



Fire Safety Evacuation Plan Workbook for Facilities with Six or More Residents

Purpose of this Workbook

This workbook is a planning and drafting tool designed to help you create your facility-specific fire safety and evacuation plan (FSEP) and meet the requirements of [Minnesota Statute 144G.45, Subdivision 2\(b-f\)](#).

This is not a fire safety and evacuation plan. This is a tool to help you develop your FSEP and cannot be used as your FSEP.

How to Use This Workbook

This workbook will help you:

- Understand what is expected of your organization according to [Minnesota Statute 144G.45, Subdivision 2\(b-f\)](#).
- Identify fire safety and evacuation risks specific to your building, residents, and staffing.
- Gather and organize information needed to write a compliant FSEP.
- Connect the written plan to staff training, resident education, evacuation drills, and documentation.

Each section includes general guidance, prompts, or checklists to guide planning and decision-making. Information developed here should be used to create your FSEP and as part of the FSEP review process.

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Purpose of the FSEP

The FSEP is not intended to be a document that is written and filed away until next year's annual review. This plan should be a guide with clear expectations for staff when there is a fire-related emergency. It should be used for staff training, resident education, evacuation drills, and as a reference during an actual emergency.

The FSEP should be reviewed and updated whenever there is a change in resident condition, staffing, or other changes within the facility.

Remember: Fire safety planning is not only about responding to a fire. It is about ensuring resident needs, staff responsibilities, and building systems are thought through and considered before an actual emergency occurs.

FSEP Regulatory Requirements

This section includes a summary of specific regulatory requirements you must meet.

Each assisted living facility needs to develop and maintain fire safety and evacuation plans. The plans must:

- Always be readily available within the facility.
- **Be facility-specific.**
- Reflect your building layout, resident population, and staffing patterns.

See [Minnesota Statute 144G.45, Subdivision 2\(b–f\)](#) for regulation specifics.

Minnesota regulations also require that:

Consider:

Frontline staff bring different experiences and training from previous jobs, and what is appropriate at one organization may not be appropriate at yours. Clearly define what an appropriate rescue looks like in your setting and the actions staff should take during a fire emergency. For example, should staff physically assist a resident who cannot evacuate independently, and if so, what methods or equipment should be used? Your FSEP instructions should provide enough detail so even your newest and least experienced staff members can act confidently and effectively. The primary goal is to keep residents safe and protect their lives in the event of a fire.

Your plan includes:

- Location and number of resident sleeping rooms
- Staff actions to be taken in the event of a fire (or similar emergency)
- Fire protection procedures necessary for residents
- Procedures for resident movement, evacuation, or relocation during a fire or similar emergency
- Identification of unique or unusual resident needs for movement or evacuation that are specific to the organization's current residents

Staff are trained on the facility-specific FSEP upon hire and at least twice per year.

Residents who can assist in their own evacuation are trained at least once per year, including plans for movement, evacuation, or relocation.

Evacuation drills are conducted for staff, twice per year per shift, with at least one evacuation drill every other month.
(Drills do not require fire alarm system activation or resident evacuation.)

Fire Safety and Evacuation Plan vs. Emergency Preparedness Plan

The FSEP is **separate** from the facility's emergency preparedness plan. Both plans are required but serve different purposes.

- The FSEP focuses only on fire and fire-related emergencies and provides detailed guidance for staff and residents. See [Minnesota Statute 144G.45, Subdivision 2\(b\)](#) for regulation specifics.
- The emergency preparedness plan addresses a broader range of emergencies and disasters. See [Minnesota Statute 144G.42, Subdivision 10](#) for regulation specifics.
- The FSEP provides instructions for safely evacuating the building during a fire-related emergency. After evacuation, follow your facility-specific emergency preparedness plan for additional response and recovery actions.

