

**FACILITY  
EMERGENCY  
PROCEDURES**

**BASIC KNOWLEDGE**

**( ONE HOUR COURSE )**

**LIFETECH INSTRUCTIONAL SERVICES  
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## **Adverse Incidents, Major Incidents, and Facility Emergency Procedures Outline**

1. Reporting Major Incidents
  - A. Definition of Major Incidents per Florida Administrative Code 58A-5.0131(20)
2. Reporting Adverse Incidents
  - B. Definition of Adverse Incidents per Florida Statute 400.423(2)
3. Facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation.
  - A. understanding the staff role in evacuation procedures
  - B. Review of the Facility Policy and Procedures

### **Major Incidents**

The definition of a major incident is given to us by the Department of Elder Affairs in the Florida Administrative Code. It States:

“58A-5.0131(20) F.A.C. - “Major Incident” means:

- (a) Death of a resident from other than natural causes;
- (b) Determining that a resident is missing;
- (c) An assault on a resident resulting in injury;
- (d) Any injury to a resident which requires assessment and treatment of a health care provide, or
- (e) Any event, such as a fire, natural disaster, or other occurrence that results in the disruption of the facility’s normal activities.”

The unfortunate reality that exists is:

**Accidents do happen, but most accidents can be avoided**

With that in mind, every staff member should make resident safety their priority. However, when an occurrence or event leads to consequences and an unfortunate incident to a resident, visitor or staff member on the grounds of an adult living facility, an incident/accident report should be completed. If a resident has experienced the incident, we should consider privacy and involve them in the decision as to whether or not the family/responsible person is notified. If there was sustained injury resulting in the need for medical treatment, the family/responsible person must be notified.

Always read and review the facility’s policies and procedures for incidents and learn the chain-of-command notification, documentation and communication in your facility.

### **Facility Emergency Procedures**

There may be times when emergency measures must be performed. Your facility will have a specific policy for emergency procedures. Your responsibility is to tell your supervisor immediately and follow their instructions. Knowing some emergency procedures is important. Your facility may expect you to be CPR and First Aid certified.

There are many situations that can occur that will require emergency response and evacuation procedures to be placed into effect by adult living facility staff. It is crucial that every staff member be trained in their role in emergency procedures for their facility. **ALWAYS REFER TO YOUR FACILITY’S POLICY AND PROCEDURE MANUAL AND PARTICIPATE IN EMERGENCY**

**TRAINING AND DRILLS AS REQUIRED BY YOUR FACILITY.** Clear lines of authority are necessary and must be followed in any emergency. Life and death can be determined by your actions or inactions.

This manual will review some of the more common situations for the State of Florida.

## Fire Safety

All facilities have fire emergency procedures. You will be instructed on the specific fire safety policies for the facility for which you will be working. All staff is responsible for watching for fire hazards and reporting them immediately to the proper authority. Fire safety is extremely important and the State of Florida has laws requiring adult living facilities to have frequent fire drills. Know where the alarms and fire extinguishers are in your facility and how to use them. Know your facility evacuation plan in case of fire.

### Major Causes of Fire in Adult Living Facilities

Fires often are caused by the following:

- Improper or unsupervised use of smoking materials
- Defects in the heating system
- Improper trash disposal
- Misuse of electrical equipment
- Spontaneous combustion
- Lint buildup in dryers

### Components of a Fire

In order for a fire to occur, three things must be present: fuel (material that burns), ignition (flame or spark), and oxygen.

Fire safety is very important when oxygen is being used. Oxygen is not combustible, but it is an enabler to fire. An oxygen rich environment burns hotter and quicker than an environment that has normal oxygen content. A tiny spark from turning on an electrical appliance or a cigarette ash can cause a fire when oxygen is present in larger amounts than is normally present in the air. Special procedures must be followed when oxygen is used. Know if your facility allows oxygen use by the residents and follow your facility's policy for use of oxygen, oxygen signs, and modifications in procedures you must use when a resident is using oxygen.

### Actions to Take When a Fire is Discovered

If you discover a fire, take these actions:

- Follow the facility's procedures
- Alert and assist residents who have vision and hearing impairments
- Follow facility policy for getting immobile residents out of dangerous areas. This may include placing the resident on a blanket on the floor and pulling the resident, or moving the entire bed with the resident in it. Some larger adult living facilities have special fire retardant doors. Close any doors to place a barrier between the resident and the fire.
- If you must be in a room with smoke, stay at the lowest position (near the floor) to avoid inhaling the smoke. The noxious fumes contained in the smoke can overcome and kill you quickly.
- If a door is closed, touch the door or its' handle to feel for heat. If it is too hot to touch, do not open the door.

## The Race System

Many facilities use the **R A C E** system as a general guideline in fire safety.

