

Fire Safety Checklist

See www.infoscotland.com/firelaw for details of fire laws

| | | | | |
|--|--|---------------------|---------------|-----|
| Name of Applicant | | Application Ref No. | _____ / _____ | |
| Name and Address of Premises (inc. postcode) | | | | |
| Telephone No. | | | | |
| Type of Care Service | CHILDMINDERS ONLY | | | |
| Please tick () as appropriate | | Yes | No | N/A |
| Have you carried out a Fire Safety Risk Assessment for your premises? (see guidance notes including reference to sector specific guides) | | | | |
| Do you have a copy of the Fire Safety Guide for your type of premises | | | | |
| Escape Routes | Are all your escape routes clear of obstruction | | | |
| Doors | Do your final exits, such as front door, back door etc, open without use of a key? | | | |
| | Where fitted, are self-closing doors kept closed and self-closers working? | | | |
| Firefighting Equipment Extinguishers & Fire Blankets | Is firefighting equipment adequate for the risk in your premises (number, type, location)? (see guidance notes) | | | |
| | Do you have a fire blanket that complies with British Standard BS EN 1869? OR do you have a small dry powder of AFFF Fire Extinguisher to BS EN3 standard? | | | |
| | Is firefighting equipment (fire extinguisher) maintained annually (see guidance notes) and recorded on the test labels and in your Log Book? | | | |
| | Can the system be heard throughout your premises particularly by sleeping residents? | | | |
| Smoke alarms | Are the smoke detectors suitable for the risk in your premises (type, location of heads)? (BS 5839 Part 6 type LD3 Grade D) | | | |
| | Are smoke alarms tested weekly using the test button on each smoke alarm? | | | |
| Emergency Fire and Action Plan | Is the emergency fire action plan adequate for your premises (see guidance notes) | | | |
| | Do you regularly practice your fire drill? | | | |
| General | Have you considered how you would evacuate children WITHOUT relying on the Fire & Rescue Service? | | | |
| | Do you keep a log book to record tests and maintenance? | | | |

IF YOU HAVE ANSWERED NO TO ANY QUESTION YOUR FIRE SAFETY PROVISIONS ARE INADEQUATE AND REQUIRE IMMEDIATE ATTENTION

Declaration

I declare that the above Fire Safety Checklist has been completed accurately and that all inadequate provisions have been rectified. I agree to the information provided on this form being shared with the Care Inspectorate.

Signed _____ (Applicant)

Date _____

Print name _____

You must complete the Fire Safety Checklist and send it to your local Fire & Rescue Service HQ (address eg 8). Failure to do this will result in your application not being processed.