

Life Safety & Environment of Care Document List and Review Tool

The following pages present documentation required by the Hospital Accreditation Program Life Safety (LS), and <u>selected</u> Environment of Care (EC) standards. The Life Safety surveyor will begin review of these documents soon after arrival for the onsite survey.

Surveyors may request other EC and LS documents, as needed, throughout the survey.

This list also includes some elements of performance that do not require documentation but appear as reminders to both organizations and surveyors of these expectations.

Organizations may want to consider using this tool in their continuous compliance and survey readiness efforts.

Revisions to this document are identified by underlined text.

STANDARD		See	Legen	nd .			Q1	Q2	Q3	Q4
- EPs	С	NC		IOU	Document / Requirement	Frequency	Semi	Q2	Semi	Annual
EC.02.03.05					Fire Protection and Suppression Testing and Inspection					
EP 1					Supervisory Signals-including: Control valves; pressure supervisory; pressure tank, pressure supervisory for a dry pipe (both high and low conditions), steam pressure; water level supervisory signal initiating device; water temperature supervisory; and room temperature supervisory.	Quarterly				
EP 2					Water flow devices	Semiannual				
LI Z					Tamper switches	Semiannual				
EP 3					Duct, heat, smoke detectors, and manual fire alarm boxes	Annually				
EP 4					Notification devices (audible & visual), and door-releasing devices	Annually				
EP 5					Emergency services notification transmission equipment	Annually				
EP 6					Electric motor-driven fire pumps tested under no-flow conditions	Monthly				
Lr o					Diesel-engine-driven fire pumps tested under no-flow conditions	Weekly				
EP 7					Water storage tank high and low level alarms	Semiannual				
EP 8					Water storage tank low water temp alarms (cold weather only)	Monthly				
EP 9					Sprinkler systems main drain tests on all risers	Annually				
EP 10					Fire department connections inspected (Fire hose connections N/A)	Quarterly				
EP 11					Fire pump(s) tested – under flow	Annually				
EP 12					Standpipe flow test every 5 years	5 years				

NC	NA IO	Fire Protection and Suppression Testing and Inspection Kitchen suppression semi- annual testing Gaseous extinguishing systems inspected (no discharge req.) Portable fire extinguishers inspected monthly Portable fire extinguishers maintained annually Fire hoses hydro tested 5 years after install; every 3 years	Semiannual Annually Monthly Annually	Semi		Semi	Annual
		Kitchen suppression semi- annual testing Gaseous extinguishing systems inspected (no discharge req.) Portable fire extinguishers inspected monthly Portable fire extinguishers maintained annually Fire hoses hydro tested 5 years	Annually Monthly Annually				
		Gaseous extinguishing systems inspected (no discharge req.) Portable fire extinguishers inspected monthly Portable fire extinguishers maintained annually Fire hoses hydro tested 5 years	Monthly Annually				
		inspected monthly Portable fire extinguishers maintained annually Fire hoses hydro tested 5 years	Annually				
		maintained annually Fire hoses hydro tested 5 years					
		thereafter	5 years / 3 years				
		Smoke and fire dampers tested		1 ує	ear after install		
		to verify full closure		At least eve	ery 6 years thereafter		
		Smoke detection shutdown devices for HVAC tested	Annually				
		All horizontal and vertical roller and slider doors tested	Annually				
		assemblies by qualified person. Does not include nonrated doors, including corridor doors to patient care rooms and	Annually				
		Elevators with firefighters' emergency operations	Monthly				
		Documentation of maintenance testing and inspection activities for EPs 1-20 and 25 includes: activity name; date; inventory of devices, equipment or other items; frequency; contact info for person performing activity; NFPA standard; activity results					
			devices for HVAC tested All horizontal and vertical roller and slider doors tested Inspection and testing of door assemblies by qualified person. Does not include nonrated doors, including corridor doors to patient care rooms and smoke barrier doors. Elevators with firefighters' emergency operations Documentation of maintenance testing and inspection activities for EPs 1-20 and 25 includes: activity name; date; inventory of devices, equipment or other items; frequency; contact info for person performing activity;	devices for HVAC tested All horizontal and vertical roller and slider doors tested Inspection and testing of door assemblies by qualified person. Does not include nonrated doors, including corridor doors to patient care rooms and smoke barrier doors. Elevators with firefighters' emergency operations Documentation of maintenance testing and inspection activities for EPs 1-20 and 25 includes: activity name; date; inventory of devices, equipment or other items; frequency; contact info for person performing activity;	devices for HVAC tested All horizontal and vertical roller and slider doors tested Inspection and testing of door assemblies by qualified person. Does not include nonrated doors, including corridor doors to patient care rooms and smoke barrier doors. Elevators with firefighters' emergency operations Documentation of maintenance testing and inspection activities for EPs 1-20 and 25 includes: activity name; date; inventory of devices, equipment or other items; frequency; contact info for person performing activity;	devices for HVAC tested All horizontal and vertical roller and slider doors tested Inspection and testing of door assemblies by qualified person. Does not include nonrated doors, including corridor doors to patient care rooms and smoke barrier doors. Elevators with firefighters' emergency operations Documentation of maintenance testing and inspection activities for EPs 1-20 and 25 includes: activity name; date; inventory of devices, equipment or other items; frequency; contact info for person performing activity;	devices for HVAC tested All horizontal and vertical roller and slider doors tested Inspection and testing of door assemblies by qualified person. Does not include nonrated doors, including corridor doors to patient care rooms and smoke barrier doors. Elevators with firefighters' emergency operations Documentation of maintenance testing and inspection activities for EPs 1-20 and 25 includes: activity name; date; inventory of devices, equipment or other items; frequency; contact info for person performing activity;

