# Personal Emergency Evacuation Plan (PEEP)

## Section 1 – Details of Assessment

The purpose of this form is to enable management and employee to assess identified fire safety problems presented to the employee due to illness or disability.

<table>
<thead>
<tr>
<th>Assessor</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Assessed</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

**Date of Assessment**………………………**Date of Review**………………………

Please give an overview of the problems the employee faces with regard to hearing and reacting to a fire safety emergency

Please ensure you have considered:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Is the problem sight, hearing, mobility, dexterity, other (specify)</td>
</tr>
<tr>
<td>2</td>
<td>Can the fire alarm be operated</td>
</tr>
<tr>
<td>3</td>
<td>Can the fire alarm be heard</td>
</tr>
<tr>
<td>4</td>
<td>Can the fire alarm be seen</td>
</tr>
<tr>
<td>5</td>
<td>Can the means of escape inside and outside of the building up until the Assembly Point where the person works or takes breaks be safely used at all times</td>
</tr>
<tr>
<td>6</td>
<td>Can the fire fighting equipment be used</td>
</tr>
</tbody>
</table>
Section 2 – Solution(s)
Having discussed the problems .................................................. (Assessed name) has with regard to their fire safety within the premises the following solution(s) are proposed.

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Signed:...........................................  Signed:...........................................
  Assessor                               Assessed

Date .................................

Section 3 – Failure to find a Solution
Having discussed the problems with.................................................. (Assessed name) has with regard to their fire safety within the premise no reasonable solution can be found due to:

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..........................................................................................................................
..........................................................................................................................
..........................................................................................................................

Signed:...........................................  Signed:...........................................
  Assessor                               Assessed

Date .................................
Section 4 – Possible Solutions (all dependent on severity of condition)

Sight
- Consider lighting levels
- Use of different paint colours between floors and walls
- Highlighting edges and changes in level
- Bigger signage
- Braille signage
- Use of a “buddy”

Hearing
- Use of a “buddy”
- Higher noise levels
- Flashing strobe
- Vibrating pager

Mobility
- Use of a “buddy”
- Use of fire or evacuation lift
- Wheel Chair
- Evac chair
- Drag Mat
- Limiting travel distance to place of safety

Section 5 – Guidance Notes

1. The overriding aim of the form is to ensure the safe evacuation of the person.

2. Where possible the form must be completed in discussion with the person involved.

3. A form should never be completed by one person.

4. The use of a PEEP is for an employee who is expected to spend an extended period of time in the premises. Persons who attend the premises for a short duration such as a contractor should bring their own assessment and method statement to ensure their safety.

5. The form should identify a solution to the problems identified. If a satisfactory and reasonable solution cannot be found management, under the Regulatory Reform (Fire Safety) Order 2005 cannot permit the employee to work in the danger area.
6. The agreed solution(s) should be listed and must be actioned before the person takes up the position. Management will sign Section 2 to acknowledge completion of the process on their part and ask the employee to sign. Management will implement the solutions prior to commencement of employment.

7. If the employee is satisfied with the solutions proposed they should sign Section 2 to state the manager has discussed their problems with them and they agree with the proposed solutions. If the employee is not happy with the solution or feel they have not been adequately involved they should sign Section 3 and state why they are not satisfied.

8. If the manager is not satisfied they are able to propose a satisfactory solution they should complete Section 3 and state their reasons. They should then send the form to the Responsible Person for assistance.

9. A copy of the form should be retained in the employee’s personal record and on request supplied to the employee.

10. The PEEP must be reviewed annually or as agreed by those involved and where the persons condition changes. The Assessed is responsible for notifying the Assessor of any changes to their condition which would require a re-assessment.

11. Details of the solution should be promulgated to staff that need to know to ensure safe completion of the evacuation of the person and no others.

12. The suggested solutions (Section 4) are for general guidance only and by no means suggest there may not be other ways of assisting a person. The manager should not hesitate to contact their Competent Consultants for further assistance if required.