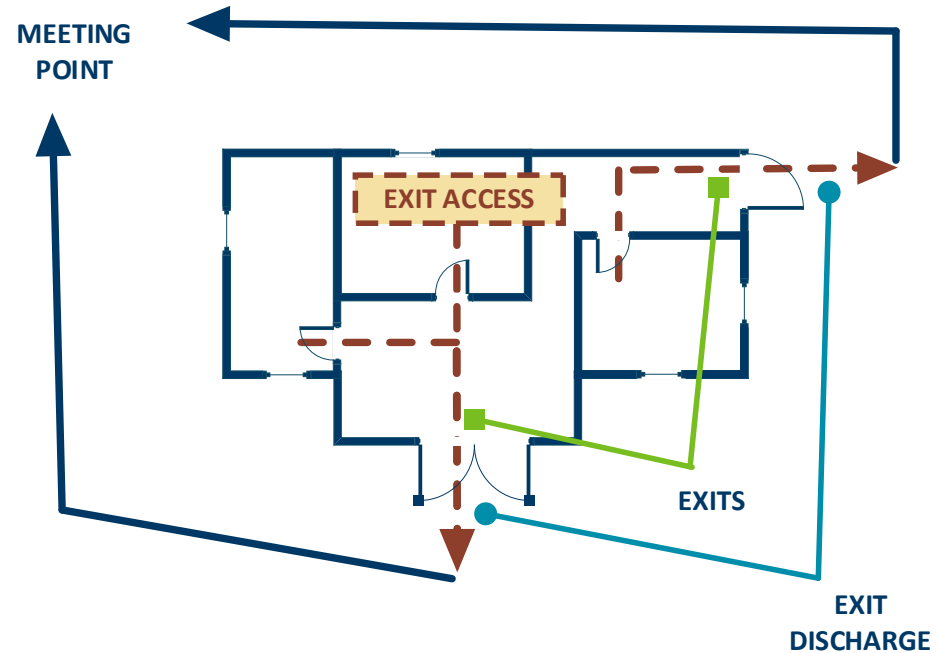
Fire Safety Definitions and Resources

Fire safety requirements often include technical terms and concepts that may be used differently in other settings. Understanding these definitions in the context of assisted living can help support compliance and strengthen emergency preparedness efforts.

This section provides key fire safety definitions and additional resources to help providers better understand fire safety requirements and expectations. Familiarizing yourself with these concepts can help support a safe environment and prepare staff to respond effectively during a fire-related emergency.

Fire-Related Definitions

- **Exit:** In a small facility, this is a door to the outside at ground level. In a larger facility, this can include exit stairways or other protected passageways.
- **Exit Access:** The path that takes you from any point in the building to the exit.
- **Exit Discharge:** Takes you from the exit to the public right of way.
- **Path of Egress (also known as Means of Egress):** A continuous and unobstructed path that brings you from any point in the building to the public right of way. Has three parts: *Exit Access*, *Exit*, and *Exit Discharge*.
- **Meeting Point:** A designated spot outside of the building away from danger where staff and residents meet after exiting.



The **Path of Egress (Means of Egress)** consists of three sequential parts: **Exit Access** → **Exit** → **Exit Discharge**. After reaching the public right of way, occupants proceed to the designated **Meeting Point**.

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- **Fire Resistant Construction:** A building method using noncombustible materials like reinforced concrete or protected steel.
- **Smoke Compartment:** A space in a building enclosed on all sides designed to resist the movement of smoke.
- **Smoke Alarm:** A device that detects and alarms from the same device (e.g., standard household smoke alarm).
- **Fire Alarm:** A building-wide system designed to detect smoke and alert occupants and the fire department.
- **Smoke Detector:** A device that detects smoke and is part of a fire alarm system.
- **Sprinkler/Sprinkler Systems:** A building-wide system designed to activate during a fire to control or extinguish the fire.
- **Controlled Egress:** A specialized door locking system used in specific facilities designed to prevent exiting. Requirements are found in Minnesota State Fire Code 1010.1.9.7.
- **Delayed Egress:** A door locking system that is designed to allow exiting after 15 seconds. Requirements found in [Minnesota State Fire Code 1010.1.9.8 and 1010.1.9.8.1.](#)



For larger Assisted Living facilities, **Building Fire & Life Safety** components typically fall into three categories:

1. **Fire Resistant Construction** and **Smoke Compartments** are *passive* features that limit fire/smoke spread.
2. **Fire Alarm Systems** (including smoke detectors), standalone **Smoke Alarms**, and **Sprinkler Systems** are *active* systems that respond to fire events.
3. **Controlled Egress** and **Delayed Egress** are *specialized door-locking approaches* related to occupant movement and security.

