

Washington State

Division of Developmental Disabilities

Community Protection Program

Intensive Supported Living Services

Fire-Setting and Arson Education & Prevention

Staff Training Manual



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Department of Social
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Introduction

This staff training manual was developed as a collaborative project of the Community Protection Providers Association of Washington State and the Department of Social and Health Services Division of Developmental Disabilities.

This manual is intended to help train employees who provide support to Community Protection Program participants on how to address the comprehensive support needs of persons with developmental disabilities who have histories of fire-setting and who present a current risk of setting fires. The manual focuses on safety, preparation, and response planning across a variety of environments (i.e., the participant's home, community settings, and others).

Statistics

- The United States has one of the highest fire death rates in the industrialized world. In 1998, the U.S. fire death rate was 14.9 deaths per million population.
- Fire is the third leading cause of accidental death in the home. At least 80 percent of all fire deaths occur in residences.
- Each year, fire kills more people in the U.S. than all natural disasters combined.
- From 1994 through 1998, an average of 4,400 people in the U.S. lost their lives and another 25,100 were injured annually as the result of fire.
- About 100 fire fighters are killed each year in duty-related incidents.
- About 2 million fires are reported each year. Many others go unreported.
- Direct property loss due to fires is estimated at \$8.6 billion annually.
- Arson is the third leading cause of residential fires and residential fire deaths. In commercial properties, arson is the major cause of deaths, injuries and dollar loss.
- A working smoke alarm dramatically increases a person's chance of surviving a fire.
- Approximately 88 percent of U.S. homes have at least one smoke alarm. However, these alarms are not always properly maintained and consequently might not work in an emergency. The number of fires that occur in homes with non-functioning alarms has been increasing at a disturbing rate.
- Over 40% of those arrested for arson offenses in the U.S. are under the age of 18 years.

Definition of Arson

"The fraudulent burning of property"

It is important to realize that although some people supported in the Community Protection Program may be referred to as "arsonists" or carry the label of "arsonist," it may not be the most accurate description of their behavior. People who set fires and those who are arsonists have different characteristics. The support and intervention are different and should be individualized to meet the person's needs. Offense patterns may vary depending upon the particular reason or motivation the person has in setting the fire. Motives are complex and often mixed. Having an understanding of what leads up to a fire incident, such as the target choice and the motive, can help those supporting the person make better decisions, as well as facilitate interventions and planning that will be the most effective.

Offender Characteristics

Who are the people we support that set fires?

Some experimentation with fire is a normal part of growing up and childhood development. What happens when the person does not grow out of that behavior? Many factors occur that lead people to cross the line between play and experimentation to actual fire-setting.

Children who are delayed in their developmental years may have more challenges developing judgment and common sense. Things that seem simple and predictable to some can be confusing and difficult to understand for a person with a developmental disability. In some cases, it is possible that the person simply cannot understand the consequences of his behavior. Even if he has some exposure to consequences, the person may be unable to generalize that information in his everyday life. If this behavior continues uninterrupted into adulthood without appropriate treatment, supervision and structure, the individual may have the potential to be very dangerous.

The person who sets fires often feels powerless and attempts to create a position of power through his fire-setting behavior. Power and control issues can play a large part in a person's willingness and ability to control his behavior.

Arsonists tend to have low to moderate intellectual functioning. People with greater intellectual disabilities tend to have greater unmet needs and to be more socially isolated.

Research indicates that most arsonists will be male. A generalized profile may indicate that his parents are divorced or one is deceased (generally, the father). His educational level will be low. He will have intellectual disabilities and is likely to be unemployed. He will have a problem with alcohol, will not be in full control of his actions, and will feel resentful or suicidal. The targeted building will typically be his place of employment (current or previous), his own home, his neighbor's home, or the home of his current or ex-significant other. Most fires also occur in the evening or at night and on either Friday or Saturday.

The typical profile for the female fire setter appears to direct most of her fire-setting toward her own belongings or premises and rarely toward her employer or neighbor. Motives are similar to those of the male arsonist, but with more self-destructive tendencies.

Studies have shown that fire-setters are less assertive, less intelligent, less physically aggressive and more socially isolated. Social skills also tended to be deficient, especially when the person is dealing with conflict, expressing anger, and saying “no.” Alcohol and drug use has also been identified as a contributing factor in some cases.

Fire-Setting Myths

Pyromania and Sexual Gratification

Most people believe that pyromania is common among fire-setters.

According to the Diagnostic Statistical Manual of Mental Disorders IV-TR (DSM IV-TR), pyromania is given as a diagnosis only when all of the following specific criteria are met:

- Deliberate and purposeful fire-setting on more than one occasion;
- Tension or affective arousal before the act;
- Fascination with, interest in, curiosity about, or attraction to fire and its situational contexts (e.g., paraphernalia, uses, consequences);
- Pleasure, gratification, or relief when setting fires, or when witnessing or participating in their aftermath;
- The fire-setting is not done for monetary gain, as an expression of sociopolitical ideology, to conceal criminal activity, to express anger or vengeance, to improve one’s living circumstances, in response to a delusion or hallucination, or as a result of impaired judgment (e.g., in Dementia, Mental Retardation, Substance Intoxication); and
- The fire-setting is not better accounted for by a Conduct Disorder, a Manic Episode, or Antisocial Personality Disorder.

