

Instructions for Rating the Residents

NFPA 101A, 2004 Edition

This method of determining evacuation capability has been designed to minimize speculation about how a resident might perform in an actual fire emergency by using ratings based on observed performance. Instead of speculating, raters who are not familiar enough with a resident to provide ratings confidently should consult with an individual who has observed the resident on a daily basis. Due to the stress of an actual fire emergency, it is likely that some residents will not perform at full capacity. Therefore, ratings based on commonly observed examples of poor performance provide the best readily available indication of behavior that could be reduced by the unusually stressful conditions of an actual fire. All persons are less capable on some occasions, and the ratings should be based on examples of resident performance on a typical “bad” day. Ratings should not be based on rare instances of poor performance.

Rating Residents Using the Worksheet

Risk of Resistance

Line 1 rates the risk that the resident might resist leaving the facility during an emergency evacuation. Unless there is specific evidence that resistance might occur, the resident should be rated as “minimal risk.” If more than one rating applies, use the rating with the highest numerical score. Specific evidence of resistance means that staff have had to use some physical force in the past. However, an episode of resistance should not be counted if it was the result of a situation that was different enough from an actual fire emergency that it probably does not predict behavior in such an emergency. For example, an incident in which a resident refuses to visit with parents probably does not predict behavior in an actual fire emergency and should not be counted as specific evidence. Resistance can be active (the resident might have struck a staff member or attempted to run away) or passive (the resident might have “gone limp” or hidden from staff members.) Simply complaining or arguing is not considered resistance.

Minimal Risk. This rating indicates that there is no specific evidence to suggest that the resident might resist an evacuation.

Risk of Mild Resistance. This rating indicates that there is specific evidence that the resident might resist leaving the facility. Examples of specific evidence are as follows:

1. The resident has mildly resisted instructions from staff. Further, the resistance was brief or easily overcome by one staff member and occurred in a situation similar enough to a fire emergency to predict that the behavior could recur during an actual fire emergency.

2. The resident has hidden from the staff in a situation similar enough to a fire emergency to predict that the behavior could recur during an actual fire emergency. However, once found, the resident offered no further resistance.

Risk of Strong Resistance. The resident might offer resistance that necessitates the full attention of one or more staff members. Examples of specific evidence of such risk include the following:

1. The resident has struggled vigorously in a situation similar enough to a fire emergency to predict that the behavior could recur during an actual fire emergency.
2. The resident has totally refused to cooperate in a situation that is similar enough to a fire emergency to predict that the behavior could recur during an actual fire emergency.
3. The resident has hidden in a situation that is similar enough to a fire emergency to predict that the behavior could recur during an actual fire emergency. Moreover, once found, the resident continued to offer resistance.

Impaired Mobility

Line II rates the physical ability of the resident to leave the facility. This rating should reflect the current physical environment in the building where the resident lives and should be based on the resident's lying awake on his bed. The resident is rated according to how easily he can leave, given the presence of factors such as physical barriers that hinder movement (e.g. stairs), his ability to get out of the bed, or the chairs normally used. The resident should be given credit for being able to use devices that aid movement (e.g., wheelchairs, walkers, crutches, and leg braces.) However, the rater shall be permitted to give credit for such devices only if the devices are always available for an emergency evacuation.

The resident should be rated on his ability to use the most accessible route out of the facility. For example, a resident who is "self-starting" when using the back door but who "needs limited assistance" to get out of the front door would be rated as "self-starting."

The resident should be rated for performance while under the influence of any routinely administered medication that slows movement.

Where the resident needs physical assistance to make a timely evacuation, the rating of assistance they need is based on the degree of strength used by the staff member to assist the resident. Guiding or directing the resident by giving gentle pushes or leading by the hand is not considered physical assistance. If more than one rating applies, use the rating with the highest numerical score.

Self-Starting. The resident is physically able to start and complete an evacuation without physical assistance.

Slow. The resident prepares to leave and travels to the exit (or an area of refuge) at a speed significantly slower than normal. Specifically, the resident is rated “slow” if not able to prepare to leave and then travel from his/her sleeping room to the exit (or an area of refuge) within 90 seconds.

