October 30, 2009

TO: General Acute Care Hospitals

SUBJECT: H1N1 Response

Authority:
Government Code (GC) §8558
California Code of Regulations (CCR), Title 22, §70129, §70217, §70805, §70809

Background:
As the ongoing California Department of Public Health (CDPH) H1N1 response continues, CDPH Licensing and Certification Program (L&C) continues to provide information to licensed health care facilities. This All Facilities Letter (AFL) outlines requirements during this potential health care emergency. See Sections I through VI below for more information.

I. Recission of AFL 09-19’s Reporting Requirements:
AFL 09-19 stated, “All cases of confirmed or probable H1N1 Flu infection in hospitalized patients must be reported within one working day to the local health department and also to the CDPH L&C District Office. Patients with severe respiratory illness who have H1N1 Flu infection as part of their differential diagnosis should also be reported.”

This AFL rescinds the above instruction to hospitals to report occurrences of H1N1 to their L&C District Office. The above rescission does not apply to unusual occurrences which must continue to be reported in compliance with regulations.

II. Tent Use:
Approval to set up a tent is required by California Code of Regulations Title 22 (22 CCR), §70805, which states that, “Spaces approved for specific uses at the time of licensure shall not be converted to other uses without the written approval of the Department.” Use of hospital property for tents constitutes a conversion of space. This means that hospitals must obtain CDPH’s written approval for tent use. Approval of tents will not be provided unless the hospital has obtained written approval from the local fire authority for tent use.
In the absence of any specific suspension of statute or regulation by Governor’s Executive Order, tents will be approved for use only as waiting rooms, to conduct triage and Medical Screening Exams, to provide basic first-aid, and outpatient treatment that meets all applicable rules and regulations. Any other use may require a program flex. A form has been provided that can be used to submit a program flex request to provide services in tents beyond those described above. See Section VI below.

Non-declared emergency tent use approval:  
CDPH L&C has been addressing high patient volume at individual hospital Emergency Departments (EDs). This has included approving the use of tents to meet the increased demand for medical care.

To receive approval for tent use, hospitals must contact their L&C District Office (DO), explain their situation, justify their use of tents, and obtain tent use approval.

Additionally, L&C has determined that the present threat of widespread H1N1 infection could cause many hospitals to have a need to convert space almost simultaneously. This determination has resulted in the development of an alternative form for L&C’s tent use approval during a declared emergency, in addition to this case-by-case approval process. See the following for this process.

Tent Use Approval during a declared emergency:
This AFL is L&C’s written approval of tent use as long as the necessary criteria, provided below, have been met. This alternative approval process for the use of tents is only for the current H1N1 response and only during the time of a declared emergency, specifically when:

- The Governor has declared an emergency, as defined in GC Section §8558, for the hospital’s geographical area and stated that health care surge exists,

  OR

- An authorized local official, such as a local health officer or other appropriate designee, has declared a local emergency, as defined in GC Section §8558, for the hospital’s geographical area and stated that health care surge exists,

  AND

- Hospitals have reported setting up and using a tent to their local L&C District Office (A form has been provided that can be used to notify L&C. See Section VI below.)

Hospitals should expect L&C to periodically contact them to get status reports on their use of a tent. When a declared emergency that meets the above criteria is over, there is no further approval for the use of tents for patient care. Please notify
your local L&C District Office when the use of the tent is discontinued and the tent is taken down.

III. Patient Accommodations:
According to 22 CCR, §70809(a), “No hospital shall have more patients or beds set up for overnight use by patients than the approved licensed bed capacity except in the case of a justified emergency when temporary permission may be granted by the Director or his designee.”

Additionally, pursuant to 22 CCR §70809(c), “Patients shall not be housed in areas which have not been approved by the Department for patient housing and which have not been granted a fire clearance by the State Fire Marshal, except as provided in paragraph (a) above.”

Hospitals must request and receive L&C approval to use more beds than their licensed capacity. This approval process is distinct from the program flexibility approval process as described in 22 CCR §70129. The services provided within the expanded capacity must be in compliance with all applicable laws and regulations at all times. A form has been provided that can be used to submit requests for space accommodation approval. See Section VI below.

IV. Space Conversion Approval:
22 CCR, §70805 requires, “Spaces approved for specific uses at the time of licensure shall not be converted to other uses without the written approval of the Department.” Use of hospital property for any purpose other than that approved at the time of licensure, therefore, constitutes a conversion of space and requires L&C approval.

The approval process to convert space is distinct from the program flexibility approval process as described at 22 CCR §70129. The services provided within the expanded capacity must be in compliance with all applicable laws and regulations at all times. A form has been provided that can be used to submit requests for space conversion approval, see Section VI below.

