# Why the Grinch won't steal Christmas Holiday Decorations & General Fire Safety

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# Goals

- How to avoid the Grinch this holiday season
  - Understand NFPA 101 regarding holiday decorations
- Discuss and understand fire safety statistics in Health Care Occupancies (HCO)
- Refresh understanding of general fire safety requirements in HCOs
- Understand additional challenges HCOs face during the winter months.

### Contact BSC - <u>https://www.michigan.gov/BSC</u>

Organization Details	Monday - Friday. 8:00am - 5:00pm
Jennifer Belden Director	Phone: 517-284-0193
	For general inquiries.
	Email: <u>LARA-BSCHelp@michigan.gov</u>
	To request documents pursuant to the Freedom of Information Act.
	Email: LARA-BSCFOIA@michigan.gov
	For correspondence related to provider administrative changes and documentation.
	Email: LARA-BSCSupport@michigan.gov
	Emergent event reporting
	<b>Phone:</b> 1-800-882-6006 (Press #4)
	Website: https://www.michigan.gov/lara/0,4601,7-154-89334_63294_63384_70218-339092,00.html

### Who We Are Environmental Health & Safety Section Fire Safety Unit

Section Manager – Laura Remus

Fire Safety Supervisor – Gerald Rodabaugh

Section Analyst – Kim Osborn

### **Fire Safety Inspectors**

Randy Davis Josh Dirschell John Hanes Jeff Lachman

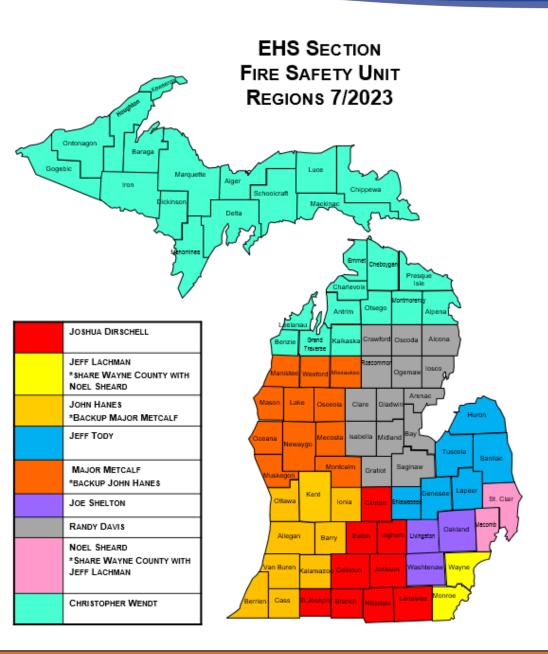
Major Metcalf

**Noel Sheard** 

Joe Shelton

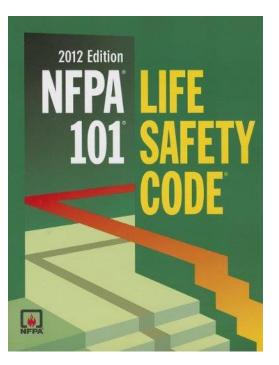
Jeff Tody

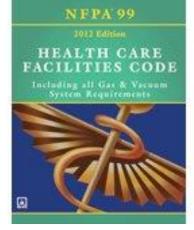
Chris Wendt



# Code References

- National Fire Protection Association (NFPA)
  - 101: Life Safety Code, 2012 edition
  - All referenced publications within
  - Chapter 18 New/19 Existing
- NFPA 99: Health Care Facilities Code
  - 2012 edition
  - All referenced publications within







- 2009-2013: Nursing Homes averaged 2630 fires per year
  - 3 deaths
  - 101 injuries
  - 8.9 million in property damages
- Saturday and Sunday between 9a-12p and 3p-6p
  - Least common between 12a-6a.



- Cooking Equipment: 66%
- Heating Equipment: 7%
- Electrical and Lighting 5%
- Smoking 4%
- Intentional 4%
- 42% of injuries and 35% of fatalities resulted from the 7% of fires that start in the bedroom or resident room.

- 88% of fires confined to object of origin
  - Only 3% spread
  - 75% of fires automatic extinguishing systems were present
- Evidence shows life safety systems save lives and prevent catastrophic fires

- 2011-2015: **HCOs** averaged 5750 structure fires annually
  - NHs: 48% (appx 2760)
    - Slight upward trend compared to 2009-2013
  - 2 deaths\*
  - 157 injuries\*
  - 50.4 billion in damages \*
- \*NHs accounted for a disproportionate higher number of injures, but smaller property damage relative to other HCOs.
  - Hospitals/Hospices, Clinics, Docter Offices, Mental Health Facilities.

