



EXAMPLE FORM

Emergency Practices

Boarding Home Operators may use this form or their own form to document emergency practices including evacuation, sheltering in place, and lock-down drills.

Directions: To complete this form, the designee documents the dates drills were performed, the exit times, and the dates that smoke detectors and carbon monoxide detectors were inspected. Keep the completed form onsite for 3 years.

Fire Drill: Evacuating the residents to a designated safe area in an emergency such as a fire. The residents must be able to safely exit the building within three minutes. You must practice a fire drill every month.

Sheltering/Severe Weather: Taking shelter within the center to temporarily protect residents and staff from situations, such as a tornado. Sheltering can also be used when an endangering person is in the area, though not on the premises.

Fire Extinguishers

Location of Fire Extinguishers:

Relocation Site

Relocation Site for Residents and Staff after Evacuating Operation:

Sheltering/Severe Weather Drills

Month	Date and Time	Staff Initials	Shelter/Exit Time S = Shelter SW = Severe Weather
January			
February			
March			
April			
May			
June			
July			
August			
September			
October			
November			
December			

Evacuation Plan Posted? YES NO

Visual Smoke Detector for hearing impaired? YES NO

Written Evacuation Plan? YES NO

Staff Trained Date(s) _____

Residents Trained Date(s) _____

Fire Drills

Month	Date and Time	Staff Initials	Exit Time
January			
February			
March			
April			
May			
June			
July			
August			
September			
October			
November			
December			

Carbon Monoxide (CO) Alarm Detector, Smoke Detector Test, and Fire Extinguisher Check

Month	CO Alarm Detector Test Date	Smoke Detector Test Date	Fire Extinguisher
January			
February			
March			
April			
May			
June			
July			
August			
September			
October			
November			
December			

First Aid Kit

Location of First Aid Kit:

Most Recent Operation Inspections

Fire Extinguisher:	Fire Alarm:	HVAC:	Gas:	Fireplace:
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Indicate N/A if Not Applicable. Do not leave blank.