


Fire Safety Policy

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Document Control

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1. Introduction

1. This policy sets out the principles and requirements for fire safety within Central East Integrated Care Board (CE ICB). It aims to ensure a consistent and effective approach that supports the organisation's objectives, complies with statutory and regulatory requirements and promotes best practice.

2. Purpose and Scope

- 2.1 The purpose of this policy is to:
 - a. ensure that all reasonable precautions are taken to prevent or minimise the risk of fire at all CE ICB occupied premises. Ensuring appropriate emergency procedures are implemented to preserve life and minimise the impact on delivery of service, the environment, and premises, should a fire occur.
 - b. document the management of fire safety. Post-incident response and evaluation are essential for an effective fire prevention. Effective incident investigation and review of risk assessments will help prevent further incidents.
- 2.2 This policy applies to all CE ICB staff, Board members, contractors, visitors and others involved in the delivery, management, or support of ICB activities whilst working from ICB premises.
- 2.3 This policy does not apply to CE ICB staff when they are working in premises that are managed by other organisations. In these circumstances, staff are to comply with the fire safety policy of the managing organisation. Staff are responsible for familiarising themselves with local arrangements.

3. Definitions

- 3.1 **Responsible Person:** The individual with legal responsibility for fire safety under the Regulatory Reform (Fire Safety) Order 2005.
- 3.2 **Competent Person:** A person with sufficient training, experience, knowledge and skills to assist the Responsible Person in undertaking preventive and protective fire safety measures.
- 3.3 **ICB Premises:** Any building, workplace, or location owned, leased, occupied, or managed by the Central East Integrated Care Board.
- 3.4 **Managers / Line Managers:** Individuals with supervisory responsibility for staff.

- 3.5 **Staff:** All individuals working on behalf of the ICB, including permanent employees, temporary staff, agency workers, contractors, volunteers, and others engaged in ICB activities.
- 3.6 **Safety Assistance:** Staff designated to support the organisation's protective and preventative measures, fire wardens and evacuation apparatus operators.
- 3.7 **Local Evacuation Procedure (LEP):** A site-specific emergency evacuation plan that sets out the procedures to follow in the event of an evacuation, shelter or lockdown.
- 3.8 **Personal Emergency Evacuation Plan (PEEP):** A document created for individuals who require assistance or special arrangements to safely evacuate a building in an emergency.
- 3.7 **Visitor:** Any individual temporarily present in an ICB premises who is not a member of staff.
- 3.8 **Contractor:** Any external individual or organisation undertaking work for the ICB.
- 3.9 **Near Miss:** An unplanned event that did not cause harm but had the potential to do so.
- 3.10 **Arson:** The deliberate act of setting fire to property.
- 3.11 **Fire Risk Assessment (FRA):** A systematic examination of work activities, environments, and processes to identify fire hazards, evaluate associated risks, and determine appropriate control measures to eliminate or reduce those risks

4. Policy Statement

- 4.1 Central East integrated Care Board (CE ICB) is committed to complying with The Regulatory Reform (Fire Safety) Order 2005 (RRO) together with the Management of Health and Safety at Work Regulations 1999, and other associated fire safety legislation, which impose duties on all employers in respect of fire safety at work. These duties extend to the CE ICB, its staff and visitors. As the employer, the CE ICB has formulated a Fire Safety Policy to include these duties. This Policy describes the objectives and responsibilities for fire safety within the HWE ICB.
- 4.2 To achieve this the CE ICB will implement effective practices; aiming to create a safe working environment, fostering a proactive safety culture and minimising risks associated with its undertakings. By prioritising fire safety, the organisation strives to protect the well-being of its staff, visitors, members of public and other stakeholders, as far as reasonably practicable.

To achieve this, all CE ICB occupied premises require.

- A. A Fire Risk Assessment to identify possible dangers and risks
- B. Consideration to those who may be especially at risk

- C. Appropriate fire safety measures in place and maintained
 - D. A plan to be in place should an emergency occur (Local Evacuation Procedure)
 - E. Information, suitable instruction, and training to be given to staff
 - F. Records are kept and regular reviews are carried out
- 4.3 All staff are expected to adhere to the requirements set out in this policy, cooperate with fire safety arrangements, and take reasonable care of their own safety and that of others who may be affected by their actions.
- 4.4 It is vital to the effectiveness of this policy that this and any subsequent revisions are available to all staff; they understand its contents and are aware of their role in ensuring a safe working environment.