- R= remove the residents in **IMMEDIATE** danger
- A= activate the alarm to alert others
- C= confine the fire by closing doors
- E= extinguish or evacuate

## Fire Extinguishers

Everyone should be familiar with the operation of a fire extinguisher. There are three basic types: type A is for wood, paper, and cloth fires; type B is for combustible material fires type C is for electrical fires. Long-term care facilities will have the ABC type of fire extinguisher which means that it is good for all types of fires.



**Fire extinguisher**

## The Pass System

The acronym

**PASS** is used when remembering how to use a fire extinguisher.

- P= pull the pin located at the top of the fire extinguisher near the handle
- A= aim the nozzle at the base of the fire where the combustion is occurring
- S= squeeze the handle of the fire extinguisher
- S= sweep from side to side of the base of the fire

Continue the process until the fire extinguisher is completely discharged. If necessary, obtain another fire extinguisher and continue the process until the fire is out or the professional fire fighters arrive to take over.

**NOTE:** smoldering fires such as in a mattress must be handled by professionals. When you think that you have extinguished a flame in a mattress, it can start back up again hours after you have “put it out.” The fire department should be called by the supervisor whenever there is any fire at an adult living facility.

A fire in an adult living facility is very serious. Many lives have been lost because of carelessness or non-adherence to the fire policies. Always participate in a fire drill and learn your facility policies for fire emergencies.

## Severe Thunderstorms

When a severe thunderstorm occurs, stay tuned to the television or radio for further information. Calm and reassure residents by staying calm yourself. Perhaps inviting them to sit in common areas with other neighbors and friends might help. Close all windows in the building and do not use electrical equipment or the telephone during a thunderstorm. Battery powered radios and flashlights should be made available in case of power outage. Follow your facility's policies and procedures for more information for loss of utilities.

## Tornado Watch

A tornado watch means conditions are favorable for the formation of a tornado. Staff should inform all residents of the watch, and keep radios and television sets tuned to local stations for weather information. Sky conditions should be checked periodically, especially in the West and Southwest. If a funnel-shaped cloud is sighted, notify other staff and residents and call 911.

## Tornado Warning

A tornado warning is issued when a tornado is sighted within 10 miles of the residence. All residents should be moved as quickly as possible to the pre-designated area that we will call the "safe place".

Areas that can be designated as a "safe place" include:

- ▲ Resident bathrooms (shower)
- ▲ Walk-in closets
- ▲ Public bathrooms
- ▲ Hallways (away from end doors with glass)
- ▲ Any room that has four walls with no windows
- ▲ Lower level

The staff should close all doors and window and shut any blinds or curtains over the windows. Ask residents to carry pillows with them for their protection in the "safe place". Both actions are to reduce injury from flying debris. All staff and residents should stay away from all windows during a tornado warning. Turn on the radio or television to keep track of the storm's progress. A battery powered radio and flashlights should be available for use for this emergency. Residents and staff should remain in the "safe place" until the warning has been cancelled.

## Hurricanes

Each facility must have an emergency and evacuation plan specific for their facility.

Become familiar and follow your facility's emergency and evacuation procedures.

## Disaster

Because of disaster potential, residents must be mobile. Staff efforts should concentrate on assisting less mobile residents or residents in most immediate danger first. In the event of a disaster the resident Assistant on duty should be appointed as the person in charge. If the RA needs assistance, the on call staff person should be called to the facility to help. Always refer to the Policy and Procedure for your facility procedures for dealing with a particular event.



## Bomb Threat

Any time communication is given that there is a bomb threat, whether written or by phone, the threat should be taken seriously. If you receive a phone call saying there is a bomb in the building, try to keep the caller on the phone. At the same time, get the attention of another staff member to call 911 to see if the call can be traced. Ask questions of the caller to gather information and to keep him/her on the phone;

- ▲ When is the bomb set to go off?
- ▲ Where is the located?
- ▲ How was the bomb brought to the building?
- ▲ Why was the bomb placed in our building?
- ▲ What does the bomb look like?
- ▲ Who placed the bomb in the building?
- ▲ Who is reporting the bomb is in the building?

Listen carefully for any background noise (i.e. children, cars, or machinery). If the caller hangs up, stay on the line as it may allow the phone call to be traced. Always follow your disaster chain-of-command and call down protocol. Do not touch any object that looks unfamiliar or suspicious and be prepared to institute evacuation procedures.

## Civil Unrest and Violent Situations

When a violent situation erupts either from a resident or from an outside intruder, the following steps should be followed:

- ▲ Attempt to isolate the violent individual from the rest of the community
- ▲ Notify another staff member to contact authorities (call 911)
- ▲ Get help any way possible (i.e. pushing an emergency response button, pulling the fire box)
- ▲ If there is a weapon involved, all action should be designed to avoid use of the weapon
- ▲ Employee and resident safety is more important than property
- ▲ Keep calm and talk in a soft, authoritative manner
- ▲ Follow directions given to you by authorities once they have arrived

## Record Preservation

When there is a disaster that jeopardizes the records of the facility, the staff should remove the records from their location and relocate in a safe place for their protection. Under no circumstances should any employee place themselves or others in harm's way to protect records; therefore, consideration for human health, life, and safety must be made when attempting any retrieval/relocation of records.

