

Personal Emergency Evacuation Plan

Name	
Mobile telephone number	
Details of event being attended	
Name of person assisting – Friend/Partner	
Name of Registrar/Usher assigned to provide assistance	
<p>Mobility Issues:</p> <p><u>Visual impairment</u> Are they visually impaired Y/N State the degree of impairment and if they require assistance to evacuate?</p> <p><u>Hearing Impairment</u> Hearing Impairment Y/N State the degree of impairment and if they require assistance to evacuate?</p> <p><u>Wheelchair User</u> Wheelchair user – No/Occasionally/Permanently Do they use a manual or powered chair? Can they transfer from the wheelchair to an evacuation chair? Y/N – With/Without assistance</p> <p>Are they able to get down stairs and out exits safely in an emergency? Y/N – Completely independent Yes – with some support Yes – with support/evacuation chair</p>	
If the person is not a wheelchair user what other mobility aids do they use? Crutches/stick/walking frame	
Are there any further impairments or disabilities that may affect their ability to evacuate the building during fire alarm activations?	
Name of person completing PEEP	