**FIRE**

**SAFETY**

**LOGBOOK**

|  |  |
| --- | --- |
| **Premises Name:** |  |
| **Premises Address:** |  |
| **Person responsible for completion:** |  |
| **Contact Number:** |  |
| **Date Started:** |  |

**Test/Maintenance Schedule**

|  |  |
| --- | --- |
| **Fire Safety Measure** | **Frequency** |
| **Fire Risk****Assessment****(Review)** | * **Regularly so as to keep it up to date.**
* **If there is reason to suspect that it is no longer valid.**
* **If there has been a significant change.**

**NIFRS recommend an annual review.** |
| **Fire****Extinguishers** | **Daily Visual Check** | **Annual Inspection/Service****(Competent Person)** |
| **Fire Alarm** | **Daily Visual Check &****Weekly Activation Test** | **Annual Inspection/Service****(Competent Fire Alarm Engineer)** |
| **Emergency****Lighting** | **Daily Visual Check &****Monthly Activation Test** | **Annual Inspection/Service****(Competent Person)** |
| **Fire Safety****Training** | **On induction and annual refresher** |

**Daily Check Schedule**

**Example daily check schedule to support the**

**fire safety policy.**

|  |
| --- |
| **Daily Checks (not normally recorded)** |
| **Escape Routes*** **Can all fire exits be opened immediately and easily?**
* **Are fire exit doors clear from obstructions, inside and out?**
* **Are escape routes clear?**
 |
| **Fire Warning Systems*** **Is the indicator panel showing healthy?**
 |
| **Escape lighting*** **Are emergency lights and exit signs in good working order?**
 |
| **Firefighting Equipment*** **Are all fire extinguishers sited correctly and visible?**
* **Are any vehicles blocking access to fire hydrants?**
 |

**Weekly Fire Alarm Test Records**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date** | **Call Point Number** | **Pass/Fail** | **Action Required** | **Signed** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Monthly Emergency Lighting Test Records**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Pass/Fail** | **Action Required** | **Signed** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Staff Training and Drills**

**Fire Safety Training should be given to staff:**

* When they are first employed - **Induction** Training.
* When they are exposed to new or increased risks.
* Annually - **Refresher** Training.
* More frequently if there is high staff turnover.

**All staff are to be trained on:**

1. What action to take on discovering a fire.
2. What action to take on hearing a fire alarm.
3. How to raise the alarm by breaking the nearest a manual call point.
4. How to contact the Fire Service by calling 999.
5. How to evacuate the premises.
6. The location of the fire exits.
7. How to use a fire extinguisher. If not trained, do not use one.
8. The contents of the Fire Risk Assessment.

**Emergency Fire Action Plan**

In the event of Fire:

1. Sound the alarm by breaking the nearest manual call point.
2. Call 999 and request the Fire Service.
3. Staff are to evacuate the premises, closing doors behind them and assist disabled users to evacuate the building.
4. Only tackle a fire if you have been trained and it is safe to do so.
5. GET OUT and STAY OUT and await the arrival of the Fire Service.
6. Complete a staff roll call.
7. The responsible person is to brief the Fire Service on arrival.

**Fire Evacuation Drills should be carried out:**

* At periodic intervals appropriate to the risk in the premises.
* At least **annually**.
* More frequently if there is high staff turnover.

**Fire Safety Training Records**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Training Type****(Induction/Refresher)** | **Who Attended?** | **Signature** |
|
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Fire Evacuation Drill Records**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date** | **Who Took Part** | **Evacuation****Time** | **Observations/****Deficiencies** | **Signature** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Record of False Fire Alarms**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Time** | **Action Required** | **Signed** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |