

History Tracking Report: 2010 to 2009 Requirements

Accreditation Program: Behavioral Health Care

2010 Chapter: Environment of Care

Standard EC.01.01.01

2010 Standard Text:

The organization plans activities that minimize risks in the environment of care.

Note: One or more persons can be assigned to manage risks associated with the management plans described in this standard.

2010 Standard: EC.01.01.01

2010 EP: 1

2010 EP Text:

Leaders identify an individual(s) to manage risk, coordinate risk reduction activities in the environment of care, collect information on deficiencies, and disseminate summaries of actions and results.

Note 1: This information is disseminated to individuals with responsibility for the issues being addressed.

Note 2: Deficiencies include injuries, problems, or use errors.

Standard EC.1.10

2009 Standard Text:

The {jc}organization{/2} manages safety risks.

2009 Standard: EC.1.10

2009 EP: 2

2009 EP Text:

Revision Code: Consolidate

A person(s) is designated by leadership, to coordinate the development, implementation, and monitoring of the safety management activities.

2010 Standard: EC.01.01.01

2010 EP: 1

2010 EP Text:

Leaders identify an individual(s) to manage risk, coordinate risk reduction activities in the environment of care, collect information on deficiencies, and disseminate summaries of actions and results.

Note 1: This information is disseminated to individuals with responsibility for the issues being addressed.

Note 2: Deficiencies include injuries, problems, or use errors.

2009 Standard: EC.9.10

2009 EP: 2

2009 EP Text:

Revision Code: Consolidate

The {jc}organization{/2}'s leaders assign a person(s) (hereafter referred to as the "assigned person[s]") to monitor and respond to conditions in the {jc}organization{/2}'s environment. The assigned individual performs the following tasks: Coordinates the on-going, organizationwide collection of information about deficiencies and opportunities for improvement in the environment of careCoordinates the on-going collection and dissemination of other sources of information, such as published hazard notices or recall reportsCoordinates the preparation of summaries of deficiencies, problems, failures, and user errors related to managing the environment of care*Coordinates the preparation of summaries on findings, recommendations, actions taken, and results of performance improvement (PI) activitiesParticipates in hazard surveillance and incident reporting Participates in developing safety policies and procedures*Note: Incidents involving {jc}patients{/6} may be reported to appropriate staff such as staff in quality assessment, improvement, or other functions. However, at least a summary of incidents is shared with the person designated to coordinate safety management activities (see standard EC.1.10). Review of incident reports often requires that various legal processes be followed to preserve confidentiality. Opportunities to improve care, treatment, and services or to prevent future similar incidents are not lost as a result of the legal process followed.

2010 Standard: EC.01.01.01

2010 EP: 2

2010 EP Text:

Leaders identify an individual(s) to intervene whenever environmental conditions immediately threaten life or health or threaten to damage equipment or buildings.

2009 Standard: EC.1.10

2009 EP: 3

2009 EP Text:

Revision Code: Retain

The {jc}organization{/2} identifies a person(s) to intervene whenever conditions immediately threaten life or health or threaten damage to equipment or buildings.

2010 Standard: EC.01.01.01

2010 EP: 3

2010 EP Text:

The organization has a written plan for providing a safe environment for everyone who enters the organization's facilities. (See also EC.04.01.01, EP 15)

Note: Facilities include both leased and owned spaces.

2009 Standard: EC.1.10

2009 EP: 1

2009 EP Text:

Revision Code: Retain

The {jc}organization{/2} develops and maintains a written management plan describing the processes it implements to effectively manage the environmental safety of {jc}patients{/6}, staff, and other people coming to the {jc}organization{/2}'s facilities.

2010 Standard: EC.01.01.01	2010 EP: 4	2009 Standard: EC.2.10	2009 EP: 1
2010 EP Text: The organization has a written plan for providing a secure environment for everyone who enters the organization's facilities. (See also EC.04.01.01, EP 15) Note: Facilities include both leased and owned spaces.		2009 EP Text: The {jc}organization{/2} develops and maintains a written management plan describing the processes it implements to effectively manage the security of {jc}patients{/6}, staff, and other people coming to the {jc}organization{/2}'s facilities. Revision Code: Retain	
2010 Standard: EC.01.01.01	2010 EP: 6	2009 Standard: EC.5.10	2009 EP: 1
2010 EP Text: The organization has a written plan for managing the following: Fire safety. (See also EC.04.01.01, EP 15)		2009 EP Text: The {jc}organization{/2} develops and maintains a written management plan describing the processes it implements to effectively manage fire safety. Revision Code: Retain	
2010 Standard: EC.01.01.01	2010 EP: 8	2009 Standard: EC.7.10	2009 EP: 7
2010 EP Text: The organization has a written plan for managing the following: Utility systems. (See also EC.04.01.01, EP 15)		2009 EP Text: The {jc}organization{/2} develops and maintains a written management plan describing the processes it implements to manage the effective, safe, and reliable operation of utility systems. Revision Code: Retain	

Standard EC.02.01.01

2010 Standard Text:

The organization manages safety and security risks.

2010 Standard: EC.02.01.01

2010 EP: 1

2010 EP Text:

The organization identifies safety and security risks associated with the environment of care.

Note 1: Risks are identified from internal sources such as ongoing monitoring of the environment, results of root cause analyses, results of proactive risk assessments of high-risk processes, and from credible external sources such as Sentinel Event Alerts. (See also EC.04.01.01, EP 14)

Note 2: Examples of risks associated with the physical environment include those that might contribute to suicide or acts of violence.

2010 Standard: EC.02.01.01

2010 EP: 1

2010 EP Text:

The organization identifies safety and security risks associated with the environment of care.

Note 1: Risks are identified from internal sources such as ongoing monitoring of the environment, results of root cause analyses, results of proactive risk assessments of high-risk processes, and from credible external sources such as Sentinel Event Alerts. (See also EC.04.01.01, EP 14)

Note 2: Examples of risks associated with the physical environment include those that might contribute to suicide or acts of violence.

2010 Standard: EC.02.01.01

2010 EP: 3

2010 EP Text:

The organization takes action to minimize identified safety and security risks associated with the physical environment.

Standard EC.1.10

2009 Standard Text:

The {jc}organization{/2} manages safety risks.

2009 Standard: EC.1.10

2009 EP: 4

2009 EP Text:

Revision Code: Consolidate

The {jc}organization{/2} conducts comprehensive proactive risk assessments that evaluate the potential adverse impact of buildings, grounds, equipment, occupants, and internal physical systems on the safety and health of {jc}patients{/6}, staff, and other people coming to the {jc}organization{/2}'s facilities.

2009 Standard: EC.2.10

2009 EP: 3

2009 EP Text:

Revision Code: Consolidate

The {jc}organization{/2} conducts proactive risk assessments that evaluate the potential adverse impact of the external environment and the services provided on the security of {jc}patients{/6}, staff, and other people coming to the {jc}organization{/2}'s facilities.* * The potential for workplace violence is considered during the risk assessment.

2009 Standard: EC.2.10

2009 EP: 4

2009 EP Text:

Revision Code: Consolidate

The {jc}organization{/2} uses the risks identified to select and implement procedures and controls to achieve the lowest potential for adverse impact on security.

<p>2010 Standard: EC.02.01.01 2010 EP: 3</p> <p>2010 EP Text:</p> <p>The organization takes action to minimize identified safety and security risks associated with the physical environment.</p>	<p>2009 Standard: EC.1.10 2009 EP: 5</p> <p>2009 EP Text: Revision Code: Consolidate</p> <p>The {jc}organization{/2} uses the risks identified to select and implement procedures and controls to achieve the lowest potential for adverse impact on the safety and health of {jc}patients{/6}, staff, and other people coming to the {jc}organization{/2}'s facilities.</p>
<p>2010 Standard: EC.02.01.01 2010 EP: 5</p> <p>2010 EP Text:</p> <p>The organization maintains all grounds and equipment.</p>	<p>2009 Standard: EC.1.10 2009 EP: 9</p> <p>2009 EP Text: Revision Code: Retain</p> <p>The {jc}organization{/2} ensures that all grounds and equipment are maintained appropriately.</p>
<p>2010 Standard: EC.02.01.01 2010 EP: 8</p> <p>2010 EP Text:</p> <p>The organization controls access to and from areas it identifies as security sensitive.</p>	<p>2009 Standard: EC.2.10 2009 EP: 6</p> <p>2009 EP Text: Revision Code: Retain</p> <p>The {jc}organization{/2} controls access to and egress from security-sensitive areas, as determined by the {jc}organization{/2}.</p>
<p>2010 Standard: EC.02.01.01 2010 EP: 11</p> <p>2010 EP Text:</p> <p>The organization acts in accordance with product notices and recalls. (See also MM.05.01.17, EPs 1-4)</p>	<p>2009 Standard: EC.1.10 2009 EP: 8</p> <p>2009 EP Text: Revision Code: Retain</p> <p>The {jc}organization{/2} ensures a process exist for responding to product safety recalls by appropriate {jc}organization{/2} staff.</p>
<p>2010 Standard: EC.02.01.01 2010 EP: 13</p> <p>2010 EP Text:</p> <p>For opioid treatment programs: The organization establishes procedures for handling physical or verbal threats, acts of violence, inappropriate behavior, or other escalating and potentially dangerous situations. This includes situations in which security guards or police need to be summoned.</p>	<p>2009 Standard: HR.2.20 2009 EP: 5</p> <p>2009 EP Text: Revision Code: Retain</p> <p>For Opioid Treatment Programs: Staff can describe or demonstrate procedures for handling physical or verbal threats, acts of violence, inappropriate behavior, or other escalating and potentially dangerous situations, including situations in which security guards or police need to be summoned.</p>

Standard EC.02.01.03

2010 Standard Text:

The organization prohibits smoking except in specific circumstances.

2010 Standard: EC.02.01.03

2010 EP: 1

2010 EP Text:

The organization develops a written policy prohibiting smoking in buildings, except in specific circumstances for adult individuals served in 24-hour-care settings. The organization defines specific circumstances that may result in exceptions to the policy for individuals served.

2010 Standard: EC.02.01.03

2010 EP: 1

2010 EP Text:

The organization develops a written policy prohibiting smoking in buildings, except in specific circumstances for adult individuals served in 24-hour-care settings. The organization defines specific circumstances that may result in exceptions to the policy for individuals served.

2010 Standard: EC.02.01.03

2010 EP: 3

2010 EP Text:

If the organization decides that certain adult individuals served may smoke in 24-hour-care buildings, the clinical staff develops written criteria identifying the circumstances under which those individuals may smoke.

Standard EC.1.30

2009 Standard Text:

The {jc}organization{/2} develops and implements a policy to prohibit smoking except in specified circumstances.

2009 Standard: EC.1.30

2009 EP: 1

2009 EP Text:

Revision Code: Consolidate

The {jc}organization{/2} develops a policy regarding smoking in all areas of all building(s) under the {jc}organization{/2}'s control.

