School Drill Documentation Form

<table>
<thead>
<tr>
<th>Type of Drill</th>
<th>Number/Schedule</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fire</td>
<td>Five – Three drills must be completed by December 1</td>
</tr>
<tr>
<td>Tornado</td>
<td>Two – One drill must be completed in March</td>
</tr>
<tr>
<td>Safety/Security</td>
<td>Three – One drill must be completed prior to December 1 and one after January 1</td>
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<tr>
<td></td>
<td>• One drill shall include security measures that are appropriate to an emergency such as the release of a hazardous material.</td>
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<td></td>
<td>• One drill shall include security measures of a potentially dangerous individual on or near the school premises.</td>
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<td></td>
<td>• Seek input from the administration of the school and local public safety on the nature of the drill.</td>
</tr>
</tbody>
</table>

Note - At least one of the drills must be conducted during a lunch or recess period, or at another time when students are gathered but not in classrooms.

School: Early Childhood Center
Principal: Kim McLean
Date of drill: 3/23/2022 Number of students: 159 Number of staff: 51
Time initiated: 11:00 AM Time concluded: 11:07 AM

Situation at Start of the Drill [Check the appropriate box]
- [ ] Before school
- [x] During class time
- [ ] Passing time
- [ ] Recess
- [ ] Lunch time
- [ ] Assembly
- [ ] After school
- [ ] Other:

Remarks:

This report is for:
[circle number next to applicable drill]
Fire drill number 1 2 3 4 5 for the 2021/2022 school year
Tornado drill number 1 2 for the 2021/2022 school year
Safety/Security drill number 1 2 3 for the 2021/2022 school year

Name of person conducting drill: Teresa Robinson
Title of person conducting drill: Head Start Nurse
Signature or person conducting drill: ___________________________ Date: 3/23/2022

If the drill was coordinated with agencies such as law enforcement, fire department, or emergency management, list the agency, official's name, and title.

Agency: ___________________________ Name: ___________________________ Title: ___________________________
Agency: ___________________________ Name: ___________________________ Title: ___________________________
Agency: ___________________________ Name: ___________________________ Title: ___________________________

Must post on the school's website within 30 days after completing the drill.
The form must be maintained on the school website for at least three years.
# School Drill Observation Form

## Problems Encountered (Check all that apply)

- Congestion in hallways
- Alarm not heard
- Students unsure of proper procedures
- Staff unsure of proper procedures
- Use of personal technologies by students
- Use of personal technologies by staff
- Unable to lock doors
- Windows not covered
- Windows left open
- Doors left open
- Difficulties with evacuation of students or staff with disabilities
- Staff and adults unaccounted for
- Staff not serious about drill
- Students unaccounted for
- Radio communication problems
- Network/computer problems
- Weather-related problems
- Noise impedes communications
- Students not out of sight (safety/security drill)
- Long time to evacuate building
- Students not serious about drill
- Frightened students (safety/security drill)
- Improper or unavailable supplies
- Confusion
- Doors or exits blocked
- Transportation issues
- Interagency communication issues
- Incident command problems
- Other: __________________________

## Weather Conditions

- Clear
- **Cloudy**
- Raining
- Rain and wind
- **Windy**
- Snow/sleet
- Hot (above 80 degrees)
- **Cold (40 to 10 degrees)**

## Plans for Improvement

- Additional staff training
- Additional student training
- Address need for additional equipment
- Improved emergency supplies
- Cooperative planning with responders
- Revised emergency procedures
- Improved communication
- **Other:** Make sure staff has walkie-talkie in closet with them

## Additional Comments

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