



## Health & Safety Assessment



### **Pavilion Building** **Badbury View Road** **Corfe Mullen** **BH21 3HU**

**Prepared for:**

**Miss Nicola Gray**  
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**Date of Site Visit: 24/05/2022**



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Report submitted by



Sean Cusack  
6 June 2022

## 1. Executive Summary

The Pavilion Building has a number of structural, fire safety and hygiene issues of concern and that either require action or further investigation. In brief:

### 1.1. Findings requiring action

- A number of (external) brick windowsills are defective. Bricks are loose and can be easily prised loose. There is a risk that a child could accidentally pull a brick loose, causing it to fall and injure them.
- There were two vents in the paved play area where small children could be exposed to sharp edges from unguarded vent pipes.
- The kitchen has a number of hygiene issues, and at the time of the investigation there were concerns about the state of decoration, the effectiveness of the extractor fan, the condition of the kitchen floor surface and malodour within the microwave oven. A review of the condition of the paintwork, extractor, microwave and floor surface is recommended.
- There was no evidence of a fire risk assessment having been undertaken in the building, nor reference to it on any noticeboard.
- Fire signage in the building is inadequate and needs to be improved. Fire extinguishers and fire routes are not sufficiently signposted.
- The 'fire action' signage across the building is not adequate, nor is it compliant with the Health and Safety (Safety Signs and Signals) Regulations 1996.
- There is no fire alarm system, and therefore no automatic way of alerting other people in the building to the presence of a fire. For a building of the size, complexity and nature of use of the Pavilion a fire specialist should be engaged to assess the situation. They should be asked to review the requirements and determine whether a suitable electrically operated fire warning system should be installed i.e., inter-connected smoke detectors and fire alarm panel/call points complying with BS 5839 (fire detection & alarm systems for buildings).
- There are currently two (unlinked) battery operated smoke detectors provided by the nursery. On testing, the volume of the alarm was not found to be sufficient to penetrate throughout the building.
- There are insufficient entries regarding the testing and examination of emergency lighting in the 'Dorset Fire & Security' Logbook. It would be normal to see the following:
  - Annual 3-hour discharge testing of emergency lighting
  - Monthly emergency lighting checks in accordance with BS EN 50172 ('flick-tests')
- The 'Dorset Fire & Security' Logbook has not been completed correctly - containing inadequate information regarding fire safety checks undertaken, and amongst other deficiencies failure to identify which emergency lights have been tested, by whom, at what time, and what remedial action was necessary.
- The cardboard being stored in the corridor, which is a fire-protected area, should be moved to a designated storeroom, or disposed of. The corridors should all be kept clear of combustible material, and all internal fire doors kept closed.
- The fire door outside the ladies' toilets should be replaced. The door has been removed, and therefore the corridor's fire protection has been compromised.
- A few the internal fire doors do not have vision panels. It is recommended that these are

replaced with more suitable doors in line with Building Regulations 'Approved Doc B' S. 5.14

- There was no evidence of legionella inspection or L8 controls in place at the time of the visit. This needs to be investigated and a legionella sanitation regimen implemented.
- The changing rooms should have adequate ventilation for general health reasons, in addition to preventing damage to the paintwork and fittings. At the time of the inspection, many of the air extraction units were either not working or had been set to the wrong automatic setting. Consequently, the changing rooms, in general, smelt unhygienic (changing room 7 in particular) and there are numerous examples of mildew owing to lack of effective ventilation.
- Each of the changing rooms has a door bolt, allowing the door to be locked from the outside. Therefore, any person inside the changing room can be trapped, either inadvertently or through horseplay. Given the inadequacy of emergency lighting and fire detection/alarms these bolts must be removed on safety grounds.
- A few the fluorescent light fittings have lost their covers. As a consequence, the light tubes are exposed. Given the nature of this building, it is foreseeable that the light tube could be struck and shatter, releasing broken glass into the changing rooms. Either replace the covers or install new energy-efficient replacement lights.
- It was not apparent if there is an inspection regime for the light fittings, however at the time of the inspection a few the lights were not working. In addition, although some of the lights were on a sensor, these did not always work correctly.

