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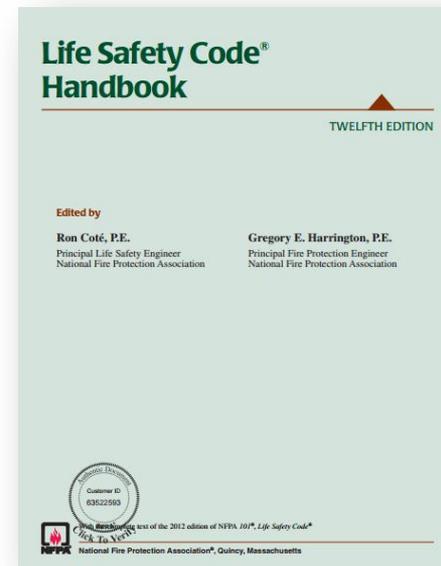
# Life Safety Code Transition Overview

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*Disclaimer: This document is intended to provide general information; it is not a comprehensive outline of all Life Safety Code changes, nor is it or is it intended to be legal advice. It does not replace regulations, statutes, or official CMS policy and may not reflect current policy. Additional federal, state, and local requirements may apply. Contact your AHJ for further details regarding how these regulations may apply to your particular facility.*

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# Life Safety Code Transition Overview



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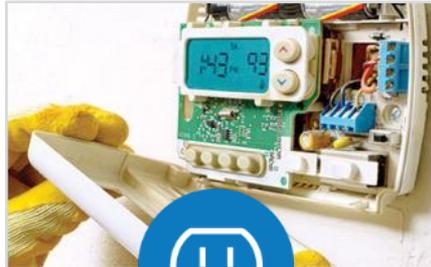
# TELS Building Services simplifies code-related daily maintenance and large projects



HVAC



Plumbing



Electrical



Drain Cleaning



Landscaping



Snow Removal



Refrigeration



Kitchen

# The 2012 Life Safety Code: Decoded



## GO TAGLESS – Crack the 2012 Life Safety Code!



### OUTSIDE WINDOW OR DOOR REQUIREMENTS

Sections 20.3.5 and 213.5

**Provision:** Every health care occupancy patient sleeping room must have an outside window or outside door.

**Solution:** Inspect and install if needed.



### SPRINKLERS

Section 32.2.3.5.3.2

**Provision:** Requires sprinkler systems installed in all hall areas, closets, rooftop porches, balconies and decks of occupancies for NFPA 13D and 13R systems.

**Solution:** Sprinkler system requirements.



### DOORS

Sections 20.3.2.1 and 213.2.1

**Provision:** All doors to hazardous areas should be self or close automatically.

**Solution:** A monthly inspection of doors to hazardous help ensure they are self-closing or closing automatic.



### ATTICS

Sections 32.2.3.5.7 and 33.2.3.5.7

**Provision:** Requires most attics to be sprinkled.

**Solution:** Start planning/budgeting efforts to put sprinkler place where needed.

For expert assistance in staying compliant with



### SMOKE ALARMS

Section 32.3.3.4.7

**Provision:** Newly constructed facilities only – requires approved



## GO TAGLESS – Crack the 2012 Life Safety Code!



### EXTINGUISHMENT REQUIREMENTS

Sections 20.3.5 and 213.5

**Provision:** Requires evacuation of a building or fire watch when a sprinkler system is out of service for more than 10 hours.

**Solution:** Revise plans to ensure evacuations or fire watch is done when the sprinkler system is down more than 10 hours.



### ANESTHETIZING LOCATIONS

Section 18.3.2.3 and 19.3.2.3

**Provision:** Anesthetizing locations must be arranged to automatically vent smoke and products of combustion prevent circulation of smoke.

**Solution:** An annual facility inspection will help ensure anesthetizing locations are arranged to automatically vent smoke and products of combustion to prevent circulation of smoke.



### CORRIDORS

Sections 18.2.3.4 and 19.2.3.4

**Provision:** Allows wheelchairs and lifts to be kept in corridors for more timely patient care. Permits fixed furniture width corridor widths are sufficient.

**Solution:** Wheelchairs and lifts can be kept in corridors

For expert assistance in staying compliant with



### COOKING FACILITIES

Sections 18.3.2.5 and 19.3.2.5

**Provision:** Cooking facilities are allowed in a smoke



## GO TAGLESS – Crack the 2012 Life Safety Code!

The 133-page original publication reviews the full history, definitions and provisions for adopting the 2012 code. This document provides a high-level summary of the provisions. For a more comprehensive overview, visit the following website:  
<https://www.federalregister.gov/articles/2016/05/04/2016-10043/medicare-and-medicaid-programs-fire-safety-requirements-for-certain-health-care-facilities>



### CORRIDOR PROJECTIONS

Sections 18.2.3.4(2) and 19.2.3.4(2)

**Provision:** Non-continuous projections may not be more than 6 inches from the corridor wall (ADA requirements of no more than 4 inches).

**Solution:** An annual facility inspection will help ensure items attached to walls in corridors are not projecting more than 4 inches.



### RECYCLING

Sections 18.75.72 and 19.75.72

**Provision:** Recycling containers limited to max capacity of 96 gallons unless in a hazardous materials room.

**Solution:** An annual facility inspection will help ensure recycling containers do not exceed max capacity of 96 gallons.



### ROLLER LATCHES

Sections 18.3.6.3.8.1 and 19.3.6.3.5

**Provision:** Roller latches are most likely not allowed on doors but will require a positive latching device instead.

**Solution:** Annual inspection to switch out roller latches.



### SPRINKLERS IN HIGH-RISE BUILDINGS

Sections 18.4.2 and 19.4.2

**Provision:** Any facilities that are high-rise will be required (in 12 years) to be fully sprinkled.

**Solution:** Start planning/budgeting efforts to put sprinklers in place where needed.



### DOOR LOCKING

Sections 18.2.2.5.2 and 19.2.2.5.2

**Provision:** Interior doors may be locked as long as (1) staff has keys (2) smoke detection is in place (3) fully sprinkled (4) locks that are electrical can be released (5) locks release by smoke detection or waterflow. Also, more than one delayed egress door can be located along the egress path.

