

Inspection Report

1 Premises Details:		
Name & Address of Premises: <u>Narconon</u> <u>Cafe Ne Regy</u> <u>2 Albany Rd</u> <u>St Leonards, Opea</u> <u>TN38 8UW</u>	Operator: <u>Narconon</u> Persons Interviewed: <u>[Redacted]</u> Designation: <u>[Redacted]</u> Workplace Rep: <u>[Redacted]</u> Inspection Date: <u>28/3/11</u> Inspection Time: <u>[Redacted]</u>	Head Office Address: <u>[Redacted]</u> Designation: <u>[Redacted]</u> Tel No: <u>[Redacted]</u> PAP: <u>[Redacted]</u>
Tel No: <u>420036</u> No of Employees M <u>2</u> F <u>[Redacted]</u>		

2 Reason for Inspection: Primary <input checked="" type="radio"/> Secondary <input type="radio"/> Whole Premises <input type="radio"/> Part <input type="radio"/>	
Food Safety Act 1990 <input checked="" type="checkbox"/> A: <u>[Redacted]</u>	Food Hygiene (England) Regulations 2006 Regulations (EC) 852/2004 <input checked="" type="checkbox"/> B: <u>[Redacted]</u>
Health & Safety at Work etc Act 1974 <input type="checkbox"/> C: <u>[Redacted]</u>	Other (please specify) <input type="checkbox"/> D: <u>[Redacted]</u>

3 Matters Discussed / Action Required / Recommendations of good practice/ Samples
<ul style="list-style-type: none"> * Place all the current pages of your SFRB pack in one folder and ensure they are kept up to date. - The Land Area is not readily accessible and should be relocated on the wall outside / next to the pantry accommodation - Timescale 1 Month * Ensure all of the fridges are maintained at below 5°C
The above matters should be completed by <u>* immediate - 1 Month</u>

Records Inspected: Food Safety System ☐ PC Contract ☐ Cleaning Schedule ☐
 Training Records ☒ Other ☐ Safer Food Better Business ☒
 Action: ☐ r to follow ☐ Verbal Advice ☐ Formal Notice ☐

Signed: [Redacted] Name (block Capitals) [Redacted]
 Designat: [Redacted] Date: 28/3/11

Tel: [Redacted]
 This report covers only those areas inspected at the time of the visit and does not necessarily extend to the whole premises. It was not possible to observe all the practices undertaken. As discussed, day to day monitoring of good working practice must be a clear responsibility of the line manager(s). It does not indicate compliance with any provision of the above legislation. This report is not a legal notice requiring work to be carried out. However, failure to act on those items that are legal requirements may lead to formal action. Other means of achieving the same effect may be chosen. For further information or to clarify any matters contained in this report please phone the above named officer. If you feel the action required by this report is not reasonable then you may, within the next fourteen days, contact my principal officer, on 01424 783230.

4 Acknowledgement of receipt of Report:
I acknowledge receipt of this report: Signed: <u>[Redacted]</u> <u>[Redacted]</u> interviewed

5 Aide Memoir:

Food Safety:

Management & Organisation
Training
Hazard Analysis System
Stock Rotation
Temperature Control
Cleaning Schedules
Waste
Pest Control
Personal Hygiene
Infectious Disease
Registration
Notify other Regulatory Authority

Health & Safety:

Management &
Organisation
H & S Policy/Audits
Accident Risk / RIDDOR
Welfare / First Aid
Lifts & Hoists
Transport
Licences
Insurance
HSW Poster
Smoke free signage

Assessments:

Management
Workplace
Manual Handling
COSHH
Work Equipment
Electricity
DSE's
Noise
PPE
Asbestos

Topic based Inspections:

Falls from Height
Workplace Transport
Slips and Trips
MSD
Stress
Dermatitis

6

Inspection Findings: Use this section to make notes of the main hazards / risks identified during the preliminary interview with the employer or his representative and to make notes of the inspection unless legal action is considered likely when contemporaneous notes should be made in your notebook.

