

## **Kansas Fire Marshal Question and Answer Sheet:**

### **Nursing Home Facilities:**

**Q: Is there any kind of portable and temporary heat source that can be deployed in a resident room during a time of emergency?**

**A:** There is no device that can be used in a resident room. From 2012 NFPA 101, 19.7.8: Portable space-heating devices shall be prohibited in all health care occupancies, unless both of the following criteria are met: (1) Such devices are used only in nonsleeping staff and employee areas. (2) The heating elements of such devices do not exceed 212 degrees Fahrenheit.

**Q: There is some confusion about visitors/residents needing to get a staff member to use their badge/enter a code to let them out of the facility. Can you elaborate on this?**

**A:** Cognitively aware residents, visitors, vendors, etc., must be able to exit the facility without assistance, special knowledge, or a tool. If they are not able to exit the door without getting a staff member to let them out, this would be a cited deficiency.

**Q: Do you have to do a full evacuation in Nursing Homes annually?**

**A:** There is no requirement for a full evacuation, as these facilities are designed to shelter in place. This was referenced during the emergency plan presentation as a good idea to test your facility's ability to evacuate, if necessary, but it is not required by fire code.

**Q: Fire Door Inspections annually--Is this training still provided--can you give me insight on who provides the training, or does it have to be by an outside vendor?**

**A:** Fire door inspections may be completed by facility **staff** if they have the experience and knowledge to inspect the doors to NFPA 80 standards and correctly document the inspections. CMS has stated that they consider obtaining an NFPA 80 certificate to be acceptable to show knowledge. This is an online course that can be completed on their website, <https://nfpa.org>

**Q: Earlier someone mentioned they have a fire panel on back up cell service to prevent interruption in service--Does the Fire Marshal ok with this system--this would be if phone lines, or internet went down.**

**A:** With this option, a dedicated cell phone dialer is built into the fire alarm system and automatically dials the monitoring company via the cellular network. This method of communication is allowed by code as it achieves automatic notification.

**Q:** **If you have instructions on the doors very clearly, but the residents have never tried to leave and has been there for years and they say I don't know, will that mean we're out of compliance?**

**A:** This could be cited as a deficiency.

**Q:** **What do you mean by a clinical need? A diagnosis for dementia? A BIMS score of less than 13?**

**A:** Clinical needs to be restricted to the facility are decisions made by medical professionals in alignment with patient care requirements. If you have questions regarding how to evaluate clinical needs, you will need to contact your licensing agency.

***The annex of the Life Safety Code A.19.2.2.2.5.1 gives basic guidance***

*Psychiatric units, Alzheimer units, and dementia units are examples of areas with patients who **might** have clinical needs that justify door locking. Forensic units and detention units are examples of areas with patients who **might** pose a security threat. Where Alzheimer or dementia patients in nursing homes are not housed in specialized units, the provisions of 19.2.2.2.5.1 should not apply.*

*A.19.2.2.2.5.2 Pediatric units, maternity units, and emergency departments are examples of areas where patients **might** have special needs that justify door locking.*

**Q:** **Please discuss requirements for residents who need to be restricted.**

**A:** **See Above**

**Q:** **What documentation do we need for residents to be in a locked memory care unit?**

**A:** A clinical needs assessment signed by a doctor.

**Q:** **Do we need to have an order from a physician indicating the resident requires the special/memory care unit?**

**A:** You need a signed clinical needs assessment for any resident requiring a full lock down environment.

## **Kansas Fire Marshal Question and Answer Sheet:**

### **Assisted Living Facilities:**

**Q: In an Assisted Living (AL) setting with a gated courtyard with egress doors providing access. We were told we could not have the gate locked with a keypad or key. Can you explain the reasoning behind having to remove the keypad lock from the gate?**

**A:** If the gate obstructs egress to the public way from a marked exit door from within the facility, then the gate is part of the required means of egress and cannot be locked unless complying with the following:

**33.3.2.2.2 Doors. Doors in means of egress shall be as follows:**

*(1) Doors complying with 7.2.1 shall be permitted.*

*(2) Doors within individual rooms and suites of rooms shall be permitted to be swinging or sliding.*

*(3) No door in any means of egress, other than those meeting the requirement of 33.3.2.2.2(4) or (5), shall be locked against egress when the building is occupied.*

*(4) Delayed-egress locks in accordance with 7.2.1.6.1 shall be permitted, provided that not more than one device exists in a means of egress.*

*(5) Access-controlled egress doors in accordance with 7.2.1.6.2 shall be permitted.*

*(6) Revolving doors complying with 7.2.1.10 shall be permitted.*

**Q: Can a maintenance man in an AL facility replace outlets?**

**A:** Yes.

**Q: AL Fire Drills - Is it ok to evacuate to a safe location, not necessarily completely out of the building?**

**A:** 2006 NPFA 101, 33.7.3.3 The drills shall involve the actual evacuation of all residents to an assembly point, as specified in the emergency plan, and shall provide residents with experience in egressing through all exits and means of escape required by this code.

**Q: Are there restrictions/regulations regarding air fryers or crockpots in residents apartments in an AL setting?**

**A:** There is nothing in code that specifically prohibits crockpots as long as they are appropriately plugged directly into a wall outlet. Air fryers have not been around long enough to make it into code books. **State Fire Marshal suggest you check Manufacturers guidelines. At this point we cannot say they are appropriate.**

**Q: Assisted living memory care 35-bed facility - We have an egress door that is always locked with a code to enter or exit. Our residents sometimes exhibit behaviors where they will push and hold the door for more than 15 seconds in attempts to elope due to their confusion. Is there any special circumstance where this door can be made to where it will not open in 15 seconds if the door code is clearly posted?**

**A:** The facility would need to apply for a waiver to extend the delay to 30-seconds. This should give staff adequate time to respond to are and re-direct. You have to exhibit strong evidence there is a clinical need to do so.

**Q:** **Can you provide the code for the 6 times a year evacuation of Assisted Living Residents?**

**A:** *2006 NFPA 101, 33.7.3.1 Emergency egress and relocation drills shall be conducted not less than six times per year on a bimonthly basis, with not less than two drills conducted during the night when residents are sleeping.*

**Q:** **In the second session we were told that we can cook eggs in AL or in a Memory unit if we are under 30 people. Our facility has 8 people on AL and 10 in our Memory unit. In the third session we were told that we need a hood suppression system if we are using grease vapors. An example of grease vapors given to us was cooking spray, oil or butter. Obviously, we use those things to cook eggs on a griddle or they would stick. Does that mean we need a hood suppression system to cook eggs and pancakes on our griddles?**

**A:** In assisted living facilities (16 or more residents), any cooking that produces a grease or grease laden vapor is required to be protected by a hood suppression system. The open kitchen concept applies to smoke compartments with less than 30 residents, where the kitchen equipment is not required to be in a separate room from the corridor. However, even in an open kitchen set-up, the grill is protected with a hood suppression system.

**Q:** **Do you have to notify the fire marshal if you go into fire watch at an Assisted Living or Home Plus as well?**

**A:** Yes, AHJ notification is required by NFPA 72 (fire alarm) and NFPA 25 (sprinkler).

**Q:** **Fire Door Inspections annually--Is this training still provided-can you give me insight on who provides the training, or does it have to be by an outside vendor?**

**A:** NFPA 80 has online training available for conducting fire door inspections.

**Q:** **Can we summarize the requirements for posting codes by doors for both assisted living/home plus and nursing facilities?**

**A:** Assisted living/home plus facilities are only allowed to lock doors using 15-second delay or access control. This is out of the 2006 Edition of LSC Chapter 33.

*33.3.2.2.2 Doors. Doors in means of egress shall be as follows:*

*(1) Doors complying with 7.2.1 shall be permitted.*

*(2) Doors within individual rooms and suites of rooms shall be permitted to be swinging or sliding.*

*(3) No door in any means of egress, other than those meeting the requirement of 33.3.2.2.2(4) or (5), shall be locked against egress when the building is occupied.*

*(4) Delayed-egress locks in accordance with 7.2.1.6.1 shall be permitted, provided that not more than one device exists in a means of egress.*

*(5) Access-controlled egress doors in accordance with 7.2.1.6.2 shall be permitted.*

*(6) Revolving doors complying with 7.2.1.10 shall be permitted.*

Nursing facilities are allowed to lock doors without the 15-second only if all residents have a clinical or security need to mandate complete lock-down. If the facility locks the doors without a 15-second delay installed, they will need to provide clinical assessments as well as provide a policy/procedure that involves notifying individuals without a clinical need (residents and guests) as to how to egress the facility.