2009 Standard: EC.1.30

2009 EP: 2

2009 EP Text:

Revision Code: Consolidate

The {jc}organization{/2}'s policy prohibits smoking in all areas of all building(s) under the {jc}organization{/2}'s control (no medical exceptions allowed) forAll organization-based outpatient clients (non 24 hour care)All children or youth {jc}patients{/6}

2009 Standard: EC.1.30

2009 EP: 3

2009 EP Text:

Revision Code: Retain

The {jc}organization{/2}'s policy may permit {jc}patients{/6} to smoke in the {jc}organization{/2}'s buildings under the following circumstance(s):A {jc}patient{/1} is residing in long term care settings (that is, longer than thirty days' length of stay); orA {jc}patient{/1} is granted permission that has been authorized by a licensed independent practitioner, based on criteria developed by the {jc}medical/clinical{/7} staff

2010 Standard: EC.02.01.03

2010 EP: 4

2010 EP Text:

If the organization decides that an adult individual may smoke in specific 24-hour-care buildings, it designates smoking areas that are physically separate from care, treatment, or service areas. (See also EC.02.03.01, EP 2)

Note: This does not require that a designated smoking area be a specific distance from care, treatment, or service areas. A physically separate, well-ventilated room that is exhausted to the outside is acceptable.

2009 Standard: EC.1.30

2009 EP: 4

2009 EP Text:

When {jc}patients{/6} are permitted to smoke in the {jc}organization{/2}'s buildings, they smoke only under the following circumstance(s):In designated locations environmentally separate from care, treatment, and service areas*

After the {jc}organization{/2} has taken measures to minimize fire risks*Note: This does not require that a designated smoking area be a specific distance from care, treatment, and service areas. A physically separate, well-ventilated room (a designated area for authorized smoking by {jc}patients{/6} that is exhausted to the outside) is acceptable.

Revision Code: Split

2010 Standard: EC.02.01.03

2010 EP: 6

2010 EP Text:

The organization takes action to maintain compliance with its smoking policy.

2009 Standard: EC.1.30

2009 EP: 7

2009 EP Text:

The {jc}organization{/2} develops strategies to eliminate the incidence of policy violations when identified.

Revision Code: Retain

Standard EC.02.01.05

2010 Standard Text:

For foster care: The agency places individuals in foster care in physically safe environments.

Note: This standard applies to foster care agencies that make placement decisions.

2010 Standard: EC.02.01.05

2010 EP: 1

2010 EP Text:

For foster care: The foster care agency defines, in writing, criteria for assessing the safety of the foster care family's physical environment.

2010 Standard: EC.02.01.05

2010 EP: 2

2010 EP Text:

For foster care: The foster care agency uses defined criteria to assess the following aspects of safety in the foster care home: The adequacy of sanitary conditions.

2010 Standard: EC.02.01.05

2010 EP: 3

2010 EP Text:

For foster care: The foster care agency uses defined criteria to assess the following aspects of safety in the foster care home: Minimizing the risk of injury from toxic materials and medications.

2010 Standard: EC.02.01.05

2010 EP: 4

2010 EP Text:

For foster care: The foster care agency uses defined criteria to assess the following aspects of safety in the foster care home: Minimizing the risk of injury from pets; this includes verifying that pet vaccinations are current, in accordance with law and regulation.

Standard EC.1.25

2009 Standard Text:

The agency defines and uses criteria for assessing the safety of the foster care family's physical environment.

2009 Standard: EC.1.25

2009 EP: 1

2009 EP Text:

Revision Code: Retain

The foster care agency use criteria for assessing the safety of the foster care family's physical environment in the following manner: As part of the overall evaluation of prospective foster care families

2009 Standard: EC.1.25

2009 EP: 3

2009 EP Text:

Revision Code: Retain

The foster care agency's criteria used for assessing the safety of the foster care family's physical environment address in the following manner: Sanitation issues

2009 Standard: EC.1.25

2009 EP: 5

2009 EP Text:

Revision Code: Retain

The foster care agency's criteria used for assessing the safety of the foster care family's physical environment address in the following manner: Reducing the risk of injury from toxic materials and medications

2009 Standard: EC.1.25

2009 EP: 6

2009 EP Text:

Revision Code: Retain

The foster care agency's criteria used for assessing the safety of the foster care family's physical environment address in the following manner: Reducing the risk of injury from pets (including ensuring that pet vaccinations are current)

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<p>2010 Standard: EC.02.01.05</p> <p>2010 EP Text:</p> <p>For foster care: The foster care agency uses defined criteria to assess the following aspects of safety in the foster care home: Minimizing the risk of injury from firearms in the home.</p>	<p>2010 EP: 5</p>	<p>2009 Standard: EC.1.25</p> <p>2009 EP Text:</p> <p>The foster care agency's criteria used for assessing the safety of the foster care family's physical environment address in the following manner: Reducing the risk of injury from firearms</p>	<p>2009 EP: 7</p> <p>Revision Code: Retain</p>
<p>2010 Standard: EC.02.01.05</p> <p>2010 EP Text:</p> <p>For foster care: The foster care agency uses defined criteria to assess the following aspects of safety in the foster care home: Other issues as identified by national or state organizations and local, state, tribal, and federal law (such as licensing standards).</p>	<p>2010 EP: 6</p>	<p>2009 Standard: EC.1.25</p> <p>2009 EP Text:</p> <p>The foster care agency's criteria used for assessing the safety of the foster care family's physical environment address in the following manner: Other issues as defined by national/state {jc}organization{/2}s and in accordance with local, state, tribal, and federal law (such as licensing standards)</p>	<p>2009 EP: 8</p> <p>Revision Code: Retain</p>
<p>2010 Standard: EC.02.01.05</p> <p>2010 EP Text:</p> <p>For foster care: The foster care agency verifies that fire protection equipment (for example, smoke detectors, portable fire extinguishers) is inspected, tested, and maintained in a time frame determined by the organization.</p>	<p>2010 EP: 7</p>	<p>2009 Standard: EC.1.25</p> <p>2009 EP Text:</p> <p>The foster care agency's criteria used for assessing the safety of the foster care family's physical environment address in the following manner: Inspecting, testing, and maintaining fire protection equipment and components (smoke detectors, portable fire extinguishers) regularly</p>	<p>2009 EP: 4</p> <p>Revision Code: Retain</p>
<p>2010 Standard: EC.02.01.05</p> <p>2010 EP Text:</p> <p>For foster care: The foster care agency verifies that emergency procedures for responding to fire are in place.</p>	<p>2010 EP: 8</p>	<p>2009 Standard: EC.1.25</p> <p>2009 EP Text:</p> <p>The foster care agency's criteria for assessing fire safety of the foster care family's physical environment requires the following: Emergency procedures to respond to fire (including identifying primary and secondary means of escape features)</p>	<p>2009 EP: 9</p> <p>Revision Code: Retain</p>
<p>2010 Standard: EC.02.01.05</p> <p>2010 EP Text:</p> <p>For foster care: The foster care agency verifies the existence of a door for the sleeping room of the individual in foster care.</p>	<p>2010 EP: 9</p>	<p>2009 Standard: EC.1.25</p> <p>2009 EP Text:</p> <p>The foster care agency's criteria for assessing fire safety of the foster care family's physical environment requires the following: A door into the child's sleeping room</p>	<p>2009 EP: 10</p> <p>Revision Code: Retain</p>

2010 Standard: EC.02.01.05 **2010 EP:** 10
2010 EP Text:
 For foster care: The foster care agency verifies the existence of at least two of the following means of escape from the sleeping room of the individual in foster care:
 - An operable exterior window large enough for emergency escape
 - A door leading directly to the outside
 - Access to a means of escape such as an unenclosed stairway

2009 Standard: EC.1.25 **2009 EP:** 11
2009 EP Text: **Revision Code:** Retain
 The foster care agency's criteria for assessing fire safety of the foster care family's physical environment requires the following: One of the following from the child's sleeping room: An operable exterior window large enough for emergency escape, or A door leading directly to the outside, or Access to a second and remote means of escape* *Means of escape A way out of a building that does not conform to criteria for an approved means of egress but does provided an alternative way out (for example, an unenclosed interior stair).

2010 Standard: EC.02.01.05 **2010 EP:** 11
2010 EP Text:
 For foster care: The foster care agency verifies the existence of a smoke detector on each floor and near the sleeping room of the individual in foster care.

2009 Standard: EC.1.25 **2009 EP:** 12
2009 EP Text: **Revision Code:** Retain
 The foster care agency's criteria for assessing fire safety of the foster care family's physical environment requires the following: A smoke detector on each floor and near the child's sleeping room.

2010 Standard: EC.02.01.05 **2010 EP:** 13
2010 EP Text:
 For foster care: The foster care agency reassesses safety during the periodic evaluation of the case plan, or as required by law and regulation. The safety assessment is documented.

2009 Standard: EC.1.25 **2009 EP:** 2
2009 EP Text: **Revision Code:** Retain
 The foster care agency use criteria for assessing the safety of the foster care family's physical environment in the following manner: During the periodic evaluation of the case plan

Standard EC.02.02.01

2010 Standard Text:

The organization manages risks related to hazardous materials.

2010 Standard: EC.02.02.01

2010 EP: 2

2010 EP Text:

The organization manages hazardous materials from receipt through final use or disposal. (See also IC.02.01.01, EP 6; MM.01.01.03, EP 3)

2010 Standard: EC.02.02.01

2010 EP: 2

2010 EP Text:

The organization manages hazardous materials from receipt through final use or disposal. (See also IC.02.01.01, EP 6; MM.01.01.03, EP 3)

2010 Standard: EC.02.02.01

2010 EP: 2

2010 EP Text:

The organization manages hazardous materials from receipt through final use or disposal. (See also IC.02.01.01, EP 6; MM.01.01.03, EP 3)

Standard EC.3.10

2009 Standard Text:

The {jc}organization{/2} manages its hazardous materials and waste risks.

2009 Standard: EC.3.10

2009 EP: 3

2009 EP Text:

Revision Code: Consolidate

The organization establishes and implements processes for selecting, handling, storing, transporting, using, and disposing of hazardous materials and waste from receipt or generation through use and/or final disposal, including managing the following: Chemicals**Chemical Examples may include cleaning liquids, solvents, and pesticides.

2009 Standard: EC.3.10

2009 EP: 2

2009 EP Text:

Revision Code: Consolidate

The {jc}organization{/2} creates and maintains an inventory that identifies hazardous materials and waste used, stored, or generated using criteria consistent with applicable law and regulation (for example, the Environmental Protection Agency [EPA] and the Occupational Safety and Health Administration [OSHA]).

2009 Standard: EC.3.10

2009 EP: 9

2009 EP Text:

Revision Code: Consolidate

The {jc}organization{/2} identifies and implements emergency procedures that include the specific precautions, procedures, and protective equipment used during hazardous materials and waste spills or exposures.

Standard EC.02.03.01

2010 Standard Text:

The organization manages fire risks.

2010 Standard: EC.02.03.01

2010 EP: 1

2010 EP Text:

The organization minimizes the potential for harm from fire, smoke, and other products of combustion.

2010 Standard: EC.02.03.01

2010 EP: 2

2010 EP Text:

If adults are permitted to smoke in 24-hour-care buildings, the organization takes measures to minimize fire risk. (See also EC.02.01.03, EP 4)

Standard EC.5.10

2009 Standard Text:

The {jc}organization{/2} manages fire safety risks.

2009 Standard: EC.5.10

2009 EP: 2

2009 EP Text:

Revision Code: Retain

The {jc}organization{/2} identifies proactive processes for protecting {jc}patients{/6}, staff, and others coming to the {jc}organization{/2}'s facilities, as well as protecting property from fire, smoke, and other products of combustion.