R10 1 month records
resitting of land drain

Use continuation sheet if necessary

7

Enforcement

1. Voluntary Closure
2. Seizure, detention & surrender of food
3. Suspension/revocation of approval or licence
4. Emergency prohibition notice
5. Prohibition order
6. Simple caution
7. Improvement notices
8. Remedial action & detention notices
9. Written warning
10. Prosecutions concluded

Enforcement Reasons

1. Hygiene (eg HACCP & training)
2. General Hygiene
(eg personal hygiene, structures and equipment)
3. Composition
4. Contamination
5. Labelling & presentation
6. Other offences
7. Food quality under other legislation

Scores on the Doors

Name of Business NARCONON, CAPLE NE FERNE

Address of Business NARCONON, CAPLE NE FERNE 2 Albany Road

St Leonards-on-sea East Sussex TN38 0LN

Person seen/interviewed

Position Chef

Business type H05 Catering Establishment

Cuisine type (if applicable)

Date of inspection 28/3/11

Inspection Reference

Food Hygiene (England) Regulations 2006, Regulation (EC) 852/2004

Type of food and method of handling

Score

30

Method of processing

Score

0

Consumers at risk

Score

5

Food hygiene and safety procedures (food handling practices and procedures, temperature control)

	Score	Justification
0		
5		
10	10	no over clothing and
15		no hand drying material
20		no over clothing
25		

Structure (cleanliness, layout, condition, lighting, ventilation, facilities etc)

	Score	Justification
0		
5		
10		
15	15	Hand basin located in Dry good
20		store. no hand basin in
25		Dan. acc.

Confidence in Management/control systems (See overleaf)

	Score	Justification
0		
5	5	SRBB up to date
10		
20		
30		

Significant Risk

0

Total score:

65

Star rating will be:

2 Stars

Officer name:

Signature:

Date business notification sent

Date of score going live on system Editors initials

HASTINGS BOROUGH COUNCIL FOOD INSPECTION

Inspector

Date: 28/3/11

Registration Form: Left during inspection ☐ New FBO (see completed inspection form) ☐ No change in FBO ☐

Trading Name: NARCONON, CAPLE NE FERNE

Address: NARCONON, CAPLE NE FERNE 2 Albany Road St Leonards-on-sea East Sussex TN38 0LN

Telephone: 420036

Fax:

Email:

Food Business Operator: Narconon

Type of Business: H05 Caring Establishment

Registration Date:

First Language:

English

Risk Rating: Previous: B

New: C

Lead Officer Approval

Opening Times / Production times: 24/7

Seasonal dates:

Premises Licence: yes/no

Number of seats inside:

Average Number of High Risk Meals per day: 50

Pre-packed only:

Vulnerable Groups: <20

Take Away:

Full Staff Name	Job	Training	Date	Cert. seen
	chef	level 2	2009	yes
	chef	- n -	2009	no
Young persons: Other persons' access to kitchen:				

Opening / Closing checks: 5.1

Extra checks: 5.2

Suppliers: 5.6

Books co Tesco Northern Dairies

Food Types/Processes:

- lunch & dinner every day
- Meat & Veg type dinner
- lunch time-burgers & wrap - light meal

Documented Procedures? N/A: SFBB:

Company:

Independent:

Supply to other premises?

Prove it - checks at each stage: 5.3			
	Controls	Monitoring	Recorded
Receive	collected from store	yes	no
Store 3.1	temp? Varying temperatures		
stock control 5.7	Good control in place		
Prepare	Standard preparation on steel	left	no
defrost 3.3	on fridge		
Cook 4.1 4.4	Standard temp?		
Hot hold 4.5	cook & serve temp?		
Cool 3.2	how long?		
freeze 3.4	frozen veg & bread only		
Reheat 4.3	Defrost in fridge and temp? into oven		
Handle/Serve Display Buffet:	display times?		

Extra care foods: eggs; shellfish; Rice; Pulses 4.2
Rice cooling method:

Probe Thermometer:	Integral Thermometers:	Independent Thermometers:
Infrared only		
How do you prevent cross-contamination from raw to ready to eat foods? 4.6		
How do you clean and disinfect equipment and food surfaces (examples of cleaning chemicals and their use)? Type of cloths used: 1.2		
Food safe Sanitiser	Colour coded/ Separate boards	Separate utensils
Raw meat handling area: Separate time	Separate area	

STORAGE (avoid contamination, deteriorations, physical, chemical, foreign body etc) 1.7

Separation: 1.3

Covered: yes

Stock control - Date coding: 5.7

Temperatures taken during inspection: (probe/infrared) 3.1

Day dot if in freezer

Food Allergies: 1.6

PREMISES (permits cleaning and disinfection, appropriate production flow, prevents cross contamination) 1.5

Drug & Alcohol rehab centre
large kitchen with lots of space

Satisfactory ☒

Unsatisfactory ☐

Notes

EQUIPMENT 1.5

Central Island with range, grill
& fryer under extract hood

Satisfactory ☒

Unsatisfactory ☐

Notes

CLEANING 1.2 2.1

Schedule 2.3

Is the standard of general cleaning and disinfection acceptable?

Satisfactory ☒

Unsatisfactory ☐

Notes

Good standards

Is the standard of detailed cleaning acceptable?

Satisfactory ☒

Unsatisfactory ☐

Notes

WASHING FACILITIES (hot & cold water, right chemicals being used and adequate facilities)

Number Deep Sinks: 1

H&C

Number Sinks:

H&C

Satisfactory ☒

Unsatisfactory ☐

Notes

WASHBASINS (hot & cold water, soap and drying facilities)

Location Access	Water Supply	Handwashing	Hand Drying
Dry good store	Constant Hot Cold Mixed	Antibac Soap Nailbrush	Towel Paper-Towel
	Constant Hot Cold Mixed	Antibac Soap Nailbrush	Towel Paper-Towel
	Constant Hot Cold Mixed	Antibac Soap Nailbrush	Towel Paper-Towel

Satisfactory ☐

Unsatisfactory ☒

Notes

Relocate adjacent to W.C.
at entrance door to kitchen
no hand basin

LAVATORIES

Male:

Female:

Lobby:

Mixed:

Ventilation:

Separate Staff WC

Satisfactory ☐

Unsatisfactory ☒

Notes

DRAINAGE (effective, maintained, grease traps)

Satisfactory ☐

Unsatisfactory ☐

Notes

VENTILATION (suitable & sufficient, avoid contamination, can be cleaned)

Satisfactory ☐

Unsatisfactory ☐

Notes

Air Temp:

LIGHTING (adequate)

Satisfactory ☐

Unsatisfactory ☐

Notes

CHANGING FACILITIES

Satisfactory ☐

Unsatisfactory ☐

Notes

C:\DOCUME~1\WGOODL~1\LOCALS~1\Temp\10\FOODINS.DOC

Whites all in the
wash - out door clothing
being worn.

FLOORS (good condition, permit cleaning etc)
Satisfactory ☒ Unsatisfactory ☐

Notes

Altra floor Sat

WALLS (good condition, permit cleaning etc)
Satisfactory ☒ Unsatisfactory ☐

Notes

tiled Sat

CEILINGS (good condition)
Satisfactory ☒ Unsatisfactory ☐

Notes

fake Sat

WINDOWS (screens)
Satisfactory ☒ Unsatisfactory ☐
Removable Fly Screens

Notes

roof lights Sat

DOORS (good condition, permit cleaning)
Are the doors easy to clean and where necessary disinfect?
Satisfactory ☒ Unsatisfactory ☐ Notes

FOOD WASTE (Storage, storage at premises, disposal arrangements)
Refuse Contractor: *LHS* Collections per week:
Waste Oil: *Lumen* Animal By-Products (not caterers)
Satisfactory ☒ Unsatisfactory ☐ Notes

PEST CONTROL (adequate preventative procedures and proofing to control) 1.4
Satisfactory ☒ Unsatisfactory ☐ Notes
Contractor or In-house checks?

