MINUTES
HEALTHCARE INTERPRETATIONS TASK FORCE
Tuesday June 8, 2010
Mandalay Bay Convention Center
Las Vegas, NV

1. The meeting was called to order at 1:25 PM. **(See Enclosure A [Agenda])**

2. Introduction of members and guests was completed. Those in attendance included:

MEMBER	**REPRESENTING**
Ken Bush*	Maryland State Fire Marshals Office Rep. International Fire Marshals Association (IFMA)
Lewis Faulkner*	IHS Division of Engineering Services Rep. Indian Health Services (IHS)
Skip Gregory*	State of Florida Agency for Health Care Administration Rep. Agency for State of Florida Healthcare Administration
Philip Hoge *	U. S. Army Corps of Engineers Rep. Department of Defense (DoD)
Thomas Jaeger	Jaeger and Associates, LLC Rep. American Health Care Association (AHCA)
James Merrill*	U.S. Dept. of Health & Human Services Rep. Centers for Medicare/Medicaid Services (CMS)
Robert Solomon	National Fire Protection Association
Chad Beebe* (ALT to J. Gregory)	Washington State Department of Health Rep. Washington State Department of Health
Dave Dagenais (ALT to D. Erickson)	Wentworth-Douglas Hospital Rep. American Society for Healthcare Engineering (ASHE)
John Fishbeck* (ALT. to G. Mills)	The Joint Commission Rep. The Joint Commission
Gregory Harrington (ALT R. Solomon)	National Fire Protection Association
Peter Larrimer* (ALT to D. Klein)	U.S. Department of Veterans Affairs Rep. Department of Veterans Affairs (VA)
Richard Strub (ALT to T. Jaeger)	American Health Care Association (AHCA) Rep. American Health Care Association (AHCA)

*** Voting AHJ Member**

GUESTS	REPRESENTING
Bruce Abell	U.S. Army Corps of Engineers (MX)
Tim Adams	ASHE
Don Bender	Loma Linda University Medical Center
Lyn Bentley	American Health Care Association
Mark Berger	Securitech Group/BHMA
Jeff Coombs	Cleveland Clinic
A. Richard Fasano	Russell Phillips & Associates
Jerry Gervais	Joint Commission
Virgil Hall	U.S. Department of Veterans Affairs
George Johnston	Loma Linda University Health Services
James Lathrop	Koffel Associates, Inc.
Peter Leszczak	Department of Veterans Affairs (VA)
Nancy McNabb	National Fire Protection Association
Tom Scheidel	Compliance Management Service
W. Thomas Schipper	Providence/LCM Hospitals
David Seitz	HCF Management, Inc. & NCAL
Kenneth Sun	CMS

3. Review of Questions.

A. Sprinkler Clearance. This subject involves the sprinkler clearance rules in NFPA 13 and if the shelving that is positioned against the wall has to be secured to the wall. The HITF members agreed that – a. Shelving isn't even required for the storage. b. There is no correlation between the shelving, the clearance and the need to secure any shelving. The HITF issued a response to this item **(See Enclosure B-1 [Issued Interpretation]).**

B. Fire Pins in Fire Doors. This subject includes the use of thermal pins that are installed in certain fire rated doors that are used as egress/exit doors. Once exposed to a certain temperature, typically 400^{o} F, the thermal pins actuate and preclude the door from being operated/opened. The discussion about these devices noted, among other things, that these devices are relatively new and that based upon the operating temperatures of the device, that the door would not be usable any way. The HITF revised the question as follows and developed a qualified response.

> **Question:** Are rated fire doors required to be operable after the door is exposed to a fire that is representative of the test conditions used to obtain the rating of the door?
>
> **Answer: NO**. The HITF notes that a door that is exposed to these test conditions is no longer likely to be available as an egress path. (See 7.2.1.5.1 of NFPA 101 – 2000 edition).

In addition, the HITF notes the following:

- NFPA 252, *Standard Methods of Fire Tests of Door Assemblies*, 2008 Edition: Section 7.1.7.2 does not require the door hardware to be operable after the test.
- NFPA 101, 2012 edition (proposed) has a specific proposal that has been acted on to explicitly account for use of the thermal pins. See ROP proposal 101-75.

Although the 2000 edition did not explicitly consider the use of these devices, the proposed change for NFPA 101 is obviously considering and recognizing the use of these devices. For convenience, the text of the proposal is as follows:

7.2.1.5 Locks, Latches, and Alarm Devices.
7.2.1.5.1 Door leaves shall be arranged to be opened readily from the egress side whenever the building is occupied.
7.2.1.5.2* The requirement of 7.2.1.5.1 shall not apply to door leaves of listed fire door assemblies after exposure to elevated temperature in accordance with the listing based on laboratory fire test procedures.
7.2.1.5.3 Locks, if provided, shall not require the use of a key, a tool, or special knowledge or effort for operation from the egress side.
7.2.1.5.4 The requirements of 7.2.1.5.1 and 7.2.1.5.3, shall not apply where otherwise provided in Chapters 18 through 23.
A.7.2.1.5.2 Some fire door assemblies are listed for use with fire pins or fusible links that render the door leaf release inoperative upon exposure to elevated temperature during a fire. The door leaf release mechanism is made inoperative where conditions in the vicinity of the door opening become untenable for human occupancy and such door opening no longer provides a viable egress path.

(Proposed new language underlined)

(See Enclosure B-2 [Issued Interpretation])

C. Exit Access from Suites. This subject concerns exit access corridors and their proximity to a suite and if an exit stair can be substituted for the exit access corridor. The HITF noted that the reason you need to gain access to an "Exit Access Corridor" is so the patient(s) can be relocated across a smoke barrier such that the defend in place concept can be executed. Only having access to an exit stair would require a much greater effort to relocate a patient.

The HITF issued a response to the first two questions as follows:

Answer 1: YES. See NFPA 101: 19.2.5.1, Exception #3 concerning suites.

Answer 2: NO.

(See Enclosure B-3 [Issued Interpretation])

D. Inventory Management Systems. This subject concerns use of the modular cabinet units that are becoming more popular. These devices are used to store large quantities of basic nursing supplies. The concern is does the space or area, such as a nurses station, become categorized as a storage area if the space is over 50 square feet.

The HITF determined that a response on this subject cannot be developed. Factors such as what is the area housing the Inventory Management System being used for? What is being stored in the Inventory Management system? The HITF determined that there are too many unknowns with regard to determining how to classify the space where the storage device is located.

HITF members Ken Bush, Dave Dagenais, Tom Jaeger and Pete Larrimer will look at the issue more closely and see if there might be a proposal for the 2012 edition of NFPA 101 that can be used to clarify use of this equipment. Addressing this type of storage system is more appropriate for inclusion in the Code rather than by being addressed by the HITF.

E. Two Hour Floor/Ceiling Assembly. This was a supplemental agenda item. The issue involves a 2 hour rated floor/ceiling assembly being used to serve as an occupancy separation in a healthcare occupancy. Some jurisdictions (perhaps because of their state code provisions) apparently have been disallowing this type of assembly from being used as a proper barrier to provide the occupancy separation. The NFPA *Life Safety Code* has contained specific language allowing such assemblies to be used. This same subject was discussed as far back as 2004 by the HITF (November 16, 2004 Minutes) and given that the issue was so clear (and still is) in the *Life Safety Code*, an HITF position was not issued. Since this item continues to be problematic in some jurisdictions, the following response was issued.

> **Question:** May a 2-hour floor/ceiling assembly be used as the required membrane for occupancy separation as set forth in Section 19.1.2.1 of the 2000 edition of the Life Safety Code?
>
> **Answer: YES**.

(See Enclosure B-4 [Issued Interpretation])

F. Projections Along Corridor Walls. This was a supplemental agenda item. This question raised the potential interpretation issues caused by the presence of multiple elements/devices placed along the corridor. NFPA 101: 18.2.3.4/19.2.3.4 provides very specific criteria for placement of projections along the corridor. The essence of this question is at what point do the number, length, width and thickness of any components create excessive encroachment thus causing a violation of the Code. The NFPA 101 rule requires a 48 inch separation between devices or components attached to the wall. The example provided in the question considered a series of chart stations, ABHR dispensers and fire alarm pull boxes. The question becomes can multiple devices be positioned less than 48 inches apart from one another? The HITF determined there are too many variables to respond to a question based on this rule – for example, it is not known if groupings of projections can be considered within the 48 inch separation rule. Also, the HITF considered what happens if a sign with a 1/16 inch or 1/8 inch

thickness is installed on the wall. Would that be a contributor to the projection rules? The HITF noted that Proposal 101-265a for the 2012 edition of NFPA 101 is looking at the broad topic of items in the corridor. This proposal might be used by a member of the HITF (if they so choose) to introduce a public comment to try and further clarify the placement of the other devices/components.

