

# Fire Safety and Emergency Procedures

*Including mandatory evacuation drills*



*caregivers*

PREVENT  PROTECT  PROMOTE  
*abuse/neglect clients dignity*

## FACILITATOR GUIDE

Developed by:

**University of Wisconsin Oshkosh**

Center for Community Development, Engagement and Training (CCDET)

**Wisconsin Department of Health Services**

Division of Quality Assurance

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NOTE: This is not the department-approved training on Fire Safety required under DHS 83.20 for CBRFs; however, this training can be used as a supplement to that training.

# Learning Points

These are the major goals for this training:

- Learn more about fire and flammable materials
- Identify special needs of those in your care during an emergency
- Review the steps for discharging a fire extinguisher
- Understand the steps for responding to a fire emergency

## Introduction

There are many reasons why caregivers must be aware of fire safety rules and emergency procedures. Wisconsin laws and federal regulations often outline facility requirements for keeping clients and residents safe in the event of a fire or other emergency. Caregivers who provide care in a client's home should also be aware of fire hazards and safe procedures. Fragile elders and people with developmental disabilities may be unable to respond to emergencies independently. It is the job of the facility/employer and the caregiver to help assure their safety.

*[This training recognizes that facilitators and attendees may represent any DQA-regulated healthcare, homecare or residential care provider and may use different terms to refer to their provider type; to the individuals receiving care, treatment, or services; and to the individuals providing care, treatment, or services.]*

- *For this training, the term “provider” or “provider type” is used to refer to any DQA-regulated provider, entity, or facility.*
- *The terms “client” or “resident” are used to represent any person receiving care, treatment and/or services from any provider in a facility or in their own home.*
- *The terms “caregiver” or “staff” are used to represent any individual employed by or under contract with the provider.*

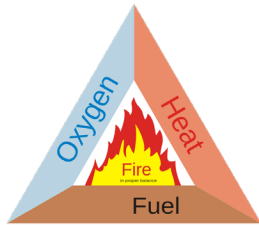
*Facilitators may wish to change the language to be appropriate to the setting in which they are presenting this information.]*

What do you believe might be the major cause of fires in healthcare facilities?

What do you believe might be the major cause of fires in a client's home?

*[Ask participants to offer responses. You may jot them down on a flip chart. The idea is to introduce participants to the topic and help them shift away from other thoughts, distractions. The main source of fires in healthcare facilities is kitchen/cooking related. At one time, it was smoking/smoking materials. That has changed with the Wisconsin law (2010) banning smoking indoors in public facilities, including healthcare facilities. The main source of fires in a client's home is also cooking related followed by heating related.]*

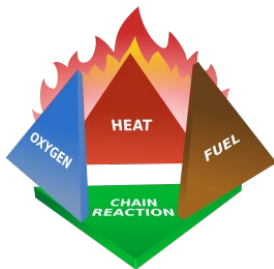
# What Causes Fire



The “fire triangle” is made up of the three components needed to produce fire:

- Fuel (something that will burn)
- Heat (enough to make the fuel burn)
- Oxygen (air)

All three components must be present to have a fire. Fire will burn until one or more of the components are removed. Traditional fire extinguishing methods involve removing the fuel, heat, or oxygen.



Once you have oxygen, fuel, and heat, a fourth component, called the uninhibited chain reaction, is needed to maintain the fire. The chain reaction provides the heat necessary to maintain the fire. The addition of this component makes up what is called the fire *tetrahedron* (a four-sided figure).

The term “tetrahedron” may be difficult to remember, but the key point is that for fire to occur, you need fuel, heat, oxygen, and the chain reaction between the three of them.

The only way to stop a fire is to eliminate one of those four elements in the following ways:

1. Cool the burning material
2. Exclude oxygen
3. Remove the fuel
4. Break the chemical reaction

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## Classifications of Fire

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Classifications of fire are based on fuel type. They match up with classes of fire extinguishers, which will be covered later in the course.



**Class A** fires involve ordinary combustible (burnable) materials, such as wood, cloth, paper, rubber, and many plastics. They burn with an ember and leave an ash.

Class A fires are extinguished by cooling the fuel to a temperature that is below the ignition temperature. Water and other extinguishing agents are effective in putting out a Class A fire. They can also be extinguished using the dry chemicals used for Class A, B and C fires.



**Class B** fires involve flammable liquids (which can burn at room temperature) and combustible liquids (which require heat to ignite). Examples of class B fuels include cooking oils, oil-based paints, solvents, lacquers, nail polish and aerosol hairspray.

Class B fires are a high fire hazard; water may not extinguish the fire. This type of fire is best extinguished by creating a barrier between the fuel and the oxygen, or a smothering effect. Dry chemical, foam, vaporizing liquids, carbon dioxide and water fog can be used to extinguish a Class B fire, depending on the circumstances of the fire.



**Class C** fires are those that occur because of electrical equipment that has a current running through it, such as appliances, extension cords, outlets, and fuse boxes. Special techniques and agents are required to extinguish these types of fires, most commonly carbon dioxide or dry chemical agents.

Use of foam, water and other water-type extinguishing agents is very dangerous because water conducts electricity. Use of these on an electrical or Class C fire could kill or injure the person operating the extinguisher or at the very least, cause severe damage to the electrical equipment.

**Class D** fires involve combustible metals, such as magnesium, titanium, zirconium, sodium, lithium, and potassium. Most cars contain numerous such metals. Because of extremely high flame temperatures, water can break down into hydrogen and oxygen, enhancing burning or exploding. Class D fires should be extinguished with special powders based on sodium chloride or other salts; also, clean dry sand. *It is very unlikely that you would encounter a Class D fire in a health care facility or client's home.*

**Class K** fires are fires that involve vegetable oils, animal oils or fats in cooking appliances. This classification is for commercial kitchens. *Some large facilities may have kitchens that are classified as commercial.*

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## Activity: Identify Flammable Materials

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What materials in your facility or client's home might be prone to causing or fueling a fire, based on each of the classes we just discussed?

*[Give participants a few moments to fill in answers individually. Poll the class for volunteers to respond when most seem ready.]*

Class A: \_\_\_\_\_

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*[Suggested responses: Mattresses, furniture, curtains, blankets, clothing, supply areas where paper products are stored]*

Class B: \_\_\_\_\_

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*[Suggested responses: Cleaning chemicals, cooking oils, hair spray, nail polish, storage areas, paint cans, paint thinner]*

Class C: \_\_\_\_\_

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*[Suggested responses: Frayed or cracked electrical cord, appliances, electrical outlets]*

# Sources of Fire

Understanding some of the most common sources of fires in home settings will help you recognize the potential for danger before a fire starts in your own facility or client's home.

**Kitchens/Cooking** pose a high risk of fire from unattended ovens, stoves, microwaves, or other appliances. Carelessness is also a factor in the potential for fire. This could include spilling oil on a burner, placing a hot pad too close to a heat source, or forgetting to turn off the stove. Dirty or poorly maintained range hoods can also be a source of fires.

According to the NFPA, cooking fires are a leading cause of home fires and home fire injuries. More than half (55%) of these fires started with the ignition of food or other cooking materials.

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**Smoking** is the leading cause of fire fatalities (deaths) when people fall asleep while smoking or handle smoking materials carelessly.

**Electrical fires** may result from the improper use of extension cords or circuits that are overloaded. Cords and wires should never be placed under rugs or extend beyond the room of origin. Any object (appliance, lamp, etc.) that emits a spark or unusual smell should be immediately disconnected and checked. Electrical cords that are frayed or worn, or have exposed wires, should be immediately replaced. Temporary or exposed wiring also poses a fire hazard.

**Heating systems and fireplaces** must be inspected and maintained regularly to ensure that they are functioning properly. Portable space heaters pose a high risk for fire. The use of portable space heaters in some facilities is restricted.

**Burning candles**, left unattended, are another leading cause of fires. Battery-operated candles are now available in many sizes and provide a safe alternative. As a rule, facilities should not permit the use of candles.

**Bedrooms** contain many flammable materials, e.g., mattresses, clothing, bedding, etc. The risk of a bedroom fire may be even higher because sleeping residents may not notice early warning signs.

**Clothes dryers** are fire hazards based on the potential for accumulated lint, a highly flammable fire source. Filters and vents should be cleaned regularly.

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## Who is at Risk?

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People living in residential care settings or receiving care in their own homes may be at increased risk for injury or death in a fire. These people often need assistance with at least some of their daily activities. Some may have conditions that put them at risk for safely evacuating on their own.

Think about the residents and clients that you serve. What conditions might prevent them from responding appropriately during an emergency? For example, do any of your residents or clients meet the following descriptions?

*[Ask participants to look over the descriptions below. Ask them to circle the number if it describes a resident/client in their care. They will most likely have more circles than not when finished. You might ask if anyone had 5 circles or 4 circles.]*

1. **Individuals with dementia** may not understand the danger or need to evacuate and may be unable to evacuate a building independently. They may also have a fear of strangers including firefighters and emergency personnel. Individuals with dementia may need close supervision to ensure that they evacuate to a safe area *and* remain there.
2. **Elderly residents and those with physical disabilities** may be unable to evacuate the building or home safely. They may be unable to reach assistive equipment such as a wheelchair or a walker.
3. **Individuals with developmental disabilities** may become uncomfortable with a variation in routine. An emergency such as a fire may seem especially disruptive. It is important to practice the evacuation protocol in advance with these individuals.
4. **Individuals with visual impairments** may have trouble finding an exit due to reduced visibility from smoke.
5. **Individuals with hearing impairments** may not be wearing hearing aids and fail to hear audio alarms.

Knowing your clients and residents and the level of assistance each might need can save lives in an emergency.



## Practice Makes Perfect – Mandatory Drills

We all remember fire drills in school. They were an excellent way to prepare us to evacuate a building. Most regulated facilities have requirements for evacuation or safety plans. Failure to conduct required fire drills is often cited by state surveyors.

Let's review the requirements for the setting that you work in:

Adult Daycare Center	Conduct and document quarterly fire drills.
Adult Family Home	The licensee shall conduct semi-annual fire drills with all household members with written documentation of the date and evacuation time for each drill maintained by the home.
Facilities Serving People with Developmental Disabilities	The facility shall hold evacuation drills at least quarterly on each shift and under varied conditions. The facility shall actually evacuate residents to a safe area during one drill a year on each shift.
Community Based Residential Facility	Fire evacuation drills shall be conducted at least quarterly with both employees and residents. Drills shall be limited to the employees scheduled to work at that time. At least one fire evacuation drill shall be held annually that simulates the conditions during usual sleeping hours.
Home Health Agency	The nurse shall document a plan for recipient-specific emergency procedures in the event a life-threatening situation or fire occurs or there are severe weather warnings. This plan shall be made available to the recipient and all caregivers prior to initiation of these procedures.

Hospice	The procedures for exiting or taking shelter in the event of a fire, tornado, flooding, or other disaster to be followed for patient safety shall be clearly communicated by the staff to the patients within 72 hours after admission and practiced at least quarterly by staff.
Nursing Home	Fire drills shall be held at irregular intervals at least 4 times a year on each shift and the plan shall be reviewed and modified, as necessary. Records of drills and dates of drills shall be maintained.
Residential Care Apartment Complex	A residential care apartment complex shall have a written emergency plan which describes staff responsibilities and procedures to be followed in the event of fire, sudden serious illness, accident, severe weather, or other emergency and is developed in cooperation with local fire and emergency services.
Residential Substance Use Disorder Treatment Providers	Have a disaster plan and facility evacuation plan that is updated annually and posted in an area accessible to staff and patients.








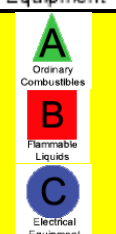




Are you aware of your facility's evacuation plan? Have you practiced it lately?

If not, remind your supervisors when you return to work—it may be time for a fire drill!

