



## ***Healthcare Interpretations Task Force*** **AGENDA**

Mandalay Bay Convention Center  
South Convention Center, Level 2 – Room Surf F  
Las Vegas, NV

June 15, 2016  
1:00 P.M. to 6:00 P.M.

- Call to Order 1:00 P.M.
- Introduction of Members and Guests. **See Page 02.**
- Review of Questions.
  - Remote Stop Buttons for Generators. **See Page 04.**
  - Initiation of Fire Alarm by Manual Means. **See Page 06.**
  - Temperature Limit: Portable Space Heaters. **See Page 07.**
- Old Business.
  - Physician Nap Rooms: NFPA 101 Task Group Report. (Chair, Chad Beebe, Ken Bush, Ann Guglielmo and Randall Snelling).
  - Bylaw Ballot Results/Review of Bylaws.
    - Review of Kenneth Bush Comments. **See Page 08.**
    - Review of Robert Solomon's Comments. **See Page 09.**
- New Business.
- Date / Location for Next Meeting.
- Adjournment by 6:00 PM.

# Address List No Phone

06/02/2016

## Healthcare Interpretations Task Force

HCI-TFC

<b>James Aberle</b> <b>Principal</b> Indian Health Service Division of Engineering Services-Dallas 1301 Young Street, Room 1071 Dallas, TX 75202-5433 <b>Alternate: Joseph Bermes</b>	09/03/2015 <b>HCI-TFC</b>	<b>Chad E. Beebe</b> <b>Principal</b> ASHE - AHA PO Box 5756 Lacey, WA 98509-5756 <b>Alternate: David A. Dagenais</b>	6/12/2012 <b>HCI-TFC</b>
<b>Kenneth E. Bush</b> <b>Principal</b> Maryland State Fire Marshals Office 301 Bay Street, Lower Level Easton, MD 21601-2721 <b>International Fire Marshals Association</b> <b>Alternate: Kim L. Osborn</b>	10/4/2009 <b>HCI-TFC</b>	<b>Philip J. Hoge</b> <b>Principal</b> US Army Corps of Engineers Humphreys Engineer Center Kingman Building, Suite 3MX 7701 Telegraph Road Alexandria, VA 22315-3813 <b>Alternate: G. Brian Prediger</b>	10/4/2009 <b>HCI-TFC</b>
<b>Bradley C. Keyes</b> <b>Principal</b> Healthcare Facilities Accreditation Program 142 East Ontario Street Chicago, IL 60611 <b>Healthcare Facilities Accreditation Program</b> <b>Alternate: Joseph L. Cappiello</b>	02/13/2014 <b>HCI-TFC</b>	<b>David P. Klein</b> <b>Principal</b> US Department of Veterans Affairs 810 Vermont Avenue, NW, Suite 800 Mail Code: (10NA8) Washington, DC 20420 <b>Alternate: Peter A. Larrimer</b>	10/4/2009 <b>HCI-TFC</b>
<b>James Merrill II</b> <b>Principal</b> US Department of Health & Human Services Centers for Medicare & Medicaid Services (CMS) 7500 Security Boulevard, M/S S2-12-25 Baltimore, MD 21244-1849 <b>Alternate: Martin Casey</b>	10/4/2009 <b>HCI-TFC</b>	<b>George Mills</b> <b>Principal</b> The Joint Commission Department of Engineering One Renaissance Boulevard Oakbrook Terrace, IL 60181 <b>Alternate: Anne M. Guglielmo</b>	10/4/2009 <b>HCI-TFC</b>
<b>Eric R. Rosenbaum</b> <b>Principal</b> JENSEN HUGHES 3610 Commerce Drive, Suite 817 Baltimore, MD 21227-1652 <b>American Health Care Association</b> <b>Alternate: Phil Thomas</b>	02/28/2013 <b>HCI-TFC</b>	<b>Randall Snelling</b> <b>Principal</b> Det Norske Veritas Healthcare Chief Physical Environment Officer 400 Techne Center Drive, Suite 100 Milford, OH 45150-3706	02/13/2014 <b>HCI-TFC</b>
<b>Robert E. Solomon</b> <b>Principal</b> National Fire Protection Association 1 Batterymarch Park Quincy, MA 02169-7471 <b>Alternate: Gregory E. Harrington</b>	10/4/2009 <b>HCI-TFC</b>	<b>Joseph Bermes</b> <b>Alternate</b> Indian Health Service Division of Engineering Services 701 5th Avenue Suite 1600, MS RX-24 Seattle, WA 98104 <b>Principal: James Aberle</b>	10/4/2009 <b>HCI-TFC</b>

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06/02/2016

## Healthcare Interpretations Task Force

HCI-TFC

<b>Joseph L. Cappiello</b>		<b>Martin Casey</b>	06/11/2015
<b>Alternate</b> Healthcare Facilities Accreditation Program 142 East Ontario Street Chicago, IL 60611 <b>Healthcare Facilities Accreditation Program</b> <b>Principal: Bradley C. Keyes</b>	<b>HCI-TFC</b>	<b>Alternate</b> US Department of Health & Human Services Centers for Medicare & Medicaid Services (CMS) 7500 Security Boulevard, M/S S2-12-25 Baltimore, MD 21244-1849 <b>Principal: James Merrill II</b>	<b>HCI-TFC</b>
<b>David A. Dagenais</b>	10/4/2009	<b>Anne M. Guglielmo</b>	9/2/2010
<b>Alternate</b> Wentworth-Douglass Hospital 789 Central Avenue Dover, NH 03820 <b>American Society for Healthcare Engineering</b> <b>Principal: Chad E. Beebe</b>	<b>HCI-TFC</b>	<b>Alternate</b> The Joint Commission Department of Engineering One Renaissance Boulevard Oakbrook Terrace, IL 60181 <b>Principal: George Mills</b>	<b>HCI-TFC</b>
<b>Gregory E. Harrington</b>	10/4/2009	<b>Peter A. Larrimer</b>	10/4/2009
<b>Alternate</b> National Fire Protection Association 1 Batterymarch Park Quincy, MA 02169-7471 <b>Principal: Robert E. Solomon</b>	<b>HCI-TFC</b>	<b>Alternate</b> US Department of Veterans Affairs 1805 Constitution Blvd Valencia, PA 16059 <b>Principal: David P. Klein</b>	<b>HCI-TFC</b>
<b>Kim L. Osborn</b>	10/4/2009	<b>G. Brian Prediger</b>	5/27/2010
<b>Alternate</b> Michigan Dept. of Labor & Economic Growth State Fire Marshals Office/Bureau of Fire Services PO Box 30700 Lansing, MI 48909 <b>International Fire Marshals Association</b> <b>Principal: Kenneth E. Bush</b>	<b>HCI-TFC</b>	<b>Alternate</b> US Army Medical Command Headquarters Director, Engineering 7700 Arlington Blvd., Suite 2SW127 Falls Church, VA 22042-2929 <b>Principal: Philip J. Hoge</b>	<b>HCI-TFC</b>
<b>Phil Thomas</b>	02/27/2014		
<b>Alternate</b> Phil Thomas & Associates PLC 10008 Carmen Vincent Court Fort Smith, AR 72908-9199 <b>American Health Care Association</b> <b>Principal: Eric R. Rosenbaum</b>	<b>HCI-TFC</b>		

## HITF INTERPRETATION REQUEST JUNE 2016

**DOCUMENT TO BE INTERPRETED:**

NFPA 101 and NFPA 110

**EDITION:**

2012 and 2010

### **BACKGROUND INFORMATION (optional):**

NFPA 110, Section 5.6.5.6 requires all installations to have a remote manual stop. There are no requirements for the location of the manual stop control for exterior generators within the body of the code.

**5.6.5.6\*** All installations shall have a remote manual stop station of a type to prevent inadvertent or unintentional operation located outside the room housing the prime mover, where so installed, or elsewhere on the premises where the prime mover is located outside the building.

**5.6.5.6.1** The remote manual stop station shall be labeled.

The Annex identifies that it should be "external to the weatherproof enclosure". The NFPA 110 commentary for this section is included for reference.

"The function of this device is to shut down the prime mover (engine) of the EPS without the need to enter the room. The standard does not specify the exact location for the emergency stop control for an outside generator installation, but it should be located external to the weatherproof enclosure and should be clearly identified for its purpose. Ultimately, the location of the emergency shutdown switch is a design consideration, which often takes into account the concerns of emergency responders, and which is subject to the approval of the authority having jurisdiction (AHJ)."

If a generator had trouble you would want the ability to shut it down without having to remove a panel.

Question: For an outside generator location, would a remote stop button on the exterior of the enclosure comply with the requirements of NFPA 110? A picture of the intent for location is provided. The picture is not intended to indicate full compliance with 110.

If not, what constitutes compliance to the noted section?



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Generator



**HITF INTERPRETATION REQUEST  
JUNE 2016**

**DOCUMENT TO BE INTERPRETED:**

NFPA 101

**EDITION:**

2012

**BACKGROUND INFORMATION (optional):**

Clarification is requested regarding Sections 18/19.3.4.2.1, 18/19.3.4.2.2 and the application of 9.6.2.6.

Section 18/9.3.4.2.1 reference Section 9.6.2 for the initiation of the fire alarm system by manual means. 18/19.3.4.2.2 allows the use of a manual fire alarm box at the nurse's station in lieu of manual fire alarm boxes at the exits of the patient sleeping areas. Section 9.6.2.6 allows the omission of manual fire alarm boxes at the exits for fire alarms systems using automatic fire detection or water flow devices. One manual fire alarm box is required by the AHJ.

