

Note: The Head of Department must ensure that all temporary and permanent staff, postgraduate research students and others working for more than 3 days in the Department receive local fire safety Induction, as set out below. The Head of Department may designate a member(s) of his/her staff such as Departmental Safety Officer, Senior Fire Evacuation Marshal etc to undertake this Induction / Familiarisation on his/her behalf. This form **MUST** be used when carrying out local fire safety induction / familiarisation to record that the necessary information has been provided. This form **MUST** be retained by the Department so that an accurate record is kept of staff familiarisation arrangements provided by the Department and for inspection by the Fire Brigade if required. Tick the reason for the induction / familiarisation below.

- New Staff Induction Annual Refresher Change of Work Location or Building
 Increased risks due to changes to work process, equipment or environment etc



UCL FIRE SAFETY MANAGEMENT - LOCAL INDUCTION & FAMILIARISATION FORM

(For All Permanent & Temporary Staff, Postgraduate Research Students & Visiting Workers)

Name: _____ Job Title: _____

Person Providing Induction / Familiarisation: _____ Date: _____

Department/ Faculty: _____ Building: _____

Q1. Have you been involved in a Fire Evacuation of your building in the past 12 months - Yes / No?

Q2. Are you familiar with your main & alternative escape routes from your place of work - Yes / No?

SUBJECTS TO BE COVERED: (Ring Answers or Tick Boxes as Appropriate)

- How to raise the fire alarm on discovering a fire & the action to be taken on hearing the fire alarm*
- How to call the Fire Brigade either by dialling Ext: '222' or (9)999 (or as per local arrangements)*
- A physical walk of the Fire Escape Route(s)[#] (**#MUST** be completed on Initial Induction or if Answer to Q1/Q2 is - NO)
 - From the workstation to all floor fire exits - (i.e. from work location to the stairs or external exits if on the ground floor),
 - From fire exits on the floor on which the workstation is situated to the relevant external exit doors of the building - (i.e. from the stairs to the exit used to leave the building),
 - A physical walk of route(s) to the location of building's Fire Assembly Point(s) (If not obvious from final fire exit),
 - The identification of Fire & Smoke Resisting Doors and their importance in preventing the spread of fire & smoke into occupants escape routes from the building - (Doors marked as 'Fire Door Keep Shut' / 'Fire Door Keep Locked' must be kept closed and NOT propped or wedged open under any circumstances. Where doors are marked 'Automatic Fire Door Keep Clear' then the door will release on activation of the fire alarm system and **MUST** not be obstructed) [TN 014 / TN 015 / TN 016].
- Demonstrate the following, if applicable:
 - The Emergency Door Release Mechanisms - (To ensure familiarisation with the operation of door release mechanism such as 'Push Bars to Open', Thumb Turns, ASSA/Union Dome Covers & other door release devices as appropriate) [TN 002].
 - Electromagnetic Door Locking Systems (Release & Emergency Break Glass overrides) - (To ensure familiarisation with the operation of the physical 'green box' override release arrangements fitted to doors with electronic security systems. Note: most doors fitted with electromagnetic locks will release automatically on activation of the fire alarm system) [TN 002 / TN 004].
- In Addition and Where Appropriate:
 - Informing individual members of staff of their 'duty of care' to assist in the evacuation of students, the public and disabled people - (i.e. evacuation of occupants from libraries, museums, cluster rooms, lecture theatres and seminar rooms, the non-use of lifts, local refuges and arrangements for assisting those with disabilities including Disabled Evacuation Chairs etc).
 - An explanation as to Fire Safety Signs and their meaning [TN 090 / TN 091 / TN 092 / TN 094 / TN 095]
- Specific or Other Relevant Local Information / Instructions - (turn over if further space needed):
 - For those working in areas where 'Shut Down' procedures apply (Laboratories / Workshops / Kitchens safety shut down procedures in the event of fire (i.e. power & equipment isolation, gas cylinder isolation or hazardous process shut down etc)

I confirm that I have received & understood the Instructions & Information identified above:

Name: _____ Signature: _____ Date: _____