



Ambulatory Surgery Center  
**LEADERSHIP BOOT CAMP**

**The Life Safety Code and**  
**Emergency Preparedness**

*What You Need to Know*

Anthony Riehl

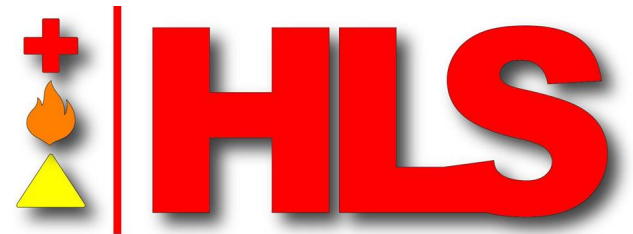
Healthcare Life Safety Consultants, LLC

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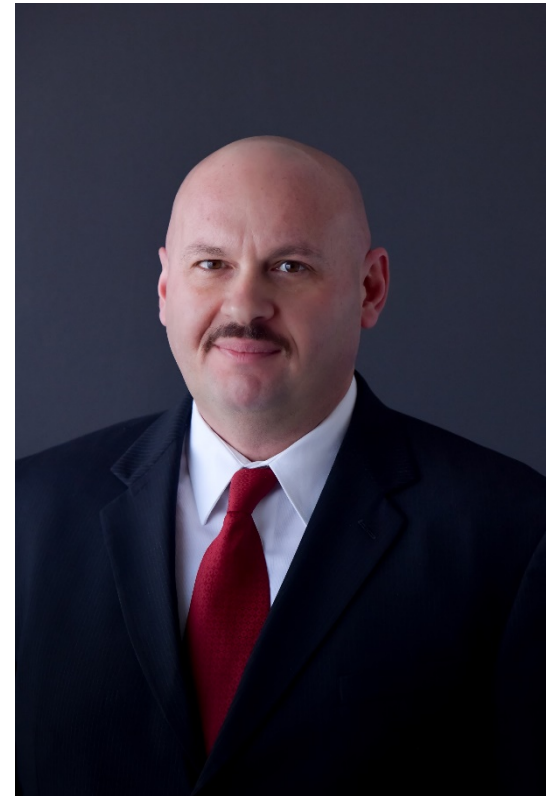
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# About the Presenter

- Owner of Healthcare Life Safety Consultants LLC, Life Safety Code and Emergency Preparedness compliance consulting.
- 20 Year Firefighter with the City of Hackensack Fire Department, where I currently hold the rank of Fire Captain.
- NFPA Certified Life Safety Specialist for Healthcare Facilities
- New Jersey State Licensed
  - Fire Inspector
  - Emergency Services Instructor
  - Level 3 Incident Manager



HEALTHCARE LIFE SAFETY CONSULTANTS, LLC



# TODAYS PROGRAM



Discuss what it means to be “Grandfathered”



Review some of the most recent, Life Safety Code deficiencies



Discuss how you can recognize, and more importantly prevent them.



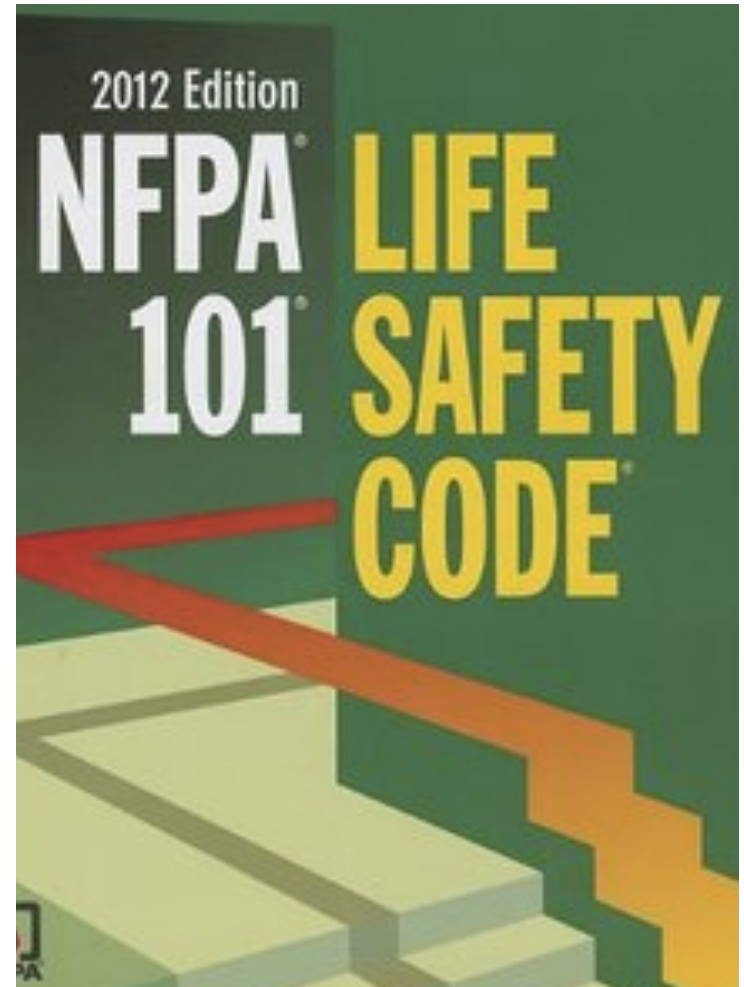
Discuss the 1 THING you can do, to increase drill effectiveness.



Review drill safety and security findings from across the state.

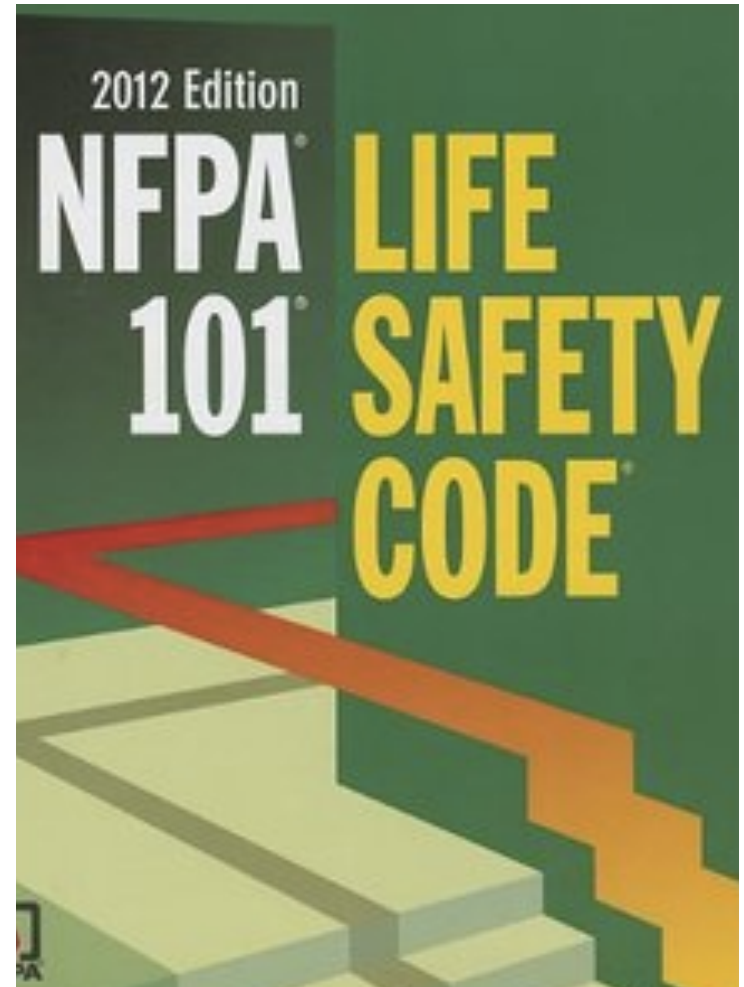
# THE LIFE SAFETY CODE

- The designed purpose of the Life Safety Code is to protect building occupants from fire, and the products of fire.
- The LSC also acts as a road map to assist users in the design of buildings, and the inspection, testing, and maintenance procedures for life safety systems within.
- The LSC references over 125 publications, from 13 separate organizations.



# THE LIFE SAFETY CODE

- Adopted by CMS, with an effective date of July 5, 2016
- APPLICATION
  - Occupancies that have not received all pre-construction approvals prior to the rule's effective date shall comply with Chapter 20 New Ambulatory Care.
  - Occupancies with plan approval prior to the effective date are required to meet the requirements of Chapter 21 Existing Ambulatory Care



# GRANDFATHERED?

- For existing ASC's most provisions of the 2012 LSC are similar to past editions.
- Existing facilities in compliance with previous editions of the LSC are not required to bring their facility up to later editions of the LSC, or its referenced publications, unless:
  - There's been building rehabilitation as defined in Chapter 43. Rehabilitation, depending on its extent, may require your facility to comply with newer occupancy requirements.