5. Roles and Responsibilities

5.1 The following have specific responsibilities in relation to this policy:

5.1.1 Responsible Person

The Chief Executive has delegated the responsibility for fire safety to the Executive Director of Corporate Services & ICB Development.

As the Responsible Person for fire safety within the CE ICB, as defined in the RRO, this person is responsible for:

- Taking board level responsibility for the CE ICB's compliance
- Ensuring there is an effective overall policy (this document) for the fire safety of staff and other persons who may be affected by the CE ICB's undertaking.
- Ensuring organisational compliance with the RRO in relation to premises under their control
- Ensuring a Fire Safety Management structure exists within the organisation
- Ensuring audit arrangements exist to oversee fire safety compliance
- Ensuring the provision of appropriate resources to support fire safety management arrangements

5.1.2 Competent Person/s

Are responsible for:

- Providing expert advice on fire safety matters
- Providing strategic direction and oversight of corporate strategies and policies relating to fire precautions
- Ensuring robust fire safety arrangements are in place across all ICB premises, with arrangements monitored and reviewed annually, and any non-compliance or audit findings reported to the Responsible Person for assurance and action
- Ensuring fire safety is included within the organisation's annual health and safety objectives, clearly defined, measurable, agreed, and monitored

- Ensuring fire hazards and persons at risk (including those with disabilities or vulnerabilities) are identified and appropriately managed across ICB premises
- Coordinating and cooperating with landlords, tenants, and others who share the building to ensure compliance and aligned fire safety arrangements
- Commissioning the services of a qualified fire safety specialist when required

CE ICBs delegated competent person/s are the Deputy Director of Corporate Services.

5.1.3 Senior Managers

Must:

- Promote a positive and proactive fire safety culture and lead by example
- Ensure their service areas comply with all fire safety policy requirements and statutory obligations
- Review fire safety performance, risks, audit outcomes, and incident data within their areas of responsibility
- Support the implementation of corrective actions and continuous improvements to strengthen fire safety arrangements.

5.1.4 Line Managers

Line Managers are responsible for the day-to-day implementation of this Fire Safety Policy within their teams. They must:

- Ensure all fire-related incidents, accidents, and near misses are reported to the Competent Person
- Ensure staff receive appropriate fire safety information, instruction, and training — including induction, building-specific briefings, and regular refreshers
- Maintain accurate fire safety training records and ensure mandatory training compliance is monitored
- Identify staff who require Personal Emergency Evacuation Plans (PEEPs), ensure PEEPs are completed and reviewed regularly, and take reasonable steps to accommodate staff with disabilities or additional needs
- Ensure individuals with responsibilities within a PEEP understand their duties and receive any required training (including evacuation equipment, where applicable)
- Include fire safety as a regular standing item on team meeting agendas
- Support safe working practices by acting on fire safety concerns raised within their teams and escalating issues to the Competent Person where necessary

5.1.5 All Staff

All staff, regardless of role or seniority, must:

- Take reasonable care for their own safety and the safety of others in relation to fire risks
- Follow all fire safety policies, procedures, evacuation arrangements and local instructions

- Participate in mandatory fire safety training, induction, and fire drills, and undertake any additional training required for safety assistance roles
- Report fire hazards, defects, unsafe conditions, incidents, and near misses promptly to their Line Manager
- Not misuse, obstruct, or interfere with fire safety equipment or systems
- Inform their Line Manager if they have a condition, disability, or temporary impairment that may affect their ability to evacuate safely, so that an appropriate PEEP can be arranged
- Be responsible for ensuring visitors they are hosting are aware of evacuation procedures
- Respond appropriately and evacuate immediately when the fire alarm sounds, whether during a drill or actual incident

6. Processes and Procedures

6.1 CE ICB recognises its obligations under the Regulatory Reform (Fire Safety) Order 2005 (RRO) and implements the following practical arrangements to meet these obligations.