2009 Standard: EC.1.30

2009 EP: 4

2009 EP Text:

Revision Code: Split

When {jc}patients{/6} are permitted to smoke in the {jc}organization{/2}'s buildings, they smoke only under the following circumstance(s):In designated locations environmentally separate from care, treatment, and service areas* After the {jc}organization{/2} has taken measures to minimize fire risks*Note: This does not require that a designated smoking area be a specific distance from care, treatment, and service areas. A physically separate, well-ventilated room (a designated area for authorized smoking by {jc}patients{/6} that is exhausted to the outside) is acceptable.

2010 Standard: EC.02.03.01**2010 EP:** 4**2010 EP Text:**

The organization maintains free and unobstructed access to all exits.
Note: This requirement applies to all buildings classified as business occupancy. The "Life Safety" (LS) chapter addresses the requirements for all other occupancy types.

2009 Standard: EC.5.50**2009 EP:** 2**2009 EP Text:****Revision Code:** Split

The policy includes written criteria for evaluating various deficiencies and construction hazards to determine when and to what extent one or more of the following measures apply: Ensuring free and unobstructed exits. Staff receives additional information/communication when alternative exits are designated. Buildings or areas under construction must maintain escape routes for construction workers at all times, and the means of exiting construction areas are inspected daily. Ensuring free and unobstructed access to emergency services and for fire, police, and other emergency forces. Ensuring that fire alarm, detection, and suppression systems are in good working order. A temporary but equivalent system must be provided when any fire system is impaired. Temporary systems must be inspected and tested monthly.* Ensuring that temporary construction partitions are smoke-tight and built of noncombustible or limited combustible materials that will not contribute to the development or spread of fire. Providing additional fire-fighting equipment and training staff in its use. Prohibiting smoking throughout the organization's buildings and in and near construction areas. Developing and enforcing storage, housekeeping, and debris-removal practices that reduce the building's flammable and combustible fire load to the lowest feasible level. Conducting a minimum of two fire drills per shift per quarter. Increasing surveillance of buildings, grounds, and equipment, with special attention to excavations, construction areas, construction storage, and field offices. Training staff to compensate for impaired structural or compartmentalization** features of fire safety. Conducting organizationwide safety education programs to promote awareness of fire-safety building deficiencies, construction hazards, and ILSMs.*The Life Safety Code®, NFPA 101 - 2000 edition, requires that the municipal fire department is notified (or applicable emergency forces group) and a fire watch is provided whenever an approved fire alarm or automatic sprinkler system is out of service for more than four hours in a 24-hour period in an occupied building.**Compartmentalization The concept of using various building components (fire walls and doors, smoke barriers, fire rated floor slabs, and so forth) to prevent the spread of fire and the production's combustion, and to provide a safe means of egress to an approved exit. The presence of these features varies depending upon the building occupancy classification.

<p>2010 Standard: EC.02.03.01 2010 EP: 5</p> <p>2010 EP Text:</p> <p>In buildings housing three or fewer individuals served, the organization provides doors for sleeping rooms of the individuals served. Footnote: The "Life Safety" (LS) chapter contains sleeping room requirements for buildings housing four or more individuals served.</p>	<p>2009 Standard: EC.5.10 2009 EP: 8</p> <p>2009 EP Text: Revision Code: Retain</p> <p>In buildings housing three or fewer clients, the following shall be in place: A door into the client's sleeping room.</p>
<p>2010 Standard: EC.02.03.01 2010 EP: 6</p> <p>2010 EP Text:</p> <p>In buildings housing three or fewer individuals served, the organization provides at least two of the following from the individual's sleeping room:</p> <ul style="list-style-type: none"> - An operable, exterior window large enough for emergency escape - A door leading directly to the outside - Access to another means of escape such as an unenclosed stairway 	<p>2009 Standard: EC.5.10 2009 EP: 9</p> <p>2009 EP Text: Revision Code: Retain</p> <p>In buildings housing three or fewer clients, the following shall be in place: From the client's sleeping room, the following should be available: An operable exterior window large enough for emergency escape Or Door leading directly to the outside Or Access to a second and remote means of escape **Means of escape A way out of a building that does not conform to criteria for an approved means of egress but does provided an alternative way out (for example, an unenclosed interior stair).</p>
<p>2010 Standard: EC.02.03.01 2010 EP: 7</p> <p>2010 EP Text:</p> <p>In buildings housing three or fewer individuals served, the organization installs a smoke detector in or near the individual's sleeping room.</p>	<p>2009 Standard: EC.5.10 2009 EP: 10</p> <p>2009 EP Text: Revision Code: Retain</p> <p>In buildings housing three or fewer clients, the following shall be in place: A smoke detector in or near the client's sleeping room.</p>
<p>2010 Standard: EC.02.03.01 2010 EP: 8</p> <p>2010 EP Text:</p> <p>In buildings housing three or fewer individuals served, the organization establishes emergency procedures for responding to fire (including identifying primary and secondary means of escape).</p>	<p>2009 Standard: EC.5.10 2009 EP: 7</p> <p>2009 EP Text: Revision Code: Retain</p> <p>In buildings housing three or fewer clients, the following shall be in place: Emergency procedures for responding to fire (including identifying primary and secondary means of escape features)</p>
<p>2010 Standard: EC.02.03.01 2010 EP: 9</p> <p>2010 EP Text:</p> <p>The organization has a written fire response plan.</p>	<p>2009 Standard: EC.5.10 2009 EP: 4</p> <p>2009 EP Text: Revision Code: Split</p> <p>The {jc}organization{/2} develops and implements a fire response plan that addresses the following: Facilitywide fire response Area-specific needs including fire evacuation routes Specific roles and responsibilities of staff, licensed independent practitioners, and volunteers at a fire's point of origin Specific roles and responsibilities of staff, licensed independent practitioners, and volunteers away from a fire's point of origin Specific roles and responsibilities of staff, licensed independent practitioners, and volunteers in preparing for building evacuation</p>

2010 Standard: EC.02.03.01**2010 EP:** 10**2010 EP Text:**

The written fire response plan describes the specific roles of staff during a fire situation, including when and how to sound fire alarms, how to contain smoke and fire, how to use a fire extinguisher, when and how to transmit for off-site fire responders, and how to evacuate to areas of refuge. (See also EC.02.03.03, EPs 4 and 5)

2009 Standard: EC.5.10**2009 EP:** 4**2009 EP Text:****Revision Code:** Split

The {jc}organization{/2} develops and implements a fire response plan that addresses the following: Facilitywide fire response Area-specific needs including fire evacuation routes Specific roles and responsibilities of staff, licensed independent practitioners, and volunteers at a fire's point of origin Specific roles and responsibilities of staff, licensed independent practitioners, and volunteers away from a fire's point of origin Specific roles and responsibilities of staff, licensed independent practitioners, and volunteers in preparing for building evacuation

Standard EC.02.03.03

2010 Standard Text:

The organization conducts fire drills.

2010 Standard: EC.02.03.03

2010 EP: 1

2010 EP Text:

The organization conducts fire drills once per quarter in each 24-hour-care building under its control. (See also LS.01.02.01, EP 11; LS.02.01.70, EP 4; LS.04.01.20, EP 9)

Note 1: Individuals served may, but need not be, evacuated during drills.

Note 2: In shared facilities, drills need to be conducted only in areas of the building that the organization occupies.

Note 3: This element of performance does not apply to facilities housing three or fewer individuals served.

2010 Standard: EC.02.03.03

2010 EP: 2

2010 EP Text:

The organization conducts fire drills every 12 months from the date of the last drill in each area that is defined as a business occupancy by the Life Safety Code and in which care, treatment, or services are provided.

Note: In leased or rented facilities, drills need to be conducted only in areas of the building that the organization occupies.

2010 Standard: EC.02.03.03

2010 EP: 3

2010 EP Text:

When quarterly fire drills are required, at least 50% are unannounced.

2010 Standard: EC.02.03.03

2010 EP: 4

2010 EP Text:

Staff who work in buildings where individuals served are housed or treated participate in drills according to the organization's fire response plan. (See also EC.02.03.01, EP 10)

Note: When drills are conducted between 9:00 p.m. and 6:00 a.m., the organization may use alternative methods to notify staff instead of activating the building's fire alarm system.

Standard EC.5.30

2009 Standard Text:

The {jc}organization{/2} conducts fire drills regularly.

2009 Standard: EC.5.30

2009 EP: 1

2009 EP Text:

Revision Code: Retain

Fire drills are conducted quarterly in each building defined by the LSC as the following: Residential occupancy

2009 Standard: EC.5.30

2009 EP: 2

2009 EP Text:

Revision Code: Retain

Fire drills are conducted annually in all freestanding buildings classified as a business occupancy as defined by the LSC where {jc}patients{/6} are seen or treated. Note: In leased or rented facilities, only staff in areas of the building that the {jc}organization{/2} occupies must participate in such drills.

2009 Standard: EC.5.30

2009 EP: 4

2009 EP Text:

Revision Code: Retain

At least 50% of the required drills are unannounced.

2009 Standard: EC.5.30

2009 EP: 5

2009 EP Text:

Revision Code: Retain

Staff in all areas of every building where {jc}patients{/6} are housed or treated participates in drills to the extent called for in the facility's fire plan (see EC.5.10 for required content of fire response plan).

2010 Standard: EC.02.03.03

2010 EP: 5

2010 EP Text:

The organization critiques fire drills to evaluate fire safety equipment, fire safety building features, and staff response to fire. (See also EC.02.03.01, EP 10)

2009 Standard: EC.5.30

2009 EP: 8

2009 EP Text:

Revision Code: Consolidate

During fire drills, staff knowledge is evaluated including the following: When and how to sound fire alarms (where such alarms are available) When and how to transmit for offsite fire responders Containment of smoke and fire Transfer of patients to areas of refuge Fire extinguishment Specific fire response duties Preparation for building evacuation

2010 Standard: EC.02.03.03

2010 EP: 5

2010 EP Text:

The organization critiques fire drills to evaluate fire safety equipment, fire safety building features, and staff response to fire. (See also EC.02.03.01, EP 10)

2009 Standard: EC.5.30

2009 EP: 6

2009 EP Text:

Revision Code: Consolidate

All fire drills are critiqued to identify deficiencies and opportunities for improvement.

Standard EC.02.03.05

2010 Standard Text:

The organization maintains fire safety equipment and fire safety building features.

Note: This standard does not require organizations to have the types of fire safety equipment and building features described in the elements of performance of this standard. However, if these types of equipment or features exist within the building, then the following maintenance, testing, and inspection requirements apply.

2010 Standard: EC.02.03.05

2010 EP: 1

2010 EP Text:

At least quarterly, the organization tests supervisory signal devices (except valve tamper switches). The completion date of the tests is documented.

Note: For additional guidance on performing tests, see NFPA 72, 1999 edition (Table 7-3.2).

2010 Standard: EC.02.03.05

2010 EP: 2

2010 EP Text:

Every 6 months, the organization tests valve tamper switches and water flow devices. The completion date of the tests is documented.

Note: For additional guidance on performing tests, see NFPA 72, 1999 edition (Table 7-3.2).

2010 Standard: EC.02.03.05

2010 EP: 3

2010 EP Text:

Every 12 months, the organization tests duct detectors, electromechanical releasing devices, heat detectors, manual fire alarm boxes, and smoke detectors. The completion date of the tests is documented.

Note: For additional guidance on performing tests, see NFPA 72, 1999 edition (Table 7-3.2).

Standard EC.5.40

2009 Standard Text:

The {jc}organization{/2} maintains fire-safety equipment and building features.

2009 Standard: EC.5.40

2009 EP: 1

2009 EP Text:

Revision Code: Split

Initiating devices and fire detection and alarm equipment are tested as follows:*All supervisory signal devices (except valve tamper switches) are tested at least quarterlyAll valve tamper switches and water flow devices are tested at least semiannuallyAll duct detectors, electromechanical releasing devices, heat detectors, manual fire alarm boxes, and smoke detectors are tested at least annually.* For additional guidance, see NFPA 72-1999 edition (Table 7-3.2).

2009 Standard: EC.5.40

2009 EP: 1

2009 EP Text:

Revision Code: Split

Initiating devices and fire detection and alarm equipment are tested as follows:*All supervisory signal devices (except valve tamper switches) are tested at least quarterlyAll valve tamper switches and water flow devices are tested at least semiannuallyAll duct detectors, electromechanical releasing devices, heat detectors, manual fire alarm boxes, and smoke detectors are tested at least annually.* For additional guidance, see NFPA 72-1999 edition (Table 7-3.2).

2009 Standard: EC.5.40

2009 EP: 1

2009 EP Text:

Revision Code: Split

Initiating devices and fire detection and alarm equipment are tested as follows:*All supervisory signal devices (except valve tamper switches) are tested at least quarterlyAll valve tamper switches and water flow devices are tested at least semiannuallyAll duct detectors, electromechanical releasing devices, heat detectors, manual fire alarm boxes, and smoke detectors are tested at least annually.* For additional guidance, see NFPA 72-1999 edition (Table 7-3.2).

<p>2010 Standard: EC.02.03.05 2010 EP: 4</p> <p>2010 EP Text:</p> <p>Every 12 months, the organization tests visual and audible fire alarms, including speakers. The completion date of the tests is documented.</p> <p>Note: For additional guidance on performing tests, see NFPA 72, 1999 edition (Table 7-3.2).</p>	<p>2009 Standard: EC.5.40 2009 EP: 2</p> <p>2009 EP Text: Revision Code: Retain</p> <p>Occupant alarm notification devices, including all audible devices, speakers, and visible devices, are tested at least annually.** For additional guidance, see NFPA 72-1999 edition (Table 7-3.2).</p>
<p>2010 Standard: EC.02.03.05 2010 EP: 5</p> <p>2010 EP Text:</p> <p>Every quarter, the organization tests fire alarm equipment for notifying off-site fire responders. The completion date of the tests is documented.</p> <p>Note: For additional guidance on performing tests, see NFPA 72, 1999 edition (Table 7-3.2).</p>	<p>2009 Standard: EC.5.40 2009 EP: 3</p> <p>2009 EP Text: Revision Code: Retain</p> <p>Off-premises emergency services notification transmission equipment is tested at least quarterly.**For additional guidance, see NFPA 72-1999 edition (Table 7-3.2).</p>
<p>2010 Standard: EC.02.03.05 2010 EP: 6</p> <p>2010 EP Text:</p> <p>For automatic sprinkler systems: Every week the organization tests fire pumps under no-flow conditions. The completion date of the tests is documented.</p> <p>Note: For additional guidance on performing tests, see NFPA 25, 1998 edition.</p>	<p>2009 Standard: EC.5.40 2009 EP: 4</p> <p>2009 EP Text: Revision Code: Retain</p> <p>For water-based automatic fire-extinguishing systems, all fire pumps are tested at least weekly under no flow condition.**For additional guidance, see NFPA 25-1998 edition.</p>
<p>2010 Standard: EC.02.03.05 2010 EP: 7</p> <p>2010 EP Text:</p> <p>For automatic sprinkler systems: Every 6 months the organization tests water-storage tank high- and low-water level alarms. The completion date of the tests is documented.</p> <p>Note: For additional guidance on performing tests, see NFPA 25, 1998 edition (Section 6-3.5).</p>	<p>2009 Standard: EC.5.40 2009 EP: 5</p> <p>2009 EP Text: Revision Code: Retain</p> <p>For water-based automatic fire-extinguishing systems, all water-storage tank high- and low-water level alarms are tested at least semiannually.</p>
<p>2010 Standard: EC.02.03.05 2010 EP: 8</p> <p>2010 EP Text:</p> <p>For automatic sprinkler systems: Every month during cold weather, the organization tests water-storage tank temperature alarms. The completion date of the tests is documented.</p> <p>Note: For additional guidance on performing tests, see NFPA 25, 1998 edition (Section 6-3).</p>	<p>2009 Standard: EC.5.40 2009 EP: 6</p> <p>2009 EP Text: Revision Code: Retain</p> <p>For water-based automatic fire-extinguishing systems, all water-storage tank low-water temperature alarms (during cold weather only) are tested at least monthly.</p>

2010 Standard: EC.02.03.05**2010 EP:** 9**2010 EP Text:**

For automatic sprinkler systems: Every 12 months the organization tests main drains at system low point or at all system risers. The completion date of the tests is documented.

Note: For additional guidance on performing tests, see NFPA 25, 1998 edition (Section 9-2.6).

2009 Standard: EC.5.40**2009 EP:** 7**2009 EP Text:****Revision Code:** Retain

For water-based automatic fire-extinguishing systems, main drain tests are conducted at least annually at all system risers.

2010 Standard: EC.02.03.05**2010 EP:** 10**2010 EP Text:**

For automatic sprinkler systems: Every quarter the organization inspects all fire department water supply connections. The completion dates of the inspections are documented.

Note: For additional guidance on performing tests, see NFPA 25, 1998 edition (Section 9-7.1).

2009 Standard: EC.5.40**2009 EP:** 8**2009 EP Text:****Revision Code:** Retain

For water-based automatic fire-extinguishing systems, all fire department connections are inspected quarterly.

2010 Standard: EC.02.03.05**2010 EP:** 11**2010 EP Text:**

For automatic sprinkler systems: Every 12 months the organization tests fire pumps under flow. The completion date of the tests is documented.

Note: For additional guidance on performing tests, see NFPA 25, 1998 edition.

2009 Standard: EC.5.40**2009 EP:** 9**2009 EP Text:****Revision Code:** Retain

For water-based automatic fire-extinguishing systems, all fire pumps are tested at least annually under flow.

2010 Standard: EC.02.03.05**2010 EP:** 12**2010 EP Text:**

Every 5 years the organization conducts water-flow tests for standpipe systems. The completion date of the tests is documented.

Note: For additional guidance on performing tests, see NFPA 25, 1998 edition.

2009 Standard: EC.5.40**2009 EP:** 13**2009 EP Text:****Revision Code:** Split

All standpipe occupant hoses are hydrostatically tested five years after installation and at least every three years thereafter,* and systems receive water-flow tests at least every five years.***For additional guidance, see NFPA 1962-1998 edition (section 2-3).**For additional guidance, see NFPA 25,-1998 edition.

2010 Standard: EC.02.03.05**2010 EP:** 13**2010 EP Text:**

Every 6 months the organization inspects any automatic fire-extinguishing systems in a kitchen. The completion dates of the inspections are documented.

Note 1: Discharge of the fire-extinguishing systems is not required.

Note 2: For additional guidance on performing inspections, see NFPA 96, 1998 edition.

2009 Standard: EC.5.40**2009 EP:** 10**2009 EP Text:****Revision Code:** Retain

Kitchen automatic fire-extinguishing systems are inspected for proper operation at least semiannually (actual discharge of the fire-extinguishing system is not required).

<p>2010 Standard: EC.02.03.05 2010 EP: 14</p> <p>2010 EP Text:</p> <p>Every 12 months the organization tests carbon dioxide and other gaseous automatic fire-extinguishing systems. The completion date of the tests is documented.</p> <p>Note: Discharge of the fire-extinguishing systems is not required.</p>	<p>2009 Standard: EC.5.40 2009 EP: 11</p> <p>2009 EP Text: Revision Code: Retain</p> <p>Carbon dioxide and other gaseous automatic fire-extinguishing systems are tested for proper operation at least annually (actual discharge of the fire-extinguishing system is not required).</p>
<p>2010 Standard: EC.02.03.05 2010 EP: 15</p> <p>2010 EP Text:</p> <p>At least monthly, the organization inspects portable fire extinguishers. The completion dates of the inspections are documented.</p> <p>Note 1: There are many ways to document the inspections, such as using bar-coding equipment, using check marks on a tag, or using an inventory.</p> <p>Note 2: Inspections involve a visual check for the presence and correct type of the extinguisher, broken parts, full charge, and ease of access.</p> <p>Note 3: For additional guidance on inspection of fire extinguishers, see NFPA 10, Standard for Portable Fire Extinguishers, 1998 edition (Sections 1-6, 4-3, and 4-4).</p>	<p>2009 Standard: EC.5.40 2009 EP: 12</p> <p>2009 EP Text: Revision Code: Split</p> <p>All portable fire extinguishers* are clearly identified, inspected at least monthly, and maintained at least annually.*For additional guidance, see NFPA 10-1998 edition (sections 1-6, 4-3, and 4-4).</p>
<p>2010 Standard: EC.02.03.05 2010 EP: 16</p> <p>2010 EP Text:</p> <p>Every 12 months, the organization performs maintenance on portable fire extinguishers. The completion date of the maintenance is documented.</p> <p>Note 1: There are many ways to document the maintenance, such as using bar-coding equipment, using check marks on a tag, or using an inventory.</p> <p>Note 2: For additional guidance on maintaining fire extinguishers, see NFPA 10, Standard for Portable Fire Extinguishers, 1998 edition (Sections 1-6, 4-3, and 4-4).</p>	<p>2009 Standard: EC.5.40 2009 EP: 12</p> <p>2009 EP Text: Revision Code: Split</p> <p>All portable fire extinguishers* are clearly identified, inspected at least monthly, and maintained at least annually.*For additional guidance, see NFPA 10-1998 edition (sections 1-6, 4-3, and 4-4).</p>
<p>2010 Standard: EC.02.03.05 2010 EP: 17</p> <p>2010 EP Text:</p> <p>The organization conducts hydrostatic tests on standpipe occupant hoses 5 years after installation and every 3 years thereafter. The completion date of the tests is documented.</p> <p>Note: For additional guidance on hydrostatic testing, see NFPA 1962, 1998 edition (Section 2-3), and NFPA 25, 1998 edition.</p>	<p>2009 Standard: EC.5.40 2009 EP: 13</p> <p>2009 EP Text: Revision Code: Split</p> <p>All standpipe occupant hoses are hydrostatically tested five years after installation and at least every three years thereafter;* and systems receive water-flow tests at least every five years.***For additional guidance, see NFPA 1962-1998 edition (section 2-3).**For additional guidance, see NFPA 25,-1998 edition.</p>

2010 Standard: EC.02.03.05

2010 EP: 18

2010 EP Text:

The organization operates fire and smoke dampers at least every 4 years to verify that they fully close. The completion date of the tests is documented.
 Note: For additional guidance on performing tests, see NFPA 90A, Standard for the Installation of Air Conditioning and Ventilation Systems, 1999 edition (Section 3-4.7).

2009 Standard: EC.5.40

2009 EP: 14

2009 EP Text:

Revision Code: Retain

All fire and smoke dampers are operated one year after installation and then at least every four years to verify that they fully close.*Note: The initial test that must occur one year after installation applies only to dampers installed on and after January 1, 2008.*For additional guidance, see NFPA 80-2007 (19.4.1.1) and NFPA 105-2007 (6.5.2).

2010 Standard: EC.02.03.05

2010 EP: 19

2010 EP Text:

Every 12 months, the organization tests automatic smoke-detection shutdown devices for air-handling equipment. The completion date of the tests is documented.
 Note: For additional guidance on performing tests, see NFPA 90A, Standard for the Installation of Air Conditioning and Ventilation Systems, 1999 edition (Section 4-4.1).

2009 Standard: EC.5.40

2009 EP: 15

2009 EP Text:

Revision Code: Retain

All automatic smoke-detection shutdown devices for air-handling equipment are tested at least annually.* For additional guidance, see NFPA 90A-1999 edition (section 4-4.1).

2010 Standard: EC.02.03.05

2010 EP: 20

2010 EP Text:

Every 12 months the organization tests sliding and rolling fire doors for proper operation and full closure. The completion date of the tests is documented.
 Note: For additional guidance on performing tests, see NFPA 80, 1999 edition (Section 15-3.4).

2009 Standard: EC.5.40

2009 EP: 16

2009 EP Text:

Revision Code: Retain

All horizontal and vertical sliding and rolling fire doors are tested for proper operation and full closure at least annually.* For additional guidance, see NFPA 80-1999 edition (section 15-2.4).

Standard EC.02.05.01**2010 Standard Text:**

The organization manages risks associated with its utility systems.

2010 Standard: EC.02.05.01

2010 EP: 3

2010 EP Text:

The organization identifies inspection and maintenance activities for all operating components of utility systems. (See also EC.02.05.05, EP 2)
 Note: Organizations may use different approaches to maintenance. For example, activities such as predictive maintenance, reliability-centered maintenance, interval-based maintenance, corrective maintenance, or metered maintenance may be selected to provide for dependable performance.

2010 Standard: EC.02.05.01

2010 EP: 4

2010 EP Text:

The organization identifies the frequencies for inspecting, testing, and maintaining all operating components of the utility systems, based on criteria such as manufacturers' recommendations, risk levels, or organization experience. (See also EC.02.05.05, EP 2)

2010 Standard: EC.02.05.01

2010 EP: 7

2010 EP Text:

The organization has information about the distribution of its utility systems.

2010 Standard: EC.02.05.01

2010 EP: 8

2010 EP Text:

The organization labels utility system controls so that staff are able to partially or completely shut down systems in emergencies.

Standard EC.7.10**2009 Standard Text:**

The {jc}organization{/2} manages its utility risks.

2009 Standard: EC.7.10

2009 EP: 10

2009 EP Text:

Revision Code: Retain

The {jc}organization{/2} develops appropriate strategies for all utility systems equipment on the inventory for ensuring effective, safe, and reliable operation of all equipment in the inventory. **Note: {jc}organizations{/14} may use different strategies as appropriate. For example, strategies such as predictive maintenance, interval-based inspections, corrective maintenance, or metered maintenance may be selected to ensure reliable performance.

2009 Standard: EC.7.10

2009 EP: 11

2009 EP Text:

Revision Code: Retain

The {jc}organization{/2} defines intervals for inspecting, testing, and maintaining appropriate utility systems equipment on the inventory (that is, those pieces of equipment on the inventory benefiting from scheduled activities to minimize the clinical and physical risks) that are based upon criteria such as manufacturers' recommendations, risk levels, and current {jc}organization{/2} experience.

2009 Standard: EC.7.10

2009 EP: 13

2009 EP Text:

Revision Code: Retain

The {jc}organization{/2} maps the distribution of utility systems.

2009 Standard: EC.7.10

2009 EP: 14

2009 EP Text:

Revision Code: Retain

The {jc}organization{/2} labels controls for a partial or complete emergency shutdown.

2010 Standard: EC.02.05.01 **2010 EP:** 9
2010 EP Text:
 The organization has written procedures for responding to utility system disruptions.

2009 Standard: EC.7.10 **2009 EP:** 12
2009 EP Text: **Revision Code:** Split
 The {jc}organization{/2} identifies and implements emergency procedures for responding to utility system disruptions or failures that address the following:What to do if utility systems malfunctionIdentification of an alternative source of {jc}organization{/2}-defined essential utilitiesShutting off the malfunctioning systems and notifying staff in affected areasObtaining repair services

2010 Standard: EC.02.05.01 **2010 EP:** 10
2010 EP Text:
 The organization's procedures address shutting off the malfunctioning system and notifying staff in affected areas.

2009 Standard: EC.7.10 **2009 EP:** 12
2009 EP Text: **Revision Code:** Split
 The {jc}organization{/2} identifies and implements emergency procedures for responding to utility system disruptions or failures that address the following:What to do if utility systems malfunctionIdentification of an alternative source of {jc}organization{/2}-defined essential utilitiesShutting off the malfunctioning systems and notifying staff in affected areasObtaining repair services

2010 Standard: EC.02.05.01 **2010 EP:** 13
2010 EP Text:
 The organization responds to utility system disruptions as described in its procedures.

2009 Standard: EC.7.10 **2009 EP:** 12
2009 EP Text: **Revision Code:** Split
 The {jc}organization{/2} identifies and implements emergency procedures for responding to utility system disruptions or failures that address the following:What to do if utility systems malfunctionIdentification of an alternative source of {jc}organization{/2}-defined essential utilitiesShutting off the malfunctioning systems and notifying staff in affected areasObtaining repair services

Standard EC.02.05.03

2010 Standard Text:

The organization has a reliable emergency electrical power source.

2010 Standard: EC.02.05.03

2010 EP: 1

2010 EP Text:

The organization provides emergency power for the following: Alarm systems, as required by the occupancies defined in the Life Safety Code.

Note: For guidance in establishing a reliable emergency power system (that is, an essential electrical distribution system), see NFPA 99, 1999 edition (Section 13-3.3).

2010 Standard: EC.02.05.03

2010 EP: 2

2010 EP Text:

The organization provides emergency power for the following: Exit route and exit sign illumination, as required by the occupancies defined in the Life Safety Code.

2010 Standard: EC.02.05.03

2010 EP: 2

2010 EP Text:

The organization provides emergency power for the following: Exit route and exit sign illumination, as required by the occupancies defined in the Life Safety Code.

2010 Standard: EC.02.05.03

2010 EP: 3

2010 EP Text:

The organization provides emergency power for the following: Emergency communication systems, as required by the occupancies defined in the Life Safety Code.

Standard EC.7.20

2009 Standard Text:

The {jc}organization{/2} provides an emergency electrical power source.

2009 Standard: EC.7.20

2009 EP: 1

2009 EP Text:

Revision Code: Retain

The {jc}organization{/2} provides a reliable emergency power system*, as required by the LSC occupancy requirements, that supplies electricity to the following areas when normal electricity is interrupted: Alarm systems *Reliable emergency power system For guidance in establishing a reliable emergency power system (Essential Electrical Distribution System), see NFPA 99-2002 edition (chapters 13 and 14).

2009 Standard: EC.7.20

2009 EP: 4

2009 EP Text:

Revision Code: Consolidate

The {jc}organization{/2} provides a reliable emergency power system, as required by the LSC occupancy requirements, that supplies electricity to the following areas when normal electricity is interrupted: Illumination of exit signs

2009 Standard: EC.7.20

2009 EP: 2

2009 EP Text:

Revision Code: Consolidate

The {jc}organization{/2} provides a reliable emergency power system, as required by the LSC occupancy requirements, that supplies electricity to the following areas when normal electricity is interrupted: Exit route illumination

2009 Standard: EC.7.20

2009 EP: 3

2009 EP Text:

Revision Code: Retain

The {jc}organization{/2} provides a reliable emergency power system, as required by the LSC occupancy requirements, that supplies electricity to the following areas when normal electricity is interrupted: Emergency communication systems

2010 Standard: EC.02.05.03**2010 EP:** 4**2010 EP Text:**

When elevators exist in 24-hour-care settings, the organization has a method for safely evacuating nonambulatory individuals when power is lost.

Note: Acceptable solutions include providing elevators with emergency power or using evacuation techniques such as carrying.

2009 Standard: EC.7.20**2009 EP:** 8**2009 EP Text:****Revision Code:** Retain

The {jc}organization{/2} provides a reliable emergency power system, as required by the services provided and {jc}patients{/6} served, that supplies electricity to the following areas when normal electricity is interrupted: Elevators (at least one for nonambulatory {jc}patients{/6})

Standard EC.02.05.05

2010 Standard Text:

The organization inspects, tests, and maintains utility systems.
 Note: At times, maintenance is performed by an external service. In these cases, organizations are not required to possess maintenance documentation but have access to such documentation during survey and as needed.

2010 Standard: EC.02.05.05

2010 EP: 1

2010 EP Text:

The organization tests utility system components before initial use. The completion date of the tests is documented.

2010 Standard: EC.02.05.05

2010 EP: 2

2010 EP Text:

The organization inspects, tests, and maintains the following: Utility systems. These activities are documented. (See also EC.02.05.01, EPs 3 and 4)

Standard EC.7.30

2009 Standard Text:

The {jc}organization{/2} maintains, tests, and inspects its utility systems.

2009 Standard: EC.7.30

2009 EP: 2

2009 EP Text:

Revision Code: Retain

The {jc}organization{/2} maintains documentation of performance and safety testing of each critical component identified in the plan before initial use.

2009 Standard: EC.7.30

2009 EP: 5

2009 EP Text:

Revision Code: Retain

The {jc}organization{/2} maintains documentation of maintenance of critical components on the inventory consistent with maintenance strategies identified in the utility management plan (see standard EC.7.10).

Standard EC.02.05.07**2010 Standard Text:**

The organization inspects, tests, and maintains emergency power systems.
 Note: This standard does not require organizations to have the types of emergency power equipment described in the elements of performance of this standard. However, if these types of emergency equipment exist within the building, then the following maintenance, testing, and inspection requirements apply. This does not apply to generators used only for convenience purposes.

2010 Standard: EC.02.05.07**2010 EP:** 1**2010 EP Text:**

At 30-day intervals, the organization performs a functional test of battery-powered lights required for egress for a minimum duration of 30 seconds. The completion date of the tests is documented.

2010 Standard: EC.02.05.07**2010 EP:** 2**2010 EP Text:**

Every 12 months, the organization either performs a functional test of battery-powered lights required for egress for a duration of 1 1/2 hours; or the organization replaces all batteries every 12 months and, during replacement, performs a random test of 10% of all batteries for 1 1/2 hours. The completion date of the tests is documented.

Standard EC.7.40**2009 Standard Text:**

The {jc}organization{/2} maintains, tests, and inspects its emergency power systems.

2009 Standard: EC.7.40**2009 EP:** 3**2009 EP Text:****Revision Code:** Split

The {jc}organization{/2} tests all battery-powered lights required for egress. Testing includes (a) a functional test at 30-day intervals for a minimum of 30 seconds; and (b) an annual test for a duration of 1.5 hours.

2009 Standard: EC.7.40**2009 EP:** 3**2009 EP Text:****Revision Code:** Split

The {jc}organization{/2} tests all battery-powered lights required for egress. Testing includes (a) a functional test at 30-day intervals for a minimum of 30 seconds; and (b) an annual test for a duration of 1.5 hours.

2010 Standard: EC.02.05.07**2010 EP:** 3**2010 EP Text:**

Every quarter, the organization performs a functional test of stored emergency power supply systems (SEPSS) for 5 minutes or as specified for its class (whichever is less). The organization performs an annual test at full load for 60% of the full duration of its class. The completion dates of the tests are documented.

Note 1: Non-SEPSS battery backup emergency power systems that the organization has determined to be critical for operations during a power failure (for example, electronic medical records) should be properly tested and maintained in accordance with manufacturers' recommendations.