STANDARD - EPs		See I	Legen	d	Document / Requirement	Frequency	Yes	No / Missing Date
	С	NC	NA	IOU				
EC.02.05.07					Emergency Power Systems are Maintained and Tested			
EP 1					At least monthly performs functional test of emergency lighting systems and exit signs required for egress and task lighting for a minimum duration of 30 seconds, along with a visual inspection of other exit signs	Monthly		
EP 2					Every 12 months performs functional test of battery powered lights on the inventory required for egress and exit signs for a duration of 1 ½ hours For new construction, renovation, or modernization battery-powered lighting in locations where deep sedation and general anesthesia are administered is tested annually for 30 minutes with test results and completion dates documented	Annually		
					Functional test of Level 1 SEPSS, monthly; Level 2 SEPSS, quarterly, for 5 minutes or as specified for its class Annual test at full load for 60% of full duration of its class	Monthly Quarterly Annually		
EP 3					Note 1: Non-SEPSS tested per manufacturer's specifications Note 2: Level 1 SEPSS defined for critical	Per Mfr.		
_					areas and equipment Note 3: Class defines minimum time which SEPSS is designed to operate at rated load without recharging			
EP 4					Emergency power supply system (EPSS) inspected weekly, including all associated components and batteries	Weekly		
EP 5					Emergency generators tested monthly for 30 continuous minutes under load (plus cooldown)	Monthly		
EP 6					Monthly load test for diesel-powered emergency generators conducted with dynamic load at least 30% of nameplate rating or meets mfr. recommended prime movers' exhaust gas temperature; OR	Monthly		

STANDARD - EPs	See Legend			d	Document / Requirement	Frequency	Yes	No / Missing Date
	С	NC	NA	IOU				
EC.02.05.07					Emergency Power Systems are Maintained and Tested			
					Emergency generators tested once every 12 months using supplemental loads of 50% of nameplate rating for 30 minutes, followed by 75% of nameplate rating for 60 minutes for total of 1 ½ continuous hours	Annually		
EP 7					All automatic and manual transfer switches monthly/12 times per year with results and completion dates documented	Monthly		
EP 8					Fuel quality test to ASTM standards	Annually		
EP 9					Generator load test once every 36 months for 4 hours	36 Months		
EP 10					Generator 4 hour test performed at, at least 30% nameplate	36 Months		