6.1.1 Fire Risk Assessment (FRA)

The competent person must ensure:

- FRAs are completed for all ICB premises & reviewed annually or sooner if there are significant changes
- Actions are allocated, completed, and the FRA is updated accordingly
- Findings and updates are shared with relevant staff and made available to regulators if requested
- People with impairments in evacuation planning are considered

6.1.2 Staff with Sensory Impairment or Reduced Mobility

- FRAs must include clear instructions for staff and visitors who need special evacuation arrangements
- Staff with any condition, disability, or mobility issue (temporary or permanent) that may affect evacuation must inform their manager
- Managers must ensure a PEEP is completed for anyone who needs assistance (see Appendix 3 for the template)
- Staff with PEEP responsibilities must receive appropriate training
- PEEPs must be reviewed after an evacuation, annually, or if circumstances change
- If taking part in fire drills poses significant risk to a staff member, the PEEP may need to include measures to reduce or remove the need to evacuate during false alarms

6.1.3 Local Evacuation Procedures (LEPs)

- The Competent Person must ensure a Local Evacuation Procedure (LEP) is in place for each ICB premises, is reviewed annually or after significant changes, and is effectively communicated to staff.
- LEPs must be accessible
- All staff must familiarise themselves with the LEP and follow instructions during drills or incidents

6.1.4 Fire Prevention and Good Housekeeping

All staff must ensure:

- Good housekeeping is maintained, with waste stored safely and removed regularly
- Combustible materials are kept away from heaters, electrical equipment and other ignition sources
- Only approved electrical items are used in accordance with manufacturer instructions and the Electrical Risk Assessment
- Any fire hazards or concerns are reported without delay

6.1.5 Fire Detection and Firefighting Equipment

The competent person must ensure:

- Appropriate fire detection, alarm systems, emergency lighting and firefighting equipment are installed and maintained across CE ICB premises, directly or through the landlord
- All systems are tested and serviced by competent contractors in line with legislation and relevant British Standards
- Faults, maintenance records and inspection reports are monitored, acted upon and retained.
- All fire incidents and false alarms are recorded
- Firefighting equipment is only used by trained staff, and any defects are reported immediately.

6.1.6 Safety Assistance

The competent person must ensure:

- Capable persons are appointed to support preventative and protective measures across CE ICB premises
- Appointed individuals are given sufficient time, training and resources to carry out their duties effectively

6.1.7 Fire Safety Training

Line Managers must:

- Ensure staff receive fire safety training during induction and at regular intervals thereafter

- Maintain accurate records of all fire safety training completed by their staff
- Ensure fire safety is included as a regular standing item on team meeting agendas
- The Competent Person must ensure additional fire safety training is provided for staff carrying out safety assistance roles
- The Competent Person will monitor training completion rates to ensure organisational compliance.

6.1.8 Fire Drills

The competent person must ensure:

- Fire drills are carried out across all CE ICB premises at least once per year
- Outcomes are recorded, reviewed, and any required improvements are identified and implemented
- Findings are communicated to relevant staff to maintain effective evacuation procedures
- All staff and visitors participate in drills unless a PEEP is in place; individuals with PEEPs are informed in advance and suitable alternative arrangements are made to validate their evacuation requirements

6.1.9 Coordination with Landlords and Shared Premises

The competent person must ensure:

- Local Evacuation Procedures align with the host organisation's fire strategy and clearly defined responsibilities
- Relevant fire safety information is shared
- Maintenance, testing, alarm activation, evacuation control and drill arrangements are coordinated with landlords or partner organisations
- Issues in shared areas—such as escape routes, fire doors or alarm panels—are reported promptly to the landlord and monitored until resolved

6.1.10 Arson Prevention and Site Security

- The Competent person must ensure arson risks are assessed as part of FRA, with appropriate mitigation measures in place at each site
- All Staff should be vigilant to unauthorised individuals, suspicious behaviour and combustible materials left near buildings or entry points
- Staff who have any concerns or suspicions relating to arson, including local incidents that may increase risk, should be reported immediately to their Line Manager or Competent Person
- Any known arson attempts in the local area should be reported to staff to support increased vigilance

