EC Toolbox

Checklist for compliance with Standard EC.02.03.01

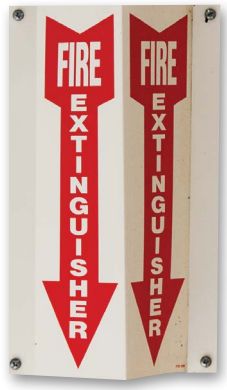
The Joint Commission's Environment of Care (EC) Standard EC.02.03.05—which requires health care organizations to maintain fire safety equipment and fire safety building features—has proven challenging for some organizations. (*See* "Standards Connection," below, for the complete standard.)

This is one of the 10 most challenging standards for the following accreditation programs:

- Among critical access hospitals surveyed during 2015, 52% were found noncompliant
- Among ambulatory health care organizations surveyed during 2015, 36% were found noncompliant
- Among behavioral health care organizations surveyed during 2015, 16% were found noncompliant

If an organization conducts the activities required by the EP but does not document them appropriately they can be found noncompliant.

EC.02.03.05 proved challenging for a number of hospitals during 2015 as well, with nearly 37% found noncompliant.



Ensuring compliance

The Joint Commission does not require health care organizations to have all of the fire safety equipment and fire safety building features that are addressed in EC.02.03.05. However, the systems and equipment that an organization does have must be inspected, tested, and maintained within appropriate time frames. Fire safety equipment and fire safety building features commonly found in health care organizations include the following examples:

- Fire alarms
- Notification devices

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Standards Connection

Standard EC.02.03.05

The organization maintains fire safety equipment and fire safety building features.

Note: *This standard does not require organizations to have the types of fire safety equipment and building features described below. However, if these types of equipment or features exist within the building, then the following maintenance, testing, and inspection requirements apply.*

Elements of Performance for EC.02.03.05

1. At least quarterly, the organization tests supervisory signal devices (except valve tamper switches). The completion date of the tests is documented.
   Note: *For additional guidance on performing tests, see NFPA 72, 1999 edition (Table 7-3.2).*
2. Every 6 months, the organization tests valve tamper switches and water-flow devices. The completion date of the tests is documented.
   Note: *For additional guidance on performing tests, see NFPA 72, 1999 edition (Table 7-3.2).*
3. Every 12 months, the organization tests duct detectors, electromechanical releasing devices, heat detectors, manual fire alarm boxes, and smoke detectors. The completion date of the tests is documented.
   Note: *For additional guidance on performing tests, see NFPA 72, 1999 edition (Table 7-3.2).*
4. Every 12 months, the organization tests visual and audible fire alarms, including speakers. The completion date of the tests is documented.
   Note: *For additional guidance on performing tests, see NFPA 72, 1999 edition (Table 7-3.2).*
5. Every quarter, the organization tests fire alarm equipment for notifying off-site fire responders. The completion date of the tests is documented.
   Note: *For additional guidance on performing tests, see NFPA 72, 1999 edition (Table 7-3.2).*
6. **For automatic sprinkler systems:** Every week, the organization tests fire pumps under no-flow conditions. The completion date of the tests is documented.
   Note: *For additional guidance on performing tests, see NFPA 25, 1998 edition.*

Standards Connection (continued)

7. **For automatic sprinkler systems:** Every 6 months, the organization tests water storage tank high- and low-water level alarms. The completion date of the tests is documented.

   Note: *For additional guidance on performing tests, see NFPA 25,1998 Edition, (Section 6-3.5).*

8. **For automatic sprinkler systems:** Every month during cold weather, the organization tests water-storage tank temperature alarms. The completion date of the tests is documented.

   Note: *For additional guidance on performing tests, see NFPA 25, 1998 edition (Section 6-3).*

9. **For automatic sprinkler systems:** Every 12 months, the organization tests main drains at system low point or at all system risers. The completion date of the tests is documented.

   Note: *For additional guidance on performing tests, see NFPA 25, 1998 edition (Section 9-2.6).*

10. **For automatic sprinkler systems:** Every quarter, the organization inspects all fire department water supply connections. The completion dates of the inspections are documented.

    Note: *For additional guidance on performing tests, see NFPA 25, 1998 edition (Section 9-7.1).*

11. **For automatic sprinkler systems:** Every 12 months, the organization tests fire pumps under flow. The completion date of the tests is documented.

    Note: *For additional guidance on performing tests, see NFPA 25, 1998 edition.*

12. Every 5 years, the organization conducts water-flow tests for standpipe systems. The completion date of the tests is documented.

    Note: *For additional guidance on performing tests, see NFPA 25, 1998 edition.*

14. Every 12 months, the organization tests carbon dioxide and other gaseous automatic fire-extinguishing systems. The completion date of the tests is documented.

    Note: *Discharge of the fire-extinguishing systems is not required.*

15. At least monthly, the organization inspects portable fire extinguishers. The completion dates of the inspections are documented.

    Note 1: *There are many ways to document the inspections, such as using bar-coding equipment, using check marks on a tag, or using an inventory.*

    Note 2: *Inspections involve a visual check for the presence and correct type of extinguisher, broken parts, full charge, and ease of access.*

    Note 3: *For additional guidance on inspection of fire extinguishers, see NFPA 10, Standard for Portable Fire Extinguishers, 1998 edition (Sections 1-6, 4-3, and 4-4).*

16. Every 12 months, the organization performs maintenance on portable fire extinguishers. The completion date of the maintenance is documented.

    Note 1: *There are many ways to document the maintenance, such as using barcoding equipment, using check marks on a tag, or using an inventory.*

    Note 2: *For additional guidance on maintaining fire extinguishers, see NFPA 10, Standard for Portable Fire Extinguishers, 1998 edition (Sections 1-6, 4-3, and 4-4).*

17. The organization conducts hydrostatic tests on standpipe occupant hoses 5 years after installation and every 3 years thereafter. The completion date of the tests is documented.

    Note: *For additional guidance on hydrostatic testing, see NFPA 1962, 1998 edition (Section 2-3), and NFPA 25, 1998 edition.*

18. The organization operates fire and smoke dampers at least every 4 years to verify that they fully close. The completion date of the tests is documented.

    Note: *For additional guidance on performing tests, see NFPA 90A, Standard for the Installation of Air Conditioning and Ventilation Systems, 1999 edition (Section 3-4.7).*

19. Every 12 months, the organization tests automatic smoke-detection shutdown devices for air-handling equipment. The completion date of the tests is documented.

    Note: *For additional guidance on performing tests, see NFPA 90A, Standard for the Installation of Air Conditioning and Ventilation Systems, 1999 edition (Section 4-4.1).*

20. Every 12 months, the organization tests sliding and rolling fire doors for proper operation and full closure. The completion date of the tests is documented.

    Note: *For additional guidance on performing tests, see NFPA 80, 1999 edition (Section 15-2.4).*

EC Toolbox
(continued from page 7)

- Sprinklers
- Fire extinguishers
- Hoses
- Dampers
- Smoke detectors
- Fire doors

In addition to inspection, testing, and maintenance, each element of performance (EP) for EC.02.03.05 requires documentation. Required written documentation is essential to compliance. If an organization conducts the activities required by the EP but does not document them appropriately it can be found noncompliant.

Organizations can use the tool on page 7 to help them self-assess compliance and ensure that they have all their bases covered. EC

Checklist for Compliance with Standard EC.02.03.05

Unit/Area: _____

Date of Review: _____ Reviewer: _____

Question	Y/N	N/A	Comments
Do you have a complete inventory of all devices to be tested?			
Do you have a mechanism to confirm that all the appropriate devices have been tested and that none have been overlooked?			
Do you generate a deficiency report from any testing?			
Do you document any corrective actions to be taken, based on the report?			
Do you have a time line for these corrective actions?			
If repairs are made, do you have a mechanism to "close the loop," documenting the who, what, where, and when of the repairs?			
Do you commission the system after the repairs?			
Do you have a mechanism to make sure that interim life safety measures (ILSM) are assessed and implemented, if required, during repairs?			
Is the signal panel appropriately placed?			
Does the signal panel have adequate protection?			
Is the signal panel sufficiently staffed during off hours to make sure there's coverage at all times?			
Do you have a method to make sure that service personnel are qualified and experienced in inspection, testing, and maintenance activities?			
Do you have a mechanism to make sure that you have proper audibility in high-noise areas, such as boiler rooms?			