Self check

WATER Mains / Private
Satisfactory ☒ Unsatisfactory ☐ Notes

PERSONAL HYGIENE (working standards, clothing, hats, jewellery, hand washing) 1.1 2.2
Satisfactory ☒ Unsatisfactory ☐ Notes

no overall

REPORTING ILLNESS (understanding responsibility, reporting procedure)
Satisfactory ☒ Unsatisfactory ☐ Notes

SMOKEFREE COMPLIANCE (non licensed premises)

Correct Signage at all entrances Satisfactory ☒ Unsatisfactory ☐

Evidence of smoking inside premises Satisfactory ☒ Unsatisfactory ☐

Evidence of 'due diligence' (no ashtrays, no tobacco on sale) Satisfactory ☒ Unsatisfactory ☐

Associated Matters (outside: noise, litter, smoke drift) Satisfactory ☒ Unsatisfactory ☐

OCCUPATIONAL HEALTH & SAFETY INSPECTION REPORT

Hastings
BOROUGH COUNCIL

...Making the Difference...

Name of Business

Narceon

Postal address of business

2 Albany Road St Leonards on Sea East Sussex TN38 0LP

Telephone #

Facsimile #

E-mail

Person interviewed

Address of Head or Registered Office

Telephone #

Facsimile #

E-mail

Web site

Person to contact

Action Plan

What areas need to be improved and any time period for completion

See Report of visit

OCCUPATIONAL HEALTH & SAFETY INSPECTION REPORT

Hastings
BOROUGH COUNCIL

...Making the Difference...

Summary of initial action to be taken by the Authority

Verbal advice ☐ Follow up letter ☒ Service of Notice ☐ Prosecution ☐
 Officers summary of survey

☐ Acceptable ☐ Unacceptable but No revisit ☐ Unacceptable revisit required in.....

Inspection by

Ins

Date

18/10/05

Inspection Summary

Number of employed persons.	Nil <input type="checkbox"/>	1 to 5 <input type="checkbox"/>	Over 5 <input checked="" type="checkbox"/>
Number of self employed	Nil <input type="checkbox"/>	1 to 5 <input type="checkbox"/>	Over 5 <input type="checkbox"/>
Do they have a safety policy document?	Yes <input type="checkbox"/>		No <input checked="" type="checkbox"/>
Do the public have access to the premises?	Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>
How would they describe the business?	<i>Rehabilitation Centre</i>		
Registration	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Not applicable <input type="checkbox"/>
Is the business registered and Are the details up to date?			
Safety Representative is there a safety representative? We must send copy of the inspection report to the Employee's representative	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Not applicable <input type="checkbox"/>
Union Name of representative Address			
H & S Information for Employees Have they bought the poster and displayed it? Have they filled in the boxes?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Not applicable <input type="checkbox"/>
Insurance Have they employed anyone and obtained employer liability insurance? Have they displayed the current certificate?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Not applicable <input type="checkbox"/>
Public liability (not legally required)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Not applicable <input type="checkbox"/>
Health & Safety Policy Do they need a policy? Have they produced a policy, kept it up to date and do all the employees know about the policy and about of any revisions?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Not applicable <input type="checkbox"/>
Management of Health & Safety at Work Regulations Have they identified all the hazards? Have they reduced the risk of people being injured by those hazards	Are they aware, do they have written documents showing their risk assessments and are <u>adequate</u>		