V. Nurse to Patient Ratio Requirements:
L&C has no mechanism for “suspending” or “waiving” regulations which represent the minimum standards providers are required to meet at all times. The nurse to patient ratios, at 22 CCR §70217, are the same as all other regulations. If a hospital has an alternative means of meeting the intent of the regulations, then the hospital can request program flexibility in accordance with 22 CCR §70129, and L&C will give the request all due consideration. Please submit your request using the form provided at Section VI below.

VI. Request Forms:
A form to use in submitting H1N1 requests for L&C approvals, as referenced above, is provided at http://www.cdph.ca.gov/programs/Pages/LnCH1N1FacilityRequests.aspx.
If you have questions about this AFL, please contact your local L&C District Office.

Sincerely,

Original Signed by Kathleen Billingsley, R.N.

Kathleen Billingsley, R.N.
Deputy Director
Center for Health Care Quality
CDPH Guidance: Approval for Health Care Facility Use of Surge Tents
January 20, 2010

This is to provide guidance for hospitals and other health care facilities and local health departments on regulatory requirements from the State Fire Marshal and the Office of Statewide Health Planning and Development (OSHPD) for tents used to accommodate a surge in demand for health care.

This guidance is in addition to the provisions for written approval of tent use described in All Facilities Letter (AFL) 09-39, H1N1 Response, issued on October 30, 2009, by the California Department of Public Health, Licensing and Certification Division.

The guidance below is intended to expedite approval of operation of surge tents. Health care facilities and local government are encouraged to preplan for establishing surge tents so that when needed, the tents can be rapidly erected and operated.

Three entities are required to approve surge tents:

- The State Fire Marshal provides statewide rules for prevention of fire in connection with the use of tents, awnings or other fabric enclosures. Included in these standards is the requirement that all tents be made of material approved by the State Fire Marshal.

- Local fire departments have responsibility to inspect the location and configuration of tents

- OSPHD has responsibility to protect the hospital building from adjacent hazards and exposures, including tents.

The functions of each of these entities are described below.

State Fire Marshal

Health and Safety Code Section 13116 requires the State Fire Marshal to prepare and adopt rules and regulations establishing minimum requirements for the prevention of fire and panic in connection with the use of tents, awnings or other fabric enclosures. The State Fire Marshal has done so in the California Building Code (CBC), California Fire Code (CFC) and Title 19 California Code of Regulations (CCR).
Section 332, Title 19 CCR requires all tents manufactured for sale, sold, rented, offered for sale or used in California to be made from nonflammable material or material approved by the State Fire Marshal.

Section 335, Title 19 CCR requires each section of the top and sidewalls of large tents (ten or more occupants) to have the State Fire Marshal label. Small tents (nine or less occupants) may either have the State Fire Marshal label or meet the provisions of CPAI-84. When approving the permit for use of the tent, local fire authorities will be looking for these labels as well as considering other fire and life safety and building code issues (see below).

Due to recent discussions with hospital administrators and local fire authority officials to determine needs, and given the critical/urgent nature of a pandemic outbreak, the Office of the State Fire Marshal is providing the following:

- Expedited certification of tents
- Permitting tent and/or fabric manufacturers to field label tents after-contacting the Office of the State Fire Marshal
- Permitting tents to be field treated by an State Fire Marshal certified flame-retardant applicator

While many tent manufacturers have had their material approved for fire retardancy, the State Fire Marshal label may not have been affixed to their products prior to being sold. In these instances, tent manufacturers will have copies of the State Fire Marshal Certificate of Registration and this documentation will provide proof of compliance to the local fire authorities.

Hospitals may experience the following when a local fire authority inspects a tent not affixed with the State Fire Marshal label:

- The local fire department authority may accept the manufacturer’s copy of the State Fire Marshal’s Certificate of Registration and approve the tent; OR

- The local fire department may:
  - Perform a flammability test (field test) on the tent prior to approving it;
  - Require alternate means of protection; or
  - Deny approval for the use of the tent.

For assistance in obtaining an approved State Fire Marshal Certificate of Registration, please contact Francis Mateo, State Fire Marshal Flame Retardant Program Coordinator at (916) 445-8396 or email: francis.mateo@fire.ca.gov.

The Office of the State Fire Marshal, in partnership with the California Fire Chiefs Association, recognizing the need for expedient placement of tents to provide surge capacity, has issued a letter concerning these tents. This letter can be found at http://osfm.fire.ca.gov; a copy is also enclosed with this guidance.

