

Personal Emergency Evacuation Plans in High-Rise Residential Buildings – recommendations from the Grenfell Tower Inquiry Phase 1 report

Government consultation

This consultation begins on 8 June 2021

This consultation ends on 19 July 2021

About this consultation

To:

This consultation is open to the public and is targeted at individuals and groups likely to be impacted by, or representing the interests of those affected by the regulatory regime set out by the Regulatory Reform (Fire Safety) Order 2005, including but not limited to: residents of high-rise tower blocks and other persons lawfully on, or in the immediate vicinity of, said premises and who would be at risk from fire on the premises, 'Responsible Persons' including the building owners and managers, occupiers, or other persons in control of relevant premises; Fire safety professionals, and Enforcing Authorities.

We welcome responses from anyone else with an interest in, or experience of, the areas being consulted on.

The consultation relates to England only.

Duration: From 08/06/2021 to 19/07/2021

Enquiries (including Email: FireSafetyUnitconsultations@homeoffice.gov.uk

requests for the

paper in or

an alternative

format) to: Fire Safety Unit Consultations

Home Office, 2 Marsham Street,

Fry Building London

SW1P 4DF

How to respond:

Respondents can answer as many or as few questions as they wish. You do not have to comment on every section or respond to every question in each section but can focus on where you have relevant views and evidence to share. If you wish to respond to all questions, you do not have to complete the whole form at once.

Please send your response by 19 July 2021.

Please respond to the questions in this consultation online at: https://www.gov.uk/government/consultations/personal-emergency-evacuation-plans

Alternatively, you can send in electronic copies to: FireSafetyUnitconsultations@homeoffice.gov.uk; or,

Alternatively, you may send paper copies to:

Fire Safety Unit

Home Office, 2 Marsham Street,

Fry Building London

SW1P 4DF

Additional ways to

respond:

If you wish to submit other evidence, or a long-form response,

please do so by sending it to the email address or postal address

above.

Response paper: A response to this consultation will be published online at:

https://www.gov.uk/government/consultations/personal-

emergency-evacuation-plans

About you and your response

These first few questions in the consultation are asking about the capacity in which you are responding to the consultation and other information which will be used to support analysis and to help us to understand who is responding to this consultation and the context of their answers.

This section is voluntary; your details will be held securely according to the data protection legislation. More information on what data we are collecting, why and how it will be looked after can be found here: https://www.gov.uk/government/consultations/fire-safety.

We have not asked you for any personal data, however your opinions may include personal data and by responding electronically we will have your IP address and/or your email address. All personal data will be deleted after the response to the consultation has been published.

Every effort will be made to ensure individuals will not be identifiable in any reports or summaries of responses.

Q1: Please indicate whether you are responding as an individual or on behalf of an organisation.

- a) Individual, or
- b) On behalf of an organisation.

Q2: Please select in what capacity you are responding to this consultation. Please select any that apply.

- a) Resident An individual living in a high-rise residential building.
- b) Residential group for a high-rise building A collective body of those living in high-rise residential buildings.
- c) Other resident or residential group An individual or a collective body different than the two described above.
- d) Responsible Person One who has control over a premises to which the Fire Safety Order applies, defined by Article 3 of the Order.
- e) Duty-holder One on which any duty is placed by the Fire Safety Order as referred to in article 5(3) of the Order.
- f) Building owner for the purposes of this consultation, a person or persons, company, corporation, authority, commission, board, governmental entity, institution, owner, lessee, or any other person or entity that holds title to the relevant premises.
- g) Enforcing authority A body responsible for enforcing compliance with the Fire Safety Order, as referred to in article 25.
- h) Local authority An administrative body in local government.

- i) Construction company A company that undertakes construction projects.
- i) Property company A company that buys, sells and/or rents properties.
- k) Building Control Body A body responsible for ensuring compliance with the Building Regulations.
- l) Trade association A body representing businesses of a particular sector.
- m) Professional body An organisation that promotes, supports and protects a particular profession.
- n) Other Any individual or organisation not covered in a) m) above.

Q3: If you are responding on behalf of an organisation, please provide details of:

a) The name of the organisation you are representing

The Royal College of Occupational Therapists, Specialist Section in Housing

b) Your role

Co-opted Lead on Accessibility and Inclusive Design, RCOT Specialist Section in Housing

Please see summary below of RCOT and the Specialist Section's role

This consultation response was authored on behalf of the Royal College of Occupational Therapists (RCOT) by Jacquel Runnalls, the Co-opted Lead on Accessible and Inclusive Design within the RCOT Specialist Section for Housing. <u>Independent Living Services & Housing Solutions - RCOT</u>

<u>RCOT</u> is the professional body for occupational therapy practitioners and represents over 34,000 occupational therapists, support workers and students across the United Kingdom.

Occupational therapists are the only allied health professionals who routinely work across health, social care and housing settings. They are trained to work with people of all ages with a range of impairments including physical, sensory, cognitive, neurodiverse, mental health and learning disabilities, and to consider how their needs change and progress across their life-course.

The RCOT Specialist Section for Housing is a clinical interest group with approximately 300 members across the UK. One of its core aims is to build cross sector collaboration to ensure inclusive and accessible standards in housing and the built environment for older and disabled people, their families and support networks. Housing Occupational Therapists are employed within a variety of settings such as Local Authority and Housing Associations, and consider both the internal and external built environment. Through a person centred approach of assessment and observation of disabled and older people carrying out activities of daily living within their home and surrounding environment, housing occupational therapists gain an in-depth understanding into the barriers encountered, and lack of accessible and adaptable housing. This enables them to provide insight and advice on aspects such as adaptations and the design of housing and the built environment and in the context of this consultation, an understanding of the difficulties people might experience when trying to get out of a building in an emergency.

Questions

Q5: To what extent do you agree with proposal 1: We propose to require the Responsible Person to prepare a for every resident who self-identifies to them as unable to self-evacuate (subject to the resident's voluntary self-identification) and to do so in consultation with them?

Strongly	Tend to	Neither agree	Tend to	Strongly	Don't
agree	<mark>agree</mark>	nor disagree	disagree	disagree	know

Q6: If you wish, please explain your position (250 words).

We agree with the need to prepare a PEEP but the responsibility should **not** be placed wholly on residents to self-identify for a variety of reasons e.g. unaware of their requirement to do so, may not wish to disclose confidential information or fear of discrimination, may not be able to, and may not think they require a PEEP when they do, nor be aware of potential barriers that might present themselves in an emergency.

The RP must be obliged to have a proactive process to identify residents who may require assistance to evacuate. The process must be well-publicised in appropriate, accessible ways. In addition to other ways of identification, residents (and/or those assisting and advocating) should be asked to confirm their requirements at point of occupancy, particularly as turnover may be high. This should be after signing a tenancy/sale to avoid the potential for discrimination, and it should be reviewed on a regular basis subsequently.

There is currently no/little formal training or guidance on PEEPs for residential buildings. It is imperative that approved, government-led, free training and guidance be made available and developed in conjunction with relevant stakeholders and organisations including those representing disabled people/end users.

There should also be easy-to access systems set in place for reviewing, monitoring and enforcement of PEEPs and a process for complaints. The issue of cost is often referenced and there is concern that people will be discriminated against if they require equipment to assist evacuation etc. Therefore this issue should also be addressed.

(250/250 words)

Q7: To what extent do you agree with proposal 2: We propose to provide a PEEP template to assist the Responsible Person and the residents in completing the PEEP, and to support consistency at a national level?

	Neither agree nor disagree	Strongly disagree	Don't know

Q8: If you wish, please explain your position (250 words).

We agree with the proposal to provide a template to deliver consistency however it requires further development with relevant stakeholders and end users to ensure relevant it is fit for purpose and ensure additional/appropriate information is included and to enable it to be used across a range of building types and enable a degree of flexibility to move beyond the confines of the form where necessary. As many RP's or those preparing the PEEP will be unfamiliar with potential difficulties/barriers that (disabled) people experience, there should guidance notes to accompany the form.

Whilst consistency is welcomed, to avoid the risk of the forms becoming a tick box exercise and/or not evolving where necessary, they should be regularly reviewed and their effectiveness monitored so that changes can be made if required.

They should be available in plain English (and other languages) and available in alternative accessible formats, including easy read.

The RP, or appointed competent persons preparing the PEEP, should receive appropriate training and the publication of the template should be accompanied by Government approved, freely available training (as referenced in Q.6). This could include FAQ's.

