



Initial fire risk checklist for care providers

The questions in this fire risk checklist will help you to understand if the person you or your service care for might be at risk of injury or death from an accidental fire in their home. Complete the checklist by considering each item and ticking the box if it applies to the person, you care for.

All high-risk factors are indicated by this symbol: ⚠

It's important to consider everyone in the household as the risks may come from other people living there, not just the person receiving care. Sometimes, more than one assessment might be needed for each person in the household.

Once completed, please refer to the guidance and actions in the 'What to do next' section of this document.

Name of individual:	
Full address:	
Name of person completing the form and company:	
Date:	

Personal risks due to behaviours

The following is a list of behaviours that an individual may have that could increase risk.

1	A person in the household smokes in an unsafe way, such as having overflowing ashtrays, carelessly discards smoking materials, or struggles to handle lighters or matches. ⚠	☐ Yes ☐ No
2	A person in the household smokes in bed or in an armchair, where they also sleep. ⚠	☐ Yes ☐ No
3	A person in the household has unsafe cooking practices, such as leaves their cooking unattended ⚠	☐ Yes ☐ No
4	A person in the household has had previous fires or close calls, like burns or scorch marks on carpets, furniture, or cooking accidents (signs of these may not always be visible). ⚠	☐ Yes ☐ No
5	A person in the household uses candles or tealights in an unsafe way, such as placing them too close to curtains or	☐ Yes ☐ No

	other items that could catch fire, or where children and pets can easily reach them. ⚠	
6	A person in the household uses heaters, including portable heaters, in an unsafe way, for example placing them too close to items that could catch fire, including furniture. ⚠	☐ Yes ☐ No
7	A person in the household is a hoarder, or there are cluttered or blocked escape routes. ⚠	☐ Yes ☐ No
8	A person in the household charges powered transport such as mobility scooters, e-bikes or e-scooters in the home. ⚠	☐ Yes ☐ No
9	A person in the household overloads electrical sockets, adaptors or extension leads with multiple electrical items. ⚠	☐ Yes ☐ No

Personal risks due to health

The following is a list of health conditions or ailments that an individual may have that could increase risk.

10	A person in the household uses emollient skin products and smokes, or cooks with open flames, or uses candles, or uses open fires or gas fires. ⚠	☐ Yes ☐ No
11	A person in the household has a mental health condition, such as Dementia, anxiety, or depression, that may affect their ability to respond to a fire or alarm. ⚠	☐ Yes ☐ No
12	A person in the household takes alcohol, illicit drugs or medication that may affect their ability to respond to a fire or alarm. ⚠	☐ Yes ☐ No
13	A person in the household has reduced cognitive or decision-making capacity to understand what to do in the event of a fire or alarm.	☐ Yes ☐ No
14	A person in the household has restricted mobility, is frail or has a history of falls.	☐ Yes ☐ No
15	A person in the household needs support to move, for example, needs carers or hoists to move from bed to chair.	☐ Yes ☐ No
16	A person in the household would need assistance or specialist equipment to exit the property.	☐ Yes ☐ No
17	A person in the household uses an air pressure/flow mattress and/or uses home oxygen therapy (there is also an increased risk if individual smokes). ⚠	☐ Yes ☐ No
18	A person in the household has a sensory impairment for example hearing or sight loss that reduces their ability to respond to a fire or alarm.	☐ Yes ☐ No

Risk factors in the home environment

The following is a list of risk factors potentially in the home.

19	There is damaged or faulty wiring. ⚠	☐ Yes ☐ No
20	Exits and exit routes are blocked, making it hard for the person to leave and for the fire and rescue service to enter. ⚠	☐ Yes ☐ No
21	There are no working smoke alarms. ⚠	☐ Yes ☐ No
22	The person will not be able to call or find it difficult to communicate with the emergency services. ⚠	☐ Yes ☐ No

What to do next

Now you have completed the checklist, you should have a clearer understanding of the level of fire risk for people in the household. Please see the checklist below for next steps.

