

HEALTH AND SOCIAL SERVICES

104z-17

(29) VERTICAL SHAFTS INCLUDING STAIRWELLS. (a) All vertical shafts shall be enclosed and be of at least two-hour fire-resistive construction with self-closing Class "B" 1½-hour fire doors at each floor. No vertical shafts except elevators and stairwells may open directly to a corridor.

(b) Sprinkler heads shall be provided at the top of each linen or trash chute and also in the room in which the chute terminates. The room in which the chute terminates shall also be of self-closing two-hour fire-resistive construction with a Class "B" 1½-hour fire door.

(c) Linen and Trash Chutes. Construction shall not have chutes opening directly onto an exit corridor, chutes shall be sprinklered, and the room in which chutes terminate shall be sprinklered and of two-hour fire-resistive construction with a Class "B" 1½-hour self-closing fire door.

(30) FIRE EXTINGUISHERS. (a) Extinguisher mounting. Extinguishers shall be placed where they are clearly visible and at a readily accessible, convenient height. They shall not be tied down or locked in a cabinet, nor is it accepted practice to place them in a closet or on the floor.

(31) SMOKESTOP PARTITIONS. (a) Each floor used for patient bedrooms, unless provided with a horizontal exit to another building or through a fire wall, shall be divided into at least two sections by smokestop partitions.

(b) Any smokestop partition shall have a fire-resistive rating of at least one hour. Such a partition shall be continuous from outside wall to outside wall and from floor to floor or roof deck above. Such a partition shall have an opening only in a public room or corridor.

(c) No more than 150 feet of corridor length without smokestop partitions or horizontal exits shall be permitted.

(d) At least 30 net square feet per institutional occupant shall be provided on each side of the partition for the total number of institutional occupants on both sides.

(e) Doors in Smokestop Partitions. 1. Doors in smokestop partitions shall be of the self-closing swinging type. Doors shall be at least metal, metal covered or 1¾-inch solid core wood construction with view panels of approved clear wired glass not exceeding 1,296 square inches per panel in steel frames. The doors shall be capable of being opened or closed manually.

2. The doors may be installed to be held in an open position by electric hold-open devices and shall close upon activation of the fire alarm system. The doors shall also be capable of being opened or closed manually. In addition, the doors shall close by at least one of the following methods:

a. Activation of the sprinkler system; or

b. Activation of any detector of a complete smoke or products of combustion system; or

c. Local smoke detection devices installed in such a way as to detect smoke or other products of combustion, on either side of the door opening.

3. The doorway openings shall not constrict the passageway by more than 10 percent of the corridor width.

(32) ADMINISTRATION AND PATIENT ACTIVITY AREAS. Administration and patient activities areas shall be provided and will depend on the requirements of the facility. The sizes of the various departments will depend upon the requirements of the facilities. Some functions allotted separate spaces or rooms in these general standards may be combined providing that the resulting plan will not compromise acceptable standards of safety and of medical and nursing practices and the social needs of patients.

(a) Administration department areas shall include:

1. Business office
2. Lobby and information center
3. Office of administrator
4. Admitting and medical records area
5. Public and staff toilet room
6. Office of director of nurses
7. Inservice training area

(b) Patient activities areas shall include:

1. Occupational therapy
2. Physical therapy
3. Activity area
4. Dental facilities
5. Beauty and barber shop

(33) SUBMISSION OF PLANS AND SPECIFICATIONS. (a) One copy of schematic and preliminary plans shall be submitted to the department for review and approval of the functional layout.

(b) One copy of working plans and specifications shall be submitted to and approved by the department before construction is begun.

(c) These plans shall show the general arrangement of the buildings, including a room schedule and fixed equipment for each room and a listing of room numbers, together with other pertinent information. Plans submitted shall be drawn to scale.

(d) Changes in the approved working plans affecting the application of the requirements herein established shall be made in the approved working plans and shall be submitted to the department for approval.

(e) If on-site construction above the foundation is not started within 6 months of the date of approval of the working plans and specifications per paragraph (b) above, the approval is void and the plans and specifications shall be resubmitted for reconsideration of approval.

(34) LOCATION. (a) The site shall adhere to local zoning regulations.

(b) A minimum of 15 square feet per patient bed shall be provided for outdoor recreation area, exclusive of driveways and parking area.

(c) Space for off-street parking for staff and visitors shall be provided.

(35) CONSTRUCTION. (a) All nursing homes shall meet the following fire protective requirements.

