

FIRE DRILL OBSERVATION & EVALUATION

Drill Date: ___/___/___ Time: _____ Center: _____

Scenario: _____

Drill Activity Level: Verbally Communicated Demonstrated & Timed

PASS
FAIL
N/A

COMMUNICATION

- Emergency phone number was called or simulated
- Alarm activated or simulated
- Staff alert and participating appropriately
- Fire alarm sounded and heard
- Visual alarm seen

LIFE SAFETY

- Smoke hoods donned or simulated
- Doors in area closed (place wet blanket/sheet at base of door)
- Smoke doors shut
- Halls/Corridors clear of all items
- Patients and staff accounted for

STAFF KNOWLEDGE

- Location of smoke hoods
- Location of fire extinguishers
- Location of alarm pull stations or how to activate phone system
- Knowledge of smoke compartments
- What is your fire plan (RACE)
- How to operate extinguisher (PASS)
- Evacuation equipment (i.e. Evacuation Chair, Paraslyde, etc.)
- Evacuation meeting location
- Evacuation routes
- Location of medical gas shut off valves
- Location of Fire Plan

