



SUBJECT

Healthcare Decontamination Facilities

PIN: 35

Effective: 7/21/2003

Revised: 12/5/2013



PURPOSE

The purpose of the Policy Intent Notice (PIN) is to clarify the information that must be provided to the Office regarding the impact of simultaneous emergency decontamination facilities on the acute care hospital.

BACKGROUND

Many health facilities are contemplating the construction or installation of mass decontamination facilities to be used in response to nuclear, biological, chemical, radiological or other hazardous materials exposure requiring the simultaneous emergency decontamination of large numbers of people. At a minimum these facilities normally consist of showers to wash off chemical contaminants. They may include separate facilities for men and women and may also include facilities for non-ambulatory persons and the disabled. They are similar in concept to decontamination rooms that are sometimes seen in emergency rooms, but are intended to serve many persons in a short period of time.

Decontamination facilities can take many forms including:

- **Permanent** - where the components are constructed as a fixed part of the hospital building or as a freestanding and separate structure.
- **Semi-permanent** - where fixed utilities are provided for the decontamination facility, but the facility itself is set up only when needed.
- **Temporary** - which are collapsible and/or portable facilities freestanding from the building and may or may not require utilities provided from the hospital building.

The decontamination facility may be permanently attached to the hospital building, sheltered under an overhang or detached. Utilities may originate from the hospital building or may be separate.

Water and electricity are normally all that is required for the operation of these facilities. Water runoff is required to be contained when practicable and disposed of safely, and should be managed in accordance with community planning policies. Communications and data systems may also be utilized which may include a PA system for broadcasting messages and instructions throughout the decontamination facility. Adequate lighting is also required, and if the decontamination facility is located inside a building, adequate ventilation is required.

Depending on the location and configuration of the decontamination facility, it may or may not be subject to OSHPD review. If OSHPD review is required, the scope of the review may be limited and will be determined on a case-by-case basis.

POLICY

1. When decontamination facilities are located in or attached to hospital buildings, they shall be reviewed by the Office of Statewide Health Planning and Development (OSHPD). The requirements for hospital buildings found in the applicable California Building Standards Code (CBSC) shall apply (refer to [OSHPD Code Application Notice 1-0](#), "Enforceable Codes").
 2. When facilities are not located in or attached to the hospital building, it is the responsibility of the local jurisdiction, which may include the local building jurisdiction and local fire authority, to review the project with respect to the location of the decontamination facility and drainage of contaminated water.
 3. For all decontamination facility projects, the local jurisdiction shall be responsible for ensuring compliance with local fire, health, zoning, environmental and other requirements.
 4. When tents are utilized for temporary decontamination facilities, they must have local fire authority approval. Refer to Appendix A, State Fire Marshal letter dated December 21, 2009.
 5. Permanent or semi-permanent decontamination facilities shall be constructed and separated from the hospital building as required in the applicable CBSC.
 6. When utilities for a decontamination facility are obtained from the hospital building, OSHPD will review the utility connections to ensure that the hospital will not incur any potential adverse impact.*
 7. When decontamination facilities are provided in mobile units, they shall be reviewed in accordance with OSHPD Policy Intent Notice 34, "Mobile Units Used for Hospital Outpatient Services."
- * A drawing package is to be submitted to OSHPD for review including site locations of utilities documented on the architectural, fire and life safety, mechanical, plumbing, and electrical drawings. Any project specific issues that may impact the hospital building must be addressed on the project drawings.

<u>Original signed</u>	<u>12/5/13</u>
Paul Coleman	Date

APPENDIX A



DEPARTMENT OF FORESTRY AND FIRE PROTECTION
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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
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