*[Prior to this training, research the rules for your facility type. For example, DHS 83.47 contains multiple fire safety requirements including evacuation capabilities, fire drills, a written emergency and disaster plan. DHS 88 has information on fire safety requirements for adult family homes. Nursing homes are required to follow the national Life Safety Code.]*

# Fire Extinguishers – PASS

Fire extinguishers are canisters that can be sprayed onto a fire to extinguish it. A portable fire extinguisher can save lives and property by putting out a small fire or containing it until the fire department arrives; but portable extinguishers have limitations. Because fire grows and spreads so rapidly, the #1 priority is to ensure everyone’s safety. There are different types of fire extinguishers:

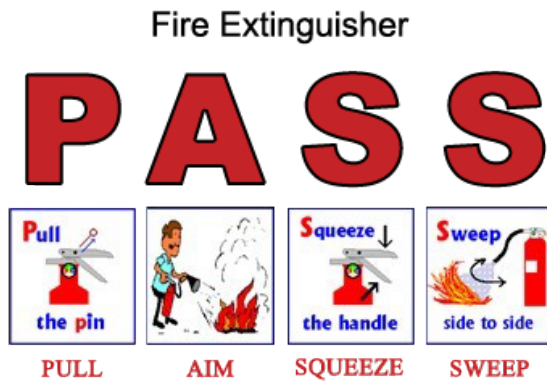
	<p>Class A extinguishers put out fires in ordinary combustible materials such as cloth, wood, rubber, paper, and many plastics.</p>	
	<p>Class B extinguishers are used on fires involving flammable liquids, such as grease, gasoline, oil, and oil-based paints.</p>	
	<p>Class C extinguishers are suitable for use on fires involving appliances, tools, or other equipment that is electrically energized or plugged in.</p>	
	<p>Multi-purpose extinguishers are suitable for ordinary combustibles, flammable liquids, or electrical equipment (A, B, and C)</p>	
	<p>Class D extinguishers are designed for use on flammable metals and are often specific for the type of metal in question. These are typically found only in factories working with these metals.</p>	
	<p>Class K fire extinguishers are intended for use on fires that involve vegetable oils, animal oils, or fats in cooking appliances. These extinguishers are generally found in commercial kitchens.</p>	

Many healthcare facilities and homes are equipped with multi-purpose extinguishers (A B C).

**Never use water or a Class A extinguisher to extinguish flammable liquid (oil, grease, solvents, etc.) fires.** Water is ineffective at extinguishing this type of fire and may make matters worse by the spreading the fire.

**Never use water to extinguish an electrical fire.** Water is a good conductor and may lead to electrocution if used to extinguish an electrical fire. Electrical equipment must be unplugged and/or de-energized before using a water extinguisher on an electrical fire.

Use a fire extinguisher only if you are completely familiar with its operation. To operate a fire extinguisher, remember the word **PASS**:



**P** – PULL the pin at the top of the extinguisher.

**A** - AIM at the base of the fire and not at the flames. You must extinguish the fuel to the fire.

**S** - SQUEEZE the lever. This will release the extinguishing agent in the extinguisher.

**S** - SWEEP from side to side. Using a sweeping motion, move the fire extinguisher back and forth until the fire is completely out.

## Activity: Know the Plan & Locate the Equipment in Your Facility / Client's Home

Fire Plan Life Safety Code §§ 18.7.2.2 and 19.7.2.2 require facilities to have a written fire safety plan specific to their location that outlines the minimal actions required by facility personnel upon discovery of fire. The plan shall include the following:

- (1) Use of alarms
- (2) Transmission of alarm to fire department
- (3) Emergency phone call to fire department
- (4) Response to alarms
- (5) Isolation of fire
- (6) Evacuation of immediate area
- (7) Evacuation of smoke compartment
- (8) Preparation for floors and building for evacuation
- (9) Extinguishment of fire

Think about the kitchen area in your facility or client's home. Do you know where the fire extinguisher is located? What kinds of fires can it safely extinguish?

Does your facility/client's home have a sprinkler system?

Are the smoke alarms directly connected to the Fire Department? Or must you call 911 in the event of a fire?

How many fire extinguishers are located in your facility/client's home? Where are they located?

*[Ask each question and ask participants to respond. Encourage discussion among the students, especially those who work together. If you are training in-facility, take students on a quick tour to confirm their original responses]*

## **Responding to an Emergency – RACE(E)**

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The acronym RACE(E) stands for the five basic steps that everyone should remember in the event of a fire or alarm. The first step is the most important. The next steps may be carried out in different order, depending on the circumstances and the systems within the facility.

**Rescue:** Remove those in immediate danger.

If there is a fire or smoke in one area of the facility, remove the residents in that area first. Ask for help if you need assistance in removing residents from the immediate area.

