

Emergency Evacuation Debrief

Type of Evacuation: Planned Drill False Alarm Real Event _____

Time and Date:

Faculty/Department(s):

Building No:

Incident Commander:

Building Marshals:

.....

Pre Evacuation Checklist (for scheduled drills)	Yes	No	
Consulted with heads of department to organise drill			
Advised OHS Officer			
Advised Security			
Advised Maintenance Coordinator			
Evacuation Sequence	Time		
Alarm raised			
Marshal(s) response			
Marshal check of floor or area			
Evacuation commenced			
Marshals report floor or area clear			
Persons with disabilities accounted for			
Arrive at assembly area, safe place			
Marshals check personnel present (where appropriate)			
Evacuation complete			
Exercise terminated			
Debrief – to be completed to address issues arising from drill.			
Issue	Suggested Corrective Action	Whom	Completed

Once completed please forward a copy to the OHS Unit and the appropriate Joint Health and Safety Committee.