



### AFC FIRE SAFETY PLAN

1. Review of fire safety plan with caregiver to be done at time of:
  - a. Approval of new caregiver into Adult Foster Care Program.
  - b. Initial placement and alternate care of member.
  - c. Annual Caregiver evaluation and contract renewal.
2. Fire drills should be conducted by caregiver in home semi-annually. The caregiver is expected to check smoke detectors, carbon monoxide detector, and fire extinguishers at a minimum of semi-annually.
3. Procedure to be utilized for fire drill will be developed between Adult Foster Care staff and caregiver at member's enrollment visit. Each home will have an individual plan that accounts for the level of functioning and mobility of each member, the layout of the bedrooms and possible escape routes within the home.
  - A. For members who require assistance:

Caregiver will direct member: at sound of alarm, member will exit by primary escape route and meet at a pre-determined safe place on property away from building.  
(Caregiver may use verbal prompts or physically assist as needed).
  - B. For members without mobility impairments:
    - a. Caregiver will teach member to:
    - b. Identify primary and secondary escape routes.
    - c. Demonstrate 2 ways out of bedroom.
    - d. If nighttime fire - roll out of bed.
    - e. Stay low to the floor when there is smoke - crawl to escape.
    - f. If smoke is blocking an escape route, turn away from smoke and find another way out.
    - g. Test door for heat to determine likelihood of fire on other side.
    - h. Do not open hot door. Open bedroom window, drop to floor for a few seconds, then call for help.
    - i. When clothes catch on fire, drop to ground and roll.
  - C. Caregiver should meet members) at prearranged safe place to be sure everyone has safely evacuated the building.
4. At time of enrollment, caregiver may alert local fire department of presence of elder/disabled person(s) and approximate location of bedrooms).
5. Caregiver will document drills in log book. Individual fire safety plan will be documented on initial training sheet, care plan and annual caregiver evaluation.

**AFC FIRE DRILL LOG**

Member's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date From: \_\_\_\_\_

Date To: \_\_\_\_\_

DATE OF DRILL	TIME OF DAY	PROBLEMS TO OVERCOME ADDITIONAL NEEDS
1)		
2)		
3)		
4)		
5)		
6)		
7)		
8)		
9)		
10)		
11)		
12)		