



National Fire Protection Association
The authority on fire, electrical and building safety

Summit on Safe, Independent Living: Home Health Care, Aging Populations, and the Residential Environment

Hilton Hotel
Lake Buena Vista, Florida

November 4, 2015

Welcome

At this and all NFPA events we are concerned
with your safety

If the fire alarm sounds, please egress the
building



There's No Place Like Home

Home is the nicest word there is.
[Laura Ingalls Wilder](#)

Home is where the heart is.
[Pliny the Elder](#)

There is nothing like staying at home for real
comfort.
[Jane Austen](#)



Program and Agenda for the Day

Trends

Tools

When the Hospital Comes Home

Educational Resources

Regulatory Side

Lets Figure it Out

Valley Hospital using EMT house calls to cut down on readmissions

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BY MARY JO LAYTON
STAFF WRITER | THE RECORD



CHRIS PEDOTA/STAFF PHOTOGRAPHER



Durable Medical Equipment

NCD 280.1 Durable Medical Equipment Reference List			
Equipment name/type	Coverage Status	Reference NCD or RP	Potential Coding
Air Cleaners	Deny - environmental control equipment; not primarily medical in nature (§1861(n) of the Act).		A9270
Air Conditioners	Deny - environmental control equipment; not primarily medical in nature (§1861 (n) of the Act).		A9270
Air-Fluidized Beds	(See Air-Fluidized Beds, §280.8 of the NCD Manual.) (Pressure Reducing Support Surfaces RP-AIR06012011RP)	280.8 Pressure Reducing Support Surfaces RP	
Alternating Pressure Pads, Mattresses and Lambs Wool Pads	Covered if patient has, or is highly susceptible to, decubitus ulcers and the patient's physician specifies that he/she has specified that he will be supervising the	Pressure Reducing Support Surfaces RP	
Audible/Visible Signal/Pacemaker Monitors	(See Self-Contained Pacemaker Monitors.) NCD 20.8.2, NCD 20.8.3	20.8.2 20.8.3	
Augmentative Communication Devices	(See Speech Generating Devices, §50.1 of the NCD Manual.)	50.1	
Bathtub Lifts	Deny - convenience item; not primarily medical in nature		E0625
Bathtub Seats	Deny - comfort or convenience item; hygienic equipment; not primarily medical in nature (§1861(n) of		E0240 E0245
Bead Beds	(See §280.8 of the NCD Manual.)	280.8	
Bed Baths (home type)	Deny - hygienic equipment; not primarily medical in		A9270
Bed Lifters (bed elevators)	Deny - not primarily medical in nature (§1861(n) of the		A9270
Bedboards	Deny - not primarily medical in nature (§1861(n) of the	280.7	E0273 E0274 E0315
Bed Pans (autoclavable hospital type)	Covered if patient is bed confined.		E0275 E0276
Bed Side Rails	(See Hospital Beds, §280.7 of the NCD Manual.)	280.7	
Beds-Lounges (power or manual)	Deny - not a hospital bed; comfort or convenience item; not primarily medical in nature (§1861(n) of the Act).		A9270
Beds (Oscillating)	Deny - institutional equipment; inappropriate for home		E0270
Bidet Toilet Seats	(See Toilet Seats.)		
Blood Glucose Analyzers (Reflectance Colorimeter)	Deny - unsuitable for home use (see §40.2 of the NCD Manual).	40.2	
Blood Glucose Monitors	Covered if patient meets certain conditions (see §40.2 of	40.2	
Braille Teaching Texts	Deny - educational equipment; not primarily medical in		A9270
Canes	Covered if patient meets Mobility Assistive Equipment	280.3	A4636



All Ages



Patients & Families ▾

Healthcare Professionals ▾

Researchers ▾

Professional

Pediatric Home Ventilator Program

HOME / SERVICES / P / PEDIATRIC HOME VENTILATOR PROGRAM

Pediatric Home Ventilator Program

Transitional Care Center

Meet the Team

Contact Us

Promoting Transition from Hospital to Home

The Pediatric Home Ventilator Program at Cincinnati Children's is dedicated to supporting the care of children with diseases that require chronic mechanical ventilation. Our goal is to safely and seamlessly transition children from the hospital to the home, improving quality of life for both your child and your family.