Note 2: SEPSS are intended to automatically supply illumination or power to critical areas and equipment essential for safety to human life. Included are systems that supply emergency power for such functions as illumination for safe exiting, fire detection and alarm systems, public safety communications systems, and processes where the current interruption would produce serious life safety or health hazards to individuals served, the public, or staff.

Note 3: Class defines the minimum time for which the SEPSS is designed to operate at its rated load without being recharged. For additional guidance, see NFPA 111, Standard on Stored Electrical Energy Emergency and Standby Power Systems, 1996 edition.

2009 Standard: EC.7.40**2009 EP:** 4**2009 EP Text:****Revision Code:** Retain

The {jc}organization{/2} tests Stored Emergency Power Supply Systems (SEPSS) whose malfunction may severely jeopardize the occupants' life and safety.*Testing includes (a) a quarterly functional test for 5 minutes or as specified for its class,** whichever is less; and (b) an annual test at full load for 60% of the full duration of its class.*Stored Emergency Power Supply Systems (SEPSS) Are intended to automatically supply illumination or power to critical areas and equipment essential for safety to human life. Included are systems that supply emergency power for such functions as illumination for safe exiting, ventilation where it is essential to maintain life, fire detection and alarm systems, public safety communications systems, and processes where the current interruption would produce serious life safety or health hazards to {jc}patients{/6}, the public, or staff. Note: Other non-SEPSS battery back-up emergency power systems that an {jc}organization{/2} has determined to be critical for operations during a power failure (for example, laboratory equipment, electronic medical records) should be properly tested and maintained in accordance with manufacturer's recommendations.**Class Defines the minimum time for which the SEPSS is designed to operate at its rated load without being recharged (for additional guidance, see NFPA 111 (1996 edition) Standard on Stored Electrical Energy Emergency and Standby Power Systems).

2010 Standard: EC.02.05.07**2010 EP:** 4**2010 EP Text:**

Twelve times a year, at intervals of not less than 20 days and not more than 40 days, the organization tests each emergency generator for at least 30 continuous minutes. The completion dates of the tests are documented.

2009 Standard: EC.7.40**2009 EP:** 1**2009 EP Text:****Revision Code:** Split

The {jc}organization{/2} tests each generator 12 times a year with testing intervals not less than 20 days and not more than 40 days apart. These tests shall be conducted for at least 30 continuous minutes under a dynamic load that is at least 30% of the nameplate rating of the generator. Note: {jc}Organizations{/14} may choose to test to less than 30% of the emergency generator's nameplate. However, these {jc}organizations{/14} shall (in addition to performing a test for 30 continuous minutes under operating temperature at the intervals described above) revise their existing documented management plan to conform to NFPA 110 (2005 edition) testing and maintenance activities. These activities shall include inspection procedures for assessing the prime movers' exhaust gas temperature against the minimum temperature recommended by the manufacturer. If diesel-powered generators do not meet the minimum exhaust gas temperatures as determined during these tests, they shall be exercised for 30 continuous minutes at the intervals described above with available Emergency Power Supply Systems (epss) load, and exercised annually with supplemental loads of 25% of name plate rating for 30 minutes, followed by 50% of name plate rating for 30 minutes, followed by 75% of name plate rating for 60 minutes for a total of two continuous hours.

2010 Standard: EC.02.05.07**2010 EP:** 5**2010 EP Text:**

The emergency generator tests are conducted with a dynamic load that is at least 30% of the nameplate rating of the generator or meets the manufacturer's recommended prime movers' exhaust gas temperature. If the organization does not meet either the 30% of nameplate rating or the recommended exhaust gas temperature during any test in EC.02.05.07, EP 4, then it must test each emergency generator once every 12 months using supplemental (dynamic or static) loads of 25% of nameplate rating for 30 minutes, followed by 50% of nameplate rating for 30 minutes, followed by 75% of nameplate rating for 60 minutes, for a total of 2 continuous hours.

2009 Standard: EC.7.40**2009 EP:** 1**2009 EP Text:****Revision Code:** Split

The {jc}organization{/2} tests each generator 12 times a year with testing intervals not less than 20 days and not more than 40 days apart. These tests shall be conducted for at least 30 continuous minutes under a dynamic load that is at least 30% of the nameplate rating of the generator. Note: {jc}Organizations{/14} may choose to test to less than 30% of the emergency generator's nameplate. However, these {jc}organizations{/14} shall (in addition to performing a test for 30 continuous minutes under operating temperature at the intervals described above) revise their existing documented management plan to conform to NFPA 110 (2005 edition) testing and maintenance activities. These activities shall include inspection procedures for assessing the prime movers' exhaust gas temperature against the minimum temperature recommended by the manufacturer. If diesel-powered generators do not meet the minimum exhaust gas temperatures as determined during these tests, they shall be exercised for 30 continuous minutes at the intervals described above with available Emergency Power Supply Systems (epss) load, and exercised annually with supplemental loads of 25% of name plate rating for 30 minutes, followed by 50% of name plate rating for 30 minutes, followed by 75% of name plate rating for 60 minutes for a total of two continuous hours.

2010 Standard: EC.02.05.07**2010 EP:** 6**2010 EP Text:**

Twelve times a year, at intervals of not less than 20 days and not more than 40 days, the organization tests all automatic transfer switches. The completion date of the tests is documented.

2009 Standard: EC.7.40**2009 EP:** 2**2009 EP Text:****Revision Code:** Retain

The {jc}organization{/2} tests all automatic transfer switches 12 times a year with testing intervals not less than 20 days and not more than 40 days apart.

2010 Standard: EC.02.05.07**2010 EP:** 9**2010 EP Text:**

If a required emergency power system test fails, the organization implements measures to protect individuals served, visitors, and staff until necessary repairs or corrections are completed.

2009 Standard: EC.7.40**2009 EP:** 6**2009 EP Text:****Revision Code:** Retain

If a test(s) required by EC.7.40 fails, the organization implements interim measures to compensate for the risk to {jc}patients{/6}, visitors, and staff until necessary repairs or corrections are completed.

2010 Standard: EC.02.05.07**2010 EP:** 10**2010 EP Text:**

If a required emergency power system test fails, the organization performs a retest after making the necessary repairs or corrections.

2009 Standard: EC.7.40**2009 EP:** 7**2009 EP Text:****Revision Code:** Retain

If a test(s) required by EC.7.40 fails, the organization performs a retest after making the necessary repairs or corrections.

Standard EC.02.06.01

2010 Standard Text:

The organization establishes and maintains a safe, functional environment.

2010 Standard: EC.02.06.01

2010 EP: 1

2010 EP Text:

Interior spaces meet the needs of the individuals served for safety and suitability for the care, treatment, or services provided.

2010 Standard: EC.02.06.01

2010 EP: 1

2010 EP Text:

Interior spaces meet the needs of the individuals served for safety and suitability for the care, treatment, or services provided.

2010 Standard: EC.02.06.01

2010 EP: 4

2010 EP Text:

The organization provides outside areas for use by individuals served, based on the individual's needs and suitable to the individual's age or other characteristics.

Note: Outdoor areas may include facility grounds, nearby parks and playgrounds, and adjacent countryside.

Standard EC.8.10

2009 Standard Text:

The {jc}organization{/2} establishes and maintains an appropriate environment.

2009 Standard: EC.8.10

2009 EP: 4

2009 EP Text:

Areas used by the {jc}patients{/6} are safe, clean, functional, and comfortable.

Revision Code: Split

2009 Standard: EC.8.10

2009 EP: 1

2009 EP Text:

Interior spaces should be the following: Appropriate to the care, treatment, and services provided and the needs of the {jc}patients{/6} related to age and other characteristics Include closet and drawer space provided for storing personal property and other items provided for use by {jc}patients{/6}. Lockers, drawers, or closet space is provided for {jc}patient{/1}s who are in charge of their own personal grooming and who wear street clothes (for example, behavioral health care {jc}patients{/6} who wear street clothes and are expected to meet their personal grooming needs) Allow for good recreational interchange, consider personal preferences when feasible, and accommodate equipment, such as wheelchairs, that are necessary to activities of daily living

Revision Code: Split

2009 Standard: EC.8.10

2009 EP: 3

2009 EP Text:

Outside areas are: Provided when required by the care, treatment, and services. The {jc}organization{/2} provides access to the outdoors through appropriate use of facility grounds, nearby parks and playgrounds, and adjacent countryside Appropriate and safe considering the care, treatment, and services provided and the needs of the {jc}patients{/6} related to age and other characteristics

Revision Code: Retain

<p>2010 Standard: EC.02.06.01 2010 EP: 4</p> <p>2010 EP Text:</p> <p>The organization provides outside areas for use by individuals served, based on the individual's needs and suitable to the individual's age or other characteristics.</p> <p>Note: Outdoor areas may include facility grounds, nearby parks and playgrounds, and adjacent countryside.</p>	<p>2009 Standard: EC.8.10 2009 EP: 1</p> <p>2009 EP Text: Revision Code: Split</p> <p>Interior spaces should be the following:Appropriate to the care, treatment, and services provided and the needs of the {jc}patients{/6} related to age and other characteristicsInclude closet and drawer space provided for storing personal property and other items provided for use by {jc}patients{/6}. Lockers, drawers, or closet space is provided for {jc}patient{/1}s who are in charge of their own personal grooming and who wear street clothes (for example, behavioral health care{jc}patients{/6} who wear street clothes and are expected to meet their personal grooming needs)Allow for good recreational interchange, consider personal preferences when feasible, and accommodate equipment, such as wheelchairs, that are necessary to activities of daily living</p>
<p>2010 Standard: EC.02.06.01 2010 EP: 5</p> <p>2010 EP Text:</p> <p>The organization provides storage space to meet the needs of the individual served.</p>	<p>2009 Standard: EC.8.10 2009 EP: 1</p> <p>2009 EP Text: Revision Code: Split</p> <p>Interior spaces should be the following:Appropriate to the care, treatment, and services provided and the needs of the {jc}patients{/6} related to age and other characteristicsInclude closet and drawer space provided for storing personal property and other items provided for use by {jc}patients{/6}. Lockers, drawers, or closet space is provided for {jc}patient{/1}s who are in charge of their own personal grooming and who wear street clothes (for example, behavioral health care{jc}patients{/6} who wear street clothes and are expected to meet their personal grooming needs)Allow for good recreational interchange, consider personal preferences when feasible, and accommodate equipment, such as wheelchairs, that are necessary to activities of daily living</p>
<p>2010 Standard: EC.02.06.01 2010 EP: 8</p> <p>2010 EP Text:</p> <p>Waiting and reception areas are adequate in size and number and staffed according to the needs of the individuals served.</p>	<p>2009 Standard: EC.8.10 2009 EP: 8</p> <p>2009 EP Text: Revision Code: Retain</p> <p>Waiting and reception areas are adequate in size and number and staffed according to {jc}patient{/1} needs.</p>
<p>2010 Standard: EC.02.06.01 2010 EP: 9</p> <p>2010 EP Text:</p> <p>Restrooms are adequate in size and number for people using the facility.</p>	<p>2009 Standard: EC.8.10 2009 EP: 9</p> <p>2009 EP Text: Revision Code: Retain</p> <p>Enough restrooms are available for people using the facility.</p>

Accreditation Program: Behavioral Health Care Chapter: Environment of Care

<p>2010 Standard: EC.02.06.01</p> <p>2010 EP Text:</p> <p>For opioid treatment programs: The use of physical space, including bathrooms, reflects the special needs of female patients.</p>	<p>2010 EP: 10</p>	<p>2009 Standard: EC.8.10</p> <p>2009 EP Text:</p> <p>For Opioid Treatment Programs: The use of physical space, including bathrooms, reflects the special needs of female patients.</p>	<p>2009 EP: 31</p> <p>Revision Code: Retain</p>
<p>2010 Standard: EC.02.06.01</p> <p>2010 EP Text:</p> <p>Lighting is suitable for care, treatment, or services.</p>	<p>2010 EP: 11</p>	<p>2009 Standard: EC.8.10</p> <p>2009 EP Text:</p> <p>Lighting is suitable for care, treatment, and services and the specific activities being conducted.</p>	<p>2009 EP: 5</p> <p>Revision Code: Retain</p>
<p>2010 Standard: EC.02.06.01</p> <p>2010 EP Text:</p> <p>Lighting is controlled by the individuals served, consistent with care, treatment, or services provided.</p>	<p>2010 EP: 12</p>	<p>2009 Standard: EC.8.10</p> <p>2009 EP Text:</p> <p>Lighting is controlled by clients, when appropriate.</p>	<p>2009 EP: 6</p> <p>Revision Code: Retain</p>
<p>2010 Standard: EC.02.06.01</p> <p>2010 EP Text:</p> <p>The organization maintains ventilation, temperature, and humidity levels suitable for the care, treatment, or services provided.</p>	<p>2010 EP: 13</p>	<p>2009 Standard: EC.8.10</p> <p>2009 EP Text:</p> <p>Ventilation provides for acceptable levels of temperature and humidity and eliminates odors.</p>	<p>2009 EP: 7</p> <p>Revision Code: Retain</p>
<p>2010 Standard: EC.02.06.01</p> <p>2010 EP Text:</p> <p>Drinking fountains or water coolers are available for the individuals served.</p>	<p>2010 EP: 19</p>	<p>2009 Standard: EC.8.10</p> <p>2009 EP Text:</p> <p>Drinking fountains or water coolers are available and appropriate for the age and disability groups served (for example, children or wheelchair-bound individuals).</p>	<p>2009 EP: 10</p> <p>Revision Code: Retain</p>
<p>2010 Standard: EC.02.06.01</p> <p>2010 EP Text:</p> <p>Areas used by individuals served are safe, clean, and comfortable.</p>	<p>2010 EP: 20</p>	<p>2009 Standard: EC.8.10</p> <p>2009 EP Text:</p> <p>Areas used by the {jc}patients{/6} are safe, clean, functional, and comfortable.</p>	<p>2009 EP: 4</p> <p>Revision Code: Split</p>
<p>2010 Standard: EC.02.06.01</p> <p>2010 EP Text:</p> <p>Furnishings and equipment should reflect the ability and needs of the individual served.</p>	<p>2010 EP: 24</p>	<p>2009 Standard: EC.8.10</p> <p>2009 EP Text:</p> <p>Furnishings and equipment should:Be maintained to be safe and in good repairReflect the {jc}patient{/1}'s level of ability and needs Help to normalize the {jc}patient{/1}'s living environment</p>	<p>2009 EP: 2</p> <p>Revision Code: Split</p>

2010 Standard: EC.02.06.01 **2010 EP:** 25
2010 EP Text:
 Door locks and other structural restraints (such as fences) have the following characteristics:
 - They are consistent with the organization's mission, program goals, program policy, and law and regulation.
 - They provide the least-restrictive environment.
 - They meet the needs of the individual served.
 - They provide for emergency access to locked, occupied spaces.

2009 Standard: EC.8.10 **2009 EP:** 13
2009 EP Text: **Revision Code:** Retain
 Door locks and other structural restraints are used in accordance with the {c}organization{/2}'s mission and program goals. Structural restraints (for example, fences, door-locking devices) are used consistently with the {c}patient{/1}'s needs, program policy, and law and regulation to provide the least restrictive environment. Emergency access provisions are provided to all locked, occupied spaces. The {c}organization{/2} documents the leaders' review and approval of the use of structural restraints. The leaders consider the {c}patient{/1}'s safety, rights, and security when approving the use of structural restraints.

2010 Standard: EC.02.06.01 **2010 EP:** 26
2010 EP Text:
 The organization keeps furnishings and equipment safe and in good repair.

2009 Standard: EC.8.10 **2009 EP:** 2
2009 EP Text: **Revision Code:** Split
 Furnishings and equipment should: Be maintained to be safe and in good repair Reflect the {c}patient{/1}'s level of ability and needs Help to normalize the {c}patient{/1}'s living environment

2010 Standard: EC.02.06.01 **2010 EP:** 36
2010 EP Text:
 For opioid treatment programs: The program has private, individual offices available for counseling.

2009 Standard: EC.8.10 **2009 EP:** 32
2009 EP Text: **Revision Code:** Retain
 For Opioid Treatment Programs: The program has private, individual offices available for counseling.

Standard EC.02.06.03

2010 Standard Text:

The organization establishes and maintains a safe and functional dining environment when food is provided.

2010 Standard: EC.02.06.03

2010 EP: 1

2010 EP Text:

The dining environment encourages eating and socialization.

2010 Standard: EC.02.06.03

2010 EP: 2

2010 EP Text:

Dining areas are free from loud and distracting noises.

2010 Standard: EC.02.06.03

2010 EP: 3

2010 EP Text:

Dining areas are arranged to seat small groups.

2010 Standard: EC.02.06.03

2010 EP: 4

2010 EP Text:

Consistent with program goals, facilities for preparing snacks and meals for special occasions are available.

2010 Standard: EC.02.06.03

2010 EP: 5

2010 EP Text:

The facilities for serving snacks, preparing meals, and engaging in recreational activities support the participation of the individuals served.

Standard EC.8.20

2009 Standard Text:

The {jc}organization{/2} establishes and maintains an appropriate dining environment.

2009 Standard: EC.8.20

2009 EP: 1

2009 EP Text:

Revision Code: Retain

The dining environment encourages eating and socialization, for instance, by minimizing distractions and providing small group settings.

2009 Standard: EC.8.20

2009 EP: 2

2009 EP Text:

Revision Code: Retain

Dining areas are free from loud and distracting noises according to the {jc}patients{/6}' needs.

2009 Standard: EC.8.20

2009 EP: 3

2009 EP Text:

Revision Code: Retain

Dining areas are arranged to seat small groups.

2009 Standard: EC.8.20

2009 EP: 4

2009 EP Text:

Revision Code: Retain

Depending on program goals, facilities are available for serving snacks and preparing meals for special occasions.

2009 Standard: EC.8.20

2009 EP: 5

2009 EP Text:

Revision Code: Retain

The facilities for serving snacks, preparing meals, and engaging in recreational activities support {jc}patient{/1} participation.

Standard EC.02.06.05**2010 Standard Text:**

The organization manages its space during demolition, renovation, or new construction.

Note: These elements of performance are applicable to all occupancy types.

2010 Standard: EC.02.06.05

2010 EP: 1

2010 EP Text:

The organization uses design criteria when planning for new, altered, or renovated space that are consistent with applicable local, state, and federal law and regulation.

2010 Standard: EC.02.06.05

2010 EP: 2

2010 EP Text:

When planning demolition, construction, or renovation, the organization conducts a preconstruction risk assessment for air quality requirements, infection control, utility requirements, noise, vibration, and other hazards that affect care, treatment, or services.

Note: Refer to LS.01.02.01 for information on fire safety procedures to implement during construction or renovation.

2010 Standard: EC.02.06.05

2010 EP: 2

2010 EP Text:

When planning demolition, construction, or renovation, the organization conducts a preconstruction risk assessment for air quality requirements, infection control, utility requirements, noise, vibration, and other hazards that affect care, treatment, or services.

Note: Refer to LS.01.02.01 for information on fire safety procedures to implement during construction or renovation.

2010 Standard: EC.02.06.05

2010 EP: 3

2010 EP Text:

The organization takes action based on its assessment to minimize risks during demolition, construction, or renovation.

Standard EC.8.30**2009 Standard Text:**

The {jc}organization{/2} manages the design and building of the environment when it is renovated, altered, or newly created (see also standard EC.5.50).

2009 Standard: EC.8.30

2009 EP: 1

2009 EP Text:

Revision Code: Retain

When planning for the size, configuration, and equipping of the space of renovated, altered, or new construction, the {jc}organization{/2} uses one of the following: applicable state rules and regulations; or standards or guidelines that provide design criteria.

2009 Standard: EC.8.30

2009 EP: 2

2009 EP Text:

Revision Code: Consolidate

When planning demolition, construction, or renovation, the {jc}organization{/2} conducts a proactive risk assessment using risk criteria to identify hazards that could potentially compromise care, treatment, and services in occupied areas of the {jc}organization{/2}'s buildings. The scope and nature of the activities should determine the extent of risk assessment.

2009 Standard: EC.8.30

2009 EP: 3

2009 EP Text:

Revision Code: Consolidate

When planning demolition, construction, or renovation, the {jc}organization{/2} uses risk criteria that address the impact of demolition, renovation, or new construction on air quality requirements, infection control, utility requirements, noise, vibration, and emergency procedures.

2009 Standard: EC.8.30

2009 EP: 4

2009 EP Text:

Revision Code: Retain

When planning demolition, construction, or renovation, the {jc}organization{/2} selects and implements proper controls, as required, to reduce risk and minimize impact of these activities.

Standard EC.03.01.01

2010 Standard Text:

Staff are familiar with their roles and responsibilities relative to the environment of care.

2010 Standard: EC.03.01.01

2010 EP: 1

2010 EP Text:

Staff can describe or demonstrate methods for eliminating and minimizing physical risks in the environment of care.

2010 Standard: EC.03.01.01

2010 EP: 1

2010 EP Text:

Staff can describe or demonstrate methods for eliminating and minimizing physical risks in the environment of care.

2010 Standard: EC.03.01.01

2010 EP: 2

2010 EP Text:

Staff can describe or demonstrate actions to take in the event of an environment of care incident.

2010 Standard: EC.03.01.01

2010 EP: 3

2010 EP Text:

Staff can describe or demonstrate how to report environment of care risks.

Standard HR.2.20

2009 Standard Text:

Staff as appropriate, can describe or demonstrate their roles and responsibilities relative to safety.

2009 Standard: HR.2.20

2009 EP: 1

2009 EP Text:

Staff as appropriate, can describe or demonstrate risks within the {jc}organization{/2}'s environment.

Revision Code: Consolidate

2009 Standard: HR.2.20

2009 EP: 2

2009 EP Text:

Staff as appropriate, can describe or demonstrate actions to eliminate, minimize, or report risks

Revision Code: Consolidate

2009 Standard: HR.2.20

2009 EP: 3

2009 EP Text:

Staff as appropriate, can describe or demonstrate procedures to follow in the event of an incident

Revision Code: Retain

2009 Standard: HR.2.20

2009 EP: 4

2009 EP Text:

Staff as appropriate, can describe or demonstrate reporting processes for common problems, failures, and user errors.

Revision Code: Retain

Standard EC.04.01.01

2010 Standard Text:

The organization collects information to monitor conditions in the environment.

2010 Standard: EC.04.01.01

2010 EP: 1

2010 EP Text:

The organization establishes a process(es) for continually monitoring, internally reporting, and investigating the following:

- Injuries to individuals served or others within the organization’s facilities
- Occupational illnesses and staff injuries
- Incidents of damage to its property or the property of others in locations it controls
- Security incidents involving individuals served, staff, or others in locations it controls
- Fire safety management problems, deficiencies, and failures

Note 1: All the incidents and issues listed above may be reported to staff in quality assessment, improvement, or other functions. A summary of such incidents may also be shared with the person designated to coordinate safety management activities.

Note 2: Review of incident reports often requires that legal processes be followed to preserve confidentiality. Opportunities to improve care, treatment, or services, or to prevent similar incidents, are not lost as a result of following the legal process.

Standard EC.9.10

2009 Standard Text:

The {jc}organization{/2} monitors conditions in the environment.

2009 Standard: EC.9.10

2009 EP: 1

2009 EP Text:

Revision Code: Split

The {jc}organization{/2} establishes and implements process(es) for reporting and investigating the following: *Injuries to {jc}patients{/6} or others coming to the {jc}organization{/2}'s facilities as well as incidents of property damage Occupational illnesses and injuries to staff Security incidents involving {jc}patients{/6}, staff, or others coming to the {jc}organization{/2}'s facilities or property Hazardous materials and waste spills, exposures, and other related incidents Fire-safety management problems, deficiencies, and failures Equipment-management problems, failures, and user errors Utility systems management problems, failures, or user errors *{jc}Organizations{/14} have the flexibility to develop a single reporting method that addresses one or more of the items listed.

2010 Standard: EC.04.01.01**2010 EP:** 1**2010 EP Text:**

The organization establishes a process(es) for continually monitoring, internally reporting, and investigating the following:

- Injuries to individuals served or others within the organization's facilities
- Occupational illnesses and staff injuries
- Incidents of damage to its property or the property of others in locations it controls
- Security incidents involving individuals served, staff, or others in locations it controls
- Fire safety management problems, deficiencies, and failures

Note 1: All the incidents and issues listed above may be reported to staff in quality assessment, improvement, or other functions. A summary of such incidents may also be shared with the person designated to coordinate safety management activities.

Note 2: Review of incident reports often requires that legal processes be followed to preserve confidentiality. Opportunities to improve care, treatment, or services, or to prevent similar incidents, are not lost as a result of following the legal process.

2010 Standard: EC.04.01.01**2010 EP:** 2**2010 EP Text:**

Based on its process(es), the organization reports and investigates the following: Problems and incidents related to each of the environment of care management plans. (See also EC.04.01.03, EP 1)

2009 Standard: EC.9.10**2009 EP:** 3**2009 EP Text:****Revision Code:** Consolidate

The {jc}organization{/2} establishes and implements a process(es) for on-going monitoring of performance regarding actual or potential risk(s) in each of the environment of care management plans.**The environment of care plans are for managing safety, security, hazardous materials and waste, emergency management, fire safety, and utilities.

2009 Standard: EC.9.10**2009 EP:** 1**2009 EP Text:****Revision Code:** Split

The {jc}organization{/2} establishes and implements process(es) for reporting and investigating the following:*Injuries to {jc}patients{/6} or others coming to the {jc}organization{/2}'s facilities as well as incidents of property damageOccupational illnesses and injuries to staffSecurity incidents involving {jc}patients{/6}, staff, or others coming to the {jc}organization{/2}'s facilities or propertyHazardous materials and waste spills, exposures, and other related incidentsFire-safety management problems, deficiencies, and failuresEquipment-management problems, failures, and user errorsUtility systems management problems, failures, or user errors*{jc}Organizations{/14} have the flexibility to develop a single reporting method that addresses one or more of the items listed.

2010 Standard: EC.04.01.01

2010 EP: 3

2010 EP Text:

Based on its process(es), the organization reports and investigates the following: Injuries to individuals served or others within the organization's facilities. (See also EC.04.01.03, EP 1)

2009 Standard: EC.9.10

2009 EP: 1

2009 EP Text:

Revision Code: Split

The {jc}organization{/2} establishes and implements process(es) for reporting and investigating the following: *Injuries to {jc}patients{/6} or others coming to the {jc}organization{/2}'s facilities as well as incidents of property damageOccupational illnesses and injuries to staffSecurity incidents involving {jc}patients{/6}, staff, or others coming to the {jc}organization{/2}'s facilities or propertyHazardous materials and waste spills, exposures, and other related incidentsFire-safety management problems, deficiencies, and failuresEquipment-management problems, failures, and user errorsUtility systems management problems, failures, or user errors*{jc}Organizations{/14} have the flexibility to develop a single reporting method that addresses one or more of the items listed.

2010 Standard: EC.04.01.01

2010 EP: 4

2010 EP Text:

Based on its process(es), the organization reports and investigates the following: Occupational illnesses and staff injuries. (See also EC.04.01.03, EP 1)

Note: This requirement applies to issues in the workplace, such as back injuries or allergies. It does not apply to communicable diseases.

2009 Standard: EC.9.10

2009 EP: 1

2009 EP Text:

Revision Code: Split

The {jc}organization{/2} establishes and implements process(es) for reporting and investigating the following: *Injuries to {jc}patients{/6} or others coming to the {jc}organization{/2}'s facilities as well as incidents of property damageOccupational illnesses and injuries to staffSecurity incidents involving {jc}patients{/6}, staff, or others coming to the {jc}organization{/2}'s facilities or propertyHazardous materials and waste spills, exposures, and other related incidentsFire-safety management problems, deficiencies, and failuresEquipment-management problems, failures, and user errorsUtility systems management problems, failures, or user errors*{jc}Organizations{/14} have the flexibility to develop a single reporting method that addresses one or more of the items listed.

2010 Standard: EC.04.01.01 **2010 EP:** 5
2010 EP Text:
 Based on its process(es), the organization reports and investigates the following: Incidents of damage to its property or the property of others in locations it controls. (See also EC.04.01.03, EP 1)

2009 Standard: EC.9.10 **2009 EP:** 1
2009 EP Text: **Revision Code:** Split
 The {jc}organization{/2} establishes and implements process(es) for reporting and investigating the following:*Injuries to {jc}patients{/6} or others coming to the {jc}organization{/2}'s facilities as well as incidents of property damageOccupational illnesses and injuries to staffSecurity incidents involving {jc}patients{/6}, staff, or others coming to the {jc}organization{/2}'s facilities or propertyHazardous materials and waste spills, exposures, and other related incidentsFire-safety management problems, deficiencies, and failuresEquipment-management problems, failures, and user errorsUtility systems management problems, failures, or user errors*{jc}Organizations{/14} have the flexibility to develop a single reporting method that addresses one or more of the items listed.

2010 Standard: EC.04.01.01 **2010 EP:** 14
2010 EP Text:
 The organization monitors environmental deficiencies, hazards, and unsafe practices. (See also EC.02.01.01, EP 1; EC.04.01.03, EP 1)

2009 Standard: EC.1.20 **2009 EP:** 1
2009 EP Text: **Revision Code:** Retain
 The {jc}organization{/2} conducts environmental tours to identify environmental deficiencies, hazards, and unsafe practices.

2010 Standard: EC.04.01.01 **2010 EP:** 15
2010 EP Text:
 Every 12 months, the organization evaluates each environment of care management plan, including a review of the plan's objectives, scope, performance, and effectiveness. (See also EC.01.01.01, EPs 3, 4, 6, 8; EC.04.01.03, EP 1)
 Note: By evaluating the management plans, the organization can make sure that they remain relevant and useful guides for managing the environment of care. A review of the plans' scope includes a determination of whether any new services, programs, or sites added in the past year need to be addressed by the plans or if new hazards have been introduced into the environment that now need to be covered. A review of the plans' effectiveness could be accomplished through a review of incident reports as well as evaluation of other known problems that are not found on the incident reports (such as problems identified in the critique of a fire drill). A review of the plans' objectives would include a determination of whether the previous year's objectives were met and if any new objectives should be established to address problems identified in the review of the plans' effectiveness.

2009 Standard: EC.9.10 **2009 EP:** 4
2009 EP Text: **Revision Code:** Consolidate
 Each of the environment of care management plans are evaluated at least annually.

2010 Standard: EC.04.01.01**2010 EP:** 15**2009 Standard:** EC.9.10**2009 EP:** 5**2010 EP Text:**

Every 12 months, the organization evaluates each environment of care management plan, including a review of the plan's objectives, scope, performance, and effectiveness. (See also EC.01.01.01, EPs 3, 4, 6, 8; EC.04.01.03, EP 1)

Note: By evaluating the management plans, the organization can make sure that they remain relevant and useful guides for managing the environment of care. A review of the plans' scope includes a determination of whether any new services, programs, or sites added in the past year need to be addressed by the plans or if new hazards have been introduced into the environment that now need to be covered. A review of the plans' effectiveness could be accomplished through a review of incident reports as well as evaluation of other known problems that are not found on the incident reports (such as problems identified in the critique of a fire drill). A review of the plans' objectives would include a determination of whether the previous year's objectives were met and if any new objectives should be established to address problems identified in the review of the plans' effectiveness.

2009 EP Text:**Revision Code:** Consolidate

The objectives, scope, performance, and effectiveness of each of the environment of care management plans are evaluated at least annually.

Standard EC.04.01.03

2010 Standard Text:

The organization analyzes identified environment of care issues.

2010 Standard: EC.04.01.03

2010 EP: 1

2010 EP Text:

Representatives from clinical, administrative, and support services participate in the analysis of environment of care data. (See also EC.04.01.01, EPs 2-5, and 14-15)

2010 Standard: EC.04.01.03

2010 EP: 1

2010 EP Text:

Representatives from clinical, administrative, and support services participate in the analysis of environment of care data. (See also EC.04.01.01, EPs 2-5, and 14-15)

2010 Standard: EC.04.01.03

2010 EP: 2

2010 EP Text:

The organization uses the results of data analysis to identify opportunities to resolve environmental safety issues. (See also EC.04.01.05, EP 1)

Standard EC.9.20

2009 Standard Text:

The {jc}organization{/2} analyzes identified environment issues and develops recommendations for resolving them.

2009 Standard: EC.9.20

2009 EP: 1

2009 EP Text:

Revision Code: Consolidate

The {jc}organization{/2} establishes an ongoing process for resolving environment of care issues that involves representatives from clinical, administrative, and support services.

2009 Standard: EC.9.20

2009 EP: 3

2009 EP Text:

Revision Code: Consolidate

The {jc}organization{/2} analyzes environment of care issues in a timely manner.

2009 Standard: EC.9.20

2009 EP: 4

2009 EP Text:

Revision Code: Retain

Recommendations are developed and approved as appropriate.

Standard EC.04.01.05

2010 Standard Text:

The organization improves its environment of care.

2010 Standard: EC.04.01.05

2010 EP: 1

2010 EP Text:

The organization takes action on the identified opportunities to resolve environmental safety issues. (See also EC.04.01.03, EP 2)

2010 Standard: EC.04.01.05

2010 EP: 2

2010 EP Text:

The organization evaluates changes to determine if they resolved environmental safety issues.

Standard EC.9.30

2009 Standard Text:

The {jc}organization{/2} improves the environment.

2009 Standard: EC.9.30

2009 EP: 1

2009 EP Text:

Appropriate staff participates in implementing recommendations.

Revision Code: Retain

2009 Standard: EC.9.30

2009 EP: 2

2009 EP Text:

Appropriate staff monitors the effectiveness of the recommendation's implementation.

Revision Code: Retain