

## Checklist

PATIENT SAFETY & RISK SOLUTIONS

## Fire Response in Senior Care Facilities

Fire and smoke can cause significant amounts of damage as well as potential injuries and deaths in senior care facilities. Several elements can contribute to the spread of fires as well as emit deadly smoke into the air, including ample oxygen supplies, plastics, volatile chemicals, and drugs.

In certain occupancies, many residents cannot leave their beds because of their physical condition or medical status. Senior care facilities are built to protect all residents, including those who are not capable of self-preservation. Building construction codes, automatic detection systems, fire suppression systems, and training for staff members are all essential elements that need to be in place to prevent fires. Additionally, knowing how to respond to a fire and/or smoke condition is paramount to avoid serious injuries and potentially death to residents, visitors, and staff members.

Senior care facilities should have in place or develop comprehensive fire response plans or fire safety and evacuation plans that detail specific responsibilities and protocols. The following checklist contains numerous critical aspects that should be included in these plans. Facility leaders and staff members can use this tool to help assess their planning and response efforts.

	Yes	No
Fire Response Plan		
Has the facility established a fire response plan or fire safety and evacuation plan?		
Does the plan identify a predesignated emergency operations center and back- up location?		
Does the plan specify who meets the responding agency(ies) and where?		

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	Yes	No
Fire Response Plan (continued)		
Does the plan include prewritten approval from the fire marshal for silencing the fire alarm once the situation is deemed "under control" by the responding agency(ies)?		
Does the plan include removing all items from the corridors?		
Does the plan include the fire marshal/fire department conducting regularly scheduled tours of the senior care facility and observing fire drills?		
Does the plan specify sources of ignition that should be removed from residents receiving oxygen therapy?		
Does the plan clearly identify all areas in which smoking is prohibited?		
Does the plan define general actions, such as stay low to avoid inhaling smoke and products of combustion, feel closed doors for heat, what to do if there is more smoke on the other side of the fire/smoke barrier door(s)?		
Does the plan include specific procedures for:		
<ul> <li>People in the immediate area of the fire versus those away from the fire?</li> </ul>		
Fire response team members?		
<ul> <li>Healthcare providers, dental providers, and volunteers?</li> </ul>		
Handling handicapped individuals?		
Boiler room safety (if applicable)?		
<ul> <li>Mechanical room safety (if applicable)?</li> </ul>		
<ul><li>Electrical room safety (if applicable)?</li></ul>		
<ul><li>Loading/storage area safety?</li></ul>		
Interim Life Safety Measures?		
Is the plan approved by the facility's nursing home administrator or executive director?		

	Yes	No
Fire Response Plan (continued)		
Is the plan reviewed by the environment-of-care or safety committee on an annual basis?		
Does the facility contact the local fire marshal, local fire chief, state fire marshal, and state department of health to review the plan on an annual basis?		
Has the facility ensured all staff members (including healthcare providers, nurse practitioners, physician assistants, dentists, and volunteers) are trained and aware of the procedures contained in the fire response plan?		
Fire Drills		
Are fire drills conducted to ensure all staff members know what to do in case of fire and are aware of primary and secondary exit routes?		
Do staff members understand the terms RACE (Rescue, Alarm, Confine/Contain, Extinguish/Evacuate) and PASS (Pull the pin, Aim at the base of the fire, Squeeze the handles, Sweep back and forth at the base of the fire)?		
Are fire drills conducted on every shift once each quarter on a rotating basis?		
Do the adjacent floors/smoke compartments clear the corridors as part of the drill?		
Are the adjacent floors/smoke compartments observed during a fire drill?		
Are kitchen fire drills conducted annually?		
Staff Responsibilities and Training		
Do staff members recognize the need for immediate action in case of a smoke condition or fire to preserve resident safety?		
Do staff members know what should be done to ensure residents remain safe in case of a fire?		
Do staff members know where the nearest fire alarm pull stations are located in the facility and how to activate them?		

	Yes	No
Staff Responsibilities and Training (continued)		
Do staff members know how to move residents quickly and safely?		
If Med Sleds or similar resident evacuation devices are used, have staff members been trained to use them?		
Are staff members trained to move residents in the immediate area of the fire horizontally into the next smoke compartment? (Vertical movement of residents into a fire stairwell is possible but labor intensive.)		
Are staff members trained to not use an elevator in a fire emergency?		
If a fire or smoke condition occurs, are staff members trained to call the designated station for the facility to report where the fire is, what is burning, and whether any residents are trapped (critical information for the fire department)?		
Do staff members follow RACE and PASS protocols if a small fire occurs?		
If any appliance, tool, or piece of medical equipment generates sparks, smoke, or unusual odors, do staff members follow the RACE protocol and unplug the piece of equipment if possible?		
Once the condition is mitigated, do staff members notify risk management and ensure the piece of equipment is replaced?		
If any appliance, tool, or medical equipment results in a resident or staff injury or burn, is the device sequestered?		
Are staff members extremely cautious in areas where fires could be more likely to occur, especially kitchens, dining facilities, and laundry rooms?		
Do staff members close doors and windows and shut off portable fans, vents, hoods, and heating/air conditioning units in the immediate area of the fire or smoke condition?		
Are staff members taught to place wet towels around door openings, chute openings, and elevator doors to limit smoke travel if needed?		

	Yes	No
Staff Responsibilities and Training (continued)		
Does the facility have an overhead or other type of paging system used for "Code Red" or "Code Fire" announcements?		
Are designated staff members trained to announce fire and smoke situations, including the location of the emergency?		
Are fire announcements repeated three times?		
Extinguishers		
Are all staff members trained on how to operate fire extinguishers at orientation and during annual training?		
Have staff members been trained to only use a fire extinguisher if a fire is small and to maintain their back to the exit?		
Are staff members knowledgeable about the different types of extinguishers used within the facility? (These may include pressurized water, carbon dioxide, multi-purpose dry chemical, and wet chemical.)		
Have staff members been trained on the classifications of fire (Class A, Class B, Class C, Class D, and Class K), and are they aware that extinguishers are labeled based on the class of fire they are designed to extinguish?		
When training staff members on using extinguishers, is the PASS protocol included?		

## **Resources**

- National Fire Protection Association: Codes and Standards (Applicable Standards 10, 99, 101, 80, 10, 25, 72, 14, 15, 70E)
- U.S. Department of Labor: Healthcare Wide Hazards, Fire

Checklist: Fire Response Planning in Senior Care Facilities

6

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