

BUILDING EMERGENCY INDUCTION CHECKLIST

Information to be provided by the Building Warden (or Deputy) to Floor Wardens (FWs) following completion of the online Floor Warden training.

For buildings that do not have an appointed Building Warden/Deputy Building Warden, contact your [OHS Consultant/Advisor](#).

Building details	
Building Number/Location:	
Campus:	
Building Warden/Deputy Building Warden Details	
Name:	
Vest / Warden Key	
<ul style="list-style-type: none"> Confirm that the FW has a yellow Floor Warden vest Confirm that the FW has a WIP key (if applicable), or Access to shared Floor Warden equipment 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Building Emergency Plan	
<ul style="list-style-type: none"> Briefly provide summary of the Building's Emergency Response Plan – provide copy to FW. Emphasise communication protocols (WIP, walkie-talkie) 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
EWIS Panel / FIP / WIP	
<ul style="list-style-type: none"> Provide <u>brief</u> overview of EWIS and FIP Panel: <ul style="list-style-type: none"> - Alarm Tone Functions e.g. ALL ALERT - PA Function - WIP Function (i.e. explain what happens at the EWIS panel if the FW lifts a WIP on their floor and / or turns the switch key to 'WARDEN PRESENT'. - Zone Manned / Cleared buttons - Alarm Display 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
WIP (Warden Intercommunication Point)	
<ul style="list-style-type: none"> Provide overview of WIP function and communication protocols i.e. to BW at EWIS Panel and / or to Security 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Floor / Area Walkthrough	
<ul style="list-style-type: none"> Show example of Building Evacuation Diagram – Point out and confirm Assembly Areas i.e. Primary and Secondary (if present) 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<ul style="list-style-type: none"> Show example of a Manual Call Point (Red Break Glass Alarm (BGA)) (Ask FW's of their understanding of function). 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<ul style="list-style-type: none"> Show example of Emergency Door Release (White BGA) (Ask FW's of their understanding of function). 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<ul style="list-style-type: none"> Show example of Emergency Alarm (White BGA) (Ask FW's of their understanding of function). 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<ul style="list-style-type: none"> Indicate 'Emergency Exits' (i.e. illuminated green/white signage) 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

<ul style="list-style-type: none"> Indicate 'Fire isolated Stairwell' and any exit stairwells that are not fire-isolated, e.g. central staircase 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<ul style="list-style-type: none"> Indicate any fire equipment – i.e. extinguishers/fire hose reels 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<ul style="list-style-type: none"> Show location of First Aid kits/AEDs (Automated External Defibrillators) 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<ul style="list-style-type: none"> Indicate any Fire or Smoke Doors on the floor/area and describe function 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<ul style="list-style-type: none"> Indicate example of a smoke detector or heat sensor (if present) 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<ul style="list-style-type: none"> Indicate and explain any specific building emergency features present e.g. fire curtains, red E-stops 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<ul style="list-style-type: none"> Indicate areas of high risk and explain any local procedures for emergencies in high risk laboratories/areas 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Personal Emergency Evacuation Plans (PEEP)	
<ul style="list-style-type: none"> Communicate any requirements for individuals with disabilities within the FW's area, as per their PEEP, and as per information presented within the FW training 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Emergency Exercises	
<ul style="list-style-type: none"> Provide information regarding scheduling of emergency exercises (evacuation drills) within the building i.e. <ul style="list-style-type: none"> Approximate dates of exercises FW role within exercises i.e. participating in the exercise, carrying out the FW function as per training and attending a debrief at the end of the exercise. 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Questions / Actions	
<ul style="list-style-type: none"> FWs were given opportunity to ask questions 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<ul style="list-style-type: none"> Are there any outstanding actions that need to be followed up (If yes please document below) 	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Actions	Date to be Completed