Individuals with pyromania make considerable advance preparation for starting a fire. They may be indifferent to the consequences to life or property caused by the fire, or they may derive satisfaction from the resulting property destruction. The behaviors may lead to property damage, legal consequences, injury, or loss of life to the fire-setters or others.

Pyromania is rare. It is important to note that of the CPP participants with fire-setting behaviors included in the survey, none had a diagnosis of pyromania.

It is also important to be aware that the connection between sexual gratification and fire-setting is very rare.

Contributing Factors

What causes the people we support to start fires?

One must consider many variables in trying to figure out why a person sets fires. Below are a few of the contributing factors that are most commonly seen in CPP participants.

Access to Combustibles

Consider: Where is the gas can stored? Where does staff store their lighters when on shift? Are you aware of less obvious combustibles such as hair spray, perfume, Kleenex? When you are working with individuals who have a history of or are at risk for setting fires, you must be diligent and cautious of potential combustibles. Controlling and limiting access to combustibles is imperative in preventing fires.

Impulse Control Problems (The inability to manage one's thoughts and feelings in a behaviorally/socially acceptable manner)

Consider: Does the person seem to lack the ability to control their responses in certain situations? Participants in the CPP program tend to have a high incidence of impulse control problems. This is especially a problem when the person consumes drugs or alcohol. Because the effects of drugs and alcohol deplete a person's ability to control his/her impulses and impairs judgment, the risk of fire-setting behavior is increased. This is especially true in group situations where peer pressure can be a factor.

Boredom/Attention Seeking

Consider: Does the person have the ability to engage in appropriate activities and creative outlets that are healthy and fulfilling to them?

Fires can be very exciting and garner much attention on many levels. People who have few other things in their life will sometimes manufacture excitement through fire-setting behavior.

Of the five contributing factors we have listed here, the boredom/attention-seeking factor is the most easily impacted by the supports we provide (see Staff Training Section).

Family History

Consider: Was there a fire when s/he was a child, and did it cause a death in the family or the loss of the family home? Such a traumatic event can become embedded in the individual's mind and cause a desire to re-create the intensity of the trauma through repeating the event. Perhaps there was a divorce in the family and one of the parents married a fire marshal. This might lead to a desire to set fires to express or vent one's anger at the new stepparent. Stressful events often lead to fire-setting behavior an example might be the loss of one's job or perhaps the anniversary of a significant event in his/her life. The person often feels powerless to cope with the stress and thus seeks a means to discharge the tension. They do so by setting a fire.

Mental Illness

Consider: Was there a history of mental illness in the family? Has the person experienced symptoms of mental illness themselves? It is common to find a history of mental instability or illness in the life of a person who has set fires. Often this manifests itself in the form of personality disorders, conduct disorders and explosive disorders. In some cases the symptoms of mental illness can be a factor in the fire-setting incident, especially where the person is delusional, suicidal, or has extreme anger control issues. In these cases, it is extremely important to address any symptoms of mental decompensation early and proactively so the person's risk of setting a fire does not go up. If the risk does go up, you and the support team will be ready with the needed medical and environmental supports.

Fire-Setting Offense Patterns

How can we predict when people will set a fire?

Finding out what motivates a person to set fires can be difficult. Studies have shown that fire-setting is related to the number of fires previously set, and how young the person was when they set their first fire. Less violent and aggressive fire-setters were more likely to set new fires. Studies have also shown that mentally disordered fire-setters, without proper support and supervision, are more likely to set new fires.

Typically, a fire will be set when the person experiences feelings of anger, boredom, depression, being ignored, anxiety and/or tension. If a person threatens to set a fire or is exhibiting behaviors that are risky for them, the threat should be taken very seriously. The person's therapist and your supervisor should be notified immediately. Sudden changes in plans or insensitive remarks made to the participant could set them on the path toward setting a fire.

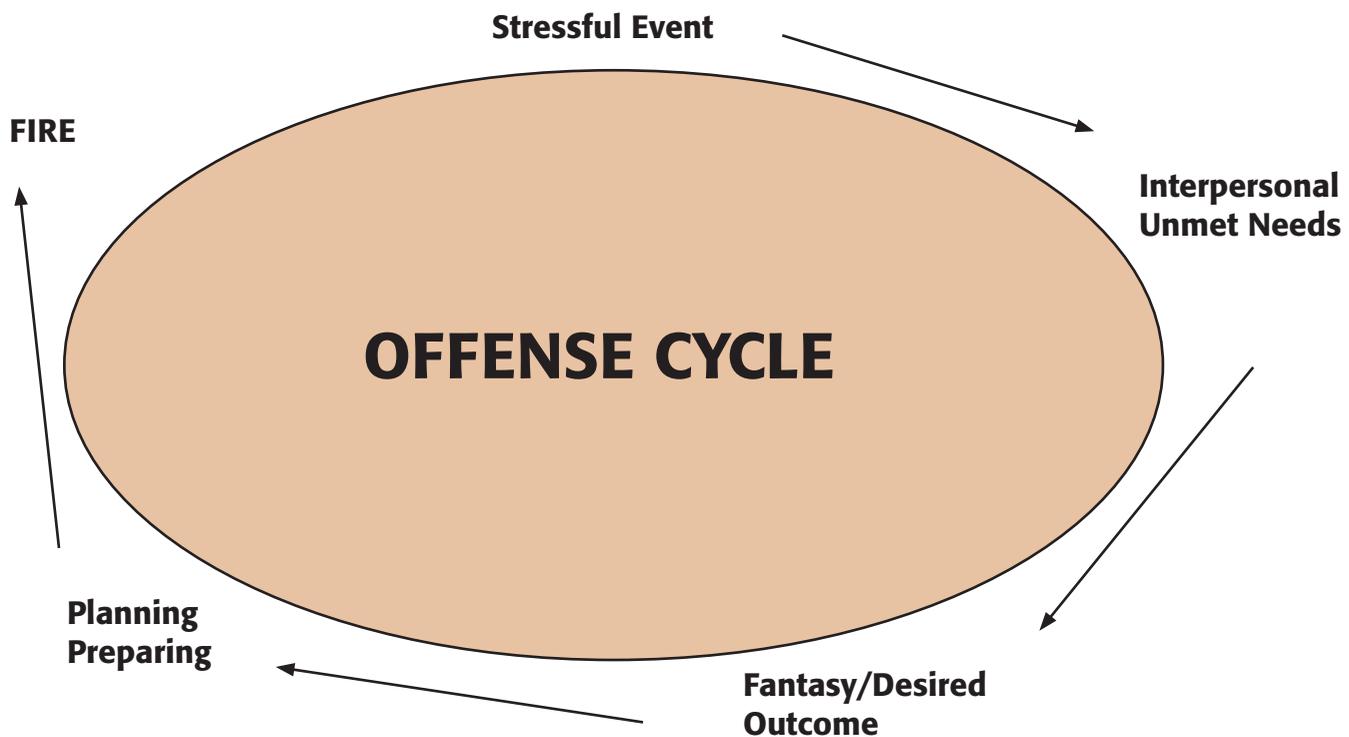
Categorizing different motives is important in understanding the fire-setting pattern. When the people providing supervision and support are aware of the person's fire-setting offense pattern, they are better able to predict situations that increase the risk of fire-setting behaviors for the person and to care for them in a manner that prevents re-offense.

Universally Accepted Motive Definitions for Fire-setting:

- **Revenge/Protest** – The most common type of fire. Typically fueled by specific anger towards a person or entity (e.g., political, religious)
- **Excitement** – Likes to watch the firefighters, gains sexual gratification (rare)
- **Mental Health Concern** – Depression, delusional, mental retardation or organic brain disorder, schizophrenia
- **Concealment** – To cover another crime
- **Vandalism** – Either out of boredom or connected to specific revenge (e.g., school, employer)
- **Profit/Economic Gain** – Insurance claims, welfare claims, change in residence

Offense Cycle:

- **Stressful event** – A perceived slight by another person, loss of a job, a family event that causes heightened tension.
- **Interpersonal unmet needs** – Feels isolated, unable to express needs or wants, perceives others will not respond.
- **Fantasy about fire-setting** – May occur for weeks before fire is set. Imagines and plans the fire. The fantasy contributes to increased tension and pre-fire anxiety.
- **Preparing/Planning the fire** – May include stockpiling combustibles, identification of target building, etc.
- **Fire is set** – May report the fire, actively participate in fire fighting, producing a feeling of pride or power, relieving anxiety/tension, and enhancing self-esteem.



4 Categories & Profiles of Community Protection Fire Starters

Most CPP participants with fire-setting behaviors are likely to fit into one or more of the following profile categories:

- **Curiosity** – The naive offender experiments with fire without understanding the danger or consequences. Playing with matches generally falls into this category. There is no intention to cause harm.
- **Reactionary** – The person is crisis driven, has behavior driven by emotion, engages in attention-seeking behavior, is often bored, has experienced a change in location of services/placement and responds to stress or anxiety. The more unmet needs they experience, the greater the number of fires set to get attention from those around them. They have a desire to conceal something that they have done wrong (e.g., throw a lit cigarette in the garbage can if they were not supposed to be smoking). Generally, the person is at moderate risk for future fire-setting.
- **Delinquent Behavior** – Is conduct related, is angry, is setting out to hurt others, get revenge, or express protest. They use fire as a weapon, and their intention is clearly to hurt others. Vandalism is also an issue for this group. This type of fire-setter will typically use accelerants and are definitely at risk for future fire-setting.
- **Pathological** – Mental illness (usually schizophrenia, bipolar or depression), intermittent explosive disorder, delusional issues, personality disorders or the complicated relationship between fire and sexual arousal/satisfaction are all characteristics of this group. The setting of fires to watch the fire trucks and to gain an intense satisfaction and sense of power or control is typical. This group will likely use accelerants. They are generally at extreme risk for future fire-setting.

According to the survey conducted by DDD (page 30), most CPP participants with fire-starting behaviors fell into the Delinquent Behavior category as described above.

What are the typical mental profiles of the four categories?

- **Curious** – Has poor impulse control, active, hands-on learner, may experience fear, sadness, loss, lack of adequate supervision, easy access to sources of ignition, general lack of safety awareness, typically uses lighters or matches to set fires, sets fires in hidden locations (closet, under bed), may try to extinguish the fire, may ignore the fire, sets unsophisticated fires.
- **Reactionary** – Unable to identify/express feelings, poor coping skills, lack of remorse, deny/lie/admit about cause of fire, lacks problem solving skills, experienced recent trauma/crisis, history of fire-setting, possible neglect or abuse, easy access to sources of ignition, sets relatively unsophisticated fires, usually uses matches or lighters, motivated by frustration, may be a cry for help, may be symbolic of the crisis.
- **Delinquent** – A poor interpersonal skills, lacks good judgment, impulsive and irresponsible, risk taker who opposes authority, history of academic and/or behavior problems, often denies or lies about origin of fire, embarrassed and afraid of consequences when caught, may brag about the fire, low self-esteem, history of substance abuse, sees consequences as a joke, failure to experience guilt, lack of adequate supervision, alienated from care providers and society, little to no family involvement, peer dominated, usually sets fires at school, sets fires with others (peers), uses fireworks, smoke bombs, false alarms, use of common accelerants (lighter fluid, gasoline), general locations are outdoors (dumpsters, alleys, brush, fences), multiple points of origin, set fire to cause harm/destruction, fires usually well planned, revenge fires, history of fire-setting.
- **Pathological** – history of medical or neurological problems, academic and behavior problems, difficulty establishing relationships, history of severe emotional and psychological disorders, loner, life-long fascination with fires, home-life unstructured, socially isolated, substance abuse possible, fire-setting is ritualistic, have a distinct pattern, usually very destructive, secretly proud of their fires, fires can be sophisticated and cleverly set.

Risk Assessments

Is the person likely to set a fire again in the future?

DDD arranges for an assessment to be conducted by a licensed, mental health professional on all CPP participants with a history of or current fire-setting behaviors. The purpose of the assessment is to explore the various contributing factors and historical information related to the specific individual and to give offense pattern information.

The areas to be addressed in each assessment may include the following:

- **Basic information** – Name of treatment professional, date, name of person requesting, general description of the participant
- **Information sources** – Interview with participants, family, previous providers, others and participant records review
- **Summary of relevant findings from information sources** – Medical and other conditions, history of significant events in the person’s life, psychiatric history and diagnosis, offense history
- **Assessment of possible risk the person poses to self, property and others** – Potential targets, behavior triggers, patterns, hypotheses about function or purpose of behavior, whether there are multiple risk issues (e.g. sexual deviance, assault, arson), mental health issues, likelihood the person will engage in risk behaviors (with and without supervision), amenability to treatment, amenability to supervision.
- **Recommendations** – Description of services currently in place which serve to reduce the potential risks, additional supports recommended that are likely to substantially reduce the potential risks, goals for individual, group, or family therapy, if recommended.

Typically the assessor will use a combination of any of the following tools: *Fire Interest Rating Scale; Functional Assessment of Fire-Setting; Rathus Assertiveness Schedule; Culture Free Self-Esteem Inventory; Fear of Negative Evaluation Scale; Social Problem Solving Inventory; Novaco Anger Scale; Beck Depression Inventory and Stages of Change.*

As a result of the risk assessment and the participant specific information provided, more detailed support and safety planning can occur prior to a placement.

Treatment Goals and Objectives

How can the pattern of fire-setting be interrupted and stopped?

Treatment for fire-setting behaviors can follow a variety of paths depending upon the person's level of risk, support network, and level of functioning. It is important that all providers (vocational, mental health, school, day treatment, direct-care staff, supervisors, community correction officers, family members, etc.) have a clear understanding of the course of the person's treatment so that no one unintentionally sabotages the treatment's effectiveness.

Treatment may be in a group or individual setting, or may be a combination of both.

Typical areas covered in treatment of fire-setters include:

Assertion Skill Development – Treatment focuses on increasing the individual's ability to appropriately communicate their wants and needs. As this may be a new behavior for many participants, staff will need to reinforce the intention of communicating although they may initially verbalize in a belligerent manner.

Self-Esteem Development – Treatment focuses on improving the individual's sense of self as a person and developing insight and self-awareness surrounding feelings.

Anger Expression/Conflict Resolution – Treatment likely uses role plays and situational scenarios to help the individual address deficits in expressing anger in an appropriate and in a verbal manner, as well as reaching resolution with those he/she is in conflict with and dealing with unsolvable situations.

Covert Sensitization (a way to redirect behaviors using replacement stimulus) – For those who find fire-setting very exciting, this is a way to shape/change behaviors.

Social Skills Training – How to meet/greet others and to develop and maintain friendships.

Confrontation of Thinking Errors – Group or individual therapy settings, as well as other environments such as work, home and community.

Medication – Antipsychotics, antidepressants, or mood stabilizers to decrease impulsivity.

Education About the Dangers of Fire – Treatment focuses on gaining an understanding about the negative impact fire has, including injury to self and others, death, trauma, property damage, incarceration, restitution, fines, etc.

Relapse Prevention - Treatment focuses on preparing practical strategies to help interrupt offense cycles and developing a personal fire graph.

As the research indicates, substance use and abuse can contribute to fire-setting behavior. If this is an identified contributing factor for an individual, efforts to ensure the participant attends drug and/or alcohol treatment in addition to the other identified treatment modalities focused on fire-setting will be an integral part of decreasing the fire-setting behavior.

What happens if participants break the treatment guidelines?

- **Contracts** – All CPP participants with fire-setting issues have a treatment agreement with their therapist (see Addendum 1). In addition, they have signed a pre-placement agreement with DDD (see Addendum 2). These documents serve to establish requirements the participant will follow while residing in the CPP and receiving treatment from a therapist.

In addition to the treatment agreement with the therapist and the pre-placement agreement with DDD, CPP participants have Positive Behavior Support Plans that address their challenging behaviors. Additional information on positive behavior support and behavior support plan requirements can be found in DDD Policy 5.14, Positive Behavior Support, and DDD Policy 5.15., Use of Restrictive Procedures.

- **Consequences** – If a participant refuses to follow his/her treatment requirements, the possible consequences to them could include:
 - Loss of services
 - Injuries
 - Restitution
 - Social rejection by others
 - Loss of property
 - Jail

In the next section, you'll learn how staff can support participants by following their treatment guidelines.



Section 3

Supervision

What do I need to know if I am responsible for supervising someone with a history of setting fires?

Supervision is vitally important when supporting a person with a history of setting fires. Staff should understand that their vigilance is needed because relapse can be LETHAL. Supervision can be broken down into two basic categories: 1) supervision of the person, and 2) supervision of the environment.

Supervision is all about AWARENESS. You cannot supervise someone if you are not aware of the behaviors of concern, or if you are not aware of where the person is, and what they are doing. Levels of supervision can vary depending upon the person or the environment. Of course all staff should consult the person's individual treatment plan/recommendations regarding supervision and follow them.

In general, eyes on supervision should be maintained at all times in the community and whenever possible, in the home. Where the person cannot be supervised visually, such as in the bathroom or bedroom, there has to be a method established whereby the staff could do periodic checks (usually about every 15 minutes, while awake). This assumes that the area where the person is out of visual supervision has been completely screened for any items that could be used to start a fire.

Supervision should be accomplished so that the staff person can respond in a timely manner if the person they are supporting is in an area where they have access to combustibles. Sometimes the type of supervision needed may be so close ("arm's length") that the staff can reach out and touch the person. This would be the case if you were supporting the person on a camping trip where there is an open campfire for instance. It would be quite different and only require visual supervision if you were sitting at home watching TV. Staff should be careful of environments that can be misleading. Consider that matches are only an arm's length away when a person goes up to the cashier to pay for their meal at many restaurants. A lighter may be inches away if the person near them is a smoker. Awareness of the environment is a key factor in determining the level of supervision required.

Now look at this list of combustible items found in the average household. And remember, even this list does not include everything. Usually if left unsupervised for a long period of time, a person who wants to set a fire bad enough can find a way. Fire starters will use whatever is available.

Household Items that are Accelerants/Combustible

Cleaning Fluids
Rubbing Alcohol
Gasoline
Propane
Lighting Fluids
Paint
Paint Thinner
Hair Spray
Perfume
Fire Works
Aerosols
Lint
Napkins/Kleenex

Household Appliances that are Igniters

BBQ
Lawn Mower
Toaster
Oven
Light Fixtures with Exposed Bulbs
Stove Top
Electrical Outlets
Panel Boxes
Baseboard Heaters
Space Heaters
Power Tools
Dryer
Boilers
Gas Water Heaters
Furnaces

Supervising both the person and the surrounding environment when someone is smoking is very important. A cigarette can easily be used to light a fire when someone is not watching closely, or a cigarette butt thrown in a pile of rubbish or beauty bark can develop into fire after a period of time. Cigarettes, lighters and cigarette butts should be accounted for at all times.

A major part of supervision includes enforcing the restrictions on certain items. When items such as combustibles are restricted, there has to be regular and thorough searches for restricted items. The therapist making recommendations on restrictions should be consulted regarding the need for and frequency of searches. The bottom line is that unless the environment is checked regularly, there is no way to ensure that it is free of restricted items (that can easily be hidden from staff). Matches and lighters are small and easily hidden and in the wrong hands can cause millions of dollars of damage, not to mention the loss of precious lives.

In conclusion, don't ever let your guard down. Even if the participant has not engaged in fire-setting behaviors for many years, the potential to do so remains. Don't be persuaded into thinking that the person is not at continued risk. There are many documented cases of people whose fire-setting behaviors were dormant for many years only to resurface with deadly consequences.

Security Procedures

How can we keep everyone safe and avoid risky situations?

There are a variety of security precautions that should be taken when supporting people who set fires. Homes can be modified to make them safer.

Installing GFI outlets to make the electrical outlets safer and locking-up the electrical panels in the home can decrease risk.

Hard-wired, tamper-proof fire alarms can be installed in residential homes for a reasonable cost. Monitors that signal the fire department or alarm services (in the event that the alarm is triggered) are also available. Even if there is a hard wire alarm system installed, it is important to have battery-operated smoke detectors on each floor of the home in case the power goes out. Some systems have a battery back-up internally located to address this concern.

Locking areas for combustibles, such as sheds or cupboards, make it easier and safer to store things.

Taking steps to turn off the oven or circuit breakers to the kitchen when not in use can reduce risk.

Consider using electrically powered lawn equipment instead of gas powered equipment.

Locks on appliances of concern like furnaces or thermostats can allow for greater control of heat sources.

Access to other heat sources in the house should be evaluated, restricted or closely monitored.

In some cases, a light bulb is hot enough to ignite paper or lint.

Ladders for egress of high windows should be made available. Windows that are to be used for egress need to be big enough for the person inhabiting the home to escape through.

Exit plans that include all forms of egress should be posted. It may be beneficial to include a detailed floor plan of each of the house rooms (bed, dresser position, etc) to help firefighters if they must re-enter a burning house to look for a missing individual.

A meeting place should be established somewhere safely outside of the residence where all household members can meet up and be accounted for in the event of a fire.

Fire drills should be practiced frequently.

Everyone should sleep with his or her bedroom door closed. If a smoke alarm goes off, the back of the hand should be used to check for heat on the door. If it is cool, open the door slowly; if no smoke, use the primary exit; if the door is warm, use the secondary exit (i.e.: the window). If you are trapped, use a blanket, towel, rug/cloth item to block the crack under the door, stay low and next to the window, yell for help.

There should be fire extinguishers located in a visible spot on each floor of the house. All fire extinguishers should be ABC rated. Some homes can have sprinkler systems installed, but usually this is cost prohibitive, especially if the home is a rental home.

Depending upon the risk level a particular participant may present with, staff should inspect any room after a participant with fire-setting behaviors leaves the room and, at a minimum, 15 minute checks on participants when they are in their rooms. It is best to vary the time between checks so as not to become predictable.

Common restrictions for fire-setters:

Combustibles – no unsupervised or no access to

Cigarettes – staff must secure for the participant

Lighters/matches – staff must secure for the participant

Accumulation – cannot accumulate combustibles

Room searches – as established by the treatment team

Person searches – as established by the treatment team

Alarms on internal doors of house – as established by the treatment team

All About Fire

What does it take for fire to work?

Definitions to promote understanding:

Ignition – items used to create the spark

Accelerants – items use to hasten the spread of the fire

Combustible – items used to build the fire

Ignition	+	Accelerants	+	Combustibles	=	FIRE
Match		Gasoline		Wood		
Lighter		Hairspray		Paper		

Fire is a chemical reaction and it takes three elements to occur:

Fuel – Any combustible material – solid, liquid or gas. Most solids or liquids become vapor before they will burn.

Oxygen – The air we breathe is about 21% oxygen. Fire only needs an atmosphere with at least 16% oxygen.

Heat – Heat is the energy necessary to increase the temperature of the fuel to a point where sufficient vapors are given off for ignition to occur.

What are the three classes of fires?

All fire extinguishers should be ABC. Description of what the A-B-C stands for follows:

Class A – Fires which involve ordinary combustibles (wood, paper, cloth, rubber, and some plastics)

Suggestion:

- *Keep storage and working areas free of trash.*
- *Place oily rags in covered containers.*

Class B – Fires which involve flammable liquids or gases (cooking oils, grease, gasoline, kerosene, paint, paint thinners and propane)

Suggestion:

- *Don't refuel gasoline-powered equipment in a confined place, especially near an open flame like a furnace or water heater.*
- *Don't refuel gasoline-powered equipment while it's hot. Start with a full tank to decrease the likelihood of needing to refuel.*
- *Keep flammable liquids tightly closed*
- *Store flammable liquids away from spark-producing sources*
- *Use flammable liquids only in well-ventilated areas.*

Class C – Fires which involve electrical equipment (appliances, switches, panel boxes, power tools)

- Suggestion:**
- *Look for old wiring, worn insulation and broken electrical fittings*
 - *Report any hazardous conditions to your supervisor.*
 - *All lighting should have covers; an uncovered light bulb can easily ignite ordinary combustibles.*
 - *Investigate any appliance or electrical equipment if it smells strange. Unusual odors can be the first sign of fire.*
 - *Don't overload wall outlets.*

Response Planning

How do I respond if something goes wrong?

- Call 911 for police and fire assistance.
- As with any fire, make sure the house is evacuated immediately using the emergency evacuation plan.
- Stop all work immediately.
- Check rooms to ensure no one is left behind.
- Stay low; crawl if necessary to avoid smoke and toxic gases.
- Cover your mouth and nose with a damp cloth to help you breathe, if possible/necessary.
- Exit quickly, but do not run.
- Close the doors behind you to try to help contain the fire. If the fire is manageable, use the fire extinguisher to stop the fire.
- Go to the pre-determined meeting place according to your disaster plan.
- Ensure all residents are accounted for and any need for First Aid is addressed.
- Do not re-enter the building until instructed to do so by appropriate personnel.
- Make sure the police/fire department checks the environment thoroughly and determines the fire is completely out.
- Notify your supervisor.
- Complete an Incident Report. Your supervisor will notify DDD about the incident.

Discussion with your supervisor may lead to a request for an arson investigator for any and all instances of smoke or fire. If the residence has been damaged due to the fire, alternate housing or temporary placement may be necessary.

There should be an agency/program internal investigation of the incident. Interview all staff and participants present prior to and during the fire. Look for patterns and signs. There may be a need to revise the participant's treatment plan to avoid further incidents.

If a participant with a history of fire-setting leaves supervision, contact your supervisor immediately and follow agency protocols.

If you believe one of the participants has engaged in fire-setting behavior during a family/ friend visit or when away from staff supervision, notify your supervisor immediately. Contact will be made with the authorities to request an arson investigator.

What do I do if I or someone else catches on fire?

You:

Stop - where you are!

Drop - to the ground, cover face with hands.

Roll - around on the ground (this will smother the flames, possibly saving your life).

Someone else:

Smother the flames with a fire extinguisher, blanket, rug or coat and encourage the person to stop, drop and roll.

Burn Care:

Staff should use their first-aid training and apply the appropriate interventions to address burn victims.

Run cool water over the burn.

Staff Training

What are the factors involved in supervising someone who sets fires?

Diligent supervision of participants with fire-setting history is the greatest deterrent to future fire-setting behavior. Staff complacency increases the risk of future fire-setting. Without the external inhibitors the staff provide, the participant is left to his/her own devices.

Consider the following:

What is real fire like?

How fast is real fire?

Fire is very hot – it can reach 1000 degrees in just 5 minutes. One breath of super-heated air can destroy your lungs and kill you. The heat from the fire can melt your clothes onto your skin. There are varied heat levels at different heights.

Fire is also dark – because of the smoke. That is why it is so important to practice the evacuation drills – you will need to find your way out as if you were blindfolded. If the house is filled with smoke, you must get down on the ground where the air is cleaner and cooler. Three out of four people die of smoke inhalation, not flames.

Fire is very fast – in just 30-60 seconds a flame can double in size and get out of control. In the time it takes for a commercial break on TV, your entire house can become engulfed by fire.

The average response time of a firefighter to the site of the fire after the 911 call is received is 4 minutes.

When and How To Extinguish a Fire

Is there a time when I should not attempt to put out the fire?

Never fight a fire if:

- *The fire is spreading beyond the spot where it started.*
- *There are people still in the building that haven't been alerted to the fire.*
- *You can't fight the fire with your back to an escape exit.*
- *The fire can block your only escape.*
- *You don't have adequate fire-fighting equipment.*

How do I extinguish small fires?

Extinguish ordinary combustible fires by cooling the material by soaking the fibers to prevent re-ignition. Use pressurized water (garden hose), baking soda, foam or multipurpose ABC-rated dry chemical fire extinguisher.

Extinguish flammable liquid fires by removing the oxygen, preventing the vapors from reaching the ignition source or inhibiting the chemical chain reaction. Use foam, carbon dioxide, ordinary ABC-rated dry chemical, multi-purpose dry chemical or halon fire extinguishers.

Extinguish energized electrical equipment fires by using an extinguishing agent not capable of conducting electrical currents. Use carbon dioxide, ordinary ABC-rated dry chemical, multi-purpose dry chemical and halon fire extinguishers.

When should I use a fire extinguisher?

- *When the fire is blocking your only means of exiting the room/facility.*
- *When the fire is blocking someone else's means of exiting their room or the facility.*
- *When someone is on fire.*
- *If the fire is small and controllable.*

When should I stop fighting the fire?