STANDARD	_	See	Legen	d	Document / Requirement	THIS MAY BE CONDITIONAL (Testing Dates
- EPs	С	NC	NA	IOU			Yes	No	
EC.02.05.09					Medical Gas and Vacuum Systems are Inspected and Tested				
EP 7					Test, inspect and maintain critical components of piped medical gas and vacuum systems, waste anesthetic gas disposal (WAGD), and support gas systems on the inventory. Inventory of critical components includes at least all source subsystems, control valves, alarms, manufactured assemblies containing patient gases, and inlets and outlets with activities, dates and results documented No prescribed frequency; recommend risk assessment if < annual	Per policy			
EP 8					Location of and signage for bulk oxygen systems	On Bldg. Tour			
EP 9					Emergency oxygen supply connection	On Bldg. Tour			
EP 10					Review medical gas installation/modification/breech certification results for cross connection, purity, correct gas, and pressure	As applicable			
EP 11					Medical gas supply and zone valves are accessible and clearly labeled	On Bldg. Tour			
EP 12					Handling, transfer, storage, labeling, transfilling of cylinders	Per policy			
COMMENTS:		I	1	1	Transming of dymidolo				

Legend: C=Compliant; NC=Not compliant; NA=Not applicable; IOU=Surveyor awaiting documentation

STANDARD			.egend		Decument / Peruirement	Yes	No	
- EPs	С	NC	NA	IOU	Document / Requirement	res	NO	
LS.01.01.01					Buildings serving patients comply w/ NFPA 101 (2012)			
EP 1					Individual assigned to assess Life Safety Code® compliance			
EP 2					Building Assessment to determine compliance with Life Safety (LS) chapter (frequency of assessment is defined by the hospital)/			
EP 3					Current and accurate drawings w/ fire safety features & related square footage a. Areas of building fully sprinklered (if building only partially sprinklered) b. Locations of all hazardous storage areas c. Locations of all fire-rated barriers d. Locations of all smoke-rated barriers e. Sleeping and non-sleeping suite boundaries, including size of identified suites f. Locations of designated smoke compartments g. Locations of chutes and shafts h. Any approved equivalencies or waivers			
EP 5					Deemed Hospitals: Documentation of inspections and approvals made by state or local AHJs			
COMMENTS:								

STANDARD		See	Legen	d	Decument / Peruirement	Addresse	d in policy?	Implemented a	as required?
- EPs	С	NC	NA	IOU	Document / Requirement	Yes	No	Yes	No
LS.01.02.01					Interim Life Safety Measures (ILSM)				
EP 1					ILSM policy identifying when and to what extent ILSM implemented				
EP 2					Alarms out of service 4 or more hours in 24 hours or sprinklers out of service more than 10 hours in 24 hours in an occupied building - Fire watch / Fire Dept. notification				
EP 3					Signs for alternate exits posted				
EP 4					Daily inspection of routes of egress (See also 19.7.9.2 RE: daily inspections)				
EP 5					Temporary but equivalent systems while system is impaired				
EP 6					Additional firefighting equipment provided				
EP 7					Smoke tight non-combustible temporary barriers				
EP 8					Increased surveillance implemented				
EP 9					Storage and debris removal				
EP 10					Additional training on firefighting equipment				
EP 11					Additional fire drill per shift per quarter				
EP 12					Temporary systems tested and inspected monthly				
EP 13					Additional training on building deficiencies, construction hazards, temp measures				
EP 14					Training for impaired structural or impaired compartment fire safety features				
EP 15					Other ILSM's				

