

Nananom Assisted Living

Evacuation Drill

Date Drill Conducted: _____

Start Time: _____ End Time: _____

Total Time of Drill: _____ Minutes: _____ Seconds: _____

Morning Drill () Afternoon Drill () Night Drill () Staff Drill () Resident Drill ()

Resident's names:

- 1. _____ Full Assist () 2/A () 1/A () W/C () N/A Per MD Order ()
- 2. _____ Full Assist () 2/A () 1/A () W/C () N/A Per MD Order ()
- 3. _____ Full Assist () 2/A () 1/A () W/C () N/A Per MD Order ()

Exempt to participate per MD order. (May cause physical harm.)

- 1. _____
- 2. _____
- 3. _____

Problems Encountered: _____

Solution: _____

Employees Participating in the Drill:

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

Drill Coordinated by: _____
Manager/Designee