

Residential Personal Emergency Evacuation Plan (Residential PEEP)

Resident's name:

Contact details:

Floor: Flat number: Post code:

Address:

Person requiring a residential PEEP

Name of person requiring a RPEEP:

Is the resident under the age of 18? Yes ☐ No ☐

Social alarm monitoring Centre

Name of provider:

Provider's contact number

Do you or anyone in your household have any difficulty noticing or responding to a fire alarm or emergency alert, for instance, due to hearing loss, sensory processing difficulties or deep sleep patterns?

- ☐ Yes, I may not always notice an alarm.
- ☐ No, I would always notice an alarm.
- ☐ I'm not sure.

Do you or anyone in your household have any difficulty moving quickly to evacuate your home in an emergency?

- ☐ Yes, I may need extra time or assistance.
- ☐ No, I can evacuate independently.
- ☐ I'm not sure.

Do you or anyone in your household use any mobility aids, such as a walking stick, frame, wheelchair or stairlift?

- ☐ Yes, I use mobility aids.
- ☐ No, I don't use mobility aids.
- ☐ I prefer not to say.

Are you or anyone in your household able to safely use the stairs in an emergency if the lift is unavailable?

- ☐ Yes, I can use the stairs.
- ☐ No, I would struggle to use the stairs.
- ☐ I'm not sure.

Do you or anyone in your household have a medical condition, health concern or disability that could affect your ability to leave the building quickly in an emergency?

- ☐ Yes, I have a condition that may affect my ability to evacuate.
- ☐ No, I do not have any conditions that would affect evacuation.
- ☐ I prefer not to say.

Do you or anyone in your household have difficulty understanding or remembering emergency instructions?

- ☐ Yes, I may need help understanding or remembering instructions.
- ☐ No, I can follow emergency instructions.
- ☐ I'm not sure.

Do you or anyone in your household have difficulty seeing emergency signs, exit routes or stairs clearly?

- ☐ Yes, I have difficulty seeing exit routes clearly.
- ☐ No, I can see and follow exit routes.
- ☐ I'm not sure.

Do you or anyone in your household have a carer, support worker or family member who assists you at home?

- ☐ Yes, I have someone who helps me regularly.
- ☐ No, I manage independently.
- ☐ I prefer not to say.

Declaration of consent**Part A****Permission to share my information with the Fire and Rescue Services - Regulation 10:**

I consent that Newlon Housing Trust can share the following information to the local fire and rescue authority in order to assist their operational response:

- My flat number.
- My floor number.
- Basic information about the level of assistance my household requires.
- Whether I have an emergency evacuation statement as part of Residential PEEP.

☐ I understand this information will be locked in the secure information box located at the front of the building **accessible only by Newlon Housing Trust staff and Fire and Rescue Services.**

☐ I understand and consent that this information will also be held on the Newlon Housing Trust secure database in accordance with GDPR and Data Protection Legislation. 'Data protection legislation' has the same meaning as in Section 3 of the Data Protection Act 2018(5).

Resident's signature:

Resident's name:

Date

Part B**Consent for Residential Personal Emergency Evacuation Plan - Regulation 5.**

Please select one of the following options:

- ☐ Yes - I would like to participate in a Residential PEEP for myself/ my household. I consent to being contact by Newlon Housing Trust Building Safety Team.
- ☐ No - I do not consent to a Residential PEEP and only want to disclose basic information to Fire and Rescue services as outlined in Part A.
- ☐ No - I do not consent to a Residential PEEP and do not give permission to disclose basic information to Fire and Rescue services as outlined in Part A.
- ☐ No persons in my household require a Residential PEEP.
- ☐ Please contact me - I require further information and would like to be contacted by the Building Safety Team before I give consent.

Resident's signature:

Resident's name:

Date