Needs Limited Assistance. The resident might need some initial or brief intermittent assistance but can accomplish most of the evacuation without assistance. An example of specific evidence of such mobility is that the resident is physically able to start and complete an evacuation, except that the resident needs help to accomplish the following:

1. Get into a wheelchair
2. Descend stairs
3. Get out of bed
4. Open a door

Needs Full Assistance or Very Slow. The resident “needs full assistance” or is “very slow.”

Needs Full Assistance. The resident either needs physical assistance from a staff member during most of the evacuation or must be assisted by staff in one of the following ways:

1. Carried from the facility
2. Helped into a wheelchair and wheeled out of the facility
3. Helped into leg braces and to descend the stairs

Very Slow. The resident is very slow if the time necessary to prepare to leave and then travel from his sleeping room to the exit is so long that the staff usually assists the resident to evacuate. Specifically, the resident is rated very slow if unable to prepare to leave and then travel to the exit (or area of refuge) within 150 seconds.

Impaired Consciousness. Line III rates the risk that a resident could experience a partial or total loss of consciousness in a fire emergency. Unless there is specific evidence that loss of consciousness might occur during a fire emergency, the resident should be rated as “no significant risk.”

Specific evidence is an indication that the resident has experienced some temporary impairment of consciousness of short duration (seconds or minutes) six or more times during the three months preceding the rating of the resident. Regardless of frequency, if there is specific evidence that loss of consciousness might be caused by the stress of a fire emergency, the resident should be rated as having impaired consciousness. An episode of partial loss of consciousness should be counted only if the impairment was severe enough to significantly

interfere with the resident's ability to leave the facility. Do not count episodes where the loss of consciousness was the result of a temporary medical problem (e.g., a severe infection.) If more than one rating applies, use the rating with the highest numerical score.

No Significant Risk. The resident is not subject to loss of consciousness, or the resident has had fewer than six episodes of losing consciousness (partial or total) during the three months preceding the rating.

Partially Impaired. The resident has had at least six episodes of losing consciousness in the preceding three months, of which the most severe episode was only a partial loss of consciousness; that is, the resident still is able to participate in an evacuation to some degree. Specific evidence that a resident should be rated in this category includes loss of consciousness resulting from mild (partial or petit mal) seizures, dizzy spells, intoxication, or any other partially incapacitating impairment of consciousness.

Totally Impaired. The resident has had at least six episodes of losing consciousness in the preceding three months, the most severe episode involving total or severely incapacitating loss of consciousness; that is, the resident needs the full assistance of at least one staff member to get out of the building. Specific evidence that a resident should be rated in this category includes losses of consciousness resulting from severe (generalized or grand mal) seizures, fainting spells, intoxication, or other total or severely incapacitating loss of consciousness.

Need for Extra Help

Line IV rates the possibility that more than one staff member might be needed to evacuate the resident. Specific evidence is a previous need for two or more persons to assist the resident and an indication that the resident could need assistance from two persons in a fire emergency.

When determining the need for additional assistance, the evaluator should disregard the physical strength or weakness of staff members. (For example, a large staff member who is exceptionally strong might be able to assist a resident alone, while a smaller staff member might be unable to assist the resident fully. However, there is no assurance that a staff member who is able to assist alone always will be able to respond to a resident requiring extra assistance.)

Needs at Most One Staff Member. There is no specific evidence that the resident might need help from two or more persons in a fire emergency.

Needs Limited Assistance from Two Staff Members. The resident might need some initial or brief intermittent assistance from two staff members, but otherwise needs help from no more than one. Specific evidence supporting this rating is that a resident needs assistance from no more than one person except to accomplish the following:

1. Getting into a wheelchair

2. Descending stairs

Needs Full Assistance from Two Staff Members. The resident might need assistance from two staff members during most of an evacuation. Specific evidence of the need for assistance from two staff members follows:

1. Two persons are needed to carry the resident from the facility.
2. Two persons are needed to get the resident into a wheelchair and to get the wheelchair down a flight of stairs.
3. The resident might resist an evacuation vigorously, and two persons are need to get the resident out of the facility.

