breaches of legal requirements, which could cause injury and require immediate short-term action. Also includes matters that can be resolved at minimal cost |
| **MEDIUM** | **Medium priority to be actioned within 2-6 months**Breaches in legislation that may require medium/long term action to resolve |
| **LOW** | **Low priority to be actioned within 6 months-1year** Items of non-urgent priority or for future consideration |

***Deficiencies and recommendations identified earlier within this risk assessment should be copied into the following Remedy Action Plan and appropriate action taken.***

|  |
| --- |
| **Significant Findings - Remedy Action Plan** |
| **No.** | **Action to be taken** | **Priority** | **Target completion date** | **Action by** | **Date action completed** |
| **1** | Emergency lighting needs to be tested by competent person / certificate obtained | High | Jan 2024 | Depot Manager  |  |
| **2** | Fire Drill needs to take place end Dec 23 and Fire Marshalls need to be trained and identified around the building  | High | ASAP | H&S Advisor  |  |
| **3** | Place signage on inside exit door leading to outside warning employees of step on other side  | Y | Immediate | Depot Manager  |  |
| **4** | PAT testing to take place  | High | ASAP | Depot Manager |  |
| **5** | Lithium Batteries storage – purchase flame proof pouches to place battery in when not in use of charging  | High | ASAP |  |  |
| **6** | Currently two fire assembly points one on Workshop wall and one near front of site on wall of office building – *the Workshop one needs removing as adds confusion* | Y | Immediate  | Depot Manager |  |

## Regulatory Reform (Fire Safety) Order 2005

# Fire Risk Assessment Template Guidance

This guidance document has been produced to assist the Responsible Person to complete a Fire Risk Assessment using the template provided by the company.

This template has been provided to assist the Responsible Person with the completion of a Fire Risk Assessment for their premises. The company accept no responsibility for the suitability or sufficiency of the added content of the completed document.

In order to produce a suitable and sufficient risk assessment for your premises, it should be used in conjunction with a series of guidebooks published by the Department for Communities and Local Government (CLG). These books provide additional information (type of premises specific) in order to assist those preparing fire risk assessments, giving detailed information on risk assessments and other issues.

All of the above guidance books are available to download direct free of charge from the CLG website or alternatively they can be found by visiting **www.avonfire.gov.uk** and following the links.

# Regulatory Reform (Fire Safety)

# Order 2005

The Regulatory Reform (Fire Safety) Order 2005 became law in October 2006 and introduced significant change to workplace fire safety responsibilities. As well as simplifying the legislative regime by bringing all fire safety legislation together into one Order, it introduced the need for employers, building owners and occupiers a 'responsible persons' to carry out, implement and maintain a fire safety risk assessment.

All non-domestic premises, including the common or shared parts of blocks of flats or houses in multiple occupation are covered by the Order, and may be inspected by their local Fire and Rescue Authority.

Under the order, Fire & Rescue Authorities have a statutory duty to ensure compliance and enforce the requirements where necessary.

**What are the main requirements of the order?**

The responsible person is required to:

* Carry out a fire risk assessment identifying the risks and hazards.
* Consider who may be especially at risk.
* Eliminate or reduce the risk from fire as far as is reasonably practical and provide general precautions to deal with any residual risk.
* Take additional measures to ensure fire safety where flammable or explosive materials are stored.
* Create a plan to deal with any emergency and, in most cases, document your findings.
* Review the findings, as necessary.

In carrying out a fire risk assessment the responsible person may decide that given the nature of the premises or the people involved, they may need to appoint one or more competent persons to assist them. The level of necessary competence is not prescribed in the Order. It recognises that the extent of competency will vary according to the nature and complexity of the premises involved.

The Fire Safety Order requires that you give effect to arrangements for the planning, organisation, control, monitoring and review of the preventive and protective measures. These are the measures that have been identified as a consequence of a risk assessment as the general fire precautions you need to take to comply with the Fire Safety Order.

You must record the above arrangements if:

* You employ five or more employees in your undertaking (regardless of where they are employed;
* a license under other legislation is in force; or
* an alterations notice is in force requiring a record to be kept.

**Where does it apply?**

The Order applies to virtually all premises and covers nearly every type of building, structure and open space. For example:

* Offices and shops
* Premises that provide care
* Community halls
* The common areas of houses in multiple occupation including common fire warning systems etc.
* Pubs, clubs and restaurants
* Schools
* Tents and marquees
* Hotels, B&Bs, guest houses, hostels and self-catering accommodation
* Factories and warehouses
* Stables

**What does this mean for me?**

The main effect of the changes will be a move towards greater emphasis on fire prevention in all non-domestic premises, including the voluntary sector and self-employed people with premises separate from their homes.

Responsibility for complying with the Fire Safety Order will rest with the 'responsible person'. In a workplace, this is the normally the employer or any other person who may have control of any part of the premises, e.g. the occupier or owner. If there is more than one responsible person in any type of premises, they must take all reasonable steps to consult with one another regarding matters of fire safety.

If you are the responsible person you will have to carry out a fire risk assessment which must focus on the safety in case of fire of all 'relevant persons'. It should pay particular attention to those at special risk, such as the disabled and those with special needs, and must include consideration of any dangerous substance likely to be on the premises. Your fire risk assessment will help you identify risks that can be removed or reduced and to decide the nature and extent of the general fire precautions you need to take to protect people against the fire risks that remain.

The fire risk assessment should consider dangerous substances that are used or stored in your premises, only to the extent necessary to determine the adequacy of the general fire precautions (as defined in Article 4 of the Fire Safety Order) and to advise you accordingly. If dangerous substances are used or stored in your premises, you should ensure that a risk assessment of the relevant work activities has been carried out to enable you to comply with the Dangerous Substances and Explosive Atmospheres Regulations 2002. This fire risk assessment must consider special, technical or organisational measures that are required to be taken or observed in connection with the use or storage of any dangerous substance.