- *If your path of escape is threatened*
- *If the fire extinguisher runs out*
- *If the fire extinguisher is not helping*
- *If you are no longer able to safely fight the fire*

Additional Training Recommendations

In addition to the regular Community Protection Supported Living Program training and fire extinguisher training, it is recommended that staff training include the following:

Topical areas:

- Positive Behavior Support Principles
- Residential Service Guidelines
- Individual Instruction and Support Plans
- Staff setting and putting out a real fire
- View the video “How To Get Out Alive”

Develop a search protocol for combustibles (what to look for):

- Look for empty light bulb sockets
- Look for clothes/items close to baseboard heaters
- Look for accumulation of items/ quantity

Develop a checklist to evaluate the environment (vocational setting, worksite, new home, restaurant, etc.):

- Garage, yard is empty of debris (boxes, newspaper)
- Brush is trimmed and cut to keep away from the side of the building
- Secure, locking location for flammables (paint thinner, gasoline, etc.)

Provide structure and support to participants in order to help prevent boredom.



Confidentiality

Who can I talk to about the person I support?

The same rules surrounding confidentiality apply in these cases as with all other DDD contracted program staff. It is illegal to give out anyone's personal information without a Release of Information form signed by the person or their legal representative (guardian). You have signed a confidentiality agreement. Just because a participant has been designated as community protection does not mean you can share information about the participant with neighbors and strangers. In fact, the only people that should do disclosure are the participant's therapist, the DDD case resource manager, or program supervisor. The only people that need to know are those that will be providing services or supervision to the participant.

All potential chaperones, employers and job sites are reviewed by the therapist for approval and disclosure. It is NEVER okay for a staff person to initiate a disclosure.

As a staff person, maintaining supervision of a participant in the community will sometimes cause people to ask questions. Do not forget your responsibility for this person's confidentiality. If the person asking the question is not authorized to have the information, then respectfully inform them that you are supporting this person. You are not obligated to give any information. If there are problems, you can refer them to your administrator (give the name and the phone number for the agency).

Exceptions to this may be when there is police or fire department involvement. If the person you support managed to get away from supervision, creating a potentially unsafe situation, the police attempting to assist will need appropriate information to understand the person's support needs and level of risk to the community. Staff should always cooperate with law enforcement officers.

While working in this program, you will receive a lot of information about the individuals you support. Sometimes we are tempted to make jokes to our friends or loved ones outside of work about the participants or their behaviors. This is never permissible and is a violation of the participants' confidentiality.

Disclosure

Who should give what information when, and to whom?

Each participant's disclosure is handled on an individual basis. The therapist helps to define the scope and level of disclosure; this is often part of the person's treatment plan. If you have any questions regarding disclosure of a particular participant, be sure to ask your supervisor.

Before any information can be disclosed, a Release of Information form should be done, including a signature by the participant or his/her legal representative (guardian). Disclosure should be clearly documented as to the date, who the information is being shared with, and what information is being shared.

A special consideration for disclosure when the agency is supporting a person with a history of fire-setting includes the necessity to disclose the person's history to others who may be sharing the residence. There is a higher level of risk involved for fire in these households. Individuals sharing a home with the fire-setter have a right to know about that risk. Your supervisor may need to ensure that the safety precautions in place at the home are explained. This disclosure will extend to the housemates as well as their legal representatives (guardians).

As with all disclosure, the direct care staff should not initiate or be involved. Once again, this is at the discretion of the therapist and treatment team, and not something that an individual staff person should do.

Resources

Where can I find more information, research and resources on this topic?

Your local Fire Department and/or Fire Investigation Unit

The National Fire Protection Association (NFPA)

The Uniform Fire Code

The Fire Prevention Bureau

Websites:

www.sparky.com

www.fema.gov (Federal Emergency Management Agency)

www.accentpub.com

www.cpsc.gov (click on for kids)

Videos:

“In Their Own Words” - The Idea Bank

“The Fire” – Primetime Live segment from ABC

“Fire Power” – NFPA

“Plan to Get-out Alive” – Ronald McDonald House

“Learn Not To Burn” – NFPA (available in English and Spanish)

“In a Flash: The Consequences of Fire-setting” – Syndistar, Inc.

Books:

“Drawn to the Flame” by Robert F. Stadolnik

Forms:

Pre-Placement Agreement

Challenge Questions

1. What color is the smoke in a residential/commercial fire?

White

Grey

Black

2. Having a functioning smoke detector can save a life.

True

False

3. How often should the batteries in a smoke detector be tested?

Daily

Weekly

Monthly

4. The safest time frame to exit during a fire drill is:

3 minutes

60 seconds

5 minutes

5. How often should a fire plan be practiced?

Once a year

Once a month

Once a quarter

Once a week

6. What are some of the primary reasons a CP participant might set a fire?

7. What are the 4 main categories of fire-setters?

8. If the smoke alarm goes off because of burnt toast do you (circle what is appropriate):

Tell the participants not to worry

Use the fire extinguisher

Exit the premises

Take the battery out of the smoke alarm temporarily

9. Where is the nearest fire extinguisher at your work site?

10. Where are all the fire exits at your work site?

11. What are the three elements needed to produce fire?

12. How long can a cigarette smolder before bursting into flames?

15 minutes

30 minutes

1 hour

3 hours or more

