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*A Newsletter for Healthcare Executives and Facility Managers on Issues
Related to Accreditation and Regulatory Compliance*



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INSIDE THIS ISSUE

Page **1** Planning for Terrorism

Page **2** Annual Generator Fuel Oil Testing

Page **3** JCAHO Provides Hurricane Relief

Page **4** EC Advisory Bulletins

Page **5** Publications & Seminars

PLANNING FOR TERRORISM MITIGATION AND RESPONSE

With the threat of terrorism greater now than ever, building and facility owners must consider possible terrorism threats to their properties.

Possible threats may be chemical, biological, radiological or explosive in nature. Although a terrorism attack on a building is a rare event, all buildings represent potential targets to a terrorist group. As a prudent safety measure, building owners and engineers can take steps to make their buildings less attractive as potential terrorist targets by developing and implementing a terrorism mitigation and response program. As part of a terrorism mitigation and response program, buildings should undergo a site-specific vulnerability and threat assessment to identify possible terrorism scenarios. Based on such an assessment, engineering controls and security measures may be implemented to mitigate the effects of a potential terrorist attack.

Typical issues addressed during development of a terrorism mitigation and response program may include the following:

- Training of maintenance and security personnel
- Identification of building visitors and employees
- Security features, such as guards, alarms and cameras
- Emergency response plans
- Filtration within air handling systems
- Locations of outdoor air intakes
- Building pressurization with respect to the outdoors
- Integrity of the building envelope
- Locations of air returns within indoor public areas
- Accessibility of HVAC controls
- Accessibility to mechanical, electrical, and plumbing equipment

Building owners and engineers will need to be selective in choosing engineering and security features that are financially feasible and appropriate for their building.

(Continued on Page 3)

ANNUAL GENERATOR FUEL OIL TESTING NOW REQUIRED BY NFPA 110, 2005 EDITION



In its section on Maintenance and Operational Testing, the 2005 edition of NFPA 110, Standard for Emergency and Standby Power Systems, tightened fuel oil testing requirements in recognition of the fact that engine fuel oil problems are a leading cause of diesel generator failures.

8.3.8 - A fuel quality test shall be performed at least annually using tests approved by ASTM standards. - NFPA 110-2005*

Fuel oil testing was previously covered in the NFPA 110 design section [7.9.1.2] and in the Annex. Revised Annex section A.7.9.1.2 now has a comprehensive discussion of fuel oil contamination issues, along with some maintenance recommendations. The NFPA 110 Annex states that fuel oil testing should begin on the first fill date to establish a benchmark guideline for further comparison.

Many things will degrade fuel oil from the time it is refined until it is consumed, including sulfur, natural gums, waxes, soluble metallic soaps, water, dirt, and extreme temperature variations. From a sampling of available literature, actual causes of fuel oil contamination or degradation included:

- Natural fuel degradation from aging
- Water condensation in the air space above the fuel oil
- Extreme daily temperature variations in above-ground exterior
- Clogged or fouled fuel oil filter
- Excessive fuel oil filter replacement interval
- Workmanship during fuel oil system renovation
- Day tank microorganism contamination
- Day tank corrosion (from water inside the day tank)
- Fuel oil truck operator error
- Inconsistent fuel oil quality from the supplier
- Incorrect biocide usage
- Inadequate sampling techniques



NFPA Disclaimer: Although the writer is Chairman of the NFPA Technical Committee on Emergency Power Supplies, which is responsible for NFPA 110 and 111, the views and opinions expressed in this article are purely those of the author and shall not be considered the official position of NFPA or any of its Technical Committees and shall not be considered to be, nor be relied upon as, a Formal Interpretation. Refer to the entire text of the referenced document.

As storage tanks increase in size to meet more stringent emergency management criteria, this issue will become even more critical than in the past.

NOTE: The Joint Commission is presently requiring compliance with the 2000 edition of the NFPA 101 Life Safety Code which in turn is referencing the 1999 edition of the NFPA 110. Therefore, the requirements of the 2005 NFPA 110 would not be mandated by the Joint Commission. However, in a “Note” within JCAHO standard EC.7.40 it states, “Hospitals may choose to test to less than 30% of the emergency generator’s nameplate. However, these hospitals shall (in addition to performing a test for 30 continuous minutes under operating temperature at the intervals described above) revise their existing documented plan to conform to current NFPA 99 and NFPA 110 testing and maintenance activities...” Then the requirements of the 2005 NFPA 110 would be mandated when a hospital chooses to test to less than 30% of the emergency generator’s nameplate.

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Visit www.NFPA.org to obtain a copy of NFPA 110-2005.*

Planning for Terrorism Mitigation and Response *(Continued from page 1)*

The National Institute for Occupational Safety and Health (NIOSH) has published guidance documents on protecting building environments from terrorist attacks. These documents are available on NIOSH's website (www.cdc.gov/niosh/):

- *Guidance for Protecting Building Environments from Airborne Chemical, Biological, or Radiological Attacks*, NIOSH, May, 2002.
- *Guidance for Filtration and Air-Cleaning Systems to Protect Building Environments from Airborne Chemical, Biological or Radiological Attacks*, NIOSH, April, 2003.

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JOINT COMMISSION TO PROVIDE SOME RELIEF TO ITS ACCREDITED ORGANIZATIONS AFFECTED BY RECENT HURRICANES!

Per the October 2005 JCAHOnline, which is a monthly news brief from the Joint Commission on Accreditation of Healthcare Organizations, it was announced that it is making

itself available to work with its accredited organizations affected by recent hurricanes. Organizations affected by the disaster may have questions about how their accreditation may be affected. Here are some answers:• The organization's current accreditation status remains the same until the next survey.

- When it is impossible to remain in compliance with the standards, use the best clinical and professional judgment when rendering care. Please seek the opinion of the Standards Interpretation Group (SIG) as soon as possible.
- At the next survey, consideration will be given to performance during the crisis period.
- Delay in implementing the 2006 standards due to the effects of Hurricanes Katrina and Rita will be taken into consideration at the time of the next survey.
- Some requirements may be deferred on a case-by-case basis, including submission of: evidence of standards compliance (ESC); measures of success (MOS); periodic performance reviews (PPR); root cause analyses (RCA); statement of conditions (SOC); plans for improvement (PFI); and ORYX data. Deferments must be discussed with the organization's account representative. If the account representative confirms deferment of any of these requirements, automated reminders can be ignored.
- If the organization's survey has been scheduled, it can be postponed for up to six months (except for conditional follow-up surveys which can be postponed up to three months). All postponed surveys conducted in 2006 will be announced. Organizations that postpone their survey will be required to meet 2006 standards.
- Organizations that request a survey postponement for more than six months may be required to undergo an extension survey.
- The Joint Commission will notify the Centers for Medicare & Medicaid Services (CMS) of any survey postponement where deemed status is applicable.

Note: It is assumed that the above listed recommendations will also apply to accredited organizations affected by Hurricane Wilma.

Questions may be directed to the organization's JCAHO account representative at (630) 792-3007 or via e-mail to Joe Cappiello, VP Accreditation Operations at JCappiello@jcaho.org

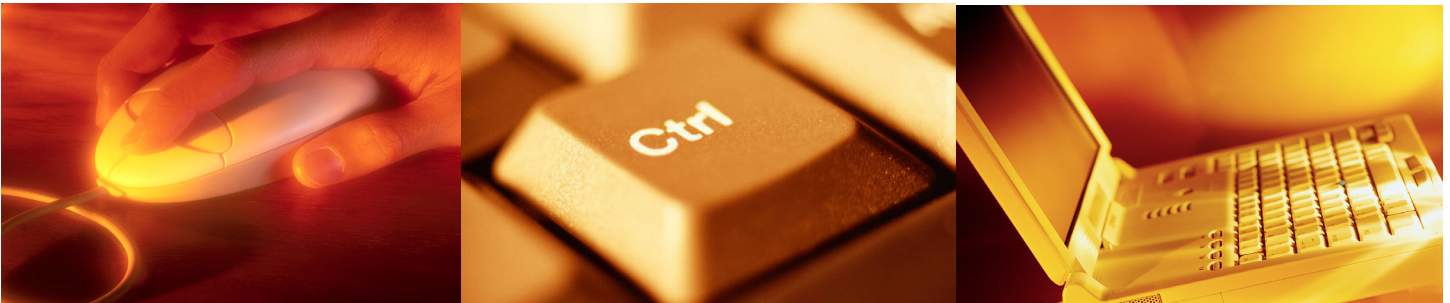
JCAHO EC ADVISORY BULLETIN: ECAB #05-06

Enhanced JCAHO Emergency Management Plan and Staff Readiness Review

Along with unannounced JCAHO surveys commencing in 2006, hospitals with 200 beds or more will have to participate in a two to four-hour emergency management session observed by Joint Commission surveyors during the organization's survey.

This session will begin in the hospital's ICC (incident command center) where there will be a review of the organization's emergency management plans by the surveyors. Then the surveyors will choose a disaster scenario based on the hospital's HVA (hazard vulnerability analysis). They will then go out into the various departments of the hospital and quiz staff on their roles and responsibilities should the disaster scenario chosen by the surveyors occur.

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JCAHO EC ADVISORY BULLETIN: ECAB #05-07

In August of 2005, the Joint Commission made available an electronic "eBBI/ePFI" tool as part of its on-line electronic application (E-app) for hospitals that are applying for initial or re-accreditation. This newly expanded "eBBI" asks for the usual information contained in the Statement of Conditions Part 2: Basic Building Information as well as additional information such as: What is the age of the hospital building(s) and any additions? What is the percentage of sprinkler protection in the building(s)? Are there any areas under construction or undergoing renovation? The "ePFI" portion is mainly a reflection of the existing SOC Part 4: Plan For Improvement.

You may access the online E-app, Periodic Performance Review (PPR), or eBBI/ePFI via the Joint Commission's secured password-protected Extranet site called "Jayco." You are encouraged to start working with this new eBBI/ePFI tool now that it is available and begin gathering the additional information requested. It is presently proposed that this will be a mandatory requirement effective January 1, 2007. That appears to be a fair and reasonable timeframe to become familiar with this new tool and process.

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PUBLICATIONS AND SEMINARS

Look for these articles in publication

“Lessons Learned - Recent Disasters Give Reason to Rethink Emergency Management Strategies,” *Health Facilities Management*, December 2005

Seminars in 2005 & 2006

- Nov. 10 Texas Association of Healthcare Facilities Management, Houston, “NFPA 99 Compliance”
- Nov. 17 Colorado Association of Hospital Engineers & Directors, Denver, “Role of the JCAHO Life Safety Specialist Surveyors and Other EOC Updates for 2005/2006”
- Feb. 27 ASHE PDC, San Diego, “Implementing a Facility Power Management System”

Please let us know if you would like to receive the *Compliance News* via email.



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