

# Premier Accreditation Readiness Network: Life Safety and Environment of Care

March 15, 2017





## What questions do you have?

Use the "Chat" function on your screen to send us your questions.





## Nursing, CPHQ & CJCP credit hours

#### Joint Commission: August 2016 WBT

Thank you for attending and providing your feedback on this presentation.

	objectives below.	Joint Commission:
	5-highly satisfied; 4-satisfied; 3-neutral; 2-	
	o mgmy satisfied, 4 satisfied, 6 fieddal, 24	
		Premier is offering continuing education credits for this event. Types of credit available are: Nursing contact hours, CPHQ and
	Overall value of today's webinar	CJCP.
*	2. Expertise and effectiveness of the speake 5-highly satisfied; 4-satisfied; 3-neutral; 2-d	Please complete the following questions so we may process your continuing education credits. At minimum, the type of credit and participant's email is needed.
	5-nighty satisfied, 4-satisfied, 5-neutral, 2-d	1. Which type of continuing education credit would you like to receive?
		Nursing contact hours
		CPHQ
		CJCP
*	3. Rank your level of knowledge on the topi 5-Excellent; 4-Above average; 3-Average; 2-	2. First name
	5	
	PRIOR to the presentation	3. Last name
	AFTER the presentation	
		4. Your email address





## **2017 Joint Commission Update**

Tom Stewart, MBA, SASHE, CHFM, CHC Senior Consultant, MSL Healthcare Partners



#### Tom Stewart, MBA, SASHE, CHFM, CHFM

Senior Consultant with MSL

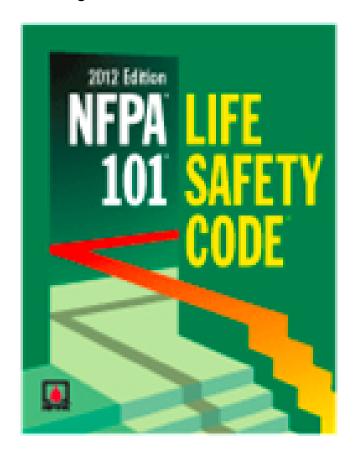
- 40 years in healthcare facility management
- 3 years in healthcare regulatory compliance consulting
- Founder of Southern Illinois Chapter for Healthcare Engineering
- Former Board Member of ASHE
- Member of ASHE Faculty teaches CHFM Prep Course

MSL provides ongoing Life Safety and physical environment consulting services to hundreds of hospitals across the US, including mock surveys and life safety assessments



### Finally! Adoption of the 2012 LSC

The Centers for Medicare & Medicaid Services (CMS) adopted the 2012 edition of the National Fire Protection Association's *Life Safety Code*® effective **July 5**, **2016**.



## New Versus Existing

Facilities that were approved for construction PRIOR to July 5, 2016 are considered "**EXISTING HEALTHCARE**" subject to chapter 19.

Facilities approved for construction AFTER July 5, 2016 are "NEW HEALTHCARE" subject to chapter 18.

If you meet "new" you cannot reduce to "existing"

## Some Key Points

The adoption of the 2012 LSC also adopts over 60 reference codes including the Health Care Facilities Code NFPA 99 - 2012.

#### Items of note:

- By 2028, buildings taller than 75 feet will be required to install automatic sprinkler systems.
- Outpatient surgery must comply with Ambulatory Health Care occupancy regardless of the number of patients served (no longer "4 or more" incapable of self preservation).



Categorical waivers are no longer necessary with the 2012 editions of NFPA 101 and NFPA 99

EXCEPT: OR humidity range of 20-60%

- Must do a risk assessment of supplies and equipment stored in the ORs
- Note that this only applies to ORs, not sterile storage



## **Statement of Conditions**

CMS requires 60 day correction

SOC as we know it is gone

Still available as management tool

BBI information collected during application process



#### **Statement of Conditions**

All deficiencies identified during survey will be cited

Surveyor will NOT review

- Existing PFIs
- Organization use of SOC for management tool
- Open PFIs identified in previous survey

SPFI (Survey PFI) will be generated

## Survey Findings

60 days to correct

Request "Time-Limited Waiver" (TLW) for significant projects within 30 days

Date requested will be "not to exceed"

No extensions



## **Using the Joint Commission EC-LS Document List**

#### Life Safety and Environment of Care - Document List and Review Tool

Revised: Feb 2, 2017

Legena: C=Compliant;	; NC=Not compilant; NA=	-Not applicable; IOU=Surveyor awaiting documentation	
STANDARD - EPe	See Legend	Document / Paguirement	_

STANDARD - EPs	See I	Legen	d		Document / Requirement	Yes	No
STANDARD - LFS	С	NC	NA.	IOU	1	160	140
LS.01.01.01					Buildings serving patients comply with NFPA 101 (2012 edition)		
EP 1					Individual assigned to assess Life Safety Code® compliance		
EP 2					Building Assessment to determine compliance with Life Safety Code™		
<u>EP 3</u>					Current and accurate drawings w/ fire safety features & related square footage  Areas of building fully sprinklered (if building only partially sprinklered)  Locations of all hazardous storage areas  Locations of all fire-rated barriers  Locations of all smoke-rated barriers  Sleeping and non-sleeping suite boundaries, including size of identified suites  Locations of designated smoke compartments  Locations of chutes and shafts  Any approved equivalencies or waivers	<b></b>	
EP <u>4</u>					Timely completion of Survey-Related PFIs (SPFI)		
EP <u>5</u>					Deemed Hospitals: Documentation of inspections and approvals made by state or local AHJs		
EP 6					Removal/maintenance of life safety features		
COMMENTS:					•	<u> </u>	

STANDARD - EPs	See Legend				Document / Requirement	Addressed in policy?		Implemented as required?	
	CN	IC	NA	IOU	1	Yes	No	Yes	No
.S.01.02.01					Interim Life Safety Measures (ILSM)				
EP 1					ILSM policy identifying when and to what extent ILSM implemented				$\top$
EP 2					Alarms out of service 4 or more hours in 24 hours or sprinklers out of service more than 10 hours in 24 hours in an occupied building - Fire watch / Fire Dept. notification				
EP 3					Signs for alternate exits posted				
EP 4					Daily inspection of routes of egress (See also 19.7.9.2 RE: daily inspections)				
EP 5			$\vdash$		Temporary but equivalent systems while system is impaired				$\top$
EP 6			T		Additional firefighting equipment provided				$\top$
EP 7					Smoke tight non-combustible temporary barriers				$\top$
EP 8	$\top$		T		Increased surveillance implemented				T
EP 9	+ +		<del>                                     </del>	1	Storage and debris removal				+-

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Organization Guide, Feb 6 2017



## CMS 2012 LSC K-Tag Link

https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/downloads/cms2786R.pdf



#### **Significant Deleted Elements of Performance**

- EC.02.01.01 EP 8: Safe Medical Device Act
- EC.02.06.01 EP 23: Emergency access to locked, occupied spaces
- EC.03.01.01 EP 1 & 3: Staff knowledge minimizing & reporting risks
- EC.04.01.01 EP 12: Semiannual environmental tours in patient areas
- EC.04.01.01 EP 13: Annual environmental tours in non-patient areas
- EC.04.01.01 EP 14: Use of environmental tours to ID hazards
- EC.04.01.03 EP 1: Composition of EOC Committee
- LS.01.01.01 EP2: Current e-SOC maintained
- LS.01.01.01 EP3: Deficiencies resolved in time frame identified in PFI



### **TJC Significant New / Modified EC EPs**

### EC.02.03.05 Fire Alarm / Suppression System Testing:

- EP1 Definition of Supervisory Signals
- EP2 Semi-annual Flow and Tamper testing
- EP4 Now includes door releasing devices (in addition to A/V devices)
- EP5 Annual Emergency Services notification testing
- EP6 Electric fire pump churn test monthly, diesel pump weekly
- EP25 Annual fire door inspection

### EC.02.05.07 Emergency Power Systems

- EP1 Monthly inspection of exit signs
- EP4 Weekly inspection of EPSS
- EP8 Annual diesel fuel quality test per ASTM standards



### **TJC Significant New / Modified LS EPs**

#### LS.01.01.01

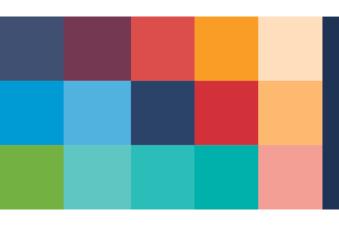
- EP2 LSC building assessments in timeframes determined by HCO
- EP3 LS drawing requirements detailed
- EP4 60-days to resolve survey-related deficiencies or TLW
- (surveyor will document ILSMs to be implemented)
- EP6 Cannot remove existing LS features if required for new

#### LS.02.01.20

 EP10 Exit enclosures – security cameras installed prior to 7/5/16 allowed

#### LS.02.01.35

- EP7 Requires 6 spare sprinkler heads for each type of system
- EP8 Clothes closets under 6 sq. ft. do not require fire sprinkler





## What's New: EOC



## Wild Card Standards

CMS generated additional K-Tags as a result of the adoption of the 2012 edition of NFPA 101 & NFPA 99

Due to timing issues (JC development & CMS review), not all K-Tags are in the 2017 standards published January 9<sup>th</sup>

Wild Cards = "All other requirements..."