Response to Instructions

Live V rates the resident's ability to receive, comprehend, and follow through with simple instructions during a staff-directed evacuation. Residents often do not respond equally well to all staff members; therefore, a resident should be rated on his responses to staff members whose directions he is least likely to follow. If more than one rating applies, use the rating with the highest numerical score.

Follows Instructions. The resident usually can be depended on to receive, comprehend, remember, and follow simple instructions.

Requires Supervision. The resident generally is capable of following instruction but is not dependable. Therefore, the resident might need to be guided, reminded, reassured, or otherwise accompanied during evacuation but does not require the exclusive attention of a staff member (e.g., a staff member can lead two or more residents who fit this classification simultaneously.) This category includes elderly persons who sometimes show early signs of senile dementia or Alzheimer's disease (e.g., confusion, disorientation, frequent "misplacement" of possessions) and young children who cannot be depended on to follow through with instructions.

Residents in this category generally are capable of following instructions except in one of the following situations:

1. The resident is deaf or hearing impaired and sometimes misinterprets communications from staff using sign language.
2. The resident sometimes forgets instructions after a brief period of time.
3. The resident is sometimes distracted or confused and fails to follow through with instructions.

4. The resident is sometimes groggy and might fail to listen carefully or follow through with instructions.
5. The resident is sometimes uncooperative without apparent good reason.
6. The resident is elderly and sometimes becomes “lost” in a familiar place.
7. The resident is a young child who might become frightened and not follow through with instructions.

Requires Considerable Attention or Might Not Respond. The resident might fail to receive, understand, or follow through with instructions; that is, the resident might not respond to instructions or general guidance. Therefore, the resident might require most of the attention of a staff member during an evacuation.

This category includes elderly persons who have the symptoms of senile dementia or Alzheimer’s disease (e.g., severe confusion, disorientation, very limited short-term memory.)

Residents in this category might display one or more of the following characteristics:

1. The resident sometimes does not understand simple instructions.
2. The resident might not respond to instructions from a particular staff member.
3. The resident is sometimes emotionally upset and is therefore unwilling to follow instructions.
4. The resident is deaf or hearing impaired and the staff cannot communicate reliably with the resident.
5. The resident is very forgetful, easily confused, or easily distracted.

Waking Response to Alarm

6.4.6.1 Line VI rates the risk that the fire alarm might fail to awaken the resident.

6.4.6.2 Residents should be rated as “response probable” unless any of the following conditions exists:

1. The building does not have an alarm system meeting the requirements of Chapter 33 (NFPA 101,) or the alarm is not sufficiently loud where the resident sleeps (doors should be closed and barriers kept in place where determining the audibility of the fire alarm.)
2. Medication taken by the resident before retiring differs in type or amount (i.e., medication is increased) from the medication taken during waking hours.

3. The resident has a readily apparent hearing impairment, or the resident's hearing aid is removed before sleeping.

4. There is specific evidence that the resident is an exceptionally sound sleeper. For example, the resident previously failed to be awakened by a particularly loud noise, and staff members have had to shake the resident vigorously to awaken him.

6.4.6.3 Where any of the conditions in 6.4.6.2 exist, the resident should be rated as "response not probable" unless the resident's ability to wake up has been demonstrated. The demonstration of the resident's ability to wake up in response to the fire alarm should be conducted after the first half hour of sleep and during the first three hours of sleep. In addition, the resident's ability to wake up in response to the alarm should be demonstrated on two different nights under normal conditions (e.g., without hearing aid, under usual medications.) Also, the resident should be alert enough to follow simple instructions within 1 minute after waking. To avoid waking other residents during demonstrations of the capability of a particular resident, a device that makes a sound that is similar to, but not louder than, the fire alarm shall be permitted to be used (e.g., an alarm clock or clock radio with a sound similar to the fire alarm.)

Response Probable. Either none of the conditions in 6.4.6.2 affect the resident, or, if any of the conditions exist, the resident's ability to be awakened has been demonstrated.

Response Not Probable. One or more of the conditions in 6.4.6.2 affect the resident, and either the resident has not been tested for the ability to be awakened by the fire alarm or the resident has failed to demonstrate the ability to be awakened by the fire alarm.