<p>ASFAIRP? Have they appointed competent persons and co-ordinators when required. Are there emergency procedures and training?</p> <p>Are they keeping up to date with hazards and identifying people at special risk? ie employees, self-employed, Public, Contractors, Children Have they identified those at especial risk New & Expectant Mothers and Young persons. Have they produced a written assessment if they have more than five staff?</p>	<p><u>measures taken</u></p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable</p>		
<p>Staff Training Records</p> <p>Does everyone know how to do work safely? If someone does get injured could they prove that the training was adequate to do the work safely that everyone knew what to do? Are there records? Does everyone know what to do in an emergency?</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/></p>		
<p>Accident Reporting RIDDOR</p> <p>Do all your employees know about the need to report accidents and incidents? Have they got accident and incident report records? Have they got a supply of report forms?</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/></p>		
<p>Violence at Work</p> <p>Are they aware of the potential for violence at work and have they taken measures to reduce the hazard? Have they considered what to do if an incident occurs?</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/></p>		
<p>Electricity at Work Regulations</p> <p>Have they had all of the electrical installation examined by an electrician? Do they check electrical appliances and cables for damage?</p> <p>Have they enough sockets and are they avoiding temporary measures becoming permanent? Are the installation and equipment suitable for the use or environment in which they are being used?</p> <p>Can they use rechargeable or low voltage electrical appliances?</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not applicable <input type="checkbox"/></p> <p><i>Details of NICEIC to be requested</i></p>		
<p>Hot water Systems and legionella</p> <p>An aerosol risk may occur where the system is more than 300 litres and 20-45°C Are they prevent the hazard of legionella? Are they protecting users against scalding of hot water users?</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not applicable <input type="checkbox"/></p> <p><i>See Report of NICEIC</i></p>		
<p>Gas Installations</p> <p>Is the installation only maintained by CORGI registered installers and do they know what to do if there is a gas leak?</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not applicable <input type="checkbox"/></p> <p><i>See Report</i></p>		
<p>Liquid Propane Gas</p> <p>Is it used? Are they aware of hazards and safe usage? Quantity on Site in Litres? Do they comply with guidance on safe storage and use</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/></p>		
<p>First Aid</p> <p>Have they provided adequate first aid facilities, is there an appointed person? Do they need and have enough First Aiders, are they being trained every three years?</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/></p>		
<p>Control of Substances Hazardous to Health</p> <p>Have they identified the substances or infections to which people are exposed or are used at work, are they hazardous, are they storing and using them properly? Is everyone trained? Is an adequate assessment available? Could they use a safer substance or method of work? Do they need personal protective clothing, is it suitable, is it in good repair, does it fit the user properly?</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/></p>		
<p>Personal Protective Equipment at Work Regulations</p> <p>Does the work require personal protective clothing? Is it suitable? Does it fit? Are they trained? Is it in good repair maintained & stored properly?</p>	<p>Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/></p>		
<p>Noise at Work</p> <p>Is anyone at risk from noise? Have they made the work as quiet as possible? Have they provided hearing protection for noisy work that they cannot avoid? Are they checking that hearing protection is being</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/></p>		