## 1.2. Findings requiring further investigation

- Emergency lighting in the area occupied by the nursery - – there is one emergency light in the kitchen, however at the time of the inspection it was not possible to determine if there were any in the main room, and there was no register of emergency lighting available at the time.
- Whilst there are several emergency lights in the building, it does not appear that the number provided is suitable and sufficient. This needs further investigation by a lighting specialist.
- It was not possible to view gas safety records at the time of the inspection, and the room where the gas boiler was believed to be present was (rightly) kept locked.
- Asbestos - This inspection did not include an intrusive inspection of floors, ceilings and walls. However, there was no asbestos register available at the time, so it was not possible to determine the presence or otherwise of asbestos containing materials. However, the flooring tiles and textured ceiling coating (given the age of the building) are typical of asbestos containing materials. Given the condition of these surfaces, an asbestos survey must be conducted as a matter of urgency to confirm one way or the other.
- It was not possible to view the building's fixed electrical wiring inspection records at the time of the time of the inspection. It is not, therefore, known if the inspection has been undertaken within the last 3-5 years or not and this should be clarified (Note this inspection is not the same as PAT testing).
- There were a number of instances where cracking in the walls was seen. This report is not a structural survey; however, these cracks were consistent with minor building subsidence.
- There are many areas where the external paving is loose or uneven. In particular, the paved steps at the fire exits had a number of loose paving slabs, which – whilst not a direct risk at the moment, could potentially deteriorate into something more hazardous. It is recommended these loose slabs are investigated and any required remedial work undertaken.

## 2. Introduction

- 2.1. The Pavilion building is currently used as a nursery school, and members of the public also use the building's sports facilities. Recent safety reviews have led to the Council requesting a more focused inspection to be undertaken, to determine to what extent the building is safe for use.
- 2.2. This health and safety assessment of the property was completed by Cusack-EHS Limited to assist the client in meeting their duties under current Health and Safety legislation.
- 2.3. Unless otherwise stated, this report is based on a review of documentation available and a physical inspection of the property by a competent consultant.
- 2.4. Included within this report is an assessment of any health and safety risks and associated issues arising from the property or its associated activities. It details any identified deviation from statutory legislation, approved codes of practice, guidance or industry standard practice. It also includes recommended actions considered necessary in order to control risk to an acceptable level and prevent incidents, accidents or ill health to any persons on or in the vicinity of the property.
- 2.5. This report reflects the situation relating to health, safety and associated issues found at the property at the time of the visit and are based upon the information made available to the consultant, and accessibility to all parts of the building. Where necessary, the consultant will require physical evidence, such as documented records, to demonstrate that a control exists. The accuracy of the report is therefore dependant on access and the quality of the information made available to the consultant during the inspection process.
- 2.6. The scope of the report is limited to the areas specified under the 'Assessment Brief' section below.

## 3. Disclaimer / Limit of Recommendations

- 3.1. The assessment is based on a non-intrusive visual inspection of areas identified as being the responsibility of the client. Our consultants made every effort to access a reasonable sample of areas under the client's responsibility, however access may not have been possible due to safety reasons or unavailability of keys/access codes. Areas not accessed are detailed in the limitations section of this report.
- 3.2. Our consultants completed a visual inspection for obvious defects or signs of deterioration, supplemented by inspection of service and maintenance records. Our consultants do not check the structural, electrical or mechanical worthiness of plant or equipment on site; specialist and competent persons should be appointed to complete these activities.
- 3.3. All documentation provided, and information regarding areas of responsibility are taken in good faith.
- 3.4. Any remedial actions recommended in this report should only be implemented with due respect to any relevant regulations or industry best practice including, but not limited to: Building Regulations; relevant British Standards; Planning Consent; Structural, Electrical and Mechanical safety standards; Traffic Management/Highways Guidance; Environmental Legislation etc.

- 3.5. Note that recommendations within this report set out what Cusack-EHS Ltd feel needs to be done but not how it is to be done. That is, Cusack-EHS Ltd do not provide a specification or methodology for the necessary works as a part of this report. Cusack-EHS Ltd are Health and Safety Practitioners, they are not Architects; Surveyors; Building Services Engineers; Highways Engineers etc.
- 3.6. Responsibility for safe, appropriate and legal implementation of any remedial action recommendations rests with the client.

## 4. Assessment Brief

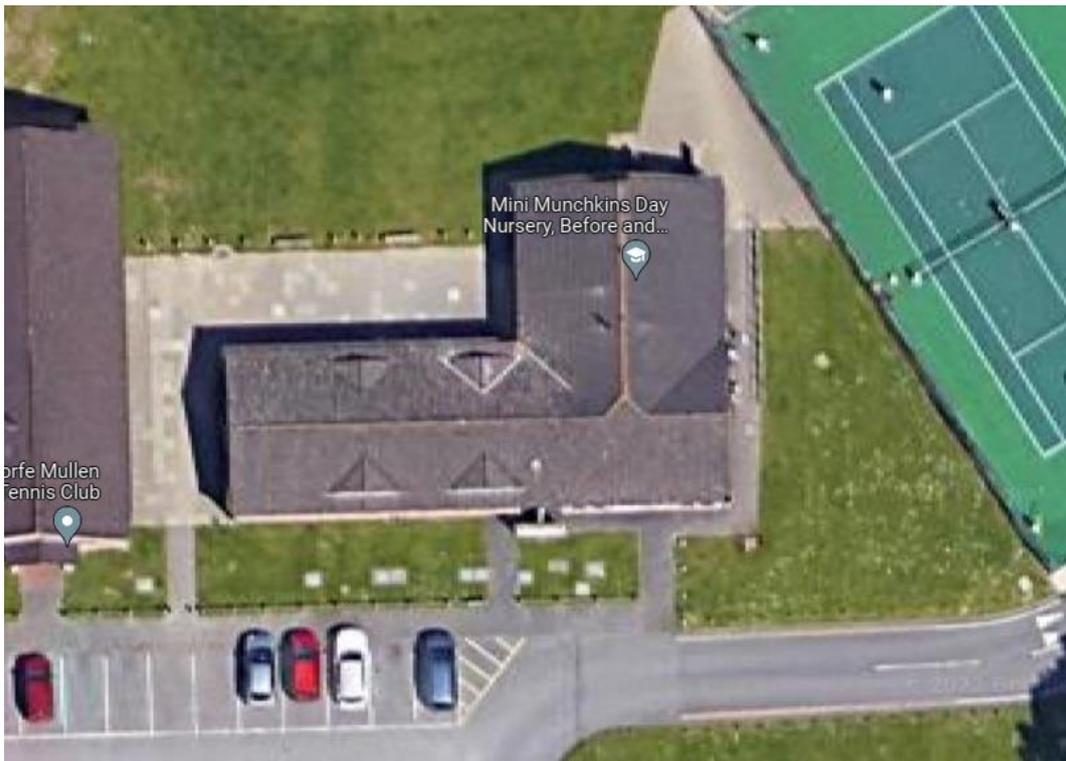
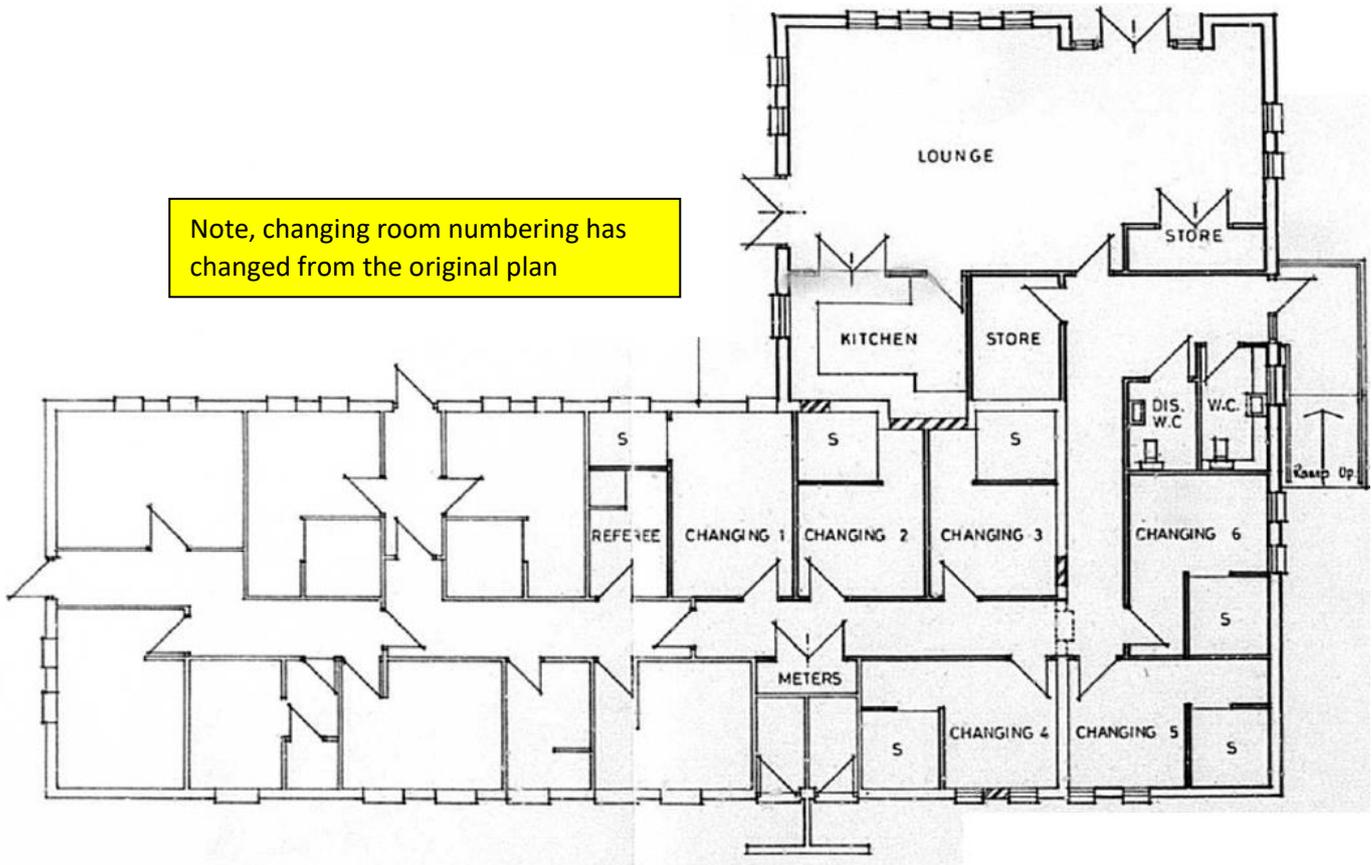
- 4.1. Assessment commissioned by: **Corfe Mullen Town Council.**
- 4.2. Scope of assessment: All areas and activities covered under the lease agreement, which states:

*“2. The Trustees hereby jointly and severally covenant with the lessor as follows...*

*(i) to permit the Lessor by their servants or agents whenever they shall think proper and at reasonable times to enter upon any part of the demised premises to view the state and condition thereof of the buildings or erections thereon .... “*

- 4.3. Issues to be considered during the inspection:
- 4.3.1. Issues immediately threatening child safety
  - 4.3.2. General housekeeping
  - 4.3.3. Fire safety and emergency lighting
  - 4.3.4. Asbestos management
  - 4.3.5. Legionella management
  - 4.3.6. Gas safety
  - 4.3.7. Condition of internal flooring and external paving
  - 4.3.8. Electrical safety
  - 4.3.9. First aid provision
  - 4.3.10. Ventilation
  - 4.3.11. Condition of building structure and fittings

### 5. Pavilion Plan as at 1994



Aerial view courtesy Google® Maps

## 6. Inspection Findings

### 6.1. Building structural safety with regard to young children and members of the public

(Note this report is only looking for obvious building defects that could harm a child – it is not a full child safety review, which should be undertaken by the correct authorities).

- 6.1.1. A number of brick windowsills are defective. Bricks are loose and can be easily prised loose. There is a risk that a child could accidentally pull a brick loose, causing it to fall and injure them.



**UNACCEPTABLE**

- 6.1.2. Fencing in the patio area – A wooden fence is located around the paved patio area where the children play. No splintered wood was identified, and therefore no serious harm to small children is anticipated if the fence is kept in good repair and the children are correctly supervised.

**ACCEPTABLE**

- 6.1.3. Exposure of “small hands” to defective vent covers - There were two vents in the paved play area where small children could be exposed to sharp edges from unguarded vent pipes, and as they are at child height, may reach into the pipes themselves.



**UNACCEPTABLE**

- 6.1.4. Fire precautions taken by the Nursery - The nursery has installed two smoke detectors – one at the kitchen hatch and one in the corridor outside the main room. In addition, it undertakes regular fire drills, particularly when there are new starters.