# Holiday Fire Facts

- Average 790 structure fires per year that begin with decorations
  - Average one civilian death
  - 26 civilian fire injuries
  - \$13 Million in damages
- 2 in 5 fires involved Christmas trees
- Candle fires peak in December and January
- Thanksgiving is peak day for fires, followed by Christmas eve and Christmas day



- Flammable decorations are prohibited.
  - Candles
- Combustible decorations are prohibited, unless one of the following is met:
  - Flame retardant
  - Or material is treated with approved fire-retardant coating
  - Or Meet NFPA 701
  - Or Heat release rate does not exceed 100 KW when tested to NFPA 289
  - Or Photos, paintings, other art on walls, ceilings, non-fire rated doors are in accordance with the following :

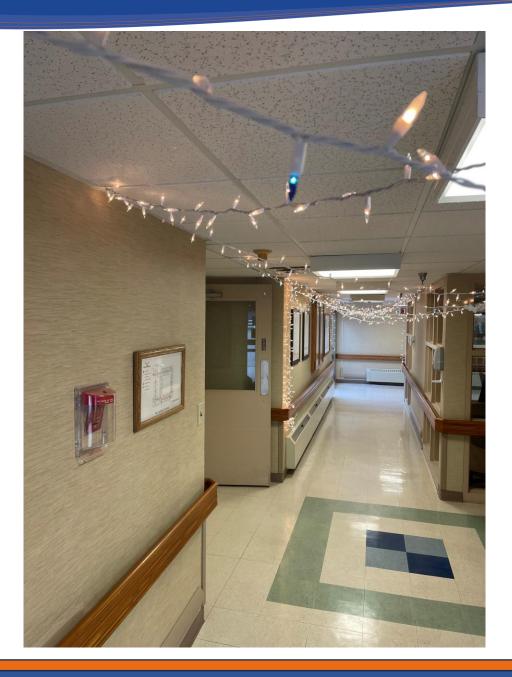
- Decorations do not interfere with door operation or locking AND
  - Decorations do not exceed 30% of wall, ceiling, and door areas inside any room or space of a smoke compartment that is sprinklered.
  - Decorations do not exceed 50% of wall, cleaning, and door areas inside resident or patient sleeping rooms (4 or less people) that are fully sprinklered
- OR
- Decorations such as photos and paintings are limited in quantities and do not present a hazard for fire development or spread.
- Bulletin boards, posters, and paper attached directly to wall area permitted with a maximum of 20% of are covered.





- Do not hang from sprinkler system (heads or pipes), fire alarm system smoke detectors or horn/strobes.
- Do not hang from celling tiles or ceiling grids.
- Do not block exit signage or emergency lighting

