

RESIDENTIAL PERSONAL EMERGENCY EVACUATION PLAN (PEEP)

Fire Safety (Residential Evacuation Plans) (England) Regulations 2025 — in force 6 April 2026.

About this plan

A Residential PEEP is a tailored fire safety plan for residents in high-rise or higher-risk residential buildings whose ability to evacuate without assistance may be compromised — for example, due to a mobility, sensory or cognitive impairment, or a temporary condition such as pregnancy or a broken limb.

Participation is voluntary. The resident cannot be compelled to take part and may withdraw consent at any time.

This plan must be reviewed at least annually and whenever the resident's circumstances change.

Further guidance: gov.uk — search 'Residential PEEPs Factsheet'

Part A — Building & Responsible Person

Building name & address:	
Building height / storeys: <i>Circle one: 18m+ / 7+ storeys or 11m+ with simultaneous evacuation strategy</i>	
Evacuation strategy in place: <i>e.g. Stay Put / Simultaneous / Phased — from building fire risk assessment</i>	
Responsible Person (RP) — name & role:	
RP contact telephone & email:	
Local Fire and Rescue Authority:	
PEEP reference number (if used):	
Date completed:	
Date of next review:	

Part B — Resident Details

Resident's full name:	
Flat / unit number:	
Floor number:	
Resident's contact number:	
Representative details (if applicable): <i>A representative may act for residents under 18 (parent/guardian), or adults who cannot engage due to a cognitive condition (requires Lasting/Enduring Power of Attorney or Court of Protection order). Include: name, relationship, contact number, legal basis.</i>	

Part C — Consent

Obtain consent before completing any other part of this plan.
 Explain to the resident that refusing FRS information sharing does NOT mean the Fire and Rescue Service would not rescue them — it means FRS will not have advance information about their flat location or level of assistance needed.

Resident consents to participate in the Residential PEEP process	<input type="checkbox"/> Yes <input type="checkbox"/> No Date: _____
Resident explicitly consents to prescribed information being shared with the local Fire and Rescue Authority <i>Information shared: flat number, floor number, degree of assistance needed, whether an evacuation statement exists</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No Date: _____ Consent withdrawn on: _____

Part D — Person-Centred Fire Risk Assessment

This is a conversation with the resident to understand their specific risks.
 No medical records are required. Focus on whether the resident faces specific challenges following the building's standard evacuation instructions, and their ability to self-evacuate.

<p>Nature of impairment or condition:</p> <p><i>e.g. mobility / visual / hearing / cognitive / learning disability / temporary (broken limb, pregnancy). Permanent or temporary? If temporary, expected end date:</i></p>	
<p>How does this affect the resident's ability to evacuate?</p>	
<p>Can the resident self-evacuate without assistance?</p> <p><i>Include: ability to use stairs, raise the alarm, follow standard building instructions.</i></p>	
<p>How will the resident be alerted to a fire emergency?</p> <p><i>e.g. standard alarm / visual alarm / vibrating pager / notification by neighbour or carer</i></p>	
<p>Has the resident received the 'Instructions to Residents' in an accessible format?</p> <p><i>e.g. large print, audio, BSL, translated. If yes, specify format:</i></p>	
<p>Does the resident know where their assembly point / place of safety is?</p>	
<p>Any relevant fire safety risks within the flat?</p> <p><i>e.g. oxygen use, emollient creams, mobility scooter charging, smoking. Note any actions agreed:</i></p>	

Part E — Mitigating Measures

Record measures discussed and agreed. The RP must implement those that are reasonable and proportionate.

Note who bears the cost (RP / resident / all residents via service charge). If the measure falls to the resident and they decline to pay, record this — the measure does not have to be implemented.

Measures agreed and to be implemented: <i>For each measure include: what it is, target date for implementation, who bears the cost.</i>	
Measures discussed but not taken forward: <i>Include reason:</i>	
Volunteer support arranged? <i>e.g. neighbour, carer, family member. Include name, relationship, contact number, and confirmation they have agreed.</i>	
Any specialist equipment required: <i>Include type and location in building:</i>	

Part F — Emergency Evacuation Statement

The RP must use reasonable endeavours to agree this statement with the resident.

It must be in writing and a copy given to the resident. Keep it brief and clear — the resident must be able to recall and follow it in an emergency.

In the event of a fire alarm or fire, I will:

- 1. On hearing the alarm / being alerted:**
- 2. My immediate action (stay put / begin to evacuate):**
- 3. How I will leave the flat / building:**
- 4. Support I have arranged (volunteer / carer / FRS):**

5. Any equipment I will use:

6. Where I will go (assembly point / place of safety):

7. If my usual arrangement is unavailable, I will:

Statement agreed Statement not agreed — reason: _____

Copy provided to resident: Yes No — pending

Part G — Information for Fire and Rescue Authority

Only complete if the resident gave explicit consent in Part C.

This information must be concise — it will be used by FRS crews during an operational response.

Flat number:	
Floor number:	
Degree of assistance likely required:	<input type="checkbox"/> Can self-evacuate — may be slower or need prompting <input type="checkbox"/> Needs some guidance or physical assistance <input type="checkbox"/> Needs significant physical assistance to evacuate <input type="checkbox"/> Unable to evacuate without full FRS assistance
Brief additional note for FRS (keep concise):	
Emergency Evacuation Statement agreed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Format shared with FRS:	<input type="checkbox"/> Digital <input type="checkbox"/> Hard copy in secure information box <input type="checkbox"/> Awaiting FRS preference

Part H — Signatures

Resident / Representative

I confirm I have been involved in preparing this PEEP, I understand the Emergency Evacuation Statement, and I agree to inform the RP if my circumstances change.

Signature: _____

Name (print): _____

Date: _____

Responsible Person

I confirm this PEEP was completed in consultation with the resident, agreed measures are being implemented, and a copy of this plan has been provided to the resident.

Signature: _____

Name (print): _____

Role: _____

Date: _____

Part I — Review Record

Review triggers (at least one must apply): annual review due | resident's condition changes | significant building changes | after any incident or fire drill | at resident's request

Review date	Changes / outcome	Reviewed by	Next review due

