

## 2 BAY RETREAT FIRE RISK ASSESSMENT

### Fire risk assessment checklist – Small premises with paying guests

Responsible person (e.g. employer) or person having control of the premises:

Sally D'Anger

Address of premises:

2 Bay Retreat, St Merryn Park, Padstow, Cornwall, PL288QA

Number of floors:

2

Number of rooms:

2 bedrooms

Construction:

Block & rendered construction.

Date of fire risk assessment:

23<sup>rd</sup> August 2023

Date of previous fire risk assessment:

NA

Suggested date for review:

23<sup>rd</sup> August 2024

## **Fire hazards and controls**

**Are fixed electrical installations inspected and tested every 5 years?**

Yes

**Are electrical appliances periodically inspected and tested?**

Yes

**Is the use of trailing leads and adaptors avoided where possible?**

Yes

**Are gas appliances inspected and tested every 12 months?**

N/a

**Is smoking permitted on the premises?**

No – No smoking notices displayed.

**Are suitable arrangements in place for those who wish to smoke?**

Yes – suitable ashtrays outside

**Are the premises adequately secured to prevent unauthorised access?**

Yes

**Are combustible materials, waste and refuse bins stored safely clear of the premises or in purpose-built compounds/rooms?**

Yes

**Are fixed heating systems subject to periodic maintenance?**

Yes

**Are portable heaters subject to periodic inspection and used safely?**

N/a

**Are there adequate fire precautions in the use of open fires and log burners? e.g. regular chimney sweeping**

N/a

**Are adequate measures taken to prevent fires from cooking equipment? e.g. prohibiting deep fat fryers**

Yes

**Are filters and ductwork subject to regular cleaning?**

Yes

**Is the standard of housekeeping adequate to avoid the accumulation of combustible materials and waste e.g. from tumble dryers?**

Yes

**Are combustible materials kept separate from ignition and heat sources?**

Yes

**Is it ensured that all contractors who undertake work on the premises are competent and qualified?**

Yes

**Are suitable measures in place to address the fire hazards associated with the use and storage of dangerous substances?**

Yes

**Are there any other significant fire hazards in the premises?**

No

If the answer to the above question is yes, please list each hazard and any control measure to reduce the risk of fire, in the box below. If the answer to any question is no, include suitable action within the Action Plan.

**You should list each hazard, and any related control measure to reduce the risk of fire, in this space.**

## **Fire protection measures**

**Are all escape routes kept clear of obstructions to enable people to escape safely?**

Yes

**Are all fire exits easily and immediately openable?**

Yes

**Are distances to final exits considered reasonable?**

Yes

**Do the walls and structures protecting the stairway and escape routes provide an adequate level of fire resistance?**

Yes

**Is the fire resistance of doors to stairways and escape routes considered adequate?**

Yes

**Where necessary, are doors fitted with suitable self-closing devices that close the doors effectively?**

N/a

**Are there adequate levels of artificial lighting provided in the escape routes?**

Yes –

**Where necessary, has a reasonable standard of emergency escape lighting been provided?**

Yes - plug in torches and borrowed light from street.

**Where necessary, is a reasonable standard of fire exit and fire safety signs provided?**

Yes

**Are smoke and/or heat alarms/detectors provided and is the extent and coverage considered adequate? Consider also CO alarms.**

Yes

**Is there a reasonable provision of firefighting equipment (fire extinguishers, fire blankets)?**

Yes

Record brief details of the above measures in the box below. If the answer to any question is no, include suitable action within the Action Plan.

**Hard wired & linked smoke detectors in hallway & landing.**  
**Heat detector in kitchen.**  
**Fire blankets & extinguishers in kitchen, in garden for BBQ & by front door.**  
**Fire notices advising of action to be taken in the event of a fire displayed.**  
**Fire safety advise displayed in guest information book.**  
**No smoking signs.**  
**No Candles permitted**  
**No charging of electric vehicles, e bikes /scooters permitted.**  
**Guests advised only to use approved charging devises for phones/  
straighteners / hair dryers.**  
**Guests advised not to bring other electrical items.**  
**No deep fat fryer provided.**

## **Management of fire safety**

**Are procedures in the event of fire appropriate and documented?**

Yes

**Is the information on fire safety and the action to take in the event of a fire given to guests?**

Yes

**Are any staff members given regular instruction and training on the action to take in the event of a fire?**

N/a

**Are frequent checks carried out to ensure exit routes are kept clear and fire exits remain easily openable?**

Yes

**Are periodic checks carried out on fire doors to ensure they remain in good condition and close effectively?**

Yes

**Are domestic smoke and heat alarms tested at least monthly? Include CO alarms in testing.**

Yes

**Where fitted, are weekly testing and six-monthly servicing routines in place for the fire detection and alarm system?**

N/a

**In self-catering premises, are all smoke/heat alarms (or fire detection and alarm systems, where fitted) tested at every changeover?**

Yes – manual record kept

**Where fitted, are monthly and annual testing routines in place for the emergency escape lighting?**

N/a

**Where provided, are fire extinguishers subject to annual maintenance?**

Yes

**Are records of testing and maintenance maintained?**

Yes

Record brief details of the above measures in the box below. If the answer to any question is no, include suitable action within the Action Plan.

**Fire notices displayed.**

**Fire safety advise in guest information book.**

**Smoke & heat detectors tested on every changeover.**

**Visual check of extinguishers and blankets at every changeover.**

## **Action plan**

If any of the above boxes are ticked with a 'No', the deficiencies should be described below, along with proposed action for rectification.

<b>Item</b>	<b>Deficiency</b>	<b>Proposed action</b>	<b>Timescale</b>	<b>Person responsible</b>
Smoke detectors in bedrooms	none	Leaseholder to install	3 months	SD