Will be used to cite additional K-Tags





## CMS K-tags Form CMS-2786R (10/26/16)

CENTERS FOR MEDICARE & MEDICAID	N SERVICES SERVICE		2012 LIFE SAFETY CODE Form Approved OMB Exempt
	EPORT 2012 CODE – HEALTH CA icare – Medicaid	1. (A) PROVIDER NUMBER 1. (B) M	EDICAID I.D. NO.
OPTIONAL -	PART II — Health Care PART III — Re PART IV -	afety Code, New and Existing e Facilities Code, New and Existing ecommendation for Waiver – Crucial Data Extract valuation System for Health Care Occupancies –	CMS-2786T
Identifying information as shown in a	pplicable records. Enter changes, if any, al	longside each item, giving date of change.	
2. NAME OF FACILITY	2. (A) MULTIPLE CONSTRUCTION (BLDGS) A. BUILDING B. WING C. FLOOR	2. (B) ADDRESS OF FACILITY (STREET, CITY, STATE, 2	ZIP CODE) A. Fully Sprinklered (All required areas are sprinklered) B. Partially Sprinklered (Not all required areas are sprinklered) C. Mone (No sprinkler system) (6180
3. SURVEY FOR	4. DATE OF SURVEY	DATE OF PLAN APPROVAL SURVEY UNDER	Notice
MEDICARE MEDIC	CAID K4	5. 2012 EXISTIN	G 6. 2012 NEW
5. SURVEY FOR CERTIFICATION OF		1.0	
1. HOSPITAL 2. SKILLE	ED/NURSING FACILITY 4. ICF/IID U	JNDER HEALTH CARE 5. HOSPICE	
IF "2" OR "5" ABOVE IS MARKED, CHECK A	APPROPRIATE ITEM(S) BELOW	3. IF DISTINCT PART OF HOSP	ITAL, IS HOSPITAL ACCREDITED?
	CT PART OF (SPECIEV)	a. YES b. N	,
1. ENTIRE FACILITY 2. DISTING	OTTAKTOL (GLEGILT)		
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### **Annual Fire Door Inspection**

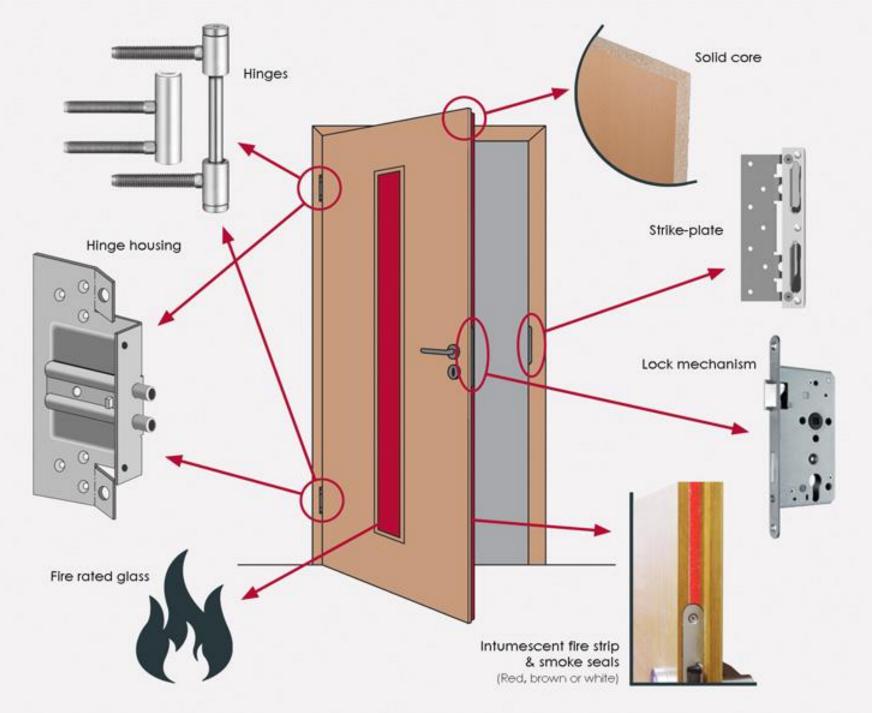
Complete documented inventory

Staff with knowledge & understanding of operational components

Visual inspection

In addition to EC.02.03.05 requirements

Documented result for each device





## **Medical Equipment Wild Card**

#### K-920:

- Power strips in patient care vicinity or for components of mobile patient care related electrical equipment (PCREE) meet NFPA 10.2.3.6
- Power strips not used for personal electronics in patient care vicinity
- PCREE: UL 1363A or UL 60601-1
- Non-PCREE in patient rooms outside vicinity UL 1363
- Extension cords not substituted for fixed wiring





