

Person in Charge Assurance return

Name of PiC:	Building:	Date of return: (DD/MM/YYYY)
Fire Risk Assessment Review		
Date of last FRA review:		
Number of actions	Completed:	Outstanding:
Of the simple management actions	How many are there:	How many are complete:
Please list those Managerial actions which are outstanding:	Detail the action has been taken so far:	List the expected date of completion for the outstanding actions (DD/MMM/YYYY):
Have there been any suspected fire risks since the last return?	Yes	No
If yes please give brief details including the date the Fire Safety Team were informed and the actions taken to resolve the issue:		
Date Issues resolved (DD/MMM/YYYY)		
Notes:		
Planning		
Do you have a Fire Safety Co-ordinator to assist you?	Yes No	Fire Safety Co-ordinator Name:
Date of last action plan review:		
Do you have sufficient trained Fire Marshals & Evacuation Officers to implement your plan?	Number Required	Number in Place
How many of your volunteers require requalification training now or in the next three months?	Now	Next Three Months

Has a practice evacuation (fire drill) been carried out since the last return?	Yes No	Date fire drill form submitted	
If yes please give brief details: <i>Note: check that a fire drill report form has been returned</i>			
Are any events planned in the building that will involve unusual activities or large numbers of persons?			
Who is managing the proposed event? (name and e-mail)			
Date of proposed event:			
Details (if known)			
Incidents			
Have there been any fire related incidents since the last return? Yes No		If Yes: Date of incident: (DD/MMM/YYYY) Date HSI01 Form submitted: (DD/MMM/YYYY)	
Please give brief details of incident:			
Have you had any false alarms of fire? Yes No		If Yes Did Estate Patrol attend? Yes No	Was the evacuation satisfactory? Yes No
Was this recorded as a fire drill?	Yes No		Were there any recommendations following the investigation?
If yes what is the expected date for completion?			
Notes:			

Have you had any visits to the Building by the Fire Service?			
Details (including any paperwork or correspondence received):			
Communications and checks			
Do you have a current contact or occupancy list that will enable you to pass a message quickly and efficiently to all building users? Yes No			
Explain your system:			
Date of last update: (DD/MMM/YYYY)			
Number of routine fire safety checks carried out since last return			
Number of actions arising from checks			
Brief details:			
Number of actions completed		Number Outstanding	
If outstanding give brief details of action taken so far and expected completion date:			
Material Changes			
Have there been any material changes since the last return? Yes No			
If yes date Fire Safety Manager Informed (DD/MMM/YYYY)		Or have any contractors been at work since the last return or are any at work on the building?	Yes No
Contractors Name			
Nature & location of work			
Date completed or expected date of completion (DD/MMM/YYYY)			
Site Manager contact details			
Is this via Estate Services? (Name of Project Manager).			
Or Other please specify			
Who carried out the University induction for the contractors? (Name, email)			
Has there been or could there be an impact on fire safety in the building?	Yes	No	
If yes brief details including mitigation measures in place:			
Date Fire Safety Manager informed (DD/MMM/YYYY)			

Persons with Assistance Needs (PANs)	
Do you have any PANs in the building?	Yes No
If Yes How many?	
In each case has the PEEP process been completed?	Yes No
If not, action taken and expected date of PEEP completion.	
Are you confident that PANs will be adequately supported during an emergency?	Yes No
If No, action taken	
Have there been any incidents involving PANS?	Yes No
Details	