

FIRE INCIDENT PLANNING GUIDE



INCIDENT PLANNING GUIDE

DOES YOUR EMERGENCY OPERATIONS PLAN ADDRESS THE FOLLOWING ISSUES?

MITIGATION & PREPAREDNESS	
<input type="checkbox"/>	Does your fire alarm and overhead announcement sound loudly enough to be heard in all locations?
<input type="checkbox"/>	Does your fire alarm system include both audible and visual systems (e.g., alarm tone and flashing strobe lights)?
<input type="checkbox"/>	Does your nursing home have lighted emergency exits in all areas?
<input type="checkbox"/>	Does your fire alarm automatically notify the local fire department?
<input type="checkbox"/>	Does your nursing home have a fire plan that includes closing and securing all doors and windows?
<input type="checkbox"/>	Does your nursing home have procedures to immediately shut off valves that control oxygen, other medical gases, natural/propane or other facility operation gasses?
<input type="checkbox"/>	Does your nursing home have procedures to evaluate all areas of the nursing home for smoke or fire damage? Does your nursing home conduct periodic inspection and maintenance of fire protection systems and equipment (e.g., standpipes, fire extinguishers, sprinkler systems, etc.)?
<input type="checkbox"/>	Does your nursing home include the local fire department in emergency response planning?
<input type="checkbox"/>	Does your nursing home conduct regular fire drills and evaluate staff performance and take corrective actions as indicated?
<input type="checkbox"/>	Does your nursing home provide staff instruction on when and how to use a fire extinguisher?
<input type="checkbox"/>	Does your Emergency Operations Plan include triggers or criteria for activation of the Emergency Operations Plan, incident command and the command center?
<input type="checkbox"/>	Does your nursing home have a process for regularly assessing the status of the facility, repair, resident services, system restoration and staffing and adjusting the Incident Action Plan and operations accordingly? Does the process include regularly updating the Incident Action plan and reviewing decisions made/actions taken to accomplish the mission?
<input type="checkbox"/>	Does your nursing home have procedures and forms to track costs, expenses and provide reports?
<input type="checkbox"/>	Does your nursing home have procedures with clear routes of communication to gather and confirm situation reports and status updates from local emergency management? Is there a plan to communicate with the local EOC (emergency management, public health) about the situation status, critical issues, and resident health status and request assistance?

FIRE

INCIDENT PLANNING GUIDE



<input type="checkbox"/>	Does your nursing home have a plan to notify and maintain communications (primary and back-up systems) and exchange appropriate information with the following? <ul style="list-style-type: none"> <input type="checkbox"/> Internal experts, including infection control, engineering/facilities, physician(s). <input type="checkbox"/> External experts, including local, regional and state public health, EOC/emergency management, fire, police, regulatory agencies. <input type="checkbox"/> Other local facilities and hospitals.
<input type="checkbox"/>	Does your nursing home have procedures to provide accurate and timely situation and safety information (in cooperation with local Joint Information Center) to staff, residents, and families and a back-up system if primary communication systems fail?
<input type="checkbox"/>	Does your nursing home have procedures to determine the status of communication systems outside of the facility in order to communicate with local emergency management, regulatory agencies, police, and fire within the city, county, and operational area?
<input type="checkbox"/>	Does your nursing home have a plan to conduct regular media briefings in collaboration with local emergency management, local EOC, and the local Joint Information Center?
RESPONSE & RECOVERY	
<input type="checkbox"/>	Does the nursing home have a procedure to obtain a detailed damage assessment of any area in the nursing home and officially documenting the damage for insurance purposes, including: <ul style="list-style-type: none"> <input type="checkbox"/> Direct fire damage <input type="checkbox"/> Smoke damage <input type="checkbox"/> Equipment damaged <input type="checkbox"/> Supplies lost <input type="checkbox"/> Injuries/fatalities <input type="checkbox"/> Water run-off <input type="checkbox"/> Other operational damage/needs
<input type="checkbox"/>	Does your nursing home have a plan to evaluate the environment and air quality of nearby affected areas and determine the need for evacuation of the areas or temporary relocation of residents?
<input type="checkbox"/>	Does the nursing home have a plan for the activation of alternate care sites, if needed?
<input type="checkbox"/>	Does the nursing home have a procedure for securing unsafe/damaged areas of the nursing home and salvaging equipment, as possible?
<input type="checkbox"/>	Does your nursing home have procedures to evaluate the need for additional staff, augment staffing levels or manage with staff available? Is there a plan to modify contingency staff utilization and provide staff support (i.e., alternate shifts and staffing, childcare contingency plan for staff, staff transportation needs, etc.)?
<input type="checkbox"/>	Does your nursing home have a plan to provide rest/sleep, nutrition and hydration to staff?
<input type="checkbox"/>	Does your nursing home have a process to determine the need for shelter in place vs. partial evacuation vs. complete evacuation of the nursing home to protect residents and staff?
<input type="checkbox"/>	Does your nursing home have a process to assess residents for early discharge to decrease occupancy?
<input type="checkbox"/>	Does your nursing home have a process to determine the need to limit resident visitation?
<input type="checkbox"/>	Does your nursing home have a plan to secure the nursing home, including adequate personnel to assure security?