Staying Informed

Utilize the following resources to stay up to date on Minnesota Department of Health (MDH) guidance and regulatory updates related to fire safety.

- [Assisted Living Licensure - MDH](#)
- [Minnesota State Fire Code Chapter 4](#)
- [Minnesota Assisted Living Survey Findings](#): Review survey findings to stay up to date on common fire safety deficiencies and evaluator expectations.
- [MDH Email Updates](#): Signup for updates and invites for Health Regulation Division Webinars via GovDelivery

Planning for Fire Safety and Evacuation

This section provides considerations to help you plan for fire safety and evacuation in your building, evaluate fire safety risks, prepare for emergencies, and develop your formal FSEP.

FSEP development is a collaborative process. While one individual may coordinate the effort, the plan should be developed with input from multiple departments to ensure resident needs, building systems, and emergency procedures are fully considered. Bringing together clinical, operational, and facility staff early in the planning process helps identify potential gaps and promotes shared ownership of fire safety.

Include representatives from:

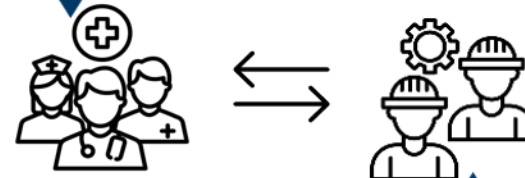
- Leadership/licensed assisted living director (LALD)
- Clinical nurse supervisor (CNS)
- Maintenance/facilities
- Environmental services/housekeeping

Communication Tip

Nursing and maintenance should establish a routine process for sharing information that may affect fire safety and evacuation. For example:

Nursing communicates changes in:

- Resident mobility
- Oxygen use
- Bariatric status
- Cognitive function



Maintenance communicates:

- Fire protection impairments
- Construction projects
- Utility shutdowns
- Building system testing

Regular communication helps ensure the FSEP reflects current resident needs and building conditions.

This document has been designed using resources from Flaticon.com.

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- Nursing staff (day, evening, night)
- Dietary
- Activities
- Human resources/education
- Reception/front desk
- Transportation

Use the following prompts to think about the processes around the FSEP:

Prompt	Response
Who will coordinate development of the FSEP?	
Who is responsible for ensuring the FSEP is reviewed regularly and whenever significant changes occur?	
How will changes to resident needs, staffing, or the building be communicated between departments?	
When a resident's evacuation needs change, how will the FSEP and resident-specific evacuation information be updated?	
How are fire alarm impairments, sprinkler outages, construction projects, or utility shutdowns communicated to nursing and leadership?	
Who is responsible for planning, conducting, evaluating, and documenting evacuation drills?	

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Prompt	Response
After an evacuation drill or emergency, how will lessons learned be shared with facility staff and the fire department, when appropriate?	
Who will serve as the primary contact with the local fire department?	
Who is responsible for ensuring staff and residents receive initial and ongoing FSEP training?	

Coordination with Local Fire Department

It is also beneficial to meet with your local fire department before finalizing your plan. This is a great time to discuss:

- Building layout and entrances
- Building access
- Fire alarm monitoring
- Sprinkler system
- Standpipes or fire pumps
- Utility shutoffs (gas, electricity, oxygen)
- Hazardous materials
- Resident population and mobility limitations
- Areas of refuge
- Staging areas
- Water supply concerns
- Preferred access routes

Use the following prompts to think through additional factors in communication and coordination with the fire department:

Prompt	Response
How does this facility coordinate with local fire or emergency responders before, during, and after an emergency?	

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Prompt	Response
When was the last time firefighters toured the building?	
Does the fire department know where oxygen storage is located?	
How has the facility communicated resident evacuation challenges (e.g., mobility, cognitive impairment, oxygen use) to local responders?	
How will staff communicate resident head count, evacuation status, and residents requiring assistance when the fire department arrives?	
Is there a plan for how the fire department should participate in evacuation drills (if appropriate)?	
How will the facility notify the fire department of significant changes to the building, fire protection systems, or resident population that could affect emergency response?	
Does the fire department have a preferred meeting location outside of the building so residents and staff do not hinder their work?	

Building Layout for Fire Safety and Evacuation

Use the following prompts to explain your building's fire safety and evacuation layout and describe the fire protection systems within your facility.

