ASHE

Guidance Statement to Membership

As a service to members, these statements are distributed when there is a significant development that affects your job and your community. ASHE strives to provide you with accurate and clearly defined information on the latest solutions, best practices and other information affecting the health care physical environment.

CMS Waiver Requirement for Extending Damper Testing to Six Years

As many of you are aware, the NFPA codes have been changed to permit a six-year testing frequency for fire and smoke dampers in hospitals. In its standards, the Joint Commission has recognized these new requirements as an enhancement to the overall safety of our health care environment. Compliance with the six-year testing frequency will reduce necessary shut-downs of hospital ventilation systems as well as the number of times dampers in patient-occupied environments will need to be accessed. The new requirements will also result in significant cost savings.

CMS recognizes the positive impact of the new testing requirements. However, because the six-year frequency is part of NFPA documents CMS has not formally adopted, the agency is requiring every hospital to request a waiver to adopt the six-year testing cycle. These waivers are only good for the duration placed on them by the CMS Regional Offices (we have been told one to two years) so they will need to be resubmitted as instructed by your regional office.

How Do You Get a Waiver?

The process is very simple. Fill out the cover page of the CMS Fire Safety Survey Report form (a copy is attached to this document) with your organization's provider number, name, and address. There is no need to include any additional information on the cover page. Insert the following text into the justification section of Part IV, the waiver request portion of the survey report form (a copy is attached):

> We are requesting a waiver of K67 to permit the use of the 2007 edition of NFPA 80 and NFPA 105 so damper testing can be performed one year after installation and every six years thereafter. See code sections added below.
>
> **Waiver Request on K67:** K67 Heating, ventilating, and air conditioning shall comply with 9.2 and shall be installed in accordance with the manufacturer's specifications. CMS current referenced codes: 18.5.2.1, 19.5.2.1, 9.2, NFPA 90A, 18.5.2.2, 19.5.2.2.
>
> **Rationale for Waiver:** NFPA 90A: *Standard for the Installation of Air-Conditioning and Ventilating Systems*, 1999 edition, Section 3-4.7 Maintenance, specifies that dampers must be tested at least every four years, ... The NFPA 90A deficiency identified in K67, fire and smoke damper testing, has been updated in more recent editions of NFPA 80: *Standard for Fire Doors and Other Opening Protectives*, 2007 edition, and NFPA 105: *Standard for the Installation of Smoke Door Assemblies*, 2007 edition. The current language in these documents reads:
>
> > NFPA 80—19.4. Periodic Inspection and Testing
> > 19.4.1. Each damper shall be inspected and tested 1 year after installation.

19.4.1.1. The test and inspection frequency shall be every 4 years, except in hospitals, where the frequency shall be every 6 years.

NFPA 105—6.5 Periodic Inspection and Testing
6.5.2 Each damper shall be tested and inspected one year after installation. The test and inspection frequency shall then be every 4 years, except in hospitals, where the frequency shall be every 6 years.

Reasons for the Conclusion:

(1) Permitting the modification of K67 to require testing of dampers every six years instead of every four years would eliminate an unreasonable hardship on the facility by reducing the following:

- The number of service events for testing dampers
- The opportunity for ceiling tiles to become soiled or damaged
- The number of times service personnel are standing on ladders in patient- and visitor-occupied spaces

(2) Permitting the modification of K67 to require testing of dampers every six years would enhance the health and safety of the patient in the patient care environment by limiting the following:

- The number of times air-handling units need to be shut down to conduct testing. The practice of shutting down fan units or disrupting the airflow when exercising the damper modifies the room pressure relationships of patient care environments, creating a potential risk of airborne particulate being transferred to adjacent areas.
- Opening of ceiling tiles or access panels in occupied patient care environments that could cause health care associated infections
- The number of times ladders and service equipment are placed in occupied patient care corridors, thereby eliminating the risk of patient falls, obstruction of code response teams, obstruction of patient transport, etc. caused by their presence.

Submit your waiver request to the following:

1. Your CMS Regional Office. Download a CMS contact list from the ASHE Web site at http://www.ashe.org/ashe/codes/cms/cmscontacts.html. The available lists provide individual and regional office addresses.