FIRE

INCIDENT PLANNING GUIDE



<input type="checkbox"/>	Does your nursing home have a process to assess damage to building structure and infrastructure (HVAC, water, sewage, lighting, power, information systems, communications, medical gases and hazardous materials)?
<input type="checkbox"/>	Does your nursing home have protocols to manage, treat (or refer for treatment) and report injuries to residents, staff, families and visitors? Is there a process to prepare a report of all residents, staff, families and visitors evaluated, treated, and discharged from the facility?
<input type="checkbox"/>	Does your nursing home have a process to inventory available supplies, medications, equipment and personnel for both short and long-term operations? Does this include a process for obtaining supply and equipment supplementation?
<input type="checkbox"/>	Does your nursing home have a process for determining food and water needs for residents, visitors, families and staff for 96-hours and a plan for obtaining needed supplies?
<input type="checkbox"/>	Does your nursing home have procedures to track residents and beds in the event of an evacuation?
<input type="checkbox"/>	Does your nursing home have, if not evacuating, a plan to maintain continuity of operations including trash, food, linen, laundry, etc.?
<input type="checkbox"/>	Does your nursing home have a plan to access outside resources through a medical mutual aid system?
<input type="checkbox"/>	Does your nursing home have a plan to establish alternate care sites and relocate services provided if transfer is not feasible?
<input type="checkbox"/>	Does your nursing home have a plan to keep resident/staff families notified of current situation, location, condition and safety measures taken to protect them?
<input type="checkbox"/>	Does your nursing home have a plan for demobilization and system recovery that is activated during emergency response? Does this include a procedure for prioritizing service restoration activities, including restoring medical care operations, visitation and non-essential operations (i.e., social activities, meetings, etc.)?
<input type="checkbox"/>	Does your nursing home have procedures for repatriation of patients that were transferred or evacuated?
<input type="checkbox"/>	Does your nursing home have a process for reporting all injuries, system failures and long-term damage to state licensing and certification authorities as required?
<input type="checkbox"/>	Does your nursing home have a plan for providing mental health support and stress management services to staff, residents and families?
<input type="checkbox"/>	Does your nursing home have procedures for reordering, restocking and returning borrowed supplies, equipment, medications and personnel?
<input type="checkbox"/>	Does your nursing home have procedures for after action reporting and developing an improvement plan based on lessons learned? Is there a plan to participate in after-action review with local emergency management and community partners?
<input type="checkbox"/>	Does your nursing home have criteria to confirm restoration of the facility to normal function?
<input type="checkbox"/>	Does your nursing home have a process for submitting cost for disaster reimbursement from insurance carriers, local, state and FEMA disaster relief?
<input type="checkbox"/>	Does your nursing home have a process to determine the need for canceling non-essential services (i.e., social gatherings, meetings, etc.)?