6.1.11 Smoking

Smoking and the use of e-cigarettes and vapes by staff and visitors is prohibited at all CE ICB premises

6.1.12 Electrical Safety and Portable Appliance Testing (PAT)

Staff must ensure:

- Electrical appliances are visually checked before use and those showing signs of damage or defect are removed from service and reported to the Competent Person
- Ensure any electrical items brought onto the premises meet safety requirements, and that personal chargers or appliances are only used in line with local arrangements
- Follow electrical safety practices, including avoiding overloaded sockets, not “daisy-chaining” extension leads, and ensuring cables are not trapped or damaged
- The competent person must ensure all portable electrical appliances are tested by competent contractors at intervals determined by risk assessment and statutory guidance

6.1.13 Management Visitors

Visitors must be briefed on relevant evacuation arrangements by their host, who is responsible for their safety and for supporting their evacuation, including providing additional assistance where required

6.1.14 Reporting, Investigation and Review of Fire Incidents

The competent person must ensure:

- All fire incidents are reported through the CE ICB reporting system, investigated, and any necessary corrective actions implemented
- Serious fire incidents are escalated promptly to the Responsible Person and reported under RIDDOR
- Learning from incidents is shared across the organisation and reflected in risk assessments, policies, and training
- Records of incidents and investigations are retained to support audit, assurance, and regulatory compliance

7. Statutory and National Guidance

This policy has been developed with reference to the following statutory and national guidance:

- Regulatory Reform (Fire Safety) Order 2005
- Health and Safety at Work etc. Act 1974

- Management of Health and Safety at Work Regulations 1999
- Building Act 1984
- Building Regulations 2010 – Approved Document B (Fire Safety)
- NHS England: Fire Safety in the NHS Framework
- Government Fire Safety Risk Assessment Guides, including:
 - Means of Escape for Disabled People
 - British Standards for Fire Safety
- NHS England Assurance Frameworks relating to estates, workforce, EPRR and organisational safety governance
- HSE Guidance on Fire Safety and Risk Assessment
- Local Fire and Rescue Service guidance where applicable
- Best practice from within NHS Fire Safety Management across ICBs and ICSs

8. Stakeholder Engagement Record

8.1 The following stakeholders were engaged in the development of this policy:

Role/Group	Date of Engagement	Summary of Feedback
Director of Corporate Services & ICB Development	06/03/2026	No feedback provided.
Trade Union Representative (HWE)	06/03/2026	No feedback provided.
Equality & Diversity Lead (HWE)	18/03/2026	Potential impact has been identified and mitigating actions put in place. It is likely that decision makers will have sufficient information to show Due Regard, as required by the Equality Act
Office Manager (C&P)	06/03/2026	No feedback provided.

Accessibility Statement

This policy is available in alternative formats upon request, including large print, Braille and translated versions, to ensure accessibility for all staff and stakeholders.

Implementation Plan

Development and Consultation: Policy developed by Kelly Taylor – Head of Corporate Support (HWE) and Nora Pesheva – Office Manager (BLMK), with input from relevant stakeholders including the Office Manager (C&P), Trade Union representatives and Equality & Diversity leads.

Dissemination: Policy will be published on the Central East ICB website and shared via internal communications channels (email, intranet, team briefings). Printed copies will be available upon request.

Training: Mandatory fire safety training will be provided to all staff, with specialist training for designated roles (e.g., fire wardens). Training records will be maintained and monitored by managers. Refresher training will be scheduled as outlined in policy and guidance.

Monitoring: Regular fire drills will be conducted at all ICB premises to test the effectiveness of evacuation procedures and staff readiness. Compliance with fire safety arrangements will be monitored through annual audits, review of incident reports, and ongoing risk assessments. Findings and corrective actions will be reported to the Responsible Person.

Review: Policy will be reviewed annually or sooner if required by changes in legislation, guidance, changes to the organisational structure or following significant incidents.