Local Fire Department

When the local fire department reviews the proposed location for the tent, it will consider many factors. It is always advisable to meet with the fire department well in advance of the time when
tents may need to be erected. Accurate site plans are always helpful and in some cases required to be submitted to the local fire department for review and approval prior to erection of the tent.

Different jurisdictions have different requirements relating to the use of temporary structures. It is very common for the fire department to require a permit for a tent which may also include a fee. Some local fire departments require safety inspections prior to using the tent after it has been erected and there may be a fee for that inspection. A few fire departments require a fire safety officer to stand-by for the period of time the tent is to be occupied – similar to a fire watch; this may require a fee as well.

Some of the concerns the local fire department will be watching for include the following:

- Fire apparatus access roads shall be provided to all sides of the tent in accordance with Section 503 of the Fire Code.

- Tents may not be located within 20 feet of lot lines, buildings, other tents, canopies or membrane structures, parked vehicles or internal combustion engines. For the purpose of determining required distances, support ropes and guy wires shall be considered as part of the tent.

- An unobstructed fire break passageway or fire road not less than 12 feet wide and free from guy ropes or other obstructions shall be maintained on all sides of all tents, canopies and membrane structures unless otherwise approved by the fire department.

- Tents and their appurtenances shall be adequately roped, braced and anchored to withstand the elements of weather and prevent against collapsing. Documentation of structural stability shall be furnished to the fire department on request.

- Exit openings from tents shall remain open unless covered by a flame-resistant curtain. Curtains shall be free sliding on a metal support. The support shall be a minimum of 80 inches above the floor level at the exit. The curtains shall be so arranged that, when open, no part of the curtain obstructs the exit. Unless approved otherwise by the fire department, curtains shall be of a color, or colors, that contrast with the color of the tent.

- Smooth-surfaced, unobstructed aisles having a minimum width of not less than 44 inches shall be provided from exits to all portions of the interior of the tent. The arrangement of aisles shall be subject to approval by the fire department and shall be maintained clear at all times during occupancy.

- Exits shall be clearly marked. Exit signs shall be installed at required exit doorways and where otherwise necessary to indicate clearly the direction of egress when the exit serves an occupant load of 50 or more. Exit signs shall be of an approved self-luminous type or shall be provided with an internal back-up battery capable of illuminating the sign for a minimum of 90 minutes after power has failed.

- The means of egress shall be illuminated with light having an intensity of not less than 1 foot-candle at floor level while the structure is occupied. Fixtures required for means of egress illumination shall be supplied from a separate emergency power circuit or from an internal battery.
The areas within and adjacent to the tent shall be maintained clear of all combustible materials or vegetation that could create a fire hazard within 30 feet of the structure. Combustible trash shall be removed at least once a day from the tent during the period the structure is occupied.

Smoking shall not be permitted in tents. Approved “No Smoking” signs shall be conspicuously posted.

Open flame or other devices emitting flame, fire or heat or any flammable or combustible liquids, gas, charcoal or other cooking device or any other unapproved devices shall not be permitted inside or located within 20 feet of the tent, canopy or membrane structures while open to the public unless approved by the fire code official.

Portable fire extinguishers shall be provided as required by the fire department.

Heating equipment, tanks, piping, hoses, fittings, valves, tubing and other related components shall be installed as specified in the California Mechanical Code and shall be approved by the fire department. Gas, liquid and solid fuel-burning equipment designed to be vented shall be vented to the outside air as specified in the California Mechanical Code. Such vents shall be equipped with approved spark arresters when required. Where vents or flues are used, all portions of the tent, canopy or membrane structure shall be not less than 12 inches from the flue or vent. Heating equipment shall not be located within 10 feet of exits or combustible materials. Electrical heating equipment shall comply with the California Electrical Code.

LP-gas equipment such as tanks, piping, hoses, fittings, valves, tubing and other related components shall be approved and in accordance with Chapter 38 of the Fire Code and the California Mechanical Code. LP-gas containers shall be located outside and safety release valves shall be pointed away from the tent. Portable LP-gas containers with a capacity of 500 gallons or less shall have a minimum separation between the container and structure not less than 10 feet. Portable LP-gas containers, piping, valves and fittings which are located outside and are being used to fuel equipment inside a tent shall be adequately protected to prevent tampering, damage by vehicles or other hazards and shall be located in an approved location. Portable LP-gas containers shall be securely fastened in place to prevent unauthorized movement.

Generators and other internal combustion power sources shall be separated from tents, canopies or membrane structures by a minimum of 20 feet and shall be isolated from contact with the public by fencing, enclosure or other approved means.

