



Sparks of Interest

Put Your Dietary Kitchen to the Test

Just like other units in a hospital, the work and conditions in a dietary kitchen change throughout the course of a day. In our experience, hospitals that are successfully ready for a visit from CMS surveyors take a systematic approach to examining and preparing their kitchen conditions to be as compliant in peak activity hours as in the quieter times of day.

A true kitchen environmental inspection cannot only occur when the kitchen staff is preparing meals for patients. Physical environment inspections must occur in phases to truly assess that food is being stored and prepared under sanitary conditions. This can translate into inspections during the least occupied hours of the day (while kitchen staff are performing their regular duties), and inspections during peak activity of meal preparation. Failure to recognize this dynamic is a common mistake, and one that takes close coordination with the kitchen staff leadership to correct.

When was the last time you inspected your Dietary Kitchen? *Really, deeply*, inspected your kitchen? A successful internal inspection team must be multidisciplinary, including Infection Prevention and Control, Facilities, Quality, and the Kitchen leadership. If you are unsure that your hospital's kitchen would survive if CMS surveyors arrived today, the list below encompasses a systematic approach to self-assessment that includes: Environment of Care (EC), Life Safety (LS), and Infection Prevention and Control (IPC).

Assess your kitchen

- If you use a contracted vendor to manage your kitchen, review the contract to determine who is responsible for the cleaning process and evaluate whether the contract is being followed.
- Review facility work orders from the last 6 months. Work orders if reported reveal a lot about the overall condition of the kitchen and equipment.
- Examine the condition of the floor (e.g., dirt buildup to include corners, and underneath and behind cooking appliances, loose or broken tiles, floor drains).
- Scrutinize the walls (e.g. food stains, holes, dirt buildup especially at the of the cove basin).
- Assess the condition of the ceiling tiles (e.g., stained, holes, sagging, missing).
- Check hood system (e.g. grease buildup on filters, inspection sticker, sprinkler heads with cap attached, rust buildup, overall cleanness).

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Special Point of Interest

Effective on March 15, 2021 The Joint Commission resumed its pre-pandemic procedures. This includes on-site unannounced survey team visits. Hospitals will no longer receive phone calls or emails when it has been determined their area is low risk for an accreditation survey team to visit. Hospitals should continue to monitor the Notification of Scheduled Events section of their Joint Commission Connect page for notification on the first day of the unannounced survey.

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Put Your Dietary Kitchen to the Test continued....

- Inspect cooking appliances (placed underneath sprinkler heads, deep fryer spacing from gas burner, rust buildup)
- Are the food delivery carts sanitized after every meal? Assure they are clean and in good repair including the wheels.
- Is food immediately removed from original shipping boxes and stored on shelves? Corrugated shipping boxes can harbor insects; remove contents and place in storage (shelves, refrigerator, freezer, etc.), Ensure no food items are stored on the floor.
- Assess the process for checking expiration dates.
- Evaluate the process of labeling foods to ensure it is consistent and accurate.
- Observe freezer, refrigerator, and dishwasher temperature logs. Is there documentation of a corrective action plan to include follow-up to address out range temperatures and malfunctioning equipment?
- Observe compliance of kitchen staff wearing hair nets, beard covers, performing hand hygiene, and wearing gloves as defined by the organization's policy and procedure.
- Describe the routine cleaning schedule for all areas of the kitchen.
- Is there a past or present problem with pests or pest control? What is the routine pest management schedule?
- What is the quality control monitoring process for use of sanitizing solutions?
- Are pots, pans, and utensils stored in a clean, dry location without visible debris, grease, or rust?
- Is the ice machine visibly clean, regularly sanitized, with the ice scoop stored outside of the ice machine?
- Observe adherence to dietary policy and procedures to prevent foodborne illnesses.
- Monitor compliance with food delivery and tray pass for patients on isolation precautions.
- Perform a risk assessment on the dock to identify any opportunities for improvement. Discuss prevention strategies in place to ensure patient safety and prevention of foodborne illnesses.

In addition to these items, it helps to look at your kitchen operations through the lens of a CMS surveyor. Below are some of the most commonly identified kitchen observations with associated hospital CMS Conditions of Participation (CoPs) and Joint Commission Standards/Elements of Performance.

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Put Your Dietary Kitchen to the Test continued....

Observation: Rusted, damaged, and soiled equipment noted to be in-use in all kitchen areas.

