Attend for One, Two, or Three Days
This Year's Fall Conference Won't Mean Losing a Week of Work!

Fall Conference October 2-4 in Sturbridge, MA will introduce some member-inspired innovations -- for example, the option of staying one, two, or three days -- that will make important parts of the Conference accessible even to the busiest NEHES members.

Early registration begins Sunday, October 1. The annual golf tournament and an educational session will be held Monday. Members and vendors will have hors d'oeuvres in a vendor-sponsored hospitality suite followed by dinner at area restaurants on their own.

Tuesday brings more educational sessions, the vendor show, the NEHES annual meeting, and the awards banquet. On Wednesday, members will be treated to educational sessions, a panel discussion, and a cocktail hour with buffet, sponsored by vendors. Afterwards, attendees can spend the night in Sturbridge or return home and get back to their offices on Thursday morning.

So far, committed speakers back by popular demand -- with completely different programs and presentations than they gave last year and at this year's Spring Seminar -- include Dan Chisholm, President, Motor and Generator Institute and Editor of Healthcare Circuit News; Dean Samet, Associate Director, JCAHO Department of Standards, and Robert Solomon, Chief Engineer, NFPA, Building Fire Protection and Life Safety Department. Dean Samet and Robert Solomon will participate in a panel discussion, and Robert will also lead an educational session.

Members can register to attend the Conference for one, two, or three days.

Joe Mona, Director of Facility Systems at Lawrence (MA) General Hospital, is the Conference chair, concentrating on obtaining speakers. Don Garrison, Chief Engineer, Department of Veterans Affairs (Togus, ME), is helping with the vendor show.

Other key Conference helpers are: Kevin Keating, Director of General Services, Shriners Hospital for Children (Boston), guest program for spouses. The program will include several surprises this year, Joe said.

Tom Whittaker and Bob Montgomery, golf program. Tom is a Project Manager at Southwestern Vermont Medical Center (Bennington). Bob is the Director of Engineering at Lowell General Hospital (Lowell, MA).

Dawn LeBaron, Director of Facilities Services at Newton-Wellesley Hospital (Newton, MA), will assist with the safety and security components of the educational sessions.

Members are invited to call Joe with ideas or suggestions for any part of Fall Conference, including the spouse and golf programs. "This is also the time for everyone to solicit vendors. No vendor is too small. We also need assistants to help plan and run the show," Joe said.

He can be reached at (978) 683-4000, ext. 2570.

Mark Your Calendar!
March 28, 2000: Spring Seminar Leominster, MA
Oct. 2-4, 2000: Fall Conference Sturbridge, MA

NEHES Scholarship Goes to UVM Student

By J. Toby Clark
Director, Instrumentation & Technical Services
Adjunct Faculty, Computer & Electrical Engineering
University of Vermont Burlington, VT

The NEHES scholarship award is made each year by the state sponsoring the Fall Conference. This year it was Vermont.

The criteria includes:
- Junior standing in Mechanical, Electrical, or Biomedical Engineering or Engineering Management;
- Strong academic credentials, professional organization involvement, and financial need;
- Prior work experience within a healthcare setting;
- Submission of an application letter indicating professional goals and senior project interest.

The Vermont Healthcare Engineers' Society determined that the honored student would be selected from the University of Vermont. The selection committee included Richard Absher, Chairman of Electrical Engineering; Tony Keller, Chairman of Biomedical Engineering; and myself, Toby Clark. A

continued on page 2
New President Takes Over Top Spot After a Term as ASHE President

(Editor's note: New NEHES President Bob Loranger has just finished a term as ASHE President and as NEHES President-elect. He is the Director of Facilities at New England Medical Center (Boston), a member of the AIA Steering Committee, a member and past president of the Boston Engineers' Club, and a longtime NEHES member.)

Goals for 2000

As NEHES president, one of my goals this year is to emphasize the membership benefits to the members -- the perceived benefits as well as the list of what we say are benefits. We are trying to enhance our two main activities, Spring Seminar and Fall Conference, to better serve members and attract new members.

Spring Seminar

To get this benefit out to a greater percentage of our paying members, we moved the seminar out of Boston, made it a full-day program, and, with some vendor sponsorship, are providing more for members for a lower cost. We have three unique key speakers on March 28 as well as presentations on a new facilities' survey for New England members and a brief presentation on the ASHE certification program for facilities managers. This year's Spring Seminar is a real must, and we even lowered the price from $95 to $75 including lunch.

