

Four Cs

Multi-Academy Trust



Curiosity Confidence Courage Constancy

PERSONAL EMERGENCY EVACUATION PLAN (PEEP) POLICY

Presented to:

**Trustee Standards Meeting
13 March 2025**

| | |
|-----------------------------|---------------|
| Date approved: ¹ | October 2020 |
| Date reviewed: ² | 13 March 2025 |
| Date reviewed: | Spring 2028 |

¹ This is the date the policy was approved by the meeting

² This is the date the policy was reviewed prior to its approval above

- Headteacher also means Head of College and Principal
- School also means College, Academy or Academies
- References to School are taken to mean any school within the Four Cs Multi-Academy Trust

Contents

| | | |
|------------|---|----|
| 1.0 | Background | 3 |
| 2.0 | Aim | 3 |
| 3.0 | Responsibilities | 3 |
| 4.0 | Writing the Personal Emergency Evacuation Plan (PEEP) | 4 |
| 5.0 | Evacuation in an Emergency | 4 |
| | 5.2.1 - Temporary Refuges | 4 |
| | 5.2.2 – Lifts | 4 |
| | 5.2.3 – Safe Routes | 4 |
| 6.0 | Deaf and Hearing Impaired Persons | 4 |
| 7.0 | Blind and Partially Sighted Persons | 5 |
| 8.0 | Other Impairments eg Neuro / Cognitive | 5 |
| 9.0 | Training | 5 |
| 10.0 | Policy Review | 5 |
| Appendix A | Emergency Egress Questionnaire for Person Requiring Assistance – Pupil / Student | 6 |
| Appendix B | Emergency Egress Questionnaire for Person Requiring Assistance – Staff Member / Adult | 9 |
| Appendix C | Personal Emergency Evacuation Plan for..... | 12 |
| Appendix D | PEEP form to be used | 15 |

DEVELOPING A PERSONAL EMERGENCY EVACUATION PLAN (PEEP)

1.0 Background

- 1.1 Health and safety legislation places duties on the employer or 'responsible person' to prepare suitable and sufficient emergency plans for their buildings. These plans should include the procedures for evacuating the building in case of fire, bomb, gas leak, etc.
- 1.2 The most common reason for needing to evacuate premises is in relation to fire. When preparing a fire evacuation procedure, it is imperative to ensure that all people within the building can be evacuated to a place of safety.
- 1.3 Adults or children with a disability / lifelong condition should be considered as part of the evacuation procedures. In some cases, they will be able to evacuate the building independently but some with a limited mobility, limited cognitive ability, or a visual or hearing impairment may require additional support in order to evacuate safely.
- 1.4 The role of the Fire and Rescue Service is to save lives but the emphasis is on the responsible person to demonstrate that they can evacuate all people within their building to a place of safety without the need of the Fire and Rescue Service. This could be to a temporary place of safety such as a refuge area but there should be arrangements/procedures in place to evacuate people from this area to a permanent place of safety. For example, procedures may be in place to use a self-contained stairwell as a temporary refuge area and then move an individual with mobility impairment down the stairs using evacuation chairs if requested to a prearranged assembly point outside the building.
- 1.5 The use of refuge areas should be incorporated into the fire risk assessment for the building and once the procedures are in place, these should be discussed with staff and any training needs identified, in particular the use of equipment such as evacuation chairs.
- 1.6 Where the evacuation procedures already in place do not cater for staff/students who may require specific support in case of an evacuation, a Personal Emergency Evacuation Plan (PEEP) will need to be developed. The PEEP should be developed in conjunction with the individual to agree what action will be taken. For example, a person with a visual impairment may need to be escorted from the premises in case of a fire and a staff member should be nominated for this activity.
- 1.7 Once a PEEP has been established, arrangements should be put in place to ensure that these are practiced and it is recommended that these are carried out separately to the standard test evacuation. The needs of the individual should be considered and therefore it may be inappropriate for the individual to be involved in the test evacuation. In these cases, a volunteer to take their place should be identified.

2.0 Aim

- 2.1 The aim of a PEEP is to provide staff/students who cannot get themselves out of a building unaided, with the necessary information and assistance to be able to manage their escape to a place of safety and to ensure that the correct level of assistance is always available.

3.0 Responsibilities

- 3.1 It is the responsibility of the Site Manager / Headteacher to talk to staff/students to assess whether they require any assistance in the event of an emergency. This should happen before they return to school or as soon as practically possible. If someone requires

assistance the Emergency Egress Questionnaire should be completed (see Appendix A). This should be completed by the member of staff/student who has the mobility, visual or hearing impairment.

