

ICC AD HOC COMMITTEE ON HEALTHCARE (AHC) WORK GROUPS

(4/28/11)

At meeting #1 of the AHC held April 20 - 21, 2011, the committee identified issues to review and established Work Groups (WG) to study the issues. Members of the AHC were assigned to each of the WG's with a chair identified to direct the WG effort.

If you are interested in participating in one or more of the WG's, please contact the staff liaison for the WG. You will be added to the email distribution list and notified of all calls and document distributions.

Ad Hoc Committee Objective:

- Develop a package of code change proposals for submission to the applicable I-Code for the 2012/2013 Cycle for hospitals and ambulatory surgical centers.

Work Group Logistics:

- WG activity conducted via web conferencing calls and emails
- All calls are open to interested parties
- WG activity will be an on-going activity held in-between scheduled meetings of the AHC
- The WG process will not be a formal committee process.
 - The WG decision making process will be based on achieving a measure of consensus of those participating in the WG. If consensus is not achieved, the final decision will rest with the members of the AHC on the WG.
- WG decisions in the form of recommendations to the AHC will be compiled in a formal WG Report to be presented to the AHC at the following meeting of the AHC.
 - The WG Reports will be posted on the respective WG site of the AHC (under construction).
 - WG Reports to be completed approx. 2 weeks prior to the scheduled AHC meeting.
- The meetings of the AHC are open meetings which will allow for the opportunity of WG participants who disagree with decisions of the WG to voice their concerns
- In all cases, the final determination of the resulting code changes to be submitted in the 2012/2013 Cycle rests with the AHC.

Work Group Issues:

- As noted on the following pages for each WG
- The issues are a Work-in-Progress and as such are subject to change and coordination with the other WG's
- Issues to address both new and existing facilities

AHC website (will include links to the WG's):

- <http://www.iccsafe.org/cs/AHHC>

FIRE/FIRE SAFETY WORK GROUP

CODES:

IBC: Ch 7, 8, 9, 14, 15
IFC
IMC

ISSUES:

- DECORATIONS ON WALLS
- ELEVATOR RECALL PROCEDURES WHEN THERE IS SMOKE IN MACHINE ROOM/ELEVATOR LOBBY
- INTERCOMMUNICATION BETWEEN FLOOR OPENINGS
- MECHANICAL SYSTEMS/SMOKE CONTROL
 - SMOKE DAMPER EFFECTIVENESS
 - SHUTDOWN PARAMETERS
 - SMOKE CONTROL IN OPERATING ROOMS
 - NFPA 99
- CORRIDOR WALLS/SMOKE PARTITIONS
 - CEILING SMOKE RESISTANT MEMBRANE
- VENTILATION RATES – IMC TABLE 403.3
- COOKING FACILITIES IN BREAK ROOMS – APPLICATION OF COMMERCIAL EXHAUST PROVISIONS
- IMPACT OF AUTOMATIC GUIDED VEHICLES
 - CHARGING LOCATIONS
 - PLACEMENT OF HAZARDOUS MATERIALS IN CORRIDOR
 - IMPACT ON CORRIDOR WIDTH
- FIRE ALARMS - AUDIBLE AND VISIBLE
- NEW AND EXISTING FACILITIES TO BE FULLY SPRINKLERED
 - TESTING PARAMETERS
- HAZARDOUS MATERIAL LOCATIONS
 - MEDICAL GASES
- ALCOHOL DISPENSERS IN PATIENT ROOMS
- CLINICAL LABS/HAZARDOUS EXHAUST

CHAIR: BALDWIN

AHC MEMBERS: CHAMBLEE, BAKER, UNANUE, PEGLOW, MYERS, LEWIS

STAFF LIAISON: Bill Rehr; brehr@iccsafe.org

EGRESS WORK GROUP

CODES:

IBC: Ch 10 and 11

IFC: Section 4604 (existing buildings)

ISSUES:

- EGRESS THROUGH ELEVATOR LOBBY (NEED TO COORDINATE WITH CTC EFFORTS)
- GENERAL EGRESS
 - WIDTH – 8' CORRIDOR VS 5' CLEAR;
 - COMMON PATH OF TRAVEL
 - TRAVEL DISTANCE
 - SLIDING DOORS
- SPECIAL LOCKING DEVICES
 - DELAYED EGRESS
 - LATCHES ON SMOKE BARRIER DOORS
 - STAFF CONTROL IN PSYCH WARDS
 - INFANT CONTROL
- OCCUPANT EVACUATION VIA ELEVATORS (NEED TO COORDINATE WITH CTC EFFORTS)
- PATIENTS AS PART OF OCCUPANT LOAD CALCULATION/REFUGE AREAS
- SUITE SIZE AND SUPERVISION
 - MEANS OF EGRESS SUITE
- WAITING SPACES OPEN TO CORRIDOR
- ACCESSIBILITY - MAXIMUM 18" CLEAR ON THE SIDE OF TOILET FOR CARE-GIVER ACCESS

CHAIR: FLANNERY

AHC MEMBERS: POLLITT, KOSARZYCKI, ALTIZER, NICHOLS

STAFF LIAISON: Kim Paarlberg; kpaarlberg@iccsafe.org

GENERAL WORK GROUP

CODES:

IBC: Chs 3 – 6, 12, 13, 27 – 34

ISSUES:

- AMBULATORY CARE
 - PART OF I – 2?
 - DEFINITION
 - IMPACT ON ADDING NEW CARE FACILITY INTO EXISTING LEASED SPACE
 - OCCUPANCY SEPARATION/CONTINUITY
 - EGRESS
 - OCC LOAD FACTORS
- DEFINITION OF “DEFEND IN PLACE”
- SIZE OF COMPARTMENTS
- USE OF FACILITY DURING RENOVATIONS
 - TEMPORARY C OF O
 - RENOVATION PARAMETERS
 - FIRE SAFETY PARAMETERS
- HAZARDOUS MATERIAL LOCATIONS
 - SIZE OF CONTROL AREAS IN TALLER BUILDINGS
- INCIDENTAL USE AREAS - LARGER STORAGE ROOMS
- SEISMIC RETROFIT FOR EXISTING BUILDINGS/ADDITIONS
- SMOKE COMPARTMENT ALTERNATIVE/TRADE OFF FOR FULLY SUPPRESSED BLDG

CHAIR: MYERS

AHC MEMBERS: HOWARD, UNANUE, POLLITT, KOSARZYCKI

STAFF LIAISON: Beth Tubbs; btubbs@iccsafe.org