**OR**

- Existing conditions are found to be hazardous to patients and/or staff members

# GRANDFATHERED?

## EXAMPLE SCENARIO

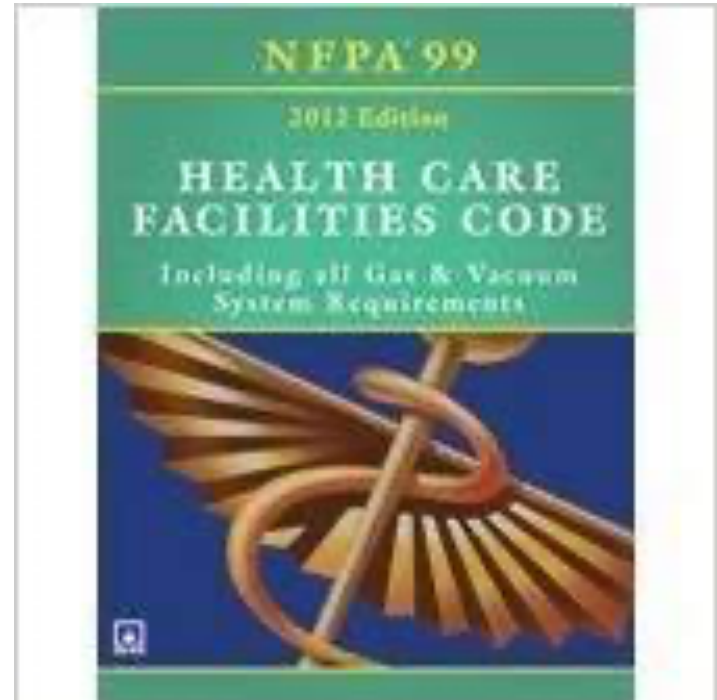
I'm a surveyor conducting a Life Safety Code survey on your center. The center was built prior to the 2012 adoption of the LSC. While inspecting I come across a utility closet containing a water heater. I also note that the door is not equipped with self-closing door hardware. As a surveyor I can tag you under the 2012 LSC Section 21.3.2.1 *Doors to hazardous areas shall be self-closing or automatic closing*. Even if your center is 20 years old.

**Why?** Because I found an existing condition that I believe is hazardous to the safety of patients and staff.

# GRANDFATHERED? LIFE SAFETY SYSTEMS

## NFPA 99-2012 Edition-Systems

- Medical Gas and Vacuum Systems-Chapter 5
- Electrical Systems-Chapter 6
- Plumbing-Chapter 8
- HVAC-Chapter 9
- Electrical Equipment-Chapter 10
- Gas Equipment-Chapter 11





# GRANDFATHERED? LIFE SAFETY SYSTEMS

## NFPA 99-2012, Section 1.3 Application

*1.3.2 Construction and equipment requirements shall be applied only to new construction and new equipment, except as modified in individual chapters.*

*1.3.2.1 Only the altered, renovated, or modernized portion of an existing system or individual component shall be required to meet the installation and equipment requirements stated in this code.*

*1.3.2.2 If the alteration, renovation, or modernization adversely impacts the existing performance requirements of a system or component, additional upgrading shall be required.*

***1.3.2.3 An existing system that is not in strict compliance with the provisions of this code shall be permitted to be continued in use, unless the authority having jurisdiction has determined that such use constitutes a distinct hazard to life.***

**LET'S GO TO AN INDIVIDUAL CHAPTER**

# GRANDFATHERED?

## LIFE SAFETY SYSTEMS-Electrical Systems

**Example:** If your center's plans were approved AFTER July 5, 2016, the following minimum number of outlets apply to you.

- Patient Bed Locations in General Care Areas= 8 Receptacles
- Patient Bed Locations in Critical Care Areas= 14 Receptacles
- Operating Rooms= 36 Receptacles

# GRANDFATHERED?

## LIFE SAFETY SYSTEMS-Electrical Systems

**Example:** If your center's plans were approved PRIOR to July 5, 2016, the following minimum number of outlets apply to you.

- Patient Bed Locations in General Care Areas=4 Receptacles
- Patient Bed Locations in Critical Care Areas= 6 Receptacles
- Anesthetizing Locations (O.R.)= Sufficient receptacles shall be provided to avoid the use of extension cords or multiple outlet adapters. Additionally, because a specific number is not provided until the 2012 edition of NFPA 99, we fall back to an assessment performed to determine the appropriate amount of receptacles.

# GRANDFATHERED?

## LIFE SAFETY SYSTEMS-Generators

**NFPA 110 Emergency and Standby Power Systems-2010 Edition**

**Section 1.3 Application.** *This document applies to new installation of EPSSs, except that the requirements of Chapter 8 shall apply to new and existing systems. Existing systems shall not be required to be modified to conform, except where the authority having jurisdiction determines that nonconformity presents a distinct hazard to life.*

**What's Chapter 8? Routine Maintenance and Operational Testing.**

**NOTE: These procedures will not be grandfathered regardless of the system in questions.**

# GRANDFATHERED?

## LIFE SAFETY SYSTEMS-Generators

### Example Scenario

I'm a surveyor conducting a Life Safety Code survey on your center, built in 2005. While inspecting I note that your natural gas fired generator set is equipped with one emergency shut off mounted on the generator housing. I tag you for not having a remote emergency shut off. NFPA 101-2012 21.2.9/99-2012, 6.4/110-2010, 5.6.5.6\*, A5.6.5.6

**Why?** Because I found an existing condition that I believe is hazardous to the safety of patients and staff.

# GRANDFATHERED?

## Wrap up

- Most changes in the 2012 LSC apply only to new centers
- Changes that do apply to existing centers are relatively minor, low price tag, physical changes, or procedural changes with little to no cost.
- Existing systems can continue to be used as long as they are deemed safe by AHJ, (Authority Having Jurisdiction).
- Inspection testing a maintenance chapters of the LSC's referenced publications shall be adhered to.
- Under our current regulations, the AHJ may waive specific provisions of the LSC if application of our rules would result in unreasonable hardship for the facility, and if the health and safety of its patients would not be compromised by such waiver.

# **BEFORE WE GO ANY FURTHER!**

**EVERY ASC MUST MAINTAIN AN ACCURATE COPY OF THEIR  
DRAWINGS. AT ALL TIMES**

**WITHOUT PRINTS, A LIFE SAFETY SURVEYOR IS FORCED TO  
ASSUME CERTAIN BUILDING FEATURES. THIS CAN BE A VERY  
COSTLY, ASSUMPTION, AND WORSE, 100% AVOIDABLE.**

# CRITICAL INFORMATION THAT WILL YIELD AN ACCURATE LS SURVEY

USE GROUP (IBC Table 308.5): B, Business  
CONSTRUCTION TYPE (IBC, Section 602):  
IIB, UNPROTECTED, SPRINKLERED

**BUILDING AREA :**

AREA OF WORK : 10,500 SQ.FT  
VOLUME OF WORK: 105,000 CU.FT.

NFPA CLASS: LIGHT HAZARD

**FIRE RESISTANCE RATINGS (Tables 601 & 602)**

Structural Frame.....0 hour  
Exterior Walls (Nonloadbearing): .....1 Hr. <5 ft. sep. , 0 Hr> 30 Ft. sep.  
Interior .....0 hour  
Nonbearing Wall & partitions ... .. 0 hour  
Floor Construction.....0 hour  
Roof construction.....0 hour

**OCCUPANCY (Section 1003)**

1003.2.2.1 Actual Number:

21 patient spaces, 18 staff, 25 waiting rm = 64 persons design occupancy

Table 1016.1 Exit access travel distance

B Use w/ sprinkler system .....300 feet

Corridor Fire Resistance ratings (Table 1017.1.)

Fire Enclosure Exit Access Corridors

w/ occupant load greater than 30: 0 Hr (w/ sprinkler)

**INCIDENTAL USE AREAS (TABLE 508.2)**

Furnace/Bollers (over 400,000 Btu/h).....1 hour or automatic fire extinguishing  
Laundry or Storage Rooms over 100 sq. ft.....1 hour or automatic fire extinguishing  
Waste & linen collection over 100 sq. ft.....1 hour or automatic fire extinguishing

**INTERIOR FINISHES (Table 803.5)**

Interior Wall and Ceiling Finishes

Exit enclosures & passageways: Class B/Flame spread 26-73, smoke developed 0-450.

Corridors : Class B, Flame spread 26-73, smoke developed 0-450

Rooms or Enclosed Spaces: Class C, Flame spread 76-200, smoke developed 0-450

Interior Floor Finish

Exit enclosures, passageways, corridors not less than Class II,  
complying with IBC, 2006 NJ edition



# WHERE THE MOST COMMON DEFICIENCIES ARE BEING FOUND

- Compromised fire smoke and fire barriers.
- Medical Gas Rooms
- Emergency Power Supplies
- Life Safety, Critical and Equipment Branch circuits
- General Electrical Hazards
- Sprinkler Systems
- Inspections, Testing and Maintenance of Life Safety Systems
- Emergency Drills

# FIRE AND SMOKE BARRIERS

## What is the differences between a SMOKE barrier and FIRE barrier?

- Fire Barrier: Serves the perimeter of your center.
  - Wall that separates your ASC from an adjoining occupancy or a public corridor.
  - Extends from the floor slab to the underside of the floor or roof structure above.
  - Penetrations must be sealed with approved, UL listed fire caulk or foam.
  - Doors in fire barriers must be 1 ¾ inch (44mm) thick, solid bonded wood core, positive latching, equipped with self-closing door hardware.
  - Windows in smoke walls must be a fixed fire window.
  - Ductwork does not penetrate a fire barrier.

# FIRE AND SMOKE BARRIERS

- **Smoke Barrier:**

- Separates smoke compartments within the boundaries of your ASC.
- \*ASC's are required to contain a minimum of two smoke compartments.
- Duct work can penetrate smoke barriers as long as the ductwork is protected by smoke and fire dampers.
- Doors in smoke barriers must be 1 ¾ inch (44mm) thick, solid bonded wood core, equipped with self-closing door hardware, and positive latching.
- Windows in smoke barriers must be a fixed fire window.

**\*Shall not apply to ASC less than 5000 square feet equipped with automatic sprinkler systems, NFPA 101-2012 Section 21.3.7.1-21.3.7.2**

# FIRE AND SMOKE BARRIERS

## WHAT CAN WE DO?

- It all starts with choosing a contractor.
  - Choose contractors that specialize in Healthcare Occupancies, and familiar with the stringent requirements the healthcare industry must live up to.
- Inspect their work area before they leave.
- Develop a policy and form for all contractors performing work in your center that requires:
  - Sign off that the work has been performed to code.
  - The work area has been cleaned and returned to its previous condition.
  - Any alterations made while doing their work has been returned to a safe condition.
  - A copy of the product cut sheet for any fire caulk or spray foam used should be left with the ASC.

