



**Center for Clinical Standards and Quality/Survey & Certification Group**

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**Ref: S&C: 14-03-NH/LSC**

**DATE:** October 25, 2013

**TO:** State Survey Agency Directors

**FROM:** Director  
Survey and Certification Group

**SUBJECT:** Citations at F Tag 454 – 42 CFR §483.70 Physical Environment, §483.70(a) Life Safety from Fire

**Memorandum Summary**

- **Citations at F Tag 454 no longer apply:** The regulations at §483.70(a) are covered by the Life Safety Code (LSC) requirements and all citations under these regulations should be made under the appropriate LSC K Tags.
- **Systems Changes:** The Centers for Medicare & Medicaid Services (CMS), has deleted F Tag 454 from our Automated Survey Processing Environment (ASPEN) system.

**Background:**

It has come to our attention that F Tag 454 is cited primarily as a cross reference to LSC K Tag deficiencies. In addition, CMS staff conducted a review of other findings cited at F Tag 454 and determined that these findings would have been more appropriately cited under other F Tags or K Tags. Therefore, to avoid unnecessary duplication and redundancy and to provide for accurate deficiency citations, CMS has determined that the regulations at 42 CFR §483.70(a) are more appropriately cited under the LSC requirements and F Tag 454 has been deleted from the ASPEN system.

**Citations at F454 – §483.70 Physical Environment, §483.70(a) Life Safety From Fire:**

Any deficiency identified under these regulations should be cited under the corresponding LSC K Tag or other F Tag requirements as appropriate. A facility must meet the appropriate edition and chapter(s) of the Life Safety Code.

The LSC survey for safety from fire and/or other LSC requirements may be conducted directly by a State Survey Agency, contractor or a designated State fire authority. If the State Survey Agency has designated a fire authority to conduct the LSC survey on their behalf, the State must establish a process and procedures for their contracted State fire authority to notify them whether the facility is or is not in compliance with the LSC requirements.

If the Health survey team observes fire hazards or other possible deficiencies in LSC, they must notify the designated LSC State Surveyors or other State survey authority and refer these concerns as necessary. When appropriate the LSC surveyors or other State survey authority should follow up and would cite the corresponding K Tag as applicable.

For questions on this memorandum, please contact James Merrill at 410-786-6998 or via email at James.Merrill@cms.hhs.gov.

**Effective Date:** The guidance is effective immediately. Please ensure that all appropriate staff is fully informed within 30 days of the date of the memorandum.

**Training:** The information contained in this announcement should be shared with all survey and certification staff, their managers, and State and Regional Office training coordinators.

/s/

Thomas E. Hamilton

Attachment

cc: Survey and Certification Regional Office Management

**Citations at F Tag 454 – §483.70 Physical Environment, §483.70(a) Life Safety From Fire  
Cross Reference to Life Safety Code (LSC) K Tags**

**§483.70 Physical Environment**

The facility must be designed, constructed, equipped, and maintained to protect the health and safety of residents, personnel and the public. **Refer to F Tags as appropriate and other K Tags including - K011, K012, and K103**

**§483.70(a) Life Safety From Fire**

§483.70(a)(1) Except as otherwise provided in this section –

§483.70(a)(1)(i) the facility must meet the applicable provisions of the 2000 edition of the Life Safety Code of the National Fire Protection Association. The Director of the Office of the Federal Register has approved the NFPA 101® 2000 edition of the Life Safety Code, issued January 14, 2000, for incorporation by reference in accordance with 5 U.S.C. 552(a) and 1 CFR part 51. A copy of the Code is available for inspection at the CMS Information Resource Center, 7500 Security Boulevard, Baltimore, MD or at the National Archives and Records Administration (NARA).

For information on the availability of this material at NARA, call 202-741-6030, or go to [http://www.archives.gov/federal\\_register/code\\_of\\_federal\\_regulations/ibr\\_locations.html](http://www.archives.gov/federal_register/code_of_federal_regulations/ibr_locations.html)

Copies may be obtained from the National Fire Protection Association, 1 Batterymarch Park, Quincy, MA 02269. If any changes in this edition of the Code are incorporated by reference, CMS will publish notice in the FEDERAL REGISTER to announce the changes.

§483.70(a)(1)(ii) Chapter 19.3.6.3.2, exception number 2 of the adopted edition of the LSC does not apply to long-term care facilities.

§483.70(a)(2) After consideration of State survey agency findings, CMS may waive specific provisions of the Life Safety Code which, if rigidly applied, would result in unreasonable hardship upon the facility, but only if the waiver does not adversely affect the health and safety of the patients.

§483.70(a)(3) The provisions of the Life Safety Code do not apply in a State where CMS finds, in accordance with applicable provisions of sections 1819(d)(2)(B)(ii) and 1919(d)(2)(B)(ii) of the Act, that a fire and safety code imposed by State law adequately protects patients, residents and personnel in long term care facilities.

§483.70(a)(4) Beginning March 13, 2006, a long-term care facility must be in compliance with Chapter 19.2.9, Emergency Lighting. **Refer to K Tag - K046**

§483.70(a)(5) Beginning March 13, 2006, Chapter 19.3.6.3.2, exception number 2 does not apply to long-term care facilities.

§483.70(a)(6) Notwithstanding any provisions of the 2000 edition of the Life Safety Code to the contrary, a long-term care facility may install alcohol-based hand rub dispensers in its facility if -

§483.70(a)(6)(i) Use of alcohol-based hand rub dispensers does not conflict with any State or local codes that prohibit or otherwise restrict the placement of alcohol-based hand rub dispensers in health care facilities;

§483.70(a)(6)(ii) The dispensers are installed in a manner that minimizes leaks and spills that could lead to falls;

§483.70(a)(6)(iii) The dispensers are installed in a manner that adequately protects against access by vulnerable populations; and

§483.70(a)(6)(iv) The dispensers are installed in accordance with chapter 18.3.2.7 or chapter 19.3.2.7 of the 2000 edition of the Life Safety Code, as amended by NFPA Temporary Interim Amendment 00-1(101), issued by the Standards Council of the National Fire Protection Association on April 15, 2004. The Director of the Office of the Federal Register has approved NFPA temporary interim Amendment 00-1(101) for incorporation by reference in accordance with 5 U.S.C. 552(a) and 1 CFR part 51. A copy of the amendment is available for inspection at CMS Information Resource Center, 7500 Security Boulevard, Baltimore, MD and at the Office of the Federal Register, 800 North Capitol Street NW, Suite 700, Washington, DC. Copies may be obtained from the National Fire Protection Association, 1 Battery March Park, Quincy, MA 02269. If any additional changes are made to this amendment, CMS will publish notice in the Federal Register to announce the changes. **Refer to K Tag - K211**

§483.70(a)(7) A long-term care facility must:

§483.70(a)(7)(i) Install battery-operated smoke detectors in resident sleeping rooms and public areas by May 24, 2006. **Refer to K Tag - K130**

§483.70(a)(7)(ii) Have a program for testing, maintenance, and battery replacement to insure the reliability of the smoke detectors. **Refer to K Tag - K054**

§483.70(a)(7)(iii) Exception:

§483.70(a)(7)(iii)(A) The facility has a hard-wired AC smoke detection system in patient rooms and public areas that is installed, tested, and maintained in accordance with NFPA 72, National Fire Alarm Code, for hard-wired AC systems; or **Refer to K Tag - K054**

§483.70(a)(7)(iii)(B) The facility has a sprinkler system throughout that is installed, tested, and maintained in accordance with NFPA 13, Automatic Sprinklers. **Refer to K Tag - K062**