Question: Can healthcare facilities with water flow devices or automatic fire detection comply with 9.6.2.6 and omit all manual fire alarm boxes except the one required to be located by AHJ?

**HITF INTERPRETATION REQUEST  
JUNE 2016**

**DOCUMENT TO BE INTERPRETED:**

NFPA 101 18/19.7.8

**EDITION:**

2012

**BACKGROUND INFORMATION (optional):**

A facility in the Midwest was cited earlier this year for being unable to produce documentation concerning the temperature limit of their portable heating appliances.

The maximum temperature limit of the heating element (212°F) apparently is not measured as part of the appliance/product test thus the manuals and literature do not indicate what the temperature limit is. UL 1278, *Moveable and Wall or Ceiling-Hung Electric Room Heaters* imposes temperature limits on certain current carrying parts depending on what materials are being used. For example plated ferrous material is required when the operating temperature will exceed 212°F. In other cases, the standard imposes temperature rise limits on certain connections and terminals.

The HITF cannot make a judgement on this subject, but it is being put forth to determine.

- a. How widespread is the issue in the hospital/nursing home world?
- b. Does NFPA 101 need to be changed to establish a more realistic standard for the room heaters?

**Kenneth E Bush -State Police-** <kenneth.bush@maryland.gov>  
To: "MacKay, Linda" <lmackay@nfpa.org>

Mon, Feb 1, 2016 at 4:49 PM

Linda,

Following my review of the comments regarding the proposed changes to the Bylaws of the HITF, I would submit the following for consideration:

I do not believe that the Charter or Bylaws of the HITF specifically state that the decisions of this task force serve as NFPA Code requirements. Section II of the HITF Charter uses the words "interpretations", "policies", "procedures", and "consensus of opinion", but does not specify requirements or code references. If there is some concern as to the interpretation of HITF actions, then such wording could be added to Section II of the Charter. I do not believe that such action is needed at this time, or that any change should be considered to Section I of the Charter.

Mr. Merrill's second comment appears to be an operational issue, and not one of a problem with the Bylaws. I can see no reason to modify existing language in the Charter or Bylaws in order to address this situation.

I do agree that the new Paragraph 9.1 does seem to infer that the AHJs of organizations who are members of the HITF will be required to modify existing interpretations to comply with the actions of the HITF. This action has the potential to conflict with not only the mandated operations of CMS, but could also conflict with the operational procedures of many AHJs who are legally responsible for implementing and enforcing laws, regulations, and ordinances promulgated by legislative and governmental authorities which may not correlate with the actions of the HITF.

Although I am hesitant to delay the remaining actions represented by the proposed changes to the HITF Bylaws, specifically the expansion of membership, I feel that further discussion is warranted in order to modify the wording of the new Paragraph A.9.1 in order to clarify the intent of the implementation period so as not to conflict with existing application, interpretation, and modifications to existing Code requirements which are legally binding by existing laws, regulations or established procedures. This discussion should be made a part of the Agenda for the July Meeting of the HITF, if not scheduled for discussion at an earlier date.

Based upon my concerns with the new Paragraph A.9.1, please change my vote to "Negative" on the approval of the proposed changes to the HITF Bylaws.

Kenneth E. Bush  
Fire Protection Engineer  
Maryland State Fire Marshal's Office  
IFMA HITF Representative

[Quoted text hidden]



## **MackKay, Linda**

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**From:** Solomon, Robert  
**Sent:** Tuesday, February 16, 2016 7:06 PM  
**To:** MackKay, Linda  
**Subject:** FW: For your Review - Changed/Amended HITF Bylaws Ballot Comment

Please change my vote to: **REJECT** It is clear that the bylaws as proposed with the mandate in Section A.9.1 to have a 60 day implementation period is not realistic or practical in any way when it comes to governing authorities (AHJs) . The comment from CMS on that one issue is persuasive. Local, state and federal agencies/ governments all have a process by which to implement changes, polices, laws or regulations. I have to imagine the vast majority, if not all of those processes take way more than 60 days. The HITF, but more importantly NFPA, cannot support the bylaws with that section included. If the members do not agree to remove or at least amend Section A.9.1, I am not sure that NFPA can continue with the Support Organization function.

Robert Solomon, PE  
NFPA

### **HEALTHCARE INTERPRETATIONS TASK FORCE (HITF)**

Attached please find preliminary results on the ballot for approval of the changed/amended HITF Bylaws, and a comment submitted by Mr. James Merrill.

Please review the comment submitted by Mr. James Merrill.

Should you wish to update or change your vote based on the comment, please do so by **Friday, February 19, 2016.**

**Linda MacKay**  
Administrative Assistant  
NFPA  
1 Batterymarch Park  
Quincy, MA 02169-7471  
[lmackay@nfpa.org](mailto:lmackay@nfpa.org)  
+1 617 984-7409

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