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Personal Emergency Evacuation Plan (PEEP) Residential Care

Name of Resident:

Residents Bedroom Number & Floor Level:

Date of Assessment:

PEEPs & Fire Evacuation Strategies

When planning the safe evacuation of residents during a fire, two key components must be considered:

1. **PEEPs (Personal Emergency Evacuation Plans)**
2. **The Fire Evacuation Strategy**

PEEPs (Personal Emergency Evacuation Plans)

A PEEP is a customised evacuation plan tailored for residents who may be unable to self-evacuate due to physical or neurological impairments. The plan identifies the specific evacuation equipment required and the level of staff assistance necessary to evacuate these individuals safely and swiftly.

The Fire Evacuation Strategy

This strategy outlines the broader evacuation plan for all residents, often using a method called progressive evacuation. Key considerations include:

- The layout and location of fire compartments
- The number of high-risk residents per compartment
- Internal and external fire assembly points
- The building's fire separation standards between floor levels
- The type of fire alarm system in place
- Travel distances to a safe location

The goal is to ensure that residents can be moved to a place of relative safety within approximately 2 ½ minutes.

The Importance of Integration

Both PEEP and the Fire Evacuation Strategy are interdependent. One cannot function effectively without the other, making it essential that both are fully developed and implemented in tandem.

Personal Emergency Evacuation Plan (PEEP) – Residential Care Homes

Section 1 – Assessment Details

Name of Care Home:-		Name of Resident:-	
Residents' Bedroom Number, Unit and Floor Level:-		Date of Taking up Residency:-	
Name of Assessor:- (Home Manager)		Date of Assessment:-	

Notes

This PEEP (Personal Emergency Evacuation Plan) Assessment should be completed by the Home Manager and integrated into the overall evacuation strategy for the care home in the event of a fire.

Care home providers and their staff hold a duty of care to safeguard the health and safety of all residents. This PEEP template is designed to be part of each resident's care package, helping to establish appropriate and effective emergency plans tailored to individual needs.

While the template aims to capture the key evacuation needs of each resident, there may be additional considerations that fall outside its scope. Any extra required actions should be detailed in Section 3.0 (Summary of Actions to be Taken).

The PEEP assessment should be completed before the resident moves into the home, and updated under the following circumstances:

Approximately 14 days after the resident's arrival, once staff have a clearer understanding of their specific needs.

- After any change in the resident's health, mobility, medication, or behaviour.
- On an ongoing basis, at least every six months, to ensure the plan remains accurate and effective.

Section 2 – Information Gathering

Ref	Item	Response	Action to be taken
1.0	Consultation with the Resident		
1.1	Would the resident be able to comprehend the actions to be taken in the event of an emergency evacuation?		
2.0	Physical Considerations		
2.1	In the event of an evacuation, would the resident require a walking aid, wheelchair or evacuation mat in order to vacate the room they are in and then progress to a place of relative safety?		
2.2	In an emergency evacuation scenario, could the resident be lifted without the use of a hoist?		
2.3	Does the resident suffer from strokes, cerebral palsy, muscular dystrophy, multiple sclerosis or similar condition that could affect their ability to self-evacuate?		
2.4	Is the residents' sight significantly impaired e.g. are they registered blind?		
2.5	Is the residents' hearing significantly impaired e.g. are they registered deaf?		
2.6	Is the resident receiving end of life care or are they physically frail to an extent that moving them for evacuation purposes could be potentially life threatening?		
3.0	Neurological Considerations		
3.1	Does the resident suffer from Alzheimer's, Dementia, Parkinson's disease, Huntington's disease, Dyspraxia or other condition that would affect their ability to self-evacuate?		
3.2	Is the resident likely to attempt to leave the site in the event of a fire alarm activation/evacuation?		
3.3	In the event of a fire alarm activation/evacuation is the resident likely to resist being moved?		

Section 4 – Summary of Overall Risk

Based on the information gathered about the residents' health and mobility, the Home Manager is required to make an evaluation of risk on the evacuation needs of the resident using the following definitions and placing a cross in the low, medium or high box.

Low Risk (Independent):- The mobility of the resident is not impaired in any way and they are able to physically leave the premises without the assistance of staff or, if they experience some impairment, they are able to leave with minimal assistance from another person.

Medium Risk (Dependant):- The resident is neither low risk (independent) or high risk (very high dependency) they have either mental health problems and/or mobility problems.

High Risk (Very High Dependency):- The residents' care and/or condition creates a high dependency on staff, or the immediate evacuation would prove potentially life threatening.

Low	<input type="checkbox"/>	Medium	<input type="checkbox"/>	High	<input type="checkbox"/>	Number of Staff Required to Assist:	
Home Manager's Signature:		Print Name:		Date:			

Please note that this PEEP Assessment only forms part of the overall Fire Evacuation Strategy for the Home.