STANDARD - EPs	See Legend		d	Document / Requirement	Yes	No		
	С	NC	NA	IOU	·			
EC.02.03.01					Hospital Manages Fire Risk – Fire Response Plan			
EP 9					The written fire response plan describes the specific roles of staff and LIPs at and away from fire including When and how to sound and report fire alarms How to contain smoke and fire How to use a fire extinguisher How to assist and relocate patients How to evacuate to areas of refuge Staff and LIPs periodically instructed on/kept informed of duties under plan Copy of plan readily available with telephone operator or security			
COMMENTS:								

STANDARD - EPs	С	See L NC	egend NA	IOU	Document / Requirement	Frequency	Q1	Q2	Q3	Q4 Annual
EC.02.03.03		140	1174	100	Fire Drills					Ailliuui
EP 1					Fire drills once per shift per quarter in health care occupancies; Quarterly in each building defined as ambulatory health care occupancy (If available, please provide five quarters of fire drill data)	Quarterly				
EP 2					Fire drills every 12 months from date of last drill: Business Occupancies	Annually				
EP 3					 When quarterly fire drills are required, ALL are unannounced Drills held at unexpected times and under varying conditions – greater than one hour apart Drills include transmission of fire alarm signal and simulation of emergency fire conditions 	Quarterly (See fire drill matrix)				
EP 4					Staff participate in the drills according to the hospital's fire response plan	YES	NO			
EP 5					Critiques include fire safety equipment and building features, and staff response	YES	NO			

STANDARD		See	Legen	d	Document / Pequirement	Yes	No
- EPs	С	NC	NA	IOU	Document / Requirement	res	NO
EC.02.04.01					Management of Medical Equipment Risks		
EP 2					Non-deemed status requirement: Maintains either a written inventory of all medical equipment or a written inventory of selected equipment categorized by physical risk associated with use (including all life-support equipment) and equipment incident history. Evaluates new types of equipment before initial use to determine whether they should be included in the inventory. OR		
					Deemed status requirement: Maintains a written inventory of all medical equipment.		
EP 3					High-risk medical equipment identified on the inventory		
EP 4					Inventory includes activities and associated frequencies for maintaining, inspecting, and testing all medical equipment on the inventory. Activities and associated frequencies are in accordance with manufacturers' recommendations or with strategies of an alternative equipment maintenance (AEM) program.		
COMMENTS:				•			

STANDARD		See	Legen	d	Document / Poquirement	Eroguenov	Yes	No / Missing
- EPs	С	NC	NA	IOU	Document / Requirement	Frequency	162	Date
EC.02.04.03					Medical equipment inspection, testing and maintenance			
EP 2					All high-risk equipment. Note 1: High-risk equipment includes medical equipment for which there is a risk of serious injury or even death to a patient or staff member should it fail, which includes life-support equipment. Note 2: Required activities and associated frequencies for maintaining, inspecting, and testing of medical equipment completed in accordance with manufacturers' recommendations must have a 100% completion rate. Note 3: Scheduled maintenance activities for high-risk medical equipment in an alternative equipment maintenance (AEM) program inventory must have a 100% completion rate. AEM frequency is determined by the hospital's AEM program.			
EP 3					Non-high-risk equipment identified on the medical equipment inventory Note: Scheduled maintenance activities for non-high-risk medical equipment in an alternative equipment maintenance (AEM) program inventory must have a 100% completion rate. AEM frequency is determined by the hospital's AEM program.			
EP 4					Conducts performance testing of and maintains all sterilizers			
EP 10					All occupancies containing hyperbaric facilities comply with construction, equipment, administration, and maintenance requirements of NFPA 99-2012: Chapter 14.			