4.0 **Writing the PEEP**

4.1 From the information gathered in the questionnaire, a PEEP should be developed (see Appendix B for the template). Given the unique characteristics of buildings and the need for a PEEP to take account of an individual's capabilities, staff/students who require assistance and regularly use different buildings may need a separate PEEP for each building. If assistance with evacuation is required, the extent of such assistance should be identified in the PEEP ie the number of assistants necessary and the methods to be used. It is necessary to ensure that there is sufficient staff cover for absences, and the assistants may require training. Appendix C contains a PEEP register which should be updated weekly.

5.0 **Evacuation in an Emergency**

5.1 Staff will be trained to assist mobility impaired users down stairs, using suitable equipment.

5.2 Where mobility impaired persons are located above or below the ground floor there are a number of considerations.

5.2.1 **Temporary Refuges** - A refuge is a designated temporary safe place where staff/students who require assistance can wait. It is an area that is both separated from a fire by fire resisting construction and provides a safe route to final exit eg 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. Site staff are responsible for ensuring that refuge points are secure and compartmentation is in place.

5.2.2 **Lifts** - lifts will not be used in an emergency. Any lift used for the evacuation of mobility impaired staff should be a designated "evacuation lift." The individual lift servicing contractor will be able to advise if, and in what circumstances a lift may be used in the event of a fire.

5.2.3 **Safe Routes** – A PEEP should contain details of the necessary escape route(s). Clear unobstructed gangways and floor layouts should be considered at the planning stage. It is especially important to ensure that security devices are all able to be operated by the evacuating persons. It is also necessary to ensure that there are (as many as possible) alternative routes and that the routes are not excessively long.

6.0 **Deaf and Hearing impaired persons**

6.1 An evaluation must take place with any deaf or hearing-impaired person. Many alarm systems have visual indicators in the form of a flashing light, or vibrating pager systems can be used if required.

7.0 **Blind and Partially Sighted persons**

7.1 Staff and pupils / students, etc should be offered orientation training and, where applicable, this must include alternative exits from the building. If a blind person uses a guide dog it is important that the dog is also given ample opportunity to learn these routes.

8.0 **Other Impairments eg Neuro / Cognitive**

Any other pupil / student who has a lifelong disability / condition such as a neuro developmental or a cognitive impairment, which affects their ability to navigate or evacuate a building effectively and independently must have a PEEP.

9.0 **Training**

9.1 To be effective, any Emergency Plan depends on the ability of staff to respond efficiently. Staff will therefore receive instructions, practical demonstrations and training appropriate to their responsibilities. This may include some or all of the following elements:

- Fire drills for staff and pupils / students etc
- Specific training/instruction for nominated members of staff eg Fire Wardens
- Specific training/instruction in the use of Evacuation Chairs, evacuation lifts

10.0 **Policy Review**

10.1 The Trust Board will review this policy in line with the procedure for policy review.

10.2 Date for Review

If no other reason for review, this policy will be reviewed every three years by the Trustees.

APPENDIX A – PUPIL / STUDENT

Emergency Egress Questionnaire for Person Requiring Assistance – PUPIL / STUDENT

THE PARENT SHOULD BE THE PRIMARY LEAD IN COMPLETION OF THIS FORM IN CONSULTATION WITH STAFF AND CHILD

This questionnaire is intended to be completed by the parent of the pupil / student who may require assistance in an evacuation to assist in the development of a Personal Emergency Evacuation Plan (Appendix C). Relevant staff should assist the parent in completion of the form as necessary. Please provide as much information as possible to enable the school to develop a suitable plan. Appendix D is intended to be completed by the SENCO (SEN students) and First Aid staff (short term wheelchair / crutch students) once assessments have been completed and this is emailed out to all staff on a weekly basis so that they are aware of specific student requirements. A copy of Appendix D is retained in the Fire bag for ease of access during any evacuation.

Once developed, the Plan will be the intended means of escape in the event of an emergency (including drills). If the practice drill identifies concerns in the implementation of the evacuation, then please contact the SENCO / HOY / Site Manager / Headteacher for assistance in finding suitable solutions.

Why this form should be completed?

The school has a legal responsibility to protect everyone from fire risks and ensure their health and safety. The PEEP will be developed based on the information provided on this form.

What will happen after completion of this form?

You and your child will be provided with any additional information necessary about the emergency egress procedures in the school if required.