Building Layout and Relocation Areas

Quality Improvement Tip

Renovations, room changes, new secured doors, or changes to resident locations may require updates to floor plans, evacuation routes, and staff education.

IMPORTANT NOTE:

If your building does not have fire resistant construction or life safety systems, the ONLY option is full and immediate evacuation.

Prompt	Description
How many total resident sleeping rooms does the facility have?	
How many floors does the facility have?	
How many wings, units, or resident care areas does the facility have? List names if applicable.	
Which floors, wings, or care areas contain resident sleeping rooms? Include the number of sleeping rooms in each area.	

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Prompt	Description
Are smoke compartments or fire doors used to separate areas of the building? If yes, briefly describe where they are located and how they are used during a fire or relocation.	☐ Yes ☐ No
What areas within the building could be used for temporary resident relocation (shelter in place) during an emergency? (If none, full evacuation is required.)	
Are there any building features that affect internal relocation or evacuation? <i>(e.g., stairways, elevators, secured doors, long hallways, dead-end corridors)</i> (If none, full evacuation is required.)	
What aspects of your building could affect fire response, resident movement, or evacuation at this facility? <i>(e.g., long hallways, limited exits, multiple floors, resident rooms far from exits, secured doors, outdoor meeting areas, basement or lower-level resident sleeping rooms, or separate buildings on the property)</i>	

Fire Protection Systems

Prompt	Response
Where is the fire alarm panel located?	
Who tests fire alarms?	

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Prompt	Response
Who tests sprinklers?	
Where are sprinkler shut off valves?	
Where are fire extinguishers located?	
Who tests the generator and how often? (if applicable)	
Where is emergency lighting located?	
Who tests the smoke detectors and how often?	
Describe the facility's kitchen suppression system.	
Where is documentation of fire protection systems maintained?	

Floor Plan Review Checklist

Utilizing a floor plan for emergency exit diagrams is an easy way to educate staff, residents, and emergency responders about your building's layout. Use this checklist to ensure these elements are indicated on each floor plan.

Prompt	Answer
Are there current floor plans for each floor/level/story?	☐ Yes ☐ No
Are resident sleeping rooms clearly numbered or labeled on the floor plan?	☐ Yes ☐ No

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Are exits and paths of egress clearly shown?	☐ Yes ☐ No
Are fire extinguisher locations identified?	☐ Yes ☐ No
Are smoke barriers or fire doors identified?	☐ Yes ☐ No ☐ Not Applicable
Are outdoor meeting or evacuation locations identified?	☐ Yes ☐ No
Are the floor plans clear enough for first responders to quickly understand the layout?	☐ Yes ☐ No
Are alternate evacuation routes shown, if available?	☐ Yes ☐ No
Are winter or weather-related evacuation considerations noted?	☐ Yes ☐ No ☐ Not Applicable

Staff Duties, Roles, and Actions During Fire Emergencies

This section of the workbook helps you identify what staff are expected to do during a fire or similar emergency. See [Minnesota Statute 144G.45, Subdivision 2\(b\)\(2\)](#) for regulation specifics.

Staff Roles by Function: *Who does what during a fire?*

Use the following table to identify staff responsibilities and how each task should be carried out. Helpful tips to consider:

- One staff member may fulfill more than one role, depending on staffing levels or the time of day in which the emergency happens.
- Do not list individual staff names; instead, note the responsible position or role for sustainability (e.g., in case of staff turnover).
- Depending on your staffing structure, you may need to complete this list for multiple shifts and after-hours/weekends.
- As you write your FSEP, it is beneficial to note when staff should shift from emergency response to recovery (e.g., resident accountability, documentation, family notification, follow-up).

Staff Function	Responsible Position/Role	Procedure
Identify fire or emergency condition.		

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Staff Function	Responsible Position/Role	Procedure
Activate emergency response and alerts others.		
Call 911.		
Direct resident relocation or evacuation.		
Assist residents requiring support. (Describe how staff are assigned to assist residents.)		
Conduct resident accountability/head count.		
Check resident rooms and common areas.		
Report missing or unaccounted for residents.		
Communicate with emergency responders upon their arrival on scene.		Once emergency responders arrive, communicate the number and location of staff, residents, and visitors inside the building. Follow the emergency responders' lead and continue to support evacuated residents.
Communicate with leadership.		
Communicate with families.		
Document actions taken and follow-up activities.		