2. Send a copy of your request to:
   Thomas Hamilton, Director
   Survey and Certification Group
   Centers for Medicare and Medicaid Services
   7500 Security Boulevard
   Baltimore, MD 21244

Additional Justification from CMS for Making a Waiver Request

Documentation from CMS central office on the acceptability of using the 2007 editions of NFPA 80 and 105 is quoted below:

> **From the Office of Mayer D. Zimmerman**
> **Subject:** Damper Testing in Hospitals
>
> The purpose of this e-mail is to clarify that damper testing in hospitals may be done every 6 years rather than every 4 years. A waiver will be necessary.
>
> NFPA 80, Standard for Fire Doors and Other Opening Protectives, 2007, incorporates language from a prior TIA (Tentative Interim Amendment) which permits damper testing every 6 years in hospitals rather than every 4 years.
>
> The Standard reads as follows:
>
> > 19.4. Periodic Inspection and Testing
> >
> > 19.4.1. Each damper shall be inspected and tested 1 year after installation.
> >
> > 19.4.1.1. The test and inspection frequency shall be every 4 years, except in hospitals, where the frequency shall be every 6 years.
>
> Based on the recent updates to NFPA 80, which is a later edition than we utilize, we will permit damper testing in hospitals to be every 6 years rather than 4 years. However, it will be necessary to request a waiver.
>
> Please note that this applies only to hospitals and NOT other providers.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

2000 CODE

Form Approved
OMB No. 0938-0242

FIRE SAFETY SURVEY REPORT 2000 CODE - HEALTH CARE
Medicare – Medicaid

1. (A) PROVIDER NUMBER	1. (B) MEDICAID I.D. NO.
K1	K2

PART I — Life & Safety Code, New and Existing
PART IV — Waiver Recommendation Form

Identifying information as shown in applicable records. Enter changes, if any, alongside each item, giving date of change.

2. NAME OF FACILITY	2. (A) MULTIPLE CONSTRUCTION (BLDGS)	2. (B) ADDRESS OF FACILITY (STREET, CITY, STATE, ZIP CODE)	A. ☐ Fully Sprinklered (All required areas are sprinklered) B. ☐ Partially Sprinklered (Not all required areas are sprinklered) C. ☐ None (No sprinkler system) K0180
	A. BUILDING _____ B. WING _____ C. FLOOR _____ K3		

3. SURVEY FOR	4. DATE OF SURVEY	DATE OF PLAN APPROVAL	SURVEY UNDER
☐ MEDICARE ☐ MEDICAID	K4	K6	5. ☐ 2000 EXISTING 6. ☐ 2000 NEW K7

5. SURVEY FOR CERTIFICATION OF

1. ☐ HOSPITAL 2. ☐ SKILLED/NURSING FACILITY 4. ☐ ICF/MR UNDER HEALTH CARE 5. ☐ HOSPICE

IF "2" OR "5" ABOVE IS MARKED, CHECK APPROPRIATE ITEM(S) BELOW

1. ☐ ENTIRE FACILITY 2. ☐ DISTINCT PART OF (SPECIFY)_____

3. ☐ IF DISTINCT PART OF HOSPITAL, IS HOSPITAL ACCREDITED BY JCAHO/AOA? a. ☐ YES b. ☐ NO

6. BED COMPOSITION a. TOTAL NO. OF BEDS IN THE FACILITY _____	b. NUMBER OF HOSPITAL BEDS CERTIFIED FOR MEDICARE ____	c. NUMBER OF SKILLED BEDS CERTIFIED FOR MEDICARE _____	d. NUMBER OF SKILLED BEDS CERTIFIED FOR MEDICAID _____	e. NUMBER OF NF or ICF/MR BEDS CERTIFIED FOR MEDICAID _____

7. A. ☐ THE FACILITY MEETS, BASED UPON (CHECK ALL APPROPRIATE BOXES)

1. ☐ COMPLIANCE WITH ALL PROVISIONS 2. ☐ ACCEPTANCE OF A PLAN OF CORRECTION 3. ☐ RECOMMENDED WAIVERS 4. ☐ FSES 5. ☐ PERFORMANCE BASED DESIGN

B. ☐ THE FACILITY DOES NOT MEET THE STANDARD

K9

SURVEYOR *(Signature)*	TITLE	OFFICE	DATE
SURVEYOR ID K10			
FIRE AUTHORITY OFFICIAL *(Signature)*	TITLE	OFFICE	DATE

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0242. The time required to complete this information collection is estimated to average 5 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to CMS, Attn: PRA Reports Clearance Officer, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

PART IV RECOMMENDATION FOR WAIVER OF SPECIFIC LIFE SAFETY CODE PROVISIONS

For each item of the Life Safety code recommended for waiver, list the survey report form item number and state the reason for the conclusion that: (a) the specific provisions of the code, if rigidly applied, would result in unreasonable hardship on the facility, and (b) the waiver of such unmet provisions will not adversely affect the health and safety of the patients. If additional space is required, attach additional sheet(s).

PROVISION NUMBER(S)	JUSTIFICATION
K84	

Surveyor *(Signature)*	Title	Office	Date
Fire Authority Official *(Signature)*	Title	Office	Date