**ACCEPTABLE**

- 6.1.5. Emergency lighting in the area occupied by the nursery – there is one emergency light in the kitchen, however at the time of the inspection it was not possible to determine if there were any in the main room. Normally there is a small indicator light within the light fitting itself to show that it is a

'maintained' light<sup>1</sup>. Similarly, there was no list of emergency light units in the fire log. In the event of a power cut happening during hours of darkness this would be a matter of concern. The nursery's hours of operation are listed as 8am-6pm.



**FURTHER INVESTIGATION ADVISED**

6.1.6. Kitchen Hygiene – The kitchen has a number of hygiene issues, and at the time of the investigation there were concerns about the state of decoration, the effectiveness of the extractor fan, the condition of the kitchen floor surface and malodour within the microwave oven. A review of the condition of the paintwork, extractor, microwave and floor surface is recommended.

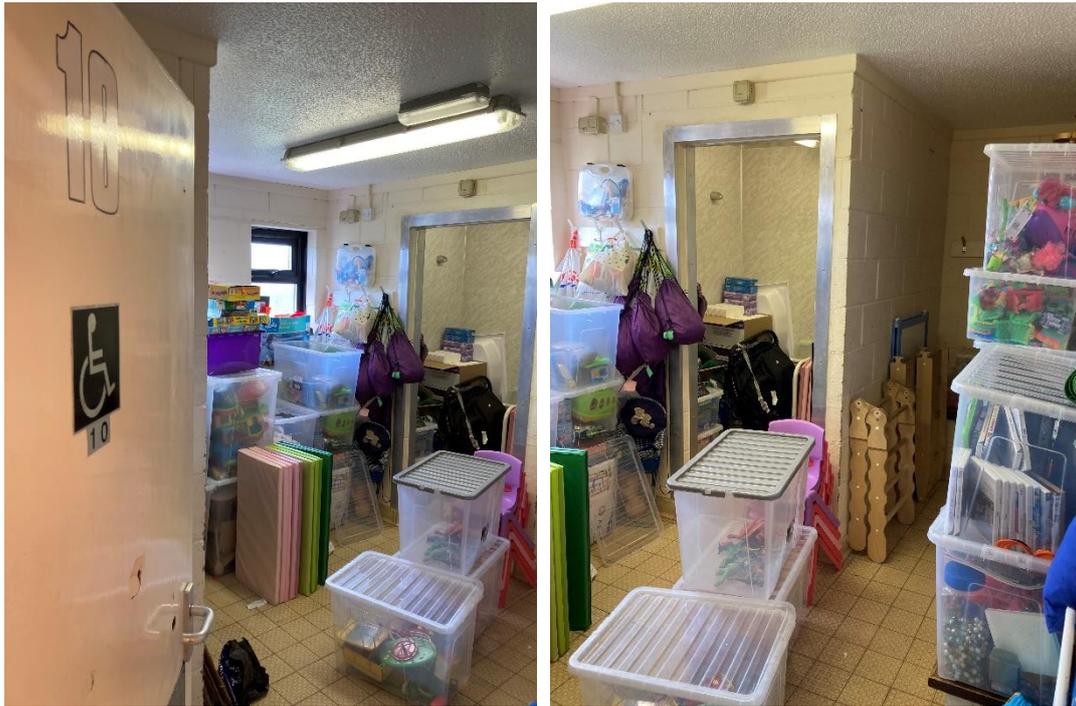


**UNACCEPTABLE**

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<sup>1</sup> Maintained emergency lights are **mains powered** and used as part of the normal room lighting system. But, in an emergency situation when mains power fails, it will continue to stay lit for a specific duration **powered by a back-up battery**.

6.1.7. Storage space for nursery equipment – Room 10 is a decommissioned disabled changing room. There is no smoke detection in the room, and it was not clear at the time of the inspection if reasonable adjustment had been made elsewhere for the needs of disabled visitors.



In addition, one of the other changing rooms had been given over to storage of toys and other debris. From a fire, housekeeping and hygiene perspective this is not a desirable situation.



**OBSERVATION**

## 6.2. Fire safety

### 6.2.1. Fire risk assessment

There was no evidence of a fire risk assessment having been undertaken in the building, nor reference to it on any noticeboard. The basis for this assumption is due to the inadequacy of fire signage, the removal of an internal fire compartmentation door, the lack of fire instructions, failure to complete the fire inspection log correctly and the inadequacy of emergency lighting.

The Regulatory Reform (Fire Safety) Order 2005 requires the responsible person to make a suitable and sufficient assessment of the risks to which people are exposed, for the purpose of identifying the general fire precautions the responsible person needs to take to comply with the requirements and prohibitions imposed on them by or under this Order

Business premises and buildings that are open to the public are required to comply with more stringent fire safety regulations than those applied to private property. The reason for this is that these premises are responsible for ensuring the safety of all persons on-site in the event of a fire-related emergency. Given the volume of people likely to be visiting the property, these fire safety regulations involve higher levels of practical and theoretical planning.

**UNACCEPTABLE**

### 6.2.2. Fire Action Instructions

The single fire safety notice (dated 2009) located at the rear fire door says "If you discover a fire raise the alarm" without providing any guidance on how to do so. The other wording which instructs the reader to tackle the fire is also not acceptable. The signage is not compliant with the Health and Safety (Safety Signs and Signals) Regulations 1996. It is recommended that there should be fire instructions posted at each fire exit.



example fire action sign



**UNACCEPTABLE**

### 6.2.3. Fire alarm system

There is no fire alarm system, and therefore no automatic way of alerting other people in the building to the presence of a fire.

**Approved Document B (fire safety) volume 2: Buildings other than dwellings, 2019 edition incorporating 2020 amendments (s1.27)** requires all buildings to have arrangements for detecting fire and raising the alarm. For a building of the size, complexity and nature of use of the Pavilion a fire specialist should assess the requirements (ss 1.28-1.29) and determine whether a suitable electrically operated fire warning system should be installed i.e., inter-connected smoke detectors and fire alarm panel/call points complying with BS 5839 (fire detection & alarm systems for buildings)

There are currently two (unlinked) battery operated smoke detectors provided by the nursery.

- above the kitchen hatch
- outside changing room 9

On testing, the volume of the alarm was not found to be sufficient to penetrate throughout the building.



**UNACCEPTABLE**

#### 6.2.4. Emergency Lighting

Whilst there are several emergency lights in the building, it does not appear that the number provided is suitable and sufficient. This needs further investigation by a lighting specialist.

**FURTHER INVESTIGATION ADVISED**

In addition, there are only two entries in total in the 'Dorset Fire & Security' Logbook. It would be normal to see the following:

- Annual testing of emergency lighting - this should cover 3-hour discharge testing of emergency lighting. This appears to have been undertaken in January 2022, with at least 5 of the lighting units failing. It appears that 4 of these were replaced in February. Regardless, the logbook has not been completed correctly so it is not clear which lights were tested, by whom, at what time, and what remedial action was necessary.
- Monthly emergency lighting checks in accordance with BS EN 50172 ('flick-tests') do not appear to be undertaken. These monthly tests should be undertaken and recorded in the logbook.

Date	Time	Sign/Luminaire number	Test Satisfactory Yes/No	Remedial Action	Init
12/1/2022					
<p><i>Routine Discharge test of Emergency lights</i>  <i>The following failed Rooms, Room 9, Room 6, o/s Room 1, o/s Practice</i>  <i># No ELU in disabled toilet</i>  <i>All other lights functioning correctly</i></p>					
03/02/22	Am	/	/	Replaced the following failed A&E Rooms, 6, 9, corridor x2. <i>(Signed)</i>	

**UNACCEPTABLE**

#### 6.2.5. Fire extinguishers

All inspected on schedule. Last checked September 2021

**Conclusion: ACCEPTABLE**

#### 6.2.6. Fire signage (exits and extinguishers)

Fire signage in the building is inadequate and needs to be improved. Fire extinguishers and fire routes are not sufficiently signposted (e.g. the passageway to the West exit, near changing room 1, was not correctly signposted on the other side of the internal inter-connecting door). One fire sign has been partially painted over and should be replaced. One of the fire exits says "push bar to open" but the bar has been removed.

It should be possible to stand in the corridor and always see a fire exit sign, this was not always the case. In short, fire signage is inadequate.



