



# Calgary Progressive Lifestyles Foundation

Providing Services for Citizens with DisAbilities

## Home Fire / Safety Drill

### Personal Information:

Individual: \_\_\_\_\_

Address: \_\_\_\_\_ Date: \_\_\_\_\_

Time of Drill: \_\_\_\_\_ Time to Evacuate: \_\_\_\_\_

Support worker participating: \_\_\_\_\_

- 1) Was the smoke detector activated?  
yes no
- 2) Was the location of the fire indicated?  
yes no
- 3) Were the exit points indicated?  
yes no
- 4) Was 911 contacted (pretend to have called)?  
yes no
- 5) Were all windows and doors closed?  
yes no
- 6) Was the personal information sheet taken and later returned to the front / back entrance?  
yes no
- 7) Did everyone get out safely?  
yes no
- 8) Was a head count taken outside and upon returning to the house?  
yes no

Meeting point: \_\_\_\_\_ Natural supports: \_\_\_\_\_

Date smoke detectors / carbon monoxide alarms checked: \_\_\_\_\_

Date fire extinguisher(s) was last maintained: \_\_\_\_\_

Evacuation plan posted?  yes  no Where? \_\_\_\_\_

Comments: \_\_\_\_\_

Support Worker signature: \_\_\_\_\_

Case Manager: \_\_\_\_\_