

LTC Life Safety Code Trend Report

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Survey Statistics

Number of recertification surveys reviewed: 36

Number of revisit surveys not passed: 0

Number of recertifications with deficiencies: 36 or 100%

Number of deficiency free recertifications: 0

Average number of deficiencies: 4.9

Life Safety Code Regulation Reminders:

It is nearly that time of year again for the dreaded white fluffy precipitation! Just a reminder that paths of egress must be cleared of snow and ice to allow for safe discharge from the building in the event of an emergency. While we are discussing safe egress - please take a moment to verify that all sidewalks that are used for emergency egress are safe for residents to ambulate on and the use of wheelchairs. K211 includes two deficiencies this month related to uneven exit discharge surfaces and sidewalks with large gaps that can be a hazard during an emergency.

Emergency Preparedness Regulation Reminder:

Your emergency preparedness plan must include policies to incorporate the use of agreements with other providers on like-facility evacuation as well as having transfer agreements in place. The regulation includes at least two locations with at least one of the two being outside of the community you are located in. In the event of an emergency, it is possible that the entire proximate area may be impacted, leaving evacuation to another provider in the same area impossible. You may also want to take into consideration other locations that may be impacted by the same emergency - for example, if you are planning for a possible flood, other providers along the same river may be significantly impacted as well.

Just a reminder that LeadingAge Iowa facilitates a like-facility memorandum of understanding for emergency evacuation locations for both nursing homes and assisted living. If you are interested in participating or have questions, please let me know!

Check out our [LSC Resource Page](#)
on our LAI website!

Top LSC Deficiencies for November 2024

K353 – SPRINKLER SYSTEM – MAINTENANCE & TESTING

K712 – FIRE DRILLS

K918 – ESSENTIAL ELECTRICAL SYSTEM

K321 – HAZARDOUS AREAS - ENCLOSURES

K363 – CORRIDORS - DOORS

K161 - Building Construction - Type and Height

- Cited 2 times for penetrations in the ceiling and wall.

K211 - Means of Egress - General

- Cited 4 times for:
 - 2 times when the exit discharge surface had a large gap and a drop off which presented hazards in the event of evacuation during an emergency.
 - An exit door required excessive force to open.
 - Courtyard doors had locks that would prevent egress in the event of an emergency.

K222 - Egress Doors

- Cited 4 times for:
 - No signage present on a delayed egress door.
 - A delayed egress door was only operable with a code and did not automatically release after 15-seconds.
 - Bathroom doors had hook latches that could prevent egress.
 - A delayed egress door did not automatically release after 15-seconds.

K291 - Emergency Lighting

- Cited 5 times for:
 - 2 times when lights in the medication room were controlled by a switch without separate emergency lighting present.
 - 3 times when monthly functional testing was not completed.
 - 2 times when annual testing was not completed.
 - 2 times when emergency lights did not illuminate when tested.

K293 - Exit Signage

- Cited 1 time when an exit sign was not illuminated.

K321 - Hazardous Areas - Enclosure

- Cited 12 times for:
 - 2 times when a hazardous area door did not fully close and latch.
 - 5 times when a hazardous area did not have a self-closing device installed on the door.
 - 4 times when there was a penetration in a wall/ceiling in a hazardous area.
 - A door to a hazardous area was held open with a wedge.

K324 - Cooking Facilities

- Cited 3 times for:
 - 3 times when a hood suppression system inspection was not completed.
 - An automatic burner did not function appropriately which could unknowingly leak gas.

K341 - Fire Alarm System - Installation

- Cited 1 time when a fire alarm breaker was not mechanically protected and a horn/strobe device was not installed in an enclosed courtyard.

K343 - Fire Alarm - Notification

- Cited 1 time when the monitoring company did not receive signal when the fire alarm system was tested.

K344 - Fire Alarm - Control Functions

- Cited 1 time when double smoke barrier doors did not activate when the alarm system was tested.

K345 - Fire Alarm System - Testing and Maintenance

- Cited 2 times for:
 - A fire alarm system inspection was not completed.
 - Fire dampers were not inspected within the last four years.
 - The fire alarm panel was in “trouble” mode during the survey.

K346 - Fire Alarm - Out of Service

- Cited 1 time when the policy did not include contact information for the fire department and DIAL.

K347 - Smoke Detection

- Cited 3 times for not having smoke detector sensitivity testing in the last two years.

K351 - Sprinkler System - Installation

- Cited 1 time when the air compressor for the dry sprinkler system was not hard wired into the electrical system and the on/off switch was not hard wired to an “on” position.

K353 - Sprinkler System - Maintenance and Testing

- Cited 19 times for:
 - 4 times when the escutcheon ring was not flush with the ceiling/wall creating a penetration.
 - 2 times when the sprinkler head was damaged.
 - 4 times when sprinkler heads were excessively dusty/dirty.
 - Sprinkler head was corroded.
 - 4 times for missing escutcheon rings.
 - 4 times when five-year internal obstructions inspections were not completed.
 - Sprinkler heads were overdue for replacing or testing.
 - 2 times when sprinkler system inspections were not completed.
 - The sprinkler riser valve was leaking.
 - The dry sprinkler system valve was overdue for the three-year full trip.
 - A penetration around a sprinkler pipe.
 - Sprinkler heads were covered with ice in a walk-in cooler.