STANDARD		See L	egeno	t	Decument / Decument	F=====================================	V	No / Miosire - Det
- EPs	С		NA		Document / Requirement	Frequency	Yes	No / Missing Date
EC.02.05.01			1		Manages risks associated with utility systems			T
					Non-deemed status requirement: Maintains written inventory of all operating components of utility systems or maintains a written inventory of selected operating components of utility systems based on risks for infection, occupant needs, and systems critical to patient care (including all life-support systems).			
EP 3					Evaluates new types of utility components before initial use to determine whether they should be included in the inventory.			
					Deemed status requirement: Maintains written inventory of all operating components of utility systems.			
EP 4					Identifies high-risk operating components of utility systems on the inventory for which there is a risk of serious harm or death to a patient or staff member should the component fail. Note: High-risk utility system components include life-support equipment.			
					Identifies activities and associated frequencies, in writing, for inspecting, testing, and maintaining all operating components of utility systems on the inventory. These activities and associated frequencies are in accordance with manufacturers' recommendations or with strategies of an alternative equipment maintenance (AEM) program.			
EP 5					Note 1: The strategies of an AEM program must not reduce the safety of equipment and must be based on accepted standards of practice. * Note 2: For guidance on maintenance and testing activities for Essential Electric Systems (Type I), see NFPA 99-2012: 6.4.4. Footnote *: An example of guidelines for physical plant equipment maintenance is the American Society for Healthcare Engineering (ASHE) book Maintenance Management for Health Care Facilities.			
					Minimizes pathogenic biological agents in cooling towers, domestic hot- and cold-water systems, and other aerosolizing water systems Deemed status requirement: Review the following policies, procedures and reports:			
EP 14					 Facility risk assessment to identify where Legionella and other opportunistic waterborne pathogens could grow and spread in the facility water system Water management program that considers the ASHRAE industry standard 			
					Testing protocols and acceptable ranges for control measures Documented results of testing Corrective actions taken when control limits are not maintained			

STANDARD - EPs	See Legend				Decument / Paruirement	Fraguency	Vac	No / Missing Data
	С	NC	NA	IOU	Document / Requirement	Frequency	Yes	No / Missing Date
EC.02.05.01					Manages risks associated with utility systems			
EP 15					In critical care areas designed to control airborne contaminants (such as biological agents, gases, fumes, dust), the ventilation system provides appropriate pressure relationships, air-exchange rates, filtration efficiencies, temperature and humidity. (form of and frequency of assessment per hospital policy) Note: For more information about areas designed for control of airborne contaminants, the basis for design compliance is the Guidelines for Design and Construction of Health Care Facilities, based on the edition used at the time of design (if available).			
EP 17					Distribution maps of utility systems			

STANDARD - EPs EC.02.05.05	See Legend C NC NA IOU				Document / Requirement	Frequency	Yes	No / Missing
	C	NC	NA	100	Utility system Inspection, testing and maintenance			Date
EP 4				Π	High-risk utility system components on the inventory with completion date and results of activities documented			
					Note 1: A high-risk utility system includes components for which there is a risk of serious injury or even death to a patient or staff member should it fail, which includes life-support equipment.			
					Note 2: Required activities and associated frequencies for maintaining, inspecting, and testing of utility systems components completed in accordance with manufacturers' recommendations must have a 100% completion rate.			
					Note 3: Scheduled maintenance activities for high-risk utility systems components in an alternative equipment maintenance (AEM) program inventory must have a 100% completion rate.			
EP 5					Infection control utility system components on the inventory with completion date and results of activities documented			
					Note 1: Required activities and associated frequencies for maintaining, inspecting, and testing of utility systems components completed in accordance with manufacturers' recommendations must have a 100% completion rate.			
					Note 2: Scheduled maintenance activities for infection control utility systems components in an alternative equipment maintenance (AEM) program inventory must have a 100% completion rate.			
EP 6					Non-high-risk utility system components on the inventory with completion date and results of activities documented			
					Note: Scheduled maintenance activities for non-high-risk utility systems components in an alternative equipment maintenance (AEM) program inventory must have a 100% completion rate. AEM frequency is determined by the hospital AEM program.			

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