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Scenario-Based Staff Actions: *What do staff do in common situations?*

Describe expected staff actions for each of the following scenarios. Use plain language and focus on what staff should do first.

Scenario	Staff Actions
Fire in a resident room	
Fire in a resident room with door blocked	
Fire in mechanical room	
Fire in laundry room	
Fire in kitchen	
Fire in a corridor or other common space (Create a path of egress for each space.)	
Fire alarm and/or smoke alarm activation with no visible fire or smoke	
Electrical odor but no visible fire	
Smoke from unknown source	
After-hours or overnight fire event	

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Fire during medication pass	
Fire during severe/inclement weather (Consider factors such as relocation space and transportation.)	
Fire during a power outage	
Resident unable or unwilling to evacuate	
Resident unreachable to evacuate	
Resident activates alarm maliciously	

Fire Protection Procedures for Residents

This section helps you identify what residents should do during a fire or when a fire alarm sounds. Use the following prompts to ensure resident instructions are clear, realistic, and consistent across documents. Complete the questions using simple, plain language. See [Minnesota Statute 144G.45 Subdivision 2\(b\)\(3\)](#) for regulation specifics.

Resident Instructions and Support

Document the instructions provided to residents during orientation and throughout their residency.

Prompt	Response
What should residents do if they discover a fire or smoke?	

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Prompt	Response
Should residents attempt to fight a fire?	
What should residents do if fire or smoke alarms sound?	
What should residents do if they cannot leave their room independently?	
How are residents who have visual or hearing impairments alerted to a fire emergency?	
How are residents instructed to request help during a fire or evacuation?	
Are residents given instructions about elevator use during an emergency (if applicable)?	
What should residents do if staff direct them to relocate or evacuate?	
What instructions around building re-entry are residents given?	
Are residents trained to assist one another during a fire emergency, to the extent their physical and mental abilities allow and without creating additional risk to themselves or others?	

Resident Movement, Evacuation, and Relocation Procedures

This table helps you identify residents who may need assistance during a fire and plan how they would be moved, relocated, or evacuated. Consider each resident's individual needs and the level of assistance required. Use this section to develop realistic evacuation strategies based on your current residents, available staffing, and your facility's physical layout.

See [Minnesota Statute 144G.45, Subdivision 2\(b\)\(4\)](#) for regulation specifics.

Quality Improvement Tip

Changes in resident mobility, cognition, oxygen use, or medical equipment should trigger a review of resident evacuation procedures.

Identifying Resident Evacuation Needs

Use the following prompts to describe how residents who need assistance during a fire are identified. The goal is to develop a plan that staff can realistically carry out during an emergency while keeping residents as safe as possible.

IMPORTANT NOTE:

If your building does not have fire resistant construction or all life safety systems (sprinkler system, fire alarm and smoke compartments), the ONLY option is full and immediate evacuation.

Prompt	Response
How do you identify residents who may need assistance during a fire or evacuation?	
How are residents who require different levels of evacuation assistance identified? (e.g., independent, verbal prompting, needs some physical assistance, needs full assistance)	
How are staff informed of resident evacuation needs? (e.g., roster, room list, visual identifiers, color-coded floor plans, door markings)	

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Prompt	Response
How are temporary evacuation needs identified and communicated? <i>(e.g., injury, illness, short-term change in condition)</i>	
How are permanent or ongoing evacuation needs reviewed and updated?	
How are residents with vision impairments alerted to emergencies and assisted during an emergency or evacuation?	
How are residents with hearing impairments alerted to emergencies and assisted during an emergency or evacuation?	
How are residents who use wheelchairs, walkers, canes, or other mobility devices assisted during an emergency or evacuation?	
How are residents who require extensive physical assistance or are bedbound assisted during an emergency or evacuation?	
How are residents who depend on oxygen, electrical medical equipment, or other life-supporting devices assisted during an emergency or evacuation?	
How are residents with cognitive impairment, dementia, or memory loss supported during an emergency or evacuation? (Think about how you will keep these residents safe outside.)	
How are residents who may become anxious, confused, or resistant during an emergency supported during an emergency or evacuation?	

