

Name of Building/Facility: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Building/Facility Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Building/Facility City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Time Initiated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time Occupants Vacated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Elapsed Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Drill Monitor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title/Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Weather:** Temp: Cold/Warm/Hot Winds: Calm/Breezy/Windy Precipitation: Sunny/Cloudy/Rain/Snow/Sleet

**PRE DRILL ASSESSMENT:**  **UTILITITES:**

Evacuation routes posted  Yes  No Electrical appliances were turned off  Yes  No  N/A

Evacuation signs are in good condition  Yes  No Lights were turned off  Yes  No  N/A

Exits are clearly marked  Yes  No HVAC units were shut down  Yes  No  N/A

Exit signs are properly illuminated  Yes  No

Exit doors are operating properly  Yes  No **PLAN:**

Egress routes free of obstructions  Yes  No Evacuation performed according to plan  Yes  No

Egress routes properly lighted  Yes  No Occupants met at designated place per plan  Yes  No

Meeting place at safe distance from building  Yes  No

**COMMUNICATION:** Drill/Response Team acted according to plan  Yes  No

Method of Drill Activation: Fire Dept (“mock”) notified according to plan  Yes  No

Alarm Activation  PA System  In-House Word of Mouth

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **FIRE ALARM SYSTEMS:**

Drill Preannounced  Yes  No Fire alarm clearly heard in all areas  Yes  No

Fire Department present for drill  Yes  No Alarm monitoring company received alarm  Yes  No

Alarm monitoring company notified  Yes  No Electromagnetic locks operated appropriately  Yes  No

Security notified  Yes  No Public Address system clearly heard in all areas  Yes  No  N/A

Elevators recalled to correct floor  Yes  No  N/A

**FIRE CONTAINMENT:**

Doors and windows closed  Yes  No **EVACUATION:**

Rooms checked prior to closing doors  Yes  No All occupants participated and evacuated  Yes  No

Doors left unlocked  Yes  No Restrooms checked for occupants  Yes  No

Fire extinguisher taken to location of fire  Yes  No Evacuation was orderly  Yes  No

Door hold-open devices operated appropriately Visitors escorted and accounted for  Yes  No

Yes  No  N/A Special needs persons accommodated  Yes  No

Elevators were used during evacuation  Yes  No

**Notes:**

Overall response of occupants  Satisfactory  Unsatisfactory

Noise level of evacuation  Satisfactory  Unsatisfactory

**Number of occupants evacuated:**

Visitors: \_\_\_\_\_\_\_\_\_\_ Staff: \_\_\_\_\_\_\_\_\_\_\_ Residents: \_\_\_\_\_\_\_\_\_\_

TOTAL: \_\_\_\_\_\_\_\_\_\_

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

**FIRE AND EVACUATION DRILL OBJECTIVES**

* Evaluate the effectiveness of the occupants abilities to evacuate the building
* Evaluate the effectiveness and adequacy of the written evacuation plan
* Evaluate the occupants’ ability to recognize the fire alarm
* Determine whether the occupants take appropriate actions upon hearing/seeing the fire alarm
* Determine that the occupants begin the evacuation plan in an appropriate manner and/or per the 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 a designated meeting places

**RECORD KEEPING**

The following information is required to be collected during evacuation 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. Employees on duty and participating
5. Number of occupants evacuated
6. Special conditions simulated
7. Problems encountered
8. Weather conditions when occupants evacuated
9. Time required to accomplish complete evacuation

**ALARM ACTIVATION**

Where a fire alarm system is provided, emergency evacuation drills shall be initiated by activating the fire alarm system.

**DRILL TIMES**

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

**TABLE 405.2 – Fire and Evacuation Drill Frequency and Participation**

|  |  |  |
| --- | --- | --- |
| **Group or Occupancy** | **Frequency** | **Participation** |
| Group A | Quarterly | Employees |
| Group B b | Annually | All Occupants |
| Group B b,c (Ambulatory care facilities) | Annually | Employees |
| Group B b (Clinic, outpatient) | Annually | Employees |
| Group E | Monthly a | All Occupants |
| Group F | Annually | Employees |
| Group I -1 | Semiannually on each shift | All Occupants |
| Group I -2 | Quarterly on each shift a | Employees |
| Group I -3 | Quarterly on each shift a | Employees |
| Group I -4 | Monthly on each shift a | All Occupants |
| Group R -1 | Quarterly on each shift | Employees |
| Group R -2 d | Four annually | All Occupants |
| Group R-4 | Semiannually on each shift a | All Occupants |

1. In severe climates, the *fire code official* shall have the authority to modify the emergency evacuation drill frequency
2. Emergency evacuation drills are required in Group B buildings having an *occupant load* of 500 or more persons or more than 100 persons above or below the *lowest level of discharge*.
3. Emergency evacuation drills are required in ambulatory care facilities in accordance with Section 403.3
4. Emergency evacuation drills in Group R-2 college and university buildings shall be in accordance with Section 403.10.2.1. Other Group R-2 occupancies shall be in accordance with Section 403.10.2.2.