# ABOVE THE CIELING FINDINGS



# ABOVE THE CEILING FINDINGS



## MORE ABOVE THE CEILING FINDINGS

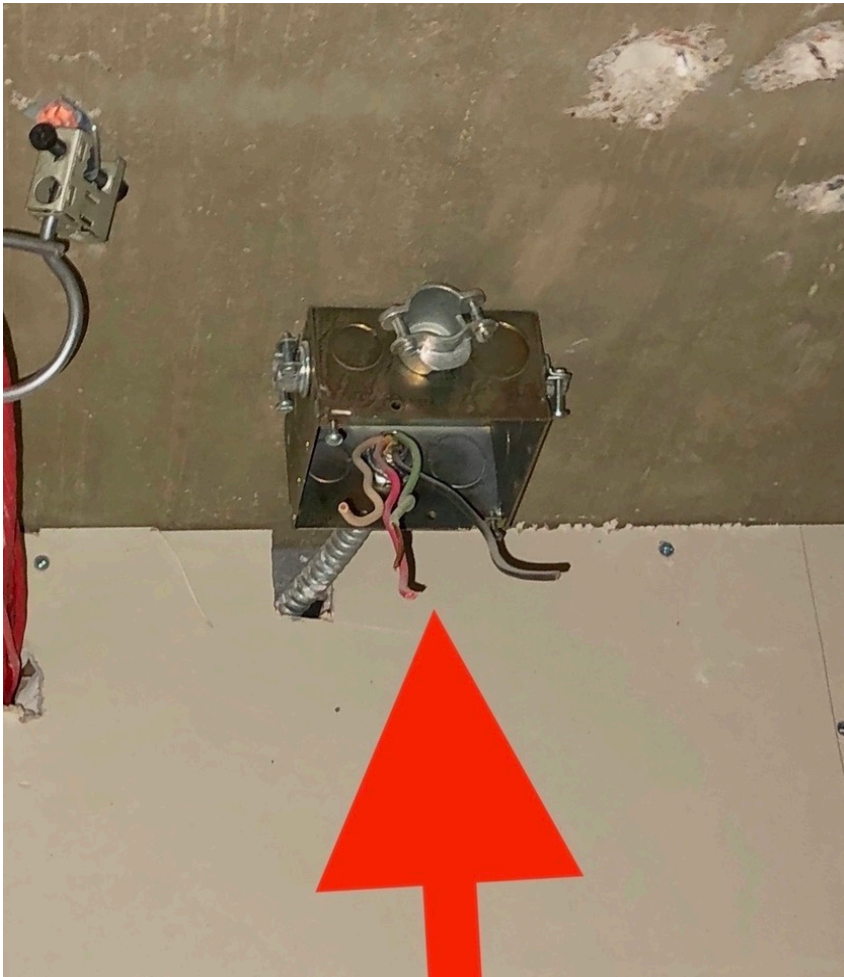


PHOTO 5  
OPEN  
JUNCTION  
BOX

# MEDICAL GAS ROOM

**Not protected as a high hazard area which requires the following:**

- 1-hour rated fire barrier (walls) from floor slab to roof or floor deck above
- If the ceiling is gypsum board, double 5/8 is required to maintain a 1-hour rated assembly.
- 45-minute fire rated door assembly, equipped with self-closing and positive latching door hardware.



# MEDICAL GAS ROOM

- Combustible wall covering is prohibited in medical gas rooms.
  - Plywood wall coverings for easy mounting of manifolds
  - 2x4 use to mount brackets or chains
  - Combustible baseboard and door trim

Photo 8



# MEDICAL GAS ROOM, SOLUTIONS

METAL BRACKETS FOR CHAINS

ASTM E 84 RATED FIRE PAINT



# MEDICAL GAS ROOM-CYLINDERS

- Must be individually secured.
- Must be equipped with status tags, “Full-In Use-Empty”.
- Empty cylinders must be segregated, and clearly labeled as such.
- E-Cylinders must be stored in the appropriate storage cart.

Photo 1



**Cylinders can not be gang chained. Each cylinder must by indivisually chained to the wall .**

# MEDICAL GAS ROOM-CYLINDERS



# MEDICAL GAS

## Qualifications and Training of Personnel NFPA 99-2012, Section 11.5.2.1

- Personnel concerned with the application and maintenance of medical gases and others who handle medical gases and the cylinders that contain the medical gases shall be trained on the risks associated with their handling and use.
- Healthcare facilities shall provide programs of continuing education for their personnel
- Equipment shall be serviced only by personnel trained in the maintenance and operation of the equipment
- If a bulk cryogenic system is present, the supplier shall provide annual training on its operation.

# ELECTRICAL SYSTEMS-GENERATORS

- Emergency stop button with the appropriate signage
- 2 sets of manuals, 1 kept with in the generator housing, 1 kept in a secure location.
- Annual fuel testing
- Lighting to provide illumination of the generator housing, and an internal light for service.
- Generator alarm annunciator must be placed in a location observable by staff.
- (New HLS Recommendation) Annual coolant testing.

