

Healthcare Facilities Management Society of New Jersey

#### "Taking Care Of Business"



October 17<sup>th</sup>, 2024



On July 1, 2021, hospitals that are accredited by The Joint Commission added business occupancies (typically Medical Office Buildings or outpatient clinics) that are tied to the hospital or health system accreditation. While there have always been requirements impacting business occupancies in the Environment of Care (EOC) Chapter, life safety requirements were not specifically referenced. These changes now impact both Hospital and Critical Access Hospital standards.

2012 NFPA 101 – Life Safety Code as currently adopted by Centers for Medicare & Medicaid Services (CMS) defines a business occupancy as

"An Occupancy used for the transaction of business other than mercantile."

- Examples from the ANNEX:
- Outpatient Clinics
- Doctors Offices
- Dentists' offices could also be classified as Ambulatory
- Town Hall
- Courthouses

Mercantile Occupancy :

- Gift Shop
- Department stores
- Restaurants



These standards include a handful of Elements of Performance (EPs) focused on general life safety in business occupancies including means of egress, hazardous areas, fire sprinkler systems, fire alarm systems, and fire extinguishers.

#### What does this mean?

- In general, it means business occupancies that are included under the hospital/health system accreditation are surveyable:
- LS.01.01.01-EP.2 requires a building assessment for business occupancies, like what is already required for healthcare and ambulatory healthcare occupancies.
- There is an increased focus on business occupancies from any required inspection, testing and maintenance (IT&M) documentation for fire sprinkler, fire alarm or fire doors to additional survey time for life safety features in business occupancies.
- As most of us have probably experienced, it has been difficult to get through a full life safety building tour of some larger facilities.
- It is a good idea to review all requirements located in the Environment of Care (EC) and Life Safety chapters that may apply to your business occupancies. You will want to ensure that existing policies and IT&M documentation are in place to show compliance.

#### Who will survey Business Occupancies? Are we in a business Occupancy or Healthcare?

#### THE 8 TYPES OF SURVEYORS YOU WILL ENCOUNTER (THE MAGNIFICENT SEVEN!)

THE STORYTELLER- THIS SURVEYOR HAS DONE IT ALL, KNOWS EVERYONE, AND BEEN EVERYWHERE, AND KNOWS JUST A LITTLE BIT ABOUT EVERYTHING! THEY WILL BUILD A RELATIONSHIP WITH YOU, AND YOU'LL BE OLD FRIENDS BY THE END OF THE SURVEY. YOU CAN ACTUALLY LEARN THINGS FROM THIS SURVEYOR IF YOU HAVE THE PATIENCE TO ENDURE. (I'VE DONE SOME SELF-REFLECTION, AND I MIGHT FALL INTO THIS CATEGORY ALONG WITH THE "WISE MAN" BELOW). HEY! COME ON! I'VE BEEN IN THIS BUSINESS A LONG TIME

THE DEBATER- DON'T BE BAITED INTO A "DISCUSSION" WITH THIS SURVEYOR. THERE'S AN OLD SAYING THAT "ARGUING WITH AN INSPECTOR(SURVEYOR) IS LIKE WRESTLING WITH A PIG IN THE MUD, IN THE-END THE PIG ALWAYS WINS AND YOU'RE BOTH COVERED IN MUD AND SH\*T". YOU MAY THINK YOU'RE PROVING YOUR POINT BY PRESENTING A GREAT ARGUMENT, BUT DON'T BE FOOLED. THEY ARE STILL THE AHJ AND HAVE THE FINAL SAY! (SEE LAST MONTH'S NEWSLETTER).

BARNEY FIFE- DO I NEED TO SAY MORE? THEY "ENJOY" THEIR ROLE AND AREN'T AFRAID TO LET YOU KNOW. ALSO KEEP IN MIND, HE DOES HAVE ONE BULLET! SORRY, THIS MIGHT BE AN INTERESTING SURVEY. BEST THING TO DO IS "RESPECT THEIR AUTHORITY!", ALONG WITH OPTION #2 ABOVE . BETTER LUCK NEXT SURVEY CYCLE.



- <u>**The New Guy-**</u> The newbie. This one is very easy to ID right off the bat. They are obviously very nervous, cautious, and maybe even timid. The dead giveaway is the **nonstop referring to their inspection form or checklist**. They will also look at something for a long time with a glazed facial expression. In fact, you'll be tempted to break the silence and say something like "everything OK ?". Don't worry they are just scrolling through the code book in their head and visualizing the eternal power points of their surveyor training. They'll get there! Just give them time. **Best advice is just be patient.** They mean well.
- **The Engineer-** This isn't an actual engineer (although you might come across one that is, and for you actual engineers, (RESPECT) but rather **somebody who thinks** they are or probably aspires to be one.... **The survey begins with** Codes. Facts. Statistics. Theories. Proofs. Formulas. Real people person. They will let you know, what they know! These surveyors are the prototypes for the cyborg, Al, robots that DARPA (Defense Advance Research Agency) is developing to send into battle. DARPA would clone the engineers, but machines are a little lower maintenance(no food). Yikes, hang on tight for this survey! You're going for a ride! Want to go with mitigation strategy #2 above!

The Wise Man- Calm. Wise. Confident. Always providing positive reassurance. Offering ideas and advice..."I see your doing "xyz" which meets the requirements of the code, but another way to do it is "abc". This is usually a good draw as a surveyor. Not many issues with this type unless they have some of the other agenda from another category sprinkled in. Sometimes there's a Barney Fife lurking beneath the niceties and gray hair. (Its ok, I have gray hair too!) The Speedster- Nope, not vintage Corvette. The surveyor. This survey goes something like this. Surveyor-"Do you have water sprayers? Alarm things? Exits doors I can run out? Great! Here's 2 things for your plan of correction. See ya!". You-"wait, what?". They will be direct. To the point. Done and gone! This surveyor may be a little incompetent and this one might be easy, but really isn't very beneficial for anybody and can make for a really bad survey next time around.

#### # 8 - Let's talk about Surveyor Nurse Mary

- Nurse Mary has a clinical background however Mary just attended a Life Safety Conference and is now ready for anything !
- Full of energy and knowledgeable of the Life SAFETY CODE's she heard at the conference.
- Be carful with Mary, you need to show respect for her background, but Mary will cite you during your survey for codes "SHE MADE OF HEARD" from the conference but not really a code geek!
- Don't challenge Mary because she will find something on you !
- It's just that way

#### **JCAHO 1995'**

#### The SOC compliance document must be completed before the day of the survey

	1

Comprehensive Accreditation Manual for Hospitals

#### **Chapter Outline**

- Administrative Activities
  - A. Statement of Conditions (LS.01.01.01)
  - B. Interim Life Safety Measures (LS.01.02.01)
- II. Health Care Occupancy
  - A. All Health Care Occupancy Buildings
    - 1. General Building Requirements (LS.02.01.10)
    - 2. Means of Egress Requirements (LS.02.01.20)
    - 3. Protection (LS.02.01.30)
      - a. Fire Alarm (LS.02.01.34)
      - b. Extinguishment (LS.02.01.35)
    - 4. Special Provisions (LS.02.01.40)
    - 5. Building Services (LS.02.01.50)
    - 6. Operating Features (LS.02.01.70)
- III. Ambulatory Health Care Occupancy
  - A. All Ambulatory Health Care Occupancy Buildings
    - 1. General Building Requirements (LS.03.01.10)
    - 2. Means of Egress Requirements (LS.03.01.20)
    - 3. Protection (LS.03.01.30)
      - a. Fire Alarm (LS.03.01.34)
      - b. Extinguishment (LS.03.01.35)
    - 4. Special Provisions (LS.03.01.40)
    - 5. Building Services (LS.03.01.50)
    - 6. Operating Features (LS.03.01.70)
- IV. Residential Board and Care Occupancy-Not applicable to hospital
- V. Business Occupancy
  - A. All Business Occupancy Buildings
    - 1. General Building Requirements (LS.05.01.10)
    - 2. Means of Egress Requirements (LS.05.01.20)
    - Protection (LS.05.01.30)
    - Fire Alarm (LS.05.01.34)
      - b. Extinguishment (LS.05.01.35)

#### JCAHO 1995'

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ASSESSMENT		REFERENCE	LOCATION/COMMENTS			
PART3C	Business Occupancies					
SECTION I - ROOMS						
y N	IA. Is the interior finish in rooms and office areas Class A, B, or C?	38/39.3.3.2				
y N N/A	<ul> <li>1B. Are hazardous areas (general storage, boiler/furnace rooms, maintenance shops, woodworking, or painting areas):</li> <li>1. enclosed by fire barriers having 2 1-hr FRR; OR</li> <li>2. enclosed by nonrated walls and doors when protected by an AASS?</li> </ul>	38/39.3.2.1				
N/A y N y N	<ul> <li>1C. Are doors in partitions enclosing unsprinklered hazardous areas:</li> <li>1. 2<sup>3</sup>/4-hr FRRA; AND</li> <li>2. provided with positive latching;</li> </ul>	38/39.3.2.1 NFPA 80: 2-4.4.3				
	AND					
y N	3. self-closing or automatic closing?	38/39.3.2.1				
N/A y N y N	<ul> <li>ID. Are fire doors 2 <sup>3</sup>/4-hr FRRA free of:</li> <li>1. protective plates which extend &gt; 16 in above the bottom of the door; AND</li> <li>2. any coverings, decorations, or other objects applied to the door face, except informational signs?</li> </ul>	NFPA 80: 2-4.5 NFPA 80: 1-3.5				
-	SECTION II - FLOOR ASSEMBLIES					
y n N/A	<ul> <li>2A. Are stairways, elevator shafts, escalator openings, and other vertical openings enclosed by:</li> <li><i>i</i>. <i>z</i> 1/2-hrFRRAinEXISTING; OR</li> <li><i>i</i>. <i>z</i> 1-hr FRRA in NEW, and for EXISTING exit stairs that connect 3 stories; OR</li> <li><i>i</i>. <i>z</i> 2-hr FRRA in NEW, and for EXISTING exit stairs that connect 24 stories?</li> </ul>	38/39.3.1.1p				
	SECTION III - EXITS					
y N y N	<ul> <li>3A. Number of exits:</li> <li>1. Are there 2 2 approved exits arranged and constructed as to minimize any possibility that more than one may be blocked by any one fire or other emergency condition located on each floor; AND</li> <li>2. are exits accessible from every part of each floor?</li> </ul>	38/39.2.4.2p				
PART	<b>3C</b> - <b>Business</b> xits in NEW must meet test for remoteness per 7.5.1.4.		Outpatient Occupancies			

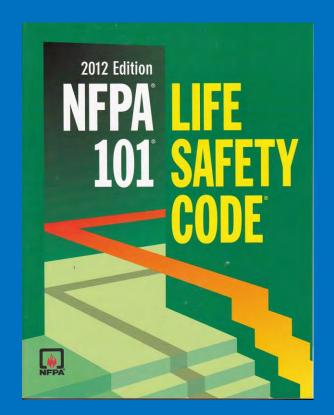
## **Business Occupancy**

The Joint Commission

LS.05.01.10 LS.05.01.20 LS.05.01.30 LS.05.01.34 LS.05.01.35

28 EP's

#### NFPA 101-2012-Chapters 38&39



# When building rehabilitation occurs, the hospital incorporates NFPA 101-2012: Chapters 38, 39, and 43. (For full text, refer to NFPA 101-2012: 38/39.1.1.3; 4.6.7)

*Compliance Tip:* When remodeling existing business occupancies, refer to NFPA 101-2012 Chapter 43 to determine the degree to which you must meet the requirements for new construction.

- The fire protection rating for opening protectives in fire barriers, fire-rated smoke barriers, and fire-rated smoke partitions is as follows:
  - Three hours in 3-hour barriers and partitions
  - Ninety minutes in 2-hour barriers and partitions
  - Forty-five minutes in 1-hour barriers and partitions
  - Twenty minutes in ½-hour barriers and partitions
- Labels on fire door assemblies must be maintained in legible condition.
- (For full text, refer to NFPA 101-2012: 8.3.4.2; Table 8.3.4.2; 8.3.3.2.3; NFPA 80-2010: 5.2.13.3)

The space around pipes, conduits, bus ducts, cables, wire, air ducts, or pneumatic tubes penetrating the walls or floors are protected with an approved fire-rated material.

- Note: Non-approved polyurethane expanding foam is not an accepted fire-rated material for this purpose.
- (For full text, refer to NFPA 101-2012: 8.3.5)

*Compliance Tip:* 

This only applies to penetrations through fire-rated barriers, and there are far fewer fire barriers required in business occupancies than health care or ambulatory. Consult your life safety drawings to see where these fire barriers are located to determine where penetrations must be sealed.

- Doors requiring a fire rating of 3/4 of an hour or longer are free of coverings, decorations, or other objects applied to the door face, with the exception of informational signs, which are applied with adhesive only.
- (For full text, refer to NFPA 80-2010: 4.1.4)

## LS.05.01.10, EP 7\*

The hospital meets all other Life Safety Code requirements, including vertical openings, related to NFPA 101-2012: 38/39.1.

Interior open stairways and ramps are permitted to serve as part of the egress system if not more than one level below the street floor.

(For full text, refer to NFPA 101-2012 38/39.2.1.3.2)



In occupancies that serve 50 or more persons, the corridors or passageways must be a minimum of 44 inches of clear width.

(For full text, refer to NFPA 101-2012: 38/39.2.3.2)



#### Exit Blocked Deficiency Example



- Dead-end corridors cannot exceed 50 feet in existing facilities. In new facilities, dead-end corridors cannot exceed 50 feet unless fully sprinklered or cannot exceed 20 feet if they are not fully sprinklered.
- (For full text, refer to NFPA 101-2012: 38/39.2.5).

- Travel distance to an exit must not exceed 200 feet unless the facility is fully sprinklered, in which case the distance may be increased to 300 feet.
- (For full text, refer to NFPA 101-2012: 38/39.2.6)

## LS.05.01.20, EP 5

Means of egress must be continuously illuminated while occupied.

(For full text, refer to NFPA 101-2012: 38/39.2.8)

- Emergency lighting for <u>existing construction</u> must be provided if the building is three or more stories in height, if the building has 100 occupants or more in the stories above or below the level of exit discharge, or the building has 1000 or more total occupants.
- (For full text, refer to NFPA 101-2012: 39.2.9)



- Emergency lighting for new construction must be provided if the building is three or more stories in height, if the occupancy has 50 occupants or more in the stories above or below the level of exit discharge, or the building has 300 or more total occupants.
- (For full text, refer to NFPA 101-2012: 38.2.9)



Doors in a means of egress are not equipped with a latch or lock that requires the use of a tool or key from the egress side unless a compliant locking configuration is used, such as a delayedegress locking system or an access-controlled egress door assembly.

(For full text, refer to NFPA 101-2012: 38/39.2.2.2; 7.2.1.5.3; 7.2.1.6.1, 7.2.1.6.

\*Note: An exception to this requirement would be the principal entrance/exit doors with keyoperated locks that meet the criteria of NFPA 101-2012 7.2.1.5.5.

#### Additional Guidance:

Principal entrance and exit doors in business occupancies are permitted to have a readily distinguishable lock. There must be a sign that reads **"THIS DOOR TO REMAIN UNLOCKED WHEN THE BUILDING IS OCCUPIED**." And the key must be immediately available to any occupant when the door is locked.

## The hospital meets all other *Life Safety Code* means of egress requirements related to NFPA 101-2012: 38/39.2.



#### LS.05.01.30, EP 1\*

All hazardous areas are enclosed with one-hour fire-rated walls with <sup>3</sup>/<sub>4</sub>-hour fire-rated doors; or hazardous areas have sprinkler systems and are constructed to resist the passage of smoke with doors equipped with self-closing or automaticclosing devices. (For full text, refer to NFPA 101-2012: 38/39.3.2; 8.7; NFPA 80-2010: 4.8.4.1; 6.3.1.7; 6.5)

*Compliance Tip:* Hazardous areas in business occupancies are defined as areas used for general storage, boiler or furnace rooms, and maintenance shops that include woodworking and painting areas.

Interior wall and ceiling finishes must be Class A or B for exits and exit access corridors. All other areas should be Class A, B, or C.

(For full text, refer to NFPA 101-2012: 38/39.3.3)

*Compliance Tip:* When remodeling, keep documentation of wall and ceiling finish materials for exits and exit access corridors. Don't paint over the UL listing.

#### LS.05.01.30, EP 3\*

Alcohol-based hand rubs (ABHR) are stored and handled in accordance with NFPA 101-2012: 8.7.3.1 and as follows:

- Corridor clear width of 44 inches is not compromised by dispenser. (HCO 6')
- ABHR does not exceed 95% alcohol.
- Maximum individual dispenser capacity is 0.32 gallons of fluid (0.53 gallons in suites or rooms separated from corridors) or 18 ounces of NFPA Level 1–classified aerosols.
- Dispensers have a minimum of 4 feet of horizontal spacing between them.
- Dispensers are not installed within 1 inch of an ignition source.
- If floor is carpeted, the building is fully sprinkler protected.
- Operation of the dispensers must comply with the manufacturers' instructions for use.
- ABHR is protected against inappropriate access.
- \*Not more than an aggregate of 10 gallons of fluid or 1135 ounces of aerosol are used on a single story or in a single fire compartment outside a storage cabinet, excluding one individual dispenser per room.

- \*Storing more than 5 gallons of fluid on a single story or in a single fire compartment complies with NFPA 30.

## **ABHR in Business Occupancy**

- NFPA 101-2012 does not permit ABHR in business occupancy areas where it could interfere with egress
  - This applies to corridors
- NFPA 101-2015 edition and later do have provisions for ABHR in business occupancy corridors (CMS advocacy opportunity?)
- Current EP language is <u>modeled</u> after ABHR requirements for health care and ambulatory health care occupancy
- Because business occupancies do not have smoke compartments, TJC would consider the entire floor area of a single floor when evaluating the maximum ABHR allowed



The hospital meets all other *Life Safety Code* fire and smoke protection requirements related to NFPA 101-2012: 38/39.3.

#### LS.05.01.34, EP 1\*

Fire alarm systems for existing construction are required if the building is three or more stories in height, there are 100 occupants or more below or above the level of exit discharge, or the building has 1,000 or more occupants. The fire alarm system is initiated by manual means, a fire/smoke detection system, or a fire suppression system. The occupant notification system must activate a general alarm; notification can be made using voice communication or a public address system. (For full text, refer to NFPA 101-2012: 39.3.4)

#### LS.05.01.34, EP 2\*

Fire alarm systems for new construction are required if the building is three or more stories in height, there are 50 occupants or more below or above the level of exit discharge, or the building has 300 or more occupants. The fire alarm system is initiated by manual means, a fire/smoke detection system, or a fire suppression system. The occupant notification system must activate a general alarm.

(For full text, refer to 2012 NFPA 101-2012: 38.3.4)



# The hospital meets all other *Life Safety Code* fire alarm requirements related to NFPA 101-2012: 38/39.4.



#### LS.05.01.34, EP 4\*

For new construction, a process for emergency response notification is provided and includes notifying both of the following:

- Fire department in accordance with NFPA 101-2012: 9.6.4
- Local emergency organization, if provided

(For full text, refer to NFPA 101-2012: 38.3.4.4)



#### LS.05.01.34, EP 5\*

- For existing construction, notification of emergency services is accomplished in accordance with NFPA 101-2012:
- 9.6.4 when the existing fire alarm system is replaced.
- (For full text, refer to NFPA 101-2012: 39.3.4.4)

The travel distance from any point to the nearest portable fire extinguisher is 75 feet or less. Portable fire extinguishers have appropriate signage, are installed in a cabinet or secured on a hanger made for the extinguisher, and are at least 4 inches off the floor. Those fire extinguishers that are 40 pounds or less are installed so the top is not more than 5 feet above the floor.

(For full text, refer to NFPA 101-2012: 38/39.3.5; 9.7.4.1)



Sprinklers are not damaged. They are also free from corrosion, foreign materials, and paint and have necessary escutcheon plates installed.





There are 18 inches or more of open space maintained below the sprinkler to the top of storage.

Note: Perimeter wall and stack shelving may extend up to the ceiling when not located directly below a sprinkler

head.



# The hospital meets all other *Life Safety Code* extinguishing requirements related to NFPA 101-2012: 38/39.3.5.

#### "Taking Care Of Business"

Our Websites

The Joint Commission

#### Life Safety Code Floor Plans - Business Occupancies

## Are Life Safety Code floor plans required for business occupancies?

Search this site

Any examples are for illustrative purposes only.

LS.01.01.01 EP3 requires a hospital/organization to maintain "current and accurate drawings denoting features of fire safety and related square footage."

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Where the entire building is considered business occupancy by the definition of NFPA 101 (2012 edition) Life Safety Code, life safety drawings are not required. For mixed occupancy buildings where portions of the building are business occupancy, and other portions are either health care occupancy or ambulatory health care occupancy, life safety drawings are required for the whole building, including the sections that are business occupancy.

For hospitals and ambulatory health care facilities, LS.01.01.01 EP 7 requires that "the hospital/organization maintains current Basic Building Information (BBI) within the Statement of Conditions (SOC)." Organizations that have free-standing business occupancy buildings shall list them in the SOC under "Sites and Buildings."

Q Search



## "Taking Care Of Business"



Optimizing health care facilities



ASHE Business Assessment Tool



"THE''BOSS"



#### THE "BOSS" = Business Occupancy Simplified Survey

Building Information						
Name and title of auditor						
Name of facility			Date:			
Address of facility						
Year of original construction		Date of renovations				
		or additions				
Applicable codes and standards (include edition)						
Construction type		Occupancy type(s) (new or				
		existing)				
Number of stories at or above street level		Number of stories below street level				
Height above the lowest level of fire department vehicle access.		Total square footage				
		Emergency plan (Y/N)				
Occupant load above or below		Total occupant load				
level of exit discharge						
Fire alarm system type		Fully sprinklered (Y/N)				
Life safety drawings available (Y/N)						

