



Version:	Owner:	Created:
2.2	Traci Clutterbuck (Quality Manager)	1 <sup>st</sup> April 2014
Published:	Approving Director:	Next Review

# Contents

Aim
PEEP
Responsibilities
Writing the PEEP4
Evacuation in an Emergency4
Assisting wheelchair users
Deaf and Hearing-Impaired persons5
Blind and Partially Sighted persons5
Assistance Dogs5
Appendix One - Emergency Evacuation Questionnaire for Disabled Staff6
Appendix Two - Personal Emergency Evacuation Plan10
Change Register15

# Aim

The aim of a Personal Emergency Evacuation Plan (PEEP) is to provide people, who cannot get themselves out of a building unaided during an emergency, with the necessary information to be able to manage their escape from the building. This will also provide the service concerned with the necessary information so as to ensure that the correct level of assistance is always available.

#### PEEP

The key question to ask is "Can this person leave the building unaided in an emergency?"

If the answer is No, they need their own evacuation plan.

A PEEP may be needed for someone with an impairment or disability such as:

- Mobility impairment
- Sight impairment
- Hearing impairment
- Cognitive impairment
- A medical condition or injury which might cause them to need assistance to evacuate safely.

Sometimes the requirement for a PEEP may be temporary for instance, someone who is using a wheelchair because of a broken leg or someone in the late stages of pregnancy.

### **Responsibilities**

It is the responsibility of the Workforce Department / Recruiting or Line Manager (with advice from Occupational Health) to talk to the staff member at the time of recruitment or following an injury to identify whether they require any assistance in the event of an emergency. If a member of staff requires assistance the Emergency Evacuation Questionnaire should be completed (see Appendix One). This should be completed by the staff member with appropriate support from the Line Manager and service Health and Safety Lead.

Staff are responsible for:

- Informing their Line Manager or Workforce Department of a possible PEEP requirement.
- Completing the Emergency Evacuation Questionnaire with their Line Manager
- Working with their Line Manager and/or Health and Safety Lead to complete a PEEP
- Ensuring the Shift Manager / Senior Manager on duty is aware of their PEEP if an emergency situation requiring evacuation arises

Line Managers are responsible for:

- Informing the Workforce Department of a possible PEEP requirement for a new / existing member of their staff
- Supporting their staff member to complete the Emergency Evacuation Questionnaire and a PEEP (see appendix one and two)
- Ensuring PEEPs are tested for effectiveness
- Liaising with the landlord for any specific advice about emergency evacuation from a shared site and any organisational policies/procedures needing to be considered

The Workforce Department is responsible for:

- Liaising with the Occupational Health Department
- Providing advice on equality and diversity
- Supporting the completion of the Emergency Evacuation Questionnaire

# Writing the PEEP

From the information gathered in the emergency evacuation questionnaire, an Individual's Premises Evacuation Plan (PEEP) should be formulated. Advice and support for writing the PEEP may be sought from the premises Landlord's Health and Safety expert and/or from a Landlords organisational policies and procedures for each location used by BrisDoc.

Given the unique characteristics of buildings, disabled persons who regularly use different buildings may have to have a separate PEEP developed for each building.

If assistance with an escape is required, the extent of such assistance should be identified in the PEEP i.e., the number of assistants and the methods to be used. These assistants may need training, which will be identified and instigated by the Health and Safety Lead supported by the Service Manager and Workforce Department.

## **Evacuation in an Emergency**

#### Assisting wheelchair users

Where disabled persons are located above the ground floor there are a number of considerations. In all the following cases the Health & Safety Lead will be able to give more advice and will assist with identifying refuge areas.

#### a) Temporary Refuge Areas

A refuge area is a designated temporary safe space where disabled people can wait for assistance. It is an area that is both separated from a fire by fire resisting construction and provides a safe route to final exit e.g., the head of a protected stairway - where there is sufficient space. The provision of a refuge will permit a staged evacuation to be implemented. A refuge area must be clearly signed and should be of sufficient size to accommodate both people using it as a refuge and any people passing through on their way out of the building.