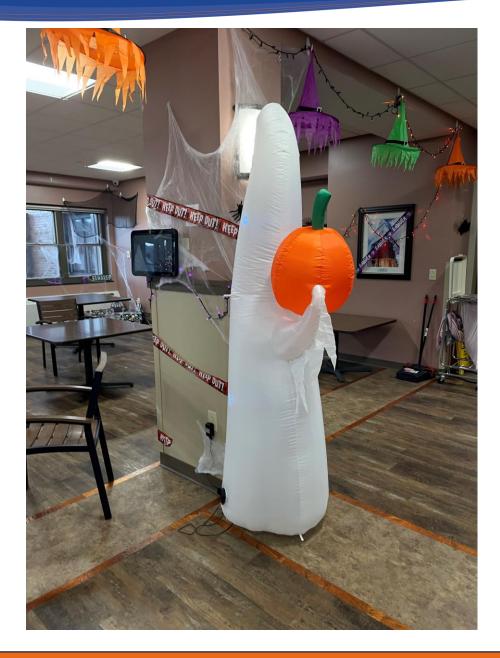


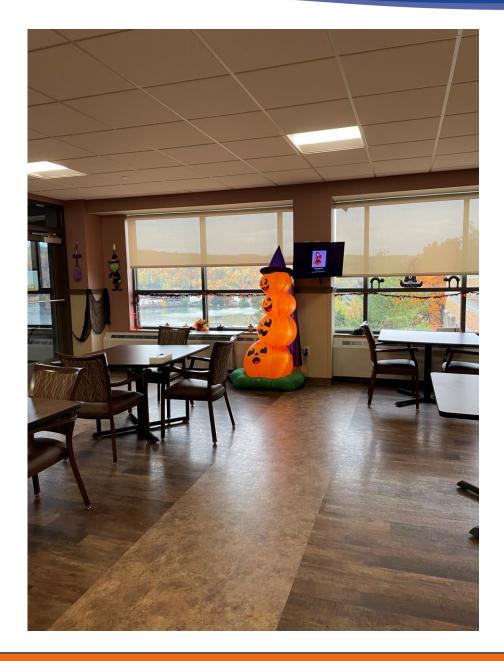




- No decorations on fire doors, or doors in corridors
- Fire doors, hallway doors and resident room doors shall not be wrapped
  - Doors can not be held open unless meeting 19.3.6.3.10
- Decorations should not block windows or vision panels







- Visually inspect all electric cords prior to using
- Place electric cords and light strings to avoid a trip hazard
- Can't daisy chain extension cords, plug directly into wall receptacle
- Exterior decorations must be rated for exterior use

- Live Christmas trees are prohibited
- Decorative Christmas trees are permitted if
  - They are listed and in good working condition
  - Installed and maintained per manufactures instructions
  - Inspected prior to use
  - Installed in a permitted location





## Live Christmas Trees Fires



# Holiday Lighting / Flexible Cords and Cables

- Holiday string lighting are permitted if:
  - UL listed (or equivalent)
  - Daisy Chained if permitted by manufacture instructions
  - Facility maintains documentation
- NFPA 70: 90 day for holiday decorative lighting or similar purposes



Home Accents Holiday 200L Multi Faceted Christmas LED String Lights

★★★★ (157) ∨ Questions & Answers (19)



Dimensions				
Lead length (in.)	4	Lighted length (ft.)	66.3	
Wire Gauge	22			
Details				
Battery Size	None, Plug-In Only	Bulb Shape	C6	
Bulb Spacing (in.)	4	Bulb Texture	Faceted	
Commercial/Residential	Residential	Features	Continuous on technology, Super Bright	
Holiday Decor Product Type	String Lights	Included Items	Extra Bulbs, Fuses	
Indoor/Outdoor	Indoor, Outdoor	Light Bulb Color	Multi Color Lights	
Light Count	200	Light Functions	Steady	
Light Temperature	Neutral	Light Type	LED	
Maximum Number of Sets Connected	12	Number of Batteries Required	0	
Power Type	Plug-in	Returnable	90-Day	
Wattage (W)	16.8 W	Wire Color	Green	
			,	

#### Warranty / Certifications

 $\heartsuit$ 

Certifications and Listings

UL Certified

#### CAUTION:

This string is rated 21 Watts (0.175Amps ), do not overload. Connect other Lighting Strings or decorative outfits end-to-end up to a maximum of 216 Watts (1.8 Amps) total. If connecting to a lighting string that does not have a wattage (W) rating (found on the tag within 6 inches of the plug), Calculate The wattage (W) as follows: Multiply the current (A) which is on the flag type label located Within 6 inches of the plug, by 120. For example, string is rated 120V, 60Hz, 0.175Amps

0.175×120= 21 Watts.

Add the wattage of each light string together for a total of 216 Watts or less. (Do not exceed 216 Watts.)

#### CAUTION:

1) Risk of fire. This product does not contain shunts inside the lamps. Replace lamps only with the spare lamps provided with this product.

2) Replace lamps only with 3.4 volt, 0.068 watt spare LED lamps provided with this product.

3) Do not operate with bulbs missing from sockets. Missing bulbs should be replaced promptly.

4) To reduce the risk of electric shock, personal injury, or fire, replace broken bulbs before using.

