



FACILITY MANAGEMENT DEFICIENCIES IN ACUTE CARE SETTINGS

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FREQUENT PHYSICAL ENVIRONMENT FINDINGS



HFAP Physical Environment Findings

Frequent Physical Environment Findings

- Absence of PE policies and no review/update in 36 months
- Lack of credible security assessments
- Hazardous Materials lists & training
- Eyewash stations issues
- Lack of knowledge of Fire Response Plan by staff
- No inventory of utility system components
- Improper pressure relationships



HFAP Physical Environment Findings

11.00.02 - Absence of PE policies and no review/update in 36 months.

1. Building Safety
2. Building Security
3. Hazardous Materials & Waste
4. Fire Safety Control
5. Medical Equipment Management
6. Utility Systems Management



HFAP Physical Environment Findings

11.00.02 - Required Management Plans

- Building Safety
- Building Security

The organization has to have policies that identifies and minimizes security risks to patients, visitors, and staff as well as addressing areas they believe are security sensitive.



Physical Environment Findings

11.03.01 - Hazardous Materials & Waste Program

- The organization must have a system to identify, handle, process, and dispose of hazardous materials and waste
- Each service area of the hospital must have their own list of hazardous materials used/created in their area.
- Lack of staff training for access to SDS data



Physical Environment Findings

11.01.10 - Eyewash Stations & Emergency Showers

When there is a need for eyewash stations, they must comply with ANSI Z358.1-2014.

All eyewash stations and emergency showers must be flow-tested weekly (long enough to flow any stagnant water from the supply pipe), and inspected annually.



HFAP Physical Environment Findings

11.01.10 - Eyewash Stations & Emergency Showers

When you have caustic/corrosive materials and there is no eyewash station, the organization needs a risk assessment regarding the need for an eyewash station to adequately prove an eyewash station is not required.

Safety Data Sheets will specify if an eye wash station is required, by the listed emergency treatment of flushing the eyes with water for 15 minutes. HFAP and CMS do not specify the location for eye wash stations related to need.



HFAP Physical Environment Findings

11.04.01 - Written Fire Control Plans

The hospital must have written fire control plans that contains provisions for:

- Prompt reporting of fires
- Extinguishing fires
- Protection for patients, staff and visitors
- Evacuation
- Cooperation with fire-fighting authorities



HFAP Physical Environment Findings

Fire Response – Staff Training

Staff must be trained on the proper procedure to follow regarding fire situations;
Where are the fire barriers?

Staff includes employees, contract-workers, volunteers, students, physicians, and chaplains.



HFAP Physical Environment Findings

11.06.10 - Plant Equipment Inventory

The hospital must have a written inventory of all plant equipment available for use.

“All” means “all”... every piece of plant equipment must be on the inventory. Check areas for independent HVAC units to ensure accuracy.

NOTE: Often overlooked are portable fans, portable utility pumps, approved space heater, etc.



HFAP Physical Environment Findings

11.07.03 - Ventilation, Light & Temp. Control

The hospital must have proper ventilation in appropriate areas.

All soiled utility rooms or decontamination rooms must have a negative air-pressure relationship to surrounding areas. All clean utility rooms or sterile environments must have a positive air-pressure relationship to surrounding areas.

Check the policy for determined testing intervals and review results.



FREQUENT LIFE SAFETY FINDINGS



HFAP Life Safety Findings

Frequent Life Safety Findings

- Fire Alarm – Install & Test
- Fire Sprinkler - Install & Test
- Medical Gas Systems
- Generators
- Utility Systems
- Door Locks
- Facility Demographic Report (FDR)
- Suites
- Signage
- Fire-Rated Barriers & Ceilings
- Life Safety Drawings

HFAP Life Safety Findings

13.02.01 - Fire Alarm System - Installation

- Smoke detectors mounted too close to air diffusers
- Must be a minimum of 36 inches from supply and return air diffusers



HFAP Life Safety Findings

13.02.01 - Fire Alarm System -Installation

- Smoke detectors are mounted more than 12 inches below the deck/ceiling



HFAP Life Safety Findings

13.02.02 - Fire Alarm System - Testing

- Not all devices tested (Interface relays; Devices not available)

Interface relays connect the fire alarm system to other systems, such as kitchen hood suppression systems, smoke dampers, magnetic locks, etc.





HFAP Life Safety Findings

13.02.02 - Fire Alarm System - Testing

- No device inventory identifying 'Pass' or 'Fail' decision

NOTE!! Every individual device connected to the fire alarm system must be accounted for in a documented list (i.e. inventory), with a "Pass" or "Fail" decision.



HFAP Life Safety Findings

13.02.02 - Fire Alarm System - Testing

- Report not signed by technician (Every test report must be signed by the technician performing the service)
- Report does not reference correct standard and edition (NFPA 72, 2010 edition)
- NOTE!! Verify all reports against standard 13.00.07 for the required eight (8) elements of reports.



HFAP Life Safety Findings

13.03.02 - Sprinklers – Install. & Maintenance

- Ceiling mounted objects are mounted too close to sprinkler heads.
- Hospital policy regarding 18” rule not followed
- Dust and dirt on heads (checked annually?)



HFAP Life Safety Findings

13.03.02 - Sprinklers – Test & Inspection

- No annual inspection for sprinklers and pipe/hangers (visible from the floor)
- Many issues with valves & gauges:
 - ✦ Failing to inspect control valves on a monthly basis
 - ✦ Failing to exercise control valves on an annual basis
 - ✦ Failing to inspect pressure gauges on a monthly basis
 - ✦ Failing to internally inspect the check valves on a 5-year basis
 - ✦ Failing to replace or calibrate pressure gauges on a 5-year basis



HFAP Life Safety Findings

13.03.02 - Sprinklers – Test & Inspection

- Failing replace dry sprinkler heads on a 10-year basis
- Failing to test or replace quick response sprinklers on a 20-year basis
- Failing to test or replace standard response heads on a 50-year basis.



