Residential Facility
5122-30-12 Safety
Evacuation Drill Tally Form

Facility Name	☐Initial ☐Renewal License #_____
Address (Street)	Address (City, State)
Current # of Residents	Current # of Household Members
Survey Date	Lead Surveyor

5122-30-12 Safety: (J) Each facility shall hold and provide documentation of an evacuation drill at least quarterly on each shift for all staff and residents. Drills shall be conducted at different and varying times of day and night and shall be conducted utilizing different exit routes. **Quarters: 1st: Jan-Mar; 2nd April-June: 3rd July-Sept and 4th-Oct to Dec**

Date	Quarter	Route	Start Time	End Time	1st Shift	2nd Shift	3rd Shift	Number of Residents	Number of Staff

Notes: