May 4, 2006

DQS/DAL: #06-06
RE: Smoke Detection in Nursing Homes

Dear Administrator:

This letter is to remind you of the amendment last year of 42 CFR 483.70(a) requiring minimal smoke detection in all nursing homes that are not protected throughout by a complete automatic sprinkler system. Those nursing homes required to have smoke detectors to comply with 42 CFR 483.70(a)(7) must have fully operating devices in place by May 24, 2006. The regulation requires the addition of battery operated smoke detectors in resident sleeping rooms and public areas of non-sprinklered nursing homes that are not currently equipped with acceptable smoke detectors. Also included in the new regulation is a requirement that nursing homes develop and implement an inspection, testing, and maintenance program for these smoke detectors.

The amended regulations will have considerably less impact on nursing homes in New York than in many other states. In recognition of the importance that early warning of fire plays in safeguarding residents, the Department of Health enacted regulations in 1987 requiring smoke and heat detectors connected to the nursing home’s fire alarm system in all resident sleeping rooms. An exception included in the new federal regulations permits hard-wired AC detectors in lieu of battery operated detectors. Consequently, nursing homes in New York should only have to install smoke detectors in public areas.

A summary of the requirements and Centers for Medicare and Medicaid Services (CMS) guidelines follows.

- Battery operated smoke detectors must be installed by May 24, 2006 in resident sleeping rooms and public areas of all nursing homes, unless:

- The nursing home is protected throughout by a sprinkler system installed in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, or
• Hard-wired AC smoke detectors, installed, tested, and maintained in accordance with NFPA 70, National Electric Code and NFPA 72, National Fire Alarm Code are currently in place or will be in place by May 24, 2006.

• Public areas are those spaces provided primarily for use by residents and their visitors. Dining rooms, lobbies, waiting areas, lounges, activity areas, conference rooms, auditoriums, and all other areas regularly frequented by residents are considered public areas and require smoke detectors. Corridors, staff training and gathering areas, offices, and other administrative spaces are not considered public spaces.

• For purposes of determining compliance with these smoke detector requirements CMS will not permit:

  • waiver of this requirement for smoke detectors,
  • waiver of the requirements of NFPA 13, Standard for the Installation of Sprinkler Systems, or
  • the use of the Fire Safety Evaluation System (FSES).

    • Battery operated smoke detectors must be:

      • installed in accordance with the manufacturer’s recommendations,
      • no more than 30 feet from each other,
      • tested, inspected, and maintained in accordance with the manufacturer’s recommendations, and
      • at a minimum the nursing home must:

        • test and visually inspect each detector each week,
        • replace the batteries at least every six months unless different intervals are specified by the manufacturer,
        • clean each detector on regular basis and whenever necessary as determined by the weekly visual inspection, and
        • maintain and make available to surveyors records of all maintenance, tests, inspections, and battery changes.

• Hardwired smoke detectors must be installed, tested, inspected, and maintained in accordance with NFPA 70, National Electric Code and NFPA 72, National Fire Alarm Code.

• Battery operated, single station smoke detectors cannot be substituted for hardwired smoke detectors otherwise required by State and federal regulations.

• Fire plans must be revised to reflect any addition of smoke detectors. Staff training on the revision and response to a detector alarm, including activation of the facility alarm system must be provided.
Nursing home surveyors will begin evaluating compliance with these new requirements during surveys conducted after installation of the new devices or on May 24, 2006, whichever occurs first.

Thank you for your cooperation in ensuring the safety of your residents. If you have any questions please contact your Regional Program Director or David A. Bruso, of my staff at (518) 408-1282.

Sincerely,

Keith W. Servis
Director
Division of Quality & Surveillance for Nursing Homes and ICFs/MR