

**Fire Risk Assessment
Form F607a**

Premises Details

Premise name: Holt CP School

Address: Norwich Road, Holt, Norfolk

Head Teacher (Responsible Person on site): Simon Walters

Premises Manager: Patrick Tabor

Risk Assessment completed by: S.Walters, A Kidd (see also NPS Full Fire Risk Assessment 3/2/22)

Date: 26/9/22

Review Due Date: Oct 23

General description of premises: (e.g. brick built, 2 story premise)
 Junior building – Single story solid brick construction – 1928
 Infant building – Single storey solid brick construction – pre 1919

Physical Properties:

Comments:

Size (square metres)	1396	
Number of floors	1	
Number of internal staircases	0	
Number of external stairways	0	
Number of lifts	0	

Occupancy:

Days of the week premises used:	5	Mon -Fri
Hours of the day premises used:	13	7.30am – 8.30pm
Maximum numbers of staff at any one time:	27	
Minimum numbers of staff at any one time:	1	

Maximum numbers of the public at any one time (including pupils):	400	Christmas / summer fayre, Christmas performances
Minimum numbers of the public at any one time:	0	
Does anyone sleep at the premises? (including summer clubs, emergency rest centre use)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Please note: overnight accommodation may require specialist input. Please contact the Health, Safety and Well-Being team in the first instance.		
If so how many?	N/A	
Staff:	N/A	
Public (including visitors/pupils etc):	N/A	
Are any young persons (under 18) employed at the premises?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If so how many?	N/A	
Are any temporary staff employed at the premises?	No	
If so how many:	N/A	
Places of assembly		
Using the fire calculation methodology provided in the Fire Safety Compliance Code P607 provide details of the maximum occupancy numbers for places of assembly e.g. halls, drama studios, lecture theatres etc. Please note: where increased pupil numbers are planned, the maximum occupancy numbers must be re-calculated.		
<i>Please note different configurations of furniture will require separate calculations e.g. halls set up with dining tables and chairs, the introduction of a stage or seated audience will result in different occupancy levels</i>		
Place of assembly and configuration	Maximum Number	
Hall (9.5mX 15m) (normal risk, 2X 1500mm exits)	285	

Checklist of things to consider

For all of the areas on this checklist where you have answered 'No' to a question further consideration is required to reduce the risks. Where you have answered yes and the box is shaded red you will also need to consider the matter further. All these areas should be transferred to your action plan and more detailed information provided. You should then consider what could be done to reduce the risk of fire in these areas (refer to [Fire Safety Compliance Code P607](#) for information on control measures). Decisions regarding this should be recorded on this form.

Fire plan of the premises

The fire plan details fire resisting compartments, detection, emergency lighting etc; and recommendations. This should be used to inform your fire risk assessment e.g. to ascertain whether you have a protected escape route or detection that will provide early warning of a fire. The plan should be inserted into the fire risk assessment document. Where recommendations for improvement are detailed in the plan, this should be used as part of the assessment below and action plan. (See the [Fire Safety Compliance Code P607](#) for further guidance)

	Yes	No	N/A
1. If you have portable heaters: Not used at the school			
a. Are they kept away from sources of flammable or combustible material?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b. Is their use kept to a minimum?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are they used appropriately i.e. only for localised heating not for clothes drying etc?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Do you have systems to ensure they are never left on unattended?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Are staff aware of how to use heaters safely?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Have you replaced naked flame, LPG and radiant bar heaters with safer alternatives?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments/Notes: Portable heaters only used in emergency			
	Yes	No	N/A
2. Portable and fixed electrical equipment:			
a. Is portable electrical equipment inspected and tested regularly? See Portable Electrical Equipment Guidance for information on frequency	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b. Is the fixed electrical system inspected and tested regularly? (This is required on a 5 yearly basis unless specified by a competent electrical contractor)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are sockets and extension cables checked to make sure they are not overloaded and are in good condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Have multi plug adaptors been removed from use in the premises?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Have you reduced the use of extension leads to a minimum?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Have you made sure staff do not extend extension leads with additional extension leads?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Have you ensured that all items plugged into a single extension lead do not exceed a total of 13amp's?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Are portable electrical appliances switched off when not in use?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Is cooking equipment that is wired into the wall switched off when not in use?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Are corridors and escape routes kept clear of portable electrical appliances?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Are faulty electrical appliances removed from use as soon as the fault is detected?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Are electrical blankets regularly tested?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
m. Are lights and lamps located away from sources of fuel e.g. curtains, paper etc?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Comments/Notes: PAT testing yearly (Feb 22) , 5 year electrical test completed 6/9/21,			
	Yes	No	N/A
3. Smoking arrangements:			
a. Is the school's No Smoking Policy enforced?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Where smoking is permitted on premises or parts of premises are suitable receptacles provided for smoking materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c. Are the contents regularly and carefully disposed of?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Comments/Notes: No smoking allowed on school site.			
	Yes	No	N/A
4. Hot work e.g. cutting, welding, soldering:			
a. Is hot work controlled? See hot works compliance code	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments/Notes: 			
	Yes	No	N/A
5. Other e.g. kitchens and workshops:			
a. Are extraction filters changed and ductwork cleaned regularly?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are any high risk activities undertaken e.g. deep fat	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