Fall Conference

For the Fall Conference, we've condensed the components of the program without reducing educational content or vendor interaction. Members need to spend only two or three days away from work, making it easier to get support to attend from their institutions and doing away with the need for an additional night's stay. The program content has not been reduced and in fact some of the evening events have been enhanced. There will be a full vendor show as well. Be sure to mark your calendars for October 2-4 -- this will be the best conference yet in fewer days.

Year as ASHE President

Last year's experience as ASHE president was a fairly intense endeavor. It was really educational from the chapter perspective. I saw what chapters across the country did, and I could bring back some of those ideas to New England. I saw on a national level some of the difficulties ASHE has encountered with membership and the balanced budget act. NEHES is not out of that realm -- we must tune our programs to better suit the times.

Need for NEHES Volunteers

Volunteers are becoming less plentiful and I would just highly encourage anyone who's interested to contact me. Some members don't know how to get involved, but we'd love to have you participate. With careers more intense and pressures growing, participation only reaps more benefit to you. It really returns rewards that would help your employment. I also urge members to try to respond to our fax-back survey that was sent with the last two newsletters. We really read them and guide the Society's actions based on your input.

The Healthcare Industry

I think that the "merger mania" has somewhat peaked as far as institutions finding partners is concerned, but it still hasn't begun to deal with getting benefits from the mergers. Financial efficiencies need to come now -- they don't happen as quickly as papers are signed.

Finding New Members

I highly encourage members to attend our two primary events and to look into our future teleconferences, which makes programs even more local to you. I highly encourage you to talk to your colleagues because all of our programs welcome walk-ins. We provide cost incentives for everyone to attend and newcomers can walk away with a membership as part of their registration fee. You'll be doing your colleagues a favor for life by telling them about NEHES.

NEHES Scholarship Goes to UVM Student

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solicitation was made of engineering students via notices and announcements. Applications were received and evaluated. Via a written vote, Leah Ruff was chosen for the award.

Leah is a Mechanical Engineering student in the Biomedical Option program at UVM. She recently completed her junior year. She has excellent academic credentials and has been involved in the Society of Women Engineers and the American Society of Mechanical Engineers.

She has worked her way through college and taken out loans to complete her studies.

Her healthcare experience includes providing emergency care on the Lyndon State Rescue Squad, dietary assistance at the St. Johnsbury Health and Rehabilitation Center, and work at the Technical Services Program at UVM, where she is a biomedical student technician and Y2K project worker.

Leah also has been a Vermont Special Olympics volunteer since 1997. Her senior project is the development of a device to aid in patient mobility during supplemental oxygen care.

Her professional goal is to work in the area of prosthetics and robotics.
Member in the Spotlight

Member in the Spotlight is Also Vermont's Engineer of the Year

Like many Vermonters, Norm Welch spent the early years of his career in another state but he didn’t go far – just across the line to neighboring New Hampshire. There, his career steadily progressed with jobs as a biomedical technician, biomedical technical maintenance supervisor, plant engineer, and Director of Facilities.

When family concerns brought him back home in 1985, he joined Springfield Hospital as its Director of Engineering. The independent Vermont hospital is small and unique. Although it has some ties to nearby Dartmouth-Hitchcock Medical Center (such as internet access and an oncology clinic), it is not formally affiliated with or part of another facility.

Norm’s first task was to supervise his new employer’s first building project. “We did a pretty extensive renovation for this size hospital, it was 67 beds then,” he said. “The $7 million project wasn’t large compared to other hospitals, but we moved the road, added new parking, added a new OR, and some new areas. There wasn’t a part of the building we didn’t touch.”

The hospital has two locations, with acute care beds in Springfield and psychiatric care beds in Bellows Falls, about 20 miles away. Extremely critical patients go to Dartmouth-Hitchcock. Norm’s job duties include safety, overseeing building maintenance and construction, and administering construction contracts. His next project will likely be to replace the hospital’s oldest building, a 1940’s wood structure, and connecting this new building with the hospital and a professional office building.

While in New Hampshire, he became a member of NEHES and a member and president of the New Hampshire Society of Healthcare Engineers. “I have always learned a lot from the members,” he said. “If you have a particular problem, someone in the group has solved that problem in some way, shape or form already.”

He is a former president of the Vermont Healthcare Engineers’ Society and was also the NEHES liaison to NFPA for six years. “That was a lot of fun. It was interesting to see how people are thinking outside of the box about fire safety and the effects on the healthcare business, and to see the politics of the smoke detector industry.”

NEHES and VHES “help you keep up with what’s happening in the field,” he said. “The educational programs provide inspirational speakers who rejuvenate you, and the educational speakers provide valid information at every meeting. I’ve made a lot of good friends.”

He and other VHES members recently organized a very successful Fall Conference. Norm was in charge of vendors, and gives much of the credit for the vendor program to helpers Theron Manning (Director of Plant Operations, Gifford Medical Center, Randolph) and Tom Whittaker (Project Manager, Southwestern Vermont Medical Center, Bennington), as well as to VHES members who work at Fletcher Allen Health Care (Burlington).

“A large nucleus of vendors came because of the excellent efforts of the Burlington area engineers at Fletcher Allen, and we’re very grateful to them,” Norm said. “Tom put a great deal of energy into getting vendors and Theron was exceptional in his ability to get vendors to come up with additional funds. We had a good mix of vendors. I did not do this by myself.”

VHES President Gordon Lewia said Norm’s peers elected him VHES Engineer of the Year and their Member in the Spotlight because of his contributions to Fall Conference and at other times. “He is very responsible, rock solid,” Gordon said. “He did a tremendous job on Fall Conference. The Vermont group was able to turn over an excellent profit to NEHES.”

Norm, a Springfield resident, likes fly fishing and building canoes and kayaks.

A Call for NEHES Volunteers from a Long-Time Helper

Volunteering for NEHES Brings Rejuvenation and Job Rewards

By Kurt Peterson
Newsletter Editor, 1998-1999

You know, it’s been quite a few years since I joined NEHES. Many friendships, acquaintances, and contacts have been developed. A huge amount of educational benefit has been imparted to myself and anyone else who wanted to attend any of the many programs offered each year. The networking between hospital engineers is so important, just think of the new products, codes, regulations, technology, ideas, and methodologies that can be learned and shared.

In addition to this newsletter, the list of benefits of belonging to and participating in NEHES goes on and on. But as you all know, these benefits don’t just happen. It takes energy, directed into teamwork, overseen by a dedicated Board of Directors. The policies and procedures are all in place to make it all work. But as in any society or business, those guidelines need to be reviewed and updated annually to keep them current.

There are many duties in the guidelines of this great society. Completion of these duties can be best done by many hands sharing the load rather than just a few. My hope is that existing or new members will get involved and keep NEHES a strong and growing society. Contact one of the members of the board and ask what opportunities there are for involvement.

You are definitely in a time of the most difficult working conditions that the healthcare field has ever experienced. You probably go home tired, sometimes feeling like no matter how hard you work, you aren’t seeing a lot of positive results.

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Chapter in the Spotlight

Driving by Potato Fields, Lobsters, Lighthouses, and LL Bean

Maine Members Go the Extra Miles to Meetings for a Reason

Just how far will facilities engineers travel to monthly meetings? In Maine, which stretches 400 miles north to south and 400 miles east to west, the trip can take six hours. Steady growth in meeting attendance is testimony that the travel and affiliation are well worthwhile.

The Maine Healthcare Engineers' Society has a very active membership. Quality educational training programs, facility tours, and networking draw engineers to chapter meetings, according to Ron Vachon, outgoing MHES president and Director of Facilities Management at St. Andrews Hospital (Boothbay Harbor).

"There are many seminars that promise to enhance our skills, but nothing beats the continual need for providing information as much as a membership in MHES and the affiliation with NEHES," said Ron, who has just ended his two-year presidential term. "We meet to learn and we strive to offer an experience where engineers can take back to their facility something they can use. Meetings are always well attended, and we try to move them around to different facilities to cover the whole state. One of our members, Joey Bard, travels from our state's northernmost hospital, Northern Maine Medical Center in Fort Kent, over six hours to attend meetings."

The success of the meetings, Ron believes, is due to the high-quality product and vendor presentations for new equipment and services. Recent programs included an all-day JCAHO seminar by Mike Garvin of the University of Iowa, a two-day Haz-Mat Seminar by the Maine Emergency Management Association, a Y2K preparedness seminar with the Maine governor's disaster planning agencies, programs on electrical deregulation, alarms and sprinklers, mercury spill prevention and cleanup, as well as many other topics. Meetings always feature a tour of the host healthcare facility. Several Maine engineers are members of ASHE, ASHRAE, and other national boards.

New President Milt Dudley, Director of Engineering and Plant Operations at Maine General Medical Center (Augusta), looks forward to continuing the chapter's networking and education efforts. "It's a good bunch of engineers," he said. "I enjoy working with them all." Milt has responsibility for many healthcare campuses and has served the chapter as vice president for two years.

Ron will continue serving the chapter, this time as its representative to the NEHES board, and, together with all the MHES members, help plan the upcoming NEHES 2001 Fall Conference to be held in Maine.

"It's been an honor and privilege to work closely with Milt, Jeff Thomas, Don Garrison, Don Thompson, Mike Bradstreet, Gary Gerow, Bob Lord, and others to serve this vital organization," Ron said. "I extend a special thanks to all who attended and contributed to meetings and I now look forward to working with the board on upcoming NEHES programs."

Ron is also a new appointee to the ASHE Membership/Leadership Committee, formed to foster leadership, provide effective advocacy on behalf of healthcare engineers, and to improve communication through affiliation. His first appointment to an AHA committee was as a member of ASHE's Certification Steering Committee which helped develop and create a Healthcare Facility Manager's certification program.

Dana Peterson will be Maine's new vice president. Gary Gerow, Director of Facilities at St. Joseph's Hospital (Bangor), will continue as treasurer. Mike Bradstreet, Director of Facilities at The Acadia Hospital (Bangor), will continue as head of the scholarship program. Jeff Mylan, Director of Facilities at Eastern Maine Medical Center (Bangor), is the alternate NEHES representative.

Contributed by Ron Vachon

Get Involved in NEHES — You Won't Regret It!

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Gratification in our endeavors of labor is one of the most important things for any of us. We all get some of this within the frameworks of our institutions, but volunteering in extra activities sometimes gives us the most satisfaction and can make the tribulations of the business tolerable.

The most satisfying part of my tenure in health care happened during my time on the board of NEHES. Coincidence? I don't think so. Energy breeds more energy. It seemed the more energy I put into NEHES, the more I had for my institution and my work. The more I put into my work, the more successful I was.

Working with committees of my peers for the betterment of NEHES and our craft and going through the chairs of the board were very gratifying. But nothing held a candle to holding the position of president of a society that has such a great history and has such wonderful members.

NEHES is such a special society. Sure, there is diversity within the membership, but I have never seen another society that has such cohesiveness. It seems like when the burdens of life working within health care were getting heavy, an opportunity to go to an event sponsored by NEHES, a local chapter, or ASHE would come along. It was definitely worth taking vacation time to attend if necessary.

The rejuvenation felt after getting together with peers and networking is unparalleled. It meant returning to work with information I could put to use for the benefit of the people I served, or sitting on or chairing committees at my institution and knowing that so much of the experience gained around the NEHES board table was working for me in my interactions with others. It's a very gratifying feeling.

If you feel you are in need of a little rejuvenation in your work, contact a board member and offer your services. We all have much to contribute. It's just finding the means to do it. The conduits have been laid for years and are aligned annually. They just need energy to pass through them. Get involved. You won't regret it.

(Kurt Peterson has held many positions in NEHES, including secretary, treasurer, and president.)
Reduce Complaints About Fuel Smell
One Facility Makes Generator Testing More Acceptable

By Don Garrison
Chief Engineer
VA Medical Center
Togus, ME

What would you do if you found yourself trying to solve an almost impossible task of running your emergency generators without creating a pungent diesel fuel oil smell throughout your hospital? This is exactly what happened to us every time we ran our generators. People complained about watery eyes, runny noses, burning sensation in their throat, etc. People were going home sick, going to their doctors, and applying for workers compensation. We tried everything from changing our running times, to extending our exhaust stack, to shutting off intake handlers before running the generators.

This hospital sits behind a hill down in a valley. The emergency generator building sits behind the tallest building between the hill and the building, creating a canyon effect. The emergency generators discharge exhaust gases which seem to just hang there until they get sucked into the building by one or more of the several air handlers which we rely on to supply 100% outside air.

There is hope and a possible solution! We not only were able to reduce the complaints, but we also were able to significantly reduce generator exhaust gases (pollutants like carbon monoxide and hydrocarbons).