## Adverse Incidents

400.423(2) F.S. Every facility licensed under this part is required to maintain adverse incident reports. For purposes of this section, the term "adverse incident means:

(a) An event over which facility personnel could exercise control rather than as a result of the resident's condition and results in:

1. Death;
2. Brain of spinal damage;

3. Permanent disfigurement;
  4. Fracture or dislocation of bones or joints;
  5. Any condition that required medical attention to which the resident has not given his or her consent, including failure to honor advanced directives;
  6. Any condition that requires the transfer of the resident from the facility to a unit providing more acute care due to the incident rather than the resident's condition before the incident.
- (b) Abuse, neglect, or exploitation as defined in s. 415.102;
- (c) Events reported to law enforcement; or
- (d) Elopement.

In determining whether or not an incident meets the definition of an "adverse incident" and therefore must be reported to the Agency for Health Care Administration (Agency), the following questions should be considered:

*Question 1:* Did an incident occur in which a resident was injured or a specific situation existed?

AND

*Question 2:* Is the incident in which one or more of the injuries/situations listed above occurred, an event over which the facility's staff **could have had control** (prevented or influenced the occurrence or extent of injury/situation to the resident)?

AND

*Question 3:* Is the incident in which one or more of the injuries/situations listed above occurred, an event that is associated completely or partly with the facility staff's **intervention or lack of intervention** and not the result of a pre-existing condition that the intervention was trying to correct or control?

#### **Automatically Defined as Adverse**

Any one of the following is automatically defined as an "adverse incident" and must be reported on the 1-Day Adverse Incident Report to the Agency within one business day of the occurrence of the incident:

- ▲ Abuse, neglect or exploitation as defined in s. 415.102, F.S., (Vulnerable Adult)
- ▲ Resident elopement (based on the facility's definition of elopement)
- ▲ An event that is reported to law enforcement. (Does not include notification for Baker Act transport or required notification of a death determined to be from natural causes.)

Continue the internal investigation and within 15 days of the occurrence of the incident and submit the completed 15-Day Adverse Incident Report.

For an incident to be defined as "adverse":

- ▲ "Yes" must be answered to questions 1, 2 and 3 or
- ▲ One or more of the following outcomes must be present:
  - ▲ Abuse, neglect or exploitation as defined in 415.102, F.S. (Vulnerable adult)
  - ▲ Abuse, neglect and harm as defined in 39.01, F.S. (Child)
  - ▲ Resident elopement (as defined by the facility)
  - ▲ An event reported to law enforcement

For every 1-Day Adverse Incident Report submitted to the Agency, a 15-Day Adverse Incident Report must also be completed and submitted.

Your facility has someone designated to report adverse incidents to the Agency for Health Care Administration (AHCA). This individual will make the decision (under the direction of the administrator) whether a report will be generated to AHCA.

### **Conclusion**

Staff observe their residents and their environment every day. They interact with them, talk to them, and assist with activities of daily living; they observe the environment, notice any changes that could cause harm, and are constantly on the "look out" for safety issues. The Resident Assistant becomes the "Resident Expert". Because of this, the direct care staff (those staff members whose duties include the hands-on care of the residents), are in a unique position to observe and subsequently report all abnormal observations to their "chain-of command" (the next individual in the sequence of communication). The understanding of this process is crucial in the safety of adult living facility residents. The staff member's quick thinking and follow-up actions can make the difference between life and death.



# FACILITY EMERGENCY PROCEDURES

## POST TEST

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Circle the Best Answer

- T F 1. Areas that can be designated as a "safe place" in a time of emergency/  
/disaster include resident bathrooms (shower).
- T F 2. When there is a thunderstorm, it is safe to use the telephone.
- T F 3. The letter R in the RACE system stands for "Run away from the fire".
- T F 4. Clear lines of authority are necessary and must be followed in any emergency.
- T F 5. Fires often are caused by the improper or unsupervised use of smoking  
materials.
- T F 6. Employee and resident safety is more important than property.
- T F 7. When you think that you have extinguished a flame in a mattress, it can start  
back up again hours after you have "put it out".
- T F 8. A major incident is any event, such as a fire, natural disaster, or other  
occurrence that results in the disruption of the facility's normal activities.
- T F 9. Abuse is NOT always considered an adverse incident.
- T F 10. All adverse incidents are reportable to the Agency for Health Care  
Administration.

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**FILL OUT YOUR INFORMATION BELOW AND SEND YOUR COMPLETED ANSWER SHEET TO THE ADDRESS BELOW.**

**INCLUDE YOUR CHECK OR MONEY ORDER FOR \$ 10.00 ( PER TEST)**

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
EMAIL: \_\_\_\_\_  
PRESCHOOL NAME: \_\_\_\_\_

**MAIL TO:**

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