

EMERGENCY/FIRE DRILL CHECKLIST

DRILL INFORMATION

Name of Building/Facility _____

Building/Facility Address _____

Location of Drill (Specific floor/wing/etc) _____ Date of Drill ____ / ____ /20__

Time Drill Initiated ____:____ AM/PM Time All Occupants Vacated ____:____ AM/PM Elapsed Time _____ Min.

Drill Monitor Name: _____ Title/Position _____

Weather: TEMP: Cold / Warm / Hot WINDS: Calm / Breezy / Windy PRECIP: Sunny / Cloudy / Rain / Snow / Sleet

PRE DRILL ASSESSMENT

Evacuation routes posted Yes No

Evacuation signs are in good condition Yes No

Exits are clearly marked Yes No

Exit signs are properly illuminated Yes No

Exit doors operating properly Yes No

Egress routes free of obstructions Yes No

Egress routes properly lighted Yes No

COMMUNICATION

Method of Drill Activation:

Alarm Activation PA System

In-House Word of Mouth Other: _____

Drill preannounced Yes No

Fire department present for drill Yes No

Alarm monitoring company notified Yes No

Security notified Yes No N/A

FIRE CONTAINMENT

Doors and windows closed Yes No

Rooms checked prior to closing doors Yes No

Doors left unlocked Yes No

Fire extinguisher taken to location of fire Yes No

Door hold-open devices operated appropriately
 Yes No N/A

EVACUATION

All occupants participated and evacuated Yes No

Restrooms were checked for occupants Yes No

Evacuation was orderly Yes No

Visitors escorted and accounted for Yes No

Special needs persons accommodated Yes No

Elevators were used during evacuation Yes No

Overall response of occupants
 Satisfactory Unsatisfactory

Noise level of evacuation
 Satisfactory Unsatisfactory

Number of occupants evacuated

Visitors:_____ Staff:_____ Tenants:_____ TOTAL:_____

UTILITIES

Electrical appliances were turned off Yes No N/A

Lights were turned off Yes No N/A

HVAC units were shut down Yes No N/A

PLAN

Evacuation performed according to plan Yes No

Occupants met at designated meeting places according to the
plan Yes No

Designated meeting place(s) located at safe distances from
building Yes No

Fire drill/incident response team(s) responded according to
plan Yes No

Fire drill/incident response team(s) carried out assigned
duties Yes No

Fire department "mock" notified according to plan
 Yes No

FIRE ALARM SYSTEMS

Fire alarm clearly heard in all areas Yes No

Alarm monitoring company received alarm
 Yes No

Electro-magnetic locks operated appropriately
 Yes No N/A

Public address system clearly heard in all areas
 Yes No N/A

Elevators recalled to correct floor Yes No N/A

Any item receiving a "No" or "Unsatisfactory" is an item that the facility should work on to correct.

FIRE AND EMERGENCY EVACUATION DRILL OBJECTIVES

- Evaluate the effectiveness of the occupants abilities to evacuate a building
- Evaluate the effectiveness and adequateness of the fire and life safety evacuation plan
- Evaluate occupants ability to recognize the fire/evacuation alarm
- Determine whether the occupant takes appropriate actions upon hearing/seeing the evacuation/fire alarm
- Determine that the occupant begins the evacuation process in an acceptable manner and/or per plan
- Evaluate the occupants ability to provide assistance to visitors or individuals who are experiencing difficulty
- Evaluate the occupants ability to recognize and take appropriate actions when a means of egress is unsafe
- Ensure occupants report in at designated meeting places

RECORD KEEPING

At a minimum the following information is required to be collected during fire drills per the International Fire Code:

1. Identity of the person conducting the drill
2. Date and time of the drill
3. Notification method used
4. Staff members on duty and participating
5. Number of occupants evacuated
6. Special conditions simulated
7. Problems encountered
8. Time required to accomplish complete evacuation

DRILL TIMES

Drill may be held at unexpected times and under varying conditions to simulate the unusual conditions that occur in case of fire.