

CHECKLIST FOR FIRE SAFETY

	Fire risk assessment	
1	Have you identified groups of people at risk from fire on your premises?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2	Have you identified <i>why</i> they are at risk?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3	Have you identified all potential ignition sources, not forgetting arson?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4	Have you identified all potential fuel sources, not forgetting flammable solvent vapour or other explosive atmospheres?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Have you identified all potential sources of oxygen, in addition to air?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Risk evaluation and means of control	
6	Have you evaluated risks to all the groups of people?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7	Have you taken steps to remove, replace or reduce sources of ignition?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8	Have you taken steps to reduce the sources which may fuel a fire?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9	Have you taken steps to reduce the supply of oxygen, should a fire start?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Emergency plan	
10	Is there a fire action plan to implement immediately, in the event of fire?	<input type="checkbox"/> Yes <input type="checkbox"/> No
11	Are all the groups of people at risk aware of the fire action plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
12	Do staff know what is expected of them, in the event of fire?	<input type="checkbox"/> Yes <input type="checkbox"/> No
13	Is there regular drilling and instruction?	<input type="checkbox"/> Yes <input type="checkbox"/> No
14	Is action taken to rectify problems identified during fire drills?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Fire detection and alarm	
15	Are the means of detecting fire of the right type and in the appropriate locations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
16	Can the fire alarm be heard and clearly understood throughout each building when initiated from a single point?	<input type="checkbox"/> Yes <input type="checkbox"/> No
17	Is the means of detecting fire sensitive enough to ensure the alarm is raised in time for all occupants to escape in good time?	<input type="checkbox"/> Yes <input type="checkbox"/> No
18	If the detection and warning system is electrically operated, is there an effective back-up power source?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Fire fighting	
19	Are the fire extinguishers suitable for the type of fire likely to be fought?	<input type="checkbox"/> Yes <input type="checkbox"/> No
20	Are there enough of them and in the right places?	<input type="checkbox"/> Yes <input type="checkbox"/> No
21	Are the extinguishers clearly visible and indicated by safety signs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
22	Have you taken steps to reduce likely misuse of extinguishers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Escape routes	
23	Have you assess designated escape routes for possible intrusion by uncontrolled fire, heat and/or smoke?	<input type="checkbox"/> Yes <input type="checkbox"/> No
24	Are the escape routes adequate for the numbers and location of people at risk?	<input type="checkbox"/> Yes <input type="checkbox"/> No
25	Are the exits in the right place and do escape routes lead as directly as practicable to a place of safety?	<input type="checkbox"/> Yes <input type="checkbox"/> No
26	Have arrangements been made for the evacuation of disabled persons?	<input type="checkbox"/> Yes <input type="checkbox"/> No
27	Should there be a fire will at least one route be available from any part of the premises?	<input type="checkbox"/> Yes <input type="checkbox"/> No
28	Are the escape routes and final exits clear at all times?	<input type="checkbox"/> Yes <input type="checkbox"/> No

29	Do all doors on escape routes open in the direction of escape?	<input type="checkbox"/> Yes <input type="checkbox"/> No
30	Can all final exit doors be opened easily and immediately if there is an emergency?	<input type="checkbox"/> Yes <input type="checkbox"/> No
31	Will everybody be able to use the escape routes in a reasonable amount of time with due regard to safety?	<input type="checkbox"/> Yes <input type="checkbox"/> No
32	Are all groups of people aware of the importance of the escape routes, and not obstructing them with combustible material or wedging open fire doors?	<input type="checkbox"/> Yes <input type="checkbox"/> No
33	Are all the escape routes covered by a suitable form of emergency lighting?	<input type="checkbox"/> Yes <input type="checkbox"/> No
34	Do you have effective back-up power sources for you emergency lighting?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Disclaimer

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