## SEVERE WEATHER DRILL RECORD

Name	-
Service/Goal (as written in ISP)	
Guidelines	

date	time	Time taken to go to safe area	Topics reviewed and time spent

## SEVERE WEATHER DRILL ASSESSMENT

Was drill announced? YES	NO
What was the person's response to the alarm?	
-	
What assistance from staff was required?	
What safe area was used?	
Did the person indicate awareness of safe area?	YES NO
Any comments or suggestions for improvement?	

## . Staff signature

.