

LTC Life Safety Code Trend Report

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Survey Statistics

Number of recertification surveys reviewed: 32

Number of revisit surveys not passed: 0

Number of recertifications with deficiencies: 32 or 100%

Number of deficiency free recertifications: 0

Average number of deficiencies: 5.6

Life Safety Code Regulation Reminders:

A deficiency was cited during the month that I've never seen cited before, so I wanted to ensure that all of you are aware of the requirement to have an emergency stop switch just outside of the boiler room door. I included an article in our Communique on the standard which can be reviewed [here](#) in case you missed it.

Emergency Preparedness Reminders:

Recently, there has been an increased number of deficiencies related to not completing a hazard vulnerability analysis (HVA). The HVA should be the driving force of your emergency preparedness planning such as identifying necessary policies and procedures, conducting drills, and incorporating training/education on the most likely and most significant potential hazards. E006 incorporates the HVA requirement along with updating/reviewing your HVA whenever your EPP is reviewed or updated.

Just a reminder that LeadingAge Iowa facilitates a like-facility memorandum of understanding for emergency evacuation locations for both nursing homes and assisted living. If you are interested in participating or have questions, please let me know!

Check out our [LSC Resource Page](#) on our LAI website!

Top LSC Deficiencies for February 2025

K353 – SPRINKLER SYSTEM – MAINTENANCE & TESTING

K918 – ESSENTIAL ELECTRICAL SYSTEMS

K712 – FIRE DRILLS

K345 – FIRE ALARM SYSTEM – TESTING & MAINTENANCE

K921 – ELECTRICAL EQUIPMENT – MAINTENANCE & TESTING

K161 - Building Construction - Type and Height

- Cited 2 times for:
 - Gaps in sheetrock of the walls.
 - The construction type was previously under waiver that was not renewed.

K200 - Means of Egress Requirements - Other

- Cited 1 time when combustible items were stored in a stairwell.

K211 - Means of Egress - General

- Cited 1 time when snow was not removed from an emergency exit pathway.

K222 - Egress Doors

- Cited 6 times for:
 - Doors had deadbolt locks that would prevent egress in an emergency.
 - A delayed egress door did not open when the fire alarm was tested.
 - A delayed egress door required a code to open.
 - Two times when doors had two motion twist type locks that would prevent egress in an emergency.
 - There was no signage present for a delayed egress door.

K271 - Discharge from Exits

- Cited 2 times when exit doors required excessive force to open.

K291 - Emergency Lighting

- Cited 6 times for:
 - 2 times when lights did not illuminate when tested.
 - Lights were not included in testing documentation.
 - 2 times when annual testing was not completed.
 - 2 times when monthly testing was not completed.
 - Medication room lights were controlled by a switch.

K293 - Exit Signage

- Cited 2 times when:
 - The exit sign had incorrect directional arrows.
 - Monthly and annual testing was not documented.

K321 - Hazardous Areas - Enclosure

- Cited 7 times for:
 - 2 times when a hazardous area did not have a self-closing device on the door.
 - 3 times when a hazardous room door did not fully close and latch.
 - There was penetration in the ceiling of a hazardous room.

K324 - Cooking Facilities

- Cited 7 times for:
 - 6 times when a hood suppression system inspection was missing.
 - 2 times when the hood suppression system was painted, which voided the UL rating.
 - There was excessive grease buildup on the hood suppression system.

K341 - Fire Alarm System - Installation

- Cited 2 times when the fire alarm breaker was not mechanically protected to prevent it from being turned off accidentally.

K345 - Fire Alarm System - Testing and Maintenance

- Cited 8 times for:
 - The fire alarm system was in trouble mode during the survey.
 - 2 times when the inspection report did not include individually listed devices interconnected to the system.
 - 5 times when inspections were missing.
 - The monitoring company reported they were not receiving the signal when the fire alarm was tested.

K346 - Fire Alarm - Out of Service

- Cited 2 times for:
 - The policy did not include contact numbers for DIAL and the insurance company.
 - The fire watch policy did not indicate it was continuous with each area checked at least every 30 minutes.

K347 - Smoke Detection

- Cited 3 times for:
 - Fire door inspection was not completed.
 - Sensitivity testing was not conducted within the last two years.
 - The sensitivity testing did not include all required documentation.

K351 - Sprinkler System - Installation.

- Cited 2 times when the dry sprinkler system was not hard wired into the electrical system.

K353 - Sprinkler System - Maintenance and Testing

- Cited 20 times for:
 - 2 times when escutcheon rings were missing.
 - 2 times when items were stored within 18 inches of sprinkler heads.
 - Wires were wrapped around sprinkler pipes.
 - 4 times when dry sprinkler system air leakage inspections were not completed in the last three years.
 - 2 times for missing inspections.
 - Sprinkler piping had excessive rust.
 - Sprinkler heads were replaced due to being 50+ years old, but one was missed.
 - 5 times for dirty sprinkler heads.
 - Sprinkler heads were more than 50 years old and were not replaced.
 - Deficiencies identified on inspections were not corrected.
 - Ceiling tiles were missing.

K354 - Sprinkler System - Out of Service

- Cited 5 times for:
 - 4 times when the policy lacked several required elements.
 - Sprinkler heads were coming out from the wall.
 - Inspection reports were missing.

K355 - Portable Fire Extinguishers

- Cited 2 times for:
 - Portable fire extinguishers were mounted more than 75 feet apart.
 - Annual maintenance was not completed on the portable extinguishers.

K362 - Corridors - Construction of Walls

- Cited 1 time for a gap in the ceiling tiles.

K363 - Corridors - Doors

- Cited 6 times for:
 - Smoke barrier doors did not fully close.
 - 2 times when resident room doors did not fully close and latch.
 - 2 times when there was a gap between the door and frame.
 - 2 times when doors were being held open by wedges or other devices.

K372 - Subdivision of Building Spaces - Smoke Barriers

- Cited 3 times for:
 - Penetrations in the smoke barrier.
 - Missing ceiling tiles.
 - Holes around the sprinkler in the ceiling.

K374 - Subdivision of Building Spaces - Smoke Barrier Doors

- Cited 1 time for smoke barrier doors fully close and latch.

K511 - Utilities - Electric & Gas

- Cited 3 times for:
 - Combustible items were stored within three feet of electrical panels.
 - Electrical receptacles were pulled away from the wall.
 - There was not an emergency shut off outside of the boiler room for the electric boiler.

K522 - HVAC - Any Heating Device

- Cited 1 time when the clothes dryer would not turn off automatically.

K711 - Evacuation and Relocation Plan

- Cited 3 times for:
 - The fire safety plan did not include a smoke zone evacuation plan.
 - The plan did not have evacuation plans based on proximity to the fire.
 - The plan did not identify all extinguishers available in the building.

K712 - Fire Drills

- Cited 14 times for:
 - 11 times when fire drills were not completed.
 - 3 times when the alarm was not activated after silent drills were conducted.
 - The fire drill documentation did not include who participated in the drill.
 - 3 times when fire drills were conducted at approximately the same time.

K741 - Smoking Regulations

- Cited 2 times for:
 - When the self-closing ashtray was not functioning properly.
 - No self-closing ashtray was present in a smoking area.

K761 - Doors - Maintenance, Inspection and Testing

- Cited 7 times for:
 - 5 times when annual testing was not completed.
 - 2 times when there were gaps in the fire doors.
 - A fire rated door had combustible material on the lower part of the door.
 - 3 times when the fire rated doors did not fully close and latch.

K911 - Electrical System - Other

- Cited 2 times when combustible items were stored within three feet of the electrical panel.
- An electrical junction box was open and exposed wiring.

K914 - Electrical Systems - Maintenance and Testing

- Cited 7 times for:
 - 3 times when testing was not completed in the last 12 months.
 - Surge protectors were powering resident items.
 - Documentation of receptacle testing lacked several required elements.
 - Actual retention value was not documented.
 - The receptacle failed testing and was not replaced.

K918 - Essential Electrical Systems

- Cited 15 times for:
 - 9 times when weekly inspections were not completed.
 - 4 times when there was not a natural gas reliability letter.
 - 4 times when annual diesel fuel was not tested.
 - 2 times when monthly testing documentation did not include the meter start and stop times.
 - Monthly testing documentation did not include the date completed or that testing was completed at 30% of the nameplate rating.
 - Transfer of power was longer than 10 seconds as required.
 - 5 times when monthly generator tests were not completed.
 - The fuel failed quality testing and there was not documentation of mitigation measures.
 - The monthly tests were not completed for the full 30 minutes as required.

K920 - Electrical Equipment - Power Cords and Extension Cords

- Cited 5 times for:
 - Use of surge protectors, power strips, and multiplug adaptors.
 - A cover plate was missing on an electrical receptacle.

K921 - Electrical Equipment - Maintenance and Testing

- Cited 8 times for:
 - 7 times when testing was not completed.
 - 1 time when the testing was not dated.

K922 - Gas Equipment - Other

- Cited 2 times when oxygen concentrators were on and unattended.

K923 - Gas Equipment - Cylinder and Container Storage

- Cited 3 times for:
 - There was no signage designating full and empty oxygen cylinder storage.
 - Empty and full cylinders were comingled.

Emergency Preparedness E-Tags



E004 - Develop EP Plan, Review, and Update Annually

- Cited 3 times when:
 - 2 times when the EPP was not reviewed/updated in the last 12 months.
 - The EPP had forms with blank spots that were not completed and included critical response details.

E006 - Plan Based on All Hazards Risk Assessment

- Cited 1 time when the EPP did not include a Hazard Vulnerability Analysis.

E007 - EP Program Patient Population

- Cited 1 time when there was not a policy on delegation of authority.

E009 - Local, State, Tribal Collaboration Process

- Cited 1 time when documentation was not included on attempts to contact local emergency preparedness officials on planning and testing.

E013 - Development of EP Policies and Procedures

- Cited 1 time when the EP was not organized to allow staff to easily find and understand procedures in the event of an emergency.

E015- Subsistence Needs for Staff and Patients

- Cited 1 time when the EPP lacked policies on essential needs including sewage and waste, medical supplies, and alternate energy sources.

E026 - Roles Under a Waiver Declared by the Secretary

- Cited 1 time when a policy was not included on the general awareness of the 1135 waiver process.

E030 - Names and Contact Information

- Cited 2 times when:
 - Contact information was not updated in the last 12 months.
 - Contact information did not include information on staff, primary care providers, and resident representatives.

E039 - EP Testing Requirements

- Cited 6 times for:
 - 4 times when a full-scale and additional exercise was not completed in the last 12 months.
 - A full-scale exercise was not completed in the last 12 months.
 - An additional exercise was not completed in the last 12 months.