frying?

Comments/Notes: Norse use the Kitchen / extraction filters checked regularly

	Yes	No	N/A
6. Arson risk:			
a. Has there ever been any evidence of arson on the site?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Is there evidence of vandalism on the site?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Are bins stored away from the premises?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Are bins secured to prevent them being moved closer to buildings?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e. Is CCTV fitted and reviewed/monitored?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f. Is external lighting adequate?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Are pathways kept clear/clearly marked?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Is undergrowth/vegetation under control and kept clear from exhaust outlets and ventilation grilles?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Are external fire escapes protected to prevent unauthorised access?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Are vehicles parked near to buildings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments/Notes:

Look at external lighting in the infant playground.

Bins are in wooden enclosure.

The caretaker opens the school buildings each morning and re-secures all buildings each day. Mail is delivered during normal school hours

	Yes	No	N/A
7. Housekeeping:			
a. Are housekeeping checks made to ensure combustible materials e.g. paper, cardboard, wood do not build up?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is waste collected regularly?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are high-risk areas e.g. plant rooms kept free from combustible materials?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Do you keep stocks of combustible materials as low as possible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Are aerosols kept away from direct sunlight and sources of heat?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Are incontinence pads stored away from sources of ignition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Are laundry supplies kept in specified storage areas away from sources of heat?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h. Are flammable materials stored in locked fire resisting stores or cabinets away from ignition sources?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Comments/Notes:

	Yes	No	N/A
8. Textiles:			

a. Are all textiles and soft furnishings purchased through the proper channels to ensure they comply with current fire safety standards?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Does anyone bring textiles and furnishings onto the premises that may not be of current standard (e.g. residents in care homes)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Do you control where these items are kept, or if they are allowed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments/Notes: <input type="text"/>			
	Yes	No	N/A
9. Oil:			
a. Are oil tanks sufficiently bunded and protected?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b. Are fuel, oil and battery stores kept locked and secured?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Comments/Notes: <input type="text"/>			
	Yes	No	N/A
10. Gas:			
a. Does the premise have a mains gas supply?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Do staff know where the shut off valve is and how to operate it?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Is any LPG stored on site?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comments/Notes:			
5 year Service date: 13/02/2018			
Need annual staff meeting on emergency shut off valves			
	Yes	No	N/A
11. Sources of oxygen:			
a. Are all windows and doors closed when not required for ventilation and before the premises is vacated?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are oxygen and oxyacetylene cylinders securely stored in a designated location in an upright position?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments/Notes: Kept in a locked cupboard			
Fire safety systems			
Your fire plan will identify the location of and type of fire safety systems present. Looking at this information along with your knowledge of the building, consider the following:			
	Yes	No	N/A
12. Structural features:			
a. Are there any combustible materials covering substantial areas of wall, floor or ceiling e.g. polystyrene ceiling tiles, wall displays?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are there any suspended ceilings in the building?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are the voids clear of electrical cables?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