**Solution:** Buildings can now install locked doors if they follow requirements outlined.



### ALCOHOL-BASED HAND RUBS

Sections 18.3.2.6 and 19.3.2.6

**Provision:** Allows alcohol-based hand rub dispensers in health care facilities as long as they follow requirements.

**Solution:** Buildings can now install dispensers.

For expert assistance in staying compliant with the Life Safety Code, call TELS at 1-800-667-3880 today.

# Welcome



- This webinar is designed to help you and your community transition from using the 2000 edition of the Life Safety Code (LSC) to the 2012 edition
- The 2012 edition of LSC (NFPA 101) will be the only edition of the Life Safety Code (LSC) used when performing CMS fire safety surveys to certify health care facilities to receive Medicare and Medicaid reimbursement
- This document is based on the CMS Transition course for surveyors available in its entirety here:  
[http://surveyortraining.cms.hhs.gov/pubs/CourseMenu.aspx?cid=0CMSLSCTC\\_PROVIDER](http://surveyortraining.cms.hhs.gov/pubs/CourseMenu.aspx?cid=0CMSLSCTC_PROVIDER)

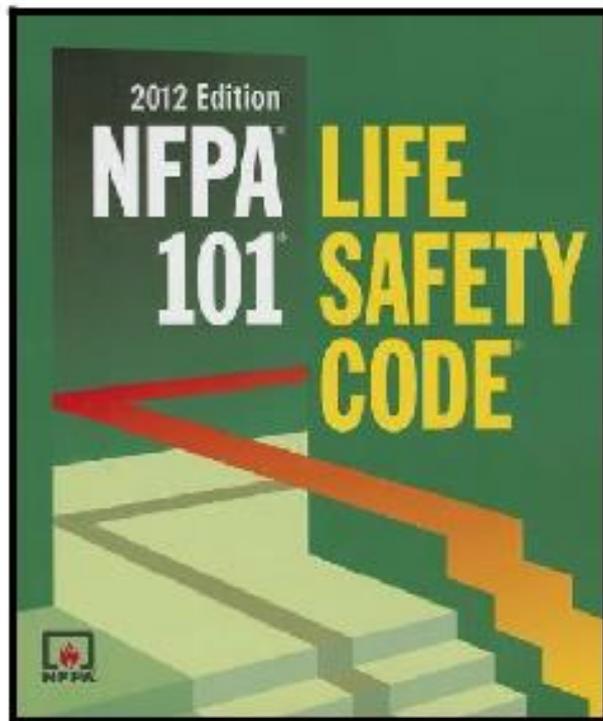
# Welcome



- Today, we'll cover the sections of Policy and Regulation as well as Health Care Occupancies
- In future webinars, we will address Ambulatory Health Care Occupancies; Residential Board and Care Occupancies; Building Rehabilitation; NFPA 99

# NFPA eliminated the use of exceptions in the in the LSC and created great resources

- Provides greater consistency
- Improves ease of reading
- Utilize the Life Safety Code 2000 and 2012 Quick Compare Tool to see Code changes



**NATIONAL FIRE PROTECTION ASSOCIATION**

The leading information and knowledge resource on fire, electrical and related hazards

# Resource: Reference and download a Life Safety Code Glossary on CMS' website

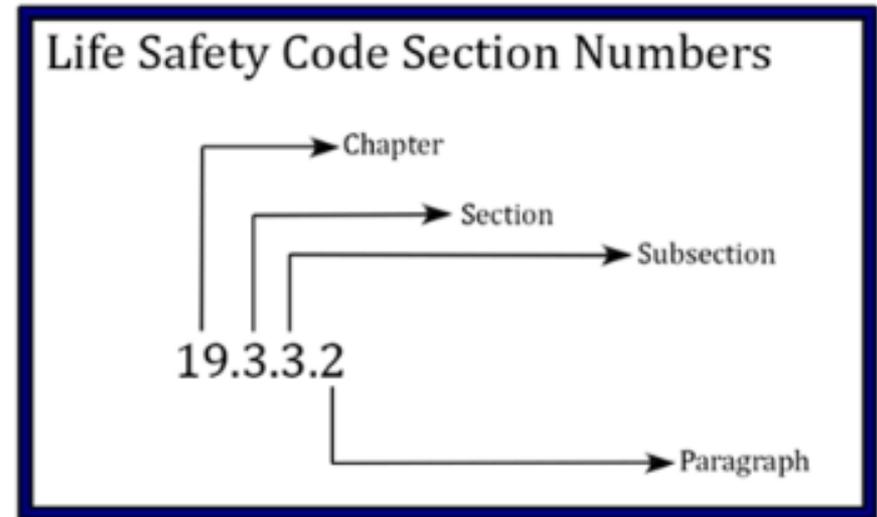
Term	Definition
Accreditation	Recognition that a provider meets standards set by a national accrediting organization such as the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).
AHC	Ambulatory Healthcare Centers (see separate definition)
AHJ	Authority Having Jurisdiction (see separate definition)
Ambulatory Healthcare Centers	What the Centers for Medicare & Medicaid Services (CMS) refers to as "ambulatory surgical centers" (ASCs), the LSC refers to as "ambulatory healthcare centers" (AHCs).
Ambulatory Surgical Centers	A place other than a hospital that does outpatient surgery. At an ambulatory (in and out) surgery center, you may stay for only a few hours or for one night.
American Osteopathic Association	An organization whose member hospitals have deemed status for Medicare certification.
Anesthetizing Areas	Areas within healthcare facilities where anesthesia is administered.
Annular Space	For the purposes of fire protection, annular space is the ring shaped space or gap around the outside of a pop, duct, chute, or other penetration of a wall or floor.
ANSI	American National Standards Institute, a group that promulgates testing and acceptance standards for industry.
AOA	American Osteopathic Association (see separate definition)
Approved	Acceptable to the authority having jurisdiction (AHJ).
ASC	Ambulatory Surgical Center (see separate definition)
ASTM	American Society of Testing and Materials - an organization to establish test standards for materials
Astragal	An astragal is a projecting strip on the edge of one door in a pair of doors. It is designed to form a seal to limit smoke spread through the opening between the two doors.
Atrium	A floor opening or series of floor openings connecting two or more stories that is covered at the top of the series of openings and that is used for purposes other than an enclosed stairway
Authority Having Jurisdiction	The organization, office, or individual responsible for approving equipment, materials, an installation, or a procedure.
Automatic Transfer Switch	Equipment for transferring electrical loads from one power source to another power source.
Auxiliary Fire Alarm System	Used only in connection with a public fire alarm reporting system that is approved for the service. This type of system depends on the public fire alarm reporting system to transmit alarm signals from the protected premises to the public fire service communications center.
BLSC	Basic Life Safety Code - the name given to this course by CMS.
CAH	Critical Access Hospital (see separate definition)
Capacity of Means of Egress	The number of people an egress component can serve.
Central Station	An approved location at which fire alarm systems are monitored.
CEU	Continuing Education Unit