worn? Are they also reducing exposure periods to unavoidable noise?	
Test Certificates up to date Lifts & hoists - 12 months Passenger lifts – every 6 months Pressure vessels -26 months to 48 allowed written scheme of inspection	Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable <input type="checkbox"/> Lift Hoist Air receiver Pressure vessel
Provision and Use of Work Equipment Regulations Do they buy, install and maintain equipment to ensure safety of the user? Do all the users know how to use the equipment properly? Are they keeping equipment safe by effective planned maintenance? Has it got adequate controls and isolators? Have they trained the user?	Are they aware, do they have written documents showing their risk assessments and are <u>adequate measures</u> taken Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/>
Health and Safety (Display Screen Equipment) Regulations Have they got display equipment and is it used for significant periods? Have they carried out the assessment and carried out the duties to reduce potential hazards to users? Are users allowed eye test glasses etc.?	Are they aware, do they have written documents showing their risk assessments and are <u>adequate measures</u> taken Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/>
Workplace (Health, Safety and Welfare) Regulations Have they provided a minimum indoor temperature of 16°C or 13°C? Have they got a thermometer to check temperatures? Does, the Lighting including emergency lighting work is it good enough? Are there at least 11 cubic metres of unoccupied workspace space for each employee? (Ignoring over 3m high) Are all the workstations okay and safe Safety Are there any places where anything or a person could fall and injure? Are the pedestrian and vehicles traffic routes safe? Can the windows and skylights be safely opened, closed and cleaned? Are all glazed doors and partitions safe by position or construction against persons falling or walking into them or do they need to consist of safety materials and be marked? Are the doors and gates designed to prevent trapping or persons being injured (safety devices, vision panels)? Have they constructed and maintained the floors to prevent falls, slips and trip hazards? Do they mark and clear up spillages or move obstructions and loose materials as soon as possible?	Are they aware, do they have written documents showing their risk assessments and are <u>adequate measures</u> taken Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not applicable <input type="checkbox"/>

<p>Facilities</p> <p>Have they provided adequate toilets, washing, eating and changing facilities for employees? Does the hot & cold water work? Is there provision for the secure storage of clothing and personal effects?</p> <p>Is there a supply of drinking water available at all times? Have they provided suitable and sufficient seating? Have they provided rest areas for employees and arrangements for separating smokers and non-smokers? Are aware of the need to provide facilities for working pregnant women and nursing mothers?</p> <p>Housekeeping</p> <p>Do they ensure good housekeeping and cleanliness? Do they have suitable drainage for wet work areas that will prevent slip hazards being created? Are they ensuring that they unlock fire exits and routes are kept clear?</p>	
<p>Manual Handling Operations Regulations can they make the task easier and safer or be mechanised? Have they trained employees how to lift safely? Can they make the loads smaller?</p>	<p>Are they aware, do they have written documents showing their risk assessments and are <u>adequate measures</u> taken</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/></p>
<p>Working time Directive Are they aware of these regulations and are they keeping the records if the regulations apply</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not applicable <input type="checkbox"/></p>
<p>Other Observations</p> <p>AS hosted</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not applicable <input type="checkbox"/></p> <p>no survey evident. Boiler Room</p>

Additional Notes

☐ Photographs taken of

Risk Inspection Rating

Inspectors Judgement

Guidance on interpreting compliance see 67/1:

Safety Hazard

1 Negligible 2 Low 3 Medium to Low 4 Medium to High 5 High 6 Major

Health Hazard

1 Negligible 2 Low 3 Medium to Low 4 Medium to High 5 High 6 Major

Safety Risks

1 Negligible 2 Low 3 Medium to Low 4 Medium to High 5 High 6 Major

Health Risk

1 Negligible 2 Low 3 Medium to Low 4 Medium to High 5 High 6 Major

Welfare

1 Very good 2 Good 3 Fair to good 4 fair to bad 5 Bad 6 Very bad

Public Risk

1 Negligible 2 Low 3 Medium to Low 4 Medium to High 5 High 6 Major

Confidence in Management

- 1 Extremely confident (policy & assess)
- 2 Very confident (written safety policy)
- 3 Reasonably confident (informal letter)
- 4 A little confident (letter with revisit)
- 5 Almost no confidence (improvement notice)
- 6 No confidence (Imp & prohibition notice)

Rating Score 1-6	Weight Multiplier	Product Total
3	6	
3	6	
2	9	
2	9	
1	5	
2	10	
3	10	
Total		+ Industry NAD

Notes:

1. Windows
2. trailing cable + extension cable ✓
3. DSE ✓
4. hooker table n°36 → base floor tiles ✓
5. low ceiling heights Room 28 (Stor) ✓
6. No hand Rail (adjacent to door) 17. No Stairs + boiler Room ✓
7. Butler Room → ACME? ✓
8. ladder steps worn away