

Operational Fire Risk Assessment

School/Service/Unit:

Number & Name of Building:

Floor Area Assessed:

Use

Responsible Person:

Assessment completed by:

Position:

Signature:

Date assessment carried out:

1 – Identify the hazards

Sources of ignition	indicate ✓
Electrical, Gas or Oil-fired Heaters, Room Heaters	
Hot processes, e.g. welding, use hot cutting equipment.	
Cooking equipment, hot ducting, flues	
Naked flames e.g. gas or liquid fuelled open flame equipment, Bunsen burners	
Arson, deliberate ignition, vandalism etc	
Poor electrical installations e.g. broken plugs, signs of scorching on sockets, worn or damaged cables etc	
Faulty or misused electrical equipment.	
Smoking materials	
Light fittings and lighting equipment e.g. halogen lamps or display lighting	
Central heating boilers	
Hot surfaces and obstruction of equipment ventilation e.g. office equipment, hot plates	
Other (please state)	

Sources of fuel	indicate ✓
Flammable liquids, e.g. cooking oils, solvents or adhesives	
Flammable chemicals, e.g. chemicals used in labs, dark rooms and cleaning products	
Flammable gases, e.g. acetylene, Liquid Petroleum Gases (L.P.G.)	
Displays and Notice Boards	
Paper, books, clothing and decorations.	
Computer Equipment	
Cloakrooms in circulation areas.	
Textiles and soft furnishings, e.g. curtains, drapes and coverings	
Waste and litter products.	
Plastics and rubber products	
Other (please state)	

Sources of Oxygen	indicate ✓
Mechanical Air Conditioning	
Natural Ventilation	
Chemical (Oxidising Agents)	
Oxygen supplies from cylinder storage, and piped systems	
Other (please state)	

2 – Identify the people at risk	indicate ✓
Numbers of Staff & Students in the premises	
Employees and students who work alone or in isolated areas, e.g. cleaners or security staff	
People who are unfamiliar with the premises, e.g. visitors, contractors or members of the public	
People with disabilities, e.g. mobility impairment, hearing or vision impairment.	
People who cannot evacuate quickly, e.g. children, the elderly etc	
Other (please state)	

3 – Evaluate, remove, reduce and protect from risk**3.1) Evaluate the risk of fire occurring:**

Likely Source of Ignition	Source of Fuel that could be ignited

(3.2) Evaluate the risk to people from a fire starting in the premises:**Indicate ✓**

A fire starting on a lower floor affecting the escape route for people on upper floors or the only escape for people with disabilities.	
A fire in an unoccupied room going undetected and affecting the means of escape	
No clear signage to fire escape routes which would cause confusion?	
Any condition that would prevent persons escaping easily i.e. trip hazards, blocked fire exit routes/doors etc?	
Fire and smoke spreading through the building due to poorly maintained fire doors or fire doors being wedged open.	
Other situations (please state):-	

(3.3) Remove and reduce the risks that may cause a fire:**This is done by addressing the hazards (ignition + fuel sources) that can give rise to fire:**

Hazard Identified	Action taken to remove or reduce the Hazard

3.4) Remove and reduce the risks to people from a fire:**(Additional Fire Precautionary measures required - discuss with your designated Fire Safety Manager)**

Measures required	Reason for recommending additional measures
Fire Detection and warning systems	
Firefighting equipment	
Escape routes	
Emergency lighting	
Signs and notices	

4 – Record, plan, instruct, inform and train

	indicate ✓		
	YES	NO	N/A
(4.1) Details of Emergency plan.			
Are the Blue Fire Action notices up to date, accurate and prominently displayed?			
Are there emergency action plans to close down equipment/process in the event of fire?			
If YES are they documented?			
Are official visitors accompanied whilst on your premises?			
Are contractors advised of the action to be taken in the event of a fire alarm actuation?			
Have PEEP's been completed for any disabled persons in the premises?			
(4.2) Details of Information and Training.			
	YES	NO	
Do all staff & postgraduate students know who the designated Fire Wardens are?			
Are all staff shown the fire procedures on induction?			
Are all staff given fire safety training on a regular basis?			
Where there are dangerous substances present has staff received appropriate training to prevent fires occurring?			

(4.3) Names of persons nominated and trained to use fire extinguishers.			
Name	Designation	Date training received	Date refresher training due

(4.4) Fire evacuation drills				
Can people hear the fire alarm and do they respond? (If No contact Fire Safety Manager)			Yes	No
Date of last fire drill or evacuation	Planned or Unplanned	Time taken (if known)	List cause (if known) and any points noted and action taken	

5 – Assessment review

Assessment review date	Completed by	Signature
Review outcome (where substantial changes have occurred a new record sheet should be used)		