FSASC developed this document to describe the items that we have been discussing and the compliance that AHCA is looking for during an inspection. Included is information on how to appeal a citation since individual inspections may at times be at odds with official AHCA policy.

ACTION ITEMS:

A. Life Safety Citations – Appeal Process
B. Core Life Safety Code Reference
C. Two Year Inspection Cycle
D. Items Frequently Cited During Inspections
   1. Circuit Breaker Testing
   2. Fire and Smoke Damper Testing
   3. Biomedical Equipment Electrical Safety Testing
   4. Line Isolation Monitor Testing and GFCI Testing
   5. Wet Location Risk Assessments (see attachments)
   6. Generator Fuel Testing
   7. Fire Extinguisher Locations – Signage Above Extinguishers
   8. Emergency Management Plans
   9. Tamper Switch Installation – Backflow Devices
  10. Fire Wall Penetrations

A. LIFE SAFETY CITATIONS - APPEAL PROCESS
   1. ASCs may appeal life safety citations by first addressing the issue with the AHCA field office.
      • If a satisfactory resolution is not obtained, an appeal can be made to the AHCA headquarters office in Tallahassee.
   2. Surveyors are required by AHCA to document the code chain or reference they are using in support of the deficiency they are citing.
• Citing a general code book such as “NFPA 99” is not sufficient to tie the deficiency to the code section. If the code chain or reference is not present on your survey, the citation may be appealed.

• The Agency is not permitted to tag deficiencies based upon “interpretations” from highlighted areas of handbooks or annexes to the code / standard.

B. CORE LIFE SAFETY CODE REFERENCE

1. AHCA is working to release a list of the codes applicable to ASCs and life safety.
2. FSASC will do further work to develop educational material based on the list.

C. TWO YEAR INSPECTION CYCLE

1. All accredited ASCs are being evaluated to be considered for a two-year inspection cycle unless they have federal deemed status.
2. Deemed status inspections will occur as scheduled by the accrediting body.

D. ITEMS FREQUENTLY CITED DURING INSPECTIONS

1. CIRCUIT BREAKER TESTING

   a. The emergency power circuit breakers must be exercised (i.e. “flipped”) once each year.

   Code References:

   NFPA 110 2010 Edition: 8.4.7* EPSS circuit breakers for Level 1 system usage, including main and feeder breakers between the EPS and the transfer switch load terminals, shall be exercised annually with the EPS in the “off” position.

   NFPA 110 2010 Edition: 8.4.7.1 Circuit breakers rated in excess of 600 volts for Level 1 system usage shall be exercised every 6 months and shall be tested under simulated overload conditions every 2 years.

   b. The main circuit breaker and each of its feeder breakers must be inspected annually and should be exercised only according to the manufacturer’s specifications.

   • If an ASC does not have the manufacturer’s specifications and they cannot be obtained by contacting the manufacturer, the ASC must
establish a written protocol for the inspection (and possible exercise) of the breakers.

- There are no requirements for sub-breakers to be exercised or inspected.

**Code Reference:**

*NFPA 99 2012 Edition: 3-4 Essential Electrical System Requirements—Type 1.*

*NFPA 99 2012 Edition: 3-4.4.1.2 Maintenance and Testing of Circuitry.*

*(a)* Circuit Breakers. Main and feeder circuit breakers shall be inspected annually and a program for periodically exercising the components shall be established according to manufacturer’s recommendations.

>A-3-4.4.1.2 (a) Main and feeder circuit breakers should be tested under simulated overload trip conditions to ensure reliability (see C-3.2).

**Note:** A main breaker is under a large electrical load. If it is exercised, protective gear must be worn that is suitable to the amperage of the electrical system.

2. **FIRE AND SMOKE DAMPER TESTING**

   a. An ASC must document fire and smoke damper testing every four years.

   b. Fire and smoke damper access ports must be kept free of obstruction so that testing may be performed.

3. **BIOMEDICAL EQUIPMENT ELECTRICAL SAFETY TESTING (EST)**

   a. Biomedical equipment testing must be performed every 6 months at any facility that does not have isolated power.

   b. Facilities with isolated power may set their own protocols for periodic biomedical equipment checks.

   c. All loaner equipment needs to be tested each time before use in an ASC.

   d. Testing must be performed semi-annually on ALL EQUIPMENT capable if it fails of establishing a conductive pathway to the patient’s heart.

4. **LINE ISOLATION POWER (LIM) TESTING/GFCI TESTING - OPERATING ROOMS.**

   When an ASC has Line Isolation Monitors installed in the OR, it must document that the system has been functionally tested annually. This requires specialized calibration
equipment if the LIM devices have automated self-test and self-calibration capabilities. LIM self tests must be conducted monthly.

**Code References:**

*NFPA 99 2012 edition:* 6.3.4.1.4 The LIM circuit shall be tested at intervals of not more than 1 month by actuating the LIM test switch (see 6.3.2.6.3.6).

i. For a LIM circuit with automated self-test and self-calibration capabilities, this test shall be performed at intervals of not more than 12 months. Actuation of the test switch shall activate both visual and audible alarm indicators.

ii. 6.3.4.1.5 After any repair or renovation to an electrical distribution system, the LIM circuit shall be tested in accordance with 6.3.3.3.2.

5. **WET LOCATION RISK ASSESSMENTS**

If isolated power of GFCI protection is not installed, an ASC must initially and annually perform or update a risk assessment on each operating room to document that the correct electrical protection is present for the procedures being performed.

a. A surveyor may ask for this document but may not tell an ASC what type of protection it needs to provide.

b. A more complete explanation of OR risk assessment and protection options is attached to the originating email and available on [FSASC.org](http://FSASC.org).

6. **GENERATOR FUEL TESTING**

a. Fuel testing of some type must be completed annually.

b. The NFPA 110 code does not list any specific tests that must be performed on generator fuel.

c. The standard simply states the applicable ASTM tests shall be performed.

- At minimum it is recommended that clarity, microbial contamination and water contamination tests be performed.

d. An ASC must perform tests that are required by the manufacturer of the generator.

- Additional tests are at the discretion of the facility.
• If used, the Governing Board should take into account that Bio Diesel fuel is
difficult to store over one year without bio growth taking place in the fuel
that could clog the filters and stop the engine from operating.

e. There is NO REQUIREMENT that a certified laboratory perform these tests.

7. **FIRE extinguisher IDENTIFICATION — SIGNAGE ABOVE extinguishERS**
   a. All fire extinguisher locations must be identifiable without obstructions.
   b. If a counter or equipment obscures the visual identification of a fire extinguisher
      location an ASC must use an alternate method to identify the location such as a
      sign, light or arrow that can be seen above the obstruction.

   **Code References:**


   6.1.3.3.1 *Fire extinguishers shall not be obstructed or obscured from view.*

   6.1.3.3.2 *In large rooms and in certain locations where visual obstructions cannot be
   completely avoided, means shall be provided to indicate the extinguisher location.*

   6.1.3.3.2 *Acceptable means of identifying the fire extinguisher locations include arrows, lights,
signs, or coding of the wall or column.*

8. **EMERGENCY MANAGEMENT PLANS**
   a. ASCs must document that they have updated their emergency management plan
      with their county Emergency Operations Center (EOC) annually.
   b. The facility must perform at least two disaster drills annually; one interior and
      one exterior drill and may substitute 50% of required drills by actual events (in
      this case one drill).

9. **TAMPER SWITCH INSTALLATION — BACKFLOW DEVICES FSS**
Many existing ASCs do not require tamper switches on their backflow devices.
Supervised sprinkler system electronic tamper switches are required under the
following circumstances:

   a. *Existing* ambulatory health care occupancies require supervised automatic
      sprinkler systems:
• If the ASC is located above the first floor in a building of NFPA 220 construction type II(000), III(000) or V(000). (See NFPA 101 21.1.6.1 and Table 21.1.6.1); or
• If the ASC uses NFPA 101 21.3.7.2(2) as a means of avoiding subdivision of the facility into smoke compartments.

b. **Newer** ambulatory care facilities require automatic sprinkler systems under either of the following conditions:
   • Facility will have four or more care recipients incapable of self-preservation (See Florida Building Code 903.2.2.1); or
   • Facility is located on a floor that is not the level of exit discharge (See Florida Building Code 903.2.2.2).

**Note:** If supervision is required, reference NFPA 101 9.7.2 and NFPA 72 for installation and monitoring requirements. Florida Building Code 903.4 also requires all valves controlling the water supply to the system to be **electrically supervised** by a listed fire alarm control unit. Florida Building Code 903.4.1 provides an exception for backflow preventer valves, but this exception does not apply to occupancies that are required to be equipped with a fire alarm system.

The ASC is **not required** to provide redundant supervision or monitoring if the ASC is part of a “developed” compound or tenant of a main building and another system installed is supervising the back flow devices on the fire sprinkler system.

**10. FIRE WALL PENETRATIONS**

a. Fire walls must be maintained with UL tested assemblies (patches or penetration details). These “details” should match
   • details provided by the architect of record as depicted in the original approved plans for the facility; or
   • as detailed by a licensed Architect; or
   • as provided and accepted by an approved provider of details that meet acceptable UL listings for such patches or penetrations for the applicable rating of the construction fire assembly.
b. Most general suppliers of non-construction services do not know what is or isn’t UL approved.

- AHCA is not requiring ASC to go back and fix old penetrations simply because these are “old” and not UL approved, so long as they have not been degraded and are clearly identifiable as “existing”.
- Any new penetration should be documented and the ASC should consult with an architect or a company with the appropriate expertise in this area.