# ELECTRICAL SYSTEM- GENERATOR BRANCHES

## The Life Safety Branch

- Lighting for the means of egress
- Exit lights and directional signs
- Communication systems
- Generator
  - Lighting
  - Battery charger
  - Electric receptacle
- Elevators
- Electric doors
- Fire alarm



# ELECTRICAL SYSTEM- GENERATOR BRANCHES

## The Critical Branch

- Anesthetizing locations
  - Task illumination
  - Select receptacles
  - Fixed equipment
- Lighting for
  - Patient care rooms
  - Med prep area
- Nurse call systems
- Telephone equipment
- General care beds, 1 duplex receptacle/patient bed
- PACU
- Additional Misc.-NFPA 99-2012 Section 6.4.2.2.4.2





# ELECTRICAL SYSTEMS- GENERATOR BRANCHES

## Equipment Branch

- Heating Equipment for Operating Rooms, Recovery, General Patient Care Rooms, Pressure Maintenance (Air Pressures), Water-Based Fire Protection Systems
- Elevators
- Supply, Return, and Exhaust Ventilating Systems for O.R.s
- Autoclave Equipment
- Controls for Above
- Other Selected Equipment

# ELECTRICAL SYSTEMS-GENERATORS INSPECTION, TESTING AND MAINTENANCE

- Correct inspection, testing and maintenance intervals.
  - Visual inspection weekly
  - 30 minutes monthly
  - Monthly transfer switch test
  - 90 minutes annually
  - 4 hours every 3 years
  - Annual fuel testing
  - All performance testing shall be performed on green days.

**A GOOD generator service contractor should know this... Choose wisely.**

# ELECTRICAL EQUIPMENT

## Power Strips in Patient Care Areas

- Tested to comply with UL 1363A.
- Can be used inside or outside the Patient Care Area
- Requires permanent mounting to mobile medical equipment
- Requires dual breakers
- Includes hospital-grade plug and receptacle

Code Correct



**ELECTICAL  
EQUIPMENT-  
WET RISK?**



# ELECTRICAL ALMOSTS



# SPRINKLER SYSTEMS

- Missing hydraulic data plate.
- Missing door signage and lack of access.
- Missing sprinkler heads, this is most often seen in closets.
- Corrosion or leakage of piping.
- Inspection, testing and maintenance
  - Not being inspected to a minimum of the 2011 edition of NFPA 25.
  - Not being inspected quarterly.
  - Difficulty retrieving documentation from building owners or management company's

# SPRINKLER SYSTEM DOCUMENTATION

## Form for Inspection, Testing and Maintenance of Fire Pumps



This form covers the minimum requirements of NFPA 25-2011 for centrifugal fire pumps with diesel engines or electric motors for drivers. Separate forms are available for inspection, testing and maintenance of the rest of the fire protection system of which the pump is a part. More frequent inspection, testing and maintenance may be necessary depending on the conditions of the occupancy and the water supply. The work covered on this form is (fill-in one):  Monthly  Quarterly  Annual  Third Year

Owner: \_\_\_\_\_ Owner's Phone Number: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Property Being Evaluated: \_\_\_\_\_

Property Address: \_\_\_\_\_

Date of Work: \_\_\_\_\_ All responses refer to the current work (inspection, testing and maintenance) performed on this date.

Notes: 1) All questions are to be answered Yes, No, or Not Applicable. All "No" answers are to be explained in Part III of this form.  
2) Inspection, Testing and Maintenance are to be performed with water supplies (including fire pumps) in service, unless the impairment procedures of Chapter 15 of NFPA 25 are followed.

### Part I – Owner's Section

A. Is the fire pump in service?  Yes  No

B. Has the pump remained in service since the last inspection?  Yes  No

C. Was the system (of which the pump is a part) free of actuation of devices or alarms since the last inspection?  Yes  No

*Note to owner: periodic tests of transfer switches and emergency generators may be necessary in accordance with NFPA 110 but are not a part of this form.*