d. Do voids contain fire detection equipment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e. Are there suitable fire-resisting partitions in place to separate suspended ceiling areas from escape routes?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Are all building works to fire resisting structures made good to ensure protection is reinstated/still valid?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Are there any chimneys or shafts within the building that may aid the spread of fire?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments/Notes: Voids are tidy but are filled with insulation and have electrical cables for lighting			
If you are unsure or do not feel able to answer these questions with any certainty please contact the HSW team for support.			
	Yes	No	N/A
13. Means of escape:			
a. Are escape routes checked regularly to ensure they are not obstructed and there are no trip hazards present?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are fire doors checked regularly to make sure they are kept closed and still fit well?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are self-closers and magnetic latches on doors checked regularly to make sure they close doors fully and release automatically when the alarm sounds?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Are there sufficient stairways to get all occupants out of the premises in good time even if one stairway is inaccessible due to fire?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. Are the stairways wide enough to get all occupants out of the building?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Taking into account identified fire hazards, could a fire spread to a staircase before occupants have evacuated?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. If yes are there fire resistant doors, walls and partitions within these stairways?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h. Do exits from the stairways lead to a place of safety i.e. not an enclosed yard?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Are escape routes short enough to allow everyone in the building to get to a place of safety outside the building within 2-3 minutes (except for residential care premises where separate guidance is provided)?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
j. Are there any locations where there is only one means of escape (for residential care homes see separate guidance)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. If yes acceptable escape time is reduced to 1 minute, is this achievable?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Do fire exit doors open into the direction of travel?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Can fire exit doors be opened easily and immediately without the use of a key at all times the premises are occupied (for multi occupancy sites particularly consider exit routes through other occupiers' areas)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Are intumescent strips (expanding seals in doors/door	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

frames) intact and free to operate (not painted over)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Are smoke seals on doors a good fit (in contact with the frame or lining when the door is closed)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. Are there any dead end routes or rooms leading off other rooms (not directly off a corridor)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. Are external fire escape stairs treated with anti slip treads and de-iced in winter?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

r. If the premise has lifts do they fail to ground level in the event of an alarm being raised?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
s. Can any lifts be used in the event of a fire (fully fire protected)?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
t. Have you calculated the maximum occupancy of all places of assembly and communicated this to everyone that needs to know?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments/Notes:

The school operates a simultaneous evacuation strategy. There are an adequate number of final exits with all single and alternative travel distances within current guidance.

Yes No N/A

14. Fire warning and detection:

a. Do you have a fire detection system?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. If no, does the fire plan identify this requirement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are there areas of the building where fire could develop undetected e.g. voids, low use or unoccupied areas?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Can the fire warning system be heard in all locations of the premises (consider noisy locations as well as remote ones)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Will everyone using the premises (members of public, residents, contractors and staff) be able to respond to the type of alarm present (is there anyone with hearing impairments for example)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Is the system regularly tested (at least weekly)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Is the test recorded in the fire logbook ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Does a competent engineer inspect the system at least every 6 months?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Does the fire alarm system have a zoned control panel?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Is the panel linked to the fire service?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
l. If not do you have an agreed plan for calling the emergency services?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Do all relevant employees know how to operate the control panel and how the alarm system works?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments/Notes:

Smoke/ heat detectors in the Kitchen and stock cupboards. Battery needs replacing in Infant stock cupboard and smoke detector needs replacing in junior stock cupboard. Kitchen/CDT room needs smoke detector.

Warning System tested weekly by the Caretaker.
TPS inspect the system every 3 months.

	Yes	No	N/A
15. Fire call points:			
a. Do you test fire call points to ensure they are all working on a regular basis (one call point a week)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are they serviced by a competent engineer as part of their 6 monthly inspection?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments/Notes: One call point checked each week by the Caretaker. TPS inspect the system every 3 months. Staff need to be trained to operate fire alarm.			

	Yes	No	N/A
16. Escape lighting:			
a. Is there emergency lighting provided in all locations where it is needed (e.g. where areas are used after dark or there is no natural light)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Do the emergency lights provide enough illumination to escape safely?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Do the emergency lights operate when normal lights fail?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Do emergency lights sufficiently show changes in level, changes in direction, fire alarm call points, and fire fighting equipment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Are they regularly tested (at least monthly)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Is the test recorded in the fire logbook ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Does a competent engineer check the emergency lighting at least annually?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments/Notes: TPS check the lighting each month. Annual discharge test. Some additional External and internal escape lighting required			

	Yes	No	N/A
17. Firefighting equipment:			
a. Is the fire fighting equipment (indicated on the fire plan) of the right type for the area it is located in? see Fire Safety Compliance Code P607 for further information	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is there enough fire fighting equipment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Do you have a clear policy on the use of fire fighting equipment that is communicated to staff?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is fire fighting equipment easily accessible in all locations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the fire fighting equipment located on escape routes and near to exit doors?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Is it securely hung on wall brackets or floor plates?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Is hidden equipment appropriately sign posted in accordance with safety signs regulations?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

h. Is fire fighting equipment checked to ensure it is in position and not damaged at least once a month?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Is it recorded in the fire logbook ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Have fire extinguishers been checked by a competent person in the last twelve months?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Have you got a contract in place that will ensure they are all checked every 12 months?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments/Notes: Fire extinguishers inspected every year Fire fighting equipment checked each month and record in logbook			