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How are residents with communication or language barriers supported during an emergency or evacuation?	
What other unique or unusual resident needs specific to this facility could affect movement, evacuation, or relocation?	
How will medications be managed if residents are relocated or evacuated?	
How will controlled substances be managed if residents are relocated or evacuated?	
How will resident medical records and other essential information be maintained or accessed during relocation or evacuation?	

Resident Evacuation and Relocation Strategies

Describe which evacuation or relocation strategies may be used at your facility. Not all strategies listed in this section will apply to every facility.

Prompt	Response
What factors will the facility consider when determining whether residents should remain in place, relocate residents within the building, or evacuate the facility? <i>(e.g., resident safety, location of the emergency, weather conditions, staffing availability, and direction from emergency responders.)</i> (If no fire resistant/life safety systems, full evacuation required.)	

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Under what circumstances would residents remain in their current location rather than relocate or evacuate? (If no fire resistant/life safety systems, full evacuation required)	
Under what circumstances would residents be moved to another safe area within the building and how do staff determine which area to use? (If no fire resistant/life safety systems, full evacuation required)	
Under what circumstances would a partial building evacuation occur? (If no fire resistant/life safety systems, full evacuation required)	
Under what circumstances would a full building evacuation occur? (If no fire resistant/life safety systems, full evacuation required)	
What outdoor assembly or gathering areas are used during an evacuation?	
If residents must leave the property, who is responsible for arranging transportation and what resources are available? (Think about after hours, weekends, during severe weather, wheelchairs, specialized transportation needs.)	
Where will residents be transported and how will you communicate resident needs to the receiving location?	

Staff and Resident Training and Education

This section helps you think through required fire safety training and education systems for both staff and residents. The plan for educating and documenting staff and resident FSEP training should be included in the organization's FSEP to confirm there is a system in place. Training logs and documentation demonstrate that the system is being followed.

Quality Improvement Tip

Use drill observations, incident reports, and staff feedback to identify additional training opportunities throughout the year.

Staff Training Regulatory Requirement

Staff must receive training **specifically** on the facility's FSEP:

- During orientation or upon hire, before assuming independent responsibilities related to resident safety, and
- At least twice per year thereafter.

This requirement is **not** general fire safety training but training on the specific FSEP your facility has developed.

The FSEP should outline clear expectations for staff when there is a fire-related emergency, and it is important that staff are familiar with the content within the plan. The goal of training on the FSEP is to ensure that every staff member can respond quickly, confidently, and consistently during an emergency. Training should reinforce both the facility's written FSEP and each employee's role in carrying it out. See [Minnesota Statute 144G.45, Subdivision 2\(c\)](#) for regulation specifics.

Important note: Evacuation drills do **not** count as staff FSEP training.

Use the following prompts to describe your processes around staff training:

Prompt	Response
Who is responsible for ensuring staff are trained on the facility-specific FSEP upon hire?	
Who is responsible for ensuring staff are trained on the facility-specific FSEP twice annually?	
What method of training will/does your facility use to train staff on the FSEP?	

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How is competency verified after staff complete FSEP training?	
Who is responsible for ensuring staff training on the FSEP is documented?	
Where are staff training records stored? Are they available for review during surveys or inspections?	
What is the process of updating staff on changes to the FSEP?	
How do you document that staff have been notified of FSEP changes?	

Resident Training and Education Regulatory Requirement

Residents who can assist in their own evacuation must be trained on the proper actions to take in the event of a fire, including movement, evacuation, or relocation. The training should be made available to residents at least once per year. See [Minnesota Statute 144G.45, Subdivision 2\(e\)](#) for regulation specifics.

Use the following prompts to describe how resident instructions regarding fire safety and evacuation are communicated:

Prompt	Response
Where are fire safety and evacuation instructions documented for residents? <i>(e.g., resident handbook, admission materials, posted notices)</i>	
Are resident instructions consistent across the FSEP and resident handbook/other documentation?	

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Prompt	Response
How is resident capability determined? (e.g., assessment, care plan, staff observation)	
How are residents educated about fire safety and evacuation procedures?	
How is resident participation in training documented?	
If a resident declines training, is the offer documented?	
How often are resident fire safety instructions reviewed or reinforced?	
How are instructions adapted for residents who may not understand or follow standard evacuation directions?	