nfpa.org

Who Ya Gonna Call-Ghostbusters

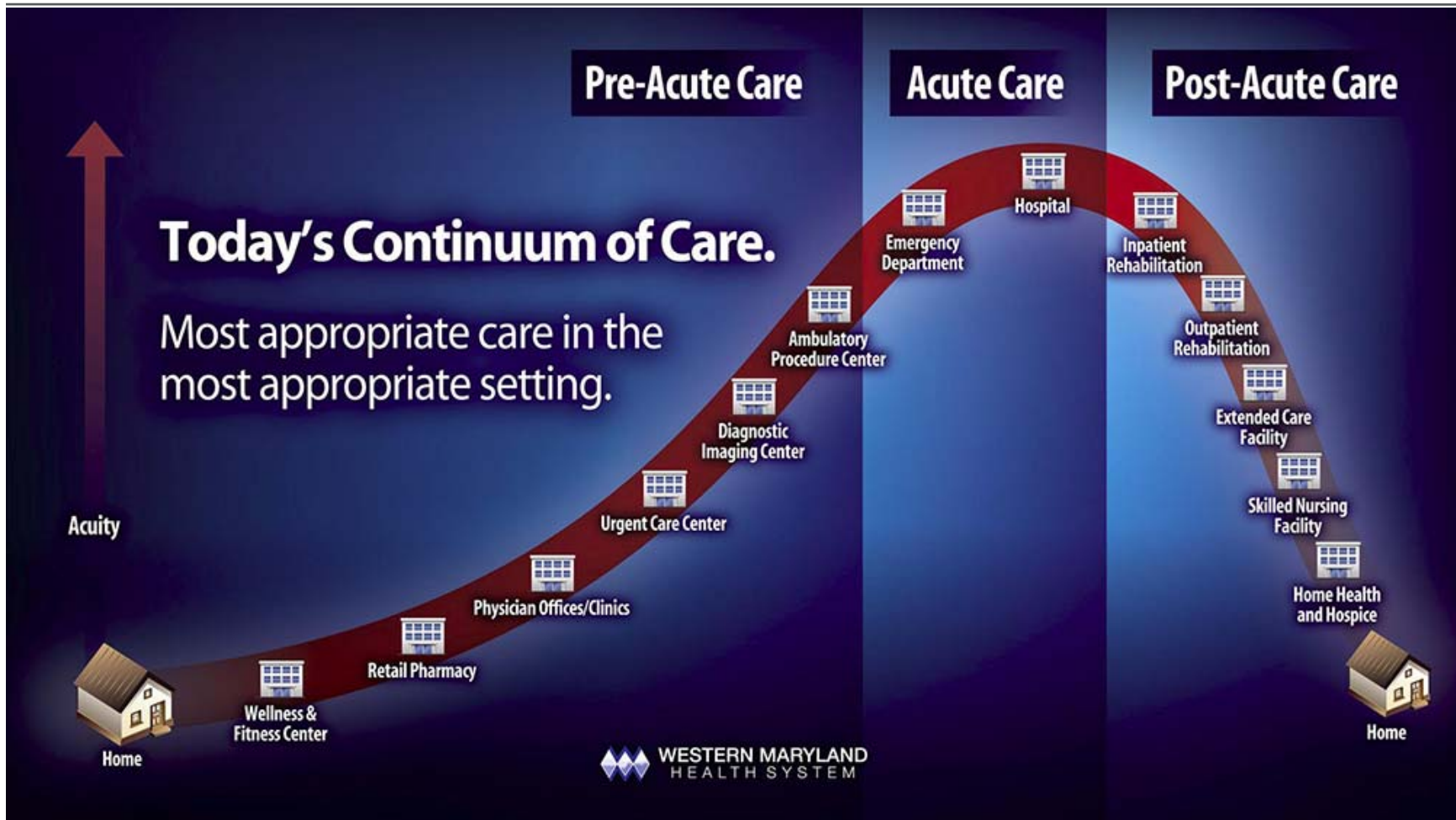
“What we’re doing is filling a gap in health care that is growing disproportionately between patient physicians, home care and hospitals,”

Dale Berry, Chief Executive of Huron Valley Ambulance

- Typical ambulance run to the hospital: \$700.
- Community paramedics visit: \$180.
- Avoiding trip to ER: \$2,500 (Savings-ambulance transport, hospital, physician fees, lab tests)
- Staying home: Priceless



We will figure it out-because



Codes, Standards and the Regulatory Picture

What Do We Regulate and How Do We Regulate it?