	Yes	No	N/A
18. Fire safety signs and notices:			
a. Are there sufficient fire exit signs on the escape routes?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are internal fire resisting doors (indicated on the fire plan) signposted with "Fire Door Keep Shut" notices?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are internal fire resisting doors to cupboards (indicated on the fire plan) signposted with "Fire Door Keep Locked Shut" notices?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. Are external doors and gates marked with "Fire Exit Keep Clear" signs externally?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Are there fire action notices displayed stating what to do in a fire situation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Are there signs indicating how to use door-opening mechanisms e.g. "Push bar to open"?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Do all fire exit signs include pictograms?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Are non-fire safe lifts adequately signposted as such?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Comments/Notes: All signs checked Sept 2022..			

	Yes	No	N/A
19. Other:			
a. Does your building have exterior cladding and is more than 18 metres high and/or is used for residential stays or is used by people who require assistance to evacuate? If yes, please contact the Health, Safety and Well Being Team	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Are there other fire safety systems such as sprinklers, smoke detectors etc?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Are they regularly maintained and checked?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c. Is this recorded in a logbook?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Comments/Notes: 			

	Yes	No	N/A
20. Maintenance:			
a. Is there a maintenance schedule for all the identified	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

fire safety provisions in the premises?

Comments/Notes: Alarm, lights and fire extinguishers are all regularly maintained by NPS.

	Yes	No	N/A
21. Planning for an emergency:			
a. Is there a written evacuation plan in place?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is there a clear plan for raising the alarm, calling the emergency services evacuating and re-entering the building?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are all staff aware of what to do in case of emergency evacuation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is there an adequate number of fire wardens that are clearly identifiable?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. Does the plan take into account the needs of people identified as requiring assistance?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Does it take into account the different staffing levels at different times of the day?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Are fire drills undertaken regularly?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Are they reviewed to identify areas for improvement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Are visitors/contractors provided with fire evacuation information?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Can emergency vehicles easily access the site and premises?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments/Notes: : Fire Information is provided in the Information for Visitors sheet. Fire evacuation plan needs to be updated in the Pavillion			
	Yes	No	N/A
22. Training:			
a. Are new employees informed about evacuation procedures and their role during evacuation on the first day of employment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Do existing employees receive annual refresher training and/or instruction on the evacuation procedure e.g. by undertaking a fire drill?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are appropriate staff trained in the use of fire fighting equipment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Are fire wardens provided with training to ensure they are clear on their duties and able to carry them out in the event of an evacuation?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. Do debriefs take place following an evacuation to learn from the experience?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments/Notes: Fire evacuation plan updated after last fire evacuation.			
	Yes	No	N/A
23. Persons requiring specific consideration:			
a. If you can identify specific persons with additional	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

needs such as employees or visitors whose needs are known you need to produce a personal evacuation plan for them. Have you produced such a plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is it up to date and relevant?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Is there a possibility that people with unknown or un-assessed needs may be present in the premises during an evacuation e.g. member of public or contractor?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Is it a multi occupancy premises (shared by other businesses)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e. Are there areas of the premises where people may be isolated or working alone?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f. Does anyone sleep on the premises?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Will you know where the persons who require help will be located when evacuation is required?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Are there any locations in the building you will not be able to safely evacuate certain people from?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Comments/Notes: PEEP's need updating for new classrooms.

	Yes	No	N/A
24. Fire Plan check:			
Have you considered all recommendations in the Fire Plan and identified where recommendations are now required to be actioned as a result of your assessment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please ensure that you complete the information below (Sections 1 – 4) and complete the Action Plan using this, your fire plan and checklist findings.

Fire Hazards:

1. Using the [Fire Safety Compliance Code P607](#) and this checklist note down all the **sources of ignition** present in the premises that may increase the risk of fire starting (things you have identified in the checklist as not being adequately controlled):

Location	Hazard
a. Sandringham class	extension lead
b.	
c.	
d.	
e.	
f.	
g.	