**Activate the alarm:** Notify the fire department/911 and others in the facility.

Pull the alarm to ensure that all staff and residents are notified of the emergency. If the facility does not have a system that automatically notifies the fire department, dial 911 and report the emergency.

**Control:** Prevent the fire from spreading.

Compartmentalize (contain) the fire. On your way out of the building or room, close the doors between you and the fire, but DO NOT lock them. Confining a fire to one area is the most effective method of limiting the spread of smoke and fire in a building.

**Evacuate:** Evacuate all residents from the building/home or past a firewall.

Follow the evacuation plan.

**Extinguish:** If it is safe to do so, use a fire extinguisher to extinguish the fire.

You should have experience handling a fire extinguisher before attempting this step.

All incidents of fire in an adult family home (AFH), a community-based residential facility (CBRF), a facility serving people with developmental disabilities (FDD), a hospital, or a nursing home must be reported to the Department of Health Services within 72 hours per Wis. Admin. Code §§ DHS 132.82(3)(e), DHS 134.82(3)(e), DHS 83.12(4)(e), DHS 124.36(11), DHS 88.05(4)(e) and Wis. Stat. § 50.035(4).

All fires are to be reported by completing the online [Health Care Facility Fire Report, F-62500 \(10/2018\)](#).

Details of the applicable regulations, facility expectations, and procedural guidance are provided in the following resources:

- [Fire Procedures for Fire Alarm Systems \(P-01729\)](#)
- [Fire Procedures for Sprinkler Systems \(P-01730\)](#)

## Learning Points Review

Let's review the learning points from today's training:

- Learn more about fire and flammable materials
- Identify special needs of those in your care during an emergency
- Review the steps for discharging a fire extinguisher
- Understand the steps for responding to a fire emergency

*[Point out how each part of the training covered the learning points. For example, we reviewed the use of a fire extinguisher.]*

## Wrap-Up

Can you remember the acronym for activating a fire extinguisher? What does each letter represent?

*[P = Pull A = Aim S = Squeeze S = Sweep]*

How about the acronym for responding to an emergency? What do those letters stand for?

*[R = Rescue A = Activate C = Control E = Evacuate E = Extinguish]*

*Thank participants for attending. Ask if there are any questions. If you wish, seek input on the training via (your own) training evaluations.]*

# Resources

The following are resources used for this curriculum. These resources may also provide valuable information about current standards and practices. Instructors and students are encouraged to explore the resources to increase program knowledge.

National Fire Protection Agency (NFPA)

<http://www.nfpa.org>

Fire concepts, early warning systems, fire extinguishers, etc.

Wisconsin Administrative Code and Register

<http://docs.legis.wisconsin.gov/code>

Chapter 50, Wisconsin Stats: Uniform Licensure

Chapters DHS 83, 88, 89, 132, Wisconsin Administrative Code

Wisconsin Department of Health/Division of Quality Assurance

<https://www.dhs.wisconsin.gov/dqa/sections.htm>

Licensing, certification, and registration for covered health care facilities

Occupational Safety and Health Administration (OSHA)

<http://www.osha.gov>

Fire safety information

US Fire Administration/Federal Emergency Management Agency

<https://www.usfa.fema.gov/>

Fire safety, fire extinguisher use, evacuation systems, etc.

US Consumer Product Safety Commission

<http://www.cpsc.gov/en/Safety-Education/Safety-Education-Centers/Carbon-Monoxide-Information-Center/CO-Alarms/>

Carbon Monoxide Alarms

WI Department of Health Services/

Division of Public Health

<https://www.dhs.wisconsin.gov/air/co.htm>

Carbon Monoxide Alarms

*[For this training, facilitators will need:*

- *MS PowerPoint (PPT Viewer can be downloaded for free at [Microsoft.com](https://www.microsoft.com))*
- *LCD projector (recommended)*
- *Screen for viewing the PPT and video (recommended)*
- *Internet access (highly recommended)*
- *Flip chart/whiteboard and markers*
- *Printed Participant Guides (one for each student recommended)*
- *Pens or pencils*
- *Evaluation for participants (optional)*
- *Attendance certificate (recommended)*

*Note: It is strongly recommended that the PPT be viewed using an LCD projector. If that option is not available, the PPT may be downloaded and printed as a handout.]*