K354 - Sprinkler System - Out of Service

- Cited 4 times for:
 - No contact information for the fire department and DIAL.
 - The fire watch did not indicate it would be continuous.
 - The policy did not identify an impairment coordinator.
 - The policy did not include all required impairments.

K362 - Corridors - Construction of Walls

- Cited 1 time for penetrations in the ceiling/wall of a hallway.

K363 - Corridors - Doors

- Cited 11 times for:
 - 8 times when doors did not fully close and latch.
 - 5 times when there were gaps between the door and the door frame.

K374 - Subdivision of Building Spaces - Smoke Barrier Doors

- Cited 2 times for:
 - A gap between fire barrier doors.
 - Penetration in the ceiling around wires

K511 - Utilities - Electric & Gas

- Cited 2 times for:
 - Open electrical junction box.
 - Electrical receptacle pulled away from the wall.

K521 - HVAC

- Cited 2 times for duct tape being placed on the dryer vent instead of vent tape.

K711 - Evacuation and Relocation Plan

- Cited 4 times when the fire safety plan did not include all types of extinguishers.

K712 - Fire Drills

- Cited 16 times for:
 - 12 times for missing drills.
 - 3 times when the fire drill did not document that the fire alarm was activated the following day of a silent drill.
 - The fire drill did not document the time conducted.
 - 2 times when the fire drill documentation was lacking several areas.
 - 5 times when drills were conducted at approximately the same area.

K741 - Smoking Regulations

- Cited 2 times for:
 - A self-closing lid was not installed on the smoking receptacle.
 - Discarded smoking items on the ground.
 - The ashtray had discarded trash.

K761 - Doors - Maintenance, Inspection and Testing

- Cited 6 times for:
 - The fire rated doors did not fully close and latch.
 - 4 times when inspections were not completed in the last 12 months.
 - The documentation did not include all required elements, only stated the door "passed".

K914 - Electrical Systems - Maintenance and Testing

- Cited 5 times for:
 - The documentation did not include actual retention values.
 - The documentation did not identify when non-hospital grade outlets were installed.
 - 4 times for missing electrical receptacle testing.

K918 - Essential Electrical Systems

- Cited 16 times for:
 - 4 times for missing weekly inspections.
 - 5 times for missing annual fuel quality test.
 - 5 times for missing monthly load testing.
 - 3 times when the main and feeder circuit breakers were not exercised and tested in the last 12 months.
 - The generator required servicing, which was not completed.
 - Did not complete an annual load bank test.
 - Documentation was missing for:
 - Monthly amperages at each leg.
 - 2 times for monthly operation of the transfer switch.
 - 2 times for weekly inspection of the fuel levels.
 - 2 times for weekly inspection of the battery.

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- 2 times for weekly inspection of belts and hoses.
- 2 times for weekly inspection of the oil level.

K920 - Electrical Equipment - Power Cords and Extension Cords

- Cited 8 times for:
 - 4 times for use of surge protectors.
 - Failure to complete PCREE testing.
 - 3 times for use of power strips.
 - 2 times for use of an extension cord.

K921 - Electrical Equipment - Maintenance and Testing

- Cited 6 times for:
 - 6 times for not completing PCREE testing.
 - 1 time when a policy was not established on PCREE testing.

K923 - Gas Equipment - Cylinder and Container Storage

- Cited 5 times for:
 - Storage of combustible materials within five feet of oxygen cylinders.
 - 2 times when oxygen cylinders were unsecured.
 - 2 times when full and empty cylinders were commingled.

Emergency Preparedness E-Tags

E004 - Develop an EP Plan, Review and Update Annually

- Cited 6 times when the EPP was not reviewed and/or updated annually.



E006 - Plan Based on All Hazards Risk Assessment

- Cited 2 times when the EPP did not include a policy and identify cyber attacks in the hazard-risk assessment.

E015- Subsistence Needs for Staff and Patients

- Cited 2 times for:
 - The EPP did not include policies on sewer outages, basic food needs, provision of medical supplies and medications, or a three-day menu.
 - The EPP did not have a policy on food arrangements in the event of an emergency.

E025 - Arrangement with Other Facilities

- Cited 2 times when there was not a policy to incorporate the use of agreements to transfer residents or arrangements present with other nursing homes.

E029 - Development of a Communication Plan

- Cited 2 times when the communication plan was not reviewed or updated in the last 12 months.

E031 - Emergency Officials Contact Information

- Cited 1 time when a policy was not included to ensure necessary information was transferred to the receiving provider during an emergency.

E032 - Primary/Alternate Means for Communication

- Cited 2 times when there was not an alternate method of communication or policies and procures on alternate methods of communication.

E035 - LTC Sharing Plan with Patients

- Cited 1 time when the EPP did not indicate how the plan was shared with residents and family members.

E036 - EP Training & Testing

- Cited 1 time when the initial and annual training documentation was not available.

E037 - EP Training Program

- Cited 1 time when the EPP did not include documentation that the EPP was shared with residents, families, responsible parties, and staff.

E039 - EP Testing Requirements

- Cited 6 times for:
 - 2 times for not completing a full-scale exercise in the last 12 months.
 - 3 times for not completing a full-scale and additional exercise in the last 12 months.
 - Did not document efforts to communicate to local entities to participate in full-scale community-wide drills.