**Personal Emergency Evacuation Plan (PEEP)**

**Personal Details**

|  |  |
| --- | --- |
| Name |  |
| Staff/Student ID |  |
| School |  |
| Mobile Phone |  |
| Email |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Reason for PEEP** |  | | | Comments |
| Can alarm signals be seen or heard? | | Yes | No |  |
| Can stairs be used safely in an emergency? | | Yes | No |  |
| Is the reason for the PEEP temporary?  (if temporary consider a date for review) | | Yes | No |  |

**Please note, if the answers to both the first two questions above are yes, a PEEP is not required. The PEEP form should still be signed and retained by both parties as a record to show it was agreed by the individual.**

|  |  |
| --- | --- |
| Are there any additional factors to be considered to enable the individual to evacuate safely? (E.g. provision of deaf alerter / vibrating pillow, buddy system etc) | |
|  |  |

**Building Information**

|  |  |
| --- | --- |
| Please name all the buildings that may be used on a regular basis |  |
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|  |

**Please use the below link to view accessibility drawings:** <https://www.nottingham.ac.uk/estates/spaceresource/accessplans/home.aspx>

**Safety Information and Evacuation Procedures**

|  |  |  |
| --- | --- | --- |
| **Safety Information Provided or Discussed** | **Confirm discussion and make any comments:** | |
| General UoN Fire Arrangements (including Alarm Systems, Beacons, Drills, Assembly Points, Use of Lifts) |  |  |
| Refuge points, locations and accessibility, use of intercom/phone |  |  |
| Evacuation chairs (location, use of) |  |  |
| Location of building plans and GEEPS |  |  |
| Accessible toilets |  |  |
| Access to high risk areas (labs & workshops) |  |  |
| Security contact details (0115 951 8888) |  |  |
| Visiting other campuses or offsite locations |  |  |
| Procedures in halls of residence |  |  |
| Use of buildings outside 9-5 |  |  |
| Any further measures that would aid evacuation |  |  |

**Please email the completed PEEP to The University Fire Safety Team on the below email for it to be checked and approved. The university Fire Safety Advisor or Officer will then sign it and return it if there are any further adjustments to be made.**

[BB-FireSafety@exmail.nottingham.ac.uk](mailto:BB-FireSafety@exmail.nottingham.ac.uk)

(If the individual has stated they do not require assistance and they can self-evacuate this form should be signed by both parties and sent on to the Fire Safety Advisor or Officer)

Plan produced for and accepted by (by signing this you are giving consent for the plan to be shared with, where necessary, Health and Safety Coordinators, DLO’s, Duty Holders, Halls Managers and Sports):

Signed.................................................................... Date..............................................

**Plan produced by (DLO/health and safety coordinator)**

............................................................................... Position...........................................

Signed.................................................................... Date................................................

**Endorsed by University Fire Safety Advisor/Officer**

Signed.................................................................... Date.................................................