

GOSH Training

How to report an evacuation and
emergency or drill

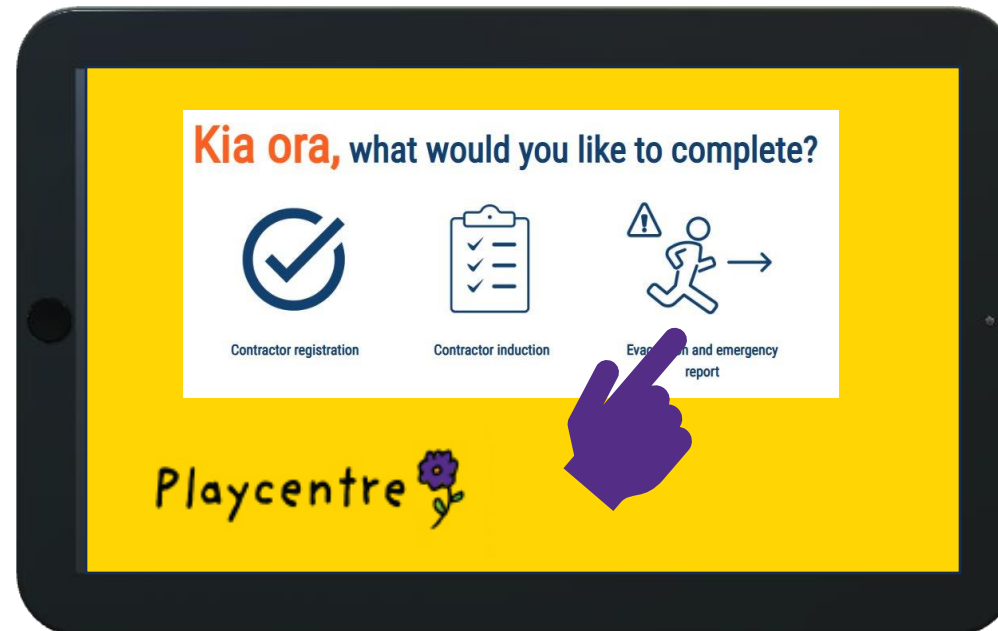
*Welcome to
our Village*

Playcentre 

Step 1. Select **Complete...**



Step 2. Select **Evacuation and emergency report**



Step 3. Report an evacuation at a Playcentre

Report on an evacuation

Region *

LNI - Lower North Island x ▾

Playcentre/Centre *

Haumoana Playcentre x ▾

Drill Type

-Select- ▾

Is this a notifiable evacuation drill?

☐ Yes ☐ No

Address of the building

Procedures

Have parents/caregivers been informed about emergency safety procedures?

☐ Yes ☐ No ☐ N/A

Were emergency services warned in advance?

☐ Yes ☐ No ☐ N/A

Were relevant evacuation notices displayed correctly?

☐ Yes ☐ No ☐ N/A

Was the evacuation alarm/method of alerting occupants clearly heard in all areas of the building?

☐ Yes ☐ No ☐ N/A

Were staff, contractors and visitors familiar with the evacuation process?

☐ Yes ☐ No ☐ N/A

Were all children and staff familiar with both primary and secondary escape routes?

☐ Yes ☐ No ☐ N/A

Drill Type

-Select- ▾

Fire evacuation drill

Tsunami drill

Earthquake evacuation drill



Lock Down drill

ShakeOut drill

Shelter in place

Step 4. Fill in the details

Enter your
centre email

| | |
|---|--|
| <p>Your name</p> <input type="text"/> | <p>Was the correct Assembly Point / Safe Place used?</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A</p> |
| <p>Email</p> <input type="text"/>  | <p>Was the 111 call actually made, or role-played?</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A</p> |
| <p>Contact number</p> <input type="text"/> | <p>Was the roll call (or equivalent) carried out?</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A</p> |
| <p>Date of the evacuation drill</p> <input type="text" value="dd-MM-yy"/>  | <p>Were systems in place to assist anyone who could not self-evacuate and if so, did the systems function?</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A</p> |
| <p>Time at the beginning of the drill (eg 2.45pm)</p> <input type="text" value="16:42p.m."/> | <p>Did any injuries occur during this trial evacuation?</p> <p><input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="radio"/> N/A</p> |
| <p>Please note:</p> <p>The drill is complete when everyone is clear of the building and accounted for.</p> | <p>Were all exit ways clear?</p> <p><input type="radio"/> Yes <input type="radio"/> No</p> <p><input type="radio"/> N/A</p> |
| <p>Total time taken to complete the drill (Minutes/Seconds)</p> <input type="text"/> | <p>Were 'FIRE ACTION NOTICES' in place?</p> <p><input type="radio"/> Yes <input type="radio"/> No</p> |

Step 5. Complete and **Submit**

General comments

Date of the next drill

dd-MM-yy

☐ Yes ☐ No

☐ N/A

Did any equipment to assist with the evacuation work as intended?

☐ Yes ☐ No ☐ N/A

Occupants accounted for or building determined to be clear in accordance with the evacuation scheme?

☐ Yes ☐ No

☐ N/A

When was the last training session for permanent occupants held?

dd-MM-yy

Additional comments.

Contact person signature

Draw your signature [Clear]

☐ Tick this box if you would like to speak to someone about this trial.

Submit

Reset