- Knowledge point: Kitchen equipment is to be routinely monitored for operational functionality and physical condition. Work order history is reviewed with the recommendation of proper repair and replacement as appropriate.
- CMS §4482.41(d)(2) | TAG: A-0724 (2)
Joint Commission EC.02.05.05 EP6

Observation: Heat-sanitizing dishwasher documentation recorded temperatures that were out-of-range, with no noted follow-up documented.

- Knowledge point: Re-evaluate documentation log to include acceptable temperature ranges and include a comments section to record actions taken when the dishwasher is out of range or malfunctioning. Re-educate staff regarding the procedure to take when temperatures are out-of-range or the dishwasher is malfunctioning (e.g., use disposal dishes and utensils).
- CMS: §482.41(d)(2) | TAG: A-0724 (2)
Joint Commission: EC.02.05.05 | EP5

“In addition to these items, it helps to look at your kitchen operations through the lens of a CMS surveyor. “

Observation: Kitchen server was observed wearing a hair net that left the front of his/her hair completely uncovered.

- Reeducate kitchen staff on the proper application and wearing of hair nets. Monitor for compliance.
- CMS: §482.42 | TAG: A-0747
Joint Commission IC.02.01.01 EP2

Observation: Opened food items were stored in dry, refrigerated, and freezer areas not labeled with expiration dates.

- Knowledge point: Determine what food items require discarding, based on lack of expiration dates. Reeducate staff on labeling opened food items with an expiration date. Audit process to assure compliance.
- CMS §482.28(b) | TAG: A-0629
PC.02.02.03 EP11

Observation: The cumulative effect of unsanitary conditions in storing, preparing, and serving food could potentially be considered an immediate jeopardy situation or condition-level finding.

- Knowledge point: Take immediate actions to correct all deficiencies cited.
- CMS §482.13(c)(2) | Tag A-0144





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Fire Doors

Principles of Performing Door Safety Inspections (Part 2)

Notice: The comments and opinions expressed in this article are based solely on the author's expertise and experience. They do not represent the NFPA, ASHE, or any other organization's official positions or opinions.

As you might recall, we discussed the first principle of performing door safety inspections in Part 1 of this article. The first principle instructs us that: "Swinging door assemblies, regardless of their fire rating, were installed in accordance with the codes that were in effect at the time of construction." Remember, building owners are not required to upgrade the fire doors in their facilities as changes in the codes and standards occur. It is equally important to remember that there are no expiration dates on the labels of fire doors or any of their components.

To correctly perform NFPA 80's door safety inspections, there are few more principles that we need to bear in mind. The next principle of which to be aware is that: "Fire door assemblies provide the appropriate level of fire protection-ratings for the openings in which they are installed." In other words, we need to trust that the people who came before us (e.g., architects, AHJs, contractors, installers, suppliers, etc.) put the right types of fire door assemblies in the right place and that their fire protection-ratings meet or exceed the ratings for the spaces in which the doors serve.

At the same time, inspectors need to recognize conditions that do not seem to be correct. For example, today, fire doors in stair towers are typically 1-hour (60-minute) or 1-1/2-hour (90-minute) rated assemblies—it depends on how many stories are served by the stair towers. In both cases, the maximum size of fire protection-rated glass (e.g., wire glass) in these doors was (and still is) limited to 100 sq. in. If a 1/3-hour (20-minute) rated door assembly was discovered to be in a stair tower during an inspection, the inspector needs to recognize that the rating of the door does not meet the minimum fire protection rating for the opening in which it is installed—a *vertical opening* as identified in the codes. In this scenario, researching the history of the door assembly after the walk-through inspection might reveal that the original door was replaced with a door (from somewhere else in the building) that fit the frame but carried a lesser rating.

Inspectors also need to be aware of fire door conditions in older buildings and structures. For instance, the codes of the day permitted 3/4-hour (45-minute) fire protection-rated doors when the stairs served three or fewer stories. In these cases, the doors were (and still are) permitted to have up to 1,296 sq. in. of fire protection-rated glass (e.g., wire glass). In this scenario, neither the 3/4-hourly rating nor large the sections of glass comply with today's codes and standards

Uninformed door inspectors are not aware that NFPA 101, *Life Safety Code* explicitly allows the continued use of existing 3/4-hour (45-minute) fire protection-rated doors in vertical openings (e.g., stair towers) and exit enclosures—see paragraph 8.3.4.3 in NFPA 101, 2012. (Note: In NFPA 101, 2000, this provision is in 8.2.3.2.3.1, Exception 3.) To be clear, the doors covered in this provision are older existing doors—circa 1970 (and before). Remember, fire doors do not have expiration dates.