**UNACCEPTABLE**

#### 6.2.7. Storage of cardboard in corridor



The cardboard being stored in the corridor, which is a fire-protected area, should be moved to a designated storeroom, or disposed of. The corridors should all be kept clear of combustible material, and all internal fire doors kept closed.

**UNACCEPTABLE**

#### 6.2.8. Internal fire doors



The fire door outside the ladies' toilets should be replaced. The door has been removed, and therefore the corridor's fire protection has been compromised.

**UNACCEPTABLE**

In addition, several the internal fire doors do not have vision panels. It is recommended that these are replaced with more suitable doors.

[Building Regulations Approved Doc B](#) Section 5.14 provides information on when vision panels are required.

“Doors should contain vision panels in both of the following situations.

- a. Where doors on escape routes divide corridors.
- b. Where doors are hung to swing both ways. There are two reasons why you may require a vision panel.

There are two logical reasons for this, namely to see if there is a fire on the other side, and to see if there is anyone on the other side before you open the door.

**UNACCEPTABLE**

### 6.3. Legionella management

There was no evidence of legionella inspection or L8 controls in place at the time of the visit. Legionnaires' disease is a potentially fatal form of pneumonia caused by the inhalation of small droplets of contaminated water containing Legionella. All man-made hot and cold-water systems are likely to provide an environment where Legionella can grow.

L8 Approved Code of Practice applies to the control of Legionella bacteria in any premises in connection with a business or other undertaking, where water is used or stored and there is a reasonably foreseeable risk of exposure to Legionella bacteria. Penalties for failing to comply can be very severe.

**UNACCEPTABLE**

### 6.4. Gas safety

It was not possible to view gas safety records at the time of the inspection, and the room where the gas boiler was believed to be present was (rightly) kept locked. It was not possible to view the ventilation arrangement or condition of the boiler within the gas boiler cupboard.

**FURTHER INVESTIGATION ADVISED**

### 6.5. Asbestos management

- 6.5.1. Note - This inspection did not include an intrusive inspection of floors, ceilings and walls. However, there was no asbestos register available at the time, so it was not possible to determine the presence or otherwise of asbestos containing materials.
- 6.5.2. 'Vinyl' floor tiles are present, some in very poor condition, which looked to be of the type that may contain asbestos. This should be explored, and a management plan put in place.
- 6.5.3. Textured ceiling coating was present ('Artex') which was known to be asbestos containing at the time this building was constructed. This is relevant in that so many of the ceilings within the building are in a poor state of maintenance, and it may be decided that the paint should be scraped off and replaced. This must not happen until an asbestos check has been undertaken.



**FURTHER INVESTIGATION ADVISED**

## 6.6. Fixed Electrical Wiring Tests

It was not possible to view the building's fixed electrical wiring inspection records at the time of the time of the inspection. It is not, therefore, known if the inspection has been undertaken within the last 3-5 years or not.

The frequency of fixed electrical testing is determined by the type of premises in question. Current recommendations for buildings open to the public, working on the basis of the maximum time between periodic inspections, are:

- Leisure complexes – 3 years
- Places of public entertainment and theatres – 3 years
- Community centres/village halls – 5 years
- Educational premises – 5 years

**FURTHER INVESTIGATION ADVISED**

## 6.7. Electrical PAT testing

Portable electrical appliances had all been PAT tested (3/2/22)