Evacuation Drills

This section helps you think through planning, conducting, and reviewing evacuation drills in accordance with statutory requirements. See [Minnesota statute 144G.45, Subdivision 2\(f\)](#) for regulation specifics.

Important: Evacuation drills do **not** count as staff fire safety training. Evacuation drills are for **staff practice only**.

Evacuation Drill Requirements

Evacuation drills are required for staff twice per year per shift, with at least one evacuation drill every other month. Resident evacuation is not required. Fire alarm system activation is not required to initiate the evacuation drill.

Evacuation Drill Planning

Facilities may use different drill scenarios to reflect changes in staffing levels, time of day, or location of a simulated fire. When planning for evacuation drills keep in mind:

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- Drills should be conducted across all shifts.
- Drills should occur at different times of day.
- Staffing levels during drills should be similar to typical staffing for that shift.
- Multiple emergency scenarios should be used during drills such as different:
 - Locations of the fire.
 - Weather conditions.
 - Resident evacuation scenarios (resident acuity and path out of building).
- Drills should not occur during shift change.

Evacuation Drill Documentation

Each evacuation drill must be documented and should include:

- Date of evacuation drill.
- Shift of evacuation drill.
- Time of evacuation drill.
- Scenario used.
- Staff participation.
- Resident participation (if applicable).
- Lessons learned or follow-up actions.

Evacuation drill documentation must be maintained and be available upon surveyor request.

Using Evacuation Drill Outcomes

You can use the following questions to evaluate how drill findings are incorporated into your quality improvement process and revisions to the FSEP.

Prompt	Response
How are observations, gaps, or challenges identified and documented during evacuation drills?	
How are drill results reviewed to determine whether corrective actions or process improvements are needed?	

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Prompt	Response
How are staff education, assigned responsibilities, or evacuation procedures updated based on drill outcomes?	
When drill outcomes identify issues with the FSEP, how are revisions made, approved, and communicated to staff?	
How is follow-up conducted to verify that identified issues have been addressed and improvements are effective?	

Plan Location and Access

This section guides you through your process for maintaining, storing, and accessing the FSEP. See [Minnesota Statute 144G.45, Subdivision 2\(d\)](#) for regulation specifics.

The FSEP must be readily available at all times. During emergencies, staff should not need to search for or request access to the plan.

Prompt	Response
Where is the FSEP maintained, and is this location known to staff on all shifts?	
How is the location of the FSEP made known to staff?	
Is the FSEP readily accessible to staff on all shifts, including evenings, nights, weekends, and holidays? (e.g., locked offices, restricted access areas, locations staff cannot access during all shifts)	
Is the plan accessible during emergencies?	

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Prompt	Response
Are additional copies available in memory care units, if applicable?	
Are additional copies available in facilities with multiple wings, floors, or care areas?	
If electronic copies are used, how will staff access the FSEP during an internet or power outage?	

Maintaining the FSEP

Prompt	Response
Who is responsible for maintaining the primary, active FSEP?	
How are revisions approved?	
How are outdated copies removed?	
How are staff notified of revisions?	
Where is the revision history maintained?	

Reviewing the FSEP

This section explains when to review the FSEP and includes a checklist to confirm the plan contains all required components.

When the FSEP Should Be Reviewed

In addition to an annual review, providers should review and update the FSEP when changes occur that could affect fire safety or evacuation procedures. For example:

- Changes to the building layout
- Resident change of condition
- Staffing patterns
- Regulatory guidance
- Lessons learned from drills or actual events

FSEP Review Checklist

Use this checklist to ensure your FSEP policy includes required elements. Put an X in the column that reflects the status of each listed component, then work with facility staff to correct any gaps. Use this checklist when drafting your final policy and whenever the FSEP is reviewed.

Component	Yes	No	Not Applicable
Location of resident sleeping rooms	☐	☐	☐
Number of resident sleeping rooms	☐	☐	☐
Staff actions to be taken in the event of a fire or similar emergency	☐	☐	☐
Fire protection procedures necessary for residents	☐	☐	☐
Procedures for resident movement during a fire or similar emergency	☐	☐	☐
Procedures for resident evacuation during a fire or similar emergency	☐	☐	☐
Procedures for resident relocation during a fire or similar emergency	☐	☐	☐
Identification of unique or unusual resident needs for movement or evacuation specific to current residents	☐	☐	☐

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