## **Medical Equipment Wild Card**

K-931: All occupancies with hyperbaric facilities comply with construction, equipment, administration & maintenance per NFPA 99-2012, chapter 14





### **HVAC & Electrical Wild Card**

K-913: ORs are wet locations unless otherwise risk assessed, with documentation





#### **HVAC & Electrical Wild Card**

K-915: Electrical distribution based on NFPA 99 risk assessment categories

#### K-914, 917, 918:

- Hospital grade receptacles in anesthetizing locations tested after installation, replacement, or servicing
- Receptacles tamper-resistant or listed cover in pediatric patient rooms, bathrooms, play rooms, and activity rooms (not nurseries)

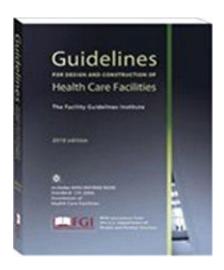




#### New, Altered or Renovated Space

#### 2014 FGI Guidelines

Edition to be enforced is that in effect at the time of approval of plans. Including for pressure differentials.





## What's New: Life Safety

The deck has been shuffled (and additional cards added)





## LS.01.01.01: LSC compliance

EP 1: Assigned individual to assess compliance with LSC & manage the SOC when addressing <u>survey-related</u> deficiencies

EP 2: LSC building assessment in time frames determined by hospital

## LS.01.01.01

#### EP 3 LS drawings

- Areas fully sprinklered (partially sprinklered building)
- Hazardous storage
- Fire-rated barriers
- Smoke-rated barriers
- Suite boundaries & size
- Smoke compartments
- Chutes & shafts
- Equivalencies or waivers

EP 4: 60 days or TLW on survey-related PFIs

EP 5: Documentation of other AHJ inspections

#### EP 6:

- No removal or minimization of existing life safety features when a requirement for new construction.
- If not a requirement, can maintain or remove existing features

EP 1: Relocation of ILSM Policy & assessment criteria

EP 2: Relocation of notification of FD & fire watch when:

- Fire alarm out for ≥4 hours in 24 hour period
- Sprinklers out for ≥10 hours in 24 hour period

EP 3: Relocation of signage for alternate exits

Surveyor will discuss any LS deficiency with the organization & the ILSMs to be implemented, based on organization policy

ILSMs will be incorporated in the survey report



### LS.02.01.34 Wild Card K-Tags

#### K-341:

- Fire alarm requirements & installation
- Master fire alarm panel location



K-342: Fire alarm initiation

K-343: Occupant alarm notification

K-344: Automatic activation of fire alarm & alternative power supply



#### **Common Deficiencies I Find**

Pressure relationship issues

No policy for temp/humidity monitoring and process

No monitoring of temp/humidity

Sterile packs stored in uncontrolled environment

Management plans do not address off-sites

Not monitoring staff exposure to hazardous vapors

Empty patient rooms converted to storage



#### **Deficiencies Found – Continued**

Electrical panel breakers not accurately labeled

Not closing the loop on fire and sprinkler inspection deficiencies found

Conflict between access control and LSC

LS Drawings not up to date or missing required elements

## Hazmat

### EC.02.02.01 EP 9: Adds list of hazardous gases and vapors:

- ETO
- Nitrous Oxide
- Glutaraldehyde
- Cauterizing Equipment & Lasers
- WAGD
- Lab Rooftop Exhaust

Omits Formaldehyde





Q E C LA ISIO E T



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## Joint Commission Readiness Education Series





#### **January 18, 2017**

Clinical Alarm Management 11:00 a.m. – 1:00 p.m. ET Webinar Link

#### **February 15, 2017**

Suicide Risk Assessment & Behavioral Health 11:00 a.m. – 12:00 p.m.

Webinar Link

#### March 15, 2017

Life Safety & Environment of Care 11:00 a.m. – 12:00 p.m. Webinar Link

#### **April 19, 2017**

Adult/Pediatric Sepsis 11:00 a.m. – 12:00 p.m. Webinar Link

#### May 17, 2017

Infection Control: High Level
Disinfection & Sterilization
11:00 a.m. – 1:00 p.m.
Webinar Link

#### June 21, 2017

Nutrition: Care of Patients at Risk 11:00 a.m. – 12:00 p.m. Webinar Link

#### July 19, 2017

Radiation Safety Standards 11:00 a.m. – 12:00 p.m. Webinar Link

#### August 16, 2017

Assessment & Provision of Care 11:00 a.m. – 12:00 p.m. Webinar Link

#### **September 20, 2017**

TJC's SAFER Methodology and Other Changes Coming from TJC 11:00 a.m. – 12:00 p.m. Webinar Link

#### The phone number for all events is: 800.698.6127

You may also stream the audio over your computer.

Meeting materials may be obtained through the Office of Clinical

Effectiveness.

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