(184/250 words)

Q9: To what extent do you agree with proposal 3: We propose to require the Responsible Person to complete and keep up to date information about residents in their building who would have difficulty self-evacuating in the event of a fire (and who have voluntarily self-identified as such), and to place it in an information box

on the premises to assist effective evacuation during a rescue by the Fire and Rescue Service?

Strongly agree	Tend to Agree	Neither agree nor disagree	Tend to Disagree		Don't know

Q10: If you wish, please explain your position (250 words).

We agree with the need to have relevant information available to those who need it, however have concerns around GDPR/confidentiality etc. We also have concerns about self-identification as per Q.6 above.

Information should be in a consistent format and must focus on what a person requires to evacuate only, not medical terminology (unless essential) including relevant access/equipment needs and potential risk of injury. It may also be helpful to include additional relevant details such as whether there are oxygen bottles in the dwelling.

The information must be secure, up to date and easily accessible in an emergency. Information provided is sensitive data so all those involved should have GDPR training and be aware of their duties to keep information provided secure. Information relating to the identification or location of specific individuals should be provided in a secure manner (?coded) agreed between the FRS and the Responsible Person.

Further guidance on the information content, associated security precautions, how/where it is provided etc is required and should be developed alongside other training/guidance mentioned above in Q6 & Q8.

N.B. Draft BS 8644 (currently out for public consultation) makes recommendations on the provision of digital information to the FRS. Therefore any guidance regarding communicating resident's evacuation requirements to the FRS, must also make reference to use of the digital space, and not be limited to the 'physical' information box

(226/250 words)

Q11: To what extent do you agree with proposal 4: We propose, in order to assist the Responsible Person and support consistency at a national level, to provide a template to capture the key information to be provided in the information box?

Strongly	Tend to	Neither agree	Tend to	Strongly	Don't
agree	Agree	nor disagree	Disagree	disagree	know

Q12: If you wish, please explain your position (250 words).

Whilst we agree with the proposal to use a pre-set formula for setting out the information in a consistent format for ease of use, the current template requires development with relevant stakeholders.

The information being passed on to the FRS must focus on the practical evacuation assistance required by individuals and include information on what should not be done. The form currently includes potentially unnecessary and identifiable medical information that is not linked to the evacuation requirements.

Further guidance on the information content and security precautions needed should be developed. This should include practical examples, such as a person's mobile phone number to enable direct communication with residents. Where a person does not have access to/is unable to use a phone, alternative means of communication may need to be arranged e.g. a family member or other method. Information should be set out in a way which takes account of differing situations e.g. a disabled single parent where both the parent and children need to be assisted in an evacuation. Questions such as these should be considered in further supporting guidance and FAQ's.

The FRS should receive comprehensive training in reading and understanding the document along with practical training on assisting residents who require assistance. Using a pre-set formula for setting out the information is the best way to get the information to the FRS in a timely fashion to allow them to carry out safe rescue when needed.

(230/250 words)

Q13: Do you think other information than in Annex A should be included in the PEEP template and if so, what? (250 words)

The form needs to be clear, concise and accessible, and available in multiple forms such as large print. It should adopt an easy read approach and avoid overly technical, complex language or anacronyms. The individual's evacuation requirements should be prioritised over medical descriptions of impairments or health conditions as these may not be relevant or understood.

It is also important for those providing evacuation assistance to understand what is not appropriate and what should not be attempted or reasons of risk of causing injury, or exacerbation of existing impairments or health conditions, but without necessarily having to know full details of the impairment or condition. This should be in a separate section.

The 'reason for difficulty in self-evacuating' should not be separate from the statement of impairment (disability). The former would be more usefully framed in terms of the barriers encountered by the resident and their ability to overcome these, or not e.g. 'unable to walk downstairs but can get on and off a chair' or 'cannot hear a fire alarm but can use a smartphone'.

The next review date should also be clearly identified and not fixed to accommodate a change in circumstances and/or considerations such as someone with a progressive condition.

Due to all of the above, it is essential that guidance notes (including examples, FAQs) are provided, in addition to further development of the relevant forms and training – all in liaison with relevant key stakeholders and end users/organisations. (241/250 words)

Q14: Do you think other information than in Annex B is necessary for the Fire and Rescue Service to undertake a rescue and should be included in the information box; if so, what (250 words)?