# Fire Risk Assessment Template

The company Risk Assessment Template is divided into sections as follows:

* **Front page**
* **General Information**
* **Identified Fire Hazards and Primary Control Measures**
* **Arrangements for Evacuation**
* **Provision of Elements of Fire Safety as Secondary Control Measures**
* **Management of Fire Safety**
* **Remedy Action Plan**

The Responsible Person must ensure that each section is fully completed with additional details included where necessary.

The location of any further written information such as General Evacuation Plans, Personal Emergency Evacuation Plans, Personal Staff Training Records, Testing and Maintenance Records for alarms/lights etc., should be contained within the Fire Risk Assessment.

**Front page**

This section gives information as to who is the designated “Responsible Person” for the premises under the Regulatory Reform (Fire Safety) Order 2005 and information regarding who carried out the assessment, the date of completion and any subsequent reviews.

**General Information**

This section gives basic information about the premises itself (Number of floors, size, construction and usage).

Include details and numbers of occupants especially at risk from fire (i.e. sleeping, disabled, lone workers, young persons, elderly, infirm etc.)

The fire safety measures required within your premises will be wholly determined by those likely to occupy it.

**Identified Fire Hazards and Primary Control Measures**

It is important that each section is fully completed, including the identified hazards, existing control measures, and if any additional control measures are subsequently required. CLG guidance books will assist in the identification of most generic hazards and control measures which may be relevant to your premises.

An example is as follows:

|  |
| --- |
| **ELECTRICAL SOURCES OF IGNITION (Example)** |
| **1. Fixed installation periodically inspected and tested? (Every 5 years)** | **YES** | **NO** |
| **2. Portable appliance testing carried out on a risk assessed basis?** | **YES** | **NO** |
| **3. Suitable policy in place regarding the use of personal electrical appliances?** | **YES** | **NO** |
| **4. Suitable limitation and management of trailing leads and adaptors?** | **YES** | **NO** |

|  |  |  |
| --- | --- | --- |
| **Identified Hazards:**  | **Existing Control Measures:** | **Are there any improvement recommendations?** |
| 2. Portable electrical equipment 3. Personal equipment4. Management | All items over 12 months PAT tested annually Staff prohibited from using personal equipment Maintenance Team inspect all leads, adaptors and plugs periodically Staff instructed to visually check leads and cables periodically | Provision of cable trays? |
| **Deficiencies:** | **Remedial Action Required:** |
| 1. Unable to determine when fixed installations were last tested by a competent person. | Fixed installations may require inspecting |

**Arrangements for Evacuation**

The determined strategy of evacuation within your premises is paramount to the safety of all occupants.

Any evacuation strategy must be carried out without Fire Service intervention.

If Personal Emergency Evacuation Plans (PEEPS) are in use, then details of these should also be referred to.

**Means of Escape for Disabled People (Supplementary Guide)**

Further information on fire safety provisions for disabled persons can be found by visiting **www.avonfire.gov.uk**.

**Provision of Elements of Fire Safety as Secondary Control Measures**

**Primary** Control Measures are taken to prevent, as far as reasonably practical, a fire from starting.

**Secondary** Control Measures are taken to ensure that if a fire does start; all occupants are alerted and evacuated quickly and safely as possible.

It is therefore important that you have suitable:

* Fire warning and detection;
* Means of escape (design of, travel distances, number of exits, etc.)
* Compartmentation (fire resisting walls, glazing and doors);
* Emergency lighting;
* Signage;
* Fire extinguishers.

CLG guidance books provide more detailed information as to the minimum required standards.

Fire warning and detection systems are installed to British Standard 5839. Some examples of grading are as follows:

* **Type L5**: Life safety generally when specific fire engineering solutions or where PI insurance is required.
* **Type L4**: Life safety system, same as a manual system plus smoke detection on escape route.
* **Type L3**: Life safety system, same as a manual system plus smoke detection on escape route and heat or smoke detection in adjacent rooms.
* **Type L2**: Life safety system, same as L3 but additional detection provided in fire hazard/risk of ignition areas (i.e. kitchens, sleeping areas and other specified areas.)
* **Type L1**: Life safety system, detection provided in all areas, including voids and unused spaces.

Fire Inspecting Officers may require to see any relevant certificates required for a fire alarm installation, these are as follows:

* Installation Certificate
* Commissioning Certificate
* Alteration Certificate (if appropriate)
* Test Certificate

**Management of Fire Safety**

This section determines responsibility for different elements of fire safety within the premises.

It also should include information regarding initial and remedial fire safety training provision for members of staff and information provided to external contractors, testing and maintenance regimes for all fire safety measures and subsequent recording requirements.

A Testing and Maintenance Logbook may be downloaded free of charge from **www.avonfire.gov.uk** and following the links.

**Remedy Action Plan**

This section should be used to make a written record of any additional action/control measures identified when carrying out the initial or subsequent review of your Fire Risk Assessment. (i.e. a things to do list!)

Remedial action should be prioritised accordingly and remedied, as necessary.

Please note, Fire Inspecting Officers focus on this section to determine whether any issues they may identify during any subsequent fire safety audit, have previously been identified during the original risk assessment and suitable steps taken to remedy by the Responsible Person.

|  |
| --- |
| **Significant Findings - Remedy Action Plan** |
| **No.** | **Action to be taken** | **Priority** | **Target completion date** | **Action by** | **Date action completed** |
| **1** | Fixed installations require inspecting | LOW |  | Maintenance Person |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |