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| Fire and Evacuation Exercise Record |
| Capital Development Guidelines – Series 7, Fire Risk Management August 2013 |
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| **Address** |  |
| **Date of evacuation** |   |
| **Recorded by** |  |

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| Staff involved | Position | Role during exercise |
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| Resident name | Observed response / effect on resident |
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|  |  |
| Exercise scenario |
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| Sequence of events | Comments |
| Alarm activated (time) | 00:00 |  |
| Staff respond |  |  |
| Staff verify emergency |  |  |
| Emergency services notified |  |  |
| Evacuation begins |  |  |
| Staff check all areas |  |  |
| All people at assembly point |  |  |
| All people accounted for |  |  |
| Situation report given to emergency services |  |  |
| Time exercise completed | 00:00 |  |
| Time taken to complete evacuation | 00:00 |  |
| Emergency response checklist | Yes | No |
| Where all occupants alerted when the emergency started? |  |  |
| Was the alarm activated? *(if appropriate for the scenario)* |  |  |
| Did staff follow proper procedures for the scenario? |  |  |
| Was the emergency confined as per Fire Orders? |  |  |
| Were emergency services promptly called? *(simulated)* |  |  |
| Were all areas of the house searched? |  |  |
| Did staff wear emergency identification? |  |  |
| Did occupants evacuate methodically? |  |  |
| Were mobility impaired people evacuated? |  |  |
| Did anyone refuse to participate or refuse to follow instructions? |  |  |
| Were designated exits used? |  |  |
| Did all occupants go to and stay at the designated assembly point? |  |  |
| Were all occupants accounted for? |  |  |
| Did anyone re-enter the building before the all-clear was given? |  |  |
| Were emergency services liaised with? *(simulated)* |  |  |
| Were emergency services provided with correct information? *(simulated)* |  |  |
| Emergency response comments |
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| **Debrief** |
| Difficulties during exercise |  |
| Suggested actions |  |
| Comments on exercise |  |

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