Similar responses to above – requires further development, guidance and training with relevant stakeholders.

The information given to the FRS is crucial to allow them to carry out the assisted evacuation and requires reviewing as stated. To use terminology such as 'hearing impaired' is not adequate, unhelpful and potentially meaningless. It should clearly set out what the specific considerations they need to take are e.g. ensuring use of a hearing aid, BSL/signage etc and the barriers a person will experience in evacuating. We would also query the wording "Brief summary of why assistance is required (e.g., cognitive impairment, brittle bones etc.)". This further exemplifies what has been said previously and is not appropriate or sufficient to assist the FRS in a timely, appropriate manner. It yet again focusses on a person's impairment, not what the barriers would be to self-evacuation e.g. unable to walk downstairs, or a brief description of assistance needed e.g. carrying down stairs..

Information on what should not be attempted must also be included in the information to the FRS, in addition to contact details.

In summary, the information asked for needs reviewing. Guidance notes and training will be vital to assist both the Responsible Person completing the information and the FRS in interpreting it.

Q15: How often should the PEEP be reviewed?

- a) 6 months,
- b) 12 months, or
- c) As soon as practicable if the resident indicates a change in circumstances to the Responsible Person.

Q16: How often should the information in the information box on the premises be updated?

- a) 6 months,
- b) 12 months, or
- c) As soon as practicable if the resident indicates a change in circumstances to the Responsible Person.

Q17: Do you have any further comments that you think would be important for policy officials to consider as part of this consultation? (400 words)

Review of the PEEPs should be at least every 12 months or reviewed earlier should any relevant circumstances change. The information box should be updated within a required time limit after this.

As stated throughout this response, it is our view that the proposed templates require further consultation and development and that additional supporting guidance and training is necessary to underpin the introduction of this requirement. We therefore strongly recommend that the Home Office convene a working group of relevant personnel including professionals with experience of devising PEEPs, organisations representing residents requiring assisted evacuation, to revise the draft templates and develop robust guidance (including FAQ's and examples) and training in this area. This should also include considerations to how to identify residents who require assistance, methods for review, flagging up a change in circumstances, how to store secure information appropriately, monitoring, compliance and enforcement, and a formalised easily accessible independent complaints process.

As stated previously, we do not agree with the proposal for self-identification.

The issue and concerns around cost being passed onto disabled residents is highlighted in the EIA, and it is imperative cost/resources are addressed as part of the outcome of this consultation. Who funds the PEEP process and/or if equipment or training is identified as needed to facilitate an evacuation ?If it is picked up in the blocks service charge this may lead to discrimination and hate crime e.g. other tenants may resent their service charge being increased to cover the cost of providing a PEEP for a disabled resident.

The height criterion attached to the need for a PEEP does not allow all disabled residents to be treated fairly. Any disabled person should expect to have a PEEP in place to assure their evacuation if needed in an emergency.

(293/400 words)

Q18: Do you have any comment on or data to support the impact assessment (250 words)?

Section D appears to dismiss Option 1 (PEEPS for all residents who ability to self-evacuate may be compromised and place their PEEPS in information box on premises) which aligns more closely with what we are proposing in our feedback, in favour of Option 2. The reasoning given for dismissing option 1 appears to follow text which has now been removed/greyed out (LGA's Fire Safety in Purpose Built Block of Flats) and the recently withdrawn PAS 79 -: 2 Fire risk assessment – Housing. Both of these were withdrawn due to the GTI proposals and threatened litigation so it is surprising that similar sentiments are accepted here in terms of lack of resources/personnel/knowledge of building and the residents etc.

The impact assessment provides no monetary quantification of compensation awards following successful legal action by disabled people for discrimination relating to service provision in the Equality Act 2010 in the event of not having a PEEP. The high band compensation is in fact £25,000 to £45,000.

It also only refers to Article 4 with no mention in A.2 of FSO articles 14 b) and 15 b) which already require RPs to ensure means of escape for all persons and the ability to move away from imminent danger. Legal requirements provide no 'exemption' for duties towards disabled people or exclude any 'general needs buildings' irrespective of height.

(222/250 words)

End of response.