**Conclusion: ACCEPTABLE**

## 6.8. Ventilation in the Changing Rooms

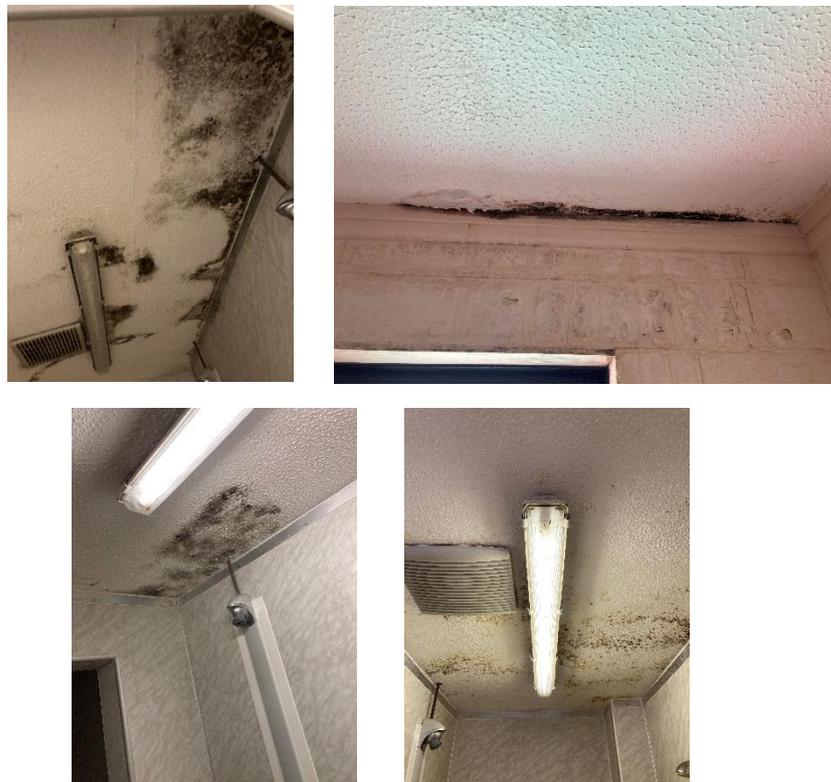
The changing rooms should have adequate ventilation for general health reasons, in addition to preventing damage to the paintwork and fittings.

At the time of the inspection, many of the air extraction units were either not working or had been set to the wrong automatic setting. Consequently, the changing rooms, in general, smelt unhygienic (changing room 7 in particular) and there are numerous examples of mildew owing to lack of effective ventilation.

According to the Building Regulations “Approved Document F – Ventilation” the three main types of ventilation are:

- Purge - this is achieved by opening the window.
- Trickle - which can be incorporated into the head of the window framework, or by some other means.
- Extract ventilation - that uses fans or blowers to provide fresh air to rooms when the forces of air pressure and gravity are not enough to circulate air.

It is recommended that an engineer who understands the requirements of CIBSE Guide B; section 2.3.21 (practical design of heating, ventilation and air conditioning systems for sports and leisure centres) should investigate and install, reset or maintain appropriate ventilation units.



**UNACCEPTABLE**

## 6.9. First aid provision

The nursery staff keep their own first aid materials, and this, on cursory examination, appeared to be adequate. As previously stated, it is not the intention of this report to determine child-safety legal compliance. The sports club is reported to provide its own first aid equipment, however this was not available at the time of the inspection, so no conclusion has been drawn.

### 6.10. Condition of building structure and fittings

6.10.1. **Soundness of the walls** – There were a number of instances where cracking in the walls was seen. This report is not a structural survey; however, these cracks were consistent with minor building subsidence.



**FURTHER INVESTIGATION ADVISED**

6.10.2. **Locks to the changing rooms** – Each of the changing rooms has a door bolt, allowing the door to be locked from the outside. Consequently, any person inside the changing room can be trapped, either inadvertently or through horseplay. Given the inadequacy of emergency lighting and fire detection/alarms these bolts **must be removed on safety grounds**. If the purpose of the bolts is to provide out-of-hours security assurance, to prevent the ingress of intruders coming through a window, then an alternative method must be employed.

It must not be possible to lock any person in the changing rooms (apart from personal safety, there is an offence known as ‘false imprisonment at common law by direct means’).



**UNACCEPTABLE**

### 6.10.3. Fluorescent light fittings

Several the fluorescent light fittings have lost their covers. Therefore, the light tubes are exposed. Given the nature of this building, it is foreseeable that the light tube could be struck and shatter, releasing broken glass into the changing rooms.



**UNACCEPTABLE**

### 6.10.4. Inspection of light fittings and sensors

It was not apparent if there is an inspection regimen for the light fittings, however at the time of the inspection a few of the lights were not working. In addition, although some of the lights were on a sensor, these did not always work correctly. In particular, the light in changing room 7 switched itself off when the room was occupied. The lack of any other lighting means that any occupants could be left in the dark.



**UNACCEPTABLE**

### 6.11. Condition of external paving

There are many areas where the external paving is loose or uneven. In particular, the paved steps at the fire exits had a number of loose paving slabs, which – whilst not a direct risk at the moment, could potentially deteriorate into something more hazardous. It is recommended these loose slabs are investigated and remedial work undertaken if possible.

**FURTHER INVESTIGATION ADVISED**