If your child needs assistance, the 'Personal Emergency Evacuation Plan' will specify what type of assistance they need. There may be some parts of the most appropriate premises where safe evacuation cannot yet be provided without alterations to the building/structure. In these circumstances the way forward will need to be discussed with SENCO / HOY / Site Manager / Headteacher.

| Student Name | | Form Group | |
|--|--|------------|--|
| 1. | Does your child have a health condition/disability or concern which you feel will impact upon their ability to change base or evacuate the school buildings? If yes please provide details. <input type="checkbox"/> Yes <input type="checkbox"/> No Details: | | |
| Awareness of emergency evacuation procedures | | | |
| 2. | Is your child aware of the emergency evacuation procedures which operate in the building(s) they attend? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

| | |
|---------------------------------|--|
| 3. | <p>Does your child require written emergency evacuation procedures?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> |
| 4. | <p>Does your child require written emergency procedures to be supported by appropriate communication methods?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> |
| Emergency Alarm | |
| 5. | <p>Can your child hear the fire alarm(s) in the school?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't Know</p> |
| 6. | <p>Could your child raise the alarm if they discovered a fire?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't Know</p> |
| Assistance | |
| 7. | <p>Does your child need assistance to evacuate your school in an emergency?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't Know</p> |
| 8. | <p>Does your child know their designated adult who would help them evacuate in an emergency?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't Know</p> |
| Getting Out / Evacuating | |
| 9. | <p>Is your child able to move quickly in the event of an emergency?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't Know</p> |
| 10. | <p>Does your child find stairs difficult to use?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't Know</p> |

| | |
|------------|---|
| 11. | Is your child a wheelchair user? <input type="checkbox"/> Yes <input type="checkbox"/> No |
|------------|---|

| Sign Off | | | |
|---|-------------|------------------|-------------|
| Role | Name | Signature | Date |
| Parent | | | |
| Relevant Staff | | | |
| Pupil / Student (where applicable) | | | |

APPENDIX B – STAFF MEMBER / ADULT

Emergency Egress Questionnaire for Person Requiring Assistance – **STAFF MEMBER / ADULT**

THE PARENT SHOULD BE THE MEMBER OF STAFF IN CONSULTATION WITH HR / PERSONNEL

This questionnaire is intended to be completed by the member of staff who may require assistance in an evacuation to assist in the development of a Personal Emergency Evacuation Plan (Appendix C). HR / personnel staff should assist the member of staff in completion of the form as necessary. Please provide as much information as possible to enable the school to develop a suitable plan. Appendix D is intended to be completed by the HR / Personnel office once assessments have been completed and this is emailed out to all staff on a weekly basis so that they are aware of specific requirements. A copy of Appendix D is retained in the Fire bag for ease of access during any evacuation.

Once developed, the Plan will be the intended means of escape in the event of an emergency (including drills). If the practice drill identifies concerns in the implementation of the evacuation, then please contact the HR / Personnel / Site Manager / Headteacher for assistance in finding suitable solutions.

Why this form should be completed?

The school has a legal responsibility to protect everyone from fire risks and ensure their health and safety. The PEEP will be developed based on the information provided on this form.

What will happen after completion of this form?

You will be provided with any additional information necessary about the emergency egress procedures in the school if required.

If you need assistance, the 'Personal Emergency Evacuation Plan' will specify what type of assistance you need. There may be some parts of the most appropriate premises where safe evacuation cannot yet be provided without alterations to the building/structure. In these circumstances the way forward will need to be discussed with HR / Personnel / Site Manager / Headteacher.

| Staff Name | Form Group |
|--|--|
| 1. | <p>Do you have a health condition/disability or concern which you feel will impact upon your ability to change base or evacuate the school buildings? If yes please provide details.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Details:</p> |
| Awareness of emergency evacuation procedures | |
| 2. | <p>Are you aware of the emergency evacuation procedures which operate in the building(s) you attend?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> |

| | |
|---------------------------------|--|
| 3. | <p>Do you need a specific written emergency procedure?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> |
| 4. | <p>Do you require written emergency procedures to be supported by appropriate communication methods?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> |
| Emergency Alarm | |
| 5. | <p>Can you hear the fire alarm(s) in the school?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't Know</p> |
| 6. | <p>Could you raise the alarm if you discovered a fire?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't Know</p> |
| Assistance | |
| 7. | <p>Do you need assistance to evacuate your school in an emergency?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't Know</p> |
| 8. | <p>Do you know your designated adult who would help them evacuate in an emergency?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't Know</p> |
| Getting Out / Evacuating | |
| 9. | <p>Are you able to move quickly in the event of an emergency?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't Know</p> |
| 10. | <p>Do you find stairs difficult to use?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't Know</p> |

| | |
|------------|---|
| 11. | Are you a wheelchair user? <input type="checkbox"/> Yes <input type="checkbox"/> No |
|------------|---|

| Sign Off | | | |
|--|-------------|------------------|-------------|
| Role | Name | Signature | Date |
| Relevant Staff (HR / Personnel) | | | |
| Staff Member | | | |