Owner or Representative (print name) \_\_\_\_\_ Signature and Date \_\_\_\_\_

### Part II – Inspector's Section

#### A. Inspections – All to be performed weekly

1. Pump house/room proper temperature?  Yes  No  N/A

2. Ventilating louvers free to operate?  Yes  No  N/A

3. Suction, discharge and bypass valves open?  Yes  No  N/A

4. Piping free from leaks?  Yes  No  N/A

5. Suction and system pressure gages normal?  Yes  No  N/A

6. Suction reservoir, if provided, full?  Yes  No  N/A

7. Wet pit suction screens are clean and in place?  Yes  No  N/A

8. Waterflow test valves in closed position?  Yes  No  N/A

9. Electric Motor Driven Pumps:

a. Contoller indicating power on?  Yes  No  N/A

b. Transfer switch indicating normal situation?  Yes  No  N/A

c. Isolation switch closed?  Yes  No  N/A

d. Pump in correct phase?  Yes  No  N/A

e. Oil level in motor sight glass in correct range?  Yes  No  N/A

10. Diesel Engine Driven Pumps:

a. Fuel tank at least two-thirds full?  Yes  No  N/A

b. Contoller selector switch in Auto position?  Yes  No  N/A

c. Battery voltage & charger readings normal?  Yes  No  N/A

d. Battery indicators on/failure indicators off?  Yes  No  N/A

e. All alarm indicators off?  Yes  No  N/A

f. Record engine running time meter reading: \_\_\_\_\_

Is this appropriately higher than previous?  Yes  No  N/A

g. Oil level in right angle gear drive normal?  Yes  No  N/A

h. Oil level in crank case normal?  Yes  No  N/A

i. Cooling water level normal?  Yes  No  N/A

j. Electrolyte level in batteries normal?  Yes  No  N/A

k. Battery terminals free from corrosion?  Yes  No  N/A

1. Water-jacket heater operating?  Yes  No  N/A

11. Circulation relief valve flowing water?  Yes  No  N/A

12. Pressure relief valves operating with proper pressure downstream while pump is operational?  Yes  No  N/A

### B. Testing

*Report any failures on Part III of this form.*

#### 1. Weekly Tests (for diesel pumps)

a. Diesel pump started automatically?  Yes  No  N/A

b. Record starting pressure: \_\_\_\_\_ psi

c. Diesel engine driven pump run for 30 min?  Yes  No  N/A

d. Record suction \_\_\_\_\_ and discharge \_\_\_\_\_ pressure while running

e. Packing gland showing slight discharge?  Yes  No  N/A

*Adjust if necessary.*

f. Packing boxes, bearings and pump casing free from overheating?  Yes  No  N/A

g. Time for engine/motor to reach full speed: \_\_\_\_\_

h. For automatic stop controllers, record time pump runs after starting: \_\_\_\_\_

i. Diesel Engine Driven Pumps:

1. Record time for engine to crank: \_\_\_\_\_

2. All indicators (engine oil pressure, speed, water and oil temperature) reading normal?  Yes  No  N/A

3. Water flowing from heat exchanger?  Yes  No  N/A

1. All above times and pressures acceptable?  Yes  No  N/A

2. Monthly Tests (for electric pumps)

a. Electric pump started automatically?  Yes  No  N/A

b. Record starting pressure: \_\_\_\_\_ psi

c. Electric motor driven pump run for 10 min?  Yes  No  N/A

d. Record suction \_\_\_\_\_ and discharge \_\_\_\_\_ pressure while running

e. Packing gland showing slight discharge?  Yes  No  N/A

*Adjust if necessary.*

f. Packing boxes, bearings and pump casing free from overheating?  Yes  No  N/A

g. Time for engine/motor to reach full speed: \_\_\_\_\_

h. For automatic stop controllers, record time pump runs after starting: \_\_\_\_\_

i. Electric motor driven pumps with reduced voltage or reduced current starting, record the time the controller is in the first step: \_\_\_\_\_

j. All above times and pressures acceptable?  Yes  No  N/A

2. Annual Tests (in addition to above items)

Annual pump test was run using the following method: (check one)

Method A – discharge of water through flow streams. Flow readings taken at each hose stream.

Method B – discharge through bypass flow meter to drain or suction reservoir. Flow readings taken by flow meter.

Method C – discharge through bypass flow meter directly returned to pump suction. Flow readings taken by flow meter.

*Note: at least once every three years, method A or B must be used.*

# SPRINKLER SYSTEMS

## Hydraulic Data Plate

HYDRAULIC-SYSTEM	
THIS BUILDING IS PROTECTED BY A HYDRAULICALLY DESIGNED AUTOMATIC SPRINKLER SYSTEM	
Location	<input type="text"/>
No. of Sprinklers	<input type="text"/>
Basis of Design	
1. Density	<input type="text"/> GPM/FT <sup>2</sup>
2. Designed Area of Discharge	<input type="text"/> SQ. FT.
System Demand	
1. GPM Discharge	<input type="text"/> GPM
2. Residual Pressure at the Base of the Riser	<input type="text"/> PSI
3. Hose Stream Allowance	<input type="text"/>
Occupancy Classification	<input type="text"/>
Commodity Classification	<input type="text"/>
Maximum Storage Height	<input type="text"/>
Date of Installation	<input type="text"/>
Installed By:	<input type="text"/>

## Corrosion and Leakage





# SPRINKLER SYSTEMS



Photo 16

Corrosion on the  
sprinkler riser is an  
indicator of future pipe  
failure

# INSPECTION, TESTING AND MAINTENANCE

## It all starts with acceptance testing.

- Initial testing performed prior to your center opens. This has showed itself a lot in recent surveys.
- Surveyor have allowed centers to bring in 3<sup>rd</sup> party contractors to perform these test, even in much older centers where this documentation often goes missing.
- Usually housed in large binders containing initial testing for:
  - Medical Gas system.
  - Sprinkler and Fire alarm.
  - Vacuum Pump.
  - Generator.
  - Smoke and fire dampers
  - Various electrical equipment and much more.