- Medical Equipment and Systems-NFPA 99
- Occupancies-NFPA 101
- First Responder Efforts
- Federal Programs: HHS/CMS
- Accreditation Programs: TJC, DNV, HFAP
- AAMI, ASHRAE
- SHAs
- Local/state regulations



Some Current Challenges

- *Residential Board and Care
 - Age independent
 - Blends a mix of independence and personal care services (ADLA)
 - 24 hour staffing
 - Licensed as assisted living, group home, ICF/IID
- *Long Term/Nursing Home Care
 - Age independent
 - Not chronic medical care
 - 24 hour staffing
 - Licensed as skilled nursing, nursing home, long term care
- **“Senior Apartments” or “Senior Living”
 - Generally over the age of 55 or over 62
 - Generally no expectation on mobility, cognitive or other self preservation skills

* Easy to address

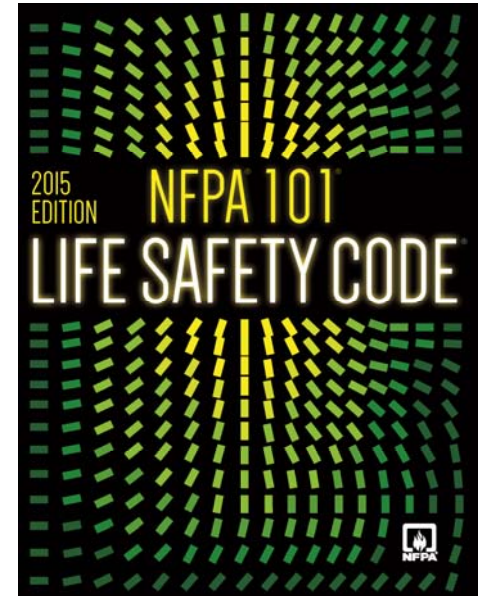
** Not so easy to address



Senior Apartments/ Senior Living Challenge

Codes Say

- Apartments
- Not a special category
- No special requirements



Five Dead in Senior-Living Apartment Building Fire, 10 Hospitalized

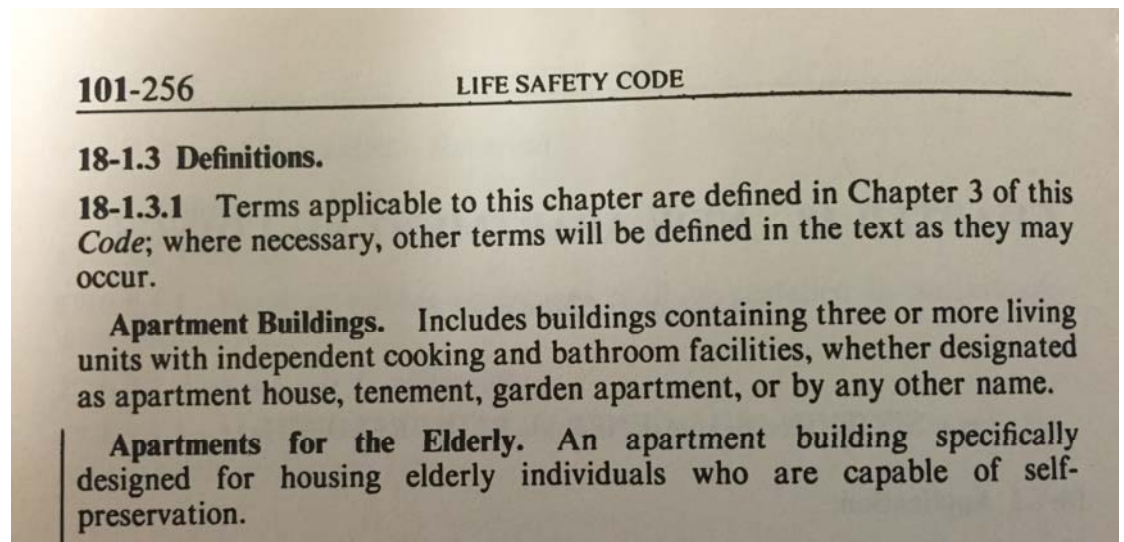
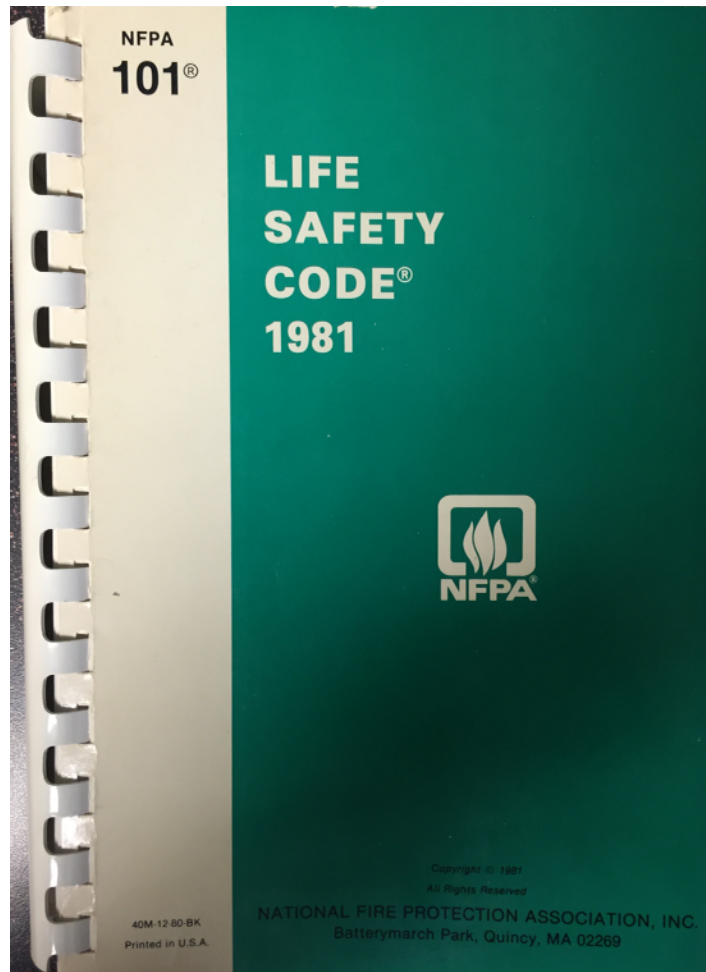


One Killed and Dozens Displaced in Retirement Apartment Fire - AL

90 displaced after fire at downtown Birmingham retirement community



Senior Apartments/ Senior Living Challenge-Past, Present, Future



New Rules Unpopular with Many

Special Provisions Removed from 1985 Code

101- 891 - (Chapters 18 and 19): Accept
SUBMITTER: Subcommittee on Residential Occupancies for
RECOMMENDATION: Delete all references and requirements for
apartments for the elderly.
SUBSTANTIATION: Buildings designed for elderly housing, are being
discriminated against versus buildings which happen to have a
large elderly population. The requirements for apartment
buildings adequately protect residents of all age groups as long
as they are capable of self-preservation.
COMMITTEE ACTION: Accept.

101- 294 - (18-3.4.1.2): Accept in Principle
SUBMITTER: Julian Smariga, Union Bridge, MD
RECOMMENDATION: Either delete this section entirely or delete
"apartments for the elderly in."
SUBSTANTIATION: If the purpose of this requirement is to pinpoint
the location of a fire in a tall building as soon as practicable,
then the type of a fire in a tall building should have no consideration. The
hazard of delayed discovery in tall building fires is equally
serious in all buildings.
Limiting this requirement to apartments for the elderly is
unfair. There is no evidence that occupants of conventional
apartment buildings, many of whom may be of advanced years, would
react substantially different from the occupants of apartments for
the elderly, who are by definition, capable of self-preservation.
In fact, the latter may be better conditioned to react favorably
in a fire emergency since they are generally in a situation which
provides as opportunity for reacting in emergency
procedures.

101- 396 - (18-3.4.1.2 and 19-3.4.1.2): Accept in Principle
SUBMITTER: Laurence F. Lane, American Assoc. of Homes for the
Aging
RECOMMENDATION: Delete "apartments for the elderly in."
SUBSTANTIATION: This requirement is a good one and should have
general application rather than being limited to apartments for
the elderly. Various at-risk populations residing in conventional
apartment buildings would benefit from the opportunity to react to
a fire situation sooner.



Status Quo 1985-2014: 2015 and Beyond

Recent Life Safety Code Committee Actions:

- 2014/2015: TC on Residential Occupancies
 - **Apartments for the Elderly Task Group Report**
- Challenges
 - Existing buildings/age in place/NORCs?
 - Age threshold-or age plus mobility?
 - Age independent-in home care with DME?
 - Multifamily and single family?



Status Quo 1985-2014: 2015 and Beyond

Recent Life Safety Code Committee Actions:

- Next Steps
 - Different view in 2015/2016 from stakeholders?
 - What do we hear on NOV 4, 2015?
 - Data collection
 - When is an apartment fire an senior apartment fire?
 - What are state/locals doing?



Home Health Care Guidance/Regulations

The advancement in techniques have resulted in the home in recent years. The National Fire Protection Association's Committee on Home Health Care has issued guidance for the users of this equipment. This guidance was presented at the Annual Meeting in November.



Portable medical oxygen in the home has grown over the past decade. Medical oxygen adds a higher percentage of oxygen to the air a patient uses to breathe. Fire needs oxygen to burn. If a fire should start in an oxygen-enriched area, the material burning will burn more quickly.


Homes where medical oxygen is used need specific fire safety rules to keep people safe from fire and burns.

SAFETY TIPS

- » There is no safe way to smoke in the home when oxygen is in use. A patient on oxygen should not smoke.
- » Candles, matches, wood stoves and even sparking toys, can be ignition sources and should not be used in the home.
- » Keep oxygen cylinders at least five feet from a heat source, open flames or electrical devices.
- » Body oil, hand lotion and items containing oil and grease can easily ignite. Keep oil and grease away where oxygen is in use.
- » Never use aerosol sprays containing combustible materials near the oxygen.


FACTS

- ❗ Oxygen saturates fabric covered furniture, clothing, hair and bedding, making it easier for a fire to start and spread.
- ❗ Smoking materials is the leading heat source resulting in medical oxygen related fires, injuries and deaths.



Post **No Smoking** and **No Open Flames** signs in and outside the home to remind people not to smoke.

Name of Organization _____
 Contact Information _____

 Your Source for SAFETY Information
 NFPA Public Education Division • 1 Batterymarch Park, Quincy, MA 02269

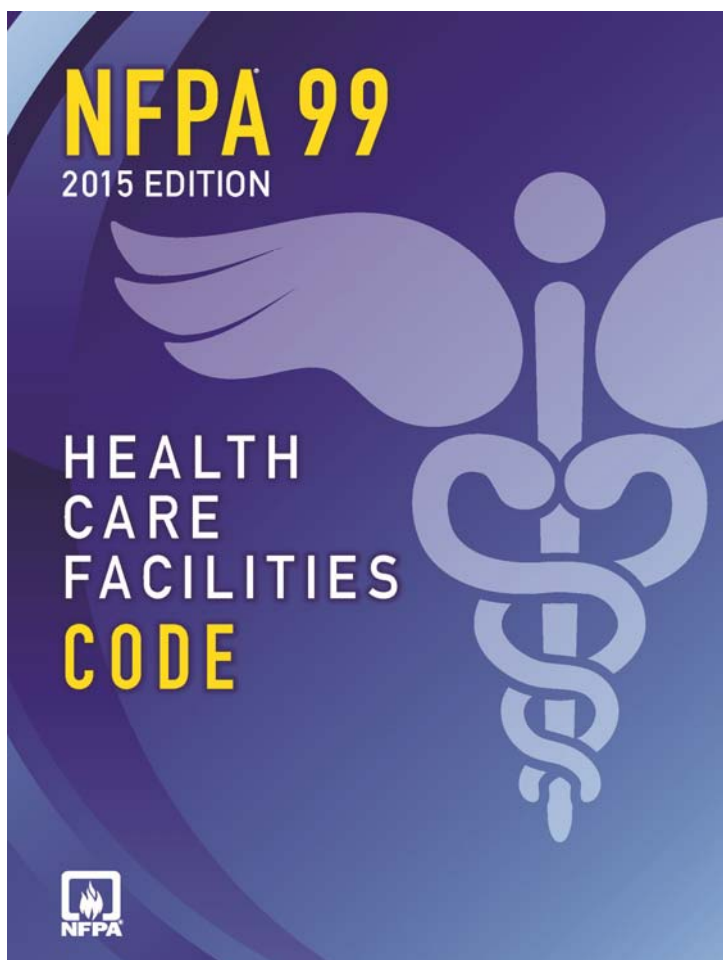
GUIDANCE FOR THE HOME USE OF
RESPIRATORY

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 NATIONAL FIRE PROTECTION ASSOCIATION
 International
 100 Atlantic Avenue, Boston, MA 02210



NFPA 99 – Current Regulations



Chapter 6: Electrical Systems

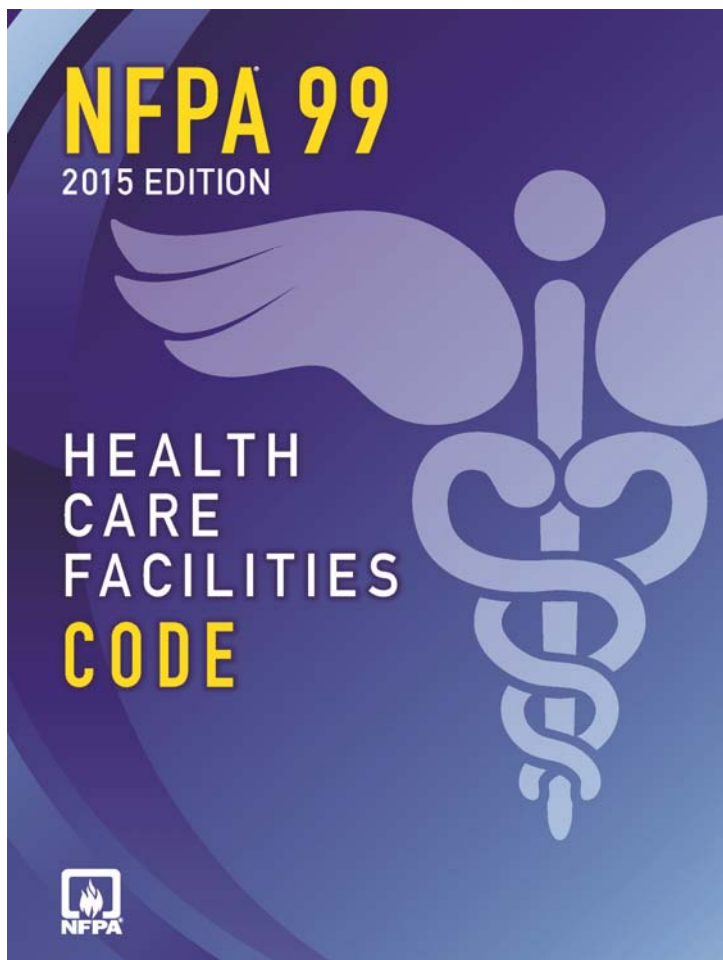
Chapter 10: Electrical Equipment

Chapter 11: Gas Equipment

Chapter 12: Emergency Management



NFPA 99 – Current Regulations



1.3 Application.

1.3.1 This code shall apply to all health care facilities other than home care and veterinary care.

3.3.68* Health Care Facilities. Buildings, equipment, or buildings, or residential occupancies in which human medical, dental, psychiatric, nursing, obstetrical, or surgical care is provided.





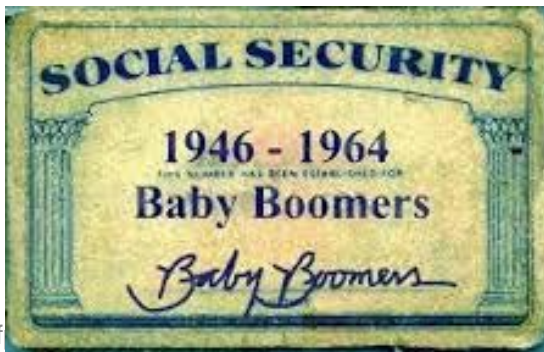
HHA



NGO



CPM



TMM





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Questions