APPENDIX C

Personal Emergency Evacuation Plan for:

| | | | | |
|-------------|--|-------------------------------------|--|----------------------------------|
| Name | | Form Group (student only) | | <insert photo here> |
|-------------|--|-------------------------------------|--|----------------------------------|

RESPONSIBILITY FOR THIS FORM TO BE COMPLETED IS AS FOLLOWS:

- Lifelong condition / disability / impairment – SENCO (students), HR / Personnel Department (staff)
- Broken bones / use of wheelchairs / crutches for short-term conditions – HOY / SLT (students), HR / Personnel Department (staff)

| | |
|------------------------------|--|
| 1. | Description of diagnosis / SEND medical need: |
| 2. | <p>What are the risks associated with that need?</p> <p><input type="checkbox"/> Wears ear defenders preventing alarm being heard</p> <p><input type="checkbox"/> Loud noises or chaos causes lack of cooperation</p> <p><input type="checkbox"/> Behavioural challenges preventing cooperation</p> <p><input type="checkbox"/> Physical impairment eg crutches or wheelchair user hindering quick movement or easy use of stairs</p> <p><input type="checkbox"/> Visual impairments preventing easy evacuation or easily identifying nearest escape route</p> <p><input type="checkbox"/> Audio impairment preventing hearing alarm</p> <p><input type="checkbox"/> Inability to raise the alarm due to communication difficulties or physical impairment</p> <p><input type="checkbox"/> Seizures causing lack of mobility</p> <p><input type="checkbox"/> Mental health difficulties causing lack of cooperation or usual behaviour in evacuation</p> <p><input type="checkbox"/> Other, please specify: _____</p> <p>_____</p> |
| Methods of Assistance | |
| 3. | <p>How do we enable this person to exit the building safely?</p> <p><input type="checkbox"/> Communication method: _____</p> <p><input type="checkbox"/> Access to a trusted adult</p> <p><input type="checkbox"/> Evac Chair</p> <p><input type="checkbox"/> Emotional regulation</p> |

| | |
|------------------------------|---|
| | <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ |
| 4. | Is this person aware that lifts must not be used in an emergency evacuation? <input type="checkbox"/> Yes |
| Evacuation Procedure: | |
| 5. | Please provide a step-by-step account of procedure to be followed beginning with the first alarm: |
| 6. | Has evacuation been tested? <input type="checkbox"/> Yes <input type="checkbox"/> No If answer to above is 'No', please insert date for test to take place: _____ Test completed: _____ Action taken: _____ |
| 7. | When was compartmentation for any refuge point on site last inspected? _____ (Site Manager to advise this information) |
| 8. | Has consideration been given to the arrangements for the following times of the school day? <input type="checkbox"/> Before school <input type="checkbox"/> Break / lunchtime <input type="checkbox"/> After school club / activities <input type="checkbox"/> Educational visits <input type="checkbox"/> Exams |

All persons involved with this PEEP must complete the sign-off. A copy should then be retained by all relevant staff. **By signing this form you are aware of your role in the evacuation of this person**

Students: SENCO* / HOY* / First Aid / Trusted Adults / Site Manager

*responsible for communicating these arrangements with all Designated Assistants who are involved with this person

Staff: HR* / Personnel* / First Aid / Trusted Adults / Site Manager

*responsible for communicating these arrangements with all Designated Assistants who are involved with this person

| Sign Off | | | |
|---|-------------|------------------|-------------|
| Role | Name | Signature | Date |
| Relevant Staff (HR / Personnel) | | | |
| Pupil / Student (where applicable) | | | |
| Staff Member | | | |
| Site Manager | | | |
| SENCO | | | |
| HOY | | | |
| Trusted Adults / Designated Assistants | | | |

Designated Assistance:

(The following people have been designated to provide assistance for the person this PEEP belongs to, to get out of the building in an emergency).

Name _____

Contact details _____

Name _____

Contact details _____

Name _____

Contact details _____

APPENDIX D

THIS FORM SHOULD BE COMPLETED AS FOLLOWS:

- Lifelong condition / disability / impairment – SENCO (students), HR / Personnel Department (staff). **This form to be kept up to date and retained in the fire bag** to ensure correct information is available in an evacuation to the fire service and SLT.
- Broken bones / use of wheelchairs / crutches for short-term conditions – HOY / SLT (students), HR / Personnel Department (staff). **This form to be updated as required and retained in the fire bag**, to ensure correct information is available in an evacuation to the fire service and SLT.

Name of person completing: _____

| Personal Emergency Evacuation Plan | | | | |
|------------------------------------|------|------------|-----------------------|---------------------------|
| Register | | | Date: Week Beginning: | |
| Name | Form | Wheelchair | Crutches | Other (please specify) |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |