

WORKPLACE EMERGENCY RESPONSE PLAN

Company/Organization Name

Enter company name

Plan Date / Revision

Enter date or revision

1. Emergency Contacts

List key contacts, phone numbers, and roles

e.g. Fire: 911, Security: xxx-xxx-xxxx

2. Emergency Procedures

A. Fire

Outline fire response procedures

B. Medical Emergency

Outline medical emergency procedures

C. Evacuation

Outline evacuation procedures

D. Other (Specify)

e.g. chemical spill, severe weather, etc.

3. Roles & Responsibilities

Assign specific roles (e.g. Evacuation Warden, First Aid Officer)

List team members and responsibilities

4. Emergency Equipment & Resources

Location & type of emergency equipment (e.g. AED, fire extinguishers)

Describe resources and locations

5. Meeting Points & Evacuation Routes

Describe primary and secondary assembly areas

List and describe meeting points

Evacuation routes

Describe or list evacuation routes

6. Training & Drills

Training schedule and requirements for staff

Describe training and drill frequency

7. Plan Review & Updates

Review dates, responsible persons, and update procedures

Describe plan review process