

## Annex 2 - Fire Safety Risk Assessment Template

# Record of Fire Safety Risk Assessment in High Rise Domestic Buildings

Print Form

Address			
Postcode			
Name of organisation			
Name and contact details of Assessor			
Assessor signature		Date of assessment	

PART 1 Obtain Information			
How many floors does the building have?			
Number of residents in the building? Are any residents particularly at risk? If yes, please detail below.			
Is there a staff presence, such as a caretaker or a concierge? If yes, please detail below.	Yes	No	
Does the building have any ancillary uses such as commercial or community activities? If yes, please detail below.	Yes	No	
Has the building any previous history of fire? If yes, please detail below.	Yes	No	
Has there been any previous examination of the building's external cladding? If yes, please detail below.	Yes	No	

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Are testing and maintenance records available and complete?	Yes	No
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Is there a current procedure for residents to follow in the event of fire? If yes, please append a copy and explain below how it is communicated to residents.	Yes	No
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<b>PART 2</b>	<b>Identify any potential causes of fire in the common areas</b>
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Are there any sources of ignition present?
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	Action required (Please tick) If you answered yes, record action at PART 5	YES	NO
		<input type="checkbox"/>	<input type="checkbox"/>

Are there any sources of fuel present?
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	Action required (Please tick) If you answered yes, record action at PART 5	YES	NO
		<input type="checkbox"/>	<input type="checkbox"/>

Are there any sources of oxygen present e.g. ventilation			
	Action required (Please tick) If you answered yes, record action at PART 5	YES	NO

**PART 3 Evaluate the risk and adequacy of existing fire safety measures**

What is the likelihood of a fire starting?			
	Action required (Please tick) If you answered yes, record action at PART 5	YES	NO

What may be the consequences to people from a fire starting in the building?			

	Action required (Please tick) If you answered yes, record action at PART 5	<b>YES</b>	<b>NO</b>
Is there the potential for fire to spread and affect escape routes?			
	Action required (Please tick) If you answered yes, record action at PART 5	<b>YES</b>	<b>NO</b>
Is there potential for fire or smoke spread through routes such as open doors, vertical shafts, service ducts, service penetrations, ventilation systems, cavities, voids, external wall cladding systems?			
	Action required (Please tick) If you answered yes, record action at PART 5	<b>YES</b>	<b>NO</b>
Is there potential for fire and smoke to spread into the premises from an external fire?			

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	Action required (Please tick)	<b>YES</b>	<b>NO</b>
	If you answered yes, record action at PART 5		

Are the flat entrance doors sufficiently fire resisting and self-closing?  
Please see Chapter 5: Risk Management – Physical Fire Safety Measures in Fire Safety in Existing High Rise Domestic Buildings Guidance.

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	Action required (Please tick)	<b>YES</b>	<b>NO</b>
	If you answered yes, record action at PART 5		

Is there protection of the stairways from fire in adjacent areas? i.e. Provision of properly maintained self-closing fire doors on stair and lobby enclosures, fire resisting glazing etc.

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	Action required (Please tick)	<b>YES</b>	<b>NO</b>
	If you answered yes, record action at PART 5		

Is the travel distance from flat entrance doors to the nearest stairway or final exit acceptable?

Please see Chapter 5: Risk Management – Physical Fire Safety Measures in Fire Safety in Existing High Rise Domestic Buildings Guidance.

	Action required (Please tick) If you answered yes, record action at PART 5	<b>YES</b>	<b>NO</b>

Is there emergency escape lighting provided and maintained? Is it required if not?

	Action required (Please tick) If you answered yes, record action at PART 5	<b>YES</b>	<b>NO</b>

Are there fire escape route signs? Are they required if not?

	Action required (Please tick)	<b>YES</b>	<b>NO</b>

	If you answered yes, record action at PART 5		
<p>Is there adequate fire separation evident, particularly the enclosure of flats within fire resisting construction? Please see Chapter 2: Fire safety design in High Rise Domestic Buildings in Fire Safety in Existing High Rise Domestic Buildings Guidance..</p>			
	Action required (Please tick) If you answered yes, record action at PART 5	<b>YES</b>	<b>NO</b>
<p>Where provided, are rising fire mains, firefighters lifts, suppression systems and smoke ventilation systems properly maintained?</p>			
	Action required (Please tick) If you answered yes, record action at PART 5	<b>YES</b>	<b>NO</b>
<p>Are there any fire suppression installations provided or required?</p>			

	Action required (Please tick) If you answered yes, record action at PART 5	<b>YES</b>	<b>NO</b>

**PART 4 Improvement plan (where required)**

Detail any improvements to fire safety measures which are considered necessary. Please also detail if the outcome is that there are no improvements necessary.



Review the fire safety risk assessment if there is a reason to suspect it is no longer valid or if there has been a significant change in the matters to which it relates.

Part 6		Record and review	
Review Date		Reviewed by	
Reason for review			
Outcomes of review			



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