



Policy Title:	Residential Fire Drills/Safety
Policy #:	09-003-0015
Effective Date:	01/29/2025
Approved by:	Telly Delor, Chief Operating Officer
Functional Area:	Safety
Responsible Leader:	Telly Delor, Chief Operating Officer
Policy Owner:	Jennifer Dugger, Safety Coordinator
Applies to:	Specialized Group Homes, Foster Care Homes

Purpose: To outline the fire safety regulations as they apply to each facility of SCCCMH so that staff can comply with the regulations in accordance with the procedures outlined in this administrative procedure. Refer to Exhibit A for a listing of regulations that apply to each facility.

I. Policy Statement

It is the policy of St. Clair County Community Mental Health (SCCCMH) to make sure that all Specialized Group Homes and Foster Care Homes will be in compliance with fire safety requirements.

II. Standards

A. Fire Drill Frequency

1. Specialized Group Home - Adult and Children
Requirement - 1 per shift per quarter, following the procedures established in the home's *protection plan*.
2. Specialized Children's Foster Care
Requirement - 1 per quarter.
3. Specialized Adult Foster Care - Capacity 1-3
Requirement - 1 per quarter (Two of the four *fire drills* during the year must be conducted during sleeping hours.)

4. Specialized Adult Foster Care - Capacity 4 or more
Requirement - 1 per shift per quarter.

B. Fire Safety Assessments

1. Specialized Group Homes - Children & Adults
Complete at least annually and within 30 days of a new placement in the home a Fire Safety Assessment (Exhibit B) including an EDI, an EAS for each individual and a Protection Plan.
* (With the exception of respite placement.)
2. Specialized Foster Care - Children
Complete Fire Safety Assessment (Exhibit C) including Protection Plan: evacuation routes, evacuation plan, emergency numbers, location of alarms and extinguishers.
3. Specialized Adult Foster Care
Must complete a Fire Safety Assessment (Exhibit B) including an EDI, EAS and Protection Plan (Exhibit C).
4. (Child/Adult) Living Independently or in a Non-Licensed Setting
It is highly recommended that a fire Safety Assessment and Home fire safety plan be completed. (Exhibit D- samples).

C. Destination Training

1. Specialized Group Home
Destination Training is required when 1) an EDI score is in the impractical range (greater than 5.0); and/or 2) an individual EAS score is inadequate in the category of risk of resistance, need for extra help, or response to instructions.
2. Specialized Foster Care
Destination Training is required when 1) an EDI score is in the impractical range (greater than 5.0); and/or 2) an individual EAS score is inadequate in the category of risk of resistance, need for extra help, or response to instructions.
3. Specialized Foster Care - Child
No formal requirements.
4. Independent living / Family Homes
No formal requirements.

D. Reporting of Smoke/Fire Incidents – All Specialized Homes

In the event the fire evacuation system is triggered due to actual smoke/fire, the home must be evacuated. Fire department should be contacted, and residents not returned to the home until the all-clear is given. Home providers should document incident on a fire drill log, giving full explanation of event and any remedial action taken and forward to the SCCCMH Safety Coordinator within 48 hours of incident.

E. Other SCCCMH Residents

Any resident receiving services from SCCCMH shall be informally evaluated on their need for specific education/training on general fire safety issues.

III. Procedures, Definitions, and Other Resources

A. Procedures

Responsibilities

Position	Responsibilities
Contracted Provider	Schedule fire drills, complete required documentation, and reporting.
Safety Coordinator	Ensure contracted providers complete required fire drills.

Actions – Fire Drills

Action Number	Responsible Stakeholder	Details
1.0	Provider	<ol style="list-style-type: none"> Schedule fire drills according to the standards (either announced or unannounced) to meet the minimum requirements established. Conduct fire drills and document completion on the Fire Drill Log form. <ol style="list-style-type: none"> Everyone present in the homes must evacuate during a drill. Corrective action taken, including dealing with refusals, should be indicated on fire drill log. Attempted drills where refusal occurs cannot be counted as drills. Residents who strongly resist drill evacuation should not be physically managed to exit. Drill should be terminated and rescheduled. Only in the event of an actual smoke/fire emergency should residents be physically managed to exit the home. Review and sign off that the fire drill log was reviewed for accuracy, documentation, completeness, and specifically note evacuation time. Discuss any discrepancies with the provider (and SCCCMH Safety Coordinator when necessary).