If you have checked **YES** to any of the 'High Risk' factors above, indicated with ⚠, you **MUST**:

Make an immediate referral to your company's Health & Safety Manager for urgent advice or action.	☐ Done
Make a referral to DWFRS for a free Home Fire Safety Visit via the online referral form . (please note, the occupier must consent to a visit).	☐ Done
Follow the fire safety guidance on page 4/5 of this document, and share it with the person you care for, to reduce risk in the meantime.	☐ Done

If there are NO 'High Risk' factors checked:

Follow the fire safety guidance on page 4/5 of this document and share it with the person you care for.	☐ Done
---	-------------------------------

In all cases:

If a care plan exists, all risks and actions taken should be noted in that plan.	☐ Done
Inform the individual and the carers/family of any risks identified, and actions taken or needed to reduce the risks.	☐ Done
Make sure a copy of this checklist is kept on file.	☐ Done
Inform other agencies supporting the person if there is a higher risk of fire and share what actions you have taken. If the home is rented, make sure to also notify the housing provider or landlord.	☐ Done
Make a referral to DWFRS for a free Home Fire Safety Visit via the online referral form . (please note, the occupier must consent to a visit).	☐ Done

Advice and guidance

Fire safety in the home

- It is safer not to smoke, but anyone who does should try to smoke outside and always make sure cigarettes are put out properly.
- Never smoke in bed.
- Never smoke if there is chance of falling asleep.
- Never smoke or place an ignition source near to home oxygen therapy or pressure relieving mattresses.
- Use fire-safe ashtrays and fire-retardant bedding, nightwear, and throws.
- All emollients can act as a fire accelerant when dried into clothing and exposed to naked flames or other heat sources. Patients, carers, and relatives should be made aware of the risks.
- Candles, tealights and incense burners should be discouraged or only placed in stable, heat-resistant holders. Keep these items or other naked flames well away from curtains, furniture, and clothes.
- Sit at least one metre from heaters and keep them well away from anything that can catch fire.
- Don't overload electrical sockets. Replace block adaptors with fused extension leads, and never link extension leads.
- Switch off and unplug electrical items when not in use.
- Avoid leaving on appliances such as ovens, washing machines, and dishwashers whilst asleep.
- Avoid charging mobile phones devices, mobility scooters, e-bikes, and e-scooters whilst asleep.
- Charge large items, such as electric powered wheelchairs and mobility scooters, where they will not block escape routes.
- Always use the manufacturer's approved charger to charge electrical items, such as mobile phones, laptops, e-bikes and e-scooters.
- Close internal doors at night as this helps to prevent fire and smoke spreading.

Early warning and detection

- As a minimum, a working smoke alarm should be fitted in the hall or landing on every floor of the home, where possible. This may be the responsibility of the resident or their landlord.
- Additional alarms should be fitted in other regularly inhabited rooms depending on risk.
- A heat alarm should be fitted in the kitchen where possible.
- Consider fitting linked smoke alarms where possible (smoke alarms that all activate together) as this the best way to be alerted in the event of a fire.
- Specialist alarms (for example, strobe light and vibrating pad alarms) are available for people who are Deaf or are hard of hearing.
- If a careline is needed or already installed, consider adding linked smoke alarms to the system. Speak to the careline provider to discuss.
- Remember to test all smoke, heat and carbon monoxide alarms at least once a month.

Escape

- Have an escape plan and make sure everyone in the household knows what it is.
- Make sure escape routes are kept clear of anything that may slow you down or block exit routes.
- Ensure doors, windows and security gates can be easily opened to assist escape.
- Mobility aids and any methods of calling for help should always be kept close by, for example mobile phones, link alarms or pendants.

Residential Emergency Evacuation Plan (RPEEPS) Guidance- New legislation

The Fire Safety (Residential Emergency Evacuation Plans) (England) Regulations 2025 came into force on 6th April 2026. These applied to residential buildings in England only and introduced new duties aimed at improving evacuation support for disabled and vulnerable residents.

Why is this happening?

These changes follow recommendations from the Grenfell Tower Inquiry, which called for legally required personal emergency evacuation plans for residents who may struggle to self-evacuate. The new Regulations bring this into practice through:

- Person-Centred Fire Risk Assessments (PCFRAs)
- Personal Emergency Evacuation Statements (PEEPs)

Which buildings are affected?

The Regulations apply to buildings with:

- Two or more domestic premises, **and**
- Either:
 - 18m+ / 7+ storeys, or
 - Over 11m with a simultaneous evacuation strategy.

Key duties for Responsible Persons?

- Create, maintain, and review PEEPs for occupants who may need help evacuating.
- Make reasonable efforts to identify occupants who need support (not only those who self-declare).

For more information click [here](#)

[Residential PEEPs: Guidance for Responsible Persons - GOV.UK](#)