5) To reduce the risk of fire and electric shock: a) Do not install on trees having needles, leaves or branch coverings of metal or materials which look like metal. b)

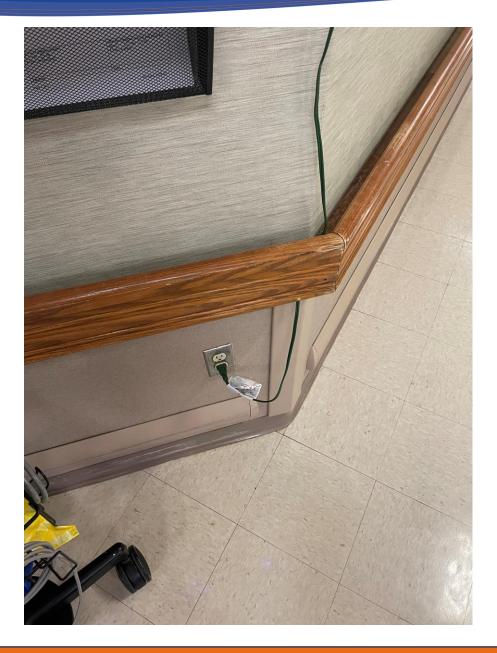
Do not mount on support strings in manner that can cut or damage wire insulation.

# NFPA 70, 400.8: Flexible Cords and Cables

- Not a substitute for permanent wiring!
- Can't be run through holes in walls, ceilings, or floors
- Can't be ran through doorways, windows, or similar openings
- Can't be attached directly to building surfaces
  - Can when:
    - Concealed by ceilings, walls, or floors.
    - Located in a raceway
    - or where suspectable to physical damage.

# Power strips

- Three types
  - Patient Care-Related Electrical Appliances (PCREE): UL 1963A or ANSI 60601-1
  - Non-PCREE (within Patient/resident vicinity): UL 1963
  - Outside Patient/Resident vicinity: Must be UL listed
- Tripplite.eaton.com (Hospital Grade Power strips)









# Non-PCREE and Outside PT Vicinity

- At a minimum, power strips that are UL listed, or equivalent, can be used for holiday decorations.
  - Extension cords can not be plugged into power strips
- UL 1963A, UL1963, or ANSI 60601-1 power strips can also be used.
- Non-grounded appliance can be used outside of PT care vicinity
  - Must still be UL Listed

# Portable Space Heating Devices



- Prohibited in all HCOs, unless **both** of the following are met:
  - Used in non-sleeping staff and employee areas
  - Heating elements do not exceed 212F.
- Facility should have policy
  - Approval process (facility owned units, inspection process, etc.)
- Devices should be listed, have tip over protection feature, plugged directly into wall receptacle.
- Maintain documentation/manufacture specs

# Holiday Cooking

- Residential ovens in facility's may be used more often during holiday season
  - Deep Frying is prohibited
  - Portable fire extinguisher present
  - Unit is powered off/locked when not in use
  - Switch installed to deactivate when not under supervision
  - Switch is on a timer, not exceeding 120 min that automatically deactivates unit



# Means of Egress-General

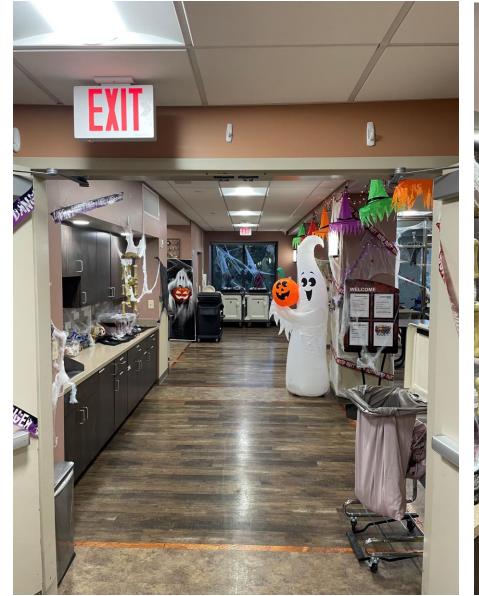
- Aisles, passageways, corridors, exit access and discharges are continuously maintained free of all obstructions to full use in case of an emergency.
- No furnishings, decorations, or other objects block access to exits, their access thereto, egress therefrom, or visibility thereof.
- Always maintain a minimum headroom of 6' 8"

# Items into the Corridors

- Permitted only if **all** are met
  - 1. Wheeled and does not reduce clear width to less than 60"
  - 2. Fire Safety Plan/Code Red Policy address clearing the corridor during and emergency
  - 3. Wheeled equipment is limited to the following
    - Equipment and carts in use
    - Medical emergency equipment not in use
    - Patient Lift and transport equipment

# Projections into the corridor

- Aisle, corridors, or ramps serving egress from resident sleeping areas shall not be less than 48".
- Where at least 6' wide, noncontinuous projections not more than 6'' from corridor wall, above handrail height is permitted.