<http://surveyortraining.cms.hhs.gov/Courses/915/5f8a19a5-0771-e611-b12d-90e2ba614aa5/Resources.pdf>

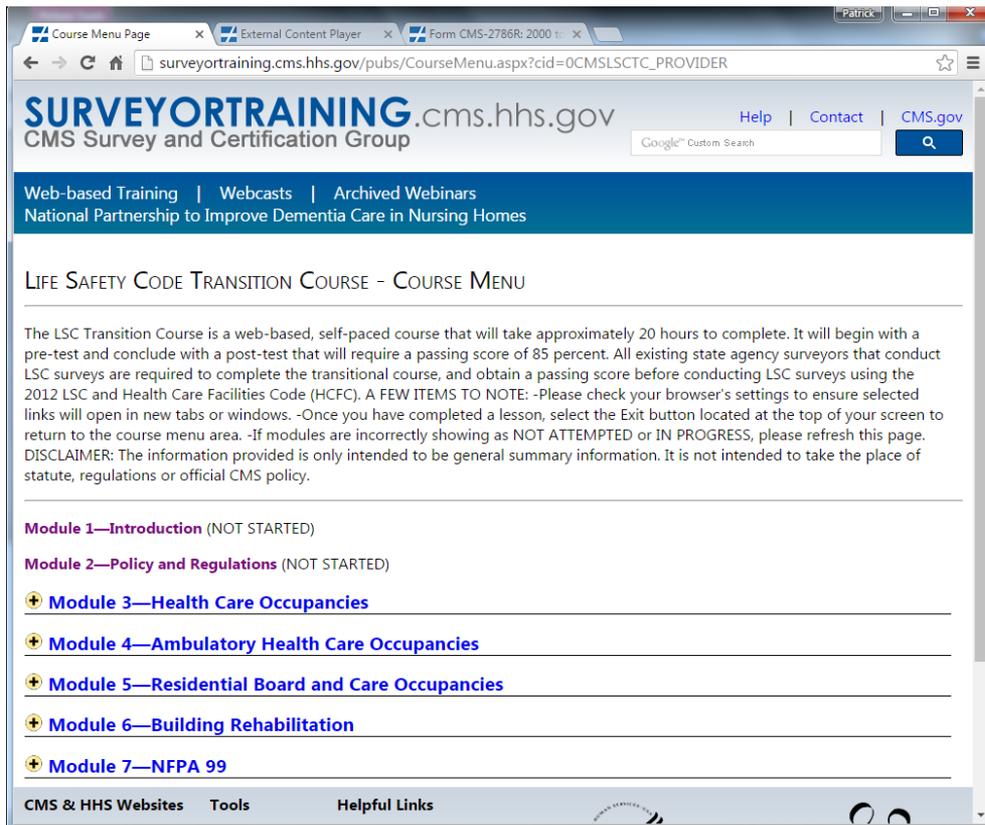
**TIP:** You can search for a specific term by selecting Control + F on your keyboard

# LSC numbering scheme contains numbers separated by periods

- The first number directs you to the **CHAPTER** of the LSC
- The second number indicates the **SECTION**
- The third number shows the **SUBSECTION**
- The fourth number indicates the **PARAGRAPH**



# New K-tag numbering system can be found on CMS' website



## K-TAGS

Under the new K-tag numbering system, the K-tags in the following table are related to rehabilitation.

