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Commissioner

# State of New Hampshire

DEPARTMENT OF SAFETY

*Division of Fire Safety*

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BULLETIN #	TITLE			INITIAL RELEASE
2020-11	Emergency Declaration-Healthcare Occupancy Guidelines			March 17, 2020
REVISION #	RELEASED BY	APPROVED BY	SOURCE	REVISION DATE
1	SPT	PJP	NFPA 101 & Governors Executive Order 2020-04	August 24, 2020

## Informational Bulletin 2020-11 Emergency Declaration – Healthcare Occupancy Guidelines

**Purpose:**

The purpose of this bulletin is to provide clarification and guidance for Healthcare Occupancies with regard to *Executive Order 2020-04 – An order declaring a state of emergency due to Novel Coronavirus (COVID-19)*.

This bulletin remains in effect for the duration of the state of emergency. This bulletin was originally numbered 2020-06 and has been renumbered 2020-11 on August 24, 2020.

**Background:**

Specifically, under RSA 4:45, III(e), the Governor has the authority to "perform and exercise such other functions, powers, and duties as are necessary to promote and secure the safety and protection of the civilian population. The Governor has "power to make, amend, suspend and rescind necessary orders, rules and regulations" to carry out emergency management functions in the event of a disaster beyond local control.

The Commissioner of the Department of Health and Human Services may waive any of the licensing or credentialing requirements of RSA 151 and accompanying regulations with respect to any hospital or healthcare facility.

The State Fire Marshal has the authority to waive, on a case-by-case basis, the requirements of the provisions of the fire code. Variances can be obtained by contacting Deputy State Fire Marshal Sean Toomey (see below).

All persons or businesses wishing to waive or modify healthcare licensing requirements shall work with DHHS, the State Fire Marshal’s Office and their respective AHJ’s. Any changes shall be coordinated, and must provide adequate levels of fire safety as it relates to the New Hampshire State Fire Code. Any changes shall be reviewed and approved by the local fire chief.

This bulletin provides guidance on some of the frequently asked and anticipated conditions impacting fire and life safety in healthcare facilities during this state of emergency.

## **Guidance/Considerations:**

### **Egress:**

- At no time shall egress be compromised, blocked or locked
- Approved delayed egress is allowed as permitted in the Life Safety Code

### **Tents used for Temporary Screening Spaces:**

- Any tents over 400 square feet shall meet the requirements of the Tent Inspection Checklist: <https://www.nh.gov/safety/divisions/firesafety/documents/TentInspectionChecklist.pdf>
- If temporary heating is installed, carbon monoxide alarms shall be provided
- Tents located adjacent to a building shall not obstruct egress or sprinkler systems under canopies

### **Conversion of non-patient areas to patient care areas need to consider the following:**

(Examples: converting a conference room into a patient ward, converting medical office space/building into a patient room for overnight stay)

- Egress
- Ventilation
- Fire protection systems to include fire alarm and sprinkler systems
- Use of medical gas
- Defend in place strategy
- Staffing

### **Conversion of areas for daycare use by employee dependents:**

- Space sized to accommodate 1 person/35 square feet
- Review space for sufficient egress
- Review fire protection systems in place

### **Sprinkler, Fire Alarm & Fire Protection System Inspections:**

- Fire protection system inspections shall be completed in accordance with the State Fire Code. Contractors shall work with the facilities to establish requirements for necessary PPE and other precautions for conducting the inspections.

### **Fire Drills:**

- Required evacuation, relocation and fire drills shall resume with necessary adaptations for social distancing and considerations for the care status of patients. Facilities should work with their local fire departments to develop an interim plan.
- If it is impractical to complete full scale drills due to COVID the facility should receive approvals from the local fire department, SFMO and DHHS. At a minimum staff need to be reviewing and practicing the plans and additionally know the full capabilities of each resident in the event an evacuation becomes necessary. If a resident needs assistance due to their current medical status it may become necessary to add additional one on one staffing.

***This situation remains fluid and we are committed to working with all stakeholders to balance their needs while maintaining an adequate level of fire and life safety during this event. Any/all questions regarding modifications to the fire or life safety code should be directed to the following:***

DHHS Life Safety  
Wendy Smigelski: 271-9037

State Fire Marshal's Office  
Deputy State Fire Marshal Sean Toomey: 223-4375

Revision #1- Changes to Fire Protection System Inspections, added fire drill guidance.