

# LTC Life Safety Code Trend Report

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## Survey Statistics

Number of recertification surveys reviewed: 34

Number of revisit surveys not passed: 0

Number of recertifications with deficiencies: 34 or 100%

Number of deficiency free recertifications: 0

Average number of deficiencies: 3.9

## Join us at the 2025 Spring Conference & Solutions Expo on May 7 & 8

We are less than a month away from the [2025 Spring Conference & Solutions Expo](#) and if you've not heard yet, it is much larger this year. As a Life Safety and Emergency Preparedness Expert, I would encourage you to check out these sessions

- What ALPs Can Do to Prevent Elopements
- Life Safety Code for NF & AL
- Keynote - Powered Productivity: Super Tech Tools to Get Stuff Done
- Facility Assessment and Reserve Study 101: How to Predict the Future
- Policy Matters: Ensuring Compliance and Quality in Long-Term Care Facilities
- Navigating the Future: Capital Planning and Addressing Expected and Unexpected Needs in Senior Living Communities
- Legal Updates for Aging Services
- Guidance to Action: Enhancing Healthcare Compliance with OIG Recommendations
- AL & Adult Day Update - DIAL
- Keynote - You Are Exactly Where You Need to Be

If you haven't done so - you still have time to [register for the Spring Conference](#).

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 March 2025

K712 – FIRE DRILLS

K353 – SPRINKLER SYSTEM – MAINTENANCE & TESTING

K918 – ESSENTIAL ELECTRICAL SYSTEMS

K363 – CORRIDORS - DOORS

### *K161 - Building Construction - Type and Height*

- Cited 2 times for penetrations in the ceilings.

### *K222 - Egress Doors*

- Cited 6 times for:
  - The delayed egress door alarm did not sound when the panic bar was pressed.
  - The delayed egress door did not open during testing.
  - 4 times when delayed egress doors did not have appropriate signage.
  - The delayed egress door required a code for exiting.
  - There was not a clinical needs assessment completed for a door.
  - The door did not release when the fire alarm was tested.
  - The code was not posted or readily available on a magnetic locking door.

### *K232 - Aisle, Corridor, or Ramp Width*

- Cited 2 times when:
  - Beds were stored in hallways reducing the width of the hall.
  - There were multiple wheelchairs and lifts in the hallway that reduced the width.

### *K271 - Discharge from Exits*

- Cited 2 times when:
  - The exit door was not connected to a self-closing device which allowed the exit door to remain open and increasing the risk of a resident elopement/safety risk.
  - The exit door required excessive force to open.

### *K291 - Emergency Lighting*

- Cited 4 times for:
  - 3 times when monthly functional testing was not documented.
  - The lights in the medication room were controlled by a switch without additional emergency lighting installed.

***K293 - Exit Signage***

- Cited 2 times when:
  - Monthly functional testing was not documented.
  - A battery backup emergency light did not illuminate when tested.

***K321 - Hazardous Areas - Enclosure***

- Cited 6 times for:
  - 3 times when storage rooms did not have a self-closing device installed on the door.
  - There were penetrations in a wall of a hazardous room.
  - The door to a hazardous room did not fully close and latch.
  - Ceiling tiles were missing in a hazardous room.

***K324 - Cooking Facilities***

- Cited 3 times for:
  - There was excessive grease buildup on the hood suppression system.
  - Testing/inspection was not completed in the last 6 months.
  - The hood system was painted which voided the UL rating.

***K345 - Fire Alarm System - Testing and Maintenance***

- Cited 2 times for:
  - Smoke detectors were not attached to the ceiling/wall and were dangling by wires.
  - The alarm was in trouble mode at the time of the survey.

***K346 - Fire Alarm - Out of Service***

- Cited 3 times for:
  - 2 times when the policy lacked contact information for DIAL and the insurance company.
  - The fire watch did not include that the person would be dedicated and fire watch rounds are continuous.

***K347 - Smoke Detection***

- Cited 1 time when sensitivity testing of smoke detectors was not completed in the last 2 years.

***K351 - Sprinkler System - Installation.***

- Cited 1 time when the air compressor for the sprinkler system was not hard wired into the electrical system.

### ***K353 - Sprinkler System - Maintenance and Testing***

- Cited 12 times for:
  - 3 times when escutcheon rings were not flush with the wall or ceiling causing penetrations around the sprinkler heads.
  - 4 times when dry sprinkler system air leakage tests were not completed in the last 3 years.
  - 2 times for excessively dusty/dirty sprinkler heads.
  - 2 times when sprinkler system inspections were not completed.
  - A sprinkler had paint covering it.
  - A concealed cover was glued in place, making the sprinkler head ineffective.
  - Items were stored within 18 inches of the sprinkler head.
  - Deficiencies identified during the sprinkler system inspection were not corrected.
  - Beds were stored around the sprinkler riser.
  - Missing escutcheon rings.

### ***K354 - Sprinkler System - Out of Service***

- Cited 3 times for not having contact information for DIAL and the insurance company on the outage policy.

### ***K355 - Portable Fire Extinguishers***

- Cited 1 time when a monthly inspection was not completed.

### ***K362 - Corridors - Construction of Walls***

- Cited 3 times for penetrations in ceilings and walls.

### ***K363 - Corridors - Doors***

- Cited 7 times for:
  - 2 times for a gap between the door and the frame.
  - 2 times when the door would not fully close and latch.
  - 3 times when doors were held open with a wedge or kickdown device.

### ***K372 - Subdivision of Building Spaces - Smoke Barriers***

- Cited 2 times for penetrations in the smoke barrier.

### ***K374 - Subdivision of Building Spaces - Smoke Barrier Doors***

- Cited 2 times for smoke barrier doors fully close and latch.

### ***K511 - Utilities - Electric & Gas***

- Cited 2 times for:
  - Light fixture was missing a cover.
  - Items were stored within 3 feet of electrical panels.

### ***K711 - Evacuation and Relocation Plan***

- Cited 4 times for:
  - 3 times when the fire safety plan did not include all types of extinguishers used.
  - The fire safety plan did not include evacuation by smoke zones.

### ***K712 - Fire Drills***

- Cited 13 times for:
  - Drills for all shifts were completed on the same day.
  - The documentation did not include calling the monitoring company to ensure they received the signal.
  - 6 times for missing drills.
  - Drills are completed at approximately the same time of day.
  - Documentation did not include all elements including the start and stop time and dispatch was not contacted to participate in the drills.
  - 4 times when the alarm was not tested following silent drills.

### ***K741 - Smoking Regulations***

- Cited 2 times when there was not a self-closing metal ashtray and there were smoking materials discarded on the ground.

### ***K761 - Doors - Maintenance, Inspection and Testing***

- Cited 5 times for:
  - 4 times when fire door testing was not completed.
  - The rolling fire doors were not included in testing.

### ***K914 - Electrical Systems - Maintenance and Testing***

- Cited 6 times for:
  - Retention value was not documented for each receptacle.
  - 4 times when testing was not completed on outlets.
  - The outlets did not pass testing and were not replaced.

### ***K918 - Essential Electrical Systems***

- Cited 9 times for:
  - Documentation did not include the time to transfer power.
  - Main and feeder circuit breakers were tested and inspected in the last 12 months.
  - The transfer of power took longer than 10 seconds.
  - Did not have a natural gas reliability letter.
  - Did not complete annual fuel quality testing for diesel powered generators.
  - Missing documentation of amperages at each leg.
  - 2 times when monthly load testing was not completed.

### ***K920 - Electrical Equipment - Power Cords and Extension Cords***

- Cited 6 times for:
  - 4 times for use of extension cords.
  - An outlet had a cracked cover.
  - Use of a multi-plex adaptor.
  - 4 times for use of power strips.

### ***K921 - Electrical Equipment - Maintenance and Testing***

- Cited 5 times for not completing PCREE testing in the last 12 months.

### ***K923 - Gas Equipment - Cylinder and Container Storage***

- Cited 3 times for:
  - Hoyer slings were draped over oxygen cylinders.
  - 2 times when cylinders were not secured.

## **Emergency Preparedness E-Tags**

### ***E004 - Develop EP Plan, Review, and Update Annually***

- Cited 2 times for not reviewing/updating the EPP in the last 12 months.



### ***E006 - Plan Based on All Hazards Risk Assessment***

- Cited 2 times for:
  - Not having a hazard vulnerability analysis in the EPP.
  - Policies on emerging infectious diseases and cyberattacks were not included in the EPP.

### ***E013 - Development of EP Policies and Procedures***

- Cited 1 time when the EPP did not include a policy on cyber-attacks.

### ***E015- Subsistence Needs for Staff and Patients***

- Cited 1 time when the EPP did not have a policy on sewage or waste disposal and basic needs for sheltering in place.

### ***E020 - Policies for Evacuation & Primary/Alternate Communication Plans***

- Cited 1 time for not having contact information listed for emergency management personnel.

### ***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.

### ***E029 - Development of a Communication Plan***

- Cited 1 time when the EPP did not include a communication plan.

***E030 - Names and Contact Information***

- Cited 1 time when there was not a contact list for staff.

***E032 - Primary/Alternate Means for Communication***

- Cited 1 time when there was not a backup communication plan.

***E039 - EP Testing Requirements***

- Cited 3 times for:
  - Not completing full-scale and additional exercise in the last 12 months.
  - Not completing a full-scale drill in the last 12 months.
  - The full-scale drill lacked documentation necessary to assess the EPP.