Notice how well the first two principles work together. The first principle reminds us that we need to know what the code (and standard) requirements were at the time of installation. While the second principle instructs us to trust (but verify) that the fire doors provide the appropriate level of fire protection-rating for the openings in which they are installed.

Principle number 3 instructs us that: "Door assemblies are required to be maintained in working condition throughout the life of their installation." Said another way, **fire doors must be kept in a constant state of readiness**. Perhaps the latter statement makes the case more clear; fire doors must be ready and able to perform their intended function at all times. That is to say, fire doors (of all types) must prevent a fire from spreading.

What does *working condition* mean? As it concerns fire doors, *working condition* means that the doors are always ready to prevent a fire from spreading; it's more than just how the doors open and close under normal—non-fire emergency—conditions. *Working condition* is subjective to the type of fire door assembly in question. For example, swinging fire doors with builders hardware (as specified in Chapter 6 of NFPA 80) are required to:

- Swing easily and freely
- Close completely
- Latch positively

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Fire Doors continued....

Principles of Performing Door Safety Inspections (Part 2)

IMPORTANT: These basic operational functions apply to swinging fire doors of all levels of fire ratings—there are no exceptions. These are the most easily explained conditions; there are many more conditions that are subject to specific door assemblies.

NFPA 80's door safety inspections verify that fire doors are installed correctly and kept in a constant state of readiness to prevent a fire from spreading. When you consider that many swinging fire doors are subjected to high-frequency usage, accelerating wear and tear on the assemblies (and their components), you see why these inspections become necessary. If the doors don't close completely (from any open position), or if they don't latch positively when closed, they cannot be expected to prevent a fire from spreading.

Some types of fire doors, such as rolling steel doors (as specified in Chapter 11 of NFPA 80), might be kept in the open position and arranged to close only under fire emergency conditions. In other words, they are automatic-closing fire doors—doors that close under alarm or periodic testing conditions only. Because these doors are opened and closed infrequently, NFPA 80's door safety inspections are even more critical since the inspectors need to verify that the doors are able to close completely. *Working condition* for rolling steel doors, as mentioned above, means that the doors are always ready to fulfill their fire

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protection role, that is, to prevent a fire from spreading.

Fire doors are specially-engineered systems that require a high degree of attention to detail from specifying to supplying, to installing, inspecting (and testing), and maintaining them throughout the life of their installations. Remember, swinging fire doors are comprised of mechanical components that are subject to wear and tear. Accordingly, all swinging fire doors require some level of maintenance to keep them in a constant state of readiness.

Principle number 4 informs us that: *“The capabilities of today’s door assembly components should not be ascribed to older existing components.”* One way to remember this principle is to ask yourself, “Is this how the door was tested?” Keep it simple. When it comes to assessing the condition of a fire door assembly, especially components, they all need to be installed in accordance with their individual published listings and their installation instructions. Moreover, they must function as required by the applicable codes and standards.

The use of fire pins on pairs of swinging doors is an example of applying this principle. Fire pins (aka thermal pins and auxiliary latches) have been in the industry since the early 1990s. Consequently, older existing swinging fire doors were not tested with fire pins. For this reason, fire pins should not be installed on older existing doors without first confirming their installation with the respective door manufacturer.

Inspecting pairs of doors with fire pins is problematic, even on more recently manufactured doors. Some, but not all, types of fire-rated wood doors have been tested with fire pins. Today, generally, most new pairs of fire-rated wood doors require one fire pin (in the lower portion of the door height) that extends from one door into the vertical edge of the opposing doors. There are numerous exceptions to this application. Some pairs of fire-rated wood doors require two fire pins. Other pairs of fire-rated wood doors require a fire pin at the top of each door (extending into the frame head) and a third pin projecting from the vertical edge of one door into the opposing door at about 40 in. above the floor.

Further complicating the use of fire pins on pairs of swinging fire doors is that the applications vary depending on the wood doors' internal construction. Each wood door manufacturer uses multiple types of internal construction to fabricate their doors. A door of one type of internal construction might require two fire pins, and another type of door construction might not require any fire pins. It all depends on how each door construction was tested by one of the nationally recognized testing laboratories (NTRLs).

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Fire Doors Continued....

Principles of Performing Door Safety Inspections (Part 2)

Here the uninformed, untrained door inspector does not take the time to research the applications of fire pins (or the lack thereof) found during the inspections, leading them to cite the applications of fire pins as a deficiency summarily. The point here is that the inspectors need to take the time to research and document the applications of fire pins in each facility. Once done, the documentation remains in the history of each door assembly, expediting future door safety inspections.

The use of fire protection-rated and fire resistance-rated glass and glazing materials in fire door assemblies is another example of the capabilities and limitations of today's doors versus older existing doors. Remember, it all goes back to how the doors were tested. Always.

The fifth principle of performing door safety inspections reminds us that: *"AHJs and code officials determine when something is acceptable under the codes."* The adage, *"For every rule, there is an exception,"* has applications for fire door assemblies and their subsequent inspection and testing. Standards such as NFPA 80 can't contain provisions and requirements for every component, construction, and installation of the construction, equipment, and systems specified in the standards. New products are coming to market all the time, and it is not feasible for standards like NFPA 80 to be up-to-date at all times. Likewise, it is impossible for building, fire, and life safety codes to cover every aspect of the buildings and structures that they govern.

One of the roles of the authorities having jurisdiction (AHJ), building code officials, and other code enforcement personnel, is that they, and only they, have the authority to determine when alternative and new construction, equipment, products, and systems that is not expressly permitted in the codes, is acceptable. In other words, they determine if proposed alternative or new construction, equipment, products, and systems meet the intent of the applicable code.

Here are a couple of examples of when the AHJ's approval is necessary for fire doors. The first example is in applications where the architect designed an opening that requires an oversized fire door (e.g., rolling steel door). As the name implies, oversized fire doors are too large to be subject to fire door testing. In these cases, the labels on the doors identify them as being oversized and that the doors are otherwise identical to their standard-sized counterparts. (Note: Oversized fire door labels include the mark of an NTRL and, usually, the hourly rating of the door.)

The second example is in applications where the architect specifies combinations of swinging door frames, doors, and hardware components that require cutouts and mortises that have not been subjected to fire door testing. In these cases, the labels attached to the door frames and doors have a special type of label; a construction label. Construction labels include statements to the effect that the door frames and doors are constructed identically to their labeled counterparts, but they cannot bear a label since they have conditions (e.g., special hardware mortises, large cutouts for glass, oversized in height, width, or both) that have not been subjected to fire door testing. (Note: Construction labels do not include hourly ratings or the mark of an NTRL.)

AHJs need to approve the use of oversized and construction-labeled fire door assemblies before they are installed. Usually, this approval occurs during the plan review phase.

In the context of performing NFPA 80's door safety inspections, inspectors need to know that these special types of fire doors exist and that their installation required approval at the time of construction—Principle 1. Since these doors are used in locations that require a certain level of fire protection rating, inspectors need to treat them the same as other fire doors—Principle 2. The obvious exception being the conditions for the special types of labels should not be considered as deficiencies since the AHJs of the day approved their installation, even though they do not meet the requirements of today's codes and standards. For this reason, whenever oversized and construction-labeled doors are discovered during the inspection process, they need to be documented as "exceptions to the rules" and treated as fire door assemblies otherwise—Principle 3.

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Fire Doors Continued....

Principles of Performing Door Safety Inspections (Part 2)

Summary

There are always more existing (and older existing) fire doors at any given time than there are new. Everyone involved in implementing and executing NFPA 80's door safety inspections needs to know how and when to apply its many and varied provisions and requirements for new and existing fire doors, especially older existing fire doors.

Other factors such as poor installation practices and improper maintenance (or the lack thereof) cause fire doors to be non-compliant with NFPA 80 and, therefore, the prevailing code(s). More importantly, poorly installed, poorly maintained, and malfunctioning fire doors cannot prevent a fire from spreading.

As mentioned earlier, fire doors are specially-engineered systems that require an increased level of attention to detail throughout their installations. Catastrophic failure of fire door assemblies might be the result of seemingly minor points of non-compliance (e.g., excessive door gap dimensions). It cannot be overstated; fire doors must be constantly ready to prevent a fire from spreading. Fire doors (and their components) must be installed in accordance with their published listing and installation instructions, and they must function as required by the applicable code(s). When in doubt, ask yourself: *"Is this how the door was tested?"*

You might find it helpful to review the principles of performing door safety inspections from time to time; here they are for your convenience:

1. Swinging door assemblies, regardless of their fire rating, were installed in accordance with the codes that were in effect at the time of construction.
2. Fire door assemblies provide the appropriate level of fire protection-ratings for the openings in which they are installed.
3. Fire doors must be kept in a constant state of readiness.
4. The capabilities of today's door assembly components should not be ascribed to older existing components.
5. AHJs and code officials determine when something is acceptable under the codes.

The next article in this series covers NFPA 80's Acceptance Testing provisions and requirements.



Effective Point of Interest #1

Certification Participation Requirement Revisions

[Effective July 1, 2021](#), The Joint Commission approved minor revisions to three elements of performance in its "Certification Participation Requirements" (CPR) chapter for all certification programs. These changes align with those made in the "Accreditation Participation Requirements" (APR) chapter.

- [Comprehensive Cardiac Center Certification](#)
- [Disease-Specific Care Certification](#)
- [Health Care Staffing Certification](#)
- [Integrated Care Certification](#)
- [Medication Compounding Certification](#)
- [Patient Blood Management Certification](#)
- [Palliative Care Certification](#)
- [Perinatal Care Certification](#)

Benefits of Working from Home

Employer Benefits to Employee's working from home when available.

As employers, our lives and those of our employees changed due to the pandemic. We had to rethink how we operate and make changes on the fly. In making these decisions, we learned that there are benefits not only for our businesses but for our employees. In the past, a business may have been afraid of letting go of some of the traditional business operations (e.g., office space). I think many businesses learned that traditional office settings are not as necessary and will be reconsidering the size of space needed to operate as we move forward.

Let's face it, the traditional corporate business structure changed globally. Everyone realized what they had been missing from home. As a group, we learned the value of spending time with our loved ones. We were forced to stop and reevaluate our own world and those in it. We were forced to look for new ways of communicating, and how to incorporate working from home. During this pandemic, we learned to set boundaries, utilize better time management, and find more efficient ways of using resources.

I know there is a large learning curve to all these newfound realizations. We adapted. Even though there have been tough times and losses, we should make the best of what we went through and benefit from lessons learned. As we prepare for the future, we should note where we have grown and use it. We need to continue to adapt to the challenges we have ahead of us. Personally, I always try to look for the bright side or learn a lesson in everything, good or bad. Every night I look at my day and name the things I am thankful for and whether I learned something before going to bed. These can be simple things or more complex.

For the purpose of this article, I am looking at what businesses learned. Contrary to conventional wisdom, businesses learned that productivity went up, not down, for employees working at home. Studies show employees improved their time management skills and used it to their advantage to suit their home environment. It was also shown that work stress is down by not just a little but a lot, for many reasons. Employees are tackling issues that arise on the fly and staying on top of daily details without distractions. Virtual meetings are more of a relaxed atmosphere. Sharing screens makes for a more thought-out presentation and fuels new ideas. The new efficient home environment utilizing tested and proven programs and equipment is making working from home cost effective for businesses, saving their bottom line and, in some cases during the pandemic, keeping them out of the red. Businesses trimmed what they need to run efficiently, which allowed for employee retention and kept their businesses afloat. Businesses adapted their services, created new ones, explored new areas, and learned the power of communicating with others for support.

Studies show that employee work satisfaction increased dramatically. Some of the daily stresses, over which employers have no control, is falling by the wayside and benefitting employers in many ways. Examples of daily stress over which employers have no control that impact employees are daily commutes, commuting costs, costs of work clothes, general distractions, employees' worry of loved ones (what are we missing, appointments, meals, and much more). Not having those worries constantly has a large impact allowing employees to feel more satisfied, freeing up time and allowing them to be more focused on the tasks they have at hand. In return, employees are happier and feel more productive.

Other items that have been attributed to a healthier and happier employee is pet therapy, lifestyle flexibility, and work life balance. One area that was an issue for the first part of the pandemic was eating healthy. For some of us, this may have fallen by the wayside. It was an adjustment period for having favorite foods on hand at a moment's notice. Those of us who may have gained a few pandemic pounds have learned to place limits. Employees are incorporating home exercise into daily life and getting outside more. Never underestimate the power of sunshine for adding some balance to your mind and body. Employees are now trying to eat healthier, and home-made foods are coming back from the past. New technologies are now making that even easier (e.g., instant pot, ninja foodi products, etc.). Studies show that when employees feel happier and healthier in their home life, they are more creative, responsive, and productive at work.

As we start opening up to some aspects of the old way of doing things, business owners need to take this into account. Some employees may want to continue working from home while others might want to come back into the office on a limited basis. Looking at the benefits versus the costs will ultimately play a big part in the new business plans to come.



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