HFAP Life Safety Findings

13.05.1 - Medical Gas Systems

- The most common problem surveyors find with medical gas systems (shut-off valves excluded), is failing to test and inspect according to their policy.
- Another common problem with medical gas systems is failing to make repairs recommended by their testing vendor.

HFAP Life Safety Findings

13.05.08 - Medical Gas Shutoff Valves

- access to them is obstructed
- labels on gas valves do not match the rooms they control





HFAP Life Safety Findings

13.05.04 - Generator Inspection

- Electrolyte levels (specific gravity) on batteries not being recorded during weekly generator inspection.
- NFPA 110-2010, section 8.3.7.1 requires weekly recorded of the battery electrolyte levels (i.e. specific gravity) or electrical conductance testing (sealed lead acid batteries)
- Run times for testing and cool down not recorded

HFAP Life Safety Findings

13.05.09 - Utility Systems

- Junction boxes located above the ceiling do not have cover plates installed
- Access to electrical panels is obstructed
 - ✦ A minimum of 36 inches of clearance is required [NFPA 70-2011 ,110.26]





HFAP Life Safety Findings

13.01.02 - Door Locks

- Doors in the path of egress are locked, and do not comply with the Life Safety Code

NOTE: This will likely lead to a Condition Level Finding. Non-compliant locked EXIT doors may lead to an Immediate Jeopardy decision.

HFAP Life Safety Findings

13.01.02 - Door Locks

Delayed egress locks on doors in buildings that are not fully protected with sprinklers or smoke detectors, as per 7.2.1.6.1 of the 2000 LSC.





HFAP Life Safety Findings

13.01.02 - Door Locks

Inappropriate use of 'Clinical Needs' locks. Clinical needs locks are permitted in behavioral health units (i.e. Psychiatric, Alzheimer's, Substance Abuse unit), and cannot be used for infant security or on other units.



HFAP Life Safety Findings

13.01.02 - Door Locks

- Facilities do not review sections 18/19.2.2.2.5 to verify compliance.
- The need for infant abduction security DOES NOT over-ride the need for safety, they must work concurrently.



HFAP Life Safety Findings

13.00.05 - Facility Demographic Report (FDR)

- Not completed properly (unanswered questions)
- Every question must be answered on the FDR.
- Construction type not listed in NFPA 220 nomenclature

Type I (443)	Type I (332)	Type II (222)	Type II (111)	Type II (000)
Type III (211)	Type III (200)	Type IV (2HH)	Type V (111)	Type V (000)



HFAP Life Safety Findings

13.00.05 - Facility Demographic Report (FDR)

- Occupancy classification not listed in NFPA nomenclature
 - ✦ Healthcare
 - ✦ Ambulatory Healthcare
 - ✦ Business
 - ✦ Other per NFPA 101, 2012 edition



HFAP Life Safety Findings

13.01.04 - Means of Egress – Suites

- Too large
- Not enough exits (100'-0" max. travel distance)
- Suite barrier walls do not meet corridor requirements
- Corridor entrance doors do not positively latch
- 'Exit' signs directing the means of egress from the corridor into and through the suite to get to an exit

HFAP Life Safety Findings

13.01.05 - Signage

- 'Exit' signs not installed where the path of egress is not readily apparent



HFAP Life Safety Findings

13.01.05 - Signage

- 'No Exit' signs not installed where a door may be confused as an exit ('Not An Exit' not acceptable)



HFAP Life Safety Findings

13.01.05 - Signage

- 'No Exit' signs must say "No Exit" with the word "No" 2 inches tall, and the word "Exit" 1 inch tall



HFAP Life Safety Findings

13.04.01 - Fire Rated Barriers

- Unsealed penetrations and improper patching
- Top of fire rated walls do not go to the deck above.



HFAP Life Safety Findings

13.04.07 - Ceilings

- Holes and gaps in ceiling larger than 1/8 inch

Ceilings that have smoke detectors, heat detectors, or sprinkler heads, must have a monolithic seal to trap all heat and smoke. Any holes or gaps greater than 1/8 inch will impair these devices.





HFAP Life Safety Findings

13.06.04 - Life Safety Drawings

- Drawings do not include all of the required features
 - ✦ Rated walls
 - ✦ Smoke compartments
 - ✦ Travel distances
 - ✦ Boundaries & travel distances for Suites of Rooms
 - ✦ Exits (Exit Stairwells, Horizontal Exits, Exit Discharge)
 - ✦ Hazardous rooms
 - ✦ Smoke partitions
- Background plans do not accurately reflect as-built conditions

HFAP Life Safety Findings

13.04.07 - Fire Rated Door Assemblies

- Fire-rated label covered or missing (i.e. painted)
- Door not fire rated

If the Life Safety drawings identify the wall is a fire rated wall, then the door must be appropriately listed as a fire rated door. Surveyors will go by what the LS drawings say.





Life Safety - Reminders

13.01.01 - Doors

- Corridor doors must latch & open to 90 degrees
 - ✦ Staff must be trained not to impede the ability of the door to latch.

13.04.5 - Construction Type

- The wrong type for the number of stories and sprinkler coverage of the building
- Sections of the structural steel have no fire-proofing.



THANK YOU

Questions?

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