Response to Fire Drills

Line VII rates the resident's ability to leave the facility during fire drills, as demonstrated by the resident's performance, without guidance or advice from the staff. A resident must demonstrate three separate responses reliably and without instructions or supervision to be rated "yes" in each case. The resident is rated "yes" only where he/she has been specifically trained or instructed in the desired reaction and has demonstrated the desired response in at least three of the last four fire drills in which a response was demonstrated. If the resident has not been involved in four fire drills, the rating shall be permitted to be "yes" only if the resident has demonstrated the desired response during the last two opportunities to demonstrate the response. Ratings are based on demonstrated performance, and any resident who has not been trained to participate in fire drills must be rated "no."

This rating covers the ability of the resident to make decisions but does not relate to mobility, which is covered separately. For example, a resident might need assistance only in transferring from a bed to a wheelchair but otherwise can initiate and complete an evacuation promptly.

Such a resident would be rated “yes” for “Initiates and Completes Evacuation Promptly” but would be rated “Needs Limited Assistance,” in Line II, Impaired Mobility.

Residents should be rated assuming that an emergency could occur when they are least likely to respond well.

For most residents, this is after being awakened. Determining the rating should not include difficulties in actually awakening the resident, since there are large differences in how easily the same individual awakens at various times.

Initiates and Completes Evacuation Promptly. The resident has demonstrated a proper response to an alarm or warning of a fire by starting and completing the evacuation without unnecessary delay. Specific evidence leading to a rating of “no” includes the following responses:

1. The resident might not react to the alarm until alerted by a staff member.
2. The resident spends an excessive amount of time preparing to leave (e.g., getting dressed, observing others.)
3. The resident has a hearing impairment, and therefore, needs to be alerted by a staff member.
4. The resident is sometimes upset or confused and therefore, might seek out a staff member before evacuating.
5. The resident consistently begins an evacuation but is easily distracted and needs some supervision.

Chooses and Completes Backup Strategy. The resident has demonstrated the ability to select an alternative means of escape or has taken other appropriate action if the primary escape route is blocked. Specific evidence leading to a rating of “no” is where the resident is unlikely to select a good course of action if the primary escape route cannot be used; that is, the resident has not been trained to find alternative escape routes, find an area of refuge, or perform other appropriate action(s). Where the resident lacks the conceptual ability to understand fire hazards and blocked escape routes, and, therefore, requires supervision, the rating should be “no.”

Remains at Designated Location. The resident must have demonstrated willingness to remain at a designated safe location during fire drills. (The whereabouts of already evacuated residents needs to be confirmed to avoid dangerous return trips to look for residents who might have returned to buildings.) Specific evidence leading to a “yes” for this rating includes the following:

1. The resident has been specifically trained to remain at a designated location in a safe area and has demonstrated this ability without the presence of staff members in three of the previous four fire drills.

2. The resident is physically immobile and therefore, cannot leave the designated location.
3. The facility uses a motor vehicle (e.g., a van or bus) or a building that is detached and remote from the facility (i.e., another building or a remote garage) as the designated location, and the resident has demonstrated in three of the previous four fire drills the ability to remain there without the presence of a staff member.
4. The resident might tend to wander, but a reliable resident has been assigned to keep the wandering resident at the designated location without using any force or coercion. Furthermore, this arrangement has been demonstrated as effective in at least three of the previous four fire drills. Specific evidence leading to a “no” for this rating includes the following:
 1. The resident has not been trained to remain at a designated location without any staff supervision.
 2. The resident has been trained to remain without staff supervision at a designated location but has failed to demonstrate this capability in three of the previous four fire drills.

TO COMPLETE THE RESIDENT RATING FORM:

1. Only add together the scores in Section VII (Response to Fire Drills)
2. The final Evacuation Assistance Score is the *Highest* of the seven scores recorded in the square blocks. Do not add the seven block scores together.

Source: *NFPA 101A, Guide on Alternative Approaches to Life Safety, 2004 Edition*, adopted by HFEMSD, Colorado Dept. of Health and Environment (CDPHE).