K-tag Number	K-tag Title	K-tag Description
K111	<b>Building Rehabilitation</b>	<p><b>Repair, Renovation, Modification, or Reconstruction</b> Any building undergoing repair, renovation, modification, or reconstruction complies with both of the following:</p> <ul style="list-style-type: none"> <li>• Requirements of Chapter 18 and 19</li> <li>• Requirements of the applicable Sections 43.3, 43.4, 43.5, and 43.6</li> </ul> <p>18.1.1.4.3, 19.1.1.4.3, 43.1.2.1</p> <p><b>Change of Use or Change of Occupancy</b> Any building undergoing change of use or change of occupancy classification complies with the requirements of Section 43.7, unless permitted by 18.1.1.4.2 or 19.1.1.4.2</p> <p>18.1.1.4.2 (4.6.7 and 4.6.11), 19.1.1.4.2 (4.6.7 and 4.6.11), 43.1.2.2 (43.7)</p> <p><b>Additions</b> Any building undergoing an addition shall comply with the requirements of Section 43.8. If the building has a common wall with a nonconforming building, the common wall is a fire barrier having at least a 2-hour fire resistance rating constructed of materials as required for the addition.</p> <p>Communicating openings occur only in corridors and are protected by approved self-closing fire doors with at least a 1½-hour fire resistance rating. Additions comply with the requirements of Section 43.8.</p> <p>18.1.1.4.1 (4.6.7 and 4.6.11), 18.1.1.4.1.1 (8.3), 18.1.1.4.1.2, 18.1.1.4.1.3, 19.1.1.4.1 (4.6.7 and 4.6.11), 19.1.1.4.1.1 (8.3), 19.1.1.4.1.2, 19.1.1.4.1.3, 43.1.2.3(43.8)</p>
K112	<b>Sprinkler Requirements for Major Rehabilitation</b>	<p>If a nonsprinklered smoke compartment has undergone major rehabilitation the automatic sprinkler requirements of 18.3.5 have been applied to the smoke compartment.</p> <p>In cases where the building is not protected throughout by a sprinkler system, the requirements of 18.4.3.2, 18.4.3.3, and 18.4.3.8 are also met.</p> <p>Note: Major rehabilitation involves the modification of more than 50 percent, or more than 4500 ft<sup>2</sup> of the area of the smoke compartment.</p> <p>18.1.1.4.3.3, 19.1.1.4.3.3</p>

[http://surveyortraining.cms.hhs.gov/pubs/ClassInformation.aspx?cid=0CMSLSCTC\\_PROVIDER](http://surveyortraining.cms.hhs.gov/pubs/ClassInformation.aspx?cid=0CMSLSCTC_PROVIDER)

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# **Life Safety Code Transition Overview**

## Policy and Regulation

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# CMS is replacing LSC 2000 with the LSC 2012 edition

- CMS is adopting the 2012 edition of the LSC
- 2000 edition will no longer be used
- CMS is adopting the 2012 edition of the NFPA 99 (HCFC) for the first time

# Key Dates for LSC 2012

- Final regulation published: **May 4, 2016**
- Final regulation effective date: **July 5, 2016**
- Implementation date to begin surveying by States and Regional Offices (ROs): **November 1, 2016**

# Effective Date of **July 5, 2016** determines whether the facility is surveyed as “new” or “existing”

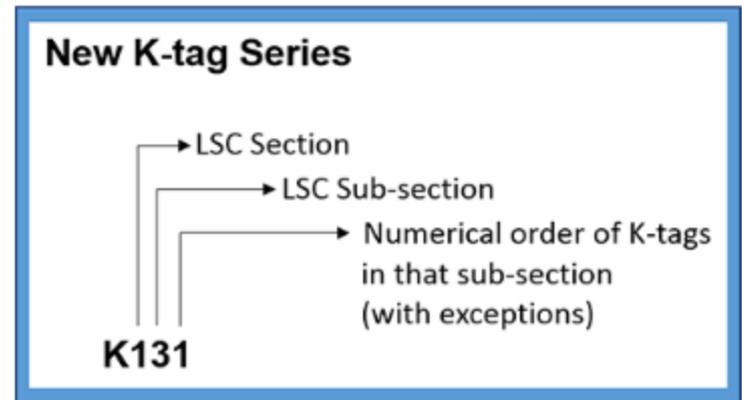
- Facilities with plan approval on or before July 5, 2016, or constructed / renovated before the effective date, are considered to be an “existing” facility
- Chapter 19 applies
- Facilities with plan approval after July 5, 2016, or constructed / renovated after the effective date, are considered to be a “new” facility
- Chapter 18 applies

Implementation date, November 1, 2016, is when States and Regional Offices (ROs) begin surveying with the 2012 edition of LSC and NFPA 99 (HCFC)

- Will be used to complete surveys of CMS certified facilities
- States will use new forms to perform these surveys that have been updated to contain the appropriate 2012 Code language
- States should review whether the facility is to meet the requirements of a “new” or “existing” occupancy chapter before starting the survey

# New K-tag series for the CMS-2786 forms have been revised as part of the 2012 LSC updates

- First digit represents the Code section
- Second digit represents the Code sub-section
- Third digit indicates the numerical order in which that K-tag is listed in the Sub-section



# K-tag crosswalks have been developed for each CMS-2786 form to provide a reference to the updates

- K-tag will be listed as either:

- New
- Deleted
- Converted to a new tag

2000 Tag #	2000 Page #	2000 Language	2012 Tag #	2012 Page #	2012 Language	Added	Deleted	Converted	
K12	2	2000 EXISTING Building construction type and height meets one of the following: 18.1.6.2, 19.1.6.3, 19.1.6.4, 19.3.5.1 1 I (443), I (332), II (222) Any Height 2 II (111) One story only (non-sprinklered) 3 II (111) Not over two stories with complete automatic sprinkler system 4 II (211) Not over two stories with complete automatic sprinkler system 5 V (151) Not over two stories with complete automatic sprinkler system 6 IV (24H) Not over two stories with complete automatic sprinkler system 7 II (000) 8 II (200) Not over one story with complete automatic sprinkler system 9 V (000) Not over one story with complete automatic sprinkler system Building contains fire-retardant-treated wood Give a brief description, in REMARKS, of the construction, the number of stories, including basements, floors on which patios are located, location of smoke or fire barriers and dates of approval. Complete sketch or attach small floor plan of the building as appropriate.	K161	4	Building Construction Type and Height 2012 EXISTING Building construction type and stories meets Table 19.1.6.1, unless otherwise permitted by 19.1.6.2 through 19.1.6.7, 19.3.4, 19.1.6.9 1 I (442), I (332), II (222) Any number of stories (non-sprinklered and sprinklered) 2 II (111) One story (non-sprinklered) ≤ 3 stories (sprinklered) 3 II (000) No stories (non-sprinklered) ≤ 2 stories (sprinklered) 4 III (211) No stories (non-sprinklered) ≤ 2 stories (sprinklered) 5 IV (24H) No stories (non-sprinklered) ≤ 2 stories (sprinklered) 6 V (151) No stories (non-sprinklered) ≤ 2 stories (sprinklered) 7 II (000) No stories (non-sprinklered) ≤ 1 story (sprinklered) 8 V (000) No stories (non-sprinklered) ≤ 1 story (sprinklered) Sprinklered stories must be sprinklered throughout by an approved, supervised automatic system in accordance with section 9.7. (See 19.3.3) Give a brief description, in REMARKS, of the construction, the number of stories, including basements, floors on which patios are located, location of smoke or fire barriers and dates of approval. Complete sketch or attach small floor plan of the building as appropriate.				X
K12	3	2000 NEW Building construction type and height meets one of the following: 18.1.6.2, 18.1.6.3, 18.3.5.1 1 I (443), I (332), II (222) Any height with complete automatic sprinkler system 2 II (111) Not over three stories with complete automatic sprinkler system 3 II (211) Not over one story with complete automatic sprinkler system 4 II (151) Not over one story with complete automatic sprinkler system 5 IV (24H) Not over one story with complete automatic sprinkler system 6 II (000) Not over one story with complete automatic sprinkler system 7 II (200) Not permitted 8 V (000) Not permitted Building contains fire-retardant-treated wood Give a brief description, in REMARKS, of the construction, the number of stories, including basements, floors on which patios are located, location of smoke or fire barriers and dates of approval. Complete sketch or attach small floor plan of the building as appropriate.	K161	5	Building Construction Type and Height 2012 NEW Building construction type and stories meets Table 18.1.6.1, unless otherwise permitted by 18.1.6.2 through 18.1.6.7, 18.1.6.4, 18.1.6.5 I (442), I (332), II (222) No stories (non-sprinklered), Any number of stories (sprinklered) II (111) No stories (non-sprinklered) ≤ 3 stories (sprinklered) III (000) No stories (non-sprinklered) ≤ 1 story (sprinklered) IV (211) No stories (non-sprinklered) ≤ 1 story (sprinklered) V (151) No stories (non-sprinklered) ≤ 1 story (sprinklered) VI (000), V (000) No stories permitted Sprinklered stories must be sprinklered throughout by an approved, supervised automatic system in accordance with section 9.7. (See 18.3.3) Give a brief description, in REMARKS, of the construction, the number of stories, including basements, floors on which patios are located, location of smoke or fire barriers and dates of approval. Complete sketch or attach small floor plan of the building as appropriate.				X
N/A	N/A	N/A	K162	5	Roofing Systems Involving Combustibles Buildings of Type I (442), (332) or Type II (222), or Type III (111) having roof systems employing combustible roofing supports, decking or roofing meet the following: 1. roof decking meets Class C requirements 2. roof is separated from occupied building portions with 2-hour fire resistive noncombustible fire assembly using not less than 2-1/2 inches concrete or gypsum III 3. attic or other space is either unoccupied or protected throughout by an approved automatic sprinkler system 18.1.6.2*, ASTM E136, ANDULS, 799				X

- CMS 2786R is available on CMS' website

- [http://surveyortraining.cms.hhs.gov/Courses/915/5f8a19a5-0771-e611-b12d-90e2ba614aa5/2786R\\_crosswalk.pdf](http://surveyortraining.cms.hhs.gov/Courses/915/5f8a19a5-0771-e611-b12d-90e2ba614aa5/2786R_crosswalk.pdf)



# LSC TIA Adoption

- 12-2: The changes to allow residential or commercial cooking equipment open to the corridor
- 12-4: The changes to door locking arrangements
- Applicable to the 2012 LSC, CMS has adopted Tentative Interim Amendments 12-1, 12-2, 12-3 and 12-4
- Accessible for free here:  
<http://www.nfpa.org/codes-and-standards/resources>

# Regulation for waivers has been updated based on the CMS adoption of the 2012 editions of LSC and HCFC (NFPA 99)

## Life Safety Code Waivers

If application of the LSC would result in unreasonable hardship for the facility (except Residential Board and Care facilities unless meeting health care chapters), CMS may waive specific provisions of the LSC, but only if the waiver does not adversely affect the health and safety of residents

## NFPA (HCFC) Waivers

If application of the NFPA 99 (HCFC) would result in unreasonable hardship for the facility (except Residential Board and Care facilities unless meeting the health care chapters), CMS may waive specific provisions of the NFPA 99 (HCFC), but only if the waiver does not adversely affect the health and safety of residents

# Updates to CMS Procedures for Providers: LTC and Hospice

1. Must meet the applicable (Healthcare Occupancy) provisions of the LSC and the NPFA 99 (HCFC)
2. Corridor doors and doors to rooms containing flammable or combustible materials must be provided with positive latching hardware
3. Roller latches are prohibited
4. Alcohol-based hand rub (ABHR) dispensers must be installed to prevent against inappropriate access

# Updates to CMS Procedures for Providers: LTC and Hospice

5. When a sprinkler system is shut down for more than 10 hours, the LTC or Hospice facility must: Evacuate the building or portion of the building affected by the system outage until the system is back in service, or establish a fire watch until the system is back in service.
6. Buildings must have an outside window or outside door in every sleeping room.
7. For new construction, the window sill must not exceed 36 inches above the floor. This is a continuation of existing requirements.
8. Windows in atrium walls are considered outside walls for the purposes of #6 and #7. The atrium is to be the outside of the building not an interior atrium.

# Fire Safety Evaluation System (FSES) Has Been Updated

- CMS is replacing the current Fire Safety Evaluation System (FSES), NFPA 101A edition (2001) with the 2013 edition of FSES, NFPA 101A
- It will be effective on the implementation date of the regulation adopting the 2012 edition of the LSC (July 5, 2016) – surveying to begin November 1, 2016

# Americans with Disabilities Act (ADA)

- CMS does expect compliance with the requirements as additional Federal requirements that facilities are required to follow
- Example: corridor projections where the LSC allows a noncontiguous projection to be no more than six inches from the corridor wall. In [Section 307](#) of the “ADA Accessibility for Buildings and Facilities” requires that projections be not more than four inches from the corridor wall. Facilities are required to meet this more stringent requirement set forth by the ADA

# Risk Assessment Procedure

- CMS has adopted the NFPA 99 (HCFC) in particular Section 4.2, which requires each facility that is a health care or ambulatory occupancy to:
  - Define risk assessment methodology
  - Implement the methodology
  - Document the results in relation to the risk categories contained in the NFPA 99 (HCFC)
- CMS did not require the use of any particular risk assessment procedure as long as it meets the needs within the requirements of the NFPA 99 (HCFC)

# Reminder

- Date to determine “new” and “existing” occupancies for survey purposes was July 5, 2016
- Implementation date to begin surveys of facilities using the 2012 LSC and NFPA 99 (HCFC) is November 1, 2016
- Waivers can be granted under certain circumstances
- Questions concerning the LSC and be sent to **SCG\_LifeSafetyCode@cms.hhs.gov**

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# Life Safety Code Transition Overview

Submit your questions via the Q&A box

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# Life Safety Code Transition Overview

## Health Care Occupancies

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# Definition of Major and Minor Rehabilitation

**Rehabilitation** is the remodeling, modifying, repairing, and changing of healthcare facilities.

- Major rehabilitation is the modification of
  - More than 50% of the area of a smoke compartment, or,
  - More than 4,500 sq ft of the area of a smoke compartment
- Minor rehabilitation is the modification of:
  - Not more than 50% of the area of a smoke compartment, or
  - Not more than 4,500 sq ft of the area of a smoke compartment

LSC Section 18/19 1.1.4.3.1(1)

K-tags that apply to building rehabilitation are K111 and K112

The following rehab work not included in the computation of the modification area within the smoke compartment:

- Plumbing
- Mechanical
- Fire protection system
- Electrical
- Medical gas
- Medical equipment

# Life Safety Code Section 18.3.5

- All Nursing Home facilities must meet the requirements of 18.3.5 and Survey & Certification (S&C) Letter
- As of August 2013 all Nursing Home facilities must be fully sprinklered

# Key Points:

## Health Care Occupancies - Construction Requirements

- K163 is the K-tag related to interior nonbearing wall construction
- Fire-retardant treated wood (FRTW) applies to new and existing facilities
- There are three new sections in the LSC regarding the use FRTW in health care occupancies:
  - Allows a roof/ceiling assembly to be constructed of FRTW, meeting the requirements of NFPA 220, Standard Types of Building Construction (18/19.1.6.3(2))
  - Interior nonbearing walls that are required to be at least two-hour, fire-resistance rated may be constructed of FRTW if enclosed inside noncombustible or limited-combustible materials are allowed (18/19.1.6.5)
  - The use of FRTW is allowed to support fixtures and equipment when it is installed behind noncombustible or limited-combustible sheathing (18/19.1.6.6)

# Health Care Occupancies: Construction Requirements

- FRTW can be used behind sheathing to support wall-mounted medical equipment and behind two-hour fire-resistance sheathing in interior non-load bearing walls
- Potential uses include: Wall-mounted kiosks, TVs, oxygen, etc.

# Health Care Occupancies – General Requirements and Components of Means of Egress

- LSC Sections 7.2.1.14 and 18/19/2.2.2.10.2 outline the provisions for horizontal-sliding doors
- Fire-rated door assemblies and smoke door assemblies and some other doors must be tested and inspected annually (7.2.1.15) – written records must be kept
- K211, K222, K224, K225, and K226 are the K-tags that pertain to the components of means of egress

# Health Care Occupancies – Means of Egress Door Locking

## Special locking arrangements

1. Delayed Egress – LSC 7.2.1.6.1
2. Access Control – LSC 7.2.1.6.2
3. Elevator Lobbies – LSC 7.2.1.6.3
4. Resident Needs – LSC 18.2.2.2.5.2/19.2.2.2.5



## Common locking arrangement requirements

- Fully sprinklered (1 - 4)
- Locks release upon smoke detection (1 - 4)
- Locks release upon sprinkler waterflow (1 - 4)
- Locks fail safe upon loss of power (1 - 4)
- Staff can readily unlock door at all times (1 - 4)
- Complete smoke detection system throughout locked space (3 & 4)

# Health Care Occupancies – Capacity of Means of Egress

- LSC Sections 18/19.2.3.4(2) outline the allowance for noncontiguous projections in corridors
- LSC Sections 18.2.3.4(4) and 19.2.3.4(4) outline the provisions for the storage of wheeled equipment in corridors
- LSC Sections 18.2.3.4(5) and 19.2.3.4(5) state the provisions for fixed furniture in corridors
- LSC Section 18.2.3.4 outlines the provisions for cross-corridor door openings in health care occupancies classified as “new”
- K-tags associated with capacity of means of egress are K231, K232 and K233

# Health Care Occupancies – Corridor Obstructions

- LSC Sections 18/19.2.3.4(4 & 5)
- Wheeled equipment cannot reduce clear width to less than 60 inches and limited to equipment in use, medical emergency equipment and resident transport
- Fixed furniture permitted where separated by 10', only located on one side of corridor, securely attached to wall/floor, does not reduce clear width to less than 72 inches (min. 8' corridor req.)

# Health Care Occupancies – Number of Means of Egress

- LSC Section 18/19.2.4.2 states that every story must be provided with no less than two exits
- LSC Section 18/19.2.4.3 clarifies that every part of every story must have access to two separate exits
- LSC Section 18/19.2.4.4 requires that each smoke compartment must have no less than two exits
- LSC Section 18/19.2.4.4 also states the provision for egress through adjacent smoke compartments
- K241 is the K-tag for the number of means of egress

# Health Care Occupancies – Travel Distance to Exits

- Travel distance in any sprinklered building to an exit must not exceed 200 feet
- Travel distance from any point in a healthcare resident sleeping room (sprinklered or nonsprinklered) to an exit access door must not exceed 50 feet
- K261 is the K-tag that applies to travel distance to exits

# Health Care Occupancies – Protection for Vertical Openings

- There were no substantive changes to the vertical openings requirements in the *Protection* section of the 2012 edition of the Life Safety Code
- K-tags associated with vertical openings are K223 and K311

# Health Care Occupancies – Protection from Hazardous Areas

- Interior wall and ceiling finishes in “existing” facilities may be either Class A or B. If sprinklers protect the “existing” facility, then it can have Class C finishes
- All interior floor finishes must comply with LSC Section 10.2.7.1 and 10.2.7.2
- Interior floor finishes in “new” buildings in exit enclosures, exit access corridors and the spaces that connect to the exit access corridor or exit enclosure (unless separated by walls) must meet a Class I or II classification
- There are no restrictions on floor finishes for “existing” facilities

Classification	Flame Spread	Smoke
Class A	0-25	18
Class B	26-75	0-450
Class C	76-200	0-450

# Health Care Occupancies – Protection from Hazardous Areas

## Hazardous Areas

- Volume thresholds for soiled linen and trash collection rooms have been set at 64 gallons. If you want to store more than 64 gallons, the room needs to meet the requirements for hazardous area.

## Food Warming

- Areas with residential cooking equipment used for food warming or limited cooking (microwaves, toasters and hot plates) are not automatically classified as hazardous areas

## Conventional Cooking Area

- The presence of commercial cooking equipment doesn't make the room to be a hazardous area. As long as it has an extinguishment system meeting NFPA 96 and LSC 9.2.3 and is not open to the corridor, it is not considered to be a hazardous area. It does not need the 1-hour separation or sprinkler protection

# Health Care Occupancies – Protection from Hazardous Areas

## Cooking Facilities Open to a Corridor

- Additional requirements/allowances can be found at:  
<http://www.nfpa.org/Assets/files/AboutTheCodes/101/TIA101-12-2.pdf>
  
- ‘New’ or ‘Existing’ can now do cooking in a smoke compartment with 30 or less residents/beds as long as:
  - fully sprinklered in accordance with NFPA
  - separated by appropriate smoke barrier from other smoke compartments
  - kitchen hood covers entire cooking surface and collects grease and cleaning means
  - hood must be able to do a minimum of 500 cfm
  - if not ducted to outside, hood has to be charcoal filter
  - cook-top area protected by system rated UL300 and UL300A extinguishing system has manual release device per NFPA96
  - extinguishing system has interlock to shut off all gas and electrical power when the suppression system activates per NFPA96

# Health Care Occupancies – Protection from Hazardous Areas

- 'New' or 'Existing' can now do cooking in a compartment with 30 or less residents/beds as long as (continued)
  - need to have portable fire extinguishers rated for kitchen per NFPA96
  - switch to deactivate the cook-top range when not under staff supervision
    - the switch must be located in a restricted location or locked from resident access
    - the switch must be on a timer and automatically shut off after 120 mins
  - have set procedures in place for inspection, testing and maintenance of the fire suppression/hood per NFPA96, Ch 11
  - 2 AC powered photoelectric smoke alarms no closer than 20 ft from the cook-top/range
    - must be interconnected
    - must have silence feature
    - per NFPA 72
  - detectors no closer than 20 ft from cook-top
  - no deep fat frying
  - no solid fuel cooking
- The intent of the placement of the detectors is to allow the staff time to be able to silence the alarms in event of a false alarm, preventing the activation of the buildings smoke detection system

# Health Care Occupancies – Protection from Hazardous Areas

1. Volume amounts for soiled linen and trash collection are 64 gallons
2. Under certain conditions, facilities can have cooking operations open to a corridor
3. Facilities must protect ABHR dispensers as flammable liquids or gasses in accordance with LSC Section 8.7.3.1, unless meeting certain conditions
4. Interior wall and ceiling finishes in 'new' facilities may be either Class A or B
5. Interior wall and ceiling finishes in 'existing' facilities may be either Class A or B. If sprinklers protect the 'existing' facility, then it can have Class C finishes
6. All interior floor finishes must comply with LSC Section 10.2.7
7. Interior floor finishes in 'new' buildings in exit enclosures, exit access corridors and the spaces that connect to the exit access corridor or exit enclosure (unless separated by walls) must meet a Class I or II classification
8. There are no restrictions on floor finishes for 'existing' facilities

# Health Care Occupancies – Protection from Hazardous Areas

You may use **Alcohol Based Hand Rub Dispensers** as long as these rules are met

- when in a corridor, it must be at least 6 ft wide
- maximum amount in each dispenser is 0.32 gallons in rooms, corridors, and areas open to corridors; 0.53 gallons for suites of rooms
- aerosol containers can only have a maximum of 18 oz and only level 1 aerosol product
- dispensers need to be horizontally spaced no less than 48 inches
- an entire smoke compartment cannot have more than 10 gallons of ABHR or 1,135 oz of level 1 aerosol
- only one dispenser per room and it does not count toward your max in the smoke compartment
- if you have more than 5 gallons in a smoke compartment, you need to follow NFPA 30
- you cannot have dispensers 1 inch above, beneath or on either side of an ignition source
- if you have a dispenser on carpeted areas, you must be sprinklered
- the ABHR solution can't exceed 95% alcohol

