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| **Personal Emergency Evacuation Plan (PEEP)**  |
| **Part 1: PERSONAL DETAILS** |
| NAME: |  | DATE PLAN CREATED: |  |
| WORK LOCATION: |  | PLAN CREATED BY: |  |
| ALTERNATIVE WORKING POSITIONS (IF APPROPRIATE): YES/NO*(Indicate whether there are separate plans provided for other locations or situations)* |
| Building: Floor: Room No: |
| **Part 2: AWARENESS OF PROCEDURE** |
| The evacuation procedure was given to me in the following format:*(tick appropriate) Manager needs to ensure that this is provided in an accessible format pertinent to the individual receiving the PEEP** It has been explained in BSL
* In large print
* The escape routes have been shown or explained to me
* Individual authorised plan
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| The method of alert in an emergency is by: *(tick appropriate)** The existing fire alarm system
* Vibrating pager device
* Visual alarm system
* Members of my work team *(each person will require a copy of this sheet)*
* Nominated workplace helper/buddy

Names:  |
| **Part 3: GETTING OUT (Manager to discuss with Employee preferred options and include any hidden disabilities)** |
| I require  person/people to assist me. *(each of these people will require a copy of this sheet)* Names: Back-up:  |
| The following is a description of my escape plan. It is important that every effort is made to maintain the dignity of a person with a disability. |
| Specialist equipment required to assist in my escape plan:  |
| Practices should be every  months dates should be put into diaries.  |
| **Part 4: Ability to assist others in the event of an Evacuation (Employee to raise any barriers to assisting others).** |
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| **Part 5: Any other influencing factors** |
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| PEEP recipient’s signature:  | Manager’s signature:  |