2. Using the [Fire Safety Compliance Code P607](#) and this checklist note down all the **sources of fuel** present in the premises that may increase the risk of fire starting (things you have identified in the checklist as not being adequately controlled):

Location	Hazard
a. stock cupboards	Paper/ cardboard
b. <input type="text"/>	<input type="text"/>
c. <input type="text"/>	<input type="text"/>
d. <input type="text"/>	<input type="text"/>
e. <input type="text"/>	<input type="text"/>
f. <input type="text"/>	<input type="text"/>
g. <input type="text"/>	<input type="text"/>

3. Using the [Fire Safety Compliance Code P607](#), this checklist and your fire plan, list all the **structural features** that may promote the spread of fire in the premises (things you or your fire plan has identified as being inadequate):

Location	Feature
a. Junior corridor	roof Void
b. Classrooms	Ceiling tiles
c. <input type="text"/>	<input type="text"/>
d. <input type="text"/>	<input type="text"/>
e. <input type="text"/>	<input type="text"/>
f. <input type="text"/>	<input type="text"/>
g. <input type="text"/>	<input type="text"/>

4. Using the [Fire Safety Compliance Code P607](#) and this checklist note down all of the **processes** undertaken in the premises that may increase the risk of a fire starting, e.g. hot works, use of gas cylinders, cooking with deep fat fryers:

Location	Process
a. Kitchen	Cooking with deep fat fryers
b. <input type="text"/>	<input type="text"/>
c. <input type="text"/>	<input type="text"/>
d. <input type="text"/>	<input type="text"/>
e. <input type="text"/>	<input type="text"/>
f. <input type="text"/>	<input type="text"/>
g. <input type="text"/>	<input type="text"/>

Fire Action Plan for completion

Consider the fire hazards identified above and the answers you gave in the checklist. Can you remove or reduce the risk of fire in any way? Can you get rid of some sources of ignition or fuel? Can any structural features be designed out? Can you stop high-risk processes and replace by safer methods? Pay particular attention to: those areas where you answered **NO** in the checklist, **YES** in a shaded box and the fire plan recommendations. Detail any changes that can be made below:

Hazard	Additional Controls	Actioned By & Date
a. Emergency Lighting	Additional emergency lighting to be fitted as identified by NPS Fire Risk Assessment	31/12/22
b. External Lighting	Additional lighting required in the infant playground	31/12/22
c. Fire detection	Smoke detectors to be fitted in corridors as identified by NPS Fire Risk Assessment	31/12/22
d. Staff training	Teachers / Office manager to be trained on Fire Alarm System and emergency shut off valves	1/4/23
e. Weekly check	Weekly Fire Alarm checks to be held after school on Friday so that staff become familiar with the sound.	31/9/22
f. Fire Alarm	Fire Alarm to be installed in the CDT room.	31/12/22
g.		
h.		
i.		█ / █ / █
j. █	█	█ / █ / █
k. █	█	█ / █ / █
l. █	█	█ / █ / █

From your **hazards and further controls** identified above consider if there are any residual hazards (that cannot be eliminated or further controlled) on the premises that the Fire and Rescue Service may need to be informed about in advance of any emergency call out. List them below and contact the Fire Service with details, e.g. LPG cylinder storage areas:

- a.
- b.
- c.
- d.
- e.
- f.
- g.
- h.

Considering the **identified persons at risk** and the answers you gave to this part of the checklist. Can anything more be done to reduce the risk of injury to those people, or to aid safe escape? Detail any changes that can be made below. Where you have produced a PEEP for a person, also list their name and general details here. Where separate PEEPs have not been produced as details are provided in personal care plans, please indicate this here.

Named Person or Possible Need	Location	Additional Control/Details of PEEP
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Maintenance Schedule:

All fire safety systems need to be checked regularly to ensure they are still in working order. Please detail below how often your systems are checked and by whom. Some checks may be done by external companies such as annual servicing. Please include these details here as well. For standard checking frequencies, please see your [fire log book](#). However, you may have increased frequencies due to your premises risk)

	Premises staff Check		External Company Check	
	Frequency of Check	By Whom	Frequency of Check	By Whom
Maintenance for fire resisting structure	<input type="checkbox"/>	<input type="checkbox"/>	Yearly	NPS
Maintenance of escape routes, exit doors	<input type="checkbox"/>	<input type="checkbox"/>	Yearly	NPS
Maintenance of fire safety signs	<input type="checkbox"/>	<input type="checkbox"/>	Yearly	Governors
Maintenance of fire warning system	<input type="checkbox"/>	<input type="checkbox"/>	3 months	T & P
Maintenance of emergency lighting	<input type="checkbox"/>	<input type="checkbox"/>	monthly	T & P
Maintenance of fire fighting equipment	<input type="checkbox"/>	<input type="checkbox"/>	Yearly	NPS
Location of records of checks and works:	<input type="checkbox"/>	<input type="checkbox"/>	Yearly	NPS