飜	Washington State Department of Social & Health Services						
Transforming lives							

Adult Family Home (AFH) Emergency Evacuation Drill

Transforming lives	E	mergency Evacuation Drill (WAC 388-76-10860 – 10905)											
DATE OF DRILL	TYPE OF D	DRILL											
Full evacuation (annually – All residents must participate)Partial evacuation (every 60 days; resident participation at least once each calendar year)													
			END TIM	IE	AM	LENG ⁻ DRILL		DDED TIME DR REFUSAL	TOTAL LENGTH OF DRILL =				
NAME(S) OF STAFF PARTICIPATING IN DRILL													
RESIDENT'S NAME		¹ RESIDENT'S EVACUATION CAPABILITY LEVEL			RESIDENT PARTICIPATION								
		INDEPENDENT	ASSISTA REQUI		YES	NO, NOT HOME		NO; REFUSED	TIM	TIME NEEDED			
]									
]									
]									
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]									
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² Smoke Detectors					Pire Extinguishers EQUIPMENT CHECK: LOCATION(S)								
EQUIPMENT CHECK:	LOCAT	FION(S)			EQUIPMEN	VI CH	ECK:	LOCATIO	N(5)				
Hardwired: Yes No					SERVICE DUE DATE								
Audible throughout home:				☐ Expired? ☐ Replaced? ☐ OK									
COMMENTS													

NAME OF AFH / LICENSEE

This is a sample provided for convenience.

While 388-76-10900 requires homes to document evacuation drills, use of this sample is optional.

¹ Documentation on log not required, but provider is required to identify each resident's level of evacuation on preliminary service plan and negotiated care plan. See WAC 388-76-10870.

² Documentation on log not required, but provider is required to ensure all fire extinguishers are inspected and serviced annually, and all smoke detectors are maintained and in working condition. See WAC 388-76-10805 and 388-76-10810.