Equality, Diversity, and Privacy: See Appendices for Equality Impact Assessment and Data Protection Impact Assessment.

Associated Documents: ~~Associated Documents:~~ Related internal health & safety policies, risk assessments, procedures and guidance.

References: Refer to statutory and national guidance listed in Section 7.

Appendix 1: Equality Impact Assessment

Please answer the questions against each of the protected characteristic and inclusion health groups. If there are significant impacts and issues identified a full Equality / Quality Impact Assessment (EQIA) must be undertaken. It is against the law to discriminate against someone because of these protected characteristics. For support and advice on undertaking EQIAs please contact: agcsu.equalities@nhs.net

Name of Policy: Central East ICB Fire Safety Policy
Date of assessment: 08-03-2026
Screening undertaken by: Kelly Taylor – Head of Corporate Support (HWE)

Protected characteristic and inclusion health groups.	Could the policy create a disadvantage for some groups in application or access?	If Yes - are there any mechanisms already in place to mitigate the potential adverse impacts identified?
<p>Find out more about the Equality Act 2010, which provides the legal framework to tackle disadvantage and discrimination:</p> <p>https://www.equalityhumanrights.com/en/equality-act/protected-characteristics</p>	<p>(Give brief summary)</p>	<p>If not, please detail additional actions that could help.</p> <p>If this is not possible, please explain why</p>
<p>Age A person belonging to a particular age (for example 32 year olds) or range of ages (for example 18 to 30 year olds).</p>	<p>Unlikely. Policy applies equally to all ages.</p>	<p>Training and risk assessments are accessible to all age groups.</p>
<p>Disability A person has a disability if she or he has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.</p>	<p>Possible if reasonable adjustments are not made.</p>	<p>Policy requires reasonable adjustments and additional assessments (e.g., PEEPs and alternative arrangements for fire drills). Line Managers are responsible for ensuring PEEPs are carried out. Staff who need a PEEP are required to communicate with their Line Manager.</p>
<p>Gender reassignment The process of transitioning from one</p>	<p>Unlikely. No specific disadvantage identified.</p>	<p>Policy applies equally; support available if needed.</p>

gender to another.

Marriage and civil partnership

Marriage is a union between a man and a woman or between a same-sex couple. Same-sex couples can also have their relationships legally recognised as 'civil partnerships'.

Pregnancy and maternity

Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.

Race

Refers to the protected characteristic of race. It refers to a group of people defined by their race, colour and nationality (including citizenship) ethnic or national origins.

Religion or belief

Religion refers to any religion, including a lack of religion. Belief refers to any religious or philosophical belief and includes a lack of belief. Generally, a belief should affect your life choices or the way you live for it to be included in the definition.

Sex

A man or a woman.

Sexual orientation

Whether a person's sexual attraction is towards their own sex, the opposite sex, to both sexes or none.

Carers

Unlikely. Policy applies equally.

No specific disadvantage; policy is inclusive.

Possible if workplace adjustments are not made.

Policy requires risk assessments and adjustments for pregnant staff.

Unlikely. Policy applies equally.

Policy is inclusive; training and communication accessible to all.

Unlikely. Policy applies equally.

Policy is inclusive; reasonable adjustments available if needed.

Unlikely. Policy applies equally.

Policy is inclusive; support available if needed.

Unlikely. Policy applies equally.

Policy is inclusive; support available if needed.

Possible if flexible working is not supported.

Policy supports reasonable adjustments and flexible

Individuals within the ICB which may have carer responsibilities.

Please summarise the improvements which this policy offers compared to the previous version or position.

Clearer requirements for reasonable adjustments and risk assessments for staff with disabilities, pregnancy, or caring responsibilities. More robust monitoring and review processes. Inclusive language and accessibility provisions.

Has potential disadvantage for some groups been identified which require mitigation?

~~Yes~~/ No – (If there are significant impacts and issues identified a full Equality / Quality Impact Assessment (EQIA) must be undertaken.)

No significant disadvantages identified. Where risks exist (e.g., disability, pregnancy, carers), mitigation is provided through reasonable adjustments, risk assessments, and support services. If significant impacts are identified in practice, a full Equality / Quality Impact Assessment (EQIA) will be undertaken.

Appendix 2: Data Protection Impact Assessment

Screening questions to determine if a full DPIA is required. Guidance on handling personal and sensitive data.

Data protection is the fair and proper use of information about people. Before completing this form, please refer to the Data Protection Impact Assessment (DPIA) Guidance in the Information Governance (IG) section on the staff Intranet or contact the Data Protection Officer for support.

A DPIA is a process to help you identify and minimise the data protection risks. You must do a DPIA for processing that is likely to result in a high risk to individuals. You can use our screening checklist below to help you decide when to do one. If you have answered 'Yes' to any of the 10 screening questions, you must then carry out a full DPIA using the Stage 2 form, which is also available on the Intranet in the IG section.

Name of Policy:	Central East ICB Fire Safety Policy
Date of assessment:	08-03-2026
Screening undertaken by:	Kelly Taylor – Head of Corporate Support (HWE)

Stage 1 – DPIA form

please answer 'Yes' or 'No'

<ul style="list-style-type: none"> • Will the policy result in the processing of personal identifiable information / data? This includes information about living or deceased individuals, including their name, address postcode, email address, telephone number, payroll number etc. 	Yes / No
<ul style="list-style-type: none"> • Will the policy result in the processing of sensitive information / data? This includes for living or deceased individuals, including their physical health, mental health, sexuality, sexual orientation, religious belief, National Insurance No., political interest etc. 	Yes / No
<ul style="list-style-type: none"> • Will the policy involve the sharing of identifiers which are unique to an individual or household? e.g., Hospital Number, NHS Number, National Insurance Number, Payroll Number etc. 	Yes / No
<ul style="list-style-type: none"> • Will the policy result in the processing of pseudonymised information by organisations who have the key / ability to reidentify the information? Pseudonymised data - where all identifiers have been removed and replaced with alternative identifiers that do not identify any individual. Re-identification can only be achieved with knowledge of the re-identification key. Anonymised data - data where all identifiers have been removed and data left does not identify any patients. Re-identification is remotely possible, but very unlikely. 	Yes / No
<ul style="list-style-type: none"> • Will the policy result in organisations or people having access to information they do not currently have access to? 	Yes / No
<ul style="list-style-type: none"> • Will the policy result in an organisation using information it already holds or has access to, but for a different purpose? 	Yes / No
<ul style="list-style-type: none"> • Does the policy result in the use of technology which might be perceived as being privacy intruding? e.g., biometrics, facial recognition, CCTV, audio recording etc. 	Yes / No

<ul style="list-style-type: none">• Will the policy result in decisions being made or action being taken against individuals in ways which could have a significant impact on them? Including profiling and automated decision making. (This is automated processing of personal data to evaluate certain things about an individual i.e., diagnosis and then making a decision solely by automated means - without any human involvement)	Yes / No
<ul style="list-style-type: none">• Will the policy result in the collection of additional information about individuals in addition to what is already collected / held?	Yes / No
<ul style="list-style-type: none">• Will the policy require individuals to be contacted in ways which they may not be aware of and may find intrusive? e.g., personal email, text message etc.	Yes / No

Appendix 3: Personal Emergency Evacuation Plan (PEEP)

Personal Emergency Evacuation Plan (PEEP) Form

This plan is intended to be completed by the Manager in conjunction with the individual to agree what action will be taken in the event of an emergency. The information within this PEEP will be used to plan the safe evacuation of the named individual.

The information will also be used for monitoring purposes to ensure that Central (CE) ICB has adequate emergency plans in place.