1. One-story buildings shall be of not less than one-hour noncom-

bustible fire-resistive construction throughout, with the following exceptions: Walls enclosing stairways, elevator shafts, chutes and other vertical shafts, boiler rooms and storage rooms of 100 square feet or greater area shall be of two-hour fire-resistive construction.

2. Buildings 2 stories or more in height shall be constructed of at least two-hour fire-resistive construction.

3. Automatic sprinkler protection shall be provided throughout all buildings.

4. All nursing homes shall have an approved automatic fire detection system which responds to products of combustion other than heat. The system shall be installed in all corridors with detectors spaced not further apart than 30 feet on centers or not more than 15 feet from any wall. The system shall be electrically interconnected to the fire alarm system. Where each patient sleeping room is protected by such an approved detection system and a local detector is provided at each smoke partition, the corridor system will not be required on the patient sleeping room floors.

5. Construction requirements shall be as defined in Wisconsin Building Code Ind. 51. ✓

**History:** Cr. Register, November, 1974, No. 227, eff. 12-1-74.

### HOUSEKEEPING SERVICES

**H 32.31 Housekeeping services.** The nursing home shall provide the housekeeping and maintenance services necessary to maintain a sanitary and comfortable environment.

(1) **HOUSEKEEPING SERVICES.** The nursing home shall provide sufficient housekeeping and maintenance personnel to maintain the interior and exterior of the nursing home in a safe, clean, orderly and attractive manner. Nursing personnel shall not be assigned housekeeping duties.

(a) Housekeeping personnel, using accepted practices and procedures, shall keep the nursing home free from offensive odors, accumulations of dirt, rubbish, dust and safety hazards.

(b) Floors shall be cleaned regularly. Polishes on floors shall provide a nonslip finish; throw or scatter rugs shall not be used except for nonslip entrance mats.

(c) Walls and ceilings shall be maintained free from cracks and falling plaster and shall be cleaned and painted regularly.

(d) Clean rooms. Rooms shall be kept clean, well-ventilated and tidy at all times.

(e) All carpeting, ceilings, floors and walls shall be kept in good repair. Carpeting that is worn, grossly contaminated or badly soiled shall be removed.

(f) Deodorizers shall not be used to cover up odors caused by unsanitary conditions or poor housekeeping practices.

(g) All furniture and furnishings shall be maintained in good repair.

(h) Storage areas, attics and cellars shall be kept safe and free from accumulations of extraneous materials such as refuse, discarded furniture and old newspapers. Combustibles such as cleaning rags and compounds shall be kept in closed metal containers.

(i) Labeling poisonous compounds. All poisonous compounds shall be so labeled as to be easily identified.

(j) Storage of poisonous compounds. Poisonous compounds (including domestic poisons) shall be stored independently under lock and key separately from food and kitchenware, drugs, and medicine.

(k) The grounds shall be kept free from refuse and litter. Areas around buildings, sidewalks, gardens and patios shall be kept clear of dense undergrowth.

(l) The interior and exterior of the buildings shall be painted as needed to protect the surfaces. Loose, cracked or peeling wallpaper or paint shall be promptly replaced or repaired.

(m) The facility shall be maintained free from insects and rodents.

1. A pest control program shall be in operation in the nursing home. Pest control services shall be provided by maintenance personnel of the nursing home or by contract with a pest control company. Care shall be taken to use the least toxic and least flammable effective insecticides and rodenticides. These compounds shall be stored in nonpatient areas and in nonfood preparation and storage areas. Poisons shall be under lock.

(n) Windows and doors shall be appropriately screened during the insect breeding season.

(o) All windows and doors used for ventilation purposes shall be provided with wire screening of not less than number 16 mesh or its equivalent and shall be properly installed and maintained to prevent entry of insects. Airflow curtains, properly installed, shall be acceptable in lieu of screens.

(p) Harborage and entrances for insects and rodents shall be eliminated.

(q) Garbage and trash shall be stored in areas separate from those used for the preparation and storage of food and shall be removed from the premises. Containers shall be cleaned regularly.

(r) All garbage and rubbish shall be stored in leakproof, nonabsorbent containers with close-fitting covers.

(s) Garbage and rubbish shall be disposed of in a manner that will not permit transmission of disease, create a nuisance or provide a breeding place for flies. The use of paperboard containers for temporary storage of garbage, rubbish or waste is not permitted.