4. New Business

a. An update was given on the ITM Summit held at NFPA at the end of May. The summit was convened to determine how NFPA 72 could better correlate some of its ITM criteria with related documents. As an example, the testing frequency for a smoke damper (NFPA 80) and the testing frequency for the detector and motorized equipment to close the damper (NFPA 72) were cited as one example of where the two documents could be better coordinated. The published report from the summit will be used by the NFPA 72 committee to work towards consistency with the affected NFPA Codes and Standards.

b. Health Care Summit – Arrangements for this summit are being finalized. This summit will focus on trends in delivery of healthcare and how NFPA technical committees should start to look at those trends.

5. **Old Business.** None.

6. Next Meeting. A date for the next meeting of the HITF will not be determined until October 2010. HITF members must submit any planned agenda items to NFPA not later than Friday, October 1, 2010. If a sufficient number of items are received, an HIFT meeting will be held in December 2010. The meeting would be held right before or right after the NFPA 1 ROC meeting in Orlando, FL. Tentative meeting dates would be December 13 or December 16, 2010. If a sufficient number of agenda items are not received by October 1st, consideration will be given to holding a conference call meeting. Otherwise, the next meeting would be deferred until June 2011 during the NFPA Conference in Boston, MA

7. Adjournment. The meeting was adjourned at 4:55 PM.

Minutes prepared by Robert E. Solomon

ENCLOSURE A

AGENDA

HEALTHCARE INTERPRETATIONS TASK FORCE AGENDA

JUNE 8, 2010
Mandalay Bay Convention Center
South Convention Center
Level 2 - Reef C
3950 Las Vegas Boulevard South
Las Vegas, NV 89119
1:00 P.M. – 6:00 P.M.

1. Call to order 1:00 P.M.

2. Introduction of Members and Guests.

3. Review of Questions

A. 18 in. Sprinkler Clearance - American Society for Healthcare Engineering (ASHE) - (See Enclosure A-1 – Page 3)
B. Door Pin - American Society for Healthcare Engineering (ASHE) - (See Enclosure A-2 – Page 4)
C. Exit Access from Suites - American Society for Healthcare Engineering (ASHE) - (See Enclosure A-3 – Page 5)
D. Storage Areas - American Society for Healthcare Engineering (ASHE) - (See Enclosure A-4 – Page 6)

4. New Business

- ITM Summit – May, 2010
- Health Care Summit – July, 2010

5. Old Business

6. Date / Location for Next Meeting

7. Adjournment (by 6:00 P.M.)

ENCLOSURE B

INTERPRETATIONS

HITF INTERPRETATION
JUNE 2010 NO. 1

Agenda Item 3.A. – (D. Dagenais)

Document to be interpreted: NFPA 13, 1999 edition, 5-8.5.2.1; 2002 edition, 8.6.6; and 2002 edition, A.8.6.6.

Edition: 1999 and 2002

Background Information (optional): 18" Sprinkler Clearance

In a healthcare setting many organizations use perimeter walls for storing items. This storage is accomplished with the use of wire racks that may be free standing on the floor or have wheels so they can be moved to facilitate cleaning. Some AHJs are requiring that perimeter wall shelving be fastened to the wall. NFPA 13 (2002) A.8.6.6 states "shelving on a wall or shelving against". The word against seems to imply a free standing unit set against the wall is permitted without fastening.

Question 1:

Is it required that perimeter wall shelving that extends to the ceiling be fastened to the wall?

Answer 1: NO

a. Shelving isn't even required for the storage.
b. There is no correlation between the shelving, the clearance and the need to secure any shelving.

HITF INTERPRETATION
JUNE 2010 NO. 2

Agenda Item 3.B. – (D. Dagenais)

Document to be interpreted: NFPA 101, 2000 edition, 4.5.3.1, 4.5.3.2.

Edition: 2000

Background Information (optional): Fire Pins in Fire Doors

In recent months, hospitals, during routine inspections have been presented inspection citations as a result of employing thermally fused pins in fire door assemblies with less-bottom-rod (LBR) exit devices. These citations are issued because the door will fail to operate as a means of egress, as defined by the Life Safety Code, when the thermally fused pins are activated.

Thermally fused fire pins have long been used in fire door assemblies when LBR exit devices are installed. The thermally fused fire pin is an integral part of the fire door assembly and without it, the assembly cannot be fire rated.

Thermal pins are activated only when their core temperature exceeds approximately 400 F, at which point temperatures on the fire side of the door assembly are in excess of 1200 F. At these temperatures there is no longer an egress requirement from the fire-side of any opening at these elevated temperatures.

Regardless of the use of a thermally fused pin, the door assembly will not function as a means for egress at these temperatures because the door will have expanded so forcefully into the frame it will not open. Secondly, there are additional thermal pins used in nearly every type of fire rated latching hardware, including the top latch of the very same LBR exit device your inspectors are rejecting.

The fire door assembly in a pathway of egress serves two purposes, a means for egress, and a fire barrier. We submit to you that when the fire barrier function of the assembly is required, the egress function is moot and irrelevant.

Question 1:

Are rated fire doors required to be operable after the door is exposed to a fire that is representative of the test conditions used to obtain the rating of the door?

Answer 1: NO

The HITF notes that a door that is exposed to these test conditions is no longer likely to be available as an egress path. (See 7.2.1.5.1 of NFPA 101 – 2000 edition).

In addition, the HITF notes the following:

- NFPA 252, *Standard Methods of Fire Tests of Door Assemblies*, 2008 Edition: Section 7.1.7.2 does not require the door hardware to be operable after the test.
- NFPA 101, 2012 edition (proposed) has a specific proposal that has been acted on to explicitly account for use of the thermal pins. See ROP proposal 101-75.

Although the 2000 edition did not explicitly consider the use of these devices, the proposed change for NFPA 101 is obviously considering and recognizing the use of these devices. For convenience, the text of the proposal is as follows:

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7.2.1.5.4 The requirements of 7.2.1.5.1 and 7.2.1.5.3 shall not apply where otherwise provided in Chapters 18 through 23.
A.7.2.1.5.2 Some fire door assemblies are listed for use with fire pins or fusible links that render the door leaf release inoperative upon exposure to elevated temperature during a fire. The door leaf release mechanism is made inoperative where conditions in the vicinity of the door opening become untenable for human occupancy and such door opening no longer provides a viable egress path.

(New proposed text is underlined)

HITF INTERPRETATION
JUNE 2010 NO. 3

Agenda Item 3.C. – (D. Dagenais)

Document to be interpreted: NFPA 101, 2000 edition, 19.2.6.2.4

Edition: 2000

Background Information (optional): Exit Access From Suites

In many cases within a healthcare setting there are suites built and designed with stairwells within them. These stairwells provide similar or greater protection than exit access corridors. In some cases AHJs are enforcing travel distance limitations to "exit access corridors" even though there is a valid "exit" stairwell within the suite.

Question 1:

Is it the intent of 101 (2000-19.2.6.2.4) to require every sleeping suite to have access to an "Exit Access Corridor"?

Answer 1: YES

See NFPA 101: 19.2.5.1.1, Exception #3 concerning suites.

Question 2:

If the answer to question 1 is "yes", is a stairwell within the suite allowed to be substituted as an "exit access corridor"?

Answer 2: NO

HITF INTERPRETATION
JUNE 2010 NO. 4

Supplemental Agenda Item – (D. Klein)

Document to be interpreted: NFPA 101, 2000 edition, 19.1.2.1

Edition: 2000

Background Information (optional): Two Hour Floor/Ceiling

The issue includes a 2 hour rated floor/ceiling assembly being used to serve as an occupancy separator in a healthcare occupancy. Some jurisdictions (perhaps because of their state code provisions) apparently have been disallowing this type of assembly from being used as a proper barrier to provide the occupancy separation. The NFPA *Life Safety Code* has contained specific language allowing such assemblies to be used. This same subject was discussed as far back as 2004 by the HITF (November 16, 2004 Minutes) and given that the issue was so clear (and still is) in the *Life Safety Code*, an HITF position was not issued. Since this item continues to be problematic in some jurisdictions, the following response was issued.

Question 1:

May a 2-hour floor/ceiling assembly be used as the required membrane for occupancy separation as set forth in Section 19.1.2.1 of the 2000 edition of the Life Safety Code?

Answer 1: YES