

Emergency Action Plan

- Organization/Company Name: _____
- Address: _____
- Contact Information: _____

I. Purpose and Scope

- Purpose of the Emergency Action Plan (EAP):
- Scope of the EAP (types of emergencies covered):

II. Emergency Response Team

- Names and roles of emergency response team members
 1. _____
 2. _____
 3. _____
- Contact information for each team member
 1. _____
 2. _____
 3. _____

III. Emergency Contact Information

- Local emergency services (fire, police, medical):
- Nearest hospital or emergency medical facility:
- Utility companies (gas, electric, water):
- Other relevant contacts (building management, security):

IV. Evacuation Procedures

1. Evacuation Routes:

- Maps of evacuation routes and exits (Attached / Not Attached): _____
- Assembly points outside the building:

2. Evacuation Process:

- Procedures for evacuation:

- Special considerations for disabled individuals:

3. Accountability:

- Roll-call procedures at assembly points:

V. Emergency Procedures

1. Fire:

- Immediate actions (R.A.C.E. - Rescue, Alarm, Confine, Extinguish/Evacuate):

- Use of fire extinguishers: _____

2. Medical Emergency:

- First aid procedures:

- Use of Automated External Defibrillators (AEDs), if available:

3. Severe Weather:

- Procedures for sheltering in place (tornadoes, hurricanes):

4. Earthquake:

- Drop, cover, and hold procedures:

5. Chemical Spill or Hazardous Material Incident:

- Evacuation or shelter-in-place procedures:
- Decontamination procedures, if applicable:

6. Active Shooter or Violent Incident:

- Run, Hide, Fight procedures:
- Communication and notification procedures:

VI. Communication Plan

- Methods of communicating with employees during an emergency:
- Notification systems (alarms, public address system, text alerts):

VII. Training and Drills

- Schedule for emergency drills (fire, evacuation, lockdown):
- Training sessions for staff on emergency procedures:

VIII. Equipment and Resources

- Location of emergency equipment (fire extinguishers, first aid kits, AEDs):
- Maintenance schedule for emergency equipment:

IX. Plan Review and Maintenance

- Schedule for reviewing and updating the EAP:
- Record of changes and updates:

X. Appendices

- Maps of the facility and evacuation routes (Attached/Not Attached): _____
- Emergency contact list:

- Any additional resources or information relevant to the EAP:

Emergency Coordinator's Signature

- Name: _____
- Date: _____

Disclaimer: This Emergency Action Plan is a guideline and should be customized to fit the specific needs and circumstances of the organization or facility. Regular training and updates are essential to ensure the effectiveness of the plan.