

# How To Prepare For An FMS

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# Definitions

- **CMS** – Centers for Medicare & Medicaid Services
- **DSFM** – Deputy State Fire Marshal
- **FMS** – Federal Monitoring Survey
- **LSC** – Life Safety Code, 2000 Edition
- **LSC Contract Surveyors** – Non-Federal Surveyors

# Definitions

- **POC** – Plan of Correction
- **PCR** – Post Certification Revisit
- **Safety Engineers** – Federal LSC Surveyors
- **SFMD** – MN State Fire Marshal Division
- **2567 Form** – Statement of Deficiencies Form

# Frequency of FMS's

- CMS requires that at least 5% of all Long Term Care facilities have an FMS each year.
  - In Minnesota that equals about 20 facilities.
  - To date, approximately 1/3 of long term care facilities in Minnesota have had an FMS.

# Frequency cont.

- FMS's are usually scheduled by CMS within 30 days of the SFM inspection.
  - That can vary.
- FMS's will be unannounced.
- You will be expected to be there for the entire FMS.

# The Intent of the FMS

- FMS's are a CMS validation of the inspections conducted by the State Fire Marshal Division.
- You will be expected to correct all deficiencies found by the CMS surveyor.

The CMS surveyor will normally not ask to see the SFM inspection report.

# What To Expect

- You will be expected to provide whatever is asked for on the spot.
- Have documentation in order and ready for review.
  - Searching for documentation may result in a deficiency.
- Have keys to all areas.
- Have back up personnel ready to cover for you.
  - More than 1 person must know where documentation is.

# **REMEMBER!**

- Know your building
- This is the first time, and maybe the only time the FMS surveyor has been, in your building.
- Be confident in your knowledge.



# So Be Ready To....

- Describe the building(s) including:
  - Year(s) of construction
  - Construction Types
  - Number of stories
  - Fire Separations to non-health care buildings
- Remain Calm
  - Don't be hesitant
  - Do your homework now

# Be Ready To....

- Describe/locate fire and/or smoke barrier locations.
  - Know which smoke barriers are required.
    - Fire/smoke barriers don't always follow a straight line.
  - Have current building floor plans with plainly identified barrier locations.
    - CMS has been known to incorrectly assess fire and smoke barriers.

# Be Ready To....

- Provide all required documentation.
  - Having to search for documentation may result in a deficiency.
- Make sure documentation is current and correct.
- Life Safety Code Documentation Project.
  - Available on the SFM web-site [www.fire.state.mn.us](http://www.fire.state.mn.us) ,
  - Health Care Inspection Program

# Be Ready To ....

- Know your required exits.
  - Key word is “required”.
  - Any door marked as an exit will be treated as an exit.
    - Not all doors that are labeled as exits may be required exits.
  - Any door that can be easily mistaken for an exit, but is not an exit, must be labeled as “Not An Exit”.

# Be Ready To ....

- Discuss locks on doors preventing egress.
  - Why is an area locked against egress?
  - What exit doors need to be locked in that area?
  - Know what type of lock is installed, and
  - How does it work, i.e., unlock.
    - Be ready to demonstrate the unlocking.

# Locked Door Notes

- Doors that are not required exits, or are not part of an exit path, can be locked.
- Locks on doors must fail in the open position.
  - **THIS IS AN ABSOLUTE!**
- Locks on doors must be manually reset from within the secured area or at the door.
- Make sure you test all locked doors on a regular basis (at least monthly) to assure they function properly.

# Plan of Correction

- Your POC must be presented directly to CMS for their approval.
  - This includes requesting temporary waivers (time extensions) and annual waivers.
- Date stamp when you receive the CMS 2567 at your facility
- Your contact for questions is the Safety Engineer or the Contract surveyor.
  - Insure you get their contact information before they leave
- **The State Fire Marshal Division cannot be involved in the POC.**

# PCR/Revisit/Follow Up

- The SFMD will conduct the FMS PCR.
- The SFMD cannot conduct a PCR until we receive written permission from CMS that the SFM should conduct a PCR and that they have approved your POC.

When we conduct the FMS PCR we will also be doing the PCR for our survey.