# INSPECTION, TESTING AND MAINTENANCE

- **Documentation should be readily available in a neat organized fashion for the following systems, and time intervals.**

- Generator: Weekly/Monthly/Annual/3 Years
- Fire Alarm Systems: Weekly/Bi-Annually also **NJ DOH requirement**
- Sprinkler Systems: NFPA Weekly/Quarterly, **NJ DOH requires Bi-Annual**
- Medical Gas: Weekly Annunciator/Manufacturer
- Electrical Equipment:
  - Receptacles and Patient Care Equipment-Dependent on type, manufacturers recommendation's, ASC policy, and location.
  - Line Isolation Monitors-Monthly, or annually if equipped with auto-test feature.

**NOTE: All manufacturers are different, always check with them to insure ITM protocols are being followed.**

# INSPECTION, TESTING AND MAINTENANCE

Documentation should be readily available in a neat organized fashion for the following systems, continued.

- Eyewash stations: Weekly-**OSHA**
- Carbon Monoxide Detectors: Monthly
- Fire Extinguishers: Monthly/Annually
- Fire Doors: Annually
- Elevators: Bi-Annually, **NJ DOH**
- Various HVAC units: Annual-**NJ DOH**
- Emergency and Exit Lighting: Monthly (30s), Annually (90m). **NJ DOH Requires monthly with no time given.**

**NOTE: All manufacturers are different, always check to insure the correct ITM procedures are being followed.**

# FIRE AND DISASTER DRILLS

## Requirements

- **CMS**
  - Annual Fire Safety and Prevention Training. Also required by the NJ Fire Code.
  - Annual Fire Extinguisher Training also required by NJ Fire Code
  - 1 Fire Drill Quarterly.
  - 1 Facility-Wide, Community-Based Disaster Drill annually.
  - 1 Facility-Wide or Tabletop Disaster Drill annually.

# FIRE AND DISASTER DRILLS

## Requirements

- **State DOH**

- 8:43A-15.2 Drills, tests, and inspections

(a) Drills of emergency plans **shall be conducted on each shift at least quarterly**. The facility shall maintain documentation of all drills, including the date, hour, description of the drill, participating staff, and signature of the person in charge. The drills on each shift shall include at least **one drill for emergencies due to fire and one drill for emergencies due to disasters other than fire, such as storm, flood, other natural disaster, bomb threat, or radiological accident**.

# FIRE AND DISASTER DRILLS

## What Should Be Covered

- **Fire Drills**
  - Activation of the fire alarm for every drill
  - Review of the centers intercom system
  - Review of patient removal techniques as they apply to your specific center.
  - Review your assignments roles responsibility
  - Review evacuation paths and gathering locations, both internal and external.
  - Use real world scenarios.

# **FIRE AND DISASTER DRILLS**

## **New Staff Safety Orientation**

- Intercom use
- Extinguisher Locations
- Pull Station Locations
- Medical Gas Room, and Medical Gas Valves
- Exits
- Evacuation gathering points
- Review of the Emergency Plan



# FIRE AND DISASTER DRILLS



# **FIRE AND DISASTER DRILLS**

## **Holes in ASC Security**

**This is what we've found while conducting hundreds of Active Shooter Drills, all over the State**

- Unsecured access to patient care areas from non-patient care areas.
- Lack of panic buttons in non-patient care areas (Reception), and patient care areas (Centralized Nursing Stations).
- Little to no protection for Reception Personnel.
- Return of entry keys from terminated staff members.
  - Key Fab System
  - Security System and Door Codes

# Fire and Disaster Drills

## THE ONE THING YOU CAN DO TO MAKE DRILLS MORE EFFECTIVE

ASC Management MUST put their foot down and block out time for emergency training.

## TOUGH LOVE

ADMINISTRATORS AND DON'S, YOU ARE THE LEADERS AND SET THE EXAMPLE. IF YOUR WILL AND ATTITUDE TOWARDS SAFETY TRAINING IS POOR. AND OVERRULED BY MONEY, IT WILL TRICKLE DOWN.

# WRAP UP

- Every deficiency can't be answered with, "But we're grandfathered", we've learned that's not always true.
- Maintain a full, accurate copy of your blueprints on site.
- Contractors
  - They should be teaching you, not the other way around.
  - They should specialize in Healthcare Occupancies.
  - Check their work.
- Conduct safety rounds, this is how small problems stay that way.
- Make time for effective drills.

***Stay Safe!***

# Questions?

You can speak to me here or...

Here:

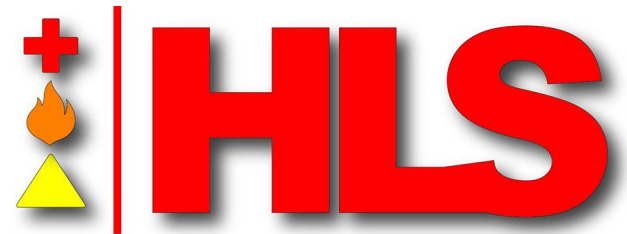
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