Name of the individual this PEEP relates to		Job title /Department	
Email		Phone Number	
Name of Manager completing this form		Job title /Department	
Email		Phone Number	
CE ICB Premises this PEEP relates to		Date PEEP carried out	
1.	What disability or condition does the individual have that might make them more vulnerable in the event of a fire? Are there any other difficulties that should be considered?	Please detail here. Consider temporary, or permanent disabilities/conditions that affect mobility, hearing and vision.	
2.	Is the individual this PEEP relates to aware of the fire emergency procedures for the premises? Are they confident they know the primary and alternative routes at the premises?	If no, please ensure you identify the procedure to them, and that they are comfortable with it. Look at whether an alternative format such as braille or large print would assist an individual who is sight impaired.	
3.	Are the red manual call points in the building easily accessible to the individual in the premises? Would they be able to raise the alarm using these?	If no, are there alternative ways to raise the alarm? Please outline and special arrangements here. If you are unsure, please speak to the appointed person at the premises.	
4.	Is the individual able to hear the emergency alarm clearly at the premises?	If no, please outline special arrangements here, consider asking team members to assist and look at whether the building has deaf alerting system or similar? If you are unsure, please speak to the appointed person at the premises.	
5.	Is the individual able to distinguish signs and emergency information clearly within the premises?	If no, please outline special arrangements here. Consider whether an alternative format such as braille or large print would assist an individual who is sight impaired or ask team members to assist. If you are unsure, please speak to the Competent Person.	

<p>6.</p>	<p>Can the person exit the building <u>unaided</u> in a timely manner? Speak to the appointed person at your premises about evacuation times specific to the building.</p> <p>Once out of the building, can the individual make it to the assembly point <u>unaided</u> and safely?</p>	<p>If no, please use section 7 to detail how the individual would safely evacuate the building in an emergency and get to the assembly point.</p>
<p>7.</p>	<p>Please complete this section if NO was the answer to question 6. Please discuss and detail how the individual will safely exit the building and get to the assembly point in the event of an evacuation.</p> <p>Please discuss and detail plans for taking part in fire drills here also. If the individual is put at great risk by taking part in a planned fire drill, it may be necessary to include a method of reducing or removing the need to escape for a false alarm in this section.</p>	<p>Please outline special arrangements here. Consider who and how staff will assist and whether specialist equipment will be required (please list in section 9 also). Think about how many staff you want to enlist to ensure cover during periods of absence. Also think about whether another part of the building might be safer for the individual to work from. If you are unsure, please discuss with the appointed person for the premises or contact the Occupational Health Team.</p>
<p>8.</p>	<p>Are there refuge areas in your building? If so, does the individual know where they are located and what happens if someone is unable to get to them safely to assist?</p>	<p>If the building does not have refuge areas, mark as NA. If it does, please ensure the individual is aware of the location/s and understand what happens if someone cannot get to them safely to assist. If you are unsure, please speak to the appointed person for the premises.</p>
<p>9.</p>	<p>Should any staff require assistance during an evacuation, the extent of such assistance and the methods to be used must be identified in the table below. Colleagues required to assist in the evacuation must be nominated by the individual (after a discussion with them) and manager completing this form. Please note evacuation apparatus should only be operated by a trained member of staff and training status can be confirmed with the appointed person.</p> <p>Staff requiring assistance should wait until the stairway is clear to avoid congestion. When clear, commence the evacuation.</p>	

Name	Contact Number	Assistance required	Have you confirmed the named person is happy to assist and has provided consent to document their contact details here?	If applicable, have they been trained on the evacuation apparatus? Please provide the training date.
10.	Are there any issues to be resolved?	Please list here, and update and date once actions have been completed.		
<p>Managers sign off: (Please read and sign)</p> <ul style="list-style-type: none"> • Review and authorise the plan with the individual for whom the plan is required. • If the staff member doesn't need assistance, retain the form to provide confirmation that you've assessed their needs. • If the individual leaves their department for another or their manager changes within the CE ICB, it is the manager's responsibility to pass this PEEP to the new manager for revision. • The PEEP must be reviewed after an evacuation, annually, if circumstances change. This must be updated on page 4 this document. 				
Signature of the manager completing the PEEP			Signature of the individual the PEEP relates	
Date:			Date:	

Review of PEEP	
Date	Review / comments

DATA PROTECTION NOTICE

Personal information collected for the PEEP process will be used to fulfil CE ICB's obligations under Health and Safety policy and legislation. It will be retained in a secure location by the manager after completion until you leave the ICB. It may be shared where appropriate with those whom may be required to assist in the event of an evacuation. The document will also be shared with your new manager if a change takes place.