What did we do? We used technology that has been around for many years and is used by industries that need to run diesel generators in confined spaces (such as mining and tunnel excavation industries).

What is this technology? It is the same technology that most people have on their automobiles - a catalytic converter. Installing a catalytic converter on the exhaust of a diesel emergency generator can have a tremendous effect on the volume of pollutants that is discharged and the smell associated with these pollutants.

It is not uncommon to be able to remove up to 90% of both carbon monoxide and hydrocarbons when the emergency generator exhaust temperature reaches 500 degrees. At 250 degrees at least 50% of both pollutants can be removed. In our experience we went from an almost black smoke being discharged to only a small whisper of white smoke that could barely be seen after installation of the converters. We did not measure the amount of pollutants removed; however, complaints about the emergency generator exhaust have dropped to almost zero.

Figure 1

Figure 1 is a picture of what a typical catalytic converter might look like. Figure 2 shows how a typical catalytic converter might be mounted on a typical diesel emergency generator. In all cases, we would strongly suggest the manufacturer's representatives be contacted so that proper sizing (depending on the KW of your generator) can be assured. The catalytic converters we purchased cost between $2000-$2500 each. This might seem expensive, but when you consider dealing with all the employee complaints, the lost work hours, and the calls to OSHA, this price is a bargain.

You might look on the Web for more information. One of the manufacturers that I am familiar with is Ergelhard in New Jersey. I don't endorse their product; it is only a company that I am familiar with. You could also email Don.Garrison@Med.VA.GOV and I will give you the contacts that I have.

If you decide to try my approach to solving this almost impossible problem, you should see a decrease in unpleasant odors while you are decreasing your discharged pollutants like carbon monoxide and hydrocarbon. This is a side effect of regular testing of your diesel emergency generators. However, a solution is possible with currently available technology.

(Editor's note: As Don has done, it is good engineering practice to ensure that your engine is operating correctly with good combustion before adding catalytic equipment.)

Ken Soscia was mistakenly identified last month as Dave Fontes. Ken is the Administrative Engineer at South County Hospital (Wakefield, RI).
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A Typical, Unannounced JCAHO Survey at a VA...Or Is It?

By Robert J. Thompson, PE, CSHM
NEHES/JCAHO Liaison
Fire Protection and Safety Engineer
Dept. of Veterans Affairs
Bedford, MA

Could you withstand a surprise visit? Have you had a surprise survey? If so, is the case below typical of your experience? Fax me the details of your experience and your opinion as to whether the survey below is typical or not (my fax number is 978-887-6702.)

Following are the main items that were pursued/discussed when a Midwest VA medical center experienced its unannounced survey a few weeks ago. Many typical issues appeared in this review.

The surveyor asked to see the Annual Effectiveness Review of the Environment of Care program. She sought the Director's sign off on the review, but settled for the Director's signature on the minutes where it had been discussed by the appropriate committee. The best advice would be that you submit a formal summary report to the Director evaluating all seven programs, even if your review of the individual programs is spread out over a number of safety meetings.

Physical plant issues that the surveyor reviewed included:
- Smoke penetrations and undercutts through fire and smoke barriers.
- Statement of Conditions and Plan for Improvement.
- Cigarette butts in mechanical rooms, in the penthouse, and on the roof.
- Switch gear rooms and electrical closets for storage and access to panels.
- Test logs for emergency generators -- the requirements for testing changed in January.
- Linen chute doors closed, linen chute discharge room doors closed, and room and chute sprinkler protection.
- Compressed gas cylinders secured.
- Hazard surveillance records from the previous year.

Fire drill records for the previous year were reviewed as well. The surveyor focused on follow-up action, "closing the loop" in response to both problems identified in fire drills and deficiencies found during hazard surveillance rounds. She was interested in work orders having been issued and closed out, and that people who ought to know the status of the corrective action were aware of what follow-up action was being taken.

We were advised that most of the problems did relate to problems found during the previous survey. Nevertheless, the surveyor observed other issues during the survey. The Facilities' staff did not feel that the visit was a "fishing expedition." (Courtesy of Mike Cavanaugh, VA VISN 12)

"Accreditation With Commendation" is A Thing of the Past

Effective January 1, 2000, JCAHO's Accreditation with Commendation status has been dissolved.

The change was necessary because efforts to achieve Accreditation with Commendation had been taken to extremes, according to JCAHO President Dennis S. O'Leary, MD. "We need to ensure that the focus is where it belongs -- on improving the safety and quality of health care across all accredited organizations."

This re-emphasis on safety has been reflected in the Joint Commission statement to recognize that accreditation is essentially a risk-reduction activity. (Joint Commission Perspectives, J/F 2000)
Healthcare Task Force Answers Some Questions, Tables Others

By Eugene A. Cable, PE
NEHES Liaison to NFPA
Regional Safety & Fire Protection
Engineer
Dept. of Veterans Affairs
Albany, NY

The following interpretations were discussed and voted on by the Healthcare Interpretations Task Force during its meeting November 16, 1999 in New Orleans.


Background Information:
Many Authorities Having Jurisdiction (AHJ's) require floor plans showing evacuation routes to be posted on each floor of a healthcare facility. The AHJ's often cite Sections 31-4.1.1 and 31-4.2.2 of the 1985 edition of NFPA 101 and similar sections in other editions of the Life Safety Code. For example, HCFA's Fire Safety Report for the 1985 Code in K48 states, "A simple floor plan showing the evacuation routes is posted in prominent locations on all floors." (31-4.1.1, 31-4.2.2); however, the referenced Code section does not specifically require these evacuation plans.

Question: Does the Life Safety Code require that floor plans showing evacuation routes be posted on all or any floors of a healthcare facility?
Answer: No.


Background Information: None

Question 1: Is it the intent that the referenced code sections require a fire watch in unoccupied areas of a healthcare occupancy under construction for the duration of the shutdown?
Answer 1: Yes.

Question 2: If the answer to question 1 is yes, is the fire watch requirement applicable 24 hours a day for the duration of the shutdown?
Answer 2: Yes.

NFPA 10, 1998 Edition; Section 1-6.2

Background Information:
Some AHJ's (inspectors) require signs marking the location of portable fire extinguishers to be mounted perpendicular to the wall in which the extinguisher cabinet is mounted. They also require this same type of signage when extinguishers are surface mounted on a wall. The referenced code section requires only that "extinguishers mounted in cabinets or wall recesses...be marked conspicuously."

Question 1: Is it the intent of NFPA10 to require signs marking the location of wall mounted portable fire extinguishers when not in cabinets or recesses?
Answer 1: No.

Question 2: Where signs are installed to meet the marking requirements of the referenced code, must they be mounted perpendicular to the wall in which the extinguisher cabinet is mounted?
Answer 2: No.

Question 3: If the answer to question 2 is no, does a conspicuous sign, including those mounted parallel to the wall, meet the intent of this section?
Answer 3: Yes.

NFPA 101, 1997 Edition; Section 13-5.4.1; NFPA 82, 1994 Edition; Section 3-2.2.4.

Background Information:
One state agency has been mandating that the four-foot extension on linen chutes that is required in NFPA 82, Section 3-2.2.4, be provided for existing chutes. NFPA 101, Section 13-5.4.1 requires compliance with NFPA 82 for any new chutes that may be installed in existing healthcare facilities.

Question: Is it the intent of NFPA 101, Section 13-5.4.1 to require existing chutes, that are not otherwise being altered or replaced, to comply with the four-foot extension rule that is contained in NFPA 82, Section 3-2.2.4?
Answer: No. The language of NFPA 101 is very clear that it only requires compliance with NFPA 82 (via the reference to NFPA 101, Section 7-5) for new chutes. In addition, NFPA 82, Sections 1-3.1 and 1-3.2 apply the standard to new construction and allow existing chutes to remain without being altered. NFPA 101, Sections 1-3.4, 1-3.8 and 7-5.2, exception, support this conclusion as does the general statement (specifically the last sentence) contained in NFPA 101, Section 33-1. This last statement describes the intended use of the referenced documents contained in NFPA 101.

Several other issues were discussed but no agreement was reached:
- Are lighted exit signs with bulbs non-functional a violation, given emergency lighting illuminates the sign anyway? Tabled for further study.
- Can NFPA 13 Library shelves' rules for sprinkler placement be applied to medical records shelving? (sprinklers placed between rows of shelving). NFPA 909 might apply, tabled for further study.
- Are sprinklers required inside built-in wardrobes? "Portable" wardrobes do not require sprinklers. No interpretation issued, local AHJ decides.

Members with questions about this article should contact Gene by email, Eugene.Cable@med.va.gov, or by phone, (518) 462-3311, ext. 2556.