OSHPD

OSHPD jurisdiction is limited for construction projects that relate to the erection and use of temporary tents. OSHPD has the responsibility and authority to protect the hospital building from adjacent hazards and exposures, and will therefore need to review drawings for the mobile unit installation and any utility hookups that originate in or pass through any hospital buildings.

When located adjacent to hospital buildings, the fire resistance and opening protection requirements for the exterior walls of the hospital building shall be determined by the local fire
department based on the distance between the tent and the building in accordance with Section 704.3 and Tables 601 and 602 of the 2007 CBC. The fire department may or may not request an assumed property line be placed between the hospital building and the tent and the fire separation distances specified above may be reduced when the local fire department determines that the need for patient safety or protection warrants a reduction. Projections between the hospital building and the tent which comply with Section 704.2 of the 2007 CBC are not limited when they are protected with automatic fire sprinklers.

OSHPD will review utility connections (electricity, heating, air conditioning, etc.) for tents that originate in, pass through, or pass under buildings regulated by OSHPD.

OSHPD will not review the tents for conformance with California Building Standards Code requirements, including seismic anchorage of the tent and location of the tent as it relates to required side yards, when the tent is considered temporary.

Tents shall not obstruct the required means of egress from the hospital or obstruct fire department access, or access to fire protection equipment including fire hydrants, sprinkler control valves and fire department hose connections unless expressly permitted by the fire department.

For assistance with questions or concerns regarding OSHPD approval of tents, hospitals may contact Gary Dunger, Chief Fire & Life Safety Officer, at (213) 897-3111 or email: GDunger@oshpd.ca.gov
December 21, 2009

To All Interested Parties:

In June 2009, the World Health Organization indicated a flu pandemic was underway. This meant a global outbreak of the disease affecting people of all ages, backgrounds and locations, and one that could cause high numbers of illness and deaths as well as social disruption. One of the most serious effects a pandemic outbreak impacts is to local hospitals. Among the overwhelming emergency and critical care issues they will encounter, they will also need to set up temporary tent facilities to accommodate an influx of health care personnel and patients.

The CAL FIRE - Office of the State Fire Marshal (OSFM), in partnership with the California Fire Chiefs Association (CalChiefs), recognizes the unique circumstances and need for expedient placement of these tents. We want to provide assistance and coordinated efforts to local hospitals and the California fire service in addressing fire safety issues.

As required by State law, all tents designed for use by 10 or more people are required to have a State Fire Marshal (SFM) flame-retardant label (seal of certification) on each section of the top and sidewalls. When approving the permit for tent use, local fire authorities will be looking for these labels as well as considering other fire and life safety and building code issues. As a result of recent discussions with hospital administrators and local fire authority officials to determine needs, and given the critical/urgent nature of a pandemic outbreak, the OSFM is providing the following:

- Expedited certification of tents
- Permitting tent and/or fabric manufacturers to field label tents after contacting the OSFM
- Permitting tents to be field treated by an SFM certified flame-retardant applicator

While many tent manufacturers have had their material approved for fire retardancy, the SFM label may not have been affixed to their products prior to being sold. In these instances, the manufacturers will have copies of the SFM Certificate of Registration. This documentation will provide proof of compliance to the local fire authorities. Hospital staff may experience the following when a local fire authority inspects a tent not affixed with the SFM label:

- The local fire authority may accept the manufacturer’s copy of the SFM’s Certificate of Registration and approve the tent
Or they may:

- Perform a flammability test (field test) on the tent prior to approving it
- Require alternate means of protection; or
- Deny approval of the use of the tent

If a tent was not approved by the SFM, does not have an SFM Certificate of Registration, and therefore denied by the local fire authority, the hospital staff may contact Francis Mateo, SFM Flame Retardant Program Coordinator, at (916) 445-8396 or email francis.mateo@fire.ca.gov for assistance in obtaining an approved SFM certificate.

We ask that fire agencies contact hospital staff in their jurisdiction to share this information, and encourage hospital staff to work with their local fire department early in the permitting process. On behalf of the CAL FIRE -Office of the State Fire Marshal and the California Fire Chiefs Association, we thank you for your cooperative efforts and expeditious processing and approval of these essential temporary facilities.

TONYA L. HOOVER
Acting State Fire Marshal
CAL FIRE – Office of the State Fire Marshal

SHELDON D. GILBERT
President
California Fire Chiefs Association

UPDATED 11-08-11: Jason D. DeWitt, Office of the State Fire Marshall, at (916)445-4106 or jason.dewitt@fire.ca.gov