



Personal Emergency Evacuation Plans (PEEP)

Hailsham Town Council has a legal responsibility to ensure your health, safety and welfare, as far as is reasonably practicable and this includes your safe evacuation from buildings in an emergency. Therefore, the following assessment needs to be completed to ensure that we have all the required information* to produce a plan for emergency evacuation, suitable for your personal needs. If you require any support in understanding or applying this plan, please contact the Corporate Services Manager. In addition, in line with the Equality Act 2010, we will make reasonable adjustments to remove or reduce disadvantages faced by disabled employees, Councillors, or applicants. Please also see data Protection Information Notice below.

Name:	Department:	
Building:		
Floor:		
This Assessment should be personal to the individuals' needs and must be completed with the active participation of the individual concerned (or their named carer if a minor) and their line manager.		
<u>Following this assessment the Personal Emergency Evacuation Plan (PEEP) must then be completed.</u>		
	YES	NO
1 Have the general emergency evacuation procedures for the building been explained to you?		
2 Are emergency evacuation procedures required in any of the following: British Sign Language <input type="checkbox"/> Braille <input type="checkbox"/> Audio <input type="checkbox"/> Large print <input type="checkbox"/> Another language <input type="checkbox"/> Please specify: _____		
3 Do you understand the need for emergency evacuation procedures?		
4 Are you able to read and understand the fire exit signs/notice without any difficulty?		
5a Do you know what the fire alarm sounds like?		
5b Can you hear the fire alarm in normal circumstances?		
6 Can you raise the alarm if you discover a fire?		
7 Are you able to get out of the building without assistance?		
	YES	NO

8	Are you able to move quickly in the event of an emergency?		
9	Do you use a wheelchair or other mobility aids? If YES, please specify:		
10	Are you located or using floors above ground level (base building and/or other buildings?) (If NO, go to question 15)		
11	Are you able to use the stairs in the event of an emergency evacuation? (If YES, go to question 15)		
12	Does the building have a fire safe lift?		
13	Are you able and willing to transfer to an emergency evacuation chair in an emergency situation? (If NO, or if an evacuation chair is not available go to question 15)		
14	Do you require assistance to transfer to an emergency evacuation chair?		
15	Are you aware of any refuge areas in the building, if applicable?		
16	Are your escape routes free from any structural features that will present a hazard or barrier?		

UK GDPR / Data Protection Information Notice

Information We Collect

As part of completing a Personal Emergency Evacuation Plan (PEEP), Hailsham Town Council will collect personal data, which may include:

- Your name, job role and department
- Information relating to your mobility, sensory, medical or other support needs
- Details of any equipment, aids or assistance required
- Names and contact details of individuals assigned to assist you during an evacuation
- Relevant building and location information

Purpose of Use

This information is collected to:

- Assess your specific requirements for safe evacuation in an emergency
- Develop and maintain an appropriate Personal Emergency Evacuation Plan
- Ensure the Council meets its legal duties for health, safety, equality, and emergency preparedness

Your information will only be used for these purposes.

Legal Basis for Processing

Hailsham Town Council processes this information under:

- **Article 6(1)(c) UK GDPR:** Compliance with a legal obligation (Health & Safety at Work Act 1974; Regulatory Reform (Fire Safety) Order 2005)

- **Article 6(1)(e):** Performance of a task in the public interest
- Where health information or disability information is included (special category data), it is processed under:
 - **Article 9(2)(b):** Employment and social protection law obligations
 - **Article 9(2)(h):** Provision of occupational health and safety
 - **Schedule 1, Part 1 & 2 of the Data Protection Act 2018**

Who Will Access Your Information

Your data may be shared with:

- Your Line Manager
- The Site Responsible Person
- Designated evacuation assistants or “buddies”
- Corporate Services / Health & Safety teams
- Emergency personnel where strictly necessary for your safety

It will **not** be used for any unrelated purpose and will not be shared outside the UK.

How Long Your Data Will Be Kept

Your PEEP will be held for the duration of its validity and for up to **one year after it is replaced or no longer required**, in line with Council retention schedules.

Your Rights

Under the UK GDPR, you have the right to:

- Access your personal data
- Request correction of inaccurate data
- Request deletion where appropriate
- Request restriction of processing
- Object to processing
- Raise concerns with the Information Commissioner's Office (ICO)

To exercise any of these rights, contact the Corporate Services Manager.

Consent

I consent to the information I have voluntarily provided being shared with the individuals listed in this PEEP for the sole purpose of assisting my safe evacuation in an emergency. I understand I may withdraw this consent at any time.

Signed (Employee/Councillor): _____ Date: _____

Print Employee/Councillor name: _____

Signed (Line Manager): _____ Date: _____

Print Line Manager's name:

If this process was supported by another colleague (such as a Facilities Management or Health & Safety)

Name: _____ Signature: _____

Date: _____

Use this information to produce the Personal Emergency Evacuation Plan

This Personal Emergency Evacuation Plan (PEEP) should be completed when the Initial Assessment has been undertaken, taking into consideration all requirements identified. The PEEP should be personal to the individuals' needs and must be completed with the active participation of the individual concerned (or their named carer if a minor) and the relevant line manager.

Name:
Department:
Building:
Floor:
Please state how will the individual be notified of the alarm:
Description of agreed evacuation procedures: <i>(Step by step account of what will happen, starting at the time the alarm is raised and finishing at the point that the individual reaches the assembly point outside the building).</i>
Details of evacuation route/s

Specialist equipment required:

Names and contact details of people assisting:

(Please ensure that those named will be readily available to assist and ensure that back-up cover has been considered in the event of absence. Identify any training requirements).

Equipment/ medicine needed to be taken with individual at time of evacuation:

Signed (Employee/Councillor):_____ Date:_____

Signed (Line Manager):_____ Date:_____

Print Line Manager's name:_____

Signed (Site Responsible Person):_____ Date:_____

Print Site Responsible Person's name:_____

Shared with all parties named in assessment (e.g. buddies) Date:_____

Signed:_____

Review date of PEEP:_____

A copy must be kept by the Site Responsible Person, and the Line Manager and Employee/Councillor for their own records.