(t) The facility shall have available at all times a quantity of linen essential for the proper care and comfort of patients. Linens shall be handled, stored and processed so as to control the spread of infection.

1. Soiled linen shall not be sorted, laundered, rinsed or stored in bathrooms, patient rooms, kitchens or food storage areas.

2. Common towels shall not be used.

(2) PLANT MAINTENANCE. (a) The building shall be maintained in good repair and free of hazards such as cracks in floors, walls or ceilings; warped or loose boards; warped, broken, loose or cracked floor covering such as tile or linoleum; loose handrails or railings; loose or broken window panes and any similar hazards.

(b) All electrical, mechanical, water supply, fire protection and sewage disposal systems shall be maintained in a safe and function-

ing condition. Electrical cords and appliances shall be maintained in a safe condition. Frayed wires, cracked or damaged switches, plugs and electrical fixtures shall be repaired or replaced. Electrical cords shall not be strung under carpets or rugs or draped over fixtures or piping in a hazardous manner.

(c) All plumbing fixtures shall be in good repair, properly functioning and satisfactorily provided with protection to prevent contamination from entering the water supply piping.

(d) The heating system shall be maintained in a safe and properly functioning condition.

(e) Private water supplies. Water samples from an approved well shall be tested at the state laboratory of hygiene or a state approved laboratory semi-annually in April and October of each year. Reports of such tests shall be kept on file in the nursing home.

**History:** Cr. Register, November, 1974, No. 227, eff. 12-1-74.

### DISASTER PLAN AND PATIENT SAFETY

**H 32.32 Disaster plan.** The nursing home shall have a written procedure which shall be followed in case of fire or other disaster.

(1) **WRITTEN PROCEDURE.** The procedure shall specify persons to be notified, locations of alarm signals and fire extinguishers, evacuation routes, procedures for evacuating helpless patients, frequency of fire drills and assignment of specific tasks and responsibilities to the personnel of each shift.

(a) The plan shall be developed with the assistance of qualified fire and safety experts.

(b) All employes shall be oriented to this plan and trained to perform assigned tasks.

(c) Duties and responsibilities shall be specified in the plan for each discipline.

(d) Drills shall be held at least 4 times a year on each shift and the plan shall be reviewed and modified as necessary. Records of drills and dates for the drills shall be maintained.

(e) The posted plan shall include a diagram of the immediate floor area and shall show the exits, fire alarm stations and locations of fire extinguishers. The plan shall be posted near the telephone and in conspicuous locations in the corridor throughout the nursing home.

(2) **FIRE INSPECTIONS.** The administrator of the nursing home shall arrange for:

(a) **Fire Protection Contract.** Where the nursing home is located in a city, village or township that does not have an official established fire department, the licensee shall obtain and maintain a continuing contract for fire protection service with the nearest municipality providing such service. A certification of the existence of such contract shall be forwarded by the licensee to the department.

(b) At least semiannual inspection of the nursing home by the local fire inspection authorities. Signed certificates of such inspections shall be kept on file in the nursing home.

(c) Certification by the local fire authority as to the adequacy of a written fire plan for orderly evacuation of patients, as well as the

fire safety of the home, and copies of such certification shall be kept on file within the nursing home.

(3) **FIRE REPORT.** All incidents of occurrence of fire in a nursing home shall be reported to the department within 72 hours.

(4) **SMOKING.** Smoking by patients shall be permitted only in designated visually supervised areas.

(5) **LIGHTS.** Flame lights shall not be permitted.

(6) **SCATTER RUGS AND SLIPPERY FLOORS.** Scatter rugs and highly polished, slippery floors are prohibited. All floor coverings and edgings shall be securely fastened to the floor or so constructed that they are free of hazards such as curled and broken edges.

(7) **ROADS AND SIDEWALKS.** The access driveway to the nursing home shall be kept passable and open at all times of the year. Sidewalks, drives, fire escapes and entrances shall be kept free of ice, snow and other obstructions.

(8) **TEMPORARY DECORATIONS.** All temporary decoration materials shall be flame retardant and constructed and installed so as not to constitute a fire, electrical or safety hazard.

(9) **FIRE EQUIPMENT.** All fire protection equipment shall be maintained in readily usable condition and inspected annually. An additional fire extinguisher suitable for grease fires shall be provided in or adjacent to the kitchen. Each extinguisher shall be provided with a tag for the date of inspection.

**History:** Cr. Register, November, 1974, No. 227, eff. 12-1-74.