Action Number	Responsible Stakeholder	Details
		5. Forward the fire drill log to SCCCMH Safety Coordinator.
2.0	Safety Coordinator	6. Review fire drill log for accuracy and document receipt of drill on Fire Drill Tickler. 7. Maintain a central filing system of all fire drill ticklers for at least two (2) years. 8. Notify Contracted provider (Group, AFC, CFC) home representative of non-receipt of fire drill logs, if more than 30 days have elapsed since last drill was received.

Actions – Fire Safety Assessment

Action Number	Responsible Stakeholder	Details
1.0	Provider	1. Complete the appropriate Fire Safety Assessment packet on each home within 30 days of the new fiscal year (every October 1st) and update as needed within 30 days of significant changes (see Exhibit B and C). 2. Forward the completed packet to the Safety Coordinator prior to its expiration date.
2.0	Safety Coordinator	3. Review the Fire Safety Assessment packet for accuracy and completeness. 4. Maintain a two (2) year master file of all Fire Safety Assessments.

Actions – Destination Training

Action Number	Responsible Stakeholder	Details
1.0	Treatment Planning Team	1. Determine if there is a need to have Destination Training; individualizes the destination training program goal; and incorporate into the IPOS.
2.0	Primary Caseholder	2. Complete the <i>waiver</i> procedure if waived from training by obtaining rationale from the Treatment Planning Team and include documentation on EAS. 3. Review quarterly the EAS status. 4. Modify training program as needed, together with the Treatment Team. 5. Change in any EAS that are substantial require a new EDI score be completed and submitted.

B. Related Policies

N/A

C. Definitions

1. *Destination Training*: A systematic process in which a resident is trained to participate in evacuation. If a resident is not independent to exit the home, and has the physical ability to be mobile, a destination training program must be implemented.
2. *Evacuation Assistance Scores (EAS)*: Individual assessment on a resident to determine capacity for evacuating independently. Deficits in any of the seven (7) categories may indicate a need for training.
3. *Evacuation Difficulty Index (EDI Score)*: Calculation of the possible evacuation difficulty of a home in a fire emergency considering resident characteristics, presence of stairs, type of alarm, and availability of staff. A prerequisite is a "yes" response to all questions about fire preparedness in the home.
4. *Fire Drill*: The scheduled or unscheduled evacuation procedure involving all persons present in the home at the time, to a destination outside, in response to a smoke/fire alarm. If any person does not evacuate, it will not be considered a drill.
5. *Fire Safety Assessment*: A process by which you determine the fire safety adequacy of a facility. There may be different versions of this assessment depending on the type of resident and the resident's living situation.
6. *Individual Plan of Service (IPOS)*: A written plan of service directed by the individual as required by the Mental Health Code. This may be referred to as a treatment plan or a support plan, which is developed using the person-centered planning process, which addresses any safety needs with input from the resident, guardian, and/ or home provider.
7. *Maintenance Drill*: A fire drill which is deliberately conducted by a home to assure that a resident's ability to independently exit the home does not decline; allows for practice of evacuation.
8. *Protection Plan*: Plans are composed of three (3) required parts: 1) Evacuation Route Diagram, 2) Evacuation Procedure, and 3) Basic knowledge about fire.
9. *Waiver*: Treatment Planning Team's approval that a resident does not have to participate in destination training. Resident will be evacuated by staff during drills. Waiver will be submitted to Contracted Safety Representative and included with resident's Evacuation Assistance Score; F-1 form. Waivers must include clinical and/or medical rationale. Waivers will be for non-ambulatory residents, who have no purposeful movement as it relates to exiting.

D. Forms

N/A

E. Other Resources (i.e., training, secondary contact information, exhibits, etc.)

[Exhibit A: Regulating Body/Home Category Listing](#)

[Exhibit B: E-Scores](#)

[Exhibit C: Protection Plans](#)

[Exhibit D: Fire Safety for Independent Living](#)

[Exhibit E: Helping People Become Independent](#)

[Exhibit F: Fire Drill Log Form/Performance Evaluations](#)

[Exhibit G: Optional Safety Materials](#)

F. References

1. MDHHS Administrative Rules – R 330.1803 (1) – (6)
2. Life Safety Code <https://www.michigan.gov/lara/bureau-list/bchs/adult/requirements/appendix-f-life-safety-code>

IV. History

- Initial Approval Date: 04/1995
 - Last Revision Date: 12/2024
 - Last Reviewed Date: 09/2023
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