

AUGUST 25, 2009

FIRE INCIDENT REPORTING

1. PURPOSE: This Veterans Health Administration (VHA) Directive provides revised policy and procedures on the reporting of fire incidents in facilities where services are provided to Veterans.

2. BACKGROUND

a. Fire safety for patients, staff, and visitors is a major priority at all VHA facilities. This includes non-VA facilities in which services are provided to Veterans under a VHA program. Recording and tracking of fire incidents is important to understand the magnitude of the fire problem in any organization. Trends can be identified that may not be evident at local facilities and the documentation and analysis of incidents can provide rationale for implementing prevention activities. In addition, the Department of Veterans Affairs (VA) periodically reports its fire incident experience to outside interests on an as-needed basis.

b. A reportable fire incident is defined as an ignition resulting in an uncontrolled flame of any size, or an explosion, in which the flame or explosion results in:

(1) Any casualty, whether an injury or fatality, to any patient, employee, visitor, or contactor; or

(2) Any damage to real or personal property (for example, a small trash can fire, or an ignition of patient bed linen or clothing).

c. In the absence of a reportable fire, the following are not intended to be reported via these procedures:

(1) Activation of a fire alarm or detection system;

(2) Discharge of a portable or fixed fire extinguishing device or system; or

(3) A response by a fire department (including in-house VA fire departments) to a suspected fire incident, rescue, or hazardous condition.

d. This Directive covers:

(1) All VHA-owned and VHA-leased facilities; and

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(2) The following non-VA facilities:

(a) Community-based non-VA facilities that provide overnight sleeping accommodations for Veterans through a VHA program, including but not limited to, facilities falling under the Community Nursing Home Program, Community Residential Care Program (including medical foster homes), Domiciliaries, Homeless (Grant) and Per Diem Facilities, Outpatient Clinics, and one- and two-family dwellings where home health care is provided to Veterans; and

(b) Non-VA clinics and physician offices that are contracted by VHA to provide treatment for Veterans.

e. This Directive requires reporting of all reportable fire incidents at VHA-owned and VHA-leased facilities. It is also the responsibility of VHA staff (e.g., program staff, safety staff) to report incidents in non-VA facilities for which the staff become aware. If VHA staff learn of a fire at a non-VA facility, to the extent feasible the incident is to be reported in the same manner as a fire at a VHA-owned or VHA-leased facility.

3. POLICY: It is VHA policy that all fire incidents occurring in VHA facilities, as well as know fire incidents occurring in covered non-VA facilities, must be reported.

4. ACTION

a. **VHA Facility Director.** The VHA Facility Director is responsible for ensuring that each reportable fire incident at the VHA facility, as well as each reportable fire incident at a covered non-VA facility of which the Director or VHA facility staff become aware, is addressed in accordance with the following procedures.

(1) **Veterans Integrated Service Network (VISN) Notification.** The VISN office must be notified by email as soon as possible, but not later than 24 hours after the incident, when:

- (a) The incident results in any casualties to patients, employees, or other individuals;
- (b) Property damage is expected to exceed \$10,000 in value; or
- (c) The incident generates media coverage.

NOTE: If the incident results in severe injuries to any person, notification is required to the VISN and the Deputy Under Secretary for Health for Operations and Management immediately (as soon as local conditions safely permit notification). If the VISN has more stringent requirements than this Directive, the more stringent requirements must be followed in addition to the requirements of this Directive.

(2) **Employee Injuries.** Any employee casualties must be reported in accordance with Federal and VA occupational safety and health requirements. *NOTE: See Title 29 Code of Federal Regulations (CFR) 1960 and VHA Handbook 7701.1.*

(3) **Patient Involvement**

(a) Fire incidents involving patients must be handled in accordance with VA patient safety requirements. *NOTE: Contact the facility or VISN Patient Safety Representative for the current requirements.*

(b) Each fire incident involving patients must be evaluated as a potential Sentinel Event in accordance with VHA and Joint Commission protocol.

(c) For each fire incident involving patients, a Root Cause Analysis must be performed, if needed, in accordance with patient safety requirements.

(4) **Reporting by Local Authorities.** Local authorities (i.e., local fire department) responding to the incident, must be requested to report the incident in accordance with local protocol via the National Fire Incident Reporting System (NFIRS), if they participate in this national reporting system.

(5) **On-Line Reporting of All Reportable Incidents.** An on-line fire incident report must be completed within 30 days of the incident for any reportable fire incident. The report is located under the Fire Safety section at the Center for Engineering and Occupational Safety and Health (CEOSH) web site: vaww.ceosh.med.va.gov . *(This is an internal VA web site not available to the public.) NOTE: VA Form 2162, Report of Accident, cannot be used to report fire incidents.*

(a) Casualties. Reporting of casualties (injuries and fatalities) is required for all reportable fire incidents.

(b) Damage. For all VHA-owned and VHA-leased facilities, the damage estimate must include real property damage to any VA-owned structure, building equipment, and building systems, as well as property damage to VA-owned building contents. Damage to non-VA-owned real property (e.g., damage to the lessor's structure, building equipment, and building systems) cannot be included in any damage totals. In addition, damage to patient, employee, or contractor-owned personal property cannot be included in any damage totals reported. In determining the estimated property damage costs, replacement costs of the property using like kind and quality are to be included, plus any cost associated with clean up and repair. In facilities that are not VA-owned or VA-leased, it is not necessary to provide an estimate of real property damage or personal property damage.

(c) Additional information, including occupancy type, fire protection system operation, ignition source, etc. is also to be reported. *NOTE: See the instructions located on the CEOSH website.*

(6) **Facility Fire Incident Log.** In addition to entering fire incidents on-line in accordance with subparagraph 4a(5), a log and all documentation (e.g., photographs, police report, or fire department report) must be maintained at each facility of each fire incident with a specific identifier using sequential calendar and number format (e.g., 2009-001, 2009-002, 2009-003,

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etc.). All log entries need to be made within 3 business days of the incident. The log entries can consist of a printout of the CEOSH data entries. All documentation related to the incident, including the CEOSH printout, must be maintained in a log book or folder.

b. **VISN Director.** The VISN Director is responsible for ensuring that:

(1) Each fire incident is reported and addressed according to the procedures in subparagraph 4.a.

(2) Implementation of the procedures specified in subparagraph 4.a is verified at each VISN facility during the Annual Workplace Evaluation (AWE).

c. **Director of the CEOSH (10NS).** The CEOSH Director is responsible for ensuring that an on-line fire incident reporting form and database are developed and maintained.

5. REFERENCES:

a. Title 29 CFR 1960, Basic Program Elements for Federal Employee OSH Programs and Related Matters.

b. VHA Handbook 7701.1.

6. FOLLOW-UP RESPONSIBILITIES: The Director, Safety, Health, Environmental, and Emergency Management (10NS), is responsible for the contents of this Directive. Questions can be referred to 202-266-4654.

7. RESCISSIONS: VHA Directive 2003-051, Fire Incident Reporting, is rescinded. This VHA Directive expires August 31, 2014.

Gerald M. Cross, MD, FAAFP
Acting Under Secretary for Health

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