

DESTINY MANAGEMENT

Disaster/Severe Weather/Emergency Drill Evacuation Report

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| <ol style="list-style-type: none"> 1. Drills must be unannounced and occur at random according to the hours of operation. 2. All staff and clients must participate in each type of drill yearly. 3. Obtain input from staff and clients when analyzing the drill results. 4. Bomb threat drills require actual evacuation of the structure.
AFLs, Personal Care and Respite homes are not required to complete Bomb Threat drills. 5. The original drill report must be sent to the Risk Management / Safety Coordinator by the 5th of the following month. |
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Section I	Facility: <input type="checkbox"/> Bright Futures <input type="checkbox"/> Corporate/Heritage <input type="checkbox"/> Taylorsville Office <input type="checkbox"/> AFL _____		
	Type of Drill: <input type="checkbox"/> Natural Disaster <input type="checkbox"/> Bomb Threat <input type="checkbox"/> Threatening Situation		
	<input type="checkbox"/> Utility Failure <input type="checkbox"/> Medical Emergency		
	Date: month/day/year	<input type="checkbox"/> Scheduled Drill <input type="checkbox"/> Actual Emergency	
	Time Alarm sounded:	a.m. p.m.	Time Building Evacuated:
Assembly Location:			

Drills not completed within (3) minutes will be repeated within (7) days

		POINTS	YES	NO	
Section II	1	Did staff assist/direct individuals to the safe area? Did staff remain with participants until drill/emergency was over?	10		
	2	Was identified alarm used to alert participants of an emergency/drill?	10		
	3	Did at least one individual announce the nature of the emergency?	10		
	4	Did staff take a battery-operated/weather alert radio to the safe area to monitor weather report?	10		
	5	Was First Aid Kit and Emergency Medical Information taken to the safe area?	10		
	6	Did all individuals go to the safe area as indicated on the evacuation plan?	10		
	7	Did staff and clients know the location of the designated safe area?	10		
	8	Were all people present and accounted for during this drill? Use "Sign in /Sign Out" check sheet.	10		
	9	Were all participants evacuated to the designated safe area within three [3] minutes? * Note: Drills not completed within three [3] minutes must be repeated within 7 days.	10		
	10	Were there any obstacles in the identified primary and secondary evacuation routes?	10		
TOTAL SCORE					

If the score is less than 80, the drill will be repeated within 7 days.

Section III	Use this section to identify any problems or deficiencies experienced and measures to correct identified problems.
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Section IV	Participants - Staff/Other		
Participants - Clients			