



# MONTHLY FIRE DRILL REPORT

Date of Fire Drill: \_\_\_\_\_

Shifts involved \_\_\_1<sup>st</sup> \_\_\_2<sup>nd</sup> \_\_\_3rd

Time Drill Conducted: \_\_\_\_\_

Location of Fire: \_\_\_\_\_

## ALARM PERFORMANCE

How/Why was the fire alarm sounded: \_\_\_ Manual Pull \_\_\_ Sprinkler System \_\_\_ Power Outage

How was drill initiated: \_\_\_ Fire alarm pull station \_\_\_ Smoke alarm

List specific location of fire alarm pull station/smoke alarm used: \_\_\_\_\_ What technique was used to represent/indicate fire (e.g., red cloth, sign, etc.) \_\_\_\_\_

Drill Type: \_\_\_ Audible Alarm \_\_\_ Coded/Silent Alarm

(Note: if alarm not audibly tested during drill, the alarm **must** be sounded the following morning)

Date Alarm Audibly tested (if not tested during drill): \_\_\_/\_\_\_/\_\_\_ Did all staff hear the alarm? \_\_\_ Yes \_\_\_ No

Did all fire emergency equipment function properly (fire doors, smoke dampers, etc.) \_\_\_ Yes \_\_\_ No

Did auto dispatch notification function correctly: \_\_\_ Yes \_\_\_ No What time did dispatch receive alarm: \_\_\_\_\_

## PERSONNEL PERFORMANCE (R.A.C.E)

### RESCUE

Were all the residents & visitors evacuated from the fire zone (i.e, were all areas secured): \_\_\_ Yes \_\_\_ No

Was there a proper/systematic search conducted: \_\_\_ Yes \_\_\_ No

Did staff account for all residents: \_\_\_ Yes \_\_\_ No

### ALARM

Who activated the alarm: \_\_\_\_\_

Was the alarm properly activated: \_\_\_ Yes \_\_\_ No

Did staff call the fire department: \_\_\_ Yes \_\_\_ No \_\_\_ N/A (Drill Only)

Was the alarm reset: \_\_\_ Yes \_\_\_ No \_\_\_ N/A (Coded Alarm)

### CONTAINMENT

Did staff close resident room doors: \_\_\_ Yes \_\_\_ No

Were corridor doors unobstructed: \_\_\_ Yes \_\_\_ No

Did all corridor doors latch properly: \_\_\_ Yes \_\_\_ No

### EXTINGUISHMENT/EVACUATION

Were proper fire extinguishers taken to fire area: \_\_\_ Yes \_\_\_ No

Did staff simulate using a fire extinguisher: \_\_\_ Yes \_\_\_ No

Did staff stay with evacuation residents: \_\_\_ Yes \_\_\_ No

If a "large" fire, were evacuation plans as outlines in "Fire Evacuation Procedure" followed: \_\_\_ Yes \_\_\_ No \_\_\_ N/A

How long did it take to secure/evacuate all areas: \_\_\_\_\_ minutes

### COMMENTS/SCENARIO:


Signature of Person Supervising Drill: \_\_\_\_\_ Title: \_\_\_\_\_

*\*A coded announcement may be used between 9PM & 6 AM instead of audible alarms. \*\* If actual fire, use official state forms and report all details of the fire.*