# Health Care Occupancies – Fire Alarm Systems

- Although the 2012 now allows for up to 10 hours of a fire sprinkler being out of service this extension from the four hours was NOT applied to the outage of a Fire Alarm System. A fire watch must be implemented if the fire alarm system is out of service for four or more hours and the AHJ must be notified. The same actions must occur if a sprinkler systems out of service for more than 10 hours in a 24-hour period.
- NFPA 72 defines a “positive alarm sequence” as “an automatic sequence that results in an alarm signal, even when manually delayed for investigation, unless the system is reset.” (e.g., smoke detector activates)
- 2012 LSC allows facilities use of a positive alarm sequence in the fire alarm system of a fully sprinkler-protected building in both “new” and “existing” buildings
- During a positive alarm sequence, the facility must acknowledge the alarm signal at the control unit within 15 seconds or the fire alarm system will activate
- During a positive alarm sequence once the alarm is acknowledged, a facility has 180 seconds to investigate and confirm the fire condition or reset the system

# Health Care Occupancies – Sprinkler Protection Requirements

- As of August 2013, CMS required Nursing Homes to be fully sprinklered
- 2012 LSC now requires sprinkler protection of buildings containing nursing homes
- Facility must evacuate the building or put in place a fire watch policy if the sprinkler or fire system has been out of service for more than 10 hours – local requirements may differ, confer with your AHJ
- Buildings containing Nursing Home facilities must be protected with a sprinkler system installed per the requirements of NFPA 13
- K351 is the K-tag that applies to sprinkler protection

# Health Care Occupancies – Corridors

- The gift shop requirements are now in the Corridor Separation section if under 500 sq ft, may open to corridor/lobby if:
  - New building fully sprinklered
  - Existing building has to be fully sprinklered or the gift shops need to be sprinklered and storage separately protected
- If the gift shop exceeds 500 square feet, then the requirements imposed by hazardous areas are still applicable
- 2012 LSC allows roller latches in acute psychiatric settings in new health care occupancies; however, CMS requirements continue to prohibit the use of roller latches in any facility on any door to the corridor or doors to hazardous areas
- Power doors do NOT have to meet latching requirements if following certain provisions
- “New” health care occupancies now require doors with an inactive leaf to have automatic flush bolts
- LSC no longer limits the 48” protective plate requirement for corridor doors
- K361 is the K-tag that applies to corridors

# Health Care Occupancies – Subdivision of Building Spaces

- Buildings containing health care facilities shall be subdivided by smoke barriers unless otherwise permitted
- 2012 LSC provides a new exception for “new” health care occupancies if a story is located beneath a health care occupancy and houses only mechanical equipment
- Requirements for smoke barrier doors include non-rated factory or field-applied protective plates, unlimited in height shall be permitted in “new” and existing” occupancies, and clearance between the bottom of the door and the floor covering cannot exceed  $\frac{3}{4}$  of an inch in “new” occupancies
- CMS requires resident sleeping rooms to have a window or door to the outside
- K371 and K374 are the effected K-tags

# Heating, Ventilating, and Air Conditioning

- Suspended unit heaters are permitted except in means of egress and resident sleeping areas as long as they are out of reach and equipped with safety features to stop fuel and shut down
- Direct-vent gas fireplaces are permitted inside smoke compartment with sleeping areas with conditions being met
- Solid fuel-burning fireplaces are permitted only in areas with no sleeping rooms – must be separated by one-hour fire resistance and meet other provisions (listed above)
- K500 and K511 are effected tags

# Health Care Occupancies – Laundry and Rubbish Chutes

## Existing Facilities:

- Laundry/Rubbish/Trash chutes can discharge into the same room as long as the room is protected automatic sprinkler system

## New Facilities:

- The fire-resistance rating for charging room is not required to exceed one hour
- K541 is the effected tag

# Health Care Occupancies – Operating Features and Maintenance of Means of Egress: Fire Safety Plans

- The LSC now has nine requirements for the fire safety plan
  1. Use of alarms
  2. Emergency phone call to the fire department (new for 2012)
  3. Transmission to alarms to the fire department
  4. Response to alarms
  5. Isolation of fire
  6. Evacuation of immediate area
  7. Evacuation of smoke compartments
  8. Preparation of floors and buildings for evacuation
  9. Extinguishment of fire
  
- K700 and K711 are effected tags

# Health Care Occupancies

## Furnishings, Mattresses, and Decorations

### Key Points

- Shower and bath curtains are exempt from testing
- Draperies at windows in resident sleeping rooms are exempt from testing requirements when the smoke compartment is protected by automatic sprinklers
- Decorations such as photographs, paintings and other art attached directly to the walls, ceilings or non-fire-rated doors are now allowed when:
  - on the door, they do not interfere with the operation or latching of the door and do not exceed the area of limitation
  - cannot exceed 30% of the wall, ceiling and door areas inside any room or space of a smoke compartment when protected by a sprinkler system
  - cannot exceed 50% of the wall, ceiling and door areas inside resident sleeping rooms having a capacity not exceeding four persons in a smoke compartment with sprinklers
- K751 and K753 are the effected K-tags

# Health Care Occupancies – Soiled Linen and Trash Receptacles

## Clean Waste and Resident Records Containers

- You are now allowed to use containers solely for recycling clean waste and resident records when:
  - Container size does not exceed 96 gallons
  - Unattended containers greater than 96 gallons shall be located in a room protected as hazardous
  - Once it is in the hazardous area room, the size is not limited for the container
  - Containers shall be labeled and listed in accordance with FM6921
- Clean waste is considered to be bottles, cans, paper and similar clean items that do not contain grease, oil, flammable liquids or significant plastic materials
- K754 is the effected K-tag

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# Life Safety Code Transition Overview

## Questions?

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