# Projections into the corridor

• Where at least 8' wide, projections into the required with shall be permitted for fixed furniture provide **all** are met:

Securely attached to floor or wall

Does not reduce width to less than 6'

Located on one side of corridor

➢Grouped in an area not exceeding 50sqft

≻Grouped furniture are separated by 10'

>Does not obstruct access to building services and fire protection equipment

Smoke detection in corridors and sprinkler protection

## Discharge from exits

- Provides level walking surface in respect to elevation changes.
  - Removal of snow, sidewalk conditions, leaves/grass/bushes/branches
- Maintained free of all obstructions
- Maintained to the public way.
- 2 Bulb minimum for discharge lighting







### Snow Removal/Fire Department Access

- All posted exits shall be maintained free of any obstructions
  - Snow removed to the public way
- Fire hydrants located on property shall be clear of snow and accessible 36" in all directions
- Fire Department Connections shall be visible and accessible
- Post Indicating Valves shall be visible and accessible.





### Snow Removal

- HVAC Units, exhaust ducts, ventilation systems should be kept clear of snow
  - Carbon monoxide and overheating concerns
- Business address/fire numbers visible



### Q & A Session



## **Temporary Waivers**

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**LARA** Protect People & Promote Business

## Types of Waivers

#### • Waivers

- Continuing Waiver
  - Request needs to show two things
    - The waiver would not adversely affect patient/resident health and safety
    - It would impose an unreasonable hardship on the facility to meet specific LSC provisions
- Temporary Waiver
  - Used when corrective action will take more than 60 days (or early DPNA)
  - What the corrective action will be
  - Measurable Milestones for the project
  - What interim life safety measures will be implemented while TW is in place
- No authority to waive EP regulation

- Fire Safety Evaluation System (for use with Continuing Waivers-Annual)
  - Available for facilities that are surveyed as health care
  - Needs to be a complete evaluation of the entire facility
  - Needs to be done with every recertification survey
    - Facility can change
    - New deficiencies need to be addressed
    - Resident population changes
- Waivers/FSES
  - Reviewed and recommended for approval by the state agency before forwarded to <u>CMS for final approval</u>
- Educate while surveying
  - If accompanied explain to providers why something is being looked at and why something is deficient
- Revisit
  - Determine compliance with the cited requirements and Plan of Correction

#### **Instructions for Requesting a Temporary Waiver in ePOC**

- A Temporary Waiver (TW) may be requested for corrective action requiring more than 60 days from the exit date of the LSC Survey, in which the correction is clearly beyond the control of the facility/provider.
- A TW will not be recommended for a correction that could be made in a reasonable period of time (less than 60 days) or a correction that is clearly within the control of the facility/provider.

# Include the following information in the ePOC text field in the appropriate K-tag

- The first paragraph must document to CMS, the justification that the unmet provision would not adversely affect the health and safety of the residents/staff of the facility.
- In the second paragraph CMS requires, a timetable with measurable milestone dates of major activities to correct the deficiency that the surveyor could monitor on any subsequent follow-up visit. Failure to follow the timetable and milestones established may result in enforcement actions.

# Include the following information in the ePOC text field in the appropriate K-tag

- In the third paragraph CMS requires that when a TW of LSC requirements is in effect, the facility shall have increased fire safety awareness. This increased fire safety awareness may include the establishment of interim safety measures such as a Fire Watch, an increased number of fire drills, training of staff at the facility or other measures that would provide an increased measure of fire protection.
- **TEMPORARY WAIVER EXPIRATION DATE:** Enter the date in which the K-tag will be corrected and in full compliance in ePOC at the Completion X5 field

# Include the following information in the ePOC text field in the appropriate K-tag

- NOTE: The TW should be requested for a reasonable period of time to complete all activities, including planning, design and plan review submittal/approval by the Bureau of Fire Services. BE SURE TO ALLOW SUFFICIENT TIME. If the correction is not made by the date entered in ePOC at the Completion X5 field, the TW will expire, you will be given no further opportunity to extend the TW and penalties may be imposed for items not corrected on the Completion X5 date or expiration date of the TW.
- \*\*\*REFER TO YOUR ENFORCEMENT LETTER FOR FURTHER INSTRUCTIONS. \*\*\*

### Q & A Session for Temporary Waivers

## Thank you!

• Have a safe and happy holiday season!