A refuge is merely the first stage in the evacuation procedure for disabled persons, a specific procedure is required to ensure that persons are able to be evacuated from the refuge under safe and controlled conditions.

#### b) Lifts

Lifts cannot be used in an emergency. Any lift used for the evacuation of disabled people must be either a "fire-fighting lift" or an "evacuation lift".

#### c) Safe Routes

A PEEP should contain details of the escape route(s) the disabled person might be expected to use. Clear unobstructed gangways and floor layouts should be considered at the planning stage.

Wherever possible lateral evacuation routes should be sought out so that the evacuating person can move freely into an adjacent fire compartment (this will normally be achieved by passing through a set of corridor fire doors) without having to negotiate steps or stairs.

If possible, alternative escape routes should also be identified in case the main route becomes inaccessible during the emergency.

It is especially important to ensure that locks, doors and other devices are all able to be operated by the evacuating persons. It is insufficient to have a route if the door furniture is inaccessible.

A copy of the PEEP should be forwarded to the Landlord's Property Management Office so that any building works that may interfere with the escape routes can be identified and the individuals concerned notified in advance. Provision can then be made regarding alternative safe evacuation routes.

#### **Deaf and Hearing-Impaired persons**

Generally, most deaf people working alongside hearing colleagues / students will not require special equipment, providing they have been made aware of what to do in the event of a fire. They will be able to see and understand the behaviour of those around them.

#### **Blind and Partially Sighted persons**

Staff will be offered orientation training and, where applicable, this must include alternative ways out of the building.

#### **Assistance Dogs**

If a person uses an assistance dog, it is important that the dog is also given ample opportunity to learn these routes.

# Appendix One - Emergency Evacuation Questionnaire for Disabled Staff

This questionnaire is intended to be completed by the staff member to aid in the development of an Individual's Premises Evacuation Plan.

Once developed the Plan will be the intended means of escape in the event of an emergency (including drills).

#### Why you should fill in the form

As your employer, BrisDoc Healthcare Services has a legal responsibility to protect you from fire risks and ensure your health and safety at work. To do this properly we need to know if you need assistance during an emergency.

It should only take you a few minutes to complete the form.

#### What will happen when you have completed the form?

You should arrange a time to discuss the completed form with your Line Manager and the Health and Safety Lead.

You will be provided with any additional information necessary about the emergency evacuation procedures in the building(s) in which you work.

There may be some buildings where safe evacuation cannot yet be provided without alterations to the building. In these cases special arrangements will have to be considered and developed. In a few cases it may not be possible to provide safe access to the building, and other solutions will need to be found.

Name		
Job Title		
Service (and base(s))		
Brief Description of Duties		

#### LOCATION

1.		-	u based for most of the building, the fl		
2.	-	YES	ely use more than c	NO	
3.	Do yo	u routin	ely use other buildir	ngs?	
	lf you	YES feel it is	necessary please	NO provide fu	Ther details below.
<b>AWA</b> 4.			MERGENCY EVAC		PROCEDURES
	buildir	ng(s) in YES	which you work?	NO	
5.	Do yo	u requir	e written emergenc	y evacuati	on procedures:
		YES		NO	
	5a		u require written em anguage) interpreta		procedures to be supported by BSL (British
		YES		NO	
	5b	Do yo	u require the emerg	ency evad	cuation procedures to be in Braille?
		YES		NO	

	5c	Do you	I require the emergenc	cy evacu	ation procedu	e to be on tape?	
		YES		NO			
	5d	Do you	require the emergenc	cy evacu	ation procedu	es to be in large print?	
		YES		NO			
6.	Are the	e signs v	which mark emergency	y routes	and exits clea	r enough for you?	
		YES		NO			
EMER	GENCY	' ALAR	Μ				
7.	Can yo	ou hear	the fire alarm(s) in you	ır place(	s) or work?		
		YES		NO		DON'T KNOW	
8.	Could	you rais	e the alarm if you disc	overed	a fire?		
		YES		NO		DON'T KNOW	
ASSIS	TANCE	:					
9.	Do you	ı need a	assistance to get out of	f your pl	ace of work in	an emergency?	
		YES		NO		DON'T KNOW	
	lf NO p	lease g	o to Question 13				
10.	ls anyo	one des	ignated to assist you to	o get ou	t in an emerge	ncy?	
	lf NO p	YES blease g	o to Question 12. If Y	NO ES give	name(s) and I	DON'T KNOW ocation(s)	
GETTI	NG OU	т					
11.	Can yo	ou move	e quickly in the event o	f an em	ergency?		
		YES		NO		DON'T KNOW	
12.	Do you	ı find sta	airs difficult to use?				

	YES	NO	DON'T KNOW	
13.	Are you a wheelchair user?			
	YES	NO		
14.	Do you have an assistance dog?			
	YES	NO		

Thank you for completing this questionnaire.

The information you have given us will help us to meet any needs for information or assistance you may have.

Please return the completed form to your Line Manager and send a copy to the Workforce Department. If any of your circumstances change during the course of your employment, please contact your Line Manager/Health and Safety Lead.

# Appendix Two - Personal Emergency Evacuation Plan

Personal emergency evacuation plan (PEEP) for:		
Name:		
Contact details:		
Department:		
Floors/areas accessed:		
Building: (complete one form per building)		
Reasons for these special emergency arrangements: (e.g. difficulty using stairs, wheelchair user, hearing or sight impairment)		

Raising the alarm:	
If there is a fire I can raise the alarm by: (tick as applicable)	
$\Box$ Using the manual alarm call point to sound the alarm	
Other	_ (describe)

In the event of an emergency, I will be alerted by:

(Please tick all those that apply)

Fire alarm sounders

Beacons attached to the fire alarm system

Designated colleagues	(list)
Other	
• • • • • • · · · · · · · · · · · ·	

In an emergency I will be assisted by:			
Names:	Contact details:		
Currently none necessary			
How they will assist me:			
(List details including guidance to be giver	a, transfer procedures, training for staff)		
Special equipment which will need to be provided:			
(List details including evacuation chairs and communications equipment and its location)			
Safe routes available:			
(Describe routes and refuges available)			
See attached plan of building [] (tick if ap	oplicable)		

Г

Descr	Describe step-by-step evacuation procedure from alarm to assembly:		
1			
2			
3			
4			
5			

	ative evacuation procedure to be followed: ble to mobilise due to increased pain levels (When?)
1	
2	
3	
4	
5	

The format in which I would like to receive this PEEP and any supplementary emergency information is:

(e.g., braille, large print, British sign language, general type face, spoken)

Additional information noted during the assessment:

Approximate time to evacuate:	
Practice sessions which need to be organised:	
Comments/further information:	

Agreement by or on behalf of individual for whom PEEP is written:			
I confirm that I have been shown the location of the evacuation routes,			
facilities and equipment detailed			
I confirm that I have received a copy of the fire procedure in a format I can			
understand.			
I agree to follow this evacuation plan.			
I agree to inform the responsible person's representative if for any reason I			
believe this PEEP is no longer operable.			
Signature(s):			
Print name(s):			
Position:			
Time and date completed:			

Agreement on behalf of the responsible person:				
I confirm that the necessary personnel and resources described in this plan will be provided at all agreed times.				
I confirm that practice sessions and training will be arranged as identified in this plan.				
I confirm that a copy of this form will be provided to all those designated to assist in delivery of this PEEP and all fire wardens in the building.				
I agree to initiate a review of this PEEP if there is reason to believe it is no longer operable or effective.				
Signature(s):				
Print name(s):				

Position:	
Time and date completed:	
Date for planned review:	



# **Change Register**

Date	Version	Author	Change Details
August 2019	2.1	CL Nicholls	Updated to new titles and values slide
February 2023	2.2	Traci Clutterbuck	Updated to new